

Paying attention to falls means that you are paying attention to good geriatric care.

(Dr. Shaun Peck, former Deputy Provincial Health Officer)

Fall and Injury Prevention Links

BC Injury Research & Prevention Unit
www.injuryresearch.bc.ca/

BC Patient Safety & Quality Council
www.bcpsqc.ca/

Canadian Patient Safety Institute
www.patientsafetyinstitute.ca/

Falls in Long-Term Care
<http://www.fallsinltc.ca/about.htm>

Ontario Osteoporosis Strategy for Long-term Care
<http://www.osteostratgy.on.ca/>

Public Health Agency of Canada
www.publichealth.gc.ca

Red Cross Health Equipment Instruction Sheets
<http://www.redcross.ca/article.asp?id=15831&tid=001>

RNAO Best Practices Toolkit: Implementing and Sustaining Change in Long-Term Care
<http://ltctoolkit.rnao.ca/resources/falls>

Safer Healthcare Now
www.saferhealthcarenow.ca/



CEMFIA represents a unique collaborative of researchers, health care providers and policy makers with a shared goal of improving the health and safety of older British Columbians.

CEMFIA Leadership

Dr. Vicky Scott, CEMFIA Director; Senior Advisor on Fall and Injury Prevention, BC Injury Research & Prevention Unit

Dr. Karim Khan, Professor, Department of Family Practice, UBC

Dr. Heather McKay, Director of the Centre for Hip Health and Mobility; Professor, Departments of Orthopaedics and Family Practice, UBC

Dr. Stephen Robinovitch, Associate Professor, School of Kinesiology, SFU

Dr. Maureen Ashe, Assistant Professor, Department of Family Practice, UBC

CEMFIA Partners

Centre for Hip Health & Mobility

BC Injury Research & Prevention Unit

BC Fall & Injury Prevention Coalition

BC Regional Health Authorities, Seniors' Fall and Injury Prevention Managers

BC Ministry of Healthy Living & Sport

For more information go to:
<http://www.hiphealth.ca/CEMFIA>



Prevention of Falls and Related Injuries in Residential Care



Facts of Falling in Residential Care

- * The annual average rate of falls in residential care is about 2.6 per person.
- * 10-20% of falls result in serious injuries, with 2-6% resulting in fractures.
- * Fall-related hospitalizations are 3.6 times greater for those from residential care.
- * 95% of hip fractures are due to a fall.

Who is at Risk for Falls in Residential Care?

- * All residents in residential care are at risk for falls.
- * The greatest risk is found among those with balance, gait, vision and cognitive impairments.
- * High risk groups include those with dementia, incontinence, low blood pressure and those with Parkinson's disease.

Tips for the Prevention of Falls

- * Assess for individual fall risk factors and conduct post fall assessments.
- * Implement fall prevention plan tailored to individual fall risk profiles.
- * Maintain good hydration—1.5L of fluid each day.
- * Strength and balance training.
- * Routine toileting, particularly for those with incontinence or urgency.
- * Routine medication reviews to reduce medications that increase fall risk.
- * Create safe environments—remove clutter, install handrails and grab bars, wipe up spills, etc.
- * Provide staff, family and resident education on fall risk and prevention.



Tips for the Prevention of Fractures

- * Just as prior falls are the greatest predictor of future falls, prior fractures are the greatest predictor of future fractures.
- * Fracture prevention strategies include preventing falls, and the use of hip protectors, bedside mats, sensor mats and resistant flooring.
- * Bone strengthening strategies include routine weight bearing exercise, Vitamin D and calcium supplements and, for those with osteoporosis, use of bone enhancing medications (e.g., bisphosphonates).



For more information on fall and injury prevention, see the Residential Care Summit Report to be posted on the CEMFIA website in January 2010.
<http://www.hiphealth.ca/CEMFIA>