

## MY FALLS RISK\*

- I have fallen in the past year.
- I use or have been advised to use a cane or walker.
- I often feel unsteady when I am walking.
- I hold onto furniture when walking at home.
- I have been diagnosed with a cognitive impairment.
- I am worried about falling.
- I push with my hands to get up from a chair or bed.
- I have difficulty stepping up onto a curb.
- I have lost some feeling in my feet.
- I am taking four or more medications.
- I take medication that sometimes makes me feel light-headed or tired.
- I take medication to help me sleep or improve my mood.
- I often feel sad or depressed.
- I often have to rush to the toilet.

***If you answered 'yes' to 4 or more of the above, you may be at risk of falling.***

- ◆ *Talk to your family doctor.*
- ◆ *Consider seeing a Physiotherapist or an Occupational Therapist for a full assessment.*

*\* Adapted from the Centers for Disease Control and Prevention, "Stay Independent" brochure*

## FALLS PREVENTION BASICS

### 1. Remove tripping hazards:

- Throw rugs
- Clutter and cords

### 2. Improve your lighting:

- Consider nightlights and/or high wattage bulbs.
- Reduce glare.

### 3. Get frequent check ups:

- Medication reviews
- Eye tests
- Foot care

### 4. Get active:

- Talk to your doctor before starting to exercise.

### 5. Step with care:

- Take your time.
- Learn how to safely use your walker or cane.
- Wear supportive, low-heeled rubber soled shoes or boots.

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## Falls Prevention Program

### CHIRS MISSION

To improve the quality of life for persons living with the effects of Acquired Brain Injury

### GOAL OF THE FALLS PREVENTION PROGRAM

To reduce the risk of client falls and fall-related injuries through:

- ◆ Education
- ◆ Screening and identifying falls risks
- ◆ Implementation of general falls prevention strategies
- ◆ Individualized plans
- ◆ Incident reporting and follow-up
- ◆ Program evaluation

### The CHIRS Falls Prevention Program aims to:

- A) Prevent falls where possible
- B) Decrease the number of falls resulting in injuries.
- C) Provide education about falls management.



### CHIRS FALLS PREVENTION PROGRAM OVERVIEW

- ◆ Staff education and training
- ◆ Functional assessments to determine client support needs
- ◆ Falls screening to identify risk
- ◆ Individualized support procedures and/or interdisciplinary prevention plans
- ◆ Preventative equipment maintenance program for assistive devices
- ◆ Client falls incident reporting and investigation process
- ◆ Use of incident report data and investigation of results to measure and evaluate the program's effectiveness

### BRAIN INJURY AND FALLS

Many of the effects of acquired brain injury (ABI) can contribute to a person's risk of falling. These may include cognitive or physical changes.

If you are living with a brain injury, or caring for someone who has a brain injury, it is important to become aware of these risks. Please refer to **My Falls Risk and Falls Prevention Basics** in this brochure to better understand if you are at risk and to learn what you can do to reduce your risk of falls and falls-related injuries.

### SERVICES FOR CHIRS CLIENTS

- Community, environmental, and safety assessments
- Co-coordinating referrals for Physiotherapy or Occupational Therapy
- Developing individualized support procedures or interdisciplinary plans
- Home environment modification
- Assistive device prescription, maintenance, and tracking

### FALLS MANAGEMENT

In order to maintain staff and client safety, CHIRS staff do not manually lift clients, nor are they able to 'catch' a falling client. Evidence shows us that when a person lifts and/or moves another person, the risk of injury increases for both people. So, to prevent injuries, it is safer to use verbal cueing and environmental supports, such as assistive devices like grab bars and transfer poles.

Please see the **Client and Family Handbook** for more information or talk

### FALLS PREVENTION

At CHIRS, our focus is on the prevention of falls whenever possible. We strive to prevent falls in a way that preserves client functioning, independence, and dignity.

We screen new clients during the intake process and, if we believe that they are at risk for falls, we help develop a plan.

Once in service, falls are captured and by our incident reporting system. New and/or worsening falls risks will be addressed collaboratively with the client, staff, and the CHIRS Occupational Therapist.

Individualized plans help to identify and mitigate risk and reduce the risk of future falls and falls-related injury.