Screening Tools:
Fall Prevention Among Older Adults

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Why Screen for Falls?

- According to the Centers for Disease Control, more than one third of adults aged 65 and older fall each year in the United States and 20% to 30% of the people who fall suffer moderate to severe injuries. Among those age 65 and older, falls are the leading cause of injury death.
Physician Quality Reporting System (PQRS)

- Centers for Medicare and Medicaid Services:
  - Quality measures are developed to facilitate provider’s actions that are evidenced based and that have been identified as a known gap in care.
  - Specific falls measures
    - to assess falls risk on all “at risk” beneficiaries
    - obtain care that would minimize their risk of future falls
  - Falling and Fear of Falling as you age should not be accepted as a “normal” process of aging.
Important Questions

- Risk (and prevention) of Future Falls
  - “Have you had 2 or more falls in the past year or any fall with injury in the past year?”
  - determine the frequency, context, and characteristics of the fall

- Patients
  - Seek medical attention due to a fall
  - report recurrent falls
  - difficulty walking
  - gait unsteadiness
  - fear of falling
Defining a Fall

Fall

- A sudden, unintentional change in position causing an individual to land at a lower level, on an object, the floor, or the ground, other than as a consequence of sudden onset of paralysis, epileptic seizure, or overwhelming external force
Fall Risk Assessment & Plan of Care

1. Risk of Future Falls?
2. Fall Risk Assessment
3. Falls Plan of Care
Screening Tools

- Screening tools are used to identify those at risk:
  - Falls Efficacy Scale
  - Activities-specific Balance Confidence (ABC) Scale
  - Berg Balance
  - Timed Up and Go
  - Dynamic Gait Index
  - 6 minute Walk Test
Falls Efficacy Scale (FES)

- Measures a fear of falling
  - Fear of falling: "low perceived self-efficacy at avoiding falls during essential, nonhazardous activities of daily living"

- 10-item rating scale to assess confidence in performing daily activities without falling
  - > 80 increased risk of falling
  - > 70 indicates a fear of falling
Activities-specific Balance Confidence (ABC) Scale

- 16-item scale rated from 0% (no confidence) to 100% (complete confidence) during course of daily activities
  - < 50 indicate a low level of functioning
  - > 50 – 80 indicate a medium level of functioning
  - > 80 indicate a high level of functioning

- ABC discriminates better than Falls Efficacy Scale (FES) scores of high versus low mobility participants
Berg Balance Scale (BBS)

- 14-item measure: assess static balance and fall risk
- Static and dynamic activities
- Score of 56 indicates functional balance
  - Score of < 45 indicates individuals may be at greater risk of falling
  - 56 to 54, each 1-point drop in BBS associated with a 3% to 4% increase in fall risk
  - 54 to 46, a 1-point change in BBS led to a 6% to 8% increase in fall risk
  - < 36, fall risk was close to 100%
Timed Up and Go

- Assesses mobility, balance, walking ability, and fall risk in older adults
- Description
  - Patient sits in a chair with their back against the chair back
  - On the command “go”, patient rises from the chair, walks 3 meters at a comfortable and safe pace, turns, walks back to the chair and sits down
  - Timing begins at the instruction “go” and stops when the patient is seated
  - Patient should have one practice trial that is not included in the score
  - Patient must use the same assistive device each time individual is tested to be able to compare scores
Dynamic Gait Index

- Measures ability to modify balance while walking in the presence of external demands
- Tasks include:
  - Gait on even surfaces
  - Gait with changing speeds
  - Gait and head turns both horizontal and vertical
  - Stepping over and around obstacles
  - Gait with pivot turns and stairs
- Highest possible score is 24 points
  - Score <19 indicative of fall risks
  - Scores of 19/24 or less are 2.58 times more likely to have reported a fall in the previous 6 months than subjects with scores above 19
  - >22/24 safe ambulators
6 Minute Walk Test

- Assesses distance walked over 6 minutes, performed at the fastest speed possible
  - Gait speed is highly correlated to fall risk

- Assistive devices can be used but kept consistent from test to test

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<th>Age</th>
<th>Male</th>
<th>Female</th>
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<tr>
<td>60-69</td>
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<td>80-89</td>
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Fall Prevention Among Older Adults

**Six Locations**

- 1525 Wampanoag Trail
  Suite 205
  East Providence, RI 02915

- 45 Seekonk St
  Providence, RI 02906

- 400 Massasoit Ave, Ste 203
  East Providence, RI 02914

- 129 School St
  Pawtucket, RI 02860

- 330 Cottage St
  Pawtucket, RI 02860

- 1822 Mineral Spring Ave
  North Providence, RI 02904

401-726-7100
References

1. www.apta.org
2. www.cms.gov