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|---------------|--|----------------------|-------------|-----------|---|
| | West Limerick Independent Living CLG Policies | | | | |
| Title: | CLIENT FALLS MANAGEMENT POLICY | | | | |
| Page: | 1 of 6 | Policy. No.: WLILP19 | Date Nov 16 | Issue No. | 0 |

Category: Operational Policies
Subject: CLIENT FALLS MANAGEMENT POLICY
Responsible for Review of this Policy: West Limerick Independent Living CLG Board

1. SCOPE

This policy is to assist staff to reduce the risk, incidence and severity of falls by client's receiving care from West Limerick Independent Living, staff in their own homes or community settings.

The policy should be read in conjunction with the policy for Accident Report Policy.

2. CLIENT'S

All staff working in the community and see client's in their own homes or in their place of residence must follow these steps.

3. Risk Assessment

All clients of West Limerick Independent Living will be general risk assessed on an annual bases to identify their falls risk. They will be asked if they have fallen in the past 12 months. If they indicate they have experienced such a fall, additional information regarding the frequency, context and characteristics should be documented.

If the general risk assessed question prompts a positive response and the additional information obtained indicates that it is appropriate to do so, a falls risk assessment must be completed see appendix 2 – Risk Assessment for the Prevention of Falls by the member of staff who has asked the general risk assessed question.

If assessment is 'yes' to four or more factors refer to OT, Physio or Nursing services.

If assessment is less than 4 'yes', the staff member who has completed the assessment should act upon any risk factors that were answered 'yes', that are appropriate to their scope of service, in order to reduce the client's risk of further falls. Falls Prevention advice and information should be given to the client e.g. HSE leaflet accessed via:

<https://www.hse.ie/eng/services/news/media/pressrel/newsarchive/archive15/feb15/fallslaunchatuhw.html>

Onward referral to HSE OT services should be made for identified risk factors that fall outside the assessing member of staff's scope of practice.

A copy of the risk assessment and action plan will be held in the client's records. There should be evidence of any onward referral for medication review, physiotherapy assessment, occupational therapy assessment or specialist nurse assessment.

4. Action Plan

A action/care plan should be generated identifying the risks and interventions agreed with the client.



| | | | | | |
|---------------|--|----------------------|-------------|-----------|---|
| | West Limerick Independent Living CLG Policies | | | | |
| Title: | CLIENT FALLS MANAGEMENT POLICY | | | | |
| Page: | 2 of 6 | Policy. No.: WLILP19 | Date Nov 16 | Issue No. | 0 |

5. Fall

If a client falls or a fall related near miss occurs:

- Check the client for signs of significant injury. If a severe injury is evident or suspected on initial assessment - dial 999 for transfer to Accident and Emergency.
- If the client is assessed as having a fall without a severe injury return them to bed/chair using appropriate moving and handling technique and refer to GP.
- All incidents must be reported including client details, time, location and circumstances of the falls.
- Reassess risk and document any actions required. If indicated initiate referral for medication review, community therapy services or specialist nurse assessment and document all interventions in the client's records.

6. TRAINING AND DEVELOPMENT FOR FALLS PREVENTION AND MANAGEMENT

ALL West Limerick Independent Living staff regardless of location, should have People Moving and Handling Training. This will include an understanding of the hoist – safety checks and demonstrate lift with hoist including moving, walking client and sitting in chair.

All West Limerick Independent Living staff, again regardless of location, will be made aware of and be provided with a copy of HSE Falls Prevention Information Booklet.

7. AIM

The aim of this Policy is to manage the risk of, reduce the incidence of, and thereby reduce the harm from clients experiencing falls whilst under the care of West Limerick Independent Living staff in their own homes or other community settings. The Policy provides a framework with quality standards to:

- identify people who have fallen and or who are at risk of falling again
- assess the level of risk for those individuals that have had a fall
- refer clients to the appropriate OT, Physio services

It recognises that falls are a multi-dimensional problem which requires a partnership approach across the localities and between health, social care and voluntary organisations.

8. AREA FOR IMPLEMENTATION

All client's homes or community settings where the clients receive personal support services from West Limerick Independent Living.

9. INTENDED USERS

All staff working for West Limerick Independent Living personal support services.



| | | | | | |
|---------------|--|----------------------|-------------|-----------|---|
| | West Limerick Independent Living CLG Policies | | | | |
| Title: | CLIENT FALLS MANAGEMENT POLICY | | | | |
| Page: | 3 of 6 | Policy. No.: WLILP19 | Date Nov 16 | Issue No. | 0 |

10. DEFINITION

Fall: An event which results in a person coming to rest at a lower level.

Explained Fall: We know and understand the reasons that have contributed to falls.

Intrinsic: Medical, psychological and physiological reasons for falls, e.g.

- Cognition & behaviours
- Mobility and transfer skills
- Incontinence
- Medical conditions
- Medication review
- Vision/hearing
- Footwear & clothing

Extrinsic: Environmental reasons for falls.

Unexplained Fall: We do not understand the reasons that have contributed to falls history. To presume these are more likely to have medical factors influencing i.e. history of falls

Multi-professional: Multidisciplinary approach to falls prevention involving medical, nursing, social care and therapy assessments.

11. INDICATIONS FOR USE

All clients receiving a personal support service from West Limerick Independent Living identified as at risk.

12. MONITORING AND PERFORMANCE MANAGEMENT OF THE POLICY

To measure compliance, this Policy and the incidents of falls will be on the agenda of West Limerick Independent Living Quality and Safety meetings. The findings of the Quality and Safety meetings will be reported and monitored by the West Limerick Independent Living management.

The Quality and Safety Group will define, develop and implement an implementation strategy across the organisations personal support services.

13. REVIEW OF POLICY

This Policy will be reviewed by the West Limerick Independent Living board annually.

APPENDICES

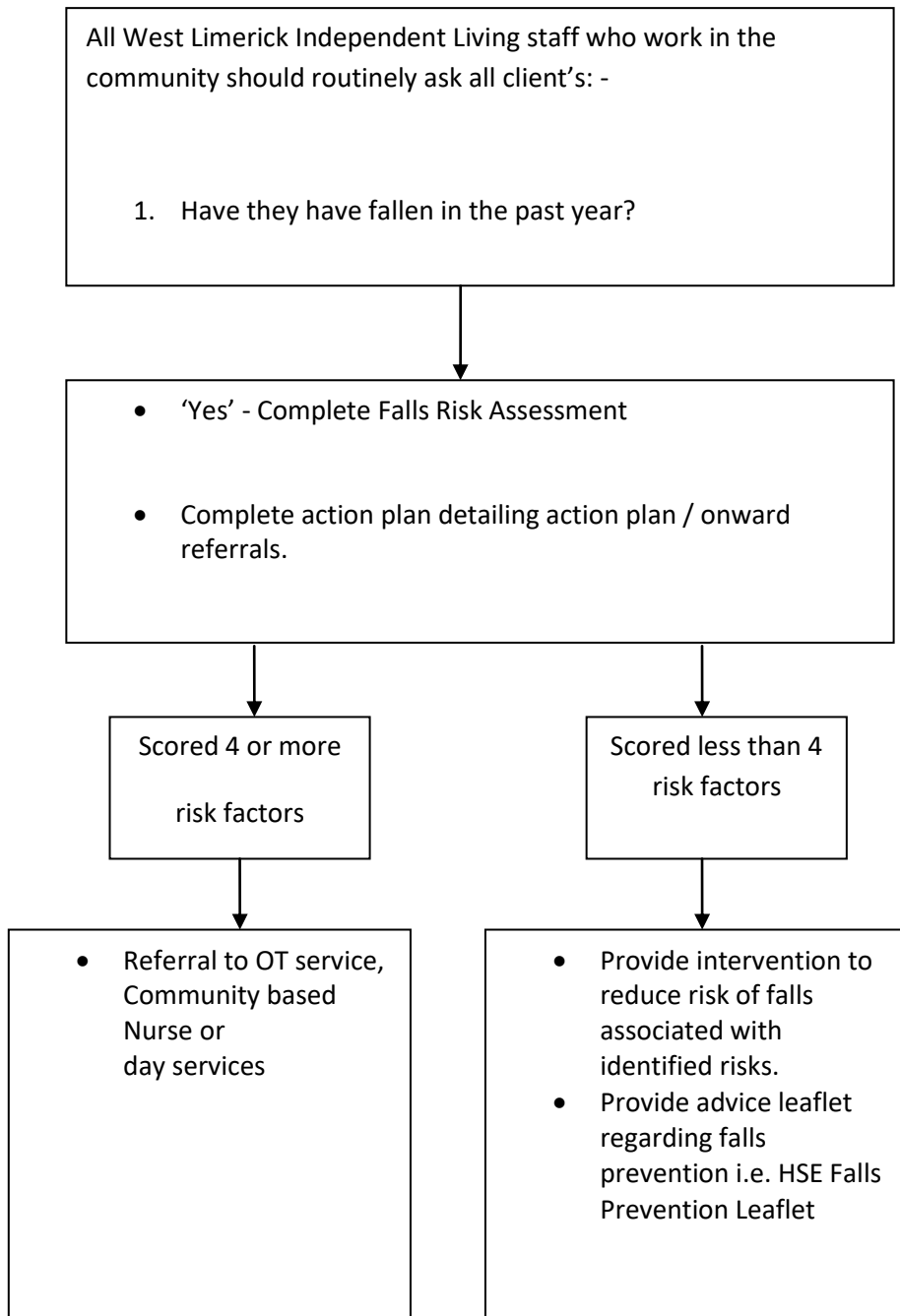
Appendix 1 – Falls Management Flowchart

Appendix 2 – Risk Assessment for the Prevention of Falls



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|---------------|--|----------------------|-------------|-----------|---|
| | West Limerick Independent Living CLG Policies | | | | |
| Title: | CLIENT FALLS MANAGEMENT POLICY | | | | |
| Page: | 4 of 6 | Policy. No.: WLILP19 | Date Nov 16 | Issue No. | 0 |

APPENDIX 1 – FALLS MANAGEMENT FLOW CHART





| | | | | | |
|---------------|--|----------------------|-------------|-----------|---|
| | West Limerick Independent Living CLG Policies | | | | |
| Title: | CLIENT FALLS MANAGEMENT POLICY | | | | |
| Page: | 5 of 6 | Policy. No.: WLILP19 | Date Nov 16 | Issue No. | 0 |

APPENDIX 2 - RISK ASSESSMENT FOR THE PREVENTION OF FALLS

| | |
|-----------------|---------------------|
| SURNAME: | DATE: |
| FORENAME: | MAIL/FEMALE: |
| ADDRESS: | D.O.B: |
| | PHONE: |
| | GP/Consultant |
| | |

FALLS RISK ASSESSMENT TOOL

| | Risk Factor | Yes | No |
|------------|--|-----|----|
| 1. | History of Falls Has history of 1 or more falls in past year | | |
| 2. | Number of Medications Takes more than 4 medications per day | | |
| 3. | Central Nervous System Suppressants (e.g. sleeping tablets, anti-depressants) Uses 1 or more for more than 2 weeks | | |
| 4. | Alcohol Intake More than 1 unit of alcohol per day | | |
| 5. | Postural Hypotension Dizziness on standing or sitting up | | |
| 6. | Nutrition Recent loss of weight, poor fluid intake | | |
| 7. | Vision Difficultly reading a book or newspaper, cannot recognise an object across room, recently started wearing bifocals | | |
| 8. | Hearing Has difficulty in hearing conversational speech | | |
| 9. | Footwear / Foot Care Difficulty with foot care affecting mobility, inappropriate footwear | | |
| 10. | Balance Needs to hold onto furniture, requires walking aid | | |
| 11. | Transfers Lack of control when moving between surfaces, e.g. bed to chair | | |
| 12. | Walking Unsteady on feet, shuffles or takes uneven steps, housebound | | |
| 13. | Environmental Hazards Cluttered, slip or trip hazards | | |
| 14. | Reduced Confidence Fear of further falls, change in lifestyle due to falls | | |
| 15. | Coping Strategies Unable to get up from floor. Unable to summon help | | |
| 16. | Memory/Comprehension (understanding) Short-term memory or comprehension difficulties which may affect ability to follow advice given | | |

If 'YES' for any factor, refer to intervention/referral guide, complete action plan and issue falls leaflet. If 'YES' for four or more factors, refer Specialist OT, Physio and Nurse Service.