



## **Preventing Falls... One Step at a Time**

***Nearly half of all Ohio nursing home residents fall at least once during their stay. Accidents, falls and improper handling are among the top eight complaints to Long-term Care Ombudsman. Ninety percent of these complaints are in nursing homes.***

According to the CDC, the most common causes of nursing home falls are:

- Muscle weakness and walking or gait problems account for about 24 percent of the falls in nursing homes.
- Environmental hazards (wet floors, poor lighting, incorrect bed height, and improperly fitted or maintained wheelchairs) cause 16 to 27 percent of falls among residents.
- Medications, particularly sedatives and anti-anxiety drugs, can increase the risk of falls and fall-related injuries, especially during the three days following medication changes.
- Other causes of falls include difficulty in moving from one place to another (for example, from the bed to a chair), poor foot care, poorly fitting shoes, and improper or incorrect use of walking aids.

## **Creating Falls-free Facilities**

Person-centered care is the cornerstone of Ohio's system of long-term services and supports. Ohioans deserve to receive the care they need in home-like settings of their choosing. They also have the right to be as free from accidental injury as possible, and this starts by identifying and eliminating falls risks throughout nursing homes and residential care facilities. Falls prevention in nursing homes requires an integrated approach from assessment and care planning through the duration of a resident's stay. The CDC recommends a variety of falls interventions, including:

- Assess patients after a fall to identify and address risk factors and treat the underlying medical conditions.
- Educate staff about fall risk factors and prevention strategies.
- Make changes in the nursing home environment to make it easier for residents to move around safely.

### **Resident Assessment**

Residents with high risks for falls include those who have poor vision, disturbed gait, muscle weakness, cardiovascular disease, incontinence and a history of falls. When new residents are admitted, assess them for risk factors, orient them to their environment and observe them closely for the first few weeks to determine if further prevention planning is needed. When developing care plans for at-risk residents, include specific measures to help prevent falls, including:

- Place at-risk residents in rooms near the nurses' station for easier observation and more timely reaction.
- Teach residents how to call for help if they have fallen, almost fell or feel like they might fall
- Actively encourage residents to wear prescription eyeglasses.
- Teach residents how to properly transition from bed to chair to toilet using stable furniture for support.
- Promote exercise to improve strength, balance and coordination.

- Assure that residents use canes, walkers and wheelchairs only when prescribed and that these aids are properly fitted, in good repair and used correctly.
- Monitor the medications your residents take, especially sedatives and tranquilizers, and work with the resident's physician to discontinue any unnecessary medications.

Note any changes in the residents' physical and mental status, and adjust their care plan, particularly their falls prevention strategies, immediately.

## **Staff Education**

Keep falls prevention on the minds of your entire staff through ongoing education programs. Staff who are sensitive to falls hazards will play a part in noticing, reporting and eliminating them. Engage staff in all departments to develop strategies for falls prevention and monitoring at-risk residents. Often, front-line staff can be your best resource for developing practical interventions for each resident.

- Post a list at each nurses' station of all residents identified as at-risk for falls, along with educational and instructional resources.
- Educate staff on proper lifting techniques and stress that at least two staff be present when lifting a resident, even when using lift aids.
- Stress the importance of following all instructions on lift assistance devices, including the proper use of safety straps.
- Make gait belts available and encourage their use, especially when assisting a resident in cramped spaces such as the toilet or shower.
- Teach staff to encourage residents to use straps when utilizing a shower chair.

Most importantly, staff should know what to do if they see a resident starting to fall. When staff know proper safety techniques, they minimize the risk of causing injury to themselves or residents during a fall. Tips for safely assisting a falling resident include:

- Stabilize yourself by spreading your feet apart to establish a wide base of support.
- Keep your back straight and bring the resident as close to your body as possible.
- Wrap your arms around the resident's waist or under the resident's arms. If the resident is wearing a gait belt, grab it.
- Gently lower the resident to the floor, allowing him or her to slide along your leg. As the resident slides, lower your body by bending at the hips and knees
- Protect the resident's head during the fall.

## **Environment**

Continuously assess your facility for environmental hazards that could lead to slips, trips and falls for staff and residents. When a hazard is spotted, take immediate action to remove it or restrict access to that area until the risk is minimized.

- Keep floors free of litter and clutter, and clean spills immediately.
- Assess the lighting in all resident areas to ensure that it is bright enough and positioned in a way that does not throw shadows or glare onto walking surfaces.
- Maintain beds at their lowest position and keep bed wheels locked at all times. Use low-profile beds as appropriate.

**For more tips and resources to prevent falls, visit:**

**[www.steadyu.ohio.gov](http://www.steadyu.ohio.gov)**