

AC Nursing and Health Services Inc. Policies and Procedures	
Client Safety	
Policy:  Falls Prevention	
	Policy Number: CS – 1.00
	Effective Date: January 2022
	Revision Date:
	Approved by: Board of Directors – Management

**Purpose:**

The purpose of this policy is to implement fall prevention strategies to reduce falls and injury at all client sites.

Falls are key quality safety indicators, requiring application of evidence based best practices and a continuous quality improvement approach.

AC Nursing and Health Services is committed to minimizing falls at every level at client sites. An ongoing commitment will be made to ensure there is team collaboration by optimizing communication to identify client fall risk and share fall prevention strategies.

AC Nursing and Health Services aims to optimize outcomes; client centered approaches will be used to provide education and promote awareness of fall risk management. AC Nursing is committed to fostering continuous improvements and uses measurement tools to utilize quality monitoring.

**Policy**

This policy outlines the fall assessment and injury reduction strategies for all staff working at facility sites AC Nursing and Health Services is contracted with.

AC Nursing and Health Services will commit to minimum standards to reduce falls and related injuries:

- Fall and injury reduction education will be provided to all AC Nursing and Health Services during corporate orientation.
- While working at our client sites, all employees are required to follow the fall prevention guidelines as issued by the facility for:
  - o Universal precautions
  - o Assess clients for fall risk using appropriate client populations.
  - o Provide education to clients, and family members on fall risk.
  - o Develop, implement, and evaluate a client’s fall and injury reduction plan for clients assessed as a fall risk.
  - o Post event debriefs are required and will be conducted with the facility team.

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**Definitions:**

Fall:

- an event that results in a person inadvertently coming to a rest on the floor with or without injury.

Fall Injury:

- an injury that results from a fall which may or may not require treatment. Degrees of injury vary in the severity of harm – can be temporary or permanent.

Near Fall:

- An unanticipated slip, trip, stumble, or loss of balance that may result in a fall. For example, the person may have by chance grabbed onto a chair or grab bar.

Universal Fall Precautions:

- Safety measures are being taken to reduce the chance of falls for all clients.

Unwitnessed Fall

- Where the client is able or unable to explain the events and there is evidence to support a fall has occurred.

**Assessment and Re-Assessment of Client Fall Risk**

AC Nursing and Health Services employees will follow guidelines as issued by the facility they are assigned:

- All clients will be assessed for fall risk using the site-specific validated fall risk assessment tool.
  - o On Admission
  - o After a fall or near fall
  - o Clinical deterioration or improvement in client condition ie – increase confusion, new onset of weakness.

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**Procedures**

A debrief occurs after every fall once the client is assessed and their medical needs are addressed.

In situations where a fall occurs, the following action is required:

- Do not move the client until assessment is completed.
- Call for assistance if required.
- Assess circulation, airway, breathing and level of consciousness.
- Assess for injury to determine the severity of any fall related injuries.
- Complete vital signs
- Complete a head-to-toe assessment.
- If safe to do so, transfer or assist client to bed.
- Notify doctor.
- Notify contact person, Substitute Decision Maker,
- Debrief with team.
- Notify Agency professional practice leader.
- Complete incident report with copies to AC Nursing and Health Services
- Document all assessments and interventions.

**Documentation**

Client assessment findings, care plan and interventions will be documented in accordance with facility documentation policies and applicable regulatory college standards.

Documentation will include:

- Universal Fall Precautions
  - o AC Nursing and Health Services require to follow facility protocol to do initial shift assessment. Any changes to Universal Fall Precautions through the remainder of the shift will be documented in narrative form by exception.
  - o Update individualized fall prevention care plan and interventions implemented as required

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- Document all discussions and education to client, family members as appropriate.
- Document all pertinent information obtained during a near fall and post fall debrief

**Universal Fall Precautions are safety measures taken to reduce the chance of falls for all clients.**

- Universal Fall Precautions is to be implemented for every client under the care of AC Nursing and Health Services staff.

Safe Environments	<ul style="list-style-type: none"> <li>● Orientation to relevant surroundings ( i.e. Client care area, room, bathroom</li> <li>● Orientation to the appropriate call bell and its use instructions on when to call for assistance. Call bell tested to confirm its operation.</li> <li>● Personal items within reach and accessible (ie. Eye glasses, hearing aids, urinal)</li> <li>● The bed adjustment device is within reach.</li> <li>● Bed in lowest position or height as appropriate for client. Bed rails are used based on client needs.</li> <li>● Brakes employed on wheelchairs, rollators, procedure/exam tables, stretchers and beds for all transfers when not being moved.</li> <li>● Obstacles and tripping hazards removed from pathways.</li> <li>● Lights are working and on as required.</li> <li>● Spills cleaned up immediately, wet floor signs utilized as required.</li> <li>● Broken equipment removed from use and identified for repair.</li> </ul>
Assist with mobility	<ul style="list-style-type: none"> <li>● Mobility aid within reach</li> <li>● Regular toileting</li> <li>● Clients mobility status is reviewed on admission and with significant change in clients medical status</li> </ul>

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Fall Risk Reduction	<ul style="list-style-type: none"> <li>• Proper footwear or non-skid socks available in use</li> <li>• Strategies to address delirium if a client is confused.</li> <li>• Ongoing evaluation and monitoring of medication regime that may place client at risk for falls.</li> </ul>
Engage client, family, and team	<ul style="list-style-type: none"> <li>• Engage client/ support person on fall prevention.</li> <li>• Team maintains awareness that all patients have the potential to fall and opportunity is take to communicate individual risk during standard communication structures such as TOA or team rounds</li> </ul>