Reduce the Risk

Optimize Safety

Avoid Falls

Info & checklist

“*This guide is for informational purposes only. Reducing your risk of injury from falls is one step towards improved safety.*
The Bad

- **1 out of 4** people 65 and older reported a fall.
- **20-30%** of falls lead to moderate to severe injuries such as lacerations, hip fractures, and/or head traumas.
- Falls are the leading cause of both **fatal and nonfatal** injuries for older adults.
- Every 13 seconds, an older adult is seen in an emergency department for a fall.
- Many people who fall develop a fear of falling even if they were not injured. This may lead to them to limit their activity level, which leads to reduced mobility and loss of physical fitness, and therefore leads to increased risk of falling.
- **2/3 Will fall again** within a year after a first fall.

The Good

- Falls can be avoided.
- There are a lot of **resources** to help reduce the risk of falls.
- Falls are not a normal part of aging.
- Old ≠ Weak
- Exercise can help
- A **home visit** can reduce the rate of injury from falls by 40%

Fall Reduction Guidelines

Lessen the Risk
1. Speak Up
- Talk to your health care provider to assess your risk of falling.
  - Let them know if you have leg numbness, dizziness, history of falls, or a fear of falling.
- Talk to family and friends about your fall concerns.

2. Check Medications
   (with doctor or pharmacist)
- Stop medications when possible.
  - You may need to taper off the medication
- Switch to safer alternatives.
- Reduce medications to the lowest effective dose.
- Check for psychoactive medications: anticonvulsants, antidepressants, antipsychotics, benzodiazepines, opioids
- Medications that can cause dizziness, sedation, confusion, blurred vision, or orthostatic hypotension: anticholinergics, antihistamines, medications affecting blood pressure, muscle relaxants

3. Check Vision
- Get your vision checked annually and update eyeglasses.
- Notify your healthcare provider if your vision is worsening.

4. Keep Moving
- Find an exercise program to maximize balance, flexibility, strength, and endurance.
- A good instructor will be able to modify the exercise program to match your abilities.
- Risk of falling can be reduced by performing balance exercises as little as three times a week.

5. Optimize Home Safety
- Remove tripping hazards
  - Remove throw rugs, boxes, piles of papers, cords
  - Nail down rugs/carpeting
  - Keep walkways clear
  - Don’t store items on stairs
  - Clean up spills right away
- Add safety devices
  - Add handrails to both sides of stairs
  - Buy a raised toilet seat
  - Add grab bars near the toilet and in the shower.
  - Get grabbers to help you reach things and avoid climbing.
- Improve lighting
  - Add nightlights to halls, bedrooms, bathrooms
  - Put light switches at the top and bottom of stairs.
  - Be sure each room and flight of stairs has proper lighting.
  - Use shades or curtains to cut glare from windows.
  - Put flashlights in each room. Replace burned-out bulbs.
  - Get glowing light switches for room entrances.
- Fix riskier rooms first: Start with the bathroom or a room you spend lots of time in.
Patient safety is often the main concern when moving patients from bed. But remember not to lift at the expense of your own back. This transfer often requires the patient’s help, so clear communication is essential. If the patient can’t help much, you’ll need two people or a full body sling lift.

Remember:
- When patients are weak, brace your knees against theirs to keep their legs from buckling.
- Transfer toward patient’s stronger side whenever possible.
- If a patient had a recent hip or knee replacement, transfer towards the non-surgical side.

### Step 1. Sit the patient up
- Position and lock the wheelchair close to the bed. Remove the armrest nearest to the bed, and swing away both leg rests.

- Help the patient turn onto his or her side, facing the wheelchair.

- Put an arm under the patient’s neck with your hand supporting the shoulder blade; put your other hand under the knees.

- Swing the patient’s legs over the edge of the bed, helping the patient to sit up.

### Step 2. Stand the patient up
- Have the patient scoot to the edge of the bed.

- Assist the patient in putting on skid proof socks or shoes. Socks could also be put on when the patient is lying in bed.

- Put your arms around the patient’s chest, and clasp your hands behind his or her back. Or, you may also use a transfer belt to provide a firm handhold.

- Support the leg farthest from the wheelchair by bracing your knees against theirs, bend your knees, lean back, shift your weight, and lift.

### Step 3. Pivot toward chair
- Have the patient pivot toward the chair, as you continue to clasp your hands around the patient. Always transfer toward the person’s stronger side.

- A helper can support the wheelchair or patient from behind.

### Step 4. Sit the patient down
- As the patient bends toward you, bend your knees and lower the patient into the back of the wheelchair.

- A helper may position the patient’s buttocks and support the chair.

- Reposition the foot rests and the patient’s feet.

Using a transfer belt can help make moving the patients safer.
### Check Your Risk for Falling

**Circle “Yes” or “No” for each statement below.**

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 pts.</td>
<td>Yes</td>
<td>I have fallen in the past year.</td>
</tr>
<tr>
<td>2 pts.</td>
<td>Yes</td>
<td>I use or have been advised to use a cane or walker to get around safely.</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>Sometimes I feel unsteady when I am walking.</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>I steady myself by holding onto furniture when walking at home.</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>I am worried about falling.</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>I need to push my hands to stand up from a chair.</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>I have some trouble stepping up onto a curb</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>I often have to rush to the toilet.</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>I have lost some feeling in my feet.</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>I take medicine that sometimes makes me feel light-headed or more tired than usual.</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>I take medicine to help me sleep or improved my mood.</td>
</tr>
<tr>
<td>1 pt.</td>
<td>Yes</td>
<td>I often feel sad or depressed.</td>
</tr>
</tbody>
</table>

Add up the total number of points for each “Yes” answer. **If you score 4 points or more, you may be at risk for falling!**

Discuss this with your doctor.

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This checklist was developed by the Greater Los Angeles VA Geriatric Research Education Clinical Center and affiliates and is a validated fall risk self-assessment tool (Rubenstein et al. J Safety Res; 2011: 42(6)493-499).