

STEP ON IT!

Kindred
at Home

The more you move, the better life gets.





Step On It! is a program designed to keep you moving, keep you healthy and keep you living the independent life you love. Why is moving so important? Moving helps us maintain good heart and lung function. It helps us reduce our fall risk significantly.

Most important, studies have shown that those who move more, see more and do more, flat out enjoy life more. Moving is a difference maker that keeps us feeling good and living better.

So what are you waiting for? Let's get going.

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Keep Moving by Making and Sticking to a Plan

Keep Moving

Our bodies are designed to move. As we get older, making regular exercise a habit protects our balance and our independence. Exercise helps us stay healthy and reduces our risk for falls.

Exercise Can Also

- Increase energy levels
- Help with sleeping problems
- Improve muscle strength and flexibility
- Keep bones strong
- Help normalize blood pressure, blood sugar levels and weight
- Help you feel good about life

Make a Plan

- Talk to your doctor about types of exercises that will work best for you.
- If you have problems like back pain, arthritis, heart problems or other concerns, talk to your doctor. You may benefit from physical therapy for evaluation and exercise guidance.
- Medicare and other insurance may help cover this.

Use the Buddy System

- Exercising with a buddy or attending a class helps you stay in routine.

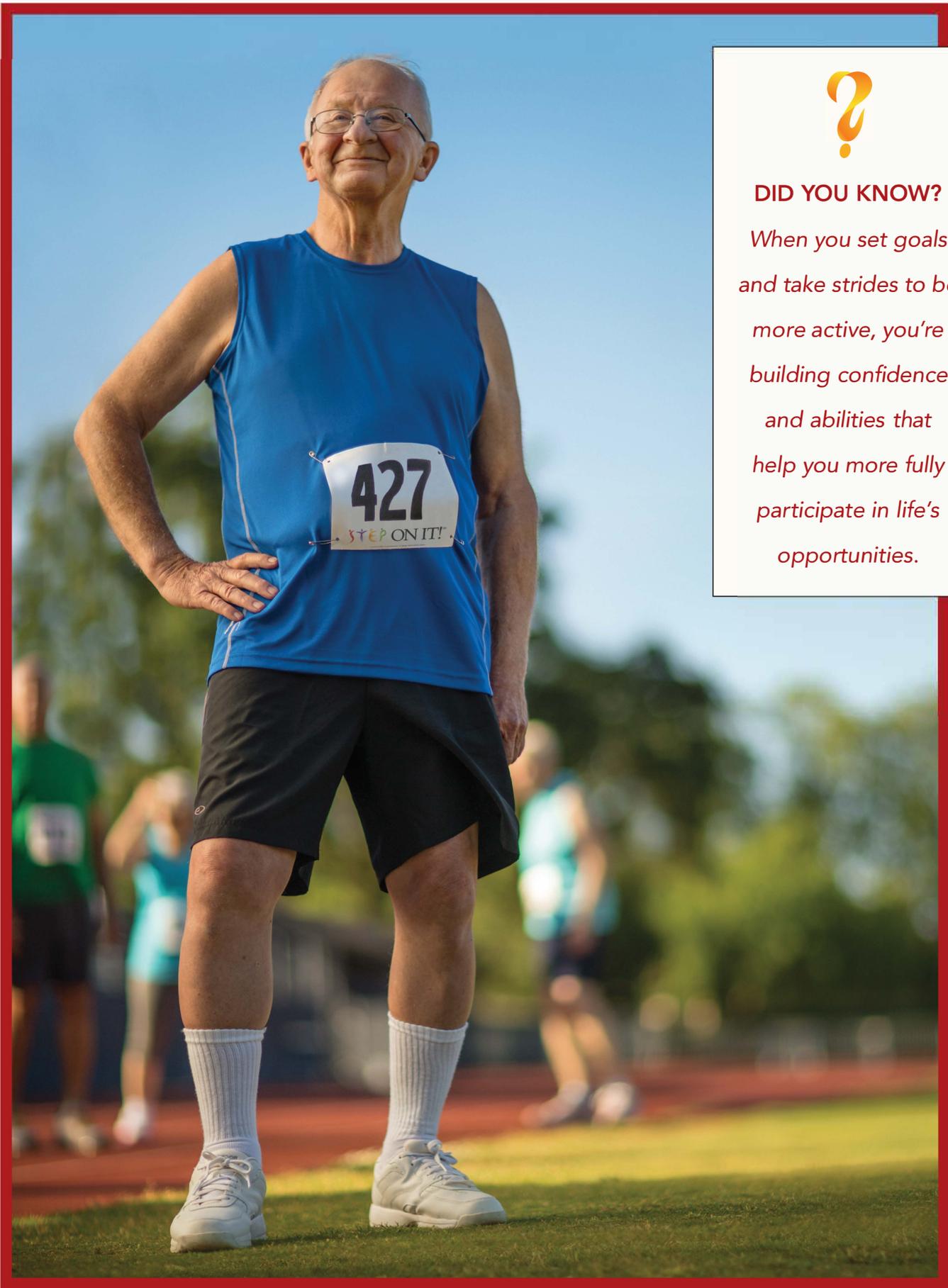
Make Activity an Everyday Priority

- Am I ready to exercise? Your healthcare provider can help you get ready.
- What's the best time of day for you to exercise? Morning, afternoon, evening?
- Where's the best location(s)? Home, neighborhood, senior center, church, gym?
- What do I enjoy? Walking, dancing, exercise class, swimming, other: _____
- What's my goal?
 - Your health provider can help you set daily, weekly and monthly goals.
 - Studies show that older adults benefit from strength, balance and flexibility exercise 3 times per week and aerobic activities, like walking 20 to 30 minutes, 3 to 5 times per week.
 - See page 16 for resources and tools to help you track your progress.



DID YOU KNOW?

When you set goals and take strides to be more active, you're building confidence and abilities that help you more fully participate in life's opportunities.



Build Confidence by Minimizing Risks for Falls

Master Your Medicines

Studies show that older adults who use four or more prescription medications daily are at elevated fall risk. Talk to your doctor and pharmacist about how to best master your medicines.

- Get written instructions and write down answers to your questions. We recall about ¼ of what we hear.
- Keep a current list of all prescription and over-the-counter medications.
- Take your list and all medications to your healthcare appointments.
- If you take more than one medication, set up a routine by using tools like a pill planner.
- Some medications can lower your blood pressure. If you've been lying down for a while, sitting up slowly and waiting a couple of minutes before standing helps you avoid lightheadedness.

Schedule Regular Eye Exams

By age 65, we need three times more light to see than we did at age 20, our eyes take longer to adjust to lighting changes, and it's harder to judge depth and distance.

- Have your eyesight checked yearly by your doctor.
- If you wear glasses, have your eyesight and glasses checked at least every two years by your optometrist.
- Wear sunglasses outside and give your eyes time to adjust when lighting changes.

Wear Shoes That Work

As we age, our feet can change shape, lose some padding, feeling and flexibility. Because our feet are farthest from the heart, our feet can take longer to heal. Untreated foot problems can affect balance and walking ability.

- If you have leg or foot pain, numbness or tingling, talk to your doctor or podiatrist.
- Check your feet for sores, red spots, swelling and infected toenails or skin breakdown.
- Choose slippers with the words "non-slip" on the package, and an enclosed heel, tread on the bottom and a secure fit.
- Shoe-shop in the afternoon, since feet tend to swell throughout the day.
- Have both feet measured while you're standing.
- Get the best fit for the larger foot.
- Try on and walk around in both shoes.



DID YOU KNOW?

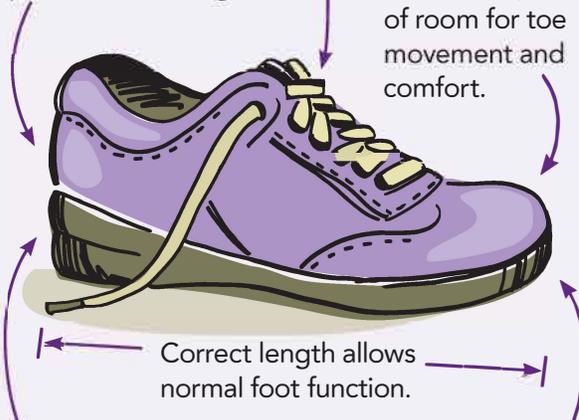
Reducing fall risk is not about avoiding something that you're afraid of. It's about having confidence and owning your right to balance. After all, our balance has a lot to do with our independence.



Laces, buckles or velcro fastenings hold the foot more firmly.

Firm heel cup provides support when walking.

Wide and deep toe box allows plenty of room for toe movement and comfort.



Low, wide heel with rounded edges provides more contact with the ground and prevents slipping.

This sole with tread enables your feet to "read" the underlying surface and prevents slipping.



When buying new shoes, look for these features:

- Rubber-soled, slip-resistant
- Low-heeled
- Shoe base as broad as the widest part of your foot
- Firm heel cup and arch support
- Cushioned for shock absorption
- Soft, flexible upper that lets feet "breathe"
- Laces or Velcro (they work best)
- "Wiggle room" in the toe box

Clip out this tip for buying shoes and bring with you to the shoe store.

Make Your Home a Safe Haven

Home is a haven where we can confidently enjoy life's activities. But one-third of adults over age 65, who live in their own homes, fall at least once in a year. Research shows that recognizing and reorganizing areas in the home that hinder mobility reduces fall risk and preserves independence.

- Compare your home to the safety checklist.
- Make a list of improvements to support your mobility in your home.
- Prioritize your list and tackle one item at a time.
 - First, tackle items you can do yourself or at minimum cost.
 - Itemize changes that may require the help of another person.
 - If home repairs or updates are needed, take time to consider what is most important and what you can afford. Your local agency on aging may offer assistance to older adults who need to make such changes.

Home Safety Checklist

This home safety checklist is designed to help you improve the safety of your home environment. The suggestions made here can help ensure your safety when performing functional activities, with or without an assistive device.

Home Safety Checklist

General Considerations	Yes	No	Suggestions
Are there any throw rugs or area rugs in or at the entrance to the home?			Remove small throw rugs, ensure area rugs have non-slip backing or are taped down with double sided tape.
Are there any holes or rips in flooring such as carpet or linoleum?			Reattach or remove any loose flooring.
Are there any cords such as phone or electrical that run across open areas or walkways?			Remove cords from any walkway areas. If cords absolutely cannot be removed, cover with an appropriate cable concealer sold at office supply stores. This will improve the situation, but not eliminate the cord as a tripping hazard. Running a cord under carpet or tape can lead to cord failure and therefore pose an electrical fire hazard.
Is there an accessible walkway through each room that is clear of furniture and clutter?			Move furniture, coffee tables, baskets or other clutter that may block your path or cause you to trip or lose your balance. Ask for help when moving larger objects.
If you are using a walker, are the doorways to each room you need to access wide enough to allow you to guide the walker through them?			Often removing the door will give enough extra room to maneuver the walker through. If not, your homecare therapist can instruct you on other methods of entering a room with your walker.
Is a telephone easily accessible in each room of the main living areas?			If using a cordless phone or cell phone, be sure the charger is easily accessible.
Are the light switches and lamps easily accessible without having to walk through dark areas?			Be sure you would not have to lean/reach outside your base of support to turn on a light. Place nightlights in areas where lights are more difficult to reach.
Are there stairs inside the home that must be used to access main living areas?			Check to be sure handrails are secure and that a light can be turned on from the top or bottom of the stairs.

Home Safety Checklist

Entrance to the Home		Yes	No	Suggestions
Is there more than one entrance to the home?				Take a moment to assess each entrance and determine which is safest for you to use. Keep in mind this may not be the entrance you normally use.
Are there steps to enter the home?				Check to be sure the steps are solid and well supported; if there is a handrail, be sure it is secure. If no handrail is present, consider having one installed or install a grab bar.
If entering through an area such as a garage or patio, are pathways clear?				Clear pathways of any equipment, furniture, or other clutter.
Is there adequate room to maneuver around the car in the garage or driveway?				Rearrange/clear equipment, tools or other clutter in the garage, and trim bushes/edges of the drive to allow easy access to the car with a walker.
Hallways		Yes	No	Suggestions
Does the hallway offer a clear pathway to maneuver, including turning around at the end of the hall or turning to enter a room?				Remove any unnecessary items from the hallway to improve safety and access.
Does the hallway have a light that can be turned on from either end of the hall?				Use a nightlight in the hallway, or if there is not an outlet, consider leaving a light on in a nearby room to provide light in the hallway.

Home Safety Checklist

Living Room/Family Room	Yes	No	Suggestions
Do you have a chair that is both comfortable and firm enough to allow you to easily move from sitting to standing?			You may have an appropriate chair that is in another area of the house you can move to the living room. A firm pillow or high-density foam square may be used to improve the height of a chair. Recliners are often too low and too soft to use safely. Casters or wheels should not be used, as they decrease the stability of the chair and therefore reduce safety.
When you are seated in the chair, are your hips higher than your knees so that you can move from sitting to standing more easily?			
Does the chair have armrests you can push on to help yourself up?			
Are frequently used items such as remotes or books in locations that are easy to reach without twisting or leaning?			Although you should be up and moving around frequently unless otherwise instructed by your doctor, it is a good idea to establish a 'command center' near the chair you will be using most often. Be sure frequently used items are easy to reach. You should also have room for a water bottle to make it easier to stay hydrated.
Do you have a water bottle or other beverage container with a lid available?			
Bedroom	Yes	No	Suggestions
Do the bed linens clear the floor?			Bedspreads or linens that drape onto the floor can catch your foot or the foot of an assistive device and are a tripping hazard.
When you sit on the edge of the bed, are your hips higher than or the same height as your knees?			If your bed is too low to move from sitting to standing easily, you can raise the bed by using bed risers which are sold at bed and bath stores.
Is your bed on casters?			If casters do not lock, they should be removed to improve safety when getting in and out of the bed.
Do you have room to easily maneuver as you move alongside and around the bed?			If possible, move the bed or other furniture to allow increased clearance on the side you will use.
Can you easily reach clothing items you will need in closets or drawers with a minimum of reaching or bending?			Consider rearranging drawers so that a few of each of your most frequently needed items (socks, undergarments, pants and shirts) are all located in a top drawer. Move shoes from the floor of the closet to an easy-to-reach shelf or to the top of the dresser.

Home Safety Checklist

Bathroom			Yes	No	Suggestions
Do you have room to easily maneuver in the bathroom?					If not, are there non-permanent items such as shelving, trash cans etc., that could be removed to allow more room.
When you sit on the toilet, are your hips higher than or at the same level as your knees?					If not, you may want to consider a raised toilet seat with arms to assist you coming from sit to stand.
Do you have grab bars in the shower or tub,?					If not, you may want to consider having one or more installed to improve safety when getting in or out of the tub or shower.
Is there a non-slip floor surface in the tub or shower?					Consider applying non-slip strips available at most home improvement and hardware stores.
Are towels, extra toilet paper and other frequently used items in easy-to-reach locations?					Consider rearranging items in linen closets or bathroom shelves so frequently needed items are at hip level or above.
Do you have a nightlight?					It is important to see clearly when you are moving about. A nightlight is an inexpensive way to improve your safety.
Kitchen			Yes	No	Suggestions
Are frequently used items between mid thigh and shoulder height?					Consider moving the few items you would need to make a simple meal to the countertop area near the stove. Also be sure commonly used ingredients are easily accessible. Move frequently used refrigerator and freezer foods near the front of the appliance on a shelf of appropriate height.
Pots and pans?					
Pantry staples?					
Refrigerator and freezer items?					
<p>Note about moving items in the kitchen: If you are using a walker in your home, moving items in the kitchen, such as getting your dinner from the kitchen counter to the table, can be difficult. Each kitchen set up is unique. Your homecare therapist should be able to assess yours and make helpful suggestions specific to your kitchen to accomplish tasks while using a walker or another assistive device.</p>					



DID YOU KNOW?

Being independent doesn't mean being isolated. Asking for and benefiting from help is a sign of wisdom and resilience.



Ask for Help

- Talk with family, friends and/or your healthcare providers about your evolving needs and invite them to help you devise and stick to a plan.
- Remember: use the buddy system and arrange for someone to check in with you on a regular basis. Do the same for a friend.
- Local agencies provide a wealth of information and resources.
 - The appendix in this Guide provides a starting place for contact information.
- Medicare covers outpatient therapy services and home healthcare visits by skilled nurses, physical and occupational therapists, speech and language pathologists, and home health aides. Talk to your doctor to see if you are eligible.
- Home and medical alert systems can help in instances of fear of falling or frequent falls, complex medical conditions or limited mobility.
 - Websites that rate such services can be found in this Guide's appendix.

This Is How a Personal Alarm Works:

Press button.



The person who has fallen presses a button on a pendant or wristband.

Contact made with base station.



The unit sends a message to the monitored base station.

Staff arranges help.



Staff at the base station contact the people prearranged to respond to the emergency.

Help arrives.



The contact person responds to the emergency. He/she must have a key to enter the house. The ambulance service may be listed as the last contact.



DID YOU KNOW?

Research shows that those who engage in positive relationships are more likely to sustain focused health efforts and master desired activities.

What to Do If You Happen to Fall

If it has been a long time since you have tried getting down to the floor and back up again, wait until someone is with you to help you up if needed. You may be more out of practice than you think.

These pictures show a common way to get up from the floor that will suit most people. People with knee problems may find it uncomfortable to kneel. A physical therapist or occupational therapist can teach you other ways to get up that may suit you better, and they may demonstrate exercises to help you regain your strength and flexibility.

Getting Up if You Have Fallen Down

1. Calm down. Catch your breath and compose yourself after the shock.
2. Check your body. If you are not badly injured, you can think about getting up. If you are injured, for example with a broken bone, you need to stay where you are and put your plan to get help into action.
3. If you are not injured, look around for a sturdy piece of furniture, preferably a chair.

4. Roll onto your side.



5. Crawl or drag yourself over to the chair.



6. From a kneeling position, put your arms up onto the seat of the chair.



7. Bring one knee forward and put that foot on the floor.



8. Push up with your arms and legs, pivot your bottom around.



9. Sit down. Rest before trying to move. Rest at any time, and if you do not succeed the first time, rest and try again.



Practice this until you feel confident about the steps involved. It is recommended you do this once a month or so to keep in practice.

If You Cannot Get Up

- Do not panic. Check for bleeding, painful areas or broken bones and see if you can move your arms and legs without pain.
- Try to stay warm by gathering nearby rugs, coats or blankets over and under you to keep warm until help arrives.
- Gently move around to stop one part of your body from getting too much pressure.
- If you think you're seriously hurt and someone is nearby, call out for help.
- If no one is nearby, try to get up or get to a phone.
 - Call for help: if you can get up, take time to recover then call for help.
 - Try to get up: follow the illustrated instructions on these pages.
 - Shuffle: if it's too painful to crawl, shuffle on your bottom to a close piece of sturdy furniture, pull yourself onto your knees and stand.
 - Using stairs: shuffle on your bottom to the stairs, then slowly move up one step at a time until you reach a level that makes it possible for you to stand.
- Remember: use the buddy system and arrange for someone to check in with you on a regular basis. Do the same for a friend.

After a Fall

It is important to talk to your doctor about your fall and the possible causes, and to tell someone else (family, friend or neighbor) that you have fallen.

Where You Can Find Help or Advice

See page 16 for help in finding contacts.

Tools, Resources and Contacts

Monitoring Services

Medical Alert System Ratings:

www.consumersadvocate.org/medical-alerts/best-medical-alerts

www.aarp.org/health/doctors-hospitals/info-11-2010/medical_alert_systems.html

www.medicalalertsratings.com

Foot Care Information

American Diabetes Association: 800-DIABETES or www.diabetes.org

National Diabetes Education Program: 800-438-5383 or www.ndep.nih.gov

Exercise Resources

Exercise: A Guide from the National Institute on Aging. Free 120-page guide with exercise diagrams.

To order: Call 800-222-2225 or download from www.nia.nih.gov.

AARP's Physical Activities Workbook

First copy free, extra copies \$1 each.

To order: Call 888-687-2277 (888-OUR-AARP)

Sit and Be Fit Video Series (prices vary by title)

Videotapes for general chair and stretching/ toning exercises, and for exercising with health conditions such as arthritis, COPD, stroke, multiple sclerosis, osteoporosis, and Parkinson's.

To order: Call 509-448-9438 for a catalog or visit www.sitandbenefit.org

Other Resources

Arthritis Foundation: www.arthritis.org

Administration on Aging: www.aoa.gov

National Council on Aging: www.ncoa.org

Medicare information: 800-633-4227 or www.medicare.gov

References

AGS, & BGS. (2011). Summary of the Updated American Geriatrics Society/British Geriatrics Society clinical practice guideline for prevention of falls in older persons. *J Am Geriatr Soc*, 59(1), 148-157. doi: 10.1111/j.1532-5415.2010.03234.x

AGS, BGS, & AAOS. (2001). Guideline for the prevention of falls in older persons. American Geriatrics Society, British Geriatrics Society, and American Academy of Orthopaedic Surgeons Panel on Falls Prevention. *J Am Geriatr Soc*, 49(5), 664-672.

Allison, L. K., Painter, J. A., Emory, A., Whitehurst, P., & Raby, A. (2013). Participation Restriction, Not Fear of Falling, Predicts Actual Balance and Mobility Abilities in Rural Community-Dwelling Older Adults. *JGPT*, 36, 13-23.

Bandura, A., Adams, N. E., & Beyer, J. (1977). Cognitive processes mediating behavioral change. *J Pers Soc Psychol*, 35(3), 125-139.

CDC. (2010). Centers for Disease Control and Prevention. Falls among older adults: an overview. 2010, from <http://www.cdc.gov/HomeandRecreationalSafety/Falls/adultfalls.html>.

CDC. (2013). Centers for Disease Control and Prevention: Costs of Falls Among Older Adults Retrieved 11/14/2013, 2013, from <http://www.cdc.gov/HomeandRecreationalSafety/Falls/fallcost.html>

Hayden, J. (2009). *Introduction to Health Behavior*. Boston: Jones & Bartlett.

Shumway-Cook, A., Silver, I. F., LeMier, M., York, S., Cummings, P., & Koepsell, T. D. (2007). Effectiveness of a community-based multifactorial intervention on falls and fall risk factors in community-living older adults: a randomized, controlled trial. *J Gerontol A Biol Sci Med Sci*, 62(12), 1420-1427.

York, S. C. (2006). *Stay Active and Independent for Life: an information guide for adults 65+*.

York, S. C., Shumway-Cook, A., Silver, I. F., & Morrison, A. C. (2011). A translational research evaluation of the Stay Active and Independent for Life (SAIL) community-based fall prevention exercise and education program. *Health Promot Pract*, 12(6), 832-839. doi: 10.1177/1524839910375026

Zijlstra, G. A., van Haastregt, J. C., van Rossum, E., van Eijk, J. T., Yardley, L., & Kempen, G. I. (2007). Interventions to reduce fear of falling in community-living older people: a systematic review. *J Am Geriatr Soc*, 55(4), 603-615. doi: 10.1111/j.1532-5415.2007.01148.x



Taking Steps to Prevent Falls

Just as moving is an essential part of staying healthy, so is the avoidance of falls. Among those over 65, falls are a leading cause of injury that can lead to broken bones and hospitalizations.

That's where Step on It! can help. Step on It! is a unique specialty program that provides home-based rehabilitation care. This program improves your safety, provides care and achieves optimal balance for you. It's just another way our care is making a dramatic difference in the lives of thousands of seniors every day.

To learn more, please call **1-866-546-3733**
or visit **www.StepOnIt.org**