

# Ventura County Emergency Medical Services Fall Prevention Program Guidelines Spring 2019



Project Leader: Thomas K. Duncan, DO, FACS  
Trauma Medical Director-Ventura County Medical Center

## ***Mission Statement***

*To reduce the number of preventable injuries to the elderly in Ventura County, and raise awareness regarding the need for County wide elderly injury prevention programs.*

- 1. Purpose:** To provide guidance to Ventura County Emergency Medical Service (EMS) personnel in situations when EMS care providers encounter a patient with increased risk for falls and to promote the safety and well-being of the public.
- 2. Scope:** These guidelines are intended for use by and among Ventura County EMS care provider agencies. Use of these guidelines is voluntary. Each patient encounter by an EMS care provider is unique; they must use their best judgment in conveying information to the public.
- 3. Overview:** The Ventura County Trauma System (VCTS) maintains a regional trauma registry that documents potential life or limb-threatening injuries in our community that were treated at one or more of 8 Ventura County hospitals. Falls are the leading cause of injury-related hospital admissions in Ventura County, and are a significant mechanism of morbidity and mortality in those over the age of 65. An ever-aging population forecasts that a greater percent of the public will be affected by falls in the coming years.
- 4. Committees:** VCTS has one community-based committee interested in minimizing falls and their deleterious effects among the general public: the *Pre-hospital Services Committee*, comprised of Trauma departments, emergency departments and EMS leadership; a subsection of the Trauma Operational Review Committee (TORC), whose members are from hospitals, first responder agencies, EMS agency, public health departments, and local government agencies, as well as other non-profit and for-profit companies that serve the elderly and/or disabled. The guidelines were created with oversight from these committees.
- 5. Problem Statement:** EMS care provider agencies throughout Ventura County respond to more than a hundred thousand homes each year to aid the public with medical and/or trauma help. EMS care providers have the unique perspective of interacting with Ventura County residents in their own homes. Scene conversations reveal details not known by other healthcare providers. Responding to patients' homes allows for direct observation of living conditions and environmental risks for falls.
- 6. Assumptions:** The following assumptions are inherent in these guidelines:
  - ◆ EMS care providers care about the health and well-being of Ventura County residents.
  - ◆ The elderly and disabled are priority high-risk groups for fall-related injuries.
  - ◆ Falls are typically preventable.
  - ◆ The public in general trusts first responders.
  - ◆ EMS care providers can be a source of information and referral regarding fall prevention.
  - ◆ EMS care providers have the skills to identify fall risks.

*Appendix A, Fall Prevention Program sheet and Appendix B, EMS Care Provider questions, are assessment tools helpful in verifying that a patient may be at risk for a fall injury. EMS care providers should be familiar with the concepts included in Appendices A and B.*

## **7. Procedure:**

### **A. For all patients:**

- Upon arrival at a home, EMS care providers shall survey the scene per protocol, and pay attention to environmental hazards that could cause or potentiate a fall.
- EMS care providers shall treat the patient per VCEMS policies and procedures.
- EMS care provider agencies are encouraged to establish a process for educating, assessing and assisting.

### **B. For patients who are transported to a hospital for care:**

The Prehospital Care Report (ePCR) completed by EMS care providers should include:

- Written documentation of fall-risk hazards seen in the home.
- Written documentation of medication disorganization (which could lead to medication errors).
- EMS care providers will verbalize to the receiving hospital that the patient appears to be at increased risk for falls and/or injuries, along with the related home hazard findings as documented in the ePCR.

### **C. For patients who are not being transported (i.e. they are stable and/or refuse transport) but who have an identified fall risk:**

- Address all fall risks that can easily be rectified (i.e. floor clutter, slippery throw rugs, etc.),

## **8. Education:**

EMS care providers should take a moment to educate the patient on the risk(s), and/or take corrective action to ameliorate the risk(s), if possible. Prehospital care providers will document the education provided and/or action taken on the ePCR. If a family member is present, prehospital care providers should also speak to the family member(s) about addressing obvious fall risks.

EMS care providers can provide the patient / family with the Ventura County Area on Aging Agency (VCAAA) contact information, so they can obtain services that are available from the agency.

For fall risks, EMS care providers should consider making a referral to VCAAA and/or Ventura County's Public Health Department. Public Health will conduct their assessment and involve the appropriate agency-specific social service network on behalf of the patient. VCAAA will provide monthly/quarterly feedback to the EMS Agency to close the loop.

Any of the activities mentioned in this section should be charted on the ePCR.

## ***SUGGESTED PRE-HOSPITAL/PARAMEDIC TRACKING TOOL***

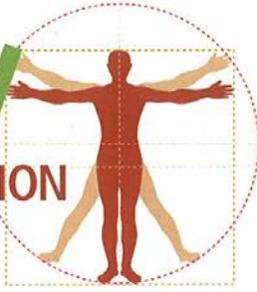
**If Patient has a history of falling, assess for:**

<b>Postural Hypotension</b>	Yes-> Encourage transport to hospital
<b>Hypoxia</b>	Yes-> Encourage transport to hospital
<b>ETOH/Drug Abuse (Active)</b>	Yes-> Encourage transport to hospital
<b>Unsafe Patient Environment</b>	Yes-> Encourage transport to hospital and report to Adult Protective Services (APS)
<b>Irregular Pulse (stable)</b>	Yes-> Encourage patient to follow up with their Primary Care Provider (PCP) or refer to Public Health if no PCP
<b>Vision Abnormality</b>	Yes-> Encourage patient to follow up with eye professional or refer to Public Health if no PCP
<b>Strength/Balance deficiencies</b>	Yes-> Encourage patient to follow up with their PCP and/or VCAAA for evidence-based strength/balance classes
<b>Tachycardia (stable)</b>	Yes-> Encourage patients to follow up with their PCP or refer to Public Health if no PCP

# Appendix A- Fall Prevention Program Sheet

Ventura County

## Fall PREVENTION Program



### FALL FACTS:

- One out of four older adults (those aged 65 or older) falls each year, but less than half talk to their healthcare providers about it.
- Every half hour an older adult dies as the result of a fall.
- Most falls occur at home.

## WE ARE HERE TO HELP YOU STAY SAFE IN YOUR HOME!

### RISK FACTORS:

- Over 65 years of age
- Poor balance and strength
- Taking 5 or more prescription medications
- Vision impairments
- Environmental hazards



Please call **805-477-7343** or email [fall.prevention.program@ventura.org](mailto:fall.prevention.program@ventura.org) for more information on how we can help you.

What can you do?

### TO MAKE YOUR HOME SAFER:

- Remove tripping hazards (i.e. shoes, papers, pet toys)
- Home modifications (i.e. grab bars)
- Use non-slip rubber mats in tub or shower.
- Remove throw rugs or tape them in place.
- Move furniture and clutter to create clear pathways.
- Increase lighting.

### TO HELP YOURSELF PREVENT FALLING:

- Stay as physically active as you can – build your balance, strength and flexibility
- Review your medications with your healthcare provider
- Keep your healthcare providers informed of any falls or hospital visits
- Get your vision checked regularly and update your eye-glasses when needed
- Keep your family and friends informed – ask for help when you need it

### HOW CAN THE FALL PREVENTION PROGRAM HELP?

- Home Safety Assessments
- Information, Resources and Referrals
- Education
- Workshops and Presentations
- Advocacy

Funded by the County of Ventura



*If you check off these items, you will make yourself and your home safer right away!*

Ventura County

# Fall PREVENTION Program



## DATOS SOBRE LAS CAÍDAS:

- Uno de cada cuatro adultos mayor (65 años o mayor) se caen cada año, pero menos de la mitad hablan con su doctor sobre la caída.
- Cada media hora un adulto mayor muere como consecuencia de una caída.
- La mayoría de las caídas ocurren en el hogar.

ESTAMOS AQUÍ PARA AYUDARLE A MANTENERSE SEGURO EN SU HOGAR!

### FACTORES DE RIESGO:

- Ser mayor de 65 años de edad
- Poca fuerza y equilibrio
- Toman 5 o más medicamentos recetados
- Debilitación de la visión
- Riesgos ambientales

Para obtener más información en como lo podemos ayudar, por favor llamar al **805-477-7343** or enviar un correo electrónico a [fall.prevention.program@ventura.org](mailto:fall.prevention.program@ventura.org)



¿Qué puede usted hacer?

### PARA HACER SU HOGAR MÁS SEGURO

- Eliminar peligros para no tropezar (zapatos, papeles, juguetes de mascotas)
- Modificaciones en el hogar (barras de apoyo)
- Utilizar tapetes de goma antideslizante en la tina o bañera
- Quitar alfombras o pegarlas con cinta adhesiva
- Mover muebles y objetos para mantener el camino despejado
- Aumentar la iluminación

### PARA AYUDAR A EVITAR UNA CAÍDA

- Manténgase físicamente activo - trate de aumentar su equilibrio, fuerza y flexibilidad
- Revise sus medicamentos con su proveedor de atención médica
- Mantenga su médico informado de cualquier caída o visitas al hospital
- Haz tu examen de la vista con regularidad y remplazar los lentes cuando sea necesario
- Mantenga a sus familiares y amigos informados - pida ayuda cuando la necesite.

### ¿COMO LE PUEDE AYUDAR EL PROGRAMA DE PREVENCIÓN DE CAÍDAS?

- Evaluaciones de seguridad en el hogar
- Información, recursos y referencias
- Educación
- Talleres y presentaciones
- Apoyo

Financiado por el Condado de Ventura



*Si sigues estas instrucciones, ahora mismo tu hogar y tú estarán más seguros!*



## Appendix B- EMS Care Provider questions

### A. Qualifying Information

1. Is this incident related to a fall?
2. Is the patient at high risk for a fall within the next 6 months?
3. Is the patient 65 years of age or older?
4. Is the site of this incident the patient's primary residence?

### B. History

5. Has the patient fallen before or needed assistance up from the the floor in the past 6 months?
6. Is the patient currently taking 5 or more prescribed over-the-counter medications?
7. Was the incident a result of a medical condition (weakness, dizziness, syncope, stroke, seizure, etc.)?
8. Was this incident the result of a mechanical issue (trip/slip and fall, roll out of bed, etc.)?

### C. Fall Risk Mitigation

9. Was information on fall prevention provided?
10. Were any immediate hazards mitigated by personnel on scene?

### D. Consent

11. Does the patient, or authorized representative, consent to a follow-up interview by a home healthcare nurse/professional regarding fall prevention?
12. What is the consenting individual's first and last name and best phone number at which he/she can be reached?