

The key messages are: **BE PROACTIVE**

- ▶ React to falls before they happen
- ▶ Support residents to continue to be active, mobilise safely and make their own lifestyle choices
- ▶ Falls risk factors are individual to each resident
- ▶ Managing falls is continuous process
- ▶ Prevention of falls is everyone's business
- ▶ Involve residents in the prevention of falls

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REACT

FALLS

PREVENTION

Reducing the Risk of Falls

A fall is when a person unintentionally comes to rest on the ground or on a lower level

Quality and Nursing Team NHS Vale of York CCG

Falls can have a devastating effect on individuals and those around them. Physical injuries from falls can cause permanent disability which in some cases can be life threatening. Falling can affect a person's quality of life; they may suffer loss of confidence and consequently fear physical and social activity.

In addition to the pain, distress, discomfort and psychological impact a fall can have on an individual; they also have a huge financial implication to health and social care organisations with an estimated cost to the NHS of £6 million a day.

As outlined in NHS England's Falls Prevention and Management in Care Homes (2019), everyone working in a care home has a key role in identifying and reducing the risk of falls as part of supporting the health and wellbeing of residents. It is vital therefore that care home staff are equipped with the skills and tools necessary to identify those at risk of falling and take appropriate measures to reduce these risks.

The NHS Vale of York CCG is committed to supporting care homes in providing best care and is promoting the React to Falls Prevention principles in care homes across the Vale of York. The emphasis of this work is to reduce falls risks by implementation of a person centred, peripatetic approach to prevent and manage falls for each care home resident. The resources used include an educational video, workbook and self-assessment skills booklet which supports carers in recognising when an individual may be at increased risk of falls, and the steps that can be taken to reduce these risks.

'React to Falls Prevention' identifies 3 key areas of risk: Physical, Behavioural and Environmental; and the subsequent use of a simple framework that prompts carers to consider these risks and ... 'REACT' ... to reduce the risk of falls.

This is applicable across all care settings including domiciliary care and can be used by health professionals and informal carers alike.

REACT stands for:

Revue medical history and physical health

Encourage and support care leaders to review residents' history of falls (frequency and patterns); any medical and physical health such as low blood pressure, dizziness, fractures/osteoporosis, foot problems, nutrition/hydration, illness or infection, both on admission, regular basis and /or as condition changes; referring to other professionals as required. This should include reviewing residents' medications, are they taking 4 or more different types, do they have any side effects such as drowsiness, sedation, increased toilet needs. Have they had a recent medication review with a GP or Pharmacist?

Environment and Equipment

The environment should be clear of clutter & hazards with suitable lighting. Call bells should be accessible and working and alarm sensors considered where appropriate. Consideration should be given to the suitability of footwear and clothing.. Floor patterns should be kept to a minimum and surfaces not too slippery or difficult to push aids on, such as thick pile carpets.

Activity

Residents should be supported to continue to be active, make their own life-style choices and mobilise safely with assistance/support/supervision as required. Ensuring appropriate mobilisation aids are used and referral to appropriate services – GP, Occupational or Physiotherapy, Podiatry, District Nurses and voluntary sector organisations.

Communication and understanding

All residents should be supported with communication and comprehension, recognising and supporting residents that are confused/disorientated or otherwise impaired; ensuring that communication aids are clean, functioning, and being used appropriately. Vision and hearing tests should be up to date.

Toilet

Residents should be supported with continence/toileting as appropriate, promoting regular toileting and ensuring continence assessments are completed. Any changes in toilet habits need to be recognised and appropriate signage for the toilet in place as required. The use of commodes considered for night time use as required.