

# **Falls Prevention Conversation Guide For Caregivers**



## **Caregivers, let's talk about keeping you and your family safe and active.**

**I**t seems like common sense — everybody falls, no matter what age. However, for many older adults, an unexpected fall can result in a serious and costly injury. The good news is that most falls can be prevented. As the caregiver, you have the power to reduce your loved one's risk of falling, and your own fall risk as well.

## **You can be a partner and a participant in falls prevention.**

This conversation guide has many purposes. Use this guide as a tool of empowerment in your role as a caregiver. Use it if you or the person you are caring for has had a fall, is experiencing decreased mobility, is unsteady on their feet, or is fearful of falling. When needed, use it to talk with other members of your family or health care professionals about creating a falls prevention action plan.

Many people think falling is common as we age. The truth is, older adults can improve balance and strength. Taking action to address the risk of falling is an important way to stay healthy and independent as long as possible. Falls prevention activities are beneficial to everyone across the lifespan, and they can be fun!

## Why is falls prevention important?

### *Falls are common*

- Falls are the leading cause of fatal and non-fatal injuries for older Americans. 1 in 4 older adults falls each year.
- Every 11 seconds, an older adult is treated in the emergency room for a fall.
- Every 19 minutes, an older adult dies from a fall.

### *Falls can cause serious injuries*

- Falls result in injuries, such as hip fractures, broken bones, and head injuries. In fact, more than 2.8 million older adults are treated in emergency departments annually because of a fall, resulting in over 800,000 hospitalizations.

### *Falls are costly*

- The average hospital cost for a fall injury is over \$30,000. Falls, with or without injury, carry a heavy burden on quality of life. After a fall, many older adults develop a fear of falling and, as a result, limit their activities and social engagements. Fear of falling can result in further physical decline, depression, social isolation, and feelings of helplessness.

### *Falls impact caregivers, too*

- Research has shown that after a care recipient's first fall, caregivers report a significant increase in caregiver burden, fear of falling, and depression.

## Why is this guide important for caregivers?

Caregiving can be a challenging role. Research has shown that the toll on the family caregiver's health appears to increase over time. If you can prevent a fall, whether it is you as the caregiver, or the person you are caring for, you can save time, stress, and money.

### *Caregivers need options to increase physical fitness*

- 1 in 5 caregivers reports a high level of physical strain as a result of their caregiving duties.

### *Caregivers need more information*

- More than 8 out of 10 (84%) caregivers state that they could use more information on or help with caregiving topics..

### *Caregivers want to worry less and keep their loved one safe*

- Caregivers most commonly want information about keeping their loved one safe at home (42%) and about managing their own stress (42%).

### *Care recipients are likely to be at-risk for a fall*

- A majority of caregivers help their loved one with at least one activity of daily living (59%), most commonly helping their care recipient get in and out of beds and chairs (43%). Three in five care recipients have a long-term physical condition (59%).



# Falls Prevention Basics

**S**taying healthy as we get older improves our day-to-day life. Those who are less physically active are at higher risk of falling. Strength and balance exercises, properly managing medications, regular vision checks, and making the living environment safer are some of the steps you and your loved one can take to prevent a fall.

## *The most common risk factors that can result in a fall:*

- **Physical risk factors:** changes in your body that increase your risk for a fall
- **Behavioral risk factors:** things we do or don't do that increase our falls risk
- **Environmental risk factors:** hazards in our home or community

## *The key is to know where to look.*

- **Muscle weakness, balance, and gait problems:** as we age, most of us lose some strength, coordination, flexibility, and balance — primarily through inactivity, making it easier to fall.
- **Vision:** in the aging eye, less light reaches the retina, which makes it harder to see contrasting edges, tripping hazards, and obstacles.
- **Medication use:** some prescription and over-the-counter medications can cause dizziness, sleepiness, dehydration, or interactions with each other that can lead to a fall.
- **Environment:** most older adults have lived in their homes for a long time and have never thought about simple modifications that can keep it safer as they age.
- **Chronic conditions:** more than 90% of older adults have at least one chronic condition like diabetes, heart disease, or arthritis. Often, these increase the risk of falling because they result in lost function, inactivity, depression, pain, or use of multiple medications.



## *Here are some steps you can take to prevent a fall.*

Falls prevention is a team effort. There are others who want to help you maintain your and your loved one's mobility and reduce the risk of falling and injuries. Below are three steps designed to help you most effectively prevent a serious injury, stay healthy, and maintain an independent lifestyle. Use the information gathered in these steps to:

- Start a conversation with the person you are caring for to determine if they are at risk for a fall.
- Identify whether you may be at risk for a fall and develop an action plan to ensure you are a strong and healthy caregiver.



## Step 1: is it time to talk about falls prevention?

This checklist will help determine if you or the person you are caring for is at risk for a fall and if further action is needed. It is meant to be answered individually. Answer the questions for yourself first, then answer them for the person you are caring for. An individual score of 4 or more points indicates that person may be at risk for a serious fall in the future.

Circle yes or no for each statement below why it matters			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 can, 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 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 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 of falling.	

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

## Step 2: talk about falls prevention with others

If you or the person you are caring for is at risk of falling based on the questions in Step 1, the next step is to have a conversation with family, friends, or those in the community who may be supportive. Use the checklist in Step 1 to take notes of your observations and bring them up at doctor appointments or when talking to anyone else who is in a position to help. The table on the right is designed to help start a conversation with the person you are caring for.

### Conversation notes

**FIRST AND FOREMOST**, educate yourself prior to the conversation. We have included some resources that may be helpful at the end of this guide. You may want to talk with other family or friends about your concerns and gather information.

**IT'S NOT EASY** to tell a friend or family member "I'm concerned about your safety and your chances of falling." Here are some tips that may help:

- Be considerate with the language used. For example, it is beneficial and supportive to say things like, "I'm worried about you and want to help."
- Be mindful of how you describe the changes you have noticed that pose a risk for falling. Be clear that you want to talk with your loved one about their overall safety. You may suggest accompanying the individual to a wellness checkup that includes a falls prevention assessment, which is a simple, routine test, like a blood pressure or diabetes screening.
- Be mindful of your tone and body language, and be positive. Know the individual's preferences and communication style.

**RECOGNIZE** that this conversation may need to happen more than once. Try to continue the dialogue and be considerate. Conversations about safety and falls prevention may be viewed as a loss of independence for some older adults.

**PAIR A DOCTOR'S VISIT** with an enjoyable activity, such as going out to lunch or something else the individual enjoys.

**BE OPEN** to changing your strategy and know what resources are available.

## Step 3: develop a falls prevention action plan

This last step provides seven strategies you can take immediately to create a falls prevention action plan. Use the risks identified in Step 1 and the conversation notes in Step 2 to inform your action plan.

### Action step



**1. Enlist support in taking steps to stay safe.** Determine if there is a reason to be concerned about falling. Many adults recognize that falling is a risk, but they believe it won't happen to them or they won't get hurt — even if they've already fallen in the past. A good place to start is by having a conversation about it — that's what this tool is intended to do. If there are concerns about falling, dizziness, or balance, it might be best to discuss with a health care provider who can further assess risk and suggest programs or services that could help.

Friend or family who will help: \_\_\_\_\_



**2. Discuss current health conditions.** Determine if you or the care recipient is experiencing any problems with managing your health. Has there been difficulty in remembering to take medications — or have there been side effects? Is it getting more difficult to do things that used to be easy? Also make sure to take advantage of all the preventive benefits now offered under Medicare, such as the Annual Wellness visit. Speak openly with your health care provider about all concerns.

Friend or family who will help: \_\_\_\_\_



**3. Note when the last eye checkup was.** Get your vision checked annually. If you or the person you are caring for wears glasses, make sure the prescription is current and the glasses are as advised by the eye doctor. Remember that using tint-changing lenses can be hazardous when going from bright sun into darkened buildings and homes. A simple strategy is to change glasses upon entry or stop until the lenses adjust. Bifocals can also be problematic on stairs, so it's important to be cautious. Those struggling with low vision should consult with a low-vision specialist for ways to make the most of their eyesight.

Friend or family who will help: \_\_\_\_\_



**4. Notice if you or the person you are caring for is holding onto walls, furniture, or someone else when walking, or if there is difficulty arising from a chair.** These are all signs that it might be time to see a physical therapist. A trained physical therapist can help improve balance, strength, and gait through exercise. They might also suggest a cane or walker—and provide guidance on how to use these aids. Make sure to follow their advice. Poorly fitted aids actually can increase the risk of falling.

Friend or family who will help: \_\_\_\_\_



**5. Talk about medications.** If you or the person you are caring for is having a hard time keeping track of medicines or is experiencing side effects like feeling dizzy or sleepy, discuss these concerns with a doctor and pharmacist. It may be best to have medications reviewed each time there is a new prescription. Keep a list of medications, including over-the-counter medications and supplements, so the list is easily accessible when visiting a doctor or pharmacist.

Friend or family who will help: \_\_\_\_\_

## Action step



**6. Do a walk-through safety assessment of the home.** Most falls happen at home. There are many simple and inexpensive ways to make a home safer. For professional assistance, consult an occupational therapist. Here are some examples:

- **LIGHTING:** Increase lighting throughout the house, especially at the top and bottom of stairs. Ensure that lighting is readily available when getting up in the middle of the night.
- **STAIRS:** Make sure there are two secure rails on all stairs.
- **BATHROOMS:** Install grab bars in the tub/shower and near the toilet. Make sure they're installed where your loved one would actually use them. For even greater safety, consider using a shower chair and hand-held shower.
- **FLOORS:** Keep floors clutter free. Remove small throw rugs or use double-sided tape to keep the rugs from slipping.

Friend or family who will help: \_\_\_\_\_



**7. Find an appropriate community-based falls prevention program.** Many communities across the country offer falls prevention programs that have been proven to help people reduce their risk and fear of falling. Below are four common programs:

**MATTER OF BALANCE For adults with moderate to high falls risk.** The program emphasizes practical coping tactics to reduce fear of falling and teaches falls prevention strategies. Structured group intervention activities include group discussion, skill building, and exercise training that can be done sitting.

**STEPPING ON For adults with moderate to high falls risk.** The program offers strategies and exercises to reduce falls and increase self-confidence in making decisions and behavioral change in situations where older adults are at risk of falling. Participants should feel safe standing and walking independently before beginning this program.

**TAI CHI For adults with lower falls risk.** Tai Chi programs help adults improve mobility, balance, strength, flexibility, and psychological health. Prior to starting Tai Chi, the participant should be able to stand on one leg for 5 or more seconds and not be fearful of falling.

**STAY ACTIVE AND INDEPENDENT FOR LIFE For adults with lower falls risk.** This physical activity program reduces falls risk factors by increasing strength and improving balance. Each class includes a warm-up, aerobics, balance activities, strengthening and stretching exercises that can be done seated or standing, and educational components.

### WHERE TO FIND FALLS PREVENTION PROGRAMS

- Local Area Agencies on Aging
- State Falls Prevention Coalitions
- Local senior center, YMCA, hospital, health clinic, or county Council on Aging

Friend or family who will help: \_\_\_\_\_

## Family caregiver perspectives on falls prevention: you are not alone!

### *Falls prevention is good for the care recipient.*

“My mother Linda\* suffered repeated falls and a broken femur. After she spent time in a rehabilitation facility and participated in 3 months of private physical therapy, her mobility was still limited by a walker and she felt isolated from her community. While flipping through a local newspaper, I saw an ad for the Matter of Balance falls prevention program. I encouraged my mom to sign up, and she begrudgingly enrolled in the 8-week program. By week 4, she was using a cane instead of her walker; by week 8, she could walk 10 minutes on her own. The program helped my mom gain confidence and reduce her fear of falling. After she completed Matter of Balance, she enrolled in a Tai Ji Quan: Moving for Better Balance program. After two and a half months of Tai Ji, she no longer needed to use a cane! She is now a certified class instructor for both Matter of Balance and Tai Ji Quan.”

— Michelle\*

*Caregiver in New Hampshire*



### *Falls prevention is good for the caregiver.*

“Matter of Balance reinforced and added to my knowledge of how to feel empowered as a caregiver. I learned many new ways and ideas to be more balanced. I enjoyed learning what changes I could make to help myself avoid falls and recover from a fall if I do have one. Realizing the benefits of exercise, and getting started with a program I can keep to was also helpful. What I enjoyed most was gaining enough strength and learning the proper technique so that I am able to get out of a chair without using my hands. This is a big deal to me! I also gained appreciation for the importance of physical and mental activities as we grow older. Practicing exercises for balance and strength; sharing experiences with other class participants, such as tips to prevent falls, tips on steps to ‘fall’ proof your house, i.e., nightlights, non-slip rugs, were all a part of what I learned through Matter of Balance.”

— Faith\*

*Caregiver in Texas*



# Additional Resources

## **National Council on Aging**

[www.ncoa.org/FallsPrevention](http://www.ncoa.org/FallsPrevention)

### **Infographics, brochures, and tip sheets**

- 6 Steps to Prevent a Fall infographic (available in English, Spanish, and Portuguese)
- 6 Steps to Preventing Falls Among Your Loved Ones
- Osteoarthritis and Falls
- Debunking the Myths of Older Adult Falls
- Winterize to Prevent Falls

### **Videos**

- 6 Steps to Prevent a Fall (available in English and Spanish)
- You Have the Power to Prevent a Fall
- Making Your Home Falls Free

### **Other resources**

- Evidence-Based Falls Prevention Program Summaries. Find a program in your community by contacting your local Area Agency on Aging, State Falls Prevention Coalition, senior center, YMCA, hospital, or health clinic.
- Falls Prevention and Healthy Aging Blog for Older Adults and Caregivers, including a blog post about 18 Steps to Fall-Proof Your Home.
- Falls Prevention in the Community: A 5-Point Checklist for Navigating Your Neighborhood
- Falls Prevention Success Stories
- Falls Prevention Awareness Day Resources

## **Centers for Disease Control and Prevention**

[www.cdc.gov/steady](http://www.cdc.gov/steady)

**Stopping Elder Accidents, Deaths & Injuries (STEADI) toolkit** *includes educational materials, including fact sheets, brochures, graphics, and tools to improve falls prevention.*

*All are downloadable and customizable.*

- Family Caregivers: Protect Your Loved Ones from Falling
- Check for Safety: Identify and Eliminate Falls Hazards in the Home brochure (available in English and Spanish)
- Stay Independent brochure (available in English and Spanish)
- What You Can Do to Prevent Falls brochure (available in English, Spanish, and Chinese)
- Postural Hypertension: What It Is and How to Manage It brochure (available in English and Spanish)

## **Go4Life**

[www.Go4Life.nia.nih.gov](http://www.Go4Life.nia.nih.gov)

An exercise and physical activity campaign from the National Institute on Aging at NIH designed to help you fit exercise and physical activity into your daily life. Download these materials or order free printed copies directly to your home.

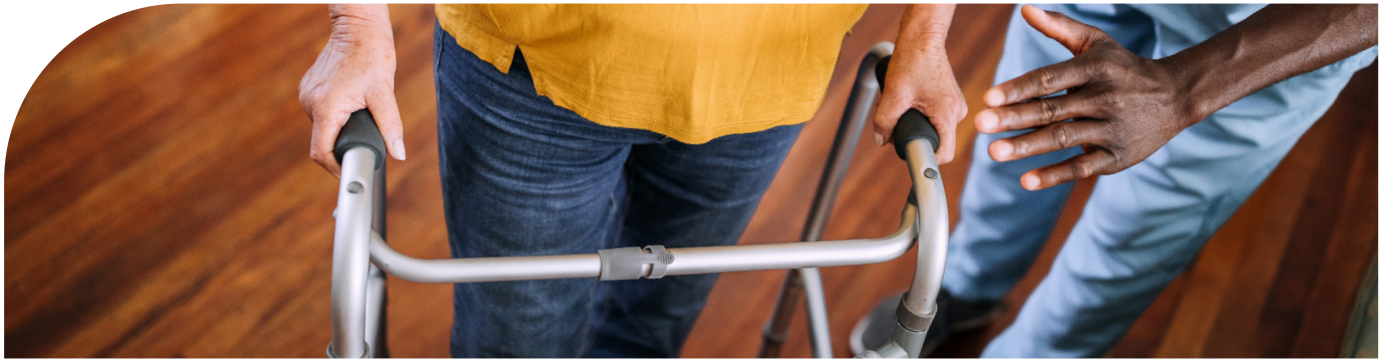
- Exercise and physical activity guide (available in English and Spanish)
- Exercise guide audiobook
- Tip sheets
- Motivational flyers
- Success stories

## **AARP**

[www.aarp.org](http://www.aarp.org)

Includes a family caregiving video series, and a guide to smart solutions for making a home comfortable, safe, and a great fit.

- Family Caregiving Video Series Guide to Mobility (Available in English and Spanish)
- Family Caregiving Video Series Guide to Medication Management
- HomeFit Guide



## References

- *Caregiving in the U.S., AARP & National Alliance for Caregiving (2015)*. Learn more at [www.caregiving.org/research](http://www.caregiving.org/research).
- Centers for Disease Control and Prevention, National Center for Injury Prevention and Control. Web-based Injury Statistics Query and Reporting System (WISQARS) [online]. Accessed August 5, 2016.
- Dow, B., Meyer, C., Moore, K. J., & Hill, K. D. (2013). The impact of care recipient falls on caregivers. *Australian Health Review*, 37(2), 152-157.
- Kuzuya, M., Masuda, Y., Hirakawa, Y., Iwata, M., Enoki, H., Hasegawa, J. & Iguchi, A. (2006). Falls of the elderly are associated with burden of caregivers in the community. *International Journal of Geriatric Psychiatry*, 21(8), 740-745.
- Meyer, C., Dow, B., Bilney, B. E., Moore, K. J., Bingham, A. L., & Hill, K. D. (2012). Falls in older people receiving in-home informal care across Victoria: Influence on care recipients and caregivers. *Australasian Journal on Ageing*, 31(1), 6-12.
- Stevens, J.A., Ballesteros, M.F., Mack, K.A., Rudd, R.A., DeCaro E., & Adler, G. (2012). Gender differences in seeking care for falls in the aged Medicare population. *American Journal of Preventive Medicine*, 59-62.
- Vellas, B.J., Wayne, S.J., Romero, L.J., Baumgartner, R.N., & Garry, P.J. (1997). Fear of falling and restriction of mobility in elderly fallers. *Age and Ageing* 26:189-193.

---

## Acknowledgements

### *National Alliance for Caregiving*

Established in 1996, the National Alliance for Caregiving is a non-profit coalition of national organizations focusing on advancing family caregiving through research, innovation, and advocacy. The Alliance conducts research, does policy analysis, develops national bestpractice programs, and works to increase public awareness of family caregiving issues. We recognize that family caregivers provide important societal and financial contributions toward maintaining the well-being of those they care for, the Alliance is dedicated to improving the quality of life for families and their communities throughout the nation.

### *National Council on Aging – National Falls Prevention Resource Center*

The National Council on Aging's National Falls Prevention Resource Center supports the implementation, dissemination, and sustainability of evidence-based falls prevention programs and strategies across the nation. The Center increases public awareness and educates consumers and professionals about the risks of falls and how to prevent them, and serves as the national clearinghouse of tools, best practices, and other information on falls prevention. The National Falls Prevention Resource Center is funded by the Administration on Aging (AoA), which is part of the Administration for Community Living (ACL), U.S. Department of Health and Human Services (HHS) through the 2014 Prevention and Public Health Fund (Grant No. 90FC2000-01-00). Grantees carrying out projects under government sponsorship are encouraged to express freely their findings and conclusions. Therefore, points of view or opinions on this website do not necessarily represent official AoA, ACL, or HHS policy.