

Facts about Falls

Fast Facts on Falls

- Falls are the leading cause of fatal and nonfatal injuries in older adults.
- 1 in 5 falls results in a broken bone or brain injury.
- More than 95% of hip fractures are caused by falling.
- Falls are the most common cause of traumatic brain injuries (TBI).
- Falls are a common reason for hospital admission or emergency room visits.
- Each year \$50 billion and \$754 million is spent in medical costs related to non-fatal fall injuries and fatal falls, respectively.

General Facts on Falls

Recognize and correct modifiable risk factors your resident may have for falling:

Lower body weakness | Vitamin D deficiency | vision problems | use of medications that may affect the CNS
Alcohol consumption | foot pain or poor footwear | medications that affect blood pressure | cognitive disorders

Recognize and remove environmental risk factors for falling:

Broken or uneven steps | trip hazards such as rugs, wires, and other floor clutter | missing handrails

Facility healthcare providers may conduct personalized fall risk assessments to determine a resident's fall risk factors and supply considerations for their prevention plan.

The STEADI algorithm is geared to Community-Dwelling Adults aged 65 years and older, but may be adopted to the Group Health Home client. Residents who are identified as high falls risk should be made familiar to staff and located in a place they can be seen in case they require assistance.

Encourage resident or responsible party to speak with providers or pharmacists about medications that increase fall risk.

Medications of interest:

- Opioids
- Antidepressants
- Anti-Anxiety Meds
- Sleep Aids
- High Blood Pressure / Heart Meds
- Muscle Relaxants
- Antipsychotics
- Anticonvulsants

Side Effects to Look out for:

- Vision Changes
- Loss of Balance
- Decreased Reaction Time
- Fainting
- Muscle Weakness
- Loss of Muscle Coordination
- Excessive Sleepiness or Tiredness
- Drop in Blood Pressure (marked by dizziness/fainting) upon Standing

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Residents and clients may decrease their fall risk by following these steps:

- Sit upright for at least 10 seconds before standing out of bed to avoid dizziness
- Engage in strength and balance building exercises when available
- If suffering from incontinence, consider implementing a scheduled toileting routing to minimize risky night-time trips to the bathroom. Elimination aids such as bedside commodes and bedpans can also be useful.

In Summary

- Falls are COMMON, COSTLY, and PREVENTABLE!
- Fall prevention takes education, planning, and coordination between clients, Direct Support Professionals, and Healthcare Providers.
- Medications are a major contributing factor to the fall risk for older adults, and a pharmacist consult may be helpful in reducing this risk.

Additional Resources

- [STEADI: SAFE Medication Review Framework](#)
- [STEADI: Medications Linked to Falls](#)

Work with pharmacists and other healthcare providers to minimize drug-induced fall risk for your residents!

