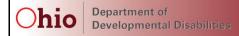
#### **Preventing Falls, Enhancing Safety**

#### **Falls Prevention Webinar Series** Webinar #1

February 27, 2015



#### **Using Go to Webinar**

Once you have joined the webinar, you will see the Attendee Control Panel and Grab Tab. The Control Panel contains panes that can be expanded or collapsed by clicking the Plus icon or Minus icon on the left side of each pane. Note: Vewing the Attendee List, raising your hand and asking questions are only available if the organizer has enabled these features.

Attendee List - Displays all the participants in-session (if enabled by the organizer)

the organizer)

Grab Tab – Allows you to open/close the Control Panel,
mute/unmute your audio (if the organizer has enabled this feature)
and raise your hand

Audio pane – Displays audio format. Click Settings to select Mic & Speakers devices Speakers devices Questions pane—Allows attendees to submit questions and review answers (if enabled by the organizer). Broadcast messages from the organizer will also appear here Webinar details—Provides a quick reference, and the Webinar ID can be given to someone to join through www.joinwebinar.com

Thank you for your participation!

#### Housekeeping

- Proof of Continuing Professional Development Units will be emailed for those who actively participated in the Webinar within 2 week of
- Follow up by Emailor Phone to MUI Office at 614-995-3810.

Thank you for your participation!

#### Fall Prevention is good for all!

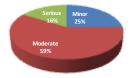
- We can reduce the number of fall related injuries and deaths of those we serve.
- · We can make our organizations safer for all employees.
- Our family and friends will benefit from fall prevention.
- Falls are the number one cause of injury, hospital visits due to trauma, and death from an injury among people age 65 and older
- Each year, people we serve die from falls. Some could have been prevented.
- Even more people are injured, miss out on their activities, and become isolated.

#### **Fall Related Significant Injuries**

Year	Falls Reported as Significant Injuries	Total Significant Injuries Reported	% Falls Related Injuries
2010	752	1763	45%
2011	733	1638	45%
2012	761	1635	47%
2013	764	1755	44%
2014	771	1691	46%

Significant injury means an injury of known or unknown cause that is not considered abuse or neglect and that results in concussion, broken bone, dislocation, second or third degree burns or that requires immobilization, casting, or five or more sutures. Significant injuries shall be designated in the inddent tracking system as either known or unknown cause.

# Percentage/Type of Injuries Due to Falls 2014



Injuries are defined as the following:

Minor – Did not affect day-to-day activities, e.g., broken toe, fingers, sutures, splint, wrap.

Moderate – Did affect day-to-day activities, e.g., missed work, crutches, casts, adaptive equipment, bed rest.

Serious- Injury required hospitalization, off weeks from work.

None - no injury.

#### **Fall Related Hospitalizations**

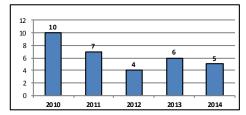
Did you know that in 2014...

36 Ohioans with Developmental Disabilities were hospitalized due to fall-related injuries.



Think about the added challenges for those we serve when they are hospitalized... communication, advocacy, coordination, needed supports, isolation, dietary needs, personal care needs and fear

#### Fall Related Deaths- 5 Year Review



While there has been a positive trend in the reduction of fall-related deaths of those we serve, we can never stop being vigilant in our efforts.

One fall-related death is too many



#### **Facts about Falls**

- 1 out of 3 persons aged 65 years and older will fall each year
- Falls are the leading cause of Fatal and Non-Fatal injuries for people over 65
- Falls are the 2<sup>nd</sup> cause of Accidental deaths world wide

## 3 Main Factors in Falling

- Medical Conditions
- Lifestyle
- Environmental Factors

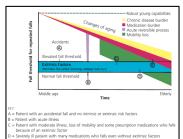
## Special Considerations for Individuals with DD

- Higher risk for falling at earlier age
- Degenerative changes occur earlier and last longer
- Prior history of falling more likely to recur
- Weakness-Spastic or Cerebral Palsy
- · Gait balance deficits
- Also common in individuals with DD, stroke, diabetes



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# Special Considerations for Individuals with DD



Individuals experience same type of events earlier in life.

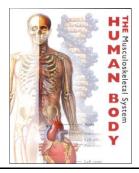
For example, we begin to see falling in the third or fourth decade for someone with DD where other individuals don't begin falling until the seventh decade of their life.

American Family Physician 1997;56:1815-22,1823

## Special Considerations for Individuals with DD

- Urinary and bowel incontinence
- · Rush to bathroom
- · Sleep-walking at night
- Cognitive inability to think clearly about possible outcomes and possibly make poor judgments leading to falls
- Poor judgment safe versus hazardous
- Dizziness

# Medical Conditions Musculoskeletal Conditions



A lack of safe gait can be caused by different musculoskeletal conditions

## Medical Conditions Musculoskeletal System

- Arthritis
   Hip, knee, ankles, feet and spine
- Muscle Weakness
   Lack of conditioning, MS and
   Myasthenia Gravis
- Post-Surgical weak, pain, hip replacement

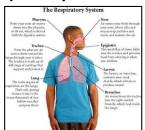
## Medical Conditions Heart Related Disorders

- Congestive Heart Failure (CHF)
- Cardiomyopathy
- Blood Pressure Drops when standing

Postural Hypotension

# 4//-

# Medical Conditions Respiratory Conditions



Chronic Obstructive Pulmonary Disease (COPD)

# Medical Conditions Neurologic Disorders

- Vertigo/balance-inner ear
- Stroke
- Seizure disorders
- Sensory imbalance
- Peripheral Neuropathy (Lack of Feeling)
- Confusion

# Medical Conditions Neurologic Disorders

- Parkinson's Disease
- Tremors, small shuffling gait, trouble turning
- Slower reflexes
- Alzheimer's Disease -cognitive impairment



## Medical Conditions Endocrine Conditions

- Diabetes
- Autosomal dysfunction



# Medical Conditions Fluids and Electrolytes



- Dehydration
- Adrenal
- Thyroid
- Diabetes
- Osteoporosis

# Medical Conditions Vision/Special Senses



- Difficulty judging distance
- Macular degeneration
- Cataracts, Glaucoma, impaired vision
- Eye disease
- Wearing multifocal glasses

# Medical Conditions Hematological Conditions

Anemia

Anemia is a condition that develops when your blood lacks enough healthy red blood cells or hemoglobin



Do you know the symptoms of anemia?

## Medical Conditions Renal Conditions



- Renal
- Dialysis
- Generalized weakness

# Physical Conditions Medications

- Tricyclic anti-depressant, others
- · Atypical antipsychotic
- Anticholinergic such as Benadryl or Cogentin
- Person is on 4 or more medications is
- Sedatives-such as Benzodiazepine and others



I HATE FALLINI	

I HATEFALLING: A Mnemonic for Key Physical Findings in the Elderly Patient Who Falls or Nearly Falls

- Inflammation of joints (or joint deformity)
- H Hypotension (orthostatic blood pressure changes)
- A Auditory and visual abnormalities
- Tremor (Parkinson's disease or other causes of tremor)
- E Equilibrium (balance) problem
- F Foot problems
- A Arrhythmia, heart block or valvular disease
- L Leg-length discrepancy
- L Lack of conditioning (generalized weakness)
- Illness
- N Nutrition (poor; weight loss)
- G Gait disturbance

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#### **Lifestyle Factors**

- Sedentary life
- Lack of exercise
- Decondition
- Person is taking 4> or more medications



#### **Environmental Factors**

- Loose carpet
- Wires
- Clutter
- Dark stairways and corridors

Did you know that most falls occur at home...

#### **Environmental Factors**



- Incorrect use of adaptive equipment like canes, walkers, Hoyer Lifts
- Ill fitting shoes
- Slippery surfaces; water on the floor, ice outside

Home Safety Checklist				
All living spaces	Bathrooms			
Remove throw rugs.	Install grab bars in the bathtub or shower and by the toilet.			
Secure carpet edges.  Remove low furniture and objects on	Use rubber mats in the bathtub or shower.			
he floor.  Reduce clutter,  Remove cords and wires on the floor.	Take up floor mats when the bathtub or			
	shower is not in use. Install a raised toilet seat.			
	Install a raised tollet seat.			
Check lighting for adequate illumination at night (especially in the pathway to the	Outdoors			
bathroom).	Repair cracked sidewalks.			
Secure carpet or treads on stairs.	Install handrails on stairs and steps.			
Install handrails on staircases.	Trim shrubbery along the pathway to the home.			
Eliminate chairs that are too low to sit in and get out of easily.	Install adequate lighting by doorways			
Avoid floor wax (or use nonskid wax).	and along walkways leading to doors.			
Ensure that the telephone can be reached from the floor.				

#### **Outcomes from Falls**

- Lacerations
- Fractures-spine, hip, leg, hand, ankle and pelvis
- Traumatic Brain Injury (TBI) —Falls are the leading cause
- Fear of falling which limits activities
- Loss of independence
- Isolation
- · Loss of wages from missing work
- Hospitalizations
- Death

#### **Falls Prevention Overview**

- · Organized group exercise
- Medication review
- Eye check up and treatment
- A follow up by Occupational Therapist (OT) to do a walkthrough of the home to identify risks
- Reduce home hazards by installing grab bars, tubs, railing on stairways and adequate lighting

Falls can be prevented!

#### **Falls Evaluation**

- Age
- Medical conditions
- Diagnosis- Seizures,
   Dementia, Neurological Impairment
- Medications
- Alcohol and drug use
- Surgical history
- · Assistive devices
- Current functional ability
- Living environment



#### **Upcoming Falls Prevention Webinars**

Part 2 on May 12, 2015 1:00 PM-2:00 PM

Part 3 on Jul 24, 2015 10:00 AM-11:00 AM

Part 4 on Oct 15, 2015 1:00 PM-2:00 PM

Please join us on May 12, 2015. Our Webinar presenters will include:

Anne Grossman, MPH Injury Prevention Coordinator Grant Medical Center Tia L. Gulley, MA
Program Manager – STEADY
U/A Matter of Balance
Elder Connections Division
Ohio Department of Aging

## Thank you for participating!



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