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| **Standard Operating Process** |
| Developed By:Professional Practice and Clinical Nurse Leads  | Approved By:All Committees  |
| Date of Origin: March 2021 | Review or Revision Date: |

**Purpose**

Fall prevention and fall risk assessment is everyone’s responsibility. Listowel and Wingham Hospitals Alliance is committed to a culture of quality, where patient centered, timely, efficient, safe, effective and equitable care is delivered and available to all patients. Falls prevention encompasses safe prevention strategies and processes, providing quality care to keep patients safe. This policy encourages all patients, families and staff to work in partnership for fall reduction and prevention.

**Definitions**

**EHR:** Electronic Health Record

**Fall:** an event that results in a person coming to rest inadvertently on the ground or floor or other lower level position, with or without injury.

This would include:

* **Unwitnessed Falls** occur in the absence of a reliable witness that can describe the circumstances of the fall.
* **Witnessed Fall** occurs where there is a reliable witness to describe the circumstances of the fall including whether or not the patient struck his/her head as a result of the fall
* **Assisted Fall** occurs in the presence of a person who assists the faller to rest on a lower level.

**Responsibilities**

All **health care providers** are responsible for falls awareness and implementation of “SAFE” universal falls precautions (Safe Environment, Assist with Mobility, Fall Risk Reduction, Engage Individual and Family).

**Most Responsible Nurse (MRN)** will screen Emergency, Inpatient and Obstetrical patients using the electronic screening tool.

**Patients** will self-identify his/her risk of falls to a healthcare provider. This may include, but not limited to, a history of falling within the past 3 months, unsteady gait and/or fall concern.

**Equipment**

* Screening Tools: electronic health record
* Beside Transfer Cards (Independent, One Person Assist, Two Person Assist, Sit/Stand Device, Lifting Device)
* Yellow Armband: “Call, Don’t Fall”
* Comfort Rounding: electronic health record
* Education: General Admission Information Patient Handout

**Procedure**

1. **Fall Risk Prevention**
* The Fall Risk Assessement shall be done in the Electronic Health Record (EHR) as a mandatory part of the assessment of all admitted LWHA patients. Other members of the interdisciplinary team may be required to complete assessments and assist with appropriate universal fall risk interventions.
* All staff receive visual cues regarding moderate to high fall risk patients/residents.
* All units shall perform the falls risk assessment in the EHR.
	+ For Inpatient departments this occurs within 24 hours of admission, weekly, after a fall and with any change in clinical status.
	+ For the Emergency Departments this occurs with secondary assessment
1. **Fall Risk Assessment**
	1. **Refer to Fall Assessment Interventions in the EHR**

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| **In the Event of a Fall***Insert When a Patient Falls Algorithm* **Education** |
| Health Care Providers:* Staff will be oriented to the Falls Risk Assessment, universal fall risk interventions and post fall assessment during orientation to the unit.
* The Falls Risk Assessment and Falls Policy should be reviewed by all members of the interdisciplinary team annually.
* Complete Comfort Rounding Education at orientation for new nurse hires and for staff returning from extended leave. Also will be completed annually by all staff

Volunteers/Students: * Participate in education

Admitted Patients: * Understand falls screening score
* Understand the purpose of “Call, Don’t Fall” yellow armband
* Read and Understand information given at admission
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