



**Health Home Care
Coordinators Training**

Reducing and Preventing Falls and Fall Risk



HealthPath
Washington

October 9, 2014



This presentation was designed for Health Home Care Coordinators for the Washington State Integration Project with The Health Care Authority and The Department of Social and Health Services. It was presented as a live webinar by Candace Goehring, Office Chief for Integration Services, on October 9, 2014.

This topic is not required but provides Care Coordinators with basic information for working with clients who may be at risk for falls.



Purpose:

Introduce basic elements of falls risk assessments, falls prevention and use of the SAIL Falls Risk tool



Learning Objectives

As a result of this training the participant will be able to describe, develop and/or demonstrate:

- Basic knowledge regarding falls and fall risk with adults and children
- Administration and interpretation of the SAIL Guide and SAIL Fall Risk evaluation
- Use of CDC Home and Recreational Safety Resources including STEADI

An Overview: Adults

- Each year, millions of adults aged 65 and older fall.
- Falls can cause moderate to severe injuries, such as hip fractures and head traumas, and can increase the risk of early death.
- Fortunately, falls are a public health problem that is largely preventable.

(Tromp AM, Pluijm SMF, Smit JH, et al. Fall-risk screening test: a prospective study on predictors for falls in community-dwelling elderly. J Clin Epidemiol 2001;54(8):837–844)

An Overview: Children

Each year in the United States, emergency departments treat more than 200,000 children ages 14 and younger for playground-related injuries (Tinsworth 2001).





Adult Falls



HealthPath
Washington

How Big is the Problem

- One out of three older adults (those aged 65 or older) falls each year but less than half talk to their healthcare providers about it.
- Among older adults, falls are the leading cause of both fatal and nonfatal injuries.
- In 2012, 2.4 million nonfatal falls among older adults were treated in emergency departments and more than 722,000 of these patients were hospitalized.
- In 2012, the direct medical costs of falls, adjusted for inflation, were \$30 billion.
(CDC 10/14)

What outcomes are linked to falls?

- Twenty to thirty percent of people who fall suffer moderate to severe injuries such as lacerations, hip fractures, and head trauma. These injuries can make it hard to get around or live independently, and increase the risk of early death.
- Falls are the most common cause of traumatic brain injuries (TBI).
- In 2000, 46% of fatal falls among older adults were due to TBI.
- Most fractures among older adults are caused by falls. The most common are fractures of the spine, hip, forearm, leg, ankle, pelvis, upper arm, and hand.
- Many people who fall, even if they are not injured, develop a fear of falling. This fear may cause them to limit their activities, which leads to reduced mobility and loss of physical fitness, and in turn increases their actual risk of falling.

Who is at Risk?

Fall-related Deaths

- The death rates from falls among older men and women have risen sharply over the past decade.
- In 2011, about 22,900 older adults died from unintentional fall injuries.
- Men are more likely than women to die from a fall. After taking age into account, the fall death rate in 2011 was 41% higher for men than for women.
- Older whites are 2.7 times more likely to die from falls as their black counterparts.
- Rates also differ by ethnicity. Older non-Hispanics have higher fatal fall rates than Hispanics.

(CDC 10/14)

Who is at Risk?

Fall Injuries

- People age 75 and older who fall are four to five times more likely than those age 65 to 74 to be admitted to a long-term care facility for a year or longer.
- Rates of fall-related fractures among older women are more than twice those for men.
- Over 95% of hip fractures are caused by falls. In 2010, there were 258,000 hip fractures and the rate for women was almost twice the rate for men.
- White women have significantly higher hip fracture rates than black women.

Preventing Falls

Older adults can stay independent and reduce their chances of falling. They can:

- Exercise regularly. It is important that the exercises focus on increasing leg strength and improving balance, and that they get more challenging over time. Tai Chi programs are especially good.
- Ask their doctor or pharmacist to review their medicines—both prescription and over-the counter—to identify medicines that may cause side effects or interactions such as dizziness or drowsiness.

Preventing Falls

- Have their eyes checked by an eye doctor at least once a year and update their eyeglasses to maximize their vision. Consider getting a pair with single vision distance lenses for some activities such as walking outside.
- Make their homes safer by reducing tripping hazards, adding grab bars inside and outside the tub or shower and next to the toilet, adding railings on both sides of stairways, and improving the lighting in their homes.

Preventing Falls in Older Patients (Provider Pocket Guide)

http://www.cdc.gov/homeandrecreationsafety/pdf/steady/pocket_guide_preventing-falls.pdf

Talking with your Patient about Falls

If you hear:	You can say:
Precontemplation Stage	
Falling is just a matter of bad luck.	As we age, falls are more likely for many reasons, including changes in our balance and how we walk.
Contemplation Stage	
My friend down the street fell and ended up in a nursing home.	Preventing falls can prevent broken hips & help you stay independent.
Preparation Stage	
I'm worried about falling. Do you think there's anything I can do to keep from falling?	Let's look at some factors that may make you likely to fall & talk about what you could do about one or two of them.
Action Stage	
I know a fall can be serious. What can I do to keep from falling and stay independent?	I'm going to fill out a referral form for a specialist who can help you improve your balance.

For more information, go to:
www.cdc.gov/injury/STEADI



Centers for Disease Control and Prevention
National Center for Injury Prevention and Control



Preventing Falls in Older Patients

Provider Pocket Guide

Key Facts about Falls:

- 1/3 of older adults (age 65+) fall each year.
- Many patients who have fallen do not talk about it.

This is What You Can Do:

RITUAL:

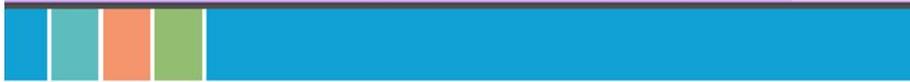
- Review self-assessment brochure
- Identify risk factors
- Test gait & balance
- Undertake multifactorial assessment
- Apply interventions
- Later, follow-up



STEADI Stopping Elderly Accidents, Deaths & Injuries

Fall Prevention Referral Form

http://www.cdc.gov/homeandrecreationalafety/pdf/steady/patient_referral_form.pdf



Fall Prevention Patient Referral Form

ENTER HEALTHCARE PROVIDER ORGANIZATION NAME AND ADDRESS HERE

Patient:		Referred to:	
Sex:	DOB:		
Address:		Address:	

Check for Safety

http://www.cdc.gov/HomeandRecreationalSafety/pubs/English/booklet_Eng_desktop-a.pdf

This checklist is based on the original version printed by the Centers for Disease Control and Prevention. Support for this version was provided by MetLife Foundation.

2005



8.00 x 9.00 in

My Falls-Free Plan

SAIL FORM

As we grow older, gradual health changes and some medications can cause falls, but many falls can be prevented. Use this to learn what to do to stay active, independent, and falls-free.

This screening tool is also contained in the Clinical Resources Manual that was included in your Basic Training.

SAIL Form

- The more “Yes” answers you have, the greater your chance of having a fall. **Be aware of what can cause falls, and take care of yourself to stay independent and falls-free!**
- This material is in the public domain and may be reproduced without permission. If you use or adapt this material, please credit the Washington State Department of Health, Injury & Violence Prevention Program.

SAIL Form: What to Do if checked YES

Have you had **any falls in the last six months**?

- Talk with your doctor(s) about your falls and/or concerns.
 - Show this checklist to your doctor(s) to help understand and treat your risks, and protect yourself from falls.
-

Do you take **four or more** prescription or over-the-counter medications daily?

- Review your medications with your doctor(s) **and** your pharmacist at each visit, and with each new prescription.
 - Ask which of your medications can cause drowsiness, dizziness, or weakness as a side effect.
 - Talk with your doctor about anything that could be a medication side effect or interaction.
-

Do you have **any difficulty walking or standing**?

- Tell your doctor(s) if you have any pain, aching, soreness, stiffness, weakness, swelling, or numbness in your legs or feet—**don't ignore** these types of health problems.
 - Tell your doctor(s) about **any** difficulty walking to discuss treatment.
 - Ask your doctor(s) if physical therapy or treatment by a medical specialist would be helpful to your problem.
-

SAIL Form: What to Do if checked YES

- Do you have **any difficulty walking or standing**?
 - Tell your doctor(s) if you have any pain, aching, soreness, stiffness, weakness, swelling, or numbness in your legs or feet—**don't ignore** these types of health problems.
 - Tell your doctor(s) about **any** difficulty walking to discuss treatment.
 - Ask your doctor(s) if physical therapy or treatment by a medical specialist would be helpful to your problem.

- Do you use a **cane, walker, or crutches**, or have to hold onto things when you walk?
 - Ask your doctor for training from a physical therapist to learn what type of device is best for you, and how to safely use it.

- Do you have to **use your arms to be able to stand up from a chair**?
 - Ask your doctor for a physical therapy referral to learn exercises to strengthen your leg muscles.
 - Exercise at least two or three times a week for 30 min.

SAIL Form: What to Do if checked YES

Do you ever feel **unsteady on your feet, weak, or dizzy?**

- Tell your doctor, and ask if treatment by a specialist or physical therapist would help improve your condition.
- Review all of your medications with your doctor(s) or pharmacist if you notice **any** of these conditions.

Has it been **more than two years since you had an eye exam?**

- Schedule an eye exam every two years to protect your eyesight and your balance.

Has your **hearing gotten worse with age**, or do your family or friends say you have a hearing problem?

- Schedule a hearing test every two years.
- If hearing aids are recommended, learn **how** to use them to help protect and restore your hearing, which helps improve and protect your balance.

Do you usually **exercise less than two days a week?** (for 30 minutes total each of the days you exercise)

- Ask your doctor(s) what types of exercise would be good for improving your strength and balance.
- Find some activities that you enjoy and people to exercise with two or three days/week for 30 min.

SAIL Form: What to Do if checked YES

Do you usually **exercise less than two days a week**? (for 30 minutes total each of the days you exercise)

- Ask your doctor(s) what types of exercise would be good for improving your strength and balance.
 - Find some activities that you enjoy and people to exercise with two or three days/week for 30 min.
-

Do you drink **any alcohol** daily?

- Limit your alcohol to one drink per day to avoid falls.
-

Do you have **more than three chronic health conditions**? (such as heart or lung problems, diabetes, high blood pressure, arthritis, etc. Ask your doctor(s) if you are unsure.)

- See your doctor(s) as often as recommended to keep your health in good condition.
 - Ask your doctor(s) what you should do to stay healthy and active with your health conditions.
 - Report any health changes that cause weakness or illness as soon as possible.
-

The Goal Setting and Action Planning Worksheet

HEALTH HOME
Goal Setting and Action Planning Worksheet

Name: _____ DOB: _____

Long Term Goal

Short Term Goal

Describe something you would like to improve your health:

Describe what you will do

1. What you'll do: _____

2. Where you'll do it: _____

3. The number of times each day / week: _____

4. How long will you commit to doing this: _____

Possible barriers to your success:

Plan to overcome the barriers:

Conviction

How important is it for you to work on the goal you identified above? Check the box which best shows your response.
 Not at all convinced 1 2 3 4 5 6 7 8 9 10 Totally convinced

Confidence

How confident are you that you will be successful in reaching the goal you identified above? Check the box which best shows your response.
 Not at all confident 1 2 3 4 5 6 7 8 9 10 Totally confident

Plan for follow-up:

HEALTH HOME: GOAL SETTING AND ACTION PLANNING WORKSHEET
 2015 10-112 (REV. 06/2015)

If falls or fall risk is an issue for your Health Home client consider discussing fall prevention as a possible short term goal. Use the falls risk assessment to identify changes for your client which may become action steps. Consider using the Goal Setting and Action Planning Worksheet to jot down ideas from your discussion for inclusion in the Health Action Plan.



Falls in Children



HealthPath
Washington

The Reality
Prevention Tips
Color Me Safe

Falls: The Reality

- We all want to keep our children safe and secure and help them live to their full potential. Knowing how to prevent leading causes of child injury, like falls, is a step toward this goal.
- Falls are the leading cause of non-fatal injuries for all children ages 0 to 19. Every day, approximately 8,000 children are treated in U.S. emergency rooms for fall-related injuries. This adds up to almost 2.8 million children each year.
- Thankfully, many falls can be prevented, and parents and caregivers can play a key role in protecting children.

Prevention Tips (CDC 10/14)

- **Play safely.** Falls on the playground are a common cause of injury. Check to make sure that the surfaces under playground equipment are safe, soft, and well- maintained (such as wood chips or sand, not dirt or grass).
- **Make your home safer.** Use home safety devices, such as guards on windows that are above ground level, stair gates, and guard rails. These devices can help keep a busy, active child from taking a dangerous tumble.

Prevention Tips (CDC 10/14)

- **Keep sports safe.** Make sure your child wears protective gear during sports and recreation. For example, when in-line skating, use wrist guards, knee and elbow pads, and a helmet.
- **Supervision is key.** Supervise young children at all times around fall hazards, such as stairs and playground equipment, whether you're at home or out to play.

Color Me Safe

http://www.cdc.gov/injury/pdfs/colormesafe_eng-a.pdf

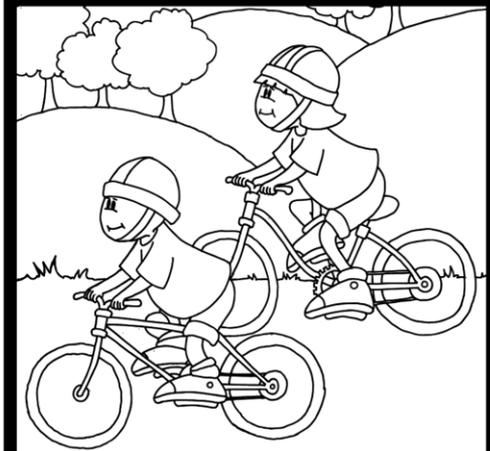


Color Me Safe

- Color Me Safe is a coloring book designed for children ages four to seven. Throughout the book, the Safe Family takes simple steps to prevent injuries, such as installing smoke alarms and using child safety seats. Children can have fun coloring the pictures and reading about the Safe Family.
- Color Me Safe can help parents talk with their children about safety at home and on the go! Teachers can integrate the story and messages into Pre-K and early grade school curricula and share copies with parents and children at health and safety events.

Color Me Safe Coloring Book

Sample
Page



The kids remember - mom and dad have always said,
"Whenever you ride a bike, wear a helmet on your head."



Washington State
Health Care Authority



Contact Information

- Candace Goehring MN RN
 - Behavioral Health and Service Integration Administration
 - goehrcs@dshs.wa.gov
 - 360-725-3787

Certificate of Completion

Health Home Fall Risk and Fall Prevention

presented by Candace Goehring, MN RN
Health Home/ Office Chief
Integration Services – DSHS

*Webinar aired on: October 9, 2014 in Lacey, Washington
for Health Home Care Coordinators*

Please sign and date this slide to attest that you reviewed this training PowerPoint

Your Signature

Date Reviewed

Supervisor's Signature

Date



Washington State
Health Care Authority



If you were not able to attend the Webinar held on October 9, 2014 print this slide then sign and date it after reviewing all of the slides and speaker's notes. Your supervisor should sign to verify completion of this training. Please retain a copy for your records.