

MY FALLS RISK

- I have balance problems
- I have a cognitive impairment (brain injury)
- I am taking four or more medications
- I have problems with my eyesight
- I use a cane, walker, or wheelchair
- I am forgetful
- I am impulsive
- I am occasionally disoriented (I lose track of time and/or place)
- I have fallen in the last 3 months
- I occasionally feel a sudden need to use the washroom

If you answered 'yes' to one or more of the above:

You are at risk of falling.

Talk to your family doctor.

Consider seeing a Physiotherapist or an Occupational Therapist for a full assessment.

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 heel



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Falls Prevention Program



Our Mission

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

Our Goal

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

- ⇒ Education
- ⇒ Screening/identifying falls risks
- ⇒ General falls prevention
- ⇒ 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

1. Staff education and training
2. Functional assessments to determine client support needs
3. Falls screening to identify risk
4. Individualized support procedures and/or interdisciplinary prevention plans
5. Preventative equipment maintenance program for assistive devices
6. Client incident reporting (number of falls, number of related injuries) and investigation process
7. Use of incident report data and investigation 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 Falls Prevention Basics and My Falls Risk section of this brochure to better understand if you are at risk and what changes you can make to help reduce your risk of falls and falls related injuries.

SERVICES FOR CHIRS CLIENTS

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

FALLS MANAGEMENT

At CHIRS we have a 'no weight bearing' policy. This means that CHIRS staff are not able to take on any client weight during daily tasks, transfers, or during falls.

CHIRS staff are not able to 'catch' a falling person, both for their own safety and for the safety of the falling person. Please see the Client and Family Handbook for more information, or talk to your Service Coordinator.

FALLS PREVENTION

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

New clients are screened during the intake process and, if they are noted to be at risk for falls, a plan is developed. If a client has falls while in service, this will be identified by our incident reporting system.

When a person lifts and moves another person, the risk of injury to both people increases. To prevent falls and injuries it is safer to use assistive devices, such as grab bars, transfer poles, or mechanical lifts.