

## OASIS Alert

### Adverse Events: 5 Falls Risk Factors That Could Trip You Up On Your Next Survey

Falls can be caused by seemingly insignificant issues, so don't neglect the basics, says consultant **Pam Warmack** with **Clinic Connections** in Ruston, LA.

**1. Diminished vision** may make it hard for patients to see in poorly lighted rooms. Note contrasts between bright and dim rooms, patients limiting electricity use to save money and those with outdated eye-glass prescriptions, Warmack suggests. If poor vision is a problem, make the environment safer.

**2. Limited mobility** may indicate a need for supportive devices for walking or transfers, emphasis on a hazard-free environment, easy-to-handle clothing and safe footwear, Warmack says. Therapy can assist with strengthening exercises that improve balance and confidence. Anxiety increases falls risk, so be careful not to instill fear with your teaching, she adds.

**3. Cognitively impaired** patients may be quite mobile, but unsafe because of diminished judgment, finds physical therapist **Diane Huss** with Charlottesville, VA-based **Continuum Home Health Care**. Teach caregivers falls prevention and how to create a hazard-free environment. Patients may need cues to remember to use walkers and safety locks to keep them from wandering, Warmack notes.

**4. Six or more medications** increased falls risk in her audits, Warmack reports. Changes in the combinations of medications or in the times they are taken may decrease falls risk, she says. Pursuing this also provides an opportunity to communicate concerns to the physician before the patient falls.

**5. Previous falls** remains a prime predictor of future falls, experts agree. During an OASIS assessment, clinicians have the opportunity to assess the skin for lesions or old wounds that might have resulted from falls, Warmack notes. Asking patients about the origin of observed lesions may provide you with important information for falls prevention.

Involve staff in a team effort, advises Continuum's program improvement coordinator **Joyce Witten**. Consider an occupational therapy referral to help patients change the way they carry out daily activities, such as arranging items on shelves so a patient can reach them safely, Warmack suggests. And a dietician may help with a poorly nourished or dehydrated patient who is at greater risk of falling.