

BRAIN BOOSTER

BY FUSION

FALLS PREVENTION

FEET/FOOTWEAR, HEARING & VISION

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FALLS PREVENTION

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Slips, trips and falls are a major cause of injury in the older population. Falls represent the most serious and frequent type of accident in people aged 65 and over.

One out of every four older people, aged 65 years and over, experiences a fall every year (National Council on Aging, 2024). In England and Wales, over 3500 people aged over 65 years die each year following a fall, and nearly 300 000 require hospital admission.

Multiple factors need to be considered in falls prevention, including feet/footwear, vision and hearing.

Many falls are preventable!!



Feet and Footwear

Good foot health and properly fitting footwear can play a vital part in reducing falls. Ensuring good foot health and footwear will support stability and should include:

- Trimming toenails regularly (only by a foot health professional); keeping feet clean and dry especially between the toes.
- Checking for cuts, blisters, and sores; applying moisturiser to dry skin.
- Filing dry or hard skin using a file or pumice stone (only by a foot health professional).

Making sure footwear is suitable (for either indoors or outdoors), well-fitting and not loose, comfortable, and securely fastened (especially slippers).

It is recommended that podiatrists or chiropodists should be regularly consulted to support foot health and function for residents.

➤ Sensible Footwear



➤ Not so sensible



- Think about suitable footwear for the resident's environment and the seasons. Is it actually safe to go outdoors? Is it icy/wet/windy?
- Is the resident's footwear adequate for walking outdoors? If there are straps or laces on the footwear does this fasten the footwear securely to ensure it fits properly?
- Consider this in the summer.... do open toed sandals fit well and offer suitable support?

Footwear Checks & Safety

- If your resident has 'sloppy slippers' or worn-out shoes suggest to the resident that they should be replaced or contact the residents appointed person for replacement footwear. Look out for worn laces, grips on the sole that have worn away, worn heels etc when supporting residents to move around the home or helping them to put shoes/slippers on.
- Are residents wearing shoes/slippers correctly? Make sure they are not crushing the back of the heel down. Would the resident benefit from the use of a shoe horn or similar aid? Are the laces/fastenings done up?
- If a resident chooses to wear inappropriate footwear i.e. high heels/mules etc a risk assessment for this must be completed in Fusion. It may seem an unwise decision, however, we must respect lifestyle/personal choices and do all we can to mitigate the risk.
- If the resident chooses to not wear shoes or slippers at all, consider socks with grip pads on the sole to reduce the risk of slipping over. Loose socks/tights can also affect the way a resident walks by bunching up around ankles or inside footwear.

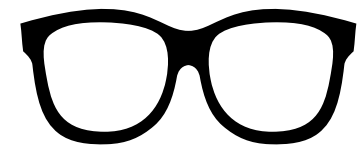
Vision

Vision impairment can increase the risk of falling, so it is important to ensure regular eye health checks.

Wearing the correct type of glasses and keeping them clean, improves balance and stability, and thus reduces the risk of falls.

Staff should be aware:

- Is the resident wearing the correct glasses (reading glasses should not be worn whilst someone is walking)
- Are they their own glasses?
- Are the glasses clean?
- Are they in a good state of repair? (i.e. no screws missing)
- Do they fit well?
- Are they comfortable? (are the nose pads in place)



Hearing

Hearing loss can increase the risk of falling due to impairment of the senses that affect balance, so it is important to have regular hearing health checks and keep ears free of wax - **Do NOT use cotton buds to clean ears, these will make it worse..... refer to the district or practice nurse for professional help.**

Hearing aids should be checked regularly to ensure that they are working properly and fitted correctly.

Staff should be aware of how to correctly fit the hearing aid and how to check and insert batteries:

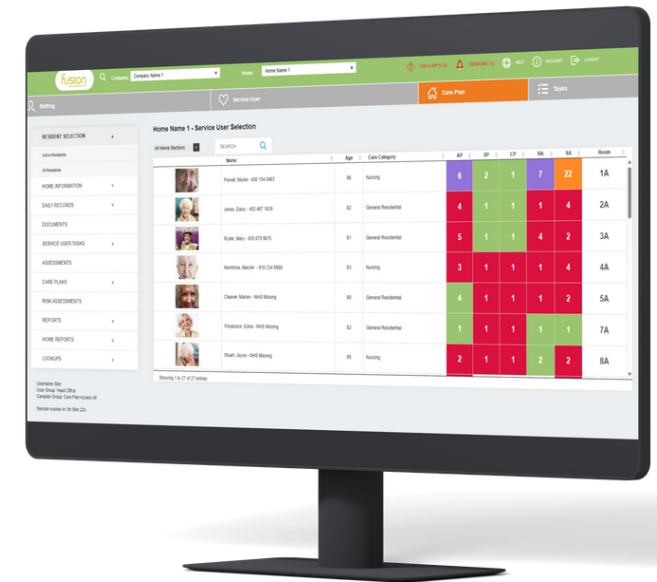
- Is it in the correct ear!
- Is it at the right setting?
- Are the batteries working?
- Is the hearing aid clean?



Documentation

Do the care records contain all the relevant information to ensure hearing/vision/foot health checks are done:

- Are the residents podiatrist/ foot health professional/optician etc contact details up to date?
- Is it documented when the last check took place and the next one is due?
- Are 'Visit/Contact' notes in place on Fusion
- Are any professional recommendations captured in the care plan?
- Is any correspondence uploaded to Fusion document section?
- Are future appointments/checks diarised on Fusion.



Does the resident have any medical conditions which may affect their feet/hearing/vision?
e.g. Diabetes/Peripheral Vascular Disease/Cardiac conditions



- Have they been offered a retinopathy check?
- Have they had a foot/circulation check?
- Are feet checked for cuts and abrasions daily?
- Is the condition/temperature of feet considered?

DON'T FORGET – some medication, such as sedatives, antipsychotics, and some antidepressants can increase the risk of falling

Over to you:

- Do all of your residents have an up-to-date Falls assessment completed in the Fusion assessment section?
- Are they recompleted regularly? Monthly reassessments are recommended.
- Does the falls prevention care plan reflect the residents needs as defined in the latest assessment?
- Are residents referred to the local CCG falls teams where appropriate?
- Are all falls (and near misses) documented in the Fusion daily notes and reported?
- When there are changes to the residents falls risk are these changes communicated to the care team?
- It is recommended that when a resident falls a reassessment of falls risk is completed immediately. Does this happen?
- Are all the factors, as discussed in this document, considered when a fall occurs or is there just focus on the environment?

