

## 9 steps to stay on your feet and prevent falls:

- Be active
- Walk tall
- Improve your balance
- Care for your feet and use safe footwear

- Manage your health
- Manage your medicines
- Check your eyesight and hearing regularly
- Eat well for life

- Identify, remove and report hazards

### For more information on these 9 steps, contact your local public health unit

Algoma Public Health	1-866-892-0172
North Bay Parry Sound District Health Unit	1-800-563-2808
Porcupine Health Unit	1-800-461-1818
Sudbury & District Health Unit	1-855-674-4330
Timiskaming Health Unit	1-866-747-4305



### For more information visit:

- **Ontario Seniors Secretariat**  
[www.seniors.gov.on.ca/en](http://www.seniors.gov.on.ca/en)
- **Public Health Agency of Canada (PHAC)**  
[www.phac-aspc.gc.ca/seniors-aines/index-eng.php](http://www.phac-aspc.gc.ca/seniors-aines/index-eng.php)

Don't have a health care provider?  
Consider registering with  
**Health Care Connect**  
at **1-800-445-1822**  
or online at  
**[www.ontario.ca/healthcareconnect](http://www.ontario.ca/healthcareconnect)**  
(Have your Ontario Health Card  
Number ready)

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Adapted with permission from the "Stay Independent" brochure from the Centres for Disease Control and Prevention - National Centre for Injury Prevention and Control.

# STAYING INDEPENDENT

**Falls are the main reason older adults lose their independence.**



## ARE YOU AT RISK?

**Complete the checklist in this pamphlet and talk to your health care provider about your risk factors.**



Check Your Risk for Falling

Please circle “YES” or “NO” for each statement below

Actions to Staying Independent

YES (2)	NO (0)	I have fallen in the past year.	Learn more on how to reduce your fall risk, as people who have fallen are more likely to fall again.
YES (2)	NO (0)	I use or have been advised to use a cane or walker to get around safely.	Talk with a physiotherapist about the most appropriate walking aid for your needs.
YES (1)	NO (0)	Sometimes, I feel unsteady when I am walking.	Exercise to build up your strength and improve your balance, as this is shown to reduce the risk of falls.
YES (1)	NO (0)	I steady myself by holding onto furniture when walking at home.	Incorporate daily balance exercises and reduce home hazards that might cause a trip or slip.
YES (1)	NO (0)	I am worried about falling.	Knowing how to prevent a fall can reduce fear and promote active living.
YES (1)	NO (0)	I need to push with my hands to stand up from a chair.	Strengthening your muscles can reduce your risk of falling and being injured.
YES (1)	NO (0)	I have some trouble stepping up onto a curb.	Daily exercise can help improve your strength and balance.
YES (1)	NO (0)	I often have to rush to the toilet.	Speak to your health care provider about solutions to to decrease the need to rush to the toilet.
YES (1)	NO (0)	I have lost some feeling in my feet.	Speak to your health care provider as numbness in the feet can cause stumbles and falls.
YES (1)	NO (0)	I take medicines that sometimes make me feel light-headed or more tired than usual.	Speak to your health care provider or pharmacist about medication side effects that may increase the risk of falls.
YES (1)	NO (0)	I take medicine to help me sleep or improve my mood.	Speak to your health care provider or pharmacist about safer alternatives for a good night’s sleep.
YES (1)	NO (0)	I often feel sad or depressed.	Speak to your health care provider about symptoms of depression, and help with finding positive solutions.

TOTAL

Add up the number of points for each “Yes” answer.

If you scored 4 points or more, you may be at risk for falling.

Discuss this checklist with your health care provider to find ways to reduce your risk.

\*The above checklist was developed by the Greater Los Angeles VA Geriatric Research Education Clinical Center and affiliates and is a validated fall risk self-assessment tool (Vivrette, Rubenstein, Martin, Josephson & Kramer, 2011). This brochure is adapted with the permission of J.Stevens, R Vivrette, J.Kramer, & L. Rubenstein.

To help stay independent and prevent falls:

Your provider may ask you about:

- previous falls
- if you feel unsteady when you stand or walk
- how you manage your daily activities
- if you are worried about falling

Your provider may ask about your:

- medications
- calcium and vitamin D
- blood pressure, heart rate and rhythm
- muscle strength
- feet and footwear
- bladder control
- vision and hearing
- ability to move around and balance



Your provider may suggest:

- Having other medical tests
- Changing your medicines
- Consulting a specialist
- Seeing a physiotherapist
- Attending an exercise class