

CONSUMER & PROVIDER FALL PREVENTION PROTOCOL PACKET

**Ohio Home Care Program
*December, 2006***

INFORMATION FOR CONSUMERS, PROVIDERS & CAREGIVERS

**CARESTAR
FALL PREVENTION PROTOCOL**

STEPS FOR PROVIDERS

- Read through this Fall Prevention Protocol provided by the Ohio Home Care Program. Make a note of what each type of provider should do to help keep the consumer from falling.

- Review goals on each consumer's ASP and make a note of how fall prevention relates to each providers' tasks.

- Talk with other team members, such as the consumer, Ohio Home Care Program case manager, and other caregivers and providers, about the consumer's risk factors for falling.

- A provider will be designated to complete the Ohio Home Care Program monthly checklist provided by Ohio Home Care Program. (In some cases the checklists will be provided by the agency – this will be noted on the ASP). This will help show risk factors for the consumer falling. The provider completing the checklists must sign and date the checklist each time one is done. Agency staff should turn these in to their supervisor, along with other documentation for that consumer. Non-agency providers should keep the signed checklists with other documentation in the consumer's home.

- Report items answered "Yes" from the checklist as follows:**
 - **Agency Providers : Report to your agency supervisor.**
 - **Non-agency Providers: Report "Yes" answers to the Ohio Home Care Program case manager.**

Ohio Home Care Program FALL PREVENTION Protocol

Ohio Home Care Program Case Manager (CM):

Preventive steps:

- Assess consumer's fall risk upon entry into program and annually, after a fall, change in status, hospitalization, ER visit or change in residence.
- Monitor to ensure that previous fall prevention interventions are implemented.
- Facilitate a plan for emergency fall notification procedure.

If a patient falls:

Ohio Home Care Program Case Manager:

- Obtain information about fall from all team members involved.
- Alert physician if not already done by providers; consider referral for:
 - Evaluation and treatment for gait changes, postural instability, spasticity.
 - Evaluation and treatment for impaired vision, hearing.
 - Evaluation of medication profile for fall risk.
 - Evaluation and treatment of pain.
 - Evaluation and treatment of orthostatic hypotension.
 - Evaluation of impaired central processing (dementia, delirium, stroke, perception).
 - Evaluation for depression and mental illnesses.
 - Consideration of need for referral to services such as physical medicine and rehabilitation, audiology, ophthalmology, cardiology, medical nutrition therapy.
- Report to CareStar IMIRS Department via Occurrence Reporting Form.
- Notify all team members of consumer fall; consider interdisciplinary team meeting.
- Document circumstances and prevention plan in clinical record.
- Assist with assessment of intrinsic and extrinsic risk factors.
- Add Fall Prevention goal to ASP, preferably as part of DLS or SN goal.
- Follow up to ensure any items marked "Yes" on Fall Prevention Checklist have been addressed. Follow organization policies for consumer monitoring. Assess at least annually. Discontinue FPP only if underlying risks have ceased to be present.
- Continue to educate consumer and caregivers, as is appropriate and within practice guidelines of CM.

If a consumer has a fall post-protocol:

- Complete the steps above.
- Gather provider documentation, including checklist, and send to IMIRS.

- Continue ongoing assessment of why consumer may be falling.
- Consider updates to ASP or use of a CAR or other tool if previous fall recommendations are not sufficient or not being followed.

CareStar FALL PREVENTION Protocol (Continued)

Nursing (or other trained caregivers):

Preventive steps:

- Continually assess consumer's fall risk, especially after a change in status.
- Assess the consumer's coordination and balance before assisting with transfer and mobility activities.
- Consider implementation of bowel and bladder programs to decrease urgency and incontinence.
- Educate consumer, family and other team members in all aspects of Fall Prevention.
- Teach consumer use of grab bars and other assistive technology.
- Communicate any change in consumer status or environment to supervisor and Ohio Home Care Program Case Manager (CM).

After a patient falls:

- Assist consumer, if possible. Assess for injuries. Call for medical assistance, such as Emergency Medical Services, if necessary.
- Obtain and record sitting/standing vital signs if present at time of fall.
- Assess for change in range of motion.
- Ask consumer if he or she is comfortable or in pain. Ask this even if the consumer does not seem like he or she is injured. If the consumer is not injured but is uncomfortable, call for assistance or call a family member (if none present) or other team member before you leave at the end of your shift.
- **Report fall to the Ohio Home Care Program Case Manager (CM), and to your RN Supervisor if you are a non-agency LPN.**
- Alert physician; consider referral for:
 - Evaluation and treatment for gait changes, postural instability, spasticity.
 - Evaluation and treatment for impaired vision, hearing.
 - Evaluation of medication profile for fall risk.
 - Evaluation and treatment of pain.
 - Evaluation and treatment of orthostatic hypotension.
 - Evaluation of impaired central processing (dementia, delirium, stroke, perception).
 - Evaluation for depression and mental illnesses.
 - Consideration of need for referral to services such as physical medicine and rehabilitation, audiology, ophthalmology, cardiology, medical nutrition therapy.
- Document circumstances in clinical record.
- Assess intrinsic and extrinsic risk factors. Communicate these to CM.
- **Follow Ohio Home Care Program ASP fall prevention goal and any additional care plans that address fall prevention. If you are the provider designated to complete the checklists, make copies of the checklist that the Case Manager gave you and**

use these monthly, or use checklists from your agency, if instructed. Include with your documentation. Report any “Yes” answers as per directions on checklist.

- Continue to educate consumer and caregivers, as is appropriate and within practice guidelines of each provider.

Ohio Home Care Program FALL PREVENTION Protocol (Continued)

Personal Care Attendants:

Preventive steps:

- Approach consumer towards unaffected side to maximize participation in care.
- Take extra precaution when transferring consumer from bed and in bathroom.
- Transfer patient towards stronger side.
- Encourage consumer to wear shoes or treaded socks.
- Encourage consumer to sit up and stand up slowly.
- Communicate any change in consumer status or environment to supervisor and/or CM.

If a patient falls:

- Assist consumer, if possible. Or, call for medical assistance, such as Emergency Medical Services, if necessary. **Always call EMS if consumer is injured.**
- Ask consumer if he or she is comfortable or in pain. Ask this even if the consumer does not seem like he or she is injured. If the consumer is not injured but is uncomfortable, call a family member or other team member (if one is not present) before you leave at the end of your shift.
- **Report fall right away to your supervisor if you work for an agency, and to the Ohio Home Care Program Case Manager. If you are a Non-agency Provider, report all falls directly to the Ohio Home Care Program Case Manager.**
- Write down what happened in your daily consumer record.
- Follow directions that will help prevent future falls for this consumer. This may include completing checklists. Make copies of the checklist provided to you by the Ohio Home Care Program Case Manager, or use the checklist from your agency, if instructed.
 - **Report items answered “Yes” from the checklist as follows:**
 - **Agency Providers : Report to your agency supervisor.**
 - **Non-agency Providers: Report “Yes” answers to the Ohio Home Care Program Case Manager.**

Ohio Home Care Program FALL PREVENTION Protocol (Continued)

All Staff and Caregivers:

Environment:

- Provide physically safe environment (eliminate spills, clutter, electrical cords, throw rugs and unnecessary equipment).
- Assess safety and appropriateness of doorways, steps, stairways, and entryways.
- Ensure that lighting is adequate.
- Place consumer care articles within reach.
- Arrange bed so that consumer can exit toward his/her stronger side whenever possible.
- Educate consumer regarding maintaining a physically safe environment.

Equipment:

- Lock all moveable equipment before transferring consumer.
- Individualize equipment specific to consumer needs.

GOALS FOR PREVENTING FALLS

Consumer will have:

- Increased knowledge about falls
- Increased strength, balance, and mobility
- Increased ability to make up for loss of balance
- Increased ability to perform usual activities
- More ability to do special exercises and use assistive or adaptive devices
- More awareness of limitations
- Less injuries from falls

- Proper medications taken as directed
- Proper food and water intake

Ohio Home Care Program FALL PREVENTION Protocol (Continued)

RISK FACTORS FOR FALLS

Here are some of the more common risk factors for a consumer falling:

Factors in a consumer's home:

- Hazardous activities
- Time of day
- Poor lighting
- Clutter
- Spills
- Loose electrical cords/area rugs
- Lack of handrails or appropriate entryways

Personal Factors:

- Muscle weakness
- Walking and balance disorders
- Feeling depressed
- Problems with eyesight
- Memory problems or having trouble understanding things
- Dizziness/Vertigo
- Blood pressure that is not stable
- Difficulty making it to the bathroom in time
- Taking more than 4 medications
- Age
- Chronic disease
- History of not taking medication or not following doctor's recommendations

