



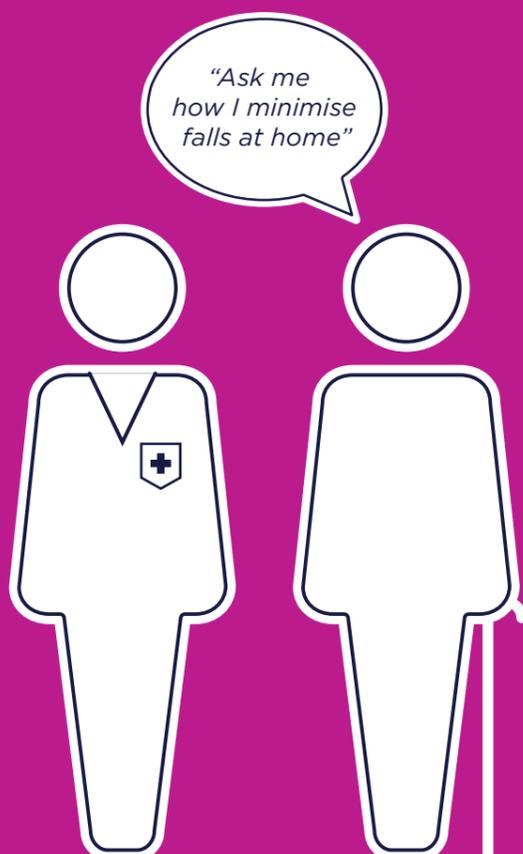
Comprehensive Care

Think about the link

Minimising falls

About falls

- Multiple factors influence risk of falling, including physical ability (balance, strength, gait), medication, dizziness/postural hypotension, cognition, continence, vision, environment and footwear
- All factors need to be assessed, and then addressed via a personalised plan of care to prevent and minimise harm from falls
- Think about the link – patients experiencing incontinence, delirium, malnutrition, pressure injuries and restrictive practices are at increased risk of falls



How can I provide Comprehensive Care to minimise falls?

- Complete the 'Risk Assessment Tool' on admission and at your patients' bedside during nursing handover (TDS), or if any changes are identified

For patients who have been identified as being at a risk of falls:

- Identify individual risks with your patients, carers and their families
- Develop a personalised falls prevention strategy and management plan
- Consider placing patients on a low-low bed
- Refer to appropriate Allied Health
- Involve your patients, carers and their families in care planning and goal setting
- Discuss falls risks and prevention with your patients, carers and their families
- Provide education and support to patients, carers and families

Post-fall management for patients:

- Ensure immediate first aid and review by medical staff
- Undertake neurological observations for patients who were witnessed to have head/face injury and/or reduced level of consciousness
- Re-assess your patients' management plan including Nursing, Medical or Allied Health
- Notify your patients' Medical Treatment Decision Maker about the fall
- Undertake a 'Falls Huddle' post fall
- Upon discharge, notify your patients' GP and consider if a referral to the 'Falls Clinic' is required

Where can I learn more about minimising falls?

- Refer to the guidelines on the intranet
- Refer to the 'Preventing Falls and Harm from Falls' page on the intranet