

# FALL REDUCTION PROGRAM

*At-home Evidence-based Falls Assessment,  
Intervention and Education*

*Fewer than half  
of older adults who  
fall talk to their  
doctor about it.<sup>1</sup>*



Falls are the leading cause of death and injury for older Americans.<sup>2</sup> However, falls are not a normal part of aging, and as many as two-thirds of falls can be prevented through evidence-based fall-reduction interventions.<sup>3</sup>

Through the Amedisys Fall Reduction Program, our interdisciplinary care team works to reduce intrinsic and extrinsic fall risk factors to help improve your patients' quality of life, avoid preventable falls and reduce hospitalizations. And we provide this expert care in the home environment, where more than 75 percent of falls occur.<sup>4</sup>

## Evidence-based Clinical Protocols



- › Our program is based on clinical best practices, and it was developed in collaboration with renowned geriatric fall expert, Michelle M. Lusardi, PT, DPT, PhD, FAPTA.
- › We address multi-factorial fall risk factors like musculoskeletal issues, visual disturbances, functional and cognitive impairments, chronic conditions, medications and home safety.

## Interdisciplinary Approach to Care



- › Therapists, nurses, social workers and aides take a holistic approach to reducing falls
- › Each discipline provides specialized expertise, from medication and chronic condition management to functional impairments, home safety and psychosocial support.

## Patient Engagement & Empowerment



- › Our proven patient engagement and empowerment methodology empowers patients to take an active role in reducing their fall risk.
- › A fall detection system\* (offered at no charge for up to 120 days while on our service) offers peace of mind for patients and their families.

Your patients may be appropriate for our Fall Reduction Program, if they:<sup>5</sup>

- › Have suffered a fall, with or without injury, within the past year, or use a cane, walker or other assistive device
- › Feel unsteady when standing or walking, or are worried about falling
- › Exhibit biological risk factors like muscle weakness, balance problems or vision changes/loss
- › Have difficulty managing medications, including side effects and/or interactions
- › **Have a primary medical diagnosis (HF, COPD, DM, Parkinson's, CVA, arthritis, depression, etc.) that may cause falls, as this is an essential element to developing a safe, effective and individualized plan of care.**

<sup>1</sup> Important Facts About Falls. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, Division of Unintentional Injury Prevention. February 2017.

<sup>2</sup> STEADI Materials for Healthcare Providers. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, Division of Unintentional Injury Prevention. March 2017.

<sup>3</sup> The U.S. Public Health Service has estimated that two-thirds of deaths due to falls are potentially preventable, based on a retrospective analysis of the causes and circumstances of serious falls (STEADI – Older Adult Fall Prevention, 2017).

<sup>4</sup> 18 Steps to Fall Proofing Your Home. Scott Trudeau, PhD, OTR/L. National Council on Aging. October 2016.

<sup>5</sup> All referrals will be independently evaluated for medical necessity and appropriateness for the home setting.

*To learn more, or to refer a patient, contact your  
home health care representative at:*



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