

Florida Injury Prevention Programs for Seniors (FLIPS)



Senior Fall Prevention

Professional Module



Learning Objectives



Upon completion of this program, you will be able to:

- describe the prevalence of falls
- describe the consequences of falls;
- increase awareness of fall risk factors;
- increase knowledge of intervention strategies;
- increase knowledge of community resources.

Overview of FLIPS

- **Professionals**—physical therapy, health education, nursing, practitioners, researchers, etc.
- **Focus**—fall prevention; fire safety; and poison, medication & food safety
- **Satellite groups**
- Janet Lehman—FLIPS coordinator in DOEA. Email: lehmanji@elderaffairs.org

The Facts- *Why Fall Prevention Is Important*



- 1/3 of seniors 65 years and older fall each year.
- In 1999, approximately 21,000 seniors in Florida were hospitalized due to hip fractures.
- 1/3 of nursing home admissions are due to falls.

Cost of Fall Injuries

- In 2000, direct costs for seniors = \$20.2 B
- Indirect costs: disability, productivity, quality of life, loss of independence, etc.
- Estimated costs of fall related injuries by 2002 will be \$32.4 billion



How Do We Balance?

- Vision
- Inner ear
- Proprioceptive sensing
- Strength & flexibility



Why Do Seniors Fall More Than Others?

- Traditional risk factor categories:
 - **intrinsic & extrinsic**
 - **modifiable & non-modifiable**
- New risk factor categories:
 - **age-related/biological**
 - **behavioral**
 - **environmental**
 - **community policy**



Traditional Categories

- | | |
|---|---|
| ● Intrinsic <ul style="list-style-type: none">– medical conditions– lifestyle choices– cognition | ● Modifiable <ul style="list-style-type: none">– risk factors
YOU CAN change |
| ● Extrinsic <ul style="list-style-type: none">– internal & external environment | ● Non-modifiable <ul style="list-style-type: none">– risk factors YOU CAN'T change |

New Categories

- Age-related & biological
- Behavioral & cognitive
- Environmental
- Community policy



Risk Factors— *Age-Related*

Medical Conditions

- Poor general health
- Diabetes
- Arthritis
- Osteoporosis
- Stroke
- Incontinence
- Musculoskeletal stiffness
- Weak muscles

Risk Factors— *Age-Related cont'd...*

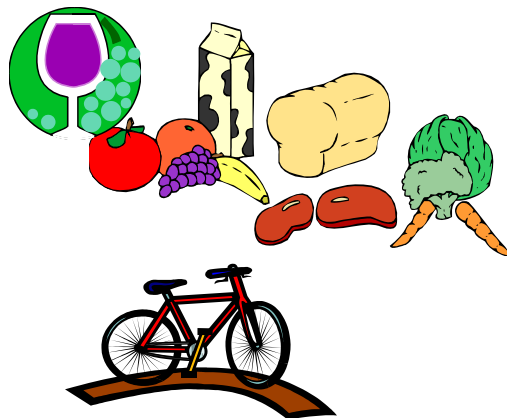


- Medication use
- Sensory perception—hearing, vision, feeling
- Balance and gait impairment
- Cognitive/mental health—memory, inattention, dementia, depression



Risk Factors—*Lifestyle & Behavior*

- Exercise
- Footwear
- Alcohol use
- Nutrition
- Hydration
- Fear of falling



Fear of Falling— *Warning Signs*

- Need to touch or hold onto things or people
- Walks very slowly
- Takes small steps
- Limited movement
- Expresses a fear of falling



Downward Cycle of Fear

- Increased fear of falling
- Moves slower
- Avoids movement
- Becomes de-conditioned
- Decreased strength & endurance
- Increases risk of falling



Cognition

- Focus & distraction
- Dementia
- Do challenging activities like chess or bridge
- Talk with your healthcare provider



Risk Factors— *Environmental:*

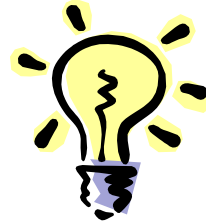
Where Do People Fall?

- 60% fall in the home
- 30% fall in public areas
- 10% fall in healthcare facilities



Risk Factors— *Environmental*

- Clutter
- Poor lighting
- Lack of handrails
- Items that are hard to reach
- Obstacles in paths

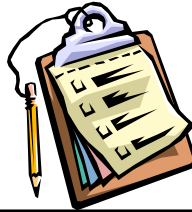


Risk Factors— *Community Policy*

- Lobby community officials to comply with safe public access laws.
- Repair cracked sidewalks in front of buildings and homes.
- Ensure hand rails and ramps are installed .
- Referral system & resource network
- FLIPS education & satellite groups

Intervention & Prevention: Assessment

- Fall history
- Medical diagnosis
- Medication review
- Living situation
- Physical activity
- Cognition/memory
- Fear of falling
- Environment

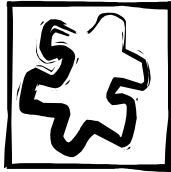


Intervention & Prevention— *Age-Related Risk Factors*

- Assessment & management of chronic conditions, vision, & hearing
- Encourage exercise & nutrition
- Osteoporosis screening
- Medication review (reduce if possible)
- Referrals for at-risk seniors
 - Physical Therapist for balance & gait, vestibular rehabilitation
 - Occupation Therapist for assistive devices

Intervention & Prevention— *Lifestyle & Behavioral Factors*

- Mental activity & focus training
- Exercise—Tai Chi classes, strength training
- Education to improve home environment



Intervention & Prevention— *Lifestyle & Behavior*

- Confidence training for fear
- Simple methods: know your limits, ask for help, stay active
- Intensive methods:
 - counseling ala Roybal Center
 - “A Matter of Balance” video
 - “Exercise: It’s Never to Late” video
 - <http://www.bu.edu/roybal/>

Intervention & Prevention—Assistive Devices

- Walkers:
 - improve balance
 - relieve or reduce weight bearing
 - provide 4-way stability
- Canes:
 - improve balance
 - provide support for one side of the body



Note: *Ensure professional fit and proper use of a cane*

Intervention & Prevention —Assistive Devices cont'd...

- Reachers
- Portable seat lift
- Special step stools



Intervention & Prevention —*Environment: Home*

- Kitchen—keep items within easy reach
- Bathroom—grab bars for toilet and bathtub
- Bedroom
 - nightlights
 - bed and nightstand at proper height



Intervention & Prevention —*Environment: Home & Yard*

- Living room
 - remove clutter, cords, throw rugs
- Porch
 - railings
 - clear pathways
- Throughout
 - clear paths
 - good lighting



Intervention & Prevention *Community: Referral System*

- Physical Therapy
- Occupational Therapy
- Dieticians
- Social Workers
- Home Health Nurse
- Community Programs
 - exercise, etc.
- FLIPS



Conclusion



- Importance of fall prevention education
- Fall risk assessment
- Identification of risk factors
- Interventions & prevention
- Healthcare providers, educators, communities, and seniors work together