

Improving Falls Rates in Residential Care

Did you know that more than one third of people aged 65 and older fall each year?

Falls are the leading cause of injury in this age group and unfortunately many of these incidents result in disability, mortality and often, significant functional decline.

In many instances elderly individuals who were previously independent transition to Residential Aged Care after experiencing a fall.

In addition to age, other indications that may contribute to increased falls risk and severity of outcome include:

- Recent hospital admissions or surgery, requiring the patient to recover from anaesthetic and to re-learn motor patterns (i.e. learning to walk after a hip fracture). During the early stages of rehabilitation, balance, strength and confidence will be impaired.
- Pre-existing medical conditions such as diabetes, osteoporosis or neurological conditions such as Parkinson's Disease.
- Recent changes to mobility
- Dementia – research suggests that there is strong link between the cognitive component of mobility and balance. This population is very high-risk of presenting to hospital after a fall

Referencing the Victorian Department of Health and Human Services, Victoria [3], *'People aged 80 years or more are at the highest risk of falls and fractures. This age group represents the highest proportion of residents in aged care'*.

Nevertheless, the good news is, falls can be largely preventable!

Effective prevention is a multidisciplinary effort and Total Health Physio along with the Emmy Monash Clinical Team play a significant role in the identification and mitigation of risks posed to individual residents at Emmy Monash Aged Care.

Holistic assessment

Most falls in this population are attributed to multiple factors. As such, broad assessment is required to achieve the best outcome. Falls prevention relies on a team of professionals assessing the residents thoroughly to identify modifiable risk factors. Physiotherapists & Occupational Therapists are key players in the recognition of risk factors and construction of a targeted management plan. Our team along with the Clinical Management team appraise various contributing factors such as:

Patient specific risks:

- History of falls
- Muscle weakness and deconditioning
- Cognitive and sensory decline
- Poor vision



Environmental risks:

- Inappropriate footwear
- Medications
- Suboptimal lighting
- Trip hazards such slippery surfaces and rugs

Risk assessment of residents

The Total Health Physio team screens each resident using the **Falls Risk Assessment Tool (FRAT)**, which is a reliable and valid measure endorsed by the Department of Health & Human Services, Victoria.

Working together to prevent falls

<p>FALLS RISK ASSESSMENT TOOL (FRAT)</p> <p><small>(see instructions for completion of FRAT in the FRAT PACK-Falls Resource Manual)</small></p>	UR NUMBER SURNAME GIVEN NAMES..... DATE OF BIRTH <small>Please fill in if no patient/resident label available</small>
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PART 1: FALL RISK STATUS		
RISK FACTOR	LEVEL	RISK SCORE
RECENT FALLS <small>(To score this, complete history of falls, overleaf)</small>	none in last 12 months..... one or more between 3 and 12 months ago..... one or more in last 3 months..... one or more in last 3 months whilst inpatient / resident....	2 4 6 8
MEDICATIONS <small>(Sedatives, Anti-Depressants, Anti-Parkinson's, Diuretics, Anti-hypertensives, hypnotics)</small>	not taking any of these..... taking one taking two taking more than two.....	1 2 3 4
PSYCHOLOGICAL <small>(Anxiety, Depression, Cooperation, insight or judgement esp. re mobility)</small>	does not appear to have any of these..... appears mildly affected by one or more..... appears moderately affected by one or more..... appears severely affected by one or more.....	1 2 3 4
COGNITIVE STATUS <small>(AMTS: Hodkinson Abbreviated Mental Test Score)</small>	AMTS 9 or 10 / 10 OR intact..... AMTS 7-8 mildly impaired..... AMTS 5-6 mod impaired..... AMTS 4 or less severely impaired.....	1 2 3 4
RISK SCORE		/20

(Low Risk: 5-11 Medium: Risk: 12-15 High Risk: 16-20)

This comprehensive assessment tool reflects a bio-psycho-social approach to falls and risk reduction, considering:

- Recent falls
- Medications
- Psychological status
- Vision
- Mobility
- Transfers (*i.e. sit to stand, waking from sleep*)
- Activities of daily living
- Behaviours
- Daily activities
- Environment
- Nutrition
- Contenance

The outcome of this assessment is a score, which indicates an overall falls risk (Low, Medium or High), at that point in time. This assessment is repeated periodically to quantify any change to a person's status within the above criteria, and to then action these changes in a holistic manner.



At Emmy Monash Aged Care, residents are screened **always** at their initial admission assessment and then have a review assessment bi-annually. However, residents are always re-screened post a fall and any hospital admission.



Strategies to Mitigate Falls Risks

Falls prevention is a collaborative effort and strategies will be individually employed based on the assessment of that individual and their environment. Some of the strategies utilised by Total Health Physio are but not limited to:

- Prescribing mobility equipment, such as walkers and wheelchairs
- Minimising clutter and trip hazards in residents' rooms
- Ensuring call bells are within arm's reach
- Introducing assistive technology
- Optimising room set up and other environmental components
- Reviewing high falls risk timeframes
- Optimising gait pattern
- Maintaining awareness of current falls evidence and best practices
- Strength and balance focused rehabilitation programs
- Sensor mats to alert staff when a resident is getting out of bed
- Sensor chairs to alert staff when a resident is standing from chair
- Education for carers, staff and family
- Manual handling training

Measuring Falls Rate in Residential Care

If a resident sustains a fall at Emmy Monash, this is recorded using in-house software.

The information gathered relates to:

- Time of the fall
- Where it occurred

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- Who was present
- Safety of the resident
- Assessment of injury
- Impact of the fall on mobility
- Reassessment of current gait aid
- Changes to balance and falls risk
- Check if there is an aggravation to an existing condition
- Identifying factors of why the fall occurred (lighting, spill, continence)

A detailed analysis allows Nurses, Physiotherapists & Occupational Therapists to provide recommendations using their clinical judgement close to within a 24-hour period.

Falls Prevention Committee at Emmy Monash

A *Falls Prevention Committee* established as a sub part of the Clinical Governance Committee at Emmy Monash, holds responsibility in reviewing falls, identifying causes and implementing strategies to reduce the total number of falls.

The committee's overarching objective is to maximise the safety of the residents at both an individual and group level.

Falls prevention is a collaborative effort between staff, carers, contractors, and residents to contribute towards the objective of lowering falls rates. One example of this has been the development of a *Falls Toolkit* for staff and carers. This is a mandatory 8-item checklist for carers:

- 1) Supportive shoes
- 2) Aids over bandaids – ensuring mobility aids are within reach
- 3) Eliminating Hazards – removing any clutter on ground
- 4) Adequate lighting
- 5) Call bell within reach – so residents can alert staff if they require anything
- 6) Equipment etiquette – ensuring equipment is used correctly
- 7) Anything else – prior to leaving the room ensuring residents do not require any further assistance – e.g. mobile phone within reach?
- 8) Nurse referral – if resident appears unwell or confused refer to nurse in charge



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Conclusion:

At Total Health Physio, part of our strategic plan is the provision of excellence in clinical care. By working together to maintain awareness and embrace new research in this space, we can continue to strive to improve falls rates.

Our current and holistic approach to falls prevention is evidence based and reflects Emmy Monash's mission of *"We will enrich the lives of everyone living at Emmy Monash by providing the highest quality of care, connection to Jewish life and community, and every opportunity to live life well"*.

At Total Health Physio we appreciate residents and family feedback so please feel free to contact us anytime to discuss your family member and what strategies we have put in place to help reduce the rate of falls for our residents.

About the Author



This article was written by Physiotherapist Sherrie Krampel.

Sherrie is the Director of [Total Health Physio](#), who deliver the in-house Physiotherapy & Occupational Therapy services to Emmy Monash Aged Care. Sherrie is passionate about serving the elderly community and making a difference to their every day life to allow them to live their best life!

References

1

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