

**Office of Integrated Health  
Health & Safety Information**

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## Preventing Falls

There are many different reasons a person with intellectual and developmental disabilities may fall. The reasons may be related to physical factors or environmental factors.

Physical factors may include: poor vision, neurological disorders, unsteady gait, poor balance and weak muscles, and poor judgement in knowing the difference between safe and dangerous activities.

Environmental factors that can increase the risk for fall may include: slippery floors, loose carpets or unstable rugs, poor lighting, poorly fitting footwear, lack of surfaces to grab, seat heights that are too low, and improper utilization or poor repair of canes, walkers, and wheelchairs. ([http://www.idph.state.il.us/idhp/idhp\\_Falls.htm](http://www.idph.state.il.us/idhp/idhp_Falls.htm))

### Preventing Falls

The goal of preventing falls should focus on minimizing the risk of falls and the risk of injurious falls, while still maintaining individual independence.

The first step in preventing a fall is assessing if the individual is at risk. Do they have a history of falls? Do they have any of the significant physical risk factors? Be sure to do an environmental assessment. Are there objects blocking the individuals pathways? Are all assistive devices (e.g., wheelchair, shower chair, chair lifts, etc.) in proper working order? Does the room have proper lighting?

The next step would be to let all persons involved in care of the individual know that they may have a certain level of risk for falls. They may need to involve certain measures to limit and reduce to risk of fall.

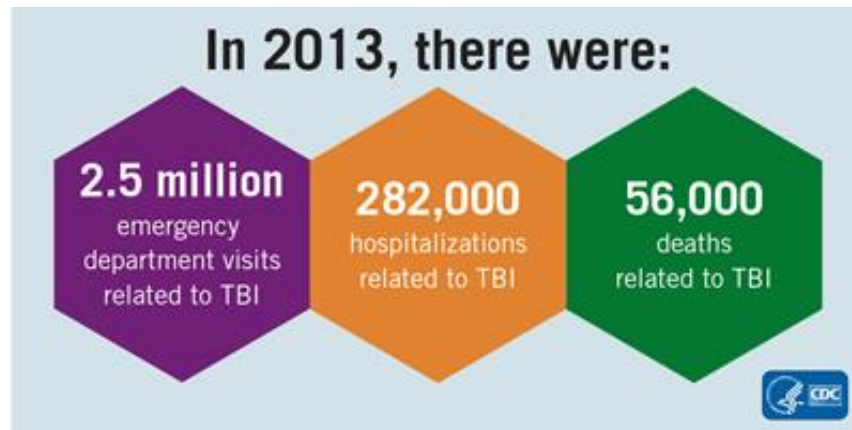
### After a Fall

Many falls do not cause injuries; however, a person may sustain a serious injury. Head injuries and Traumatic Brain Injuries (TBI) can be very serious, and if a person suspects a head injury, such as a concussion, they should seek immediate medical care.

For information about TBI/concussions, please watch this short video:

<https://medlineplus.gov/ency/anatomyvideos/000034.htm>

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Falls can cause broken bones, like wrist, arm, ankle, and hip fractures. Sometimes, if a person falls and sustains no injury, they can still develop a fear of falling. This can cause a person to avoid daily activities that they previously enjoyed, which decreases their activity level. A decrease in activity can, over time, cause a person to become weak and increase their chance of falling.

### **Recommendations**

Awareness of risk is important. Be alert to symptoms of changes in a person's health status and seek guidance from a health professional for any changes. With a change in any person's health status, results in acute care through an ED visit, Urgent Care visit, or hospitalization, be sure to follow up on any recommended changes from the PCP or licensed provider.

You should also consider including the following in the individuals care plan:

- Attend regular appointments with a health care provider including specialists, as recommended.
- Consult with specialists (Podiatrists, Physical Therapists, Recreational Therapists, Occupational Therapists, etc.) regarding proper footwear, balance problems, and strength training.
- Consult with Ophthalmologist and Audiologist to maintain vision and hearing.
- Follow all protocols and guidance from health professionals.
- Assure competency of the staff for implementing all recommendations made by health care providers.

### **Resources**

Having properly working mobility equipment and assistive devices is imperative for reducing risk of falls. DBHDS, Office of Integrative Health has a Mobile Rehab Engineering (MRE) program, which ensures that individuals who rely on durable medical equipment, such as wheelchairs, shower chairs or other mobility equipment and have access to maintenance and repair services that do not already exist. Information can be found at:

<http://www.dbhds.virginia.gov/individuals-and-families/office-of-integrated-health>

[http://www.idph.state.il.us/idhp/idhp\\_Falls.htm](http://www.idph.state.il.us/idhp/idhp_Falls.htm)

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