

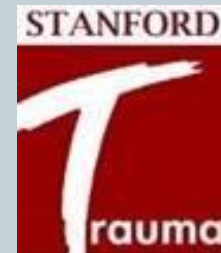
Quick Shot Program

Fall Prevention for Older Adults



TMAC – JULY 12, 2018

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MANAGER, INJURY PREVENTION
STANFORD HEALTH CARE



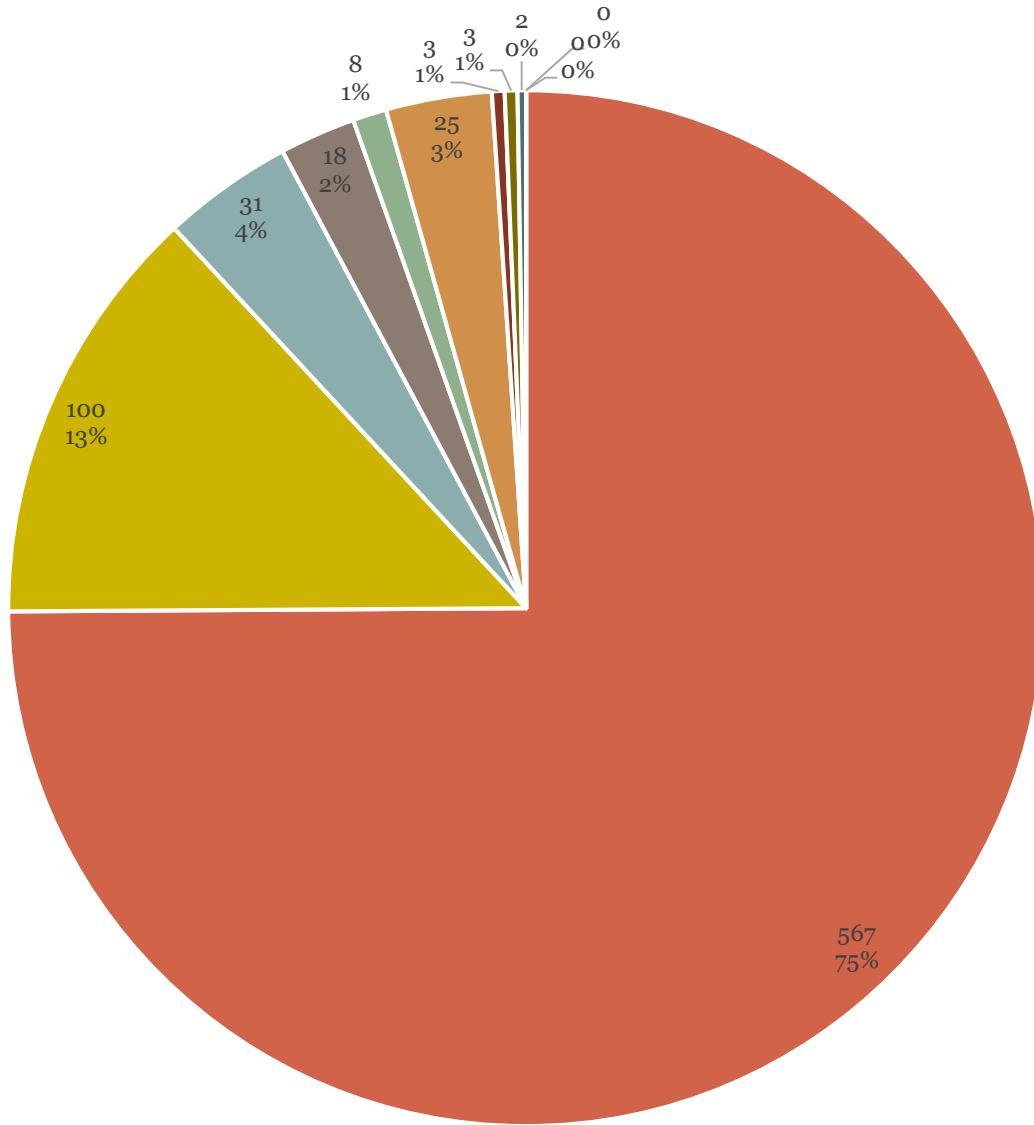
National Data



- An estimated 1 in 4 older adults 65 years + fall each year. Once a person has fallen, chance of falling again doubles.
- In 2016, 3 million older adults were treated in Emergency Departments after a fall.
- 800,000 older adults hospitalized after a fall.
- Medical costs -- \$50 billion -- 75% of those costs covered by Medicare and Medicaid.

CDC - 2018

Trauma by Mechanism of Injury Ages = > 65 years old 2017



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- Fall
- MVC
- Bicycle
- Other Blunt
- MCC
- Pedestrian
- Assault
- Other Penetrating
- GSW
- Stabbing
- Impalement

Treatable Risk Factors



Risk Factors: Age and History of Falls – Not TREATABLE

TREATABLE RISK FACTORS:

1. Problems with gait and balance
2. Postural Hypotension
3. Use of 4 or more medications (especially anti-psychotic medications and sleeping aids)
4. Foot problems and unsafe footwear
5. Visual problems
6. Environmental hazards

Mary Tinetti MD

Increased # of Risk Factors = Fall Risk



Risk Factors	Chance of older adult suffering a serious a fall in the next year	If risk factor is treated, the risk of fall is reduced by 1/3 to:
Fallen in past year	50% (5 in 10)	30% (3 in 10)
No falls in past year but even minor problems with walking or movements	30% (3 in 10)	20% (2 in 10)
Any 1 of 6 the risk factors	20% (2 in 10)	10% (1 in 10)
Any 2 of the 6 risk factors	30% (3 in 10)	20% (2 in 10)
Any 3 of the 6 risk factors	60% (6 in 10)	40% (4 in 10)
4 or more of the 6 risk factors	80% (8 in 10)	50% (5 in 10)

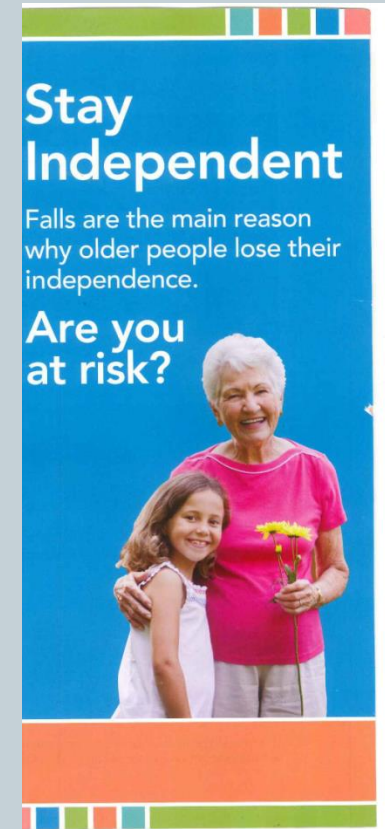
Mary Tinetti, MD, 2005

STEADI



(Stopping Elderly Accidents, Deaths, & Injuries)- A program developed by the Center for Disease Control (CDC)

- Aimed at Primary Care Physicians
- Algorithm provided to determine next steps for physician
- Physicians assess fall risk and make referrals to evidence-based programs



Check Your Risk for Falling

Please circle "Yes" or "No" for each statement below.		Why It matters	
Yes (2)	No (0)	I have fallen in the past year.	People who have fallen once are likely to fall again.
Yes (2)	No (0)	I use or have been advised to use a cane or walker to get around safely.	People who have been advised to use a cane or walker may already be more likely to fall.
Yes (1)	No (0)	Sometimes I feel unsteady when I am walking.	Unsteadiness or needing support while walking are signs of poor balance.
Yes (1)	No (0)	I steady myself by holding onto furniture when walking at home.	This is also a sign of poor balance.
Yes (1)	No (0)	I am worried about falling.	People who are worried about falling are more likely to fall.
Yes (1)	No (0)	I need to push with my hands to stand up from a chair.	This is a sign of weak leg muscles, a major reason for falling.
Yes (1)	No (0)	I have some trouble stepping up onto a curb.	This is also a sign of weak leg muscles.
Yes (1)	No (0)	I often have to rush to the toilet.	Rushing to the bathroom, especially at night, increases your chance of falling.
Yes (1)	No (0)	I have lost some feeling in my feet.	Numbness in your feet can cause stumbles and lead to falls.
Yes (1)	No (0)	I take medicine that sometimes makes me feel light-headed or more tired than usual.	Side effects from medicines can sometimes increase your chance of falling.
Yes (1)	No (0)	I take medicine to help me sleep or improve my mood.	These medicines can sometimes increase your chance of falling.
Yes (1)	No (0)	I often feel sad or depressed.	Symptoms of depression, such as not feeling well or feeling slowed down, are linked to falls.
Total _____		Add up the number of points for each "yes" answer. If you scored 4 points or more, you may be at risk for falling. Discuss this brochure with your doctor.	



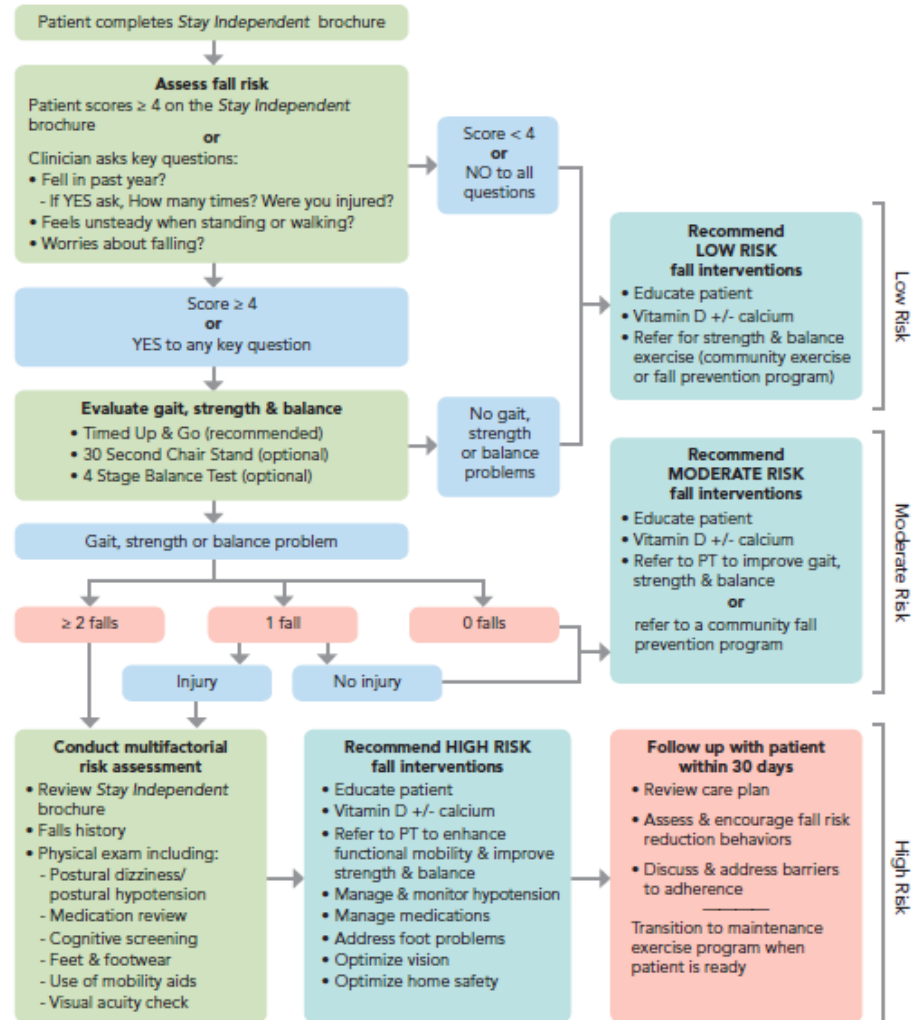
- Your doctor may suggest:**
- Having other medical tests
 - Changing your medicines
 - Consulting a specialist
 - Seeing a physical therapist
 - Attending a fall prevention program

*This checklist was developed by the Greater Los Angeles VA Geriatric Research Education Clinical Center and affiliates and is a validated fall risk self-assessment tool (Rubenstein et al. J Safety Res; 2011 42(6):493-499). Adapted with permission of the authors.

Stay Independent Brochure -- CDC

STEADI Algorithm

Algorithm for Fall Risk Assessment & Interventions



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

STEADI Stopping Elderly
Accidents, Deaths & Injuries

A MATTER OF BALANCE



- Evidence-based model
- Developed at Roybal Center, Boston University
- Shown to decrease fear of falling and increase commitment to exercise.
- Taught by lay leader “coaches.” Because of this model, most affordable evidence-program for fall prevention available.
- 8 2-hour sessions.
- Lectures, group discussions, role playing, exercises
- Savings of \$938 (Office of Medicare and Medicaid) in unplanned medical costs per Medicare beneficiary.

STEPPING ON



Stepping On

Building confidence and reducing falls

- Evidence-based and community-based fall prevention program
- Developed in Australia. Licensed through University of Wisconsin.
- 7-week program – 2-hour sessions plus one home visit and one booster session
- Lead by health professional with guest speakers from PT, Pharmacy, and vision specialist.
- Shown to decrease falls by 31%

Fall Prevention Programs at SHC



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If you've fallen recently, or are concerned about falling, you may be eligible to participate in a fall prevention program offered through the Trauma Service at Stanford Hospital & Clinics

This is a **FREE**, home-based program.

Farewell to Falls



Reduce Falls
by enrolling in the Farewell to Falls Program

Did you know that nearly half of older adults 65 years and older who have fallen will fall again?



Stanford | MEDICINE

- Best practice model developed in 2005 at Stanford Trauma
- Home-based
- Multi-faceted
- Occupational Therapists provide visits
- Free
- Based on research from Australia and US that says home visits by OTs reduce falls.

Resources



- [CDC.gov/STEADI](https://www.cdc.gov/STEADI)
- [NCOA.gov](https://www.ncoa.gov)
- stanfordhealthcare.org/medical-clinics/trauma-service/community-outreach-programs/fall-prevention-older-adults.

Thank you



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Stanford Health Care

Trauma Service

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