Minimizing Fall Risk in the Nursing Home: What Residents Need to Know

Objectives:
1. Review environmental and internal risk factors that contribute to an increased risk for falls.
2. Identify interventions that can eliminate or significantly decrease the impact of the risk factors.

Some facts related to falls in nursing homes:
1. A typical 100 bed nursing home reports 100-200 falls each year.
2. Three out of four nursing home residents fall each year, twice the rate of falls of older adults living in the general community.
3. Nursing home residents with dementia are twice as likely to fall as those without dementia.
4. Falls are the leading cause of injury in people over ages 65 who reside in a nursing home.

The importance of your daily routine:
Before we discuss specific internal and environmental risk factors let’s address the importance of you communicating how you would like your daily routine to be carried out. When a person enters a nursing home there is a risk of you being molded into the routine of the facility instead of the facility adjusting to your routine.
Examples of routine daily practices include using the bathroom, naps, chair preferences, entertainment, etc. If for example it is normal for you to have a BM in the morning after breakfast then that is information that should be conveyed to the staff so they can assist you in getting to
the toilet. If they do not acknowledge this part of your “routine” then there is a risk that you might attempt to go to the bathroom yourself and that may result in a fall. Another very important piece related to having a good, safe daily routine is having the same people take care of you. We call it consistent care assignments and all it means is having the same individuals care for you all the time. When you have the opportunity to be with the same care giver on a daily basis they will get to know your personal history, your preferences, your dislikes and most importantly they will help make sure care is done according to your preference for a routine.

If you do not have consistent care assignments where you are currently living it might be a good topic for the next resident council meeting or to discuss with nursing administration. Good care is based on the ability to build relationships.

Environmental factors:

1. Condition of the floors
   When you encounter an uneven surface, a slippery surface (from too much floor wax or from a liquid spill), or a loose carpet edge report it immediately to your primary caregiver. And ask for feedback regarding staff follow-up.

2. Arrangement of furniture and personal items
   You have the right to state your preferences for how your bedroom is set-up. As long as your request does not create a safety issue staff should be able to arrange things how you want them. And, if for any reason staff wants to move an item they must get your permission. Smaller items like slippers placed on the wrong side of
the bed have caused a fall when the resident did not know they were there and tripped on them.

3. Noise can affect your safety especially if it is interfering with your ability to sleep. When you are tired you will not function as well and that includes your ability to safely participate in your normal level of activity. Inform the charge nurse on your unit, don’t suffer in silence.

4. Temperatures, either too hot or too cold can affect your overall ability to relax and be comfortable. As with noise this can affect your ability to function so speak up whenever you are not comfortable and ask staff to assist you with adjusting to the temperature changes.

5. Improperly fitting clothing can contribute to falls. Pants that are too large or long may gather under your feet and cause a fall. Pants that are too tight may cause you to struggle to pull them up and this may cause you to lose your balance and fall. Let staff know if you think you may have any dangerous items in your wardrobe.

6. Improper shoes are another big fall hazard. Shoes should be sturdy, comfortable, not too tight or too loose and should have non-skid soles. Shoes with high heels or slippery soles are a definite NO. Also, look at your slippers and make sure they are non-skid.

7. Environmental “fit”. Think about your room. Can you easily access most of your things? Do drawers open easily or do you have to tug on them? This could cause loss of balance and result in a fall. What about those of you in a wheelchair? Can you reach what you need including items in the closet? Many nursing homes are eliminating the high bars in closets and making lower shelves instead so people can more easily reach their things. If you think you would benefit from such a change then you have the right to ask.
8. Lighting levels that are too low may contribute to falls. You must be able to see well to navigate in your surroundings. Nursing homes are starting to acknowledge the need for more individualized lighting. Many people are bringing lamps from home to help make their environment friendlier and safer. If you think you need more light it is very appropriate to ask for it. Another lighting related issue is glare. Glare can make shiny floors appear wet and that might cause a person walking to change their step or direction, lose their balance and fall. Glare can also be blinding when coming through windows at certain angles. This can cause even people in wheelchairs to be involved in accidents. We know of occasions when a resident in a wheelchair was going through a bright hallway and due to glare did not see the resident with the walker and knocked them over. If you notice areas like this where you live please report it.

Internal factors:

1. Getting to the bathroom. This is a common reason that falls occur. It may be related to taking a laxative, a diuretic (water) pill, or it just may be that your bladder does not hold the same amount of urine that it used to so you have to go more frequently. Remind your caregiver that you had a laxative or a water pill; don’t assume they always know what medication you have gotten. That way when you put your call bell on they are more likely to remember you have to get to the bathroom in a hurry. If you are urinating more often than usual or have discomfort when you urinate tell your caregiver- you might have a urinary tract infection.
Also, as we mentioned earlier if you have a certain time of day that you are used to having a BM let your caregiver know so they will be able to help you maintain your routine.

2. Vision changes- Many people have vision problems including glaucoma, diabetic changes, macular degeneration and that further complicates their ability to safely move in their environment. If you have any type of vision problems there are ways to be a little safer. For example, staff can wrap the cord of the call bell with colorful craft tape so that it is easier to see against the white bed linens. There are also lighted call bells that are easier to see at night. Placing a colored toilet seat (instead of the traditional white ones) can help keep you safer in the bathroom because you are less likely to miss the seat. Marking the floor with a bright colored X is a way to remind you where your feet have to be before sitting in a chair. Using magnifying glasses and brighter or lower lighting are also ways to help improve vision. Keep your eyeglasses clean or don’t be afraid to ask staff to do it for you- this helps keep you safe.

3. Orthostatic hypotension (postural hypotension) is a very common reason older people fall. It is a sudden fall in blood pressure, usually greater than 20 points. It occurs when a person gets to a standing position usually after a prolonged period of rest. It can be a side effect of certain medications, it can be related to being dehydrated, or it may just be “you.” Some people describe it as feeling a “head rush”, “dizzy spell”, or “I don’t know what happened, I guess I tripped.” If you ever experience a situation like this (or if you are curious if your blood pressure changes when you stand or sit up) ask staff to do the following:
a. Take your blood pressure while lying down
b. Get to a sitting position, wait one or two minutes and check blood pressure again
c. Get to a standing position and wait one or two minutes and check blood pressure
If you do experience a drop in your blood pressure when changing positions then your doctor might suggest TED stockings and may review some of your medications. It is important to remember to change position slowly to prevent the drop and also to keep well hydrated.

4. Insomnia is a common risk factor for falls. If you are not sleeping well it is important to try and figure out why. Is it too noisy, bright, warm or cold? Do you have pain or discomfort? Many people who reside in nursing homes do not tell staff when they are uncomfortable. They may be suffering silently. When the discomfort interferes with everyday activity including a good night’s rest it is time to let someone know. As mentioned before, if you aren’t resting well then you will not function as well during the day and that will increase your risk of falls. Some people suffer from emotional or spiritual unease that interferes with their ability to rest. If this is a problem for you, you may benefit from talking with the social service director or the chaplain, or having a staff member contact your priest or minister. What was your bedtime routine in the past? Do you still carry it out? Washing up, brushing teeth, eating a light snack, reading, prayers, a glass of wine, or whatever you did is worth revisiting. Physicians are extremely hesitant to order sleeping pills due the increased risk of falls they present due to their many dangerous side effects.
5. Walking and balance problems are common reasons for falls. Medical conditions like a stroke, Parkinson’s disease, diabetes, multiple sclerosis, joint replacement, and inner ear problems, just to name a few, can impact your ability to move safely. It is extremely important to remember to wait for help when necessary. Participating in daily activities that encourage you to move is one of the best things that you can do for yourself to help improve or maintain your abilities. Therapy, range of motion programs, group exercises and restorative nursing programs may be appropriate. In addition, make sure you use assistive equipment as the doctor has ordered: your eyeglasses, canes, walkers, wheelchairs, braces, special shoes etc. You may have a need for a raised toilet seat and extra grab bars in the bathroom. Some people have difficulty with maintaining good footing on the floor in the bathroom so staff can place anti-skid material. You may benefit from automatic wheelchair brakes that lock when you go to stand in case you forget to put the locks on- that will keep the chair from rolling out behind you causing a fall.

6. Medications. Every medication, including over the counter medications, has the potential of having side effects. The more medications a person takes, the higher the chance of side effects, including the risk of falling. If you have any new symptoms such as lightheadedness, dizziness, feeling faint, or weakness in your arms or legs, please ask your physician to review your medications. In addition, side effects like the loss of appetite can affect your fall risk. When you lose weight you may feel weaker and that affects your ability to function safely. You know your body the best
so make sure to report any changes that you are experiencing.

In conclusion, it is important for you to speak up about your needs, as well as any problems you see regarding environmental issues. By speaking up, you may very well prevent a fall for you or someone else.

Questions