Falling Less in Kansas

Falls Awareness and Prevention Strategies for Adults

The Falling LinKS Toolkit

Wichita State University
Regional Institute on Aging

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Introduction

At this point you may be wondering, “How does a fall occur?” Falls happen every day. People who fall often think the fall happened because of situations beyond their control. The following are some examples of how falls can occur.

On her way to answer the door, Susan did not notice her golden retriever lying on the floor. Before she knew it, Susan tripped over the dog, and unable to keep her balance, fell to the floor.

When Don woke up one morning, he had to go to the bathroom. Unfortunately, he got up too quickly and did not give himself time to adjust to a standing position. He became dizzy and fell as he stepped away from the bed.

Lucy was straightening up her living room and placing trash in the waste basket in the kitchen. On her way back into the living room, Lucy caught her foot on a throw rug. She lost her balance and fell.

One misty day Jack was on the golf course with friends. Walking off the green, on a slope, Jack lost his footing and fell down the hill.

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1 in 3 adults 65 years or older report a fall each year.[21,22]

About this toolkit

This toolkit has information and advice for everyone. It is useful for people who are fit and active as well as people who have mobility problems or are worried about falling. This toolkit will cover the top 4 risk factors for falling and steps you can take to improve in each area. The most effective strategy to prevent falling involves taking action to:

1) Improve your strength, balance and mobility

2) Identify vision problems

3) Assess your medicines

4) Make your home safer

It also tells you where to go for help if you need it.

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How to use this toolkit

- ***Read each section to find tips and tools to help reduce your falls risk.***
- ***Use the "Checklist" and "Plans" at the end of each section to guide your falls reduction strategies.***
- ***Use the "Falls Risk Reduction Plan" at the end of the toolkit to create a timeline to help monitor your risk reduction activities.***

For additional information or questions, send an e-mail to: **falling.links@wichita.edu** or visit our website: **www.wichita.edu/aging**. Additional copies of the toolkit are also available at **www.wichita.edu/aging**.

What are your concerns?

Everyone has some personal road blocks to change. These road blocks may include lack of desire, lack of time, not understanding how to get started, lack of community services, fear of hurting yourself, or medical problems that hold you back. Here are some common concerns and advice to get past them.

Concerns	Barrier	Overcoming concerns
• I'm not motivated. • I don't feel like exercising. • I'm too old; it's too late. • Exercise is not for me. • I'm too tired.	Lack of motivation	Focus on the importance and benefits of making changes. Set small goals to help you get started such as walking your dog or taking the stairs.
• I don't have time. • I have too many other things to do.	Lack of time	Make small changes on a regular basis. Start with 5-10 minutes of enjoyable daily activity. Set aside time to be active every day.
• I can't afford it. • I don't have transportation. • There's no safe place to exercise. • The weather is bad (hot, cold, etc.).	Lack of facilities	What you can do to reduce falls doesn't require expensive equipment and can be done at home.

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Fear of falling is the most common fear among older adults.[12]

What are your concerns?

Concerns	Barrier	Overcoming concerns
• I'm afraid of getting hurt. • I get too sore.	Fear of injury	Moderate activity is safe. Soreness is to be expected with any new activity and should go away in a few days.
• I don't know how to get started. • I don't know what to do.	Lack of knowledge	Follow the guidelines in this toolkit. Start by doing the things you can do easily.
• I don't have anyone to exercise with. • My friends/ family think it's a bad idea.	Lack of support from friends or family	Find a partner. Make sure your family members understand the importance of what you are doing.

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Adapted from: Page P, et al. *The Active Aging Toolkit: Promoting Physical Activity in Older Adults for Healthcare Providers*, 2004. Available at www.firststeptoactivehealth.com.[18]

Assess your risk for falls

- The first step to reduce your risk of falls is to know the risk factors.
- The more risk factors you have, the higher your risk.
- Many people do not know which factors increase the risk of falling or how to change these factors to reduce the risk.

Risk is like a chain; the weakest link can cause a fall. It is important to reduce the risk.

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1. ***Complete the form on page 7-10. It can help identify your overall falls risk and specific areas to focus on.***
2. ***After completing the form, discuss it with your health care provider, if she or he is available.***
3. ***Your health care provider can help you make healthy changes to reduce your risk for falls.***

Reducing falls risk will help keep you independent.[2,16]

My falls-free plan

Use this plan to learn what to do to stay active, independent, and falls free.

The more "Yes" answers you have, the greater your risk of falling.

Answer "Yes" if the question is at least sometimes true	Yes or No	What to do if you answered "Yes"
Have you fallen in the last 6 months?	**Yes** ☐ **No** ☐	• Talk with your health care provider(s) about your falls and/or concerns. • Show this checklist to your health care provider(s) to help you understand and treat your risks, and protect yourself from falls.
Do you take 4 or more prescriptions, over-the-counter medicines, or herbal supplements daily?	**Yes** ☐ **No** ☐	• Review your medicines with your health care provider(s) and your pharmacist at each visit and with each new prescription. • Ask which of your medicines can cause drowsiness, dizziness, or weakness. • Talk with your health care provider(s) about possible side effects or drug interactions.

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My falls-free plan

Answer "Yes" if the question is at least sometimes true	Yes or No	What to do if you answered "Yes"
Do you have to use your arms to stand up from a chair?	**Yes** ☐ **No** ☐	• Ask your health care provider(s) for a physical therapy referral to learn exercises to strengthen your leg muscles. • Exercise at least 2 or 3 times a week for 30 minutes.
Do you have difficulty walking or standing?	**Yes** ☐ **No** ☐	• Tell your health care provider(s) if you have any pain, aching, soreness, stiffness, weakness, swelling, or numbness in your legs or feet – don't ignore these symptoms. • Tell your health care provider(s) about any difficulty you have walking. • Ask your health care provider(s) if physical therapy or treatment by a medical specialist would be helpful.

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My falls-free plan

Answer "Yes" if the question is at least sometimes true	Yes or No	What to do if you answered "Yes"
Do you ever feel unsteady on your feet, weak or dizzy?	**Yes** ☐ **No** ☐	• Tell your health care provider(s), and ask if there is anything you can do to improve your condition. • Review all of your medicines with your health care provider(s) or pharmacist if you notice any of these conditions.
Has it been 2 or more years since you had an eye exam?	**Yes** ☐ **No** ☐	• Schedule an eye exam every 2 years to protect your eye sight and your balance.
Has your hearing gotten worse with age, or do you have family or friends that say you have a hearing problem?	**Yes** ☐ **No** ☐	• Schedule a hearing test every 2 years. • If hearing aids are recommended, learn how to use them to help protect and restore your hearing, which helps improve and protect your balance.

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My falls-free plan

Answer "Yes" if the question is at least sometimes true	Yes or No	What to do if you answered "Yes"
Do you exercise less than 30 minutes each day you exercise?	**Yes** ☐ **No** ☐	• Ask your health care provider(s) what types of exercise would be good for improving your strength and balance. • Find some activities that you enjoy and people to exercise with 2 or 3 days each week for 30 minutes.
Do you drink alcohol daily?	**Yes** ☐ **No** ☐	• Limit your alcohol to 1 drink per day to avoid falls.
Do you have more than 3 chronic health conditions? (such as heart or lung problems, diabetes, high blood pressure, arthritis, etc.) Ask your health care provider(s) if you are unsure.	**Yes** ☐ **No** ☐	• See your health care provider(s) as often as recommended to keep your health in good condition. • Ask your health care provider(s) what you should do to stay healthy and active. • Report any health changes that cause weakness or illness as soon as possible.

Adapted from: York S. *Stay Active and Independent for Life: An Informative Guide for Adults 65+.* Washington State Department of Health, 2006.[24]

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Toolkit sections

The following sections discuss the 4 areas identified by the Centers for Disease Control and Prevention (CDC)[6] and National Council on Aging (NCOA)[16] that you can change to reduce your falls risk.

1. **Increase physical activity**

   By improving physical strength and balance, you can reduce your falls risk. Use the exercises and activity log within this section to become more healthy and independent.

2. **Review & use medicines safely**

   Falls are one of the most common side effects of medicines. By tracking your medicines and discussing them with your health care provider, you can reduce your falls risk. You can use the attached medical information form or the File of Life or Vial of Life forms to track your medicines.

3. **Identify & screen vision problems**

   Low vision is a common cause of falls. There are simple ways to decide if you have vision problems. Within this section there are several assessment tools and resources to help identify vision problems.

4. **Increase home safety**

   Falls are often caused by hazards in the home that are easy to fix. Use the checklists and home modification tips to create a safer living environment.

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Increase physical activity

- Walking, gardening, and dancing are all good ways to stay fit and healthy. There are also other exercises you can do to improve your strength and balance.
- Exercises for strength and balance can help everyone.
- Exercises can improve your health and are a good way to reduce falls.
- Exercises can make it easier for you to be more active without needing support or someone with you all the time.
- You can fit balance training into your daily life by doing simple exercises at home. Or you may prefer to join a local exercise group, which would give you the chance to get to know new people, learn from others, and use special training equipment.

- **Yellow** exercises are **basic** activities.
- **Orange** exercises are more **advanced**.

Before trying the advanced activities, be sure that you can do all of the basic exercises first.

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Physical activity reduces the risk of falls.[1]

Exercising safely

Caution: Persons with very poor balance or at high risk of a fall should not exercise alone!

Before you get started, here is some important safety information:

- If you have any medical conditions, be sure and check with your health care provider before exercising.
- If you have pain, dizziness, trouble breathing, or begin to feel sick while exercising, stop and contact your health care provider.
- Be sure to follow the specific safety instructions provided with each exercise.
- Remember to maintain proper posture during the entire exercise to avoid injury.
- Expect some muscle soreness when starting a new activity. Use soreness as a guide. If you are very sore, decrease the intensity of your exercises. If you are sore for more than 3 days after exercise, contact your health care provider.
- Have a chair or other sturdy object near you when doing any activity in a standing position. This includes each and every balance exercise. The chair will help keep you safe in case you need to touch or grab something during the exercise.
- It is important that the exercises be done on a non-skid floor that is dry and free of clutter.
- You should also be wearing shoes that are not slick. Progress slowly from one exercise to the next. Only move on to the next exercise when you can do the one before it comfortably.

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Balance exercises

The **yellow** activities are basic activities.

The **orange** activities are more advanced.

Arm raises (front)	**Basic**
	Start with your hands at your sides. Stand up straight with shoulders and chin back. Lift your arms forward, keeping your elbows straight. Hold for 5-10 seconds and slowly lower your arms back to your sides. Repeat 10-15 times. Increase the challenge by closing your eyes or turning your head. As this gets easier, try standing on one leg while you do this exercise.
Leg raises (hip)	**Basic**
	Stand up straight with shoulders and chin back. Lift one foot off the floor, lifting your knee toward the ceiling. Hold for 5-10 seconds and then do the same on the other side. Repeat on each side 10-15 times. Keep a sturdy chair nearby in case you lose your balance. Increase the challenge by closing your eyes or turning your head.

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Balance exercises

Leg kicks (hip)	Basic
	Stand up straight with shoulders and chin back. Kick one leg forward, keeping your knee straight. Hold for 5-10 seconds and return to the starting position. Repeat 10-15 times and then do the same with the other leg. Keep a sturdy chair nearby in case you lose your balance. Increase the challenge by closing your eyes, turning your head, or kicking your leg behind you.

Semi-tandem stance	Basic
	Stand up straight with shoulders and chin back. Place one foot slightly in front of the other and hold for 10-20 seconds. Switch foot position and repeat. Increase the challenge by closing your eyes or turning your head.

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Balance exercises

Tandem stance (narrow)	Basic
	Stand up straight with shoulders and chin back. Put one foot in front of the other, heel to toe. Touch the heel of one foot to the toes of the other for 10-20 seconds. Switch foot position and repeat. If this is too challenging, return to the semi-tandem position. Increase the challenge by closing your eyes or turning your head.

One-leg balance	Basic
	Stand up straight with shoulders and chin back. Lift one foot off the floor and hold for 10-20 seconds. Try not to touch the floor or your other leg. Repeat on the opposite side. Keep a sturdy chair nearby in case you lose your balance. Increase the challenge by closing your eyes or turning your head.

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Balance exercises

Chair squat	Advanced
	Stand behind a sturdy chair with feet shoulder-width apart. Slowly lower your hips by bending your knees. Hold for 5-10 seconds and slowly return to the starting position. Keep your back straight. Repeat 10-15 times. Increase the challenge by holding light weights in your hands.

Calf raises	Advanced
	Stand with feet shoulder-width apart. Raise your heels off the floor, standing on your toes. Hold and slowly return your heels to the floor. Keep your back straight. Repeat 10-15 times.

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Balance exercises

Leaning	Advanced
	Place your feet shoulder-width apart. With your feet flat on the floor, lean forward as far as you are comfortable. Hold for 5-10 seconds. Repeat by leaning to the right, left and backward. Keep your back, hips, and knees straight. Keep a sturdy chair nearby in case you lose your balance. **Variation**: “Write” the alphabet by outlining the letters with your body sway.
Tandem walking	**Advanced**
	Also known as “tightrope” walking: Put one foot in front of the other, heel to toe. Bring the back foot forward, placing that heel in front of the toes of the other foot. Repeat for 10-20 steps.

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Balance exercises

Cross-over walk	Advanced
	Start with your feet shoulder-width apart. Step to the side with your left foot. Cross your right foot in front of the left foot. Step sideways with your left foot. Cross your right foot behind the left foot. Repeat 10-20 times, then reverse direction.

Forward reach	Advanced
	Extend your arms forward. Lean forward as far as you comfortably can for 5-10 seconds. Keep your feet flat on the floor, and your back and knees straight. Keep a sturdy chair nearby in case you lose your balance.

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Adapted from: Page P, et al. *The Active Aging Toolkit: Promoting Physical Activity in Older Adults for Healthcare Providers*, 2004 Available at www.firststeptoactivehealth.com.[18]

My physical activity checklist

Copy this form before you fill it out

- An activity log is helpful to track your progress.
- Check the boxes below for days you perform each activity.
- You can also write the number of times you perform the activity each day.

Check:

Activity	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Arm raises							
Leg raises							
Leg kicks							
Semi-tandem stance							
Tandem stance							
One-leg balance							
Chair squats							
Calf raises							
Leaning							
Tandem walking							
Cross-over walking							
Forward reach							

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My physical activity plan

Copy this form before you fill it out

How to use the physical activity plan

This is a guide to help you plan a physical activity strategy to reduce your falls risk. Identify tasks and create a timeline you plan to follow.

Check if the task is completed

Task	Timeline	✓
Exercise 3 times a week	**Start Monday.** **Continue for 6 weeks.**	✓

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Review & use medicines safely

- Falls are one of the most common side effects of medicines.[22,4]
- Taking more than 4 medicines each day may increase your falls risk.[2]

Talking with your health care provider

- Discuss your medicines with a health care provider (pharmacists, physicians, physician assistants, and nurse practitioners) at least yearly.

- Bring all of your prescriptions, over-the-counter medicines, and herbal supplements with their original containers. Bringing the original containers with you will help your health care provider check for possible problems.

- Ask if any of your medicines might cause falls, if all your medicines are needed, and if any safer choices exist.

- Keep a complete list of all your medicines: prescription, over-the-counter, and herbal. This list should be carried with you to all your medical appointments. It can be a good way to start the medicine discussion with your health care provider.

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Falls are the leading cause of injury-related deaths in people 65 and older.[6]

Review & use medicines safely

Tracking your medicines

- "File of Life" and "Vial of Life" are both tools to help you keep track of your medicines. You can complete the form yourself or with the help of your health care provider(s). The form lists your medicines and medical and emergency contact information.
- Many communities already use the File of Life or Vial of Life programs. In these communities, you may be able to get kits from your local EMS, firefighters, or local pharmacy.
- File of Life can be purchased on *www.folife.org* for a small fee.
- Vial of Life is free and can be found at *www.vialoflife.com.*
- You can also use the forms found in this toolkit.
- It is a good idea to keep one of these forms with current information on the door of your refrigerator. This will make it easy for EMS and firefighters to find in case of an emergency.
- You should bring a copy with you to all your medical appointments.

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Important medical information

Copy this form before you fill it out

Date: _____

Personal information

Name: _____

Sex: ☐ Male ☐ Female

Phone: _____

Address: _____

_____

_____

Date of birth: _____

Allergies: _____

_____

Blood type: _____

Religion: _____

Emergency contacts

Contact #1:

Name: _____

Relationship: _____

Phone: _____

Address: _____

_____

Contact #2:

Name: _____

Relationship: _____

Phone: _____

Address: _____

_____

General medical information

Primary Care Physician:

_____

Physician phone:

_____

Pharmacy: _____

Pharmacy phone: _____

Primary medical insurance company:

_____

Name: _____

Policy #: _____

Secondary medical insurance co.:

_____

Name: _____

Policy #: _____

Do you have a Health Care Proxy?

☐ Yes ☐ No

Who is your Health Care Proxy?

_____

Phone: _____

Do you have a “living will” on file?

_____

Do you have a Do Not Resuscitate (DNR) form? ☐ Yes ☐ No

Where is it? _____

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Copy this form before you fill it out and keep this form up to date.

Medicines			
Drug name	Taken for	Dosage	Frequency

Recent Surgeries, Tests, or Medical Procedures	
Name of procedure	Date

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Taking medicines safely

- Always take your medicines exactly as directed.
- Read all the information that comes with your medicines and ask questions if anything is unclear.
- Report any symptoms or side effects to your health care provider, especially if starting a new medicine.
- Know why you are taking each medicine and know its most common side effects.
- Medicines should not be used if they are outdated. If there is no expiration date, assume it is outdated after one year, and throw it away.
- Keep taking medicines until they are gone.
- Never take medicines in the dark. Make sure the lighting is good in the area where you take your medicines.
- Get to know your pharmacist. She or he can be a useful health resource.

Many medicines cause side effects like dizziness, tiredness, walking problems, confusion, blurry vision, and weak bones that can cause falls.[4]

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Uneven sidewalks and lack of handrails on stairs can cause falls outside the home.[16,19]

Storing medicines safely

- It is best to keep all your medicines in the same place. This will help them stay organized.
- To avoid mix-ups, keep your medicines separate from those of your other family members.
- Keep your medicines secure so that a child, teenager, or stranger does not get into them. This helps prevent accidental injury and abuse of prescription medicines. A cabinet or drawer with a lock works very well.
- Throw out medicines you are no longer using. It is unsafe to use these medicines to treat someone else or even yourself.

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My medicine checklist

Copy this form before you fill it out

Check:

- [ ] Talk with your health care provider about the medicines you are taking.
- [ ] Fill out a medical information sheet and place it on your refrigerator.
- [ ] Use the tips for taking & storing medicines safely as a guide to help you prevent falls.

My medicine review plan

How to use the medicine review plan

This is a guide to help you plan a medicine review strategy to reduce your falls risk. Identify tasks and create a timeline you plan to follow.

Check if the task is completed

Task	Timeline	✓
Schedule a review of my current medicines with a pharmacist	**Within the next 30 days**	✓

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Identify & screen vision problems

- Vision problems can include blurry vision and glare.
- You may also have problems going from light to dark, or have poor depth perception.

People with vision problems are 2 to 3 times more likely to fall.[2,14]

- These conditions can increase falls risk because they affect balance and decrease your ability to see clearly.
- Vision problems often lead to orientation and mobility problems, including:
  - Loss of depth perception - making it difficult to tell how high or low a step or curb is
  - Loss of contrast - making it hard to see curbs or steps, or not being able to tell the difference between a puddle or a hole in the sidewalk
  - Seeing spots that block vision - making it hard to identify landmarks or see obstacles in your path
  - Loss of side vision - making it hard to move around because you can't see to the side
- There are simple ways to tell if you have vision problems.
- ***Use the following vision assessment tools and resources to evaluate your vision.***

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Vision screening tools

In this section you will find several vision assessment tools and resources.

The Amsler Grid - page 31

The Amsler Grid is a simple screening test. It is a grid with a small dot located in the center. While staring at the dot, look for wavy lines and missing areas. This test is especially helpful for monitoring vision at home.

Functional Vision Screening Questionnaire (FVSQ) - page 32 - 33

The Functional Vision Screening Questionnaire tool was developed for use by anyone. The FVSQ is a 15-item yes/no screening tool to help you identify vision problems. The questions ask about everyday activities such as being able to see newspaper print or having problems seeing the TV. A score of 9 or more on the FVSQ means you may need a vision check.[20]

Low vision tip sheet - page 34

This tip sheet contains good tips about things you can change in your daily life when faced with low vision.

Orientation & mobility - page 35

The orientation & mobility sheet contains tips and resources about things you can change that will help you move about safely.

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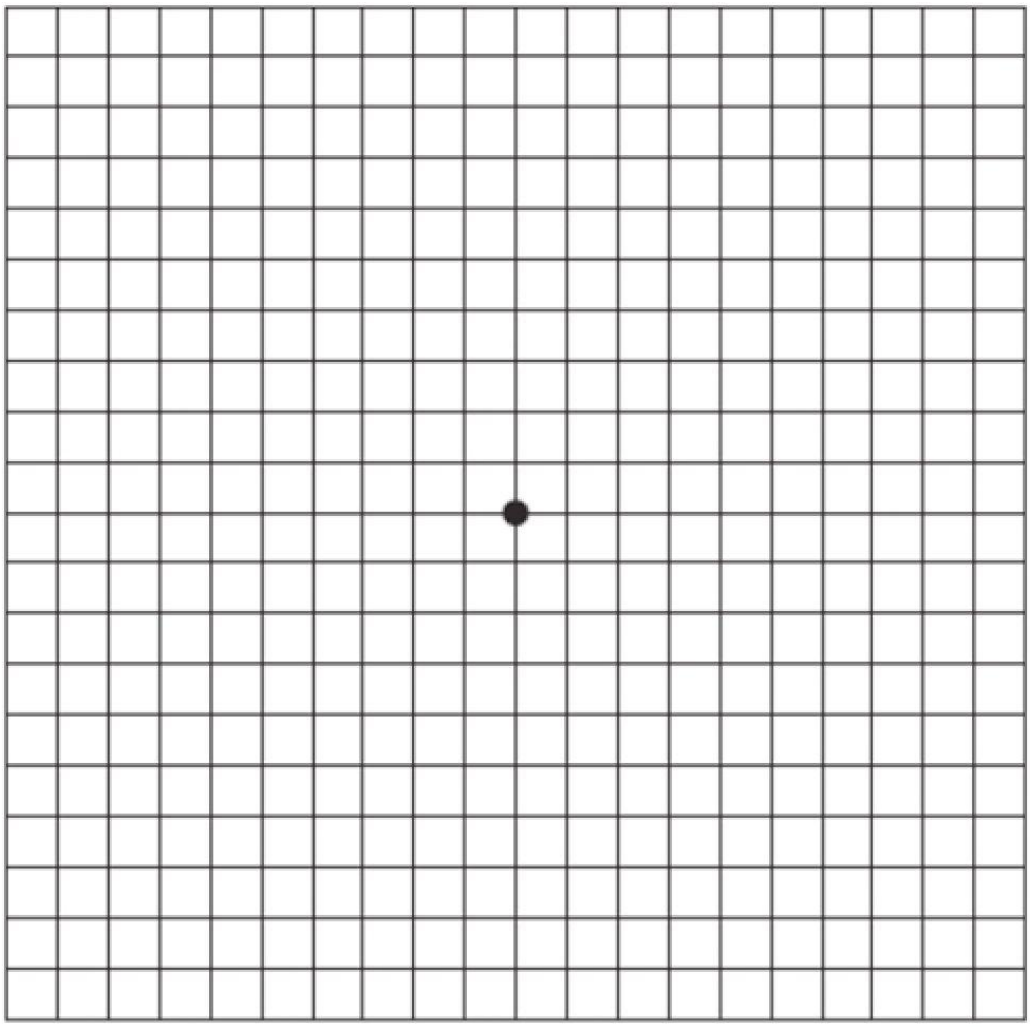
Amsler Grid

Monitoring your vision daily is important - keep this grid in a convenient place.



Provided by: Envision Vision Rehabilitation Center

How to use:

- Wear the glasses you normally wear when reading.
- Hold the grid at the same distance as normal reading material.
- Cover one eye at a time with your hand.
- Stare at the dot in the center for a few seconds. Do not let your eye drift from the center dot.
- Contact your eye care doctor as soon as possible if any of the straight lines appear wavy or bent, any of the boxes differ in size or shape from the others, or any of the lines are missing, blurry or discolored.

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Functional Vision Screening Questionnaire

This questionnaire will help you identify whether you have a vision problem. If you wear glasses or contact lenses, answer the questions in terms of how you see when wearing your glasses or contact lenses. This does not include the use of low vision devices.

Circle your answer. Score a "0" or "1" for every "Yes" or "No" answer, as indicated. Add your scores at the end of the questionnaire.

1. Do you ever feel that problems with your vision make it difficult for you to do the things you would like to do?

   Yes = 1 No = 0

2. Can you see the large print headlines in the newspaper?

   Yes = 0 No = 1

3. Can you see the regular print in newspapers, magazines, or books?

   Yes = 0 No = 1

4. Can you see the numbers and names in the telephone book?

   Yes = 0 No = 1

5. When you are walking in the street, can you see the "WALK" sign and street names?

   Yes = 0 No = 1

6. When crossing the street, do cars seem to appear very suddenly?

   Yes = 1 No = 0

7. Does trouble with your vision make it difficult for you to watch TV, play cards, sew, or any similar type of activity?

   Yes = 1 No = 0

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8. Does trouble with your vision make it difficult for you to see labels on medicine bottles?

Yes = 1 No = 0

9. Does trouble with your vision make it difficult for you to read prices when you shop?

Yes = 1 No = 0

10. Does trouble with your vision make it difficult for you to read your mail?

Yes = 1 No = 0

11. Does trouble with your vision make it difficult for you to read your handwriting?

Yes = 1 No = 0

12. Can you recognize the faces of family or friends when you are across an average-sized room?

Yes = 0 No = 1

13. Do you have any difficulty seeing in dim light?

Yes = 1 No = 0

14. Do you tend to sit very close to the television?

Yes = 1 No = 0

15. Has a doctor ever told you that nothing more can be done for your vision?

Yes = 1 No = 0

Total score: _____

A total score of 9 or more indicates that you need a vision exam by a low vision eye doctor or ophthalmologist.

Adapted from: Stelmack JA, et al. *Investigative Ophthalmology and Visual Science*.[20]

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Low vision tip sheet

What is low vision?

You have low vision if reduced vision affects your daily activities. It is a broad term that covers many types of vision loss including: reduced sharpness of vision, loss of side vision, and reduced contrast.

This low vision tip sheet gives you ideas to make it easier to see in your home.

Bathing

- Use a dimmer switch to control glare.
- Apply contrast tape, or put a dark towel on the edge of the bathtub.
- Put a colored, non-skid mat or non-skid strips on the bottom of the bathtub to provide a contrast and prevent falls.
- Use towels that contrast with the wall color. Also use contrasting toilet seat covers and tissue boxes.

Safety within your home

- Keep furniture in the same place and put items back in their places.
- Keep cabinet doors either fully closed or fully open. Doors that are partially open can cause injuries and accidents. You can also place contrasting tape on doors for easier identification.
- Mark thresholds and steps with contrasting tape, paint, or tread strips. At least mark the first and last steps of the stairway.
- Place contrasting doilies or fabric on the backs and arms of chairs.
- Place a bright fabric or centerpiece on the coffee table. Outline the coffee table with contrasting tape.

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Orientation & mobility

If you have vision concerns, you may feel unsure about your safety. Skills training provided by a certified orientation and mobility specialist can help you, whether you have reduced or no vision.

Mobility specialists can assess your ability to get around on your own and give you tips to improve your mobility in your home, neighborhood, and workplace.

There are many things you can learn to do to move about safely. You can learn to make the most of your current vision. Or you may wish to learn to use another person, a white cane, or even a guide dog to help you get around.

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To learn more about Orientation & Mobility training or for more information about local services:

Contact Envision Vision Rehabilitation Center at 316-440-1600.

ENVISION
Vision Rehabilitation

Age-related changes in nerves and muscles can impair your ability to walk or react to a sudden loss of balance.[15]

My vision checklist

Copy this form before you fill it out

Check:

- ☐ Use the Amsler Grid daily.
- ☐ Complete the Functional Vision Screening Questionnaire.
- ☐ Schedule an annual eye exam with your eye doctor.
- ☐ Use the low vision tip sheet to identify safety hazards within your home.
- ☐ Seek orientation & mobility skills training, if desired.

My vision plan

How to use the vision plan

This is a guide to help you plan a vision strategy to reduce your falls risk.

Identify tasks and create a timeline you plan to follow.

Check if the task is completed

Task	Timeline	✓
Schedule annual eye exam	**Within the next 30 days**	✓

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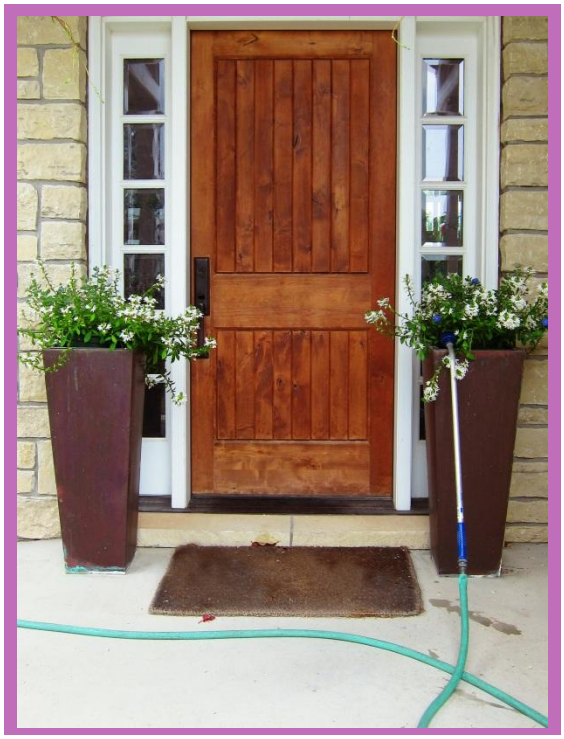
Increase home safety

If you're like most people, you don't think about making your home safer until you have fallen, had a major surgery, or had a hospital stay. It's easy to put home safety changes on hold if you're worried about the cost, feeling overwhelmed, or think it's too soon for changes.

- Falls in your home may occur when you are doing normal everyday activities.
- Some falls are caused by changeable factors in your home such as a poorly lit stairway, a slick floor, or a throw rug.
- Many falls can be prevented by making simple changes, several of which don't cost anything.
- Falls are often due to hazards that are easy to overlook but easy to fix.



- Take action to "fall proof" your home inside and out.
- ***Use the following tips and checklist to develop the best home safety plan.***

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Home safety plan

Use this plan to identify hazards in each room of your home. For each hazard you identify there is a recommendation for how to fix the problem.

Floors (Look at the floor in each room)

Answer questions	Yes or No	What to do if you answered "Yes"
When you walk through a room, do you have to walk around furniture?	Yes ☐ No ☐	• Move the furniture so your path is clear.
Do you have throw rugs on the floor?	Yes ☐ No ☐	• Remove throw rugs or use double-sided tape or a non-slip backing so the rugs won't slip.
Are there papers, books, towels, shoes, magazines, boxes, blankets, or other objects on the floor?	Yes ☐ No ☐	• Pick up any objects that are on the floor.
Do you have to walk over or around wires or cords (like lamp, television, or extension cords)?	Yes ☐ No ☐	• Coil or tape cords and wires next to the wall so you can't trip over them. If needed, have an electrician put in another outlet.
Do you have slick floors?	Yes ☐ No ☐	• Use non-slip or non-skid floor wax, or none at all. If you have hardwood floors, consider carpet.

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Home safety plan

Lighting (Look at the lighting in each room)

Answer questions	Yes or No	What to do if you answered "Yes"
Do you have burned-out bulbs or dim lighting in your home?	Yes ☐ No ☐	• Replace burned-out or dim bulbs with the highest wattage bulbs allowed for each fixture in all rooms and stairways.
Do you have non-working or no flashlights in your home?	Yes ☐ No ☐	• Replace non-working flashlights. Put several flashlights throughout your house and check the batteries regularly.

Furniture (Look at the furniture in each room)

Can you easily get in and out of all of your furniture?	Yes ☐ No ☐	• Replace furniture that you frequently use that is difficult to get in and out of with furniture that is knee height or higher. Arm rests make it easier to get in and out of furniture.
Can you reach your phone from the floor?	Yes ☐ No ☐	• Keep a phone on a low table within reach of the floor.

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Home safety plan

Stairs and steps (look at the stairs you use both inside and outside your home)

Answer questions	Yes or No	What to do if you answered "Yes"
Are there papers, shoes, books, or other objects on the stairs?	**Yes** ☐ **No** ☐	• Pick up any items that are on the stairs.
Are some steps loose, broken, or uneven?	**Yes** ☐ **No** ☐	• Fix loose, broken, or uneven steps.
Is your stairway dark?	**Yes** ☐ **No** ☐	• Have an electrician put an overhead light at the top and bottom of the stairs.
Is the carpet on the steps loose or torn?	**Yes** ☐ **No** ☐	• Make sure the carpet is firmly attached to every step, or remove the carpet and attach non-slip rubber treads to the stairs.
Are the handrails loose or broken? Is there a handrail on only 1 side of the stairs?	**Yes** ☐ **No** ☐	• Fix loose handrails or put up new ones. • Make sure handrails are on both sides of the stairs and are as long as the stairs.

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Home safety plan

Kitchen (Look at your kitchen and eating area)

Answer questions	Yes or No	What to do if you answered "Yes"
Are the things you use most often on high or low shelves?	Yes ☐ No ☐	• Move items so that the things you use most often are on shelves at about waist level.
	Yes ☐ No ☐	• If you must use a step stool, get one with a bar to hold on to. Never use a chair as a step stool.

Bathroom (Look at all your bathrooms)

Is the tub or shower floor slippery?	Yes ☐ No ☐	• Put a non-slip rubber mat or self-stick strips on the floor of the tub or shower.
Do you need support or help when you get in or out of the tub or up from the toilet?	Yes ☐ No ☐	• Install grab bars inside the tub and next to the toilet.

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Home safety plan

Bedrooms (Look at all your bedrooms)

Is the light near your bed hard to reach?	**Yes** ☐ **No** ☐	• Place a lamp close to your bed where it's easy to reach.
Is the path from your bed to the bathroom dark?	**Yes** ☐ **No** ☐	• Put in a night light so you can see where you're walking. Some night lights go on by themselves after dark.

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Adapted from: York S. *Stay Alive and Independent for Life: An Informative Guide for Adults 65+*. Washington State Department of Health, 2006,[24] and *CDC Check for Safety: A Home Fall Prevention Checklist for Older Adults*. Department of Health and Human Services, 2005. [7]

Home modification tips

Below are tips you can use to make modifications in your home to help prevent falls. They are divided into three categories: little or no cost, moderate cost, and significant cost.

Little or no cost

- Install non-slip mats in laundry areas.
- Provide adequate space to move around furniture.
- Remove wheels from furniture.

Falls can be caused by loose carpet, electrical wires on the floor, lack of handrails on stairs, dim lighting, and slick floors.[19]

- Remove/repair unstable furniture.
- Adjust chair and bed height to make them easier to get in and out of.
- Install night lights in hallways.
- Ensure that carpets (especially on stairs) and area rugs have skid-proof backing or are tacked to the floor.
- Mark doorway thresholds.
- Use a remote for the television.
- Place fluorescent tape on edges of top and bottom steps.

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Home modification tips

Moderate cost

- Add ceiling lights to rooms where needed.
- Install motion-, voice-, or sound-activated lamps.
- Move electrical outlets and light switches so they are easy to reach.
- Use a portable phone that can be taken from room to room.
- Install a phone extension on each floor and in each room.
- Use a change in color to designate a change in surface type or level.
- Use heavy furniture that will not tip if used for support.
- Install handrails at a comfortable height and easy to grip in bathrooms and on both sides of hallways and stairs.
- Install assistive devices such as a shower seat, bath bench, shower hose, and raised toilet seat.
- Use a bed mattress with firm edges to make it easier to get in and out of.
- Place gates in open doorways leading to stairways.
- Install an electronic emergency response system.
- Install lamps that can be turned on by a switch near the entryway of the room.
- Paint stairs alternating colors to improve contrast between steps.
- Install bars on the sides of the bed.

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Many falls are caused by carrying something like a purse, laundry basket, or grocery bag.[8]

Home modification tips

Significant cost

- Modify stairs so they have a lower gradient and more depth.
- Install walk-in showers that are easy to enter and exit.
- Install easy-to-reach shelves and drawers in the kitchen and bathroom.
- Put bathroom and laundry facilities on the same floor as the bedroom.
- Install non-glare surfaces and use non-glare paints.
- Install touch-sensitive flooring in the bedroom that activates the lighting system.

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Adapted from: Rogers ME, et al. *Journal of Housing for the Elderly*, 2004.[19]

My home safety checklist

Copy this form before you fill it out

Check:

- ☐ Use the home safety plan to identify & fix falls risks.
- ☐ Identify what you can do for your home, whether it is of little or no cost, moderate cost, or significant cost.
- ☐ Make a list of what you want to do to improve your home's safety.
- ☐ Prioritize your list. Making changes one at a time is easier than trying to do it all at once.
- ☐ Check with your local Area Agency on Aging (800-677-1116) for senior home repair and modification programs that offer financial assistance if needed.

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My home safety plan

How to use the home safety plan

This is a guide to help you plan a home safety strategy to reduce your falls risk. Identify tasks and create a timeline you plan to follow.

Copy this form before you fill it out

Check:

Task	Timeline	✓
Install non-slip mats in laundry areas	**Within the next 30 days**	✓

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Falls risk reduction plan

Copy this form before you fill it out

How to use this falls risk reduction plan

The most effective strategy to prevent falling involves taking action to improve in the 4 major areas. This falls risk reduction plan is a guide to help you plan steps you will take to reduce your falls risk in these areas. Write out the steps you will take and your timeline to complete them.

Check if the task is completed

My falls-free plan

Toolkit reference pages 7-10

Task	Timeline	✓

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Falls risk reduction plan

Copy this form before you fill it out

☑ **Check if the task is completed**

1. Increase physical activity Toolkit reference pages 12-21

Task	Timeline	✓

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Falls risk reduction plan

Copy this form before you fill it out

☑ Check if the task is completed

2. Review & use medicines safely — Toolkit reference pages 22-28
3. Identify & screen vision problems — Toolkit reference pages 29-36

2. Review & use medicines safely		
Task	Timeline	✓

3. Identify & screen vision problems		
Task	Timeline	✓

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Falls risk reduction plan

Copy this form before you fill it out

Check if the task is completed

4. Increase home safety

Toolkit reference pages 37-47

Task	Timeline	✓

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Falling LinKS

Falling LinKS is a collaborative research effort among Wichita State University, Envision Low Vision Rehabilitation Center, the United Methodist Health Ministry Fund, the Harvey County Department on Aging, and the citizens of Harvey County.

The Falling LinKS Development Team developed a toolkit about falling and how to reduce the chances of falling. The toolkit is for people who want to maintain their active lives and prevent a fall.

Most fall education and prevention programs require health care professionals. Our toolkit is designed for people who live in rural areas where health care resources are often scarce. You can use the toolkit in the privacy of your own home to learn about falls and the steps you can take to prevent them.

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The Falling LinKS Research Team (formed 2012) includes Drs. Radebaugh, Hale, M. Rogers, N. Rogers (Wichita State University); Ms. Kendrick and Mr. Riley (Envision). The Research Team is supported by Rosemary Wright, Wichita State University doctoral student.

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