### Pine Tree Home Health

### October In-Service 2020



## **LEARNING OBJECTIVES:**

Role of the Aide in all Prevention

Safety tips in the Client's Home

Home Care Clients at risk of falls

Research has identified many conditions that contribute to falling. These are called **risk factors.** Many risk factors can be changed or modified to help prevent falls. They include;

- Lower body weakness
- Vitamin D deficiency
- Difficulties with walking and balance
- Use of medicines, such as tranquilizers, sedatives, or antidepressants. Even some over-thecounter medicines can affect balance and how steady someone is on their feet.
- Vision problems
- Foot pain or poor footwear
- Home hazards or dangers such as
  - Broken or uneven steps
  - <u>Throw rugs or clutter that can be</u> <u>tripped over,</u> and
  - No handrails along stairs or in the bathroom.

Most falls are caused by a combination of risk factors. The more risk factors a person has, the greater their chances of falling.

### FALLS PREVENTION

Home Care Clients at Risk of Falls include those who:

- o Have a history of a fall in the past year. Falling once doubles the changes of falling again.
- o Have a history of neurological problems (stoke, Alzheimer's disease, Parkinson's) or vestibular disease (vertigo, dizziness, etc).
- o Have a history of degenerative joint disease of the knees &/ or hips.
- o Are ages 65 or older
- Client's on certain medications such as sedatives or other medications.

# Why is a fall in older adults so SERIOUS?

One out of five falls causes a serious injury such a broken bones or a head injury.

Each year, 2.5 million older people are treated in emergency department for fall injuries.

Over 700,000 patients a year are hospitalized because if a fall injury, most often because of a head injury or hip fracture.

Each year at least at least 250,000 older people are hospitalized for hip fractures.

More than 95% of hip fractures are caused by falling, usually by falling sideways.

Falls are the most common cause of traumatic brain injuries (TBI).

Adjusted for inflation, the direct medical costs for fall injuries are \$34 billion annually. Hospital costs account for two-thirds of the total.

The risk of falling increases after an elderly individual comes home from the hospital.

Did you know? Fall prevention is an important factor in decreasing avoidable hospitalizations, placement in facility based care (such as Nursing Homes) and improving patient safety.

In Home Aide Checklist (follow the care plan for your client)				
		Report all falls (even unwitnessed) to your supervisor  The client may report a fall to your but be hesitant to tell the nurse or therapist.  Report any changes in balance or gait that you observe.  Report any symptom that could lead to falls (e.g.: "I can't see as well as I used to.")		
		Know how many falls occur each month at your agency.		
	☐ Report any environmental problems that could cause falls to your supervisor			
	☐ Report clients not following fall prevention measures.			
		Reinforce all fall prevention interventions.		
		Ask your supervisor if you have questions about these.		
		Reinforce the need for the client to rise slowly to avoid getting dizzy and falling.		
		Know how to assist a client after a fall.		
		Discuss this with your supervisor and know your agency policies and procedures		
		Report any concerns with defective mobility equipment (walker, cane, wheelchair)		
		Remind clients that high heels, floppy slippers and shoes with slick soles can make a person slip, stumble and fall. So can walking in stocking feet. Reinforce the need to wear properly fitting, sturdy shoes with <i>nonskid soles</i> and to watch out for highly waxed floors.		
		Remind the client to use their walker and cane correctly.		

concerned and safety and to be more careful about moving around. However, sometimes fear of falling makes elders stop doing things that they are still capable of doing.

When they stop doing their usually physical or social

Being afraid of falling is understandable, especially after a person has had a fall.

It's good for clients to be

When they stop doing their usually physical or social activities, they risk becoming physically weaker and then more fearful.

This downward cycle results in them increasing the risk of falling-be sure to talk to your supervisor if you notice this with your client's.

Older adults can ask their doctors or pharmacist to review their medicines -both prescription and over-the counter-to reduce side effects and interactions.

### BE SURE TO KNOW WHAT IS ON THE CARE PLAN:

#### Precaution

- Hip precautions
- Weight bearing precautions

Other appliances- braces, immobilizers

Observe improvement or decline

Observe safety issues

Hear responses from family members

Recognize the need for assistance with transfers and gait

How much assistance they need: when and where

-Use a gait aide: steps, ramps, uneven surfaces.



Poor vision can increase a person's risk of falling; encourage your clients to have regular eye exams.

Encourage your clients to get up slowly after they sit or lie down.

Encourage your clients to wear shows both inside and outside the house and avoid going barefoot or wearing slippers.

Report to your supervisor if your client has a pet that poses a trip/fall hazard to your client (i.e. small dog)

# Bath and Shower Safety:

- Always place rubber or nonskid mat in tub before client enters
- Be sure bathroom floor is dry to help prevent slips and falls.
- Do not add oil to bathtub water, apply oil to client's skin after the bath if part of their care plan.
- Be sure bath water is the proper temperature, adjust water pressure before giving a shower.
- Stay near or in the bathroom while client is bathing per care plan instructions.
- Use good body mechanics
- Be sure bath or shower chairs have rubber suction cups at ends of legs: these will steady the chair and prevent it from sliding.
- Have client use grab bars, if present; do not permit client to use towel bar or tile soap dish as an aid in moving.



Six categories of common risk factors for falling are:

- \*\* Home Safety
- \*\* Physical mobility
- \*\* Medications Management
- \*\* Transitioning home from hospital
- \*\* Fear of falling
- \*\* Safety factors outside the home.
  - When someone returns home from the hospital, their risk of falling increases in all three areas mentioned already- physical mobility, managing medications, and home safety. The aide needs to pay special attention to these factors to prevent falls after hospitalization.
  - ➤ Risk factors for falling outside the home include vision factorssuch as changes in the light from indoors to outdoors and sun glare; steps, curbs, and irregular pavement on sidewalks and in streets; elevators and escalators; floors that become slippery when wet. The aide needs to be aware of all these risk factors and prepare the client for these challenges; in order to keep them both safe when going outdoors.
  - Rushing to the bathroom, especially at night, increases the chance of falling. Observe if your client has to rush to the bathroom and talk with your supervisor as this is a risk factor for falling.

Observe, Record, and Report (ORR) is an important part of the aide's job and is an important tool for preventing falls and/or reducing injury from falls.

- ☐ Observe: aide's are the "eyes and ears: of the care team. Small changes that you may notice about the client could reduce the client's risk of falling- or even save his or her life!
- Record: In addition to recording what they do, aides note what they
  observe while doing those tasks and while spending time with the client.
   Be sure to know your agency policy regarding how to record your
  observations.
- Report: aides share their observations and notes with the RN and other members of the client care team on a regular basis. This helps the care team to know how the client's condition has changed. In terms of fall prevention, sometimes aides may notice changes that make them feel concerned that the client may be more likely to have a fall. In those cases, the appropriate person needs to be contacted immediately. Be sure to know your agency policy on who to report to as well as what and how to report.

FALL PREVENTION IS IMPOTANT! FALL ARE THE MAIN REASON WHY OLDER ADULTS LOSE THEIR INDEPENDENCE.

### Fall Prevention - Post Test

Circle True or False

1. A Home Care client who has a history of falls is not at risk for falling again.

		True	False
2.	Poor vi	ision can increa	ase a person's risk for falling.
		True	False
3.	A Hom	e Care client's True	environment does not have anything to do with a risk of falls. False
4.	Proper	lighting in a cl	ient's home is an important factor in fall prevention. False
5.	Most h	nip fractures an True	nong older adults are caused by falls. False
6.	The ris	k of falling incr True	eases after an elderly individual comes home from the hospital. False
7.	One ou	ut of three peo True	ple 65 and older fall each year. False
8.		adults with a pl it a physical dis True	nysical disability are at greater risk of falling than older adults ability.  False
9.	Rushin	g to the bathro True	oom, especially at night, increases the change of falling. False
10.	Most f	alls are caused True	by a single risk factor. False