



Health and Welfare Alert

Fall Prevention

#20-9-21

Direct support professionals (DSPs) are uniquely positioned to actively assess a person with disabilities' risks for falling and to support them to get assistance and teach them prevention strategies.

Common Fall Risk Factors:

Home hazards; weather and outdoor conditions; lower body weakness; chronic health conditions such as seizures, depression, diabetes, obesity, and COPD; use of multiple medications; reduced vision; disability; poorly fitting shoes and clothes; adaptive equipment that is not functioning properly; nutrition; lack of physical activity and a fear of falling.

Impact of Seizures on Falling:

Many of the people we serve have a seizure disorder, which may place them at a higher risk of falling. Seizures can happen with little warning causing the person to fall directly to the floor, from a seated position to the floor, or fall into a fixed structure. It is important to make sure the person's environment is as safe as possible for them.

Medical Considerations:

Medications can also contribute to falling because medications like sedatives and anti-depressants can reduce a person's alertness. Some medications can affect balance or cause a drop in blood pressure while a person is standing.

People on medications with "blood thinner" effects (like aspirin, Plavix, Motrin, Advil, Coumadin, Eliquis, etc.) are at increased risk for bleeding when they fall. Unseen bleeding inside the head can be fatal.

You can help prevent falls and even deaths by paying attention to the "Three H's". Home, Health, and Habits.



Home: Look at each room in the person's home and learn how to recognize and remove hazards that could create a trip hazard. Check out lighting to make sure it is sufficient and pay attention to steps.

Health: Support the person in making healthy choices and have ongoing conversations with their health care professionals like doctors and pharmacists to reduce the risk of falling. Consider physical therapy and core strengthening.

Habits: Bodies change as we age, and so should the ways we do certain everyday tasks. Promote a healthy lifestyle.

Fast Facts:

- Falls were the second leading cause of accidental deaths for Ohioans with developmental disabilities in 2020.
- Nearly 50 people getting supports have died as a result of falls, in the last five years alone.
- On average 50 percent of all significant injuries, MUIs for the last decade were due to a person falling. These injuries could result in broken bones, surgery, and hospitalizations.
- Falls are the leading cause of injury among Ohioans aged 65 and older.
- In 2019, falls among older Ohioans led to 1,490 deaths, 18,856 hospitalizations, and 75,091 emergency department visits.
- A fall can lead to depression, loss of mobility, and loss of functional independence.



MUI Fall Examples:

- A 60-year-old man fell, hitting the door frame. He later passed away following a brain bleed.
- While walking in a parking lot, a 49-year-old woman lost her balance and fell forward, hitting her head. She suffered a broken nose and required stitches.
- A 25-year-old woman was sitting on the front porch in her wheelchair. Her chair was not secured, and she tipped over fracturing her elbow.

What to do if someone falls or loses their balance?

- Complete a medical assessment, making sure to note any injury and loss of range of motion.
- Follow your first aid training and make sure the person gets immediate medical care if needed.
- Remember, if someone is on a medication with a blood thinner effect, they need to be closely monitored.
- Just because a person didn't fall completely to the ground, doesn't mean they may not have injured themselves, including hitting their head.

Head Injuries:

- Monitor the person closely in the 24 hours following a head injury.
- Every two-hour check for level of alertness; lethargy (sleepiness, ability to arouse); confusion; vomiting; and unequal pupils.
- Signs and symptoms of brain injury that may continue for weeks or months after a head injury should be immediately reported to the individual's physician and include headache, difficulty sleeping, feeling dizzy, and behavior or psychological changes.



[Steady U](#) Ohio is a statewide collaborative falls prevention initiative supported by government and state business partners to ensure that every county, community, and Ohioan knows how to prevent falls.



Strategies for Fall Prevention:

- You can take simple steps to make sure people are safe in their homes. It starts with planning and providing the right supports (bathing equipment, supervision, etc.).

Talking to a Health Care Provider:

- Medications: request a review of medications the person takes and discuss risks?
- Vision loss: Does the person need a vision check?
- Hearing loss: Should a hearing check be completed?
- Discuss if the person has fallen, or nearly fallen (i.e., slipped or tripped).
- Share if the person has experienced problems with walking or balance; felt dizzy or lightheaded, or fainted.
- What types of physical activity would be appropriate? Specific exercises?
- Is a home assessment needed?
- Would physical therapy be appropriate?
- Is the person afraid of falling?
- What assistive devices would be appropriate?
- Demonstrations on how to use devices.
- Are there resources or classes that could help reduce falling?
- Discuss if the person is rushing to get to the bathroom, causing risks.