

## Fall Prevention Tips for Working with Residents with Dementia

### Why Traditional Instructions Do Not Work

- When residents have dementia, it can be hard for them to follow instructions or learn new routines. Remember, residents are not acting this way on purpose. Dementia changes how they think and act.<sup>i</sup>
- To help prevent falls, work with residents' behaviors instead of trying to stop them. For example, if a resident insists on walking, find safe ways to support residents rather than just telling him or her to sit down.<sup>ii</sup>

### Strategies to Prevent Falls Through a Culture of Safety

#### Anticipating Residents' Needs

Most people living with dementia experience problems with their memory and thinking. Residents can even become suspicious of others, restless, or agitated.<sup>iii</sup> To ease residents' anxiety and bolster their self-esteem and confidence, follow these tips:

- Know your residents. Learn their routines and habits.
- Be aware and tuned in to the residents' needs.
  - Think ahead about what may cause them to try to get up unattended.
  - Offer assistance when you notice signs they may try to get up.
- Watch for changes in behavior, such as:
  - Non-verbal cues including restlessness, fidgeting, scooting forward, or agitation.
  - Signs of fatigue, hunger, pain, or loneliness.
- Establish consistent routines.<sup>iv, v</sup>

#### Communicating With Residents

Residents with dementia often cannot focus on two things at once. That ability is known as dual tasking, and it diminishes over time. Dual tasking is talking while walking or tying your shoes while talking on the phone. As the disease progresses, dual tasking can cause an overload on the brain.<sup>vi</sup> Here are tips to help:

- Focus on one task at a time, such as walking, but not chatting at the same time.
- Communicate with simple and clear language so residents are not overwhelmed:
  - “Let’s go together”
  - “Can I help you sit here?”
  - “We’re in no hurry. Let’s take our time.”

#### Creating a Safe Environment

Research tells us that as dementia progression occurs, the individuals' ability to maintain safety awareness decreases. They simply cannot perceive potentially risky situations like they did before.<sup>vii</sup> Here are tips to help:

- Be the resident's voice: Report broken or unsafe equipment, such as wheelchairs that do not lock, unstable walkers or chairs, and floor mats that slip or curl at the edges.
- Take care of accidents that are waiting to happen.
  - Remove clutter and tripping hazards.
  - Reduce noise.
  - Ensure adequate lighting.
- Ensure consistent furniture placement to help residents navigate their environment more easily.
  - Set the bedside table at a height comfortable for residents.
  - Confirm chair placement to allow enough space for safe transfer.<sup>viii</sup>

## Assuring Proper Footwear and Use of Prescription Glasses, if Needed

Wearing prescription glasses, if needed, and safe footwear is important for residents with dementia because it helps them see more clearly, reduces confusion, improves balance, and makes it easier to move around safely. Here are tips to help:

- Ensure residents wear their prescription glasses if they use them.
- Provide safe footwear, such as shoes with good traction or non-skid socks. Check if residents need podiatry care.<sup>ix</sup>

i Ferman T. Smith G. et al. Understanding Behavioral Changes in Dementia. Lewy Body Dementia Association. Available at: <https://www.lbda.org/understanding-behavioral-changes-in-dementia/>. Accessed on: September 2, 2025.

ii Ferman T. Smith G. et al. Understanding Behavioral Changes in Dementia. Lewy Body Dementia Association. Available at: <https://www.lbda.org/understanding-behavioral-changes-in-dementia/>. Accessed on: September 2, 2025.

iii Alzheimer's Society. Understanding and Supporting a Person With Dementia. Available at: <https://www.alzheimers.org.uk/get-support/help-dementia-care/understanding-supporting-person-dementia>. Accessed on: September 2, 2025.

iv Agency for Healthcare Research and Quality. Module 3: Falls Prevention and Management. Available at: <https://www.ahrq.gov/patient-safety/settings/long-term-care/resource/facilities/lte/mod3.html>. Accessed on: September 2, 2025.

v Ferman T. Smith G. et al. Understanding Behavioral Changes in Dementia. Lewy Body Dementia Association. Available at: <https://www.lbda.org/understanding-behavioral-changes-in-dementia/>. Accessed on: September 2, 2025.

vi Kehler-Dunlap A. Keleman A. et al. Advances in Geriatric Medicine and Research. Falls and Alzheimer Disease. 2024;6(1):e240001. Available at: <https://doi.org/10.20900/agmr20240001>. Accessed on: September 2, 2025.

vii Kehler-Dunlap A. Keleman A. et al. Advances in Geriatric Medicine and Research. Falls and Alzheimer Disease. 2024;6(1):e240001. Available at: <https://doi.org/10.20900/agmr20240001>. Accessed on: September 2, 2025.

viii Agency for Healthcare Research and Quality. Module 3: Falls Prevention and Management. Available at: <https://www.ahrq.gov/patient-safety/settings/long-term-care/resource/facilities/lte/mod3.html>. Accessed on: September 2, 2025.

ix Centers for Disease Control and Prevention. Resource Algorithm for Fall Risk Screening, Assessment, and Intervention. Available at: <https://www.cdc.gov/steadi/media/pdfs/STEADI-Algorithm-508.pdf>. Accessed on: September 2, 2024.