

# Safe for Elders

## Bingo Discussion Guide



More and more people are realizing that as they get older, there is a greater chance of falling. These falls can lead to serious injuries. The topic of preventing falls and the injuries that can result has become very important to health providers over the past 10 years, particularly in First Nations communities where the number of falls and injuries is much higher than in other populations.

Ask the following questions:

### **Why is the number of falls in First Nations communities so high?**

We do not fully understand why these numbers are so high, but it seems to be connected to lower income, unsafe housing conditions, and more dangerous types of employment<sup>1</sup>.

### **Who is falling (men/women, young/old)?**

Among First Nations in BC, it is more often women, over the age of 50 years who end up in hospital because of a fall-related injury. In a younger age group of 50 years or less, men are more likely to end up in hospital due to a fall. One thing is clear, the number of falls among both men and women increases with age<sup>2</sup>.

### **What types of injuries are most common when people fall?**

The most serious injuries that occur are broken bones as well as head and brain injuries. A broken hip is the most serious type of broken bone and usually requires surgery. A broken hip can significantly change your ability to walk (even after the bone heals) and sometimes can mean that you are unable to take care of yourself without help. Minor injuries can also happen such as sprains, bruises, or scrapes<sup>3</sup>.

### **Where do falls occur most often?**

Most falls occur at home; particularly in the bathroom or on the way to the bathroom<sup>4</sup>.

### **When do people fall most frequently (morning/night)?**

Most falls among older adults occur during the morning, followed by the afternoon, evening and night.

## ***How can we prevent falls and injury from happening?***

Here are some things that you can do to prevent a fall. The more things you are able to do on the following list, the greater the chances that you can prevent a fall from happening.

- 1) Keep your body active. Even small amounts of regular movement everyday can make a big difference. Do some exercises at home, get up and sit down slowly in a chair, or go for a walk.
- 2) Have your eyes checked by an optometrist once a year.
- 3) Have your doctor or pharmacist review your medications. It is possible that there are some medications you may not need anymore or that the amount you take can be lowered.
- 4) Make your home safer. Get rid of items you might trip over, install bars that you can hold on to in the bath, and make sure there is plenty of light so you can see where you are going<sup>5</sup>.

### ***Exercise***

#### ***How does exercising/staying active help to prevent falls?***

Exercise keeps your muscles and bones strong and improves your balance so that you are less likely to fall. Even for people with arthritis, studies have shown that exercise makes the arthritis feel better. It can prevent your joints from feeling as stiff and painful. When you exercise regularly, you will feel better and may find that you are able to walk more and less likely to fall<sup>6</sup>.

#### ***How often should a person exercise?***

Engage in 30 minutes of activity every day. You do not have to do all the activity at one time. You could do 10 minutes of activity three times a day<sup>7</sup>.

### ***What kind of exercise?***

Exercise should be focused on improving balance, muscle strength and flexibility (preventing stiffness). It should also focus on increasing the time you are able to exercise without getting tired and improving your coordination. Programs that include 2 or more of these types of exercise have been shown to reduce the risk of falling<sup>8</sup>.



## ***Medications***

### ***Why is it important to review medications?***

It is important to review your medications with a health provider to identify and get rid of medication side effects. The side effects that can contribute to the risk of falling include blurring of vision, dizziness, light-headedness, sleepiness and confusion which could result in making poor decisions<sup>9</sup>.



### ***How often?***

You should go over your medications with a doctor or pharmacist at least once every year.

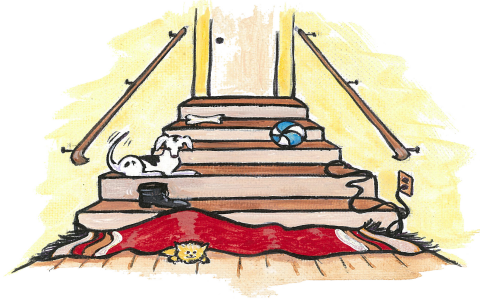
### ***Who can help with a medication review?***

Medication reviews can be done by your doctor or a healthcare provider, such as a pharmacist or nurse. Any changes in the medications you are taking should be made with the help of a healthcare provider who may recommend that you change or take less of a medication<sup>10</sup>.

## Home Safety

### *Where can you find out how to make your home safer?*

There are many ways you can find out how to make your home safer and your family or friends may be able to help you with this. Information about home safety can be found online (FindingBalanceBC.ca), at your local doctors office, from occupational therapists, or through your local health authority.



### *Is there anyone who can help with that?*

Assessing your home for changes that could make your living space safer can be done by occupational therapists. They are specially trained to help you to do as many of your usual daily activities as possible. They can recommend different tools and tricks to make your life easier and safer. Additionally, other trained health professionals (nurses & physical therapists) can work with occupational therapists to support you in your home<sup>11</sup>.

## Vision

### *How often should a person get their vision checked?*

Adults over the age of 65 should have an eye exam at least once a year<sup>12</sup>.



### *Why is it important to get your vision checked?*

Regular eye exams conducted by an eye specialist can pick up early signs of eye problems that can be treated before they interfere with your ability to see and read. You may not have any warning of these eye problems until your vision starts to get worse. Problems may include cataracts, macular degeneration, and presbyopia (a condition in which you have trouble seeing things that are close to you such as the words in a book)<sup>13</sup>.

### *What impact does vision have on fall risk?*

Poor vision can affect your balance and can also make it harder to see things in your path that you could trip or slip on<sup>14</sup>.

### **Where can you go to get your vision checked?**

Vision care is provided primarily through optometrists, and ophthalmologists. Your local health providers can connect you with these vision providers<sup>15</sup>.

## **Protective Aids**

### **What is a hip protector?**

A hip protector is a special type of pants or underwear containing pads (either hard or soft) that lie over your hips and protect the hips from breaking if you have a fall. They work best if you wear them rather than keeping them in your drawer!

### **Why is it important to use a walking aid?**

Walking aids are very helpful in preventing a fall if you have weak leg muscles (or different strength between your two legs as might happen after a stroke), if your balance is not good, if you get short of breath easily, or if your vision is poor<sup>16</sup>.

## **Tread Lightly**

### **What does 'No Plonking' mean?**

Don't drop your body into a chair quickly. Go slowly, bend your knees, use your muscles, and sit lightly. "No Plonking" is good exercise and will keep your legs strong.

*The third step in keeping yourself and your loved ones safe is to find out where to go for more information. Here are two great websites:*

[www.safeforelders.com](http://www.safeforelders.com)

[www.findingbalance.com](http://www.findingbalance.com)

**You're now ready to play  
Safe for Elders BINGO! Good luck!**

## **REFERENCES**

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<sup>1</sup> Jin A, Lalonde CE, Brussoni M, McCormick R, George MA (2015) *Injury Hospitalizations Due to Unintentional Falls among the Aboriginal Population of British Columbia, Canada: Incidence, Changes over Time, and Ecological Analysis of Risk Markers, 1991-2010.*

<sup>2</sup> Jin A, Lalonde CE, Brussoni M, McCormick R, George MA (2015) *Injury Hospitalizations Due to Unintentional Falls among the Aboriginal Population of British Columbia, Canada: Incidence, Changes over Time, and Ecological Analysis of Risk Markers, 1991-2010.*

<sup>3</sup> Centers for Disease Control & Prevention: *Important Facts about Falls, 2015.*

<sup>4</sup> (Fall Prevention Programming: Designing, Implementing and Evaluating Fall Prevention Programs for Older Adults, 2013).

<sup>5</sup> *FindingBalanceBC.ca.*

<sup>6</sup> *NIHseniorhealth.gov.*

<sup>7</sup> *FindingBalanceBC.ca.*

<sup>8</sup> *Fall Prevention Programming. Designing, Implementing and Evaluating Fall Prevention Programs among Older Adults, 2012.*

<sup>9</sup> *Preventing Falls: How to Develop Community-based Fall Prevention Programs for Older Adults, 2008.*

<sup>10</sup> *Preventing Falls: How to Develop Community-based Fall Prevention Programs for Older Adults, 2008.*

<sup>11</sup> *Preventing Falls: How to Develop Community-based Fall Prevention Programs for Older Adults, 2008.*

<sup>12</sup> *doctorsofoptometry.ca.*

<sup>13</sup> *doctorsofoptometry.ca.*

<sup>14</sup> *Preventing Falls: How to Develop Community-based Fall Prevention Programs for Older Adults, 2008.*

<sup>15</sup> *Preventing Falls: How to Develop Community-based Fall Prevention Programs for Older Adults, 2008.*

<sup>16</sup> *Falls in Older People: Risk Factors and Strategies for Prevention, 2007.*