

The Aging Adult; a Therapist Perspective

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Introduction/Objectives

- Identify a community fall prevention intervention for seniors: Falls are a four letter word.
- Discuss functional based therapies for the aging population: Therapy, is it worth it?
- Identify the physiological changes to the aging adult: What happened to me?

Falls in the Aging Populations

- 30-35% of the population 65+ fall each year
- Those who fall are 2-3 times more likely to fall again
- 1 in 5 falls causes a serious injury
- Leading death from injury in 65+
- Every 13 seconds a fall related injury (ED)
- Direct cost is \$34 Billion
- Average cost per hospitalization \$35,000

Physiological Changes in Aging Adult

- Arthritic/posture changes
- Diabetes with decrease foot sensation
- Decreases in vision
- Decreases in cognition and safety awareness
- Vertigo, dizziness and postural hypotension
- Muscle atrophy and muscle weakness
- Increases in urination and incontinence

Fall Risk Factors

- **Biological**-Leg weakness, mobility problems, problems with balance and poor vision
- **Behavioral**-Risky behaviors, inactivity, multiple medications and psychological/cognitive issues
- **Environmental**-Tripping hazards, clutter, poor lighting, tub showers, no handrails and no grab bars

Evidence for Clinical Interventions

- Chang et al., British Medical Journal, 1004
- Gillespie et al., Cochrane Database of Systemic Reviews, 2012
- Moyer, U.S. Preventive Services Task Force, Annals of Internal Medicine, 2012

Centers for Disease Control (CDC) and Prevention

STEADI

Stopping **Elderly Accidents, Deaths & Injuries**

- Development of a **tool kit** for all clinicians and staff
- Resources for the aging population
- fall risk assessments & interventions
- AGS guidelines
- Website: **[cdc.gov/injury/STEADI](https://www.cdc.gov/injury/STEADI)**

What is the Clinical Approach?

Assessment by a Health Care Provider

- Have you fell in the last year?
- How many times?
- Were you injured?
- Do you feel unsteady when standing or walking?
- Do you have the fear of falling?

Fall Risk Checklist

- Fall History
- Medical Conditions
- Medications
- Gait, Strength & Balance
- Vision
- Postural Hypotension
- Other Risk Factors

Fall Prevention Patient Referral Form

- Medication Review->MD
- Gait, Balance or Mobility->Physical Therapist
- Foot Abnormality->Podiatrist
- Possible Neurological condition->Neurologist
- Vision Impairment->Ophthalmologist
- Home Safety/Environmental->Occupational Therapist

Special Balance Tests

- Time Up & Go (TUG Test)
Recommended
- 30 Second Chair Stand
- 4 Stage Balance

Why do we change?

- Quality improvement plan for you practice or company
- One question in your EMR (have you fallen?)
- Part of your MD wellness visit or part of your clinician visit
- Measure the outcomes (% of patients our practice asked)
- Develop a Fall Reduction Champion of your practice

Distribute/Introduce the Tool Kit

- Have a meeting with the staff
- Talk to your company about Tool Kit
- Talk to clinician about the idea
- Distribute the resources and literature from the Tool Kit
- Develop a Fall Champion in your practice
- Measure the outcomes, track progress
- EMR will track (Fall risk question)

Advantages of adding a fall program

Financial-PQRS Program, CMS Annual Wellness Visit, and ACO's advantage of reducing fall

Clinical-Improvement of efficiency of care, improvement of outcome

Professional-Leadership in the community on fall reduction. Being a fall reduction specialist.

Q & A