



Why Reducing the Physical Demands of Caregivers Prevents Falls and Makes Mealtimes Easier and Safer for Seniors and Caregivers

The dining room is the heart of every senior care community. It is where residents, friends, and family members gather. But the dining room also holds hazards for both residents and staff, particularly when it comes to moving residents up to and away from the tables. When residents have limited mobility, caregivers are responsible for helping them using traditional dining room chairs, which simply aren't built for the job. Falls can occur, and caregiver injuries are a real risk that can lead to workers' compensation claims, increased insurance premiums, shifts that suddenly need to be filled, and more.

Senior care communities can't afford to ignore these dining room risks.

Dining Room Dangers for Residents

Traditional dining room chairs aren't meant to be moved. When residents rely on caregivers to move their chairs up to the dining room table, caregivers must push, pull, shove, and twist chairs into place. This challenge arises with several types of residents:

- Residents using walkers or rollators.
- Residents weighing over 200 pounds who require assistance from care staff.
- Residents who have difficulty comprehending verbal instructions and who may appear agitated with care staff.
- Residents with cognitive or motor skills challenges such as dementia, Parkinson's, or arthritis.
- Residents who need mobility assistance but who are reluctant to use a wheelchair.

When helping residents with mobility limitations to the dining room, caregivers must start by placing the chair as close to the table as possible, help the resident get seated, and then pushing, shoving, and twisting on the back of the chair to move the resident close enough to the table. The process is reversed when the meal is complete.

This awkward, drawn-out process erodes a resident's dignity. It takes time away from their ability to engage with other residents and to enjoy meals. Residents can start to feel like they're a nuisance, and they may sit in awkward positions or spaces to avoid relying on caregivers to position them at the table.

All of these situations can contribute to fall risks. According to the [Centers for Disease Control and Prevention \(CDC\)](#), falls among adults aged 65 and older resulted in more than 36,000 deaths in 2020; falls were the leading cause of injury death for this age group. Three million older adults visited emergency rooms in 2020 for falls. Each year, older adult falls cost \$50 billion in medical costs.

According to the Centers for Disease Control and Prevention (CDC), falls among adults aged 65 and older resulted in more than 36,000 deaths in 2020.



A [study](#) published by the Massachusetts Department of Public Health sheds light on fall-related injuries specifically in nursing home residents. According to the study, approximately half of nursing home residents experience a fall at least once a year, with a mean of 1.7 falls occurring per bed per year. The study examines falls that occurred in nursing homes from 2018 to 2022, and notes that in 72% of falls, residents were using a walker or wheelchair. Additionally, 70% of the activities that immediately preceded a fall resulting in injury were ambulating, getting out of bed, or getting up from a chair.

Even more significant is the fact that falls resulting in injury occurred at a high frequency from 7:00 am to 8:00 am and from 11:00 am to 12:00 pm — **during morning and afternoon mealtimes**. Such data makes it clear that dining rooms are particularly dangerous for residents, and falls occur more frequently during mealtimes. Senior care communities need to not only be aware of this risk, but need to proactively find solutions to reduce this heightened risk surrounding mealtimes.

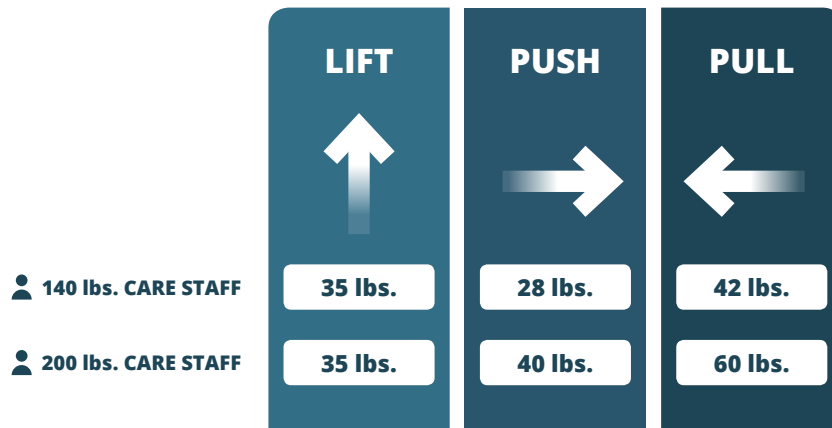
Dining Room Dangers for Staff

The effort of moving and assisting residents while seated in traditional dining chairs also takes a significant physical toll on caregivers. Under normal conditions, excluding sudden moves or twisting, a person can safely lift 35 pounds. A person can also push up to 20% of their body weight, and can pull up to 30% of their body weight.



HOW MUCH PHYSICAL EFFORT
CAN CARE STAFF
SAFELY EXERT?
(LIFTING - PUSHING - PULLING)

A person can safely **LIFT 35 lbs.** under normal conditions (no sudden moves or twisting)
A person can safely **PUSH up to 20%** of their body weight and **PULL up to 30%** of their body weight.
** Silverstone Group*



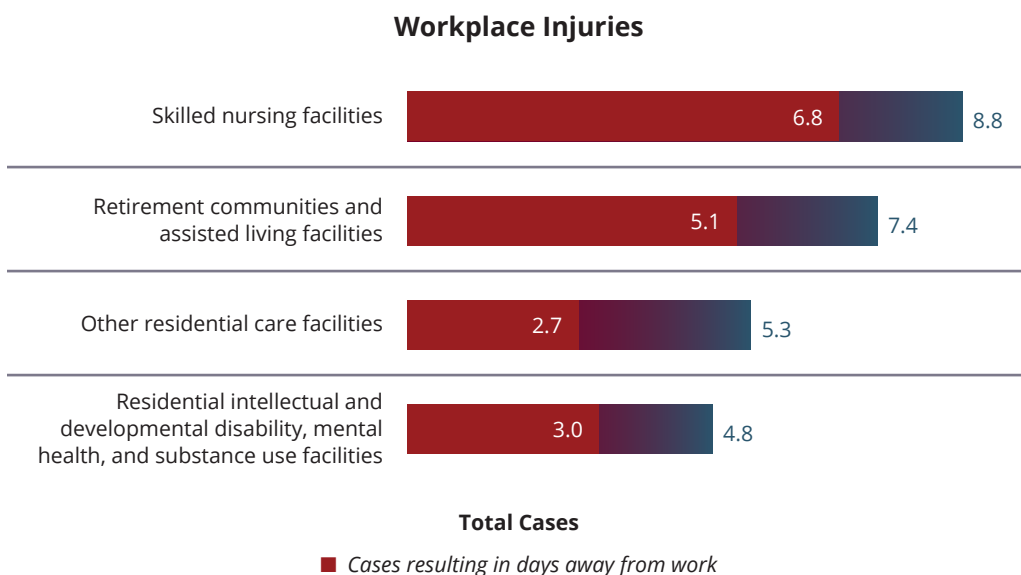
ESSENTIALLY...
A CARE STAFF RISKS INCURRING A WORK-RELATED INJURY
EACH TIME ASSISTANCE IS PROVIDED.

Even more significant is the fact that falls resulting in injury occurred at a high frequency from 7:00 am to 8:00 am and from 11:00 am to 12:00 pm — during morning and afternoon mealtimes.

According to these guidelines, a caregiver weighing 140 pounds can safely lift 35 pounds, push 28 pounds, and pull 42 pounds. A caregiver weighing 200 pounds can lift 35 pounds, push 40 pounds, and pull 60 pounds. Unfortunately, such guidelines indicate that even a larger caregiver is physically unable to safely lift, push, and pull residents seated in traditional dining chairs. Remember that caregivers don't help just one or two residents per day — they repeat this process with multiple residents twice during each mealtime, compounding the physical strain. Further, attempting to push, pull, or swivel a chair toward a table can lead to tripping hazards for the person being seated and the caregiver, as table interference can cause either person to lose their balance (and risk a fall injury) or attempt to move the resident's chair from awkward positions due to lack of space.

The result is, often, workplace injuries. According to [Becker's Hospital Review](#), in 2021, adult care settings experienced higher nonfatal occupational injury or illness rates than hospitals. Adult care settings experienced a rate of 7.3 injuries per 100 full-time workers, compared to a rate of 6.1 for hospitals. Nursing facilities experienced a rate of 5.3 cases per 100 full-time workers that involved staff days away from work, job restriction, or transfers.

The data indicates that workers in adult care settings are at a higher risk of nonfatal occupational injuries or illnesses than hospital staff.



The data indicates that workers in adult care settings are at a higher risk of nonfatal occupational injuries or illnesses than hospital staff. One can assume that the repetitive nature of caregiving in adult care settings may contribute to these heightened risks. Helping residents in the dining room is a prime example of the physical demands that are placed on caregivers, and those demands are exacerbated when caregivers don't have the right tools.

Caregiver injuries can result in time off of work and workers' compensation claims. After a workers' compensation claim, a senior care community's insurance rates are likely to increase. That community must also find coverage for the caregiver, which is increasingly challenging given the staffing shortages faced by the senior care industry.

The emotional toll of the challenge of assisting residents in the dining room is also significant on caregivers. Caregivers may:

1. Feel a sense of helplessness, knowing that they can't effectively or smoothly transition residents to the dining table.
2. Start to resent the physical strain that mealtimes present, which can inadvertently carry over into how they engage with residents.
3. Have less time to address other resident needs because of the time consumed helping residents to and from the table.
4. Feel more like hired muscle than talented and skilled caregivers.
5. Become frustrated with the lack of resources and caregiving equipment available to them.
6. Experience lower job satisfaction and start looking for opportunities elsewhere.
7. Experience increased pain and muscle fatigue that affects their on-the-job performance and overall quality of life.
8. Have less energy at the end of their shifts, impacting the quality of care that they're able to provide.

The significance of potentially losing caregivers because of the challenges posed by the dining room must be considered. A [2023 study](#) by the National Council of State Boards of Nursing found that about 100,000 registered nurses left the workforce over the past two years due to workplace burnout and stress, reducing the nursing workforce in the United States by 3.3%. Further, the [2023 NSI National Health Care Retention & RN Staffing Report](#) found that the average cost of turnover for one staff RN was \$52,350, with the range averaging \$40,200 to \$64,500.

According to this data, senior care communities that overlook factors contributing to caregiver injury and burnout, such as the dangers of dining room caregiving, could face significant financial and staffing consequences. We are in a time when finding quality caregivers is one of the greatest challenges facing the senior care industry.

Senior care communities simply cannot afford to lose caregivers.

Communities create safe lifting procedures and train staff on lifting techniques when performing patient transfers, such as wheelchair transfers. They create and update detailed fall protocols to ensure residents are safely lifted from the floor without jeopardizing their or the caregiver's safety. They invest in manual lifts to facilitate resident transfers and protect caregivers, **but the dining room goes overlooked.** It's time to change that.



Solutions to Prevent Falls and Reduce Physical Demands on Staff at Mealtimes

Preventing falls and reducing physical demands on staff at mealtimes requires a comprehensive approach. There isn't one straightforward solution, but rather, through design, policy, and equipment changes, senior care communities can create safer dining rooms for staff and residents.

Evaluate Residents for Fall Risks

Fall risk assessments need to be standard parts of senior care. Residents should be evaluated when they first enter the community, and then they should receive subsequent assessments at least annually, as well as after changes in their medical history.

Senior care communities typically adopt and create their own assessments, but the [Cleveland Clinic](#) gives a detailed overview of essential components of any assessment:

- Review of the resident's previous fall history, including what caused the fall and what happened after the fall.
- Discussion of the resident's activity level and capability of performing daily tasks.
- Review of the medications the resident is taking.
- Checking for low blood pressure or heart palpitations.
- Using several fall risk assessment tools and tests.

When residents are identified as being at an increased risk for falls, all caregivers should be made aware. Modifications to the resident's care in the dining room, as well as in other areas of the community, may be needed to help maximize safety.

Design Dining Rooms to Facilitate Safe Access to Tables

Reevaluating dining room design can create a safer environment for residents and staff. Dining rooms should provide wide accessways that are well-lit.

Evaluate the current floor in the dining rooms, too. Chances are you will find areas where the floors are worn and scratched from resident chairs being repeatedly pushed into and pulled away from the tables. These areas of wear make it more difficult to maneuver the chairs, and they can affect the floor's traction, too. If dining room flooring is showing wear, it's time to replace it with new non-slip flooring.

Fall risk assessments need to be standard parts of senior care.

Positioning tables and chairs to provide plenty of space and easy access is also essential. When caregivers assist residents, they need appropriate space to accommodate themselves, the person being assisted, and their walker/rollator. Maximizing that space available can help ensure safety and gives caregivers more positioning options when helping residents.

Invest in Appropriate Dining Room Equipment

Ultimately, caregivers need appropriate equipment if they are going to be able to safely and smoothly move residents to and from tables. Chairs that swivel and roll facilitate easier movement and eliminate table interference, helping to prevent resident trips and falls that could otherwise occur during the process.

Today, options exist to do this affordably and quickly; senior care communities don't have to outfit their dining rooms with brand-new chairs. ComforTek's [Chair Caddie](#) is an after-market device that attaches to the base of a community's existing chairs. The Chair Caddie transforms a traditional dining chair into a chair that caregivers can easily roll across the floor. Built-in brakes prevent the chair from rolling when not in use, ensuring safety and transforming a traditional chair into a tool. Rather than bringing a resident to the chair, caregivers can bring the chair right to the resident. Once seated, the resident can then be easily and safely moved up to and away from the table, eliminating the pushing, pulling, shoving, and twisting that caregivers must perform with non-wheeled chairs.

Once the caddie is attached, a dining chair becomes a helpful tool for caregivers, rather than a hindrance.

Increase Staffing During Mealtimes

When staff numbers are limited, caregivers are left to do more work in less time. That amounts to rushing and increased pressure on the caregivers, which can lead to overlooked safety protocols and accidents. When this occurs during mealtimes, which are already high-risk times for resident falls, injuries to both caregivers and residents can result.

Focus on strategic staffing to ensure that caregivers present in dining rooms have adequate support. Adjust schedules as needed to maximize staff availability during dining times. If you can't further maximize staff, you may also look for ways to minimize the number of residents dining at one time.

Develop Safe Transition Procedures for the Dining Room

It's easy for senior care communities to overlook the amount of physical effort caregivers exert in the dining room. Acknowledging the physical demands of bringing residents up to tables and then moving them away from tables after meals is a first step in maximizing caregiver safety.

Develop and implement safe transition procedures for the dining room. Consider the chairs and tables used, and if investing in mobility chairs and products like the Chair Caddy, develop procedures to help staff use these tools safely and

Ultimately, caregivers need appropriate equipment if they are going to be able to safely and smoothly move residents to and from tables.



effectively. Just as you would with your fall prevention and response training, make these dining room-specific protocols part of your new hire training, and ensure that caregivers receive refresher trainings, too. Appropriate protocols and trainings are key in helping staff use rolled chairs safely.

The Real Value of Increased Dining Safety

Senior care communities have several tools available to help them increase dining safety and reduce physical strain on caregivers. Doing so can improve the community in many ways.

Resident Safety

Changing how residents approach and leave the dining room table amounts to increased resident safety and may help prevent falls and related injuries. By reducing fall risk, a community can help residents avoid potential hospitalizations and long recoveries, improving their quality of life.

Resident Dignity

Facilitating smooth transitions to and from dining room tables can also improve resident dignity. When caregivers can more easily and smoothly assist residents, residents will experience increased feelings of safety. The transition to and from the table simply becomes another typical part of the dining experience, rather than a major and uncomfortable event to be dreaded.

Ensuring these smooth transitions can encourage caregivers to interact with residents differently, too. A care home had ordered a set of chairs including mobility features for their dining room in 2017. When Teresa Heubner, support services manager at Van Daele Extendicare, Ontario, called ComforTek to reorder chairs, she shared that prior to receiving these chairs in 2017, the community documented five to eight incidents per month where a seated resident would “strike” or “lash out” at the caregiver who was assisting them up to the table. Interestingly, since the Titan Series mobility chairs arrived (2017), they have not had another documented case of such incidents.

When caregivers can more easily and smoothly assist residents, residents will experience increased feelings of safety.



They concluded that the dining ***chairs fitted with mobility features enable care staff to focus on developing a relationship with residents***, as opposed to approaching them from behind only to surprise or aggravate them by pushing, pulling, shoving, and twisting on the back of their chair each time meal assistance was provided.

Staff Safety

By providing staff with access to mobile dining chairs, senior care communities can eliminate the pushing, pulling, shoving, and twisting motions that can potentially lead to staff injuries. Mobility chairs reduce the amount of effort that caregivers need to maneuver, which reduces the strain on the caregiver's body.

Creating an overall healthier experience for caregivers helps avoid injuries and related workers' compensation claims. Senior care communities won't have to scramble to find coverage for injured caregivers who can't work, and in avoiding workers' compensation claims, communities could save on years of higher insurance premiums.

Staff Retention and Morale

There is also tremendous value in staff retention and increased staff morale. Finding and retaining quality caregivers is already a significant challenge, given the staffing shortages the industry faces. Investing in equipment that makes dining room caregiving easier can demonstrate to caregivers that a community's administration understands and acknowledges the challenges of caregiving. It's an excellent way to show caregivers that they are heard and valued, and it can demonstrate support. All of these factors can contribute to higher staff morale and staff retention.

Quality of Care

With higher staff retention, a community can better provide its residents with continuity of care. Caregivers who are supported by the community and who have the tools they need to do their jobs well can deliver better care. They're able to engage more with the residents, and caregivers who stay on long-term can forge those valuable relationships with residents that make a senior care community a home.

Improving dining room safety requires the investment of finances and time, but senior care communities stand to see significant returns on that investment. When you consider the benefits that increased safety can offer in terms of staff safety and satisfaction, resident safety and comfort, quality of care, and margins, this is an investment that senior care communities can't afford ***not*** to make. ■



ROI: Experience the difference the Chair CADDIE provides within your care community in as little as 48 hours!

During this timeframe, care staff will be overjoyed having experienced the reduced physical demands required of them when moving a seated person up to the table. Families too appreciate the increased sense of dignity experienced by their aging loved one.

The Chair CADDIE, reducing mealtime stress and anxiety, thereby creating a more enjoyable mealtime routine for both the seated person and the caregiver!

For more information on ComforTek and the Chair Caddie please contact ComforTek at 1.888.678.2060 or by email info@comfortek.com or visit their website at www.comfortek.com/iadvance

