What You Need To Know About Preventing Falls

Taking Positive Steps

Information for Patients
Falls Steering Group
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Introduction

This booklet has been written to help you understand what Kingston Hospital NHS Trust is doing to minimise the risk of falling for people who come in to hospital. Research shows that one in three older people living in the community fall each year. Some falls will result in a broken bone or other serious injury, which may result in a hospital stay. If you have suffered a fall, you may feel afraid of having another. Even if you think your fall was just 'one of those things,' there may be steps you can take to help to stop it happening again.

We would like you to be involved in your care and to work with you to provide the appropriate service. This booklet also gives an overview of what you need to know about how to prevent further falls once you are home.

What to expect when you are in Kingston Hospital

For older people who come into Accident and Emergency, a doctor or a nurse will see you. They will assess your medical condition and may refer you to the Occupational Therapist to help identify whether it is safe to discharge you home. If the Doctor feels it is necessary, you will be offered further investigations and treatment for falls and osteoporosis, to minimise your risk of breaking a bone in the future. We may admit you to a ward in Kingston Hospital or transfer you to another hospital.

On the ward, the nurse looking after you, will complete relevant assessments to ensure that you receive care that is designed to meet your needs. If you are found to be at risk of falls, a care plan will be implemented to help prevent further falls. Staff may also ask your consent to put a yellow wristband on you to alert other staff that you are at risk of falling.

Further assessment of your medication, blood pressure, vision, hearing, mobility, foot care and general safety will be done as appropriate. Problems in these areas are closely linked with an increased risk of falling so by looking at them we may be able to reduce the risk to you in the future.

We will involve you in any decisions made about your care and no decisions will be taken without your consent.

Osteoporosis

As we get older, bone starts to be lost at a faster rate than new bones can be replaced. In some individuals, the loss is so severe that their bones become weak, fragile and liable to break easily. This condition is known as osteoporosis. The most common bones to break are the hip, spine and wrist and usually this is as a result of a fall.

One in two women and one in five men will suffer a fracture after the age of 50. Fortunately, we can take measures to reduce the risk of developing this disease to enable us to maintain strong and healthy bones.

• Eat a well-balanced diet with enough calcium and vitamin D
- Take regular weight-bearing exercise such as walking
- Avoid smoking and excessive alcohol intake
- Make sure you get enough vitamin D form the sun by taking short breaks outside during the spring and summer months

Continence

Continence is the ability to control your bladder and bowel. There are many reasons why a bladder may leak or be hard to control. One example is when someone is constipated, the bowel does not empty. The bowel swells up and pushes on the bladder, increasing the need to use the toilet. Having to go to the toilet frequently, especially if your mobility is not as good as it could be, increases your risk of falling.

Talk to your doctor or nurse to find out what is causing your problems.

Medical Conditions

Research shows that having low blood pressure, heart problems, epilepsy, arthritis, stroke, Parkinson's disease or diabetes increases your risk of falling. This is because general frailty or painful joints means you are less likely to walk.

You could find yourself on the ground and not remember how you got there. You may also have experienced a fall as a result of dizziness, fainting or a blackout. It is very important that you describe the circumstances of each fall to enable the Doctor or Nurse to determine whether you have had a blackout. If you suspect that you have experienced a blackout, please tell your doctor or healthcare worker.

It is important that you see your GP to discuss how your condition should be best managed.

Medication

The risk of falls can increase when four or more different medications are taken, particularly drugs for high blood pressure, depression, diabetes, sleeping problems, heart condition or Parkinson's disease.

However, if your medication is prescribed, it is important that you take this. You should never stop taking prescribed medication without discussing it with your doctor first as this may reduce the effectiveness of the Medication or cause side effects.

When you are in hospital, the ward pharmacist will review your current medications and make suggestions to your doctor that will minimise this risk. Should you need advice once you are home, your chemist in the community will be able to give you advice, which you will be able to discuss with your nurse or GP. If you feel dizzy, weak, unsteady or confused, ask your doctor as this may be linked to your medication.
Blood Pressure

Blood pressure is a measurement of the pressure in your arteries during the active and resting phases of each heartbeat. Blood pressure readings can vary depending on body position, breathing rhythm, stress level, physical condition, medications you take, what you eat and drink, and even time of day. Blood pressure is usually lowest at night and rises sharply on waking.

Some people can experience a sudden drop in blood pressure when they stand up. This may cause you to feel dizzy, lightheaded, have blurred vision and even faint. This condition is called postural hypotension.

Postural hypotension is especially common in older adults. Postural hypotension can also affect younger people who stand up suddenly after sitting with their legs crossed for long periods or after working for a time in a squatting position.

When you are in hospital, someone will check your blood pressure regularly. If there is a drop in your blood pressure the nurse will inform your doctor, who will see if any of your medications may be contributing to this, or if you need to have further tests to determine a cause. Always tell your doctor if you experience dizzy spells or blackouts.

If you feel dizzy when getting up from bed, stay seated on the side of the bed and see if it subsides. Tell your nurse or doctor if the feeling does not subside.

Feet and Foot Care Problems

Our feet have built-in shock absorbers that carry the strain and the load of our bodies, protecting the joints of the leg and spine.

It is very important that we wear appropriate foot wear that fits comfortably around the heel and allows the toes to wriggle. It is advised that your shoe shape should be similar to the shape of your foot and has adequate fastening. Thick crepe soles are more comfortable for painful feet than thin plastic or leather ones. Never walk on slippery floors in tights or socks as this can cause you to have a fall.

Try to inspect your feet daily. Foot problems, such as corns, ulcers and long toenails may need the attention of a Podiatrist (Chiropodist). If you find that your feet are causing you problems, discuss this with your doctor or nurse as you may need to be referred to a podiatrist. You can do this once you are home as most health centres offer podiatry services.
Vision

Poor vision reduces stability and significantly increases the risk of falls and fractures in people. Most studies have found that poor vision increases the risk of falls. Be sure to wear the right glasses for the right job as wearing reading glasses while walking can be dangerous. Take care with bi-focals or vari-focals as they can distort your vision when looking up or down. It is important that you go for regular eye examinations and use prescription glasses.

If your vision is severely impaired, you can contact social services for the Sensory Impairment Team to offer advice to make your home environment safer. At 70 and beyond, you should have a full eye examination every year, even if you think your vision is good. If you are 60 or over you can get an eye test for free every other year.

Hearing

Your ears are not only your organs of hearing, they also help you keep your balance. Your inner ear contains your organs of balance and is responsible for your sense of hearing so when you have hearing problems your stability is also affected, making you at risk of falling.

Have your hearing checked every two years or anytime you or others think you are not hearing well. You can call the Royal National Institute for the Deaf (RNID) telephone hearing check on 0845 600 5555. If you have a hearing aid but are having problems with it, or it needs servicing, your nurse will be able to help you organise this.

Diet and Fluids

A healthy, balanced diet is necessary to keep you fit and well and to prevent muscle wastage and weakness. To keep bones strong, it is essential to have a good supply of calcium and Vitamin D in the diet. Rich sources of calcium are milk, cheese and yoghurt, green leafy vegetables, baked beans, eggs, pilchards, tuna and other tinned fish. To increase your defence against loss of bone mass and osteoporosis, additional vitamin D and calcium can be absorbed through high strength supplements. You would be well advised to consult your GP in this respect.

Avoid too much fat, salt, sugar and red meat. This will help keep your weight down and reduce the stress on your joints.

Water intake is vital, as dehydration can result in illness, mental confusion, and can speed the ageing process generally. By preventing dehydration you will prevent feeling giddy on standing, you will help your body get rid of the toxic effect of medicines and you will keep your brain cells active. It is recommended that you should drink at least 8 cups of water a day and more in hot weather.
It is worth noting that tea, coffee, fizzy drinks or worse, alcohol, actually contain dehydrating agents. Indeed, for every alcoholic drink you consume, you will lose the same volume of water from your body! Try placing a bottle of squash by you and sip throughout the day or drink water every time you go into the kitchen.

**Walking / Transfers/ Balance**

Your ability to walk, get in and out of bed, and going to the toilet are normally taken for granted. Once you are sitting, standing or walking, maintaining your balance is important for you not to slip, trip or fall.

It is proven that exercise, balance training, muscle strengthening and other exercise related classes have a positive effect on reducing the number of falls or reducing injury if a fall does occur.

If you have difficulties with getting to the toilet or getting out of bed, you may be referred to the Occupational Therapist or Physiotherapist for an assessment. If appropriate, a home assessment, equipment or a tailored exercise programme will be recommended. You and/or your carer will be advised on the appropriate programme for you.

**What can you do?**

Being honest with any concerns you have about falling will help others help you. Regular exercise for at least 20 minutes three times a week is recommended. This will help improve your strength and balance. If, however, you have health problems or you find yourself less mobile, it is best to speak to your nurse, doctor or therapist so they can give you advice on the best way to progress with exercising safely.

**Being safe at home**

Think about your safety before you go home from hospital. You can ask yourself these questions:

- **Stairs**
  - Do I need handrails on both sides of the stairs?
  - Is the stair carpet fitted securely?
  - Are my stairs dark?

- **Lounge area**
  - Are my carpets worn with edges that lift?
  - Do I have small rugs around?
  - Do I have to bend down or climb on chairs to reach for things?

- **Bed area**
  - Does my bed-cover trail down on the floor?
• Hallway and bathroom
  □ Is the light insufficient especially at night when I need to use the toilet?
  □ Do I use the bath without a non-slip mat or a rail?
• Furniture
  □ Do I have problems getting in and out of my chair?
  □ Do I have difficulty getting on and off the toilet?
  □ Do I struggle getting in and out of bed?
• Clothing
  □ Do I wear socks around my home, without shoes?
  □ Do my clothes trail?

If you answered yes to any of these questions then there is a risk of you having a fall at home.

You have to ask yourself what changes you can make to improve your safety at home to prevent a fall from happening.

If you have a pendant alarm, wear it at all times as this will help you to get help quickly if you have had a fall.

Should you need assistance with adaptations or environmental modification, you can request your nurse to refer you to social services or alternatively you can contact your local social services yourself.

**What to do in the event of a fall?**

First of all, keep calm. Catch your breath and compose yourself after the shock. Then check your body. If you are not badly injured, think about getting up. Look around for a sturdy surface to get hold of (a chair is ideal).

If you have a fall and can’t get up, don’t panic.

• Press your pendant alarm (if you have one) or if you can access a phone, dial 999 and ask for an ambulance
• Shout and bang on the walls and floor to attract attention
• Get comfortable - put something under your head, as a pillow
• Cover yourself with something to keep warm (clothing or a rug)
• Gently move around to avoid pressure in one place. This will also help you to keep warm. If you need to empty your bladder, roll away from damp areas or use a newspaper or item of clothing to soak up the urine.
Always tell your doctor and other professionals who are working with you about any fall. There may be a serious reason for the fall and this will need investigating.

A number of studies have shown that once an older person has had a fall, it is likely to happen again. You maybe advised to attend a Falls Clinic. These clinics are run with the aim of helping increase independence, improving your confidence and reducing your fear of falling. Here in the Royal Borough of Kingston, the Falls Clinic involves a risk assessment, exercise classes and a series of interesting lectures. You can ask your therapist for further information about the clinic.

This booklet is only a guide. If you have any questions, please ask the doctors, nurses and therapists in the ward.

**Useful Contacts**

Kingston Careline: 0845 600 7413  
NHS Direct: 0845 4647  
Royal Institute for the Blind Helpline: 0845 766 9999  
020 7388 2525  

**Royal Borough of Kingston Highways Department:**  
Where you report falls on a pavement: 020 8547 5929

**Community Care Activity Services**  
Devon Way Drop-In Centre: 020 8547 6114

**Health and Social care Teams for Older People**  
Kingston Team: 020 85476012  
New Malden Team: 020 8547 6049  
Surbiton Team: 020 8547 6849  
Chessington Team: 020 8547 6850  
Help the Aged Senior Link: 0845 053 2306

A home telephone service that connects you to a response centre for emergency assistance or reassurance, available 24 hours

**Help the Aged SeniorLine:** 0808 800 6565  
Confidential and impartial advice on benefits, care and housing issues
References

Age Concern; Older People in the United Kingdom, Key facts and Statistics 2007
British Medical Journal and National Osteoporosis Society Update on Falls prevention January 2008
Clinical Guideline 21 National Institute for Health and Clinical Excellence (NICE) November 2004
East Kent Hospitals NHS Trust What You Need To Know About Preventing Falls Leaflet June 2007
Falls Management College of Occupational Therapists 2006
H. Dirilen, Kingston Hospital, Guideline for the Prevention of Slips, Trips and Falls, 2005
National Service Framework for Older People Standard 6 DOH July 2006
Royal National Institute for the Blind (RNIB) website
Royal National Institute for the Deaf (RNID) website
Slips, Trips and Falls in Hospital PS0/3 National Patient Safety Agency (NPSA) 2007
Taking Positive Steps How to Avoid Slips, Trips and Stumbles Royal Borough of Kingston
Food Standards Agency www.food.gov.uk