

Home Safety for Older Adults Aging in Place

An adaptation of the CDC campaign: STEADI – Stopping Elderly Accidents, Deaths & Injuries

Objectives

- Recognize when your loved one needs more help
- Understand what challenges older adults face
- Learn how to create a safe environment
- Identify local resources



Difficult Choices

One of the most difficult tasks we face as humans is how we take care of our beloved elders.



Aging in Place



Measuring Level of Independence

Basic activities of daily life:

- Cooking/eating
- Bathing
- Dressing
- Toileting
- Mobility
- Continence

Advance activities of daily life:

- Paying bills
- Cleaning the house
- Cooking food for yourself
- Transportation to leave the house
- Socializing

Source: Aging.com

Early Warning Signs of Dementia

- Memory loss that disrupts daily life
- Challenges in planning or solving problems
- Difficulty completing familiar tasks
- Confusion with time or place
- Trouble understanding visual and spatial images
- New problems with words in speaking or writing
- Misplacing and losing things
- Decreased, poor judgement
- Personality changes



Memory Loss



Early Detection Matters

- Make a doctor's appointment
- Prepare for your visit
- Ask questions
- Identify your healthcare team
- Seek care and support



Social Isolation

Getting Connected

- National Organizations
  - AARP
  - National Council on Aging (NCOA)
  - Eldercare Locator
  - Area Agencies on Aging (AAA)
  - Senior Planet
- Local Organizations
  - Homage Senior Services
  - Area Senior Centers
- South County Fire
  - Connect Calls
  - Zoom Setup and Instruction
- Family / Friends



Care Options

- Home Health
- Independent Living Communities
- Assisted Living Communities
- Long Term Care Facility/Skilled Nursing Facility



Aging in Place Safely – Reducing Risk

Plan Ahead For Any Emergency

Give 9-1-1 the information they need to help you fast.

SIGN UP TODAY

Smart911 protects over
45 million people nationwide.



Safety Profile
Provide additional information to 9-1-1 so they can help you faster in an emergency.



Alerts and Notifications
Stay informed of weather, traffic, and other emergencies in your community.



Vulnerable Needs Registry
Alert emergency managers that you need special assistance when a disaster strikes.

Plan for an Emergency

Medical Information Form

Name:_____ Birth date:_____

Address:_____

Physician:_____

Physician phone:_____

Preferred Hospital:_____

EMERGENCY CONTACTS

Name:_____

Phone:_____ Relationship: _____

Name:_____

Phone:_____ Relationship: _____

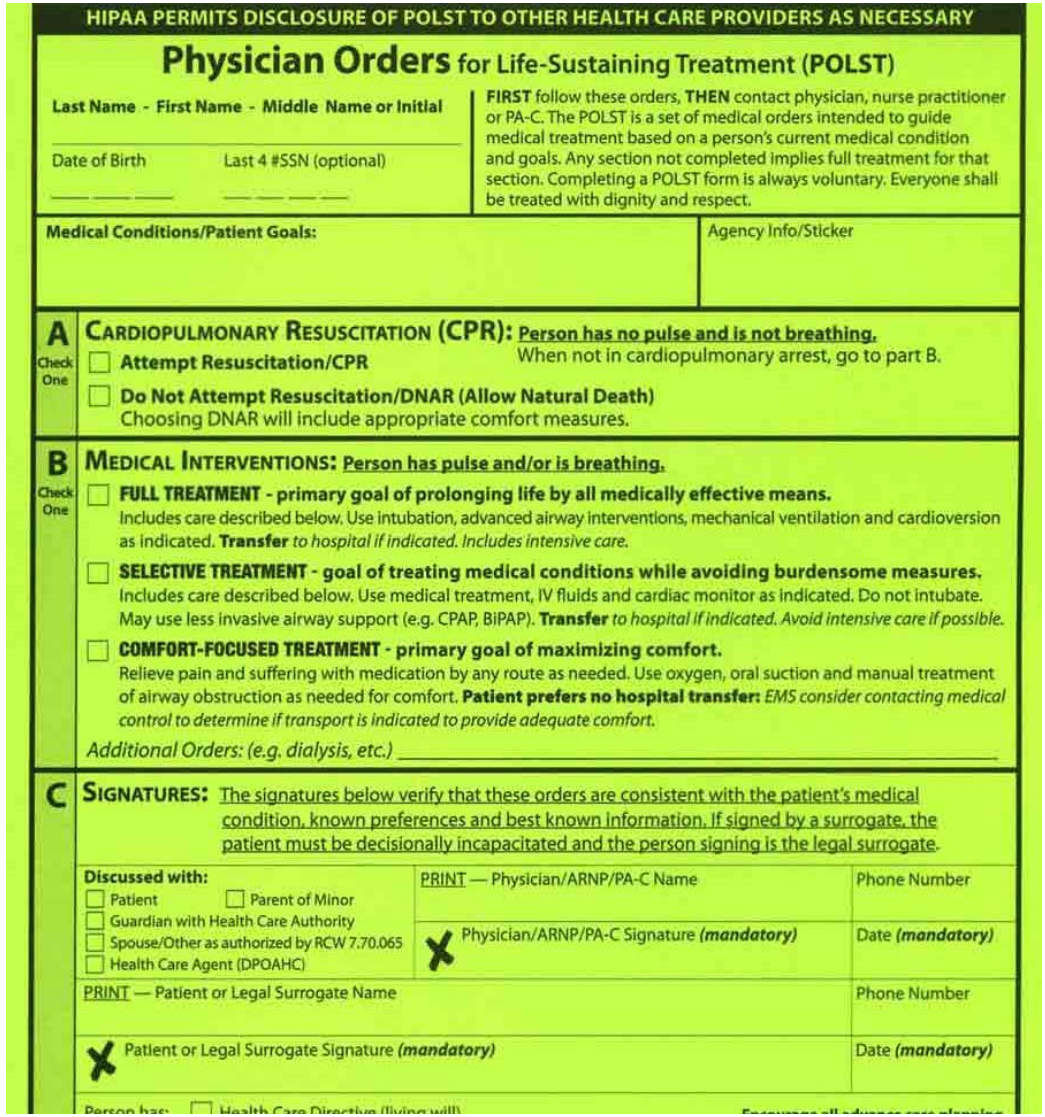
Keep a copy of your Advanced Directives
(POLST, DNR, etc.)
with this form in your FILE of LIFE pocket

MEDICATIONS

Update this form as changes are made. Every time you get your prescriptions or anytime there is a change in your medication, get a printout from your pharmacy.

Questions?
Contact South County Fire 's





HIPAA PERMITS DISCLOSURE OF POLST TO OTHER HEALTH CARE PROVIDERS AS NECESSARY

Physician Orders for Life-Sustaining Treatment (POLST)

Last Name - First Name - Middle Name or Initial

Date of Birth Last 4 #SSN (optional)

FIRST follow these orders, **THEN** contact physician, nurse practitioner or PA-C. The POLST is a set of medical orders intended to guide medical treatment based on a person's current medical condition and goals. Any section not completed implies full treatment for that section. Completing a POLST form is always voluntary. Everyone shall be treated with dignity and respect.

Medical Conditions/Patient Goals:

Agency Info/Sticker

A Check One — **CARDIOPULMONARY RESUSCITATION (CPR):** Person has no pulse and is not breathing.
When not in cardiopulmonary arrest, go to part B.

- ☐ **Attempt Resuscitation/CPR**
- ☐ **Do Not Attempt Resuscitation/DNAR (Allow Natural Death)**
  Choosing DNAR will include appropriate comfort measures.

B Check One — **MEDICAL INTERVENTIONS:** Person has pulse and/or is breathing.

- ☐ **FULL TREATMENT - primary goal of prolonging life by all medically effective means.**
  Includes care described below. Use intubation, advanced airway interventions, mechanical ventilation and cardioversion as indicated. **Transfer** *to hospital if indicated. Includes intensive care.*
- ☐ **SELECTIVE TREATMENT - goal of treating medical conditions while avoiding burdensome measures.**
  Includes care described below. Use medical treatment, IV fluids and cardiac monitor as indicated. Do not intubate. May use less invasive airway support (e.g. CPAP, BiPAP). **Transfer** *to hospital if indicated. Avoid intensive care if possible.*
- ☐ **COMFORT-FOCUSED TREATMENT - primary goal of maximizing comfort.**
  Relieve pain and suffering with medication by any route as needed. Use oxygen, oral suction and manual treatment of airway obstruction as needed for comfort. **Patient prefers no hospital transfer:** *EMS consider contacting medical control to determine if transport is indicated to provide adequate comfort.*

Additional Orders: (e.g. dialysis, etc.) _____

C **SIGNATURES:** The signatures below verify that these orders are consistent with the patient's medical condition, known preferences and best known information. If signed by a surrogate, the patient must be decisionally incapacitated and the person signing is the legal surrogate.

Discussed with:
☐ Patient ☐ Parent of Minor
☐ Guardian with Health Care Authority
☐ Spouse/Other as authorized by RCW 7.70.065
☐ Health Care Agent (DPOAHC)

PRINT — Physician/ARNP/PA-C Name | Phone Number

X Physician/ARNP/PA-C Signature *(mandatory)* | Date *(mandatory)*

PRINT — Patient or Legal Surrogate Name | Phone Number

X Patient or Legal Surrogate Signature *(mandatory)* | Date *(mandatory)*

Person has: ☐ Health Care Directive (living will)

POLST Forms Cover:

- Your preferences for resuscitation
- Medical conditions
- The use of antibiotics
- Whether to use artificially administered fluids and nutrition

- Source: wsma.org/POLST

Risks to Older Adults – Fire & Falls

FIRE

- Older adults have a 2.5 times greater risk of dying in a fire
  - Mobility
  - Hearing/vision impairments
  - Smoke alarms not working
  - Smoking on medical oxygen
  - Cooking
  - Medications

FALLS

- Falls are the leading cause of death that threaten our older adults
  - Mobility
  - Weakness & fear
  - Home environment
  - Vision
  - Cognition
  - Medications

Source: NFPA.org



Fire Risk & Prevention

Install Smoke Alarms



Smoke Alarms









Fire Risk: Mobility



SHELTERING IN PLACE – A GREAT WAY TO STAY SAFE

What would you do if there were a fire in your building? Sheltering in place may be the best way to stay safe for people who have difficulty evacuating their homes. Sheltering in place is simple:

Make a Plan

- Check to see if your home has fire sprinklers - the risk of dying in a home fire decreases by 81% when the home is equipped with a fire sprinkler system*.
- Think about where you will go in your building – choose a location with a window so you can be easily assisted during an emergency.
- Always sleep with your door closed to prevent fire or smoke from entering your room.
- Talk to people around you and make sure they understand your plan – where you will go during an emergency, what you will do when you get there, and what everyone else will do.

Take Action

- Know where you are in the building and in the unit – the fire department needs this information to assist you.
- When an alarm goes off, call 9-1-1 and report information about your location to the dispatcher. Follow the instructions of the dispatcher.
- Close doors to block smoke from coming into the room.
- Keep your phone on and near you.

Shelter in Place

Stay at the location that you reported to 9-1-1 and wait for assistance unless you are in imminent danger. If you change locations, call 9-1-1 and report your new location.

Make sure you review your plan every month!

SOUTH COUNTY FIRE

SERVING SOUTH SNOHOMISH COUNTY • BRIER • EDMONDS • LYNNWOOD • MOUNTLAKE TERRACE

425-551-1200 • www.southsnofire.org @SouthSnoFire South County Fire

*Ahrens, M. 2017. US Experience with Sprinklers. National Fire ProtectionAssociation. Retrieved from https://www.nfpa.org/-/media/Files/News-and-Research/Fire-statistics-and-reports/Suppression/ossprinklers.pdf

Flyer created by the City of Bellevue

- Close the door
- Call 911
- Stay where you told 911 you would be
- Go to window and wait for help to arrive

Other Fire Risk

- Cooking
- Heating
- Smoking



Fall Risk & Prevention



IN 2018

1 in 4 older adults reported falling—this equals about 36 million falls.

Falls can threaten the health and independence of older adults.

More than 8 million
falls required medical attention or limited activity for at least a day.

More than 32,000
older adults died from falls—that's 88 older adults every day.

Source: CDC.gov

Slips, Trips & Falls: Early Warning Signs



UC San Diego Health

- Illness
- Mobility
  - Shuffling feet, furniture walking
- Weakness
  - Difficulty getting up from laying or sitting
  - Shaking or difficulty standing for simply activities
  - Shortness of breath
- Medications
  - Dizziness, sleepy
- Vision

Exercise is Key No Matter Your Age

- Strength
- Flexibility
- Endurance



This Photo by Unknown Author is licensed under CC BY-SA-NC

Fall Prevention

- Exercise regularly
- Slow down
- Medical check up
- Wear sturdy, well fitting shoes













Home Modifications

- Improve lighting in and outside your home
- Keep stairs and walkways clear
- Be aware of uneven surfaces
- Use non-slip mats & other safety devices
- Think about subscribing to a medical alert system

Is there a light and light switch at the top and bottom of the stairs?

- [ ] Have an electrician put in an overhead light and light switch at the top and bottom of the stairs. You can get light switches that glow.

Has a stairway light bulb burned out?

- [ ] Have a friend or family member change the light bulb.

Is the carpet on the steps loose or torn?

- [ ] Make sure the carpet is firmly attached to every step, or remove the carpet and attach non-slip rubber treads to the stairs.

Are the handrails loose or broken? Is there a handrail on only one side of the stairs?

- [ ] Fix loose handrails, or put in new ones. Make sure handrails are on both sides of the stairs, and are as long as the stairs.

won't slip.

Are there papers, shoes, books, or other objects on the floor?

- [ ] Pick up things that are on the floor. Always keep objects off the floor.

Do you have to walk over or around wires or cords (like lamp, telephone, or extension cords)?

- [ ] Coil or tape cords and wires next to the wall so you can't trip over them. If needed, have an electrician put in another outlet.

KITCHEN

Are the things you use often on high shelves?

- [ ] Keep things you use often on the lower shelves (about waist high).

Is your step stool sturdy?

- [ ] If you must use a step stool, get one with a bar to hold on to. Never use a chair as a step stool.

go on by themselves after dark.

BATHROOMS

Is the tub or shower floor slippery?

- [ ] Put a non-slip rubber mat or self-stick strips on the floor of the tub or shower.

Do you need some support when you get in and out of the tub, or up from the toilet?

- [ ] Have grab bars put in next to and inside the tub, and next to the toilet.



Medication Safety

- Safe use of medication for older adults



Taking Medications

82% of American adults take at least one medication and 29 percent take five or more.

- Mixing medications can be dangerous.
- Review medications with your loved one's doctor/pharmacist, including over-the-counter medications.
- Report any abnormal side effects such as weakness, trouble breathing, dizziness, etc.
- Talk to the pharmacist if having any trouble taking medications.





Tracking Medications

Taking multiple medications can be challenging to track.

- Make a medication list. Write down all medicines you take, including over-the-counter. The list should include the name of each medicine, amount you take, and time(s) you take it.
- Use a pill organizer and develop a schedule of when each medication should be taken. Use cell-phone reminders if needed.
- Check expiration dates on bottles.
- Keep medications out of reach of children and pets.

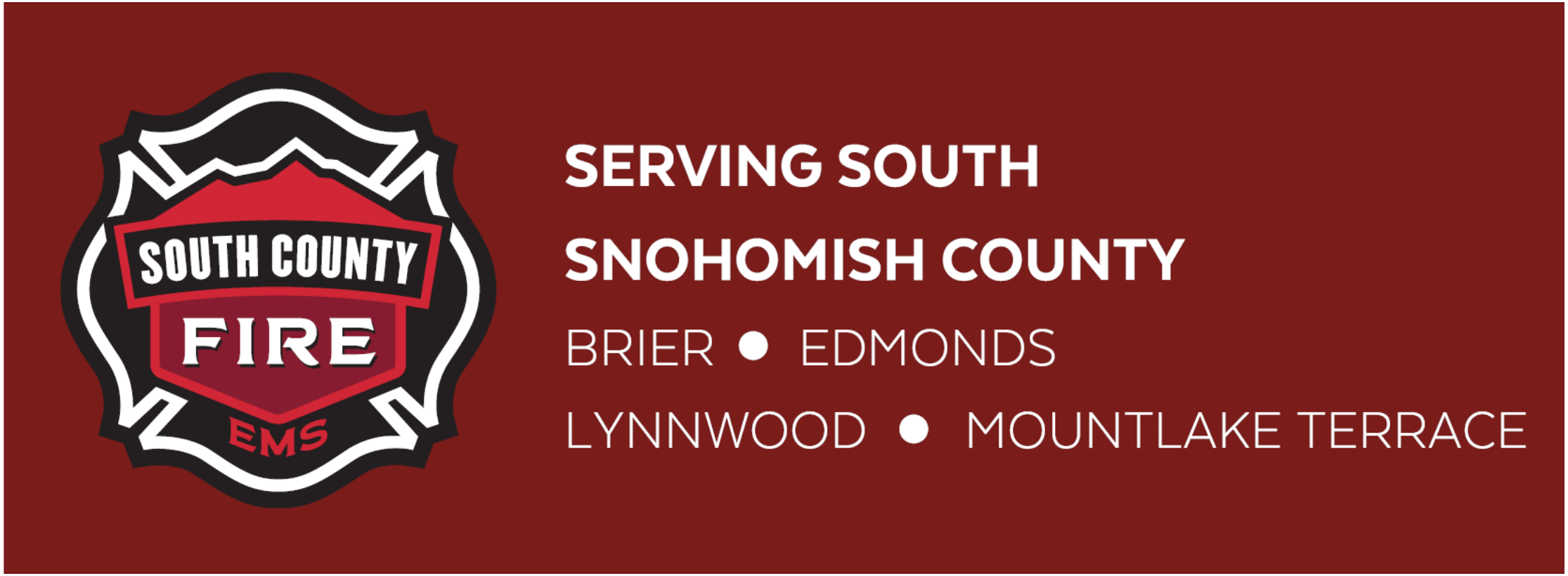


FAQ’s

- What to do if your loved one resists help?
  - Journal changes in mood, behavior and health. Write down dates and concrete examples to refer to when speaking with a physician or other care provider.
- When should an older adult stop driving?



We’re here to help!



Phone: 425-320-5800

Email: outreach@southsnofire.org

Website www.southsnofire.org