

# Falls Prevention Month



1 OUT OF 3 ALBERTANS OVER 65



1 OUT OF 2 ALBERTANS OVER 80

WILL FALL  
AT LEAST  
**ONCE**  
A YEAR

## Preventing Falls and Fall Related Injuries: Why is this important in my practice?

Falling — it can happen to anyone! Think back to a time when you have fallen. You may have tripped over something that was left on the floor, lost your footing on the stairs or slipped on ice. For some people we provide care for, the risk of falling is even greater due to factors such as underlying medical conditions, isolated or hazardous living environments, limited mobility and advanced age. Falls are the leading cause of injury amongst seniors.

The impact from falls can be devastating on our clients and their families. A fall may cause life-limiting effects, including [traumatic brain injury](#) and broken bones. In fact, 95 per cent of all hip and wrist fractures in seniors are a direct result of falling<sup>1</sup>. A loss of independence, permanent disability and even death are potential outcomes from a fall.

With or without an injury, a client who experiences a fall may develop a fear of falling. This can lead to the client

restricting their activity, which can increase their risk for another fall.

Falls also significantly impact the health care system. Each day in Alberta there are approximately:

- 79 fall-related emergency department visits<sup>2</sup>;
- 27 fall-related hospital admissions<sup>2</sup>;

Combined, this costs Albertans over \$288 million each year<sup>2</sup>.

Fortunately, there are strategies to help your clients manage and reduce their risk.

We all have a role to play to help prevent a fall before it happens or minimize harm when it does. Falls risk management and prevention is everyone's responsibility.

### Truth or Myth?

**Falling is a normal part of aging**

*Myth:* Although the risk of falling does increase as people age, falling is not a normal part of getting older. There are steps that can be taken to reduce a person's risk of falling at any age.

**95% OF ALL  
HIP FRACTURES**

&

**40% OF ALL  
NURSING HOME  
ADMISSIONS ARE A  
DIRECT RESULT OF  
FALLING**



<sup>1</sup> Public Health Agency of Canada. Seniors' Falls in Canada: Second Report. Ottawa: Public Health Agency of Canada; 2014

<sup>2</sup> 2014/2015 Alberta Health, Analytics and Performance Reporting Branch. Data received June 2016.

# When you can't prevent a fall, manage the risks

An article from the New York Times (2013) stated, "How is it we can put a man on the moon, but we can't prevent older people from falling?"

Falls affect everyone – the individual, their families, and healthcare providers.

Some [universal precautions](#) for older adults to prevent falls include:

- Removing clutter from the floor, walkways and stairs,
- Making sure there is enough lighting inside and outside,
- Fixing loose or broken handrails,
- Using non-slip mats by the tub and shower,

Sometimes falls still happen despite all of our preparation. No matter the safety precautions we

take, there are certain things that cannot be changed or controlled – we cannot get rid of dementia and frailty, and we want to encourage an individual's free will and to continue to be active.

We might not be able to prevent all falls from occurring, but we can help to minimize harm and reduce the impact a fall has on an individual with risk

management strategies. Some strategies to suggest might include installing grab bars in the shower and by the toilet and encouraging clients to wear proper footwear. Talk to your client about using a cane or walker and explore the option of hip protectors to reduce their risk of hip fractures.



## If a fall does occur, it is important to regroup with your care team and ask why?

### 5 WHYS

The "5 WHY'S" is a strategy whereby the question "WHY?" is asked, and for every response, another "WHY?" question follows. This is repeated five times or more, as long as answers continue to help identify the root cause of the fall. This will help to guide the intervention and prevent the fall from happening again. Try using this strategy with your team next time your client experiences a fall.

## Truth or Myth?

### Most falls are preventable

*Truth:* Most falls can be prevented...but not all. If you can't stop the fall, then try to reduce the harm from the fall.

## How do I know who's at risk?

It is important to screen to assess a person's risk for a fall. This can determine the need to complete a more detailed falls assessment and can identify what type of interventions are required.

Routine considerations to think about when you are with your client might include:

- Have they fallen in the past?
- Is your client or their family worried about them falling?
- When your client stands, walks or turns around, are they unstable?

Screening for falls risk involves visually observing a client and communicating what you see to your colleagues, the client and their family/caregiver. It is the responsibility of all health care providers (regulated and unregulated) to observe clients who may be at risk for falls and communicate that risk.

In **Supportive Living and Long Term Care** settings, screening should be completed at initial intake, with any change in the client's status, during reassessment or after a transition to a different level of care. A formal, validated screening tool is completed by a trained health care professional and then documented. Make sure you and your team members know what tool you use in your area.

In **public health, outpatient and community** settings, you can encourage healthy, community-dwelling older adults to assess their own falls risks. One tool that is available to start this conversation is the [Finding Balance Fall Risk Self-Assessment Checklist](#). The checklist is a valuable tool that helps healthcare providers initiate the conversation. Have your client answer the thirteen questions. If their answers score more than 4 points, they may be at risk of falling.

## Are you at risk of falling?

Circle YES or NO for each statement, then tally your score below.

Have you fallen in the last 6 months?	YES	2	NO	0
Do you use, or have you been advised to use, a cane or walker to get around safely?	YES	2	NO	0
Do you sometimes feel unsteady when you are walking?	YES	1	NO	0
Do you have to steady yourself by holding onto furniture when walking at home?	YES	1	NO	0
Do you worry about falling?	YES	1	NO	0
Do you need to push yourself up with your hands to stand up from a chair?	YES	1	NO	0
Do you have trouble stepping up onto a curb?	YES	1	NO	0
Do you often have to rush to the toilet?	YES	1	NO	0
Have you lost any feeling in your feet?	YES	1	NO	0
Do you take medication to help you sleep or improve your mood?	YES	1	NO	0
Do you take medication that sometimes makes you feel lightheaded or more tired than usual?	YES	1	NO	0
Do you often feel sad or depressed?	YES	1	NO	0
Do you have difficulty avoiding hazards in your path because you don't see well?	YES	1	NO	0

Add up the number of points for each YES answer. If you scored 4 points or more, you may be at risk of falling.

TOTAL SCORE:

**Talk to your healthcare provider or doctor for more information.**

(Finding Balance Fall Risk Self-Assessment Checklist, 2017)

## Truth or Myth?

**Encouraging older adults to stay at home will decrease their risk of falling**

*Myth:* The home is a common place for older adults to fall. A person's home environment may have many hazards, which should be modified to reduce risks. Staying at home may also contribute to physical inactivity and social isolation. With proper support, older adults should be encouraged to get out into their communities

# Finding Balance Campaign

## Stay Independent Prevent Falls

November is recognized each year across Canada as Falls Prevention Month – shining a “*Spotlight*” on falls – the leading cause of injury among older adults. This is an avenue to raise public awareness about falls and to bring all members of the community together in the quest to reduce the frequency and severity of fall-related injuries.

The Injury Prevention Centre runs their *Finding Balance* Campaign each November to provide real life strategies that older adults can use to reduce their risk of falls and to

maintain a healthy and active lifestyle. For the 10<sup>th</sup> consecutive year, *Finding Balance* has led the way during Falls Prevention Month, creating a theme, key messages, and resources that health providers can use to educate their clients.

The campaign will kick off with “Launch Week”, from November 1-7 and will feature a different key message each week:

- **Keep Active** Week (November 8-14)
- **Check Your Vision** Week (November 15-21)
- **Review Your Medications** Week (November 22-28)

As health practitioners within Alberta Health Services, we can make this campaign successful by sharing the key messages with the clients and communities we work with.

We can also use Falls Prevention Month as an opportunity to integrate falls prevention messaging and activities into the work we do throughout the year.



Check out [Finding Balance](#) for more resources or contact [ipc@ualberta.ca](mailto:ipc@ualberta.ca)

## Keep Active

Use it or lose it! There are many benefits of physical activity that contribute to overall health and reduce risk factors for falling. Exercise can contribute to increased strength, balance, endurance and flexibility, all which can reduce the likelihood that a person will fall. Older adults who are strong and more flexible are also less likely to experience an injury in the event of a fall, and have a better chance of recovering.

Encourage the older adults that you work with to participate in regular physical activity. Keep in mind, physical activity needs to consider each individual's ability and preferences.



Keep active  
to improve your  
strength and balance.

## Visit an Eye Doctor

As people age, they may experience changes in their eyesight that increases their risk of falling. The eyes may take more time to adjust to changes in lighting and it may be harder to perceive different depths, distances or objects, especially at night. Eye conditions such as cataracts and glaucoma can also reduce vision and contribute to falls risks.

Encourage the older adults that you work with to get a comprehensive eye exam at least once a year to address any changes in their vision. Alberta Health Care covers the cost of eye exams for adults aged 65 and older – a good reminder for those who may be concerned about finances.



Visit an eye doctor  
for an eye exam  
every year.



Review your medications with a doctor or pharmacist every year.

## Review Medications

Medications come in many forms, and include prescriptions, over-the-counter pills, vitamins, and herbal supplements. As people get older it is possible that they will be taking one or more medications to manage various conditions. Be aware that some medications, especially when used in combination, may increase the risk of falls. In particular, watch for those that cause a drop in blood pressure, impact mood, improve sleep, or fight cold and flu symptoms.

Encourage the older adults that you work with to ask their doctor or pharmacist to review all of their medications at least once a year to ensure that the doses are correct. Discuss possible interactions and side effects.

# Alberta Falls Prevention Initiatives: Health Promotion / Public Health

## Community Building in Flagstaff County

Flagstaff County took action to start the planning and delivery of community conversations about falls with a strong focus on prevention. The community partners and health care professionals included Flagstaff Community Adult Learning, Allied Health, the Healthy Living Centre, Pharmacists, an Optometrist and Community Nutrition. Workshops were delivered in an interactive and informational setting and in alignment with the 2017 Alberta Finding Balance Campaign.

A person's risk of falling increases as the number of risks factors accumulate, so the main purpose of these discussions was to provide important information

to older adults targeting these risks and day-to-day behavior change tips. The presentations focused on exercise, home hazards, safe footwear, vision, medication management, home adaptations and mastering safe overall mobility. Health Promotion staff gave demonstrations on how to make a healthy smoothie and put together a comical skit to show the steps to get up from a fall which generated humour and laughter for all.

A successful model for community dwelling older adults involves multiple organizations working together to provide relevant and user-friendly information about resources, strategies and community services available to maintain independence. The team

is looking forward to working in new communities for Falls Prevention month throughout November and seeking opportunities and partnerships to ensure falls prevention stays on the radar throughout the year.



*Deanna Trzeciakowski (Kinesiologist) presenting on exercise*

## Move 'n Mingle Calgary Zone

Move 'n Mingle is a Calgary-based fall prevention program that combines exercise, education and encourages socialization. The program is for those 65 and over who are medically stable and have difficulty accessing mainstream exercise programs. Suitable individuals are those at moderate risk for falling (i.e. due to bone or joint problems, mobility issues, compromised balance, etc.), and who are struggling to maintain their independence.

Move 'n Mingle is a 45 minute group exercise class led by Older Adult Certified fitness instructors with additional fall

prevention training. The classes focus on balance, posture and core exercises for fall prevention; range of motion, flexibility and endurance exercises, all which improve an individual's ability to perform day to day activities.

Participants must be able to attend class twice a week, be able to stand intermittently for 20 minutes, safely get out of a chair with minimal use of hands, move around the room without assistance, and be cognitively aware of what is safe for them.

The Move 'n Mingle program is ongoing. Participants who register will continue to attend the program on a regular basis, which supports the importance of regular physical activity as a part of any routine.

The success and sustainability

of the Move 'n Mingle program is a result of the partnership between Alberta Health Services, the City of Calgary and the many community sites and facilities that welcome this program and the participants. Currently there are 21 classes with an average of 350 people enrolled each month.

**"I had lots of falls before starting classes, and none since."  
– Participant**

**"My balance is much better, my posture has improved, I am more aware of my surroundings and of not rushing. It has made a big difference." – Participant**

**"I like the social component. It makes me feel less isolated."  
– Participant**

## Manning Makes Falls Prevention Fun

Falls prevention can be fun! The community of Manning, in collaboration with Family and Community Support Services and AHS Health Promotion, put a new spin on Senior's Week and fall prevention. Megan Broadhead, Health Promotion Facilitator says, "The senior's population in our community is strong, so our Senior's Week events were developed with the active senior in mind."

Senior's Week in Manning started off with a complimentary blood pressure check, followed by a 40 minute exercise

session. The exercise class focused on fitness at home and movements to improve or maintain everyday functionality. While the seniors were hydrating, home care created a scenario of a fall in the home and demonstrated techniques on how to get up. Tips were also given about appropriate footwear, equipment and available services, as well as visual assessments that can be performed to address tripping hazards. Community members were thrilled with the session and expressed interest in having a weekly program. One participant was quoted saying "Wow, I feel great after those exercises, I would love to do this weekly."

Another stated, "I learned some new things today, and I never thought the mat in front of the sink was a tripping hazard."

Later in the week, seniors were invited to a dance that featured a local band. Seniors were able to socialize and boogie, doing an activity that challenges balance. "I'm sure if you had asked the seniors at the dance, they wouldn't have recognized dancing as a falls prevention activity. But, it is a fun activity that helps to maintain mobility. Keeping active is an important strategy to reduce falls," says Broadhead

## WalkABLE Alberta

A walkable community is one that is inclusive and accessible for all. WalkABLE Alberta is a provincial AHS program that encourages local stakeholders to increase community walkability by making improvements to the built and social environment. This valuable program has the potential to contribute to the prevention of older adult falls by improving overall health and quality of life of older adults, and addressing several relevant risk factors.

“Walkability must consider the walking experience of people of all abilities, across the age spectrum. One important

perspective to consider is that of seniors” says Graham Matsalla, Health Promotion Facilitator II.

Here are some ways that walkability contributes to the health of older adults:

- Reducing incidence and/or progression of chronic disease by building an environment that encourages physical activity within daily life;
- Reducing social isolation by creating an accessible environment for all forms of mobility so that people feel safe and able to reach others;
- Increasing access to quality healthcare and other community services so people can get from where

they live to where they want to be;

- Increasing independence if people are able to reach destinations, such as postal services, grocery stores, and green space;
- Engaging older adults by seeking their opinions and valuing their contributions.

This November, during falls prevention month, consider how the walkability of your own community may be improved to reduce the risks of seniors’ falls.

Learn more about how [WalkABLE Alberta](#) can help in your community by contacting [Graham Matsalla](#).



## Continuing Care Initiatives

### Team Work Prevails in Red Deer

The Designated Supportive Living 4 Villa Marie staff in Red Deer have a Falls Prevention Strategy in place that is starting to show some positive outcomes.

In August 2017, falls decreased by 47 per cent at the facility, which has been decreasing steadily since the changes were implemented. This is thanks to the health promotion that the strategy suggests including:

- Encouraging regular health visits
- Scheduling regular eye exams

- Strengthening exercises to improve balance
- Reviewing medication annually
- Ensuring Calcium rich foods are available daily and Vitamin D supplements are taken daily

Residents at high risk are referred to the Falls Team that is made up of multi-discipline specialties who meet regularly to discuss fall trends and perform several assessments on clients including:

- Physical examination
- Medication review
- Geriatric depression screen and anxiety

- A multifactorial fall risk assessment
- Mobility and strength assessment
- Referrals to allied health, recreation and dietician

One particular resident, who was high risk for falls, decreased their total number of falls from July to August by 50 per cent.

It is early yet in the implementation of this strategy, but early outcomes support the importance of early intervention and assessment, consistency, follow-through and team work.



Left to Right: Georgette Wasylyshyn (HCA), Laura Erickson (resident), Cara Laboucane (LPN)

## HCA's Tackle Falls in St. Albert

Citadel Mews West Falls Committee in St. Albert was formed in January 2014 to find innovative ways to reduce the amount of falls, and is made up of Health Care Aides and LPNS. The Designated Supportive Living 4 team realized the simplest way to eliminate falls is to understand why or how falls happen. It started out with simply recognizing individual behaviors and the absence of appropriate footwear as being common denominators for the occurrence of falls.

For staff, the committee created a tip sheet surrounding the initial falls assessment and posted it at each computer the team uses for documenting. They also held several education sessions with their peers to ensure they understood how to use the tool and explained how to look at the bigger picture when they are involved with a resident who has fallen.

It was found that simply documenting the relevant information can significantly reduce the amount of falls in addition to identifying medications that could be contributing to falls and identifying appropriate strength training exercises for residents.

Knowing best practices and education were in place for staff to better understand and manage falls, the team turned to the residents. Glow in the dark stickers were added to their personal help buttons and to their walkers, canes, and wheelchairs to increase visibility.

Most importantly is the continuous health and safety teaching they do with residents and their families. The importance of proper footwear, shower mats, and eliminating all mats and rugs from the resident's suite are discussed. There are now laminated cards for residents that need a reminder to call for help before they transfer or mobilize and a reminder to ensure brakes are on their walkers or wheelchairs.

This committee is well supported by all members of the Citadel team and is consulted regularly. The success of the team at Citadel inspired the rest of the sites at Christenson Communities to form their own committees. Members from the committees at each of the communities meet twice per year to discuss and share innovations and ideas.

### Did you know 67% of falls happen in the client's room?

That's what North Zone learned by auditing the falls reported in their zone's RLS system. This information will be used to better target staff education over the next six months in the hope that there will be no more "room" for falls incidents in their zone.





## Comfort Rounds in Crowsnest Pass

After being a part of the Provincial Falls Collaborative in 2013, the Crowsnest Pass Health Centre Continuing Care put what they learned into practice. The first step was to implement the Morse falls scale as a screening tool to identify who's at high risk for falling in Long Term Care.

"Once we have completed the falls scale and we have a better understanding of the resident's current state, we can start to implement patient specific strategies," says Diane Nummi, Unit Manager at Crowsnest Pass Continuing Care.

"We found that a lot of the falls happened when people were getting up from their bed or getting up from a chair. Especially in the dementia units, sometimes people forget they can't walk anymore. This seems to be our biggest challenge."

Some of the strategies used in the Continuing Care Unit are:

- Side rails
- Fall mats
- Bed and chair alarms
- Non-slip socks
- 'Falling Star' image above the bed
- Whiteboards to improve staff communication
- Continual education and "It's Your Move" training for staff

A combination of comfort rounds at bed time and throughout the night, bed alarms and chair alarms, along with other targeted patient specific interventions have helped address falls at transfer points and reduced the number of falls from 18 in January 2016 to 3 in March 2017.

The Continuing Care Unit is busy strategizing their next steps to continue to reduce those numbers.

## Falls Risk Management Committee Initiated in the South Zone

The South Zone has truly shown what collaboration can do to break down silos and help build a better system that supports both staff and patients in falls prevention and management. A Falls Risk Management Team was formed to help guide the direction.

Work is currently underway by the committee to develop a Falls Prevention Strategy that includes a roadmap and best practice toolkit with standardized processes and documentation for each area of care across the zone to adopt. The committee will also be responsible for overseeing the implementation of falls initiatives across the zone while providing strategic and operational direction.

"We need to break the cycle to overcome this challenge. We need to employ a systems thinking approach and look beyond the borders of our facilities to develop a better understanding of the complex systems that are involved in both causing and solving falls," says Ali Abid, South Zone Quality Consultant.

"A coordinated and integrated zone approach to falls prevention can strengthen current efforts in preventing falls and more effectively reduce falls and the impact of falls on seniors."

The initiatives coming out of the South Zone took a system thinking approach by focusing on improving upstream factors and addressing fall prevention through collaboration and inclusive partnerships between all healthcare systems and communities.

# Teaching and Learning Resources

[Falls Risk Management](#) (Insite)

[Adults & Older Adults - Preventing Injuries](#)

[Falls Data Infographic](#)

[Traumatic Brain Injury Infographic](#)

[Falls Risk Assessment](#)

[Preventing Slips, Trips and Falls](#) (MyHealth.Alberta)

[Community Environmental Falls Checklist](#) (Insite)

[Universal Precautions](#) (Insite)

Finding Balance Information Sheets

- [Keep Active Handout](#)
- [Have Your Vision Checked Handout](#)
- [Review Your Medications Handout](#)
- [Nutrition Tips Handout](#)
- [Hydration Tips Handout](#)
- [Community Handout](#)
- [Foot Care Tips Handout](#)
- [At Home Handout](#)

[Exercise Poster](#)

[How to get up from a fall](#) (Multilingual options)

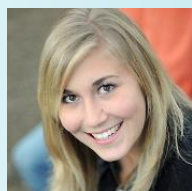


This Falls Spotlight has been created to spread the word about Falls Prevention Month across AHS and emphasize the important roles that AHS staff can play in falls prevention every day.

## Thank You

A special thank you to the Injury Prevention Centre, the Finding Balance Campaign, and all of our zone contributors, including, Ruby Naraine, Ali Abid, Christina Riehl, Rene Engel, Katherine Gagnon, Diane Nummi, Megan Broadhead, Dalique van der Nest E. and Graham Matsalla.

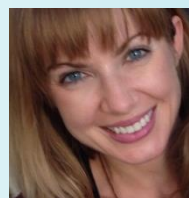
## Contacts:



**Emily Post, MSc.**

[Emily.Post@ahs.ca](mailto:Emily.Post@ahs.ca)

Lead Practice Development  
Community, Seniors, Addiction and Mental Health  
Provincial Continuing Care



**Teresa Curtis, BPE**

[Teresa.Curtis@ahs.ca](mailto:Teresa.Curtis@ahs.ca)

Health Promotion Facilitator  
Provincial Injury Prevention Program  
Population, Public & Indigenous Health

