



Staffordshire
Social Care
Workforce



Staffordshire and
Stoke-on-Trent
Integrated Care System



City of
Stoke-on-Trent



Midlands Partnership
NHS Foundation Trust
A Keele University Teaching Trust

Falls Prevention and Response Guide

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Foreword

This guide has been developed to introduce the subject and further research and learning is recommended to provide a complete understanding. Requirements are often unique to individual care services, and you should consider how best to implement practices.

Introduction

Falls are a common and serious problem for people within adult social care.

They can cause injuries, pain, loss of confidence, and reduced quality of life. Falls are also a major reason for hospital admission and can lead to further complications and health problems.

This guide will help you to understand the causes and risks of falls, and how to prevent them as much as possible. It will also explain how to ensure that falls prevention is focused on making people safe, not restricting their choices or activities.

Falls prevention is an ongoing process, not a one-off event. It requires regular assessment, monitoring, and review of the person's needs and preferences, as well as the environment and equipment they use. It also requires communication and collaboration between all the people involved in the person's care and support.

Identifying risks

There are many factors that can increase the risk of falls, and they can vary from person to person. Some of the common factors are:

- **Footwear:** Wearing shoes or slippers that are too loose, too tight, or have slippery soles can make it harder to walk and balance. Shoes or slippers that are worn out or damaged can also cause problems. It is important to check the person's footwear regularly and replace it if needed.

To avoid slips indoors, don't walk in bare feet, socks, or tights. Always wear shoes, sandals, or slippers.

Wear shoes that fit well. High-sided shoes with low heels, thin soles and good grip are normally a safer choice. Wear slippers with a good grip that fasten up.

- **Urinary tract infections (UTIs):** UTIs can cause confusion, dizziness, weakness, which can increase the risk of falls. UTIs can also be a sign of other health problems, such as diabetes or kidney disease. It is important to seek medical attention if a UTI is suspected, and to follow the prescribed treatment.

Ensuring that people are hydrated can help reduce the likelihood of UTIs.

- **Urgency of needing the toilet:** If someone is susceptible to needing the toilet at short notice, this can increase their risk of falls, due to their urgency of movement.

Make it as easier for an individual to access a toilet by considering toileting equipment such as a commode or urinal.

Caffeine has a mild diuretic effect, which will cause someone to need the toilet more frequently. Consider reducing caffeine intake where agreeable (for example coffee and tea), particularly in the evening.

- **Medications:** Some medications can affect the person's balance, coordination, blood pressure, or mental alertness, which can increase the risk of falls. Medications that can have these effects include sedatives, antidepressants, antihypertensives, diuretics, opioids, and some over-the-counter drugs. It is important to review the person's medication regularly with their doctor or pharmacist, and to follow the instructions on how and when to take them. It is also important to monitor the person for any side effects or adverse reactions, and to report them.
- **Physical environment:** The layout and condition of the person's home or care setting can affect their safety and mobility. Some of the common hazards are rugs, cables, items left on the floor, clutter, and uneven or slippery surfaces. It is important to keep the environment tidy and clear of obstacles, and to fix any problems as soon as possible.

- **Visual impairment:** Poor vision can make it harder to see and avoid hazards, and to judge distances and depths. Visual impairment can be caused by eye conditions, such as cataracts or glaucoma, or by missing or broken glasses. It is important to ensure that the person has regular eye check-ups and that their glasses are clean and fit well.

Glasses fitted with bifocal or varifocal lenses can make things appear closer than they really are and so can cause trips or loss of balance when looking down.

- **Flooring:** The type and quality of the flooring can affect the person's stability and comfort. Flooring that is worn, torn, or slippery can cause trips and falls. Flooring that is too soft or cushioned can make it harder to walk and balance. It is important to choose flooring that is suitable for the person's needs and preferences, and that is well maintained.
- **Spillages:** Spillages of liquids or food can create slippery surfaces that can cause the person to slip and fall. It is important to clear any spillages as soon as possible, and to use a mop or cloth that does not leave the floor wet. It is also important to inform people by using a clear sign or a barrier to warn them of the potential hazard.
- **Poor or confusing lighting:** Lighting that is too dim or too bright can affect the person's vision and mood. Lighting that creates shadows or glare can also create illusions or distortions that can confuse the person or make them misjudge their surroundings. It is important to ensure that the lighting is adequate and consistent, and that it can be adjusted to suit the person's needs and preferences.
- **Mobility problems:** Difficulty in moving around, walking, or standing can increase the risk of falls. Mobility problems can be caused by various health conditions, such as arthritis, stroke, or Parkinson's disease, or by injuries, such as fractures or sprains. It is important to assess the person's mobility and provide them with the appropriate support and equipment, such as walking aids, grab rails, or hoists.
- **Worn or damaged mobility aids:** Mobility aids, such as walking sticks, frames, or wheelchairs, can help the person to move around safely and independently. However, if they are worn out, broken, or unsuitable, they can also cause problems. It is important to check the person's mobility aids regularly and ensure that they are in good condition and fit well.

Worn ferrules can pose a risk, with the assistive technology increasing the risk of falls where it isn't maintained and thus providing a false sense of security.

- **Cognitive impairment:** Memory loss, confusion, or dementia can affect the person's awareness and judgment of their environment and their abilities. Cognitive impairment

can also make it harder to follow instructions, remember routines, or cope with changes. It is important to understand the person's cognitive abilities and limitations, and to provide them with the appropriate support.

- **Tiredness:** Feeling tired or sleepy can affect the person's concentration, coordination, and balance. Tiredness can be caused by various factors, such as medication, illness, pain, or lack of sleep.
- **Furniture:** The type and position of the furniture can affect the person's safety and comfort. Furniture that is too high, too low, or too far away can make it harder to sit down or stand up. Furniture that is unstable, wobbly, or sharp can also cause injuries. It is important to choose furniture that is suitable for the person's needs and preferences, and that is well placed and secured.

Reducing risks

Preventing falls is not about eliminating all risks, but about reducing them as much as possible and managing them effectively. Some risks cannot be totally removed, but they can be risk assessed and mitigated. For example, if the person likes to have rugs in their home or room, they can be secured with tape or rubber backing, or replaced with non-slip mats.

Preventing falls is also not about restricting the person's choices or activities, but about enabling them to do what they want and need to do safely and confidently. For example, if the person likes to go out for walks, they can be accompanied by a carer or a friend or use a personal alarm or a mobile phone.

Preventing falls is a collaborative and person-centred process, which means that it involves the person, their family, their carers, and the care provider. It also means that it considers the person's needs, preferences, goals, and values. For example, if the person values their independence and privacy, they can be offered assistive technology, rather than constant monitoring.

Preventing falls requires regular assessment, monitoring, and review of the person's situation and the factors that affect their risk of falls. It also requires communication and feedback between all the people involved in the person's care and support. For example, if the person's medication changes or their health deteriorates, they can be reassessed, and their care plan can be updated accordingly.

Consider promoting strength and balance targeted exercises to reduce the risk of falls.

Consequences of falling

Falling can have serious consequences, especially those who are vulnerable. A fall can increase the chances of a hospital admission. A fall can also result in broken bones, such as hip fractures, which can impair mobility and increase the risk of disability and dependency.

Additionally, a fall can impact a person's confidence, mood, and self-esteem, making them afraid of falling again and reducing their participation in activities and social interactions.

In the worst-case scenario, a fall can have life-threatening or life-changing consequences.

Prevention

The ultimate goal of falls prevention is to make people safer, not to prevent them from living their lives. Making people safe means that they are protected from harm, but also that they are supported to maintain their health, well-being, and quality of life. Making people safe also means that they are empowered to make their own decisions and choices.

To ensure that falls prevention is focused on making people safe, it is important to follow these principles:

- **Involve the person in the process:** Ask them about their views, preferences, goals, and concerns. Listen to them and respect their opinions. Explain the options and benefits of falls prevention. Support them to make informed choices and consent to the interventions.
- **Involve the family and carers in the process:** Ask them about their views and concerns. Listen to them and respect their opinions.
- **Use person-centred practice:** Tailor the interventions to the person's individual needs, preferences, goals, and values. Consider the person's physical, mental, emotional, social, and spiritual aspects. Respect the person's dignity, privacy, and autonomy. Promote the person's independence, participation, and inclusion.
- **Use holistic practice:** Consider the person's whole situation and the factors that affect their risk of falls. Consider the person's environment, equipment, medication, health, and lifestyle. Consider the person's family, carers, and service. Consider the person's strengths, abilities, and potential.
- **Use ongoing practice:** Monitor and review the person's situation and the effectiveness of the interventions. Adjust and adapt the interventions as needed. Communicate and feedback the results and outcomes. Celebrate and acknowledge the achievements and improvements.

Assistive technology

Assistive technology is any device, system, or service that helps a person to maintain or improve their independence, safety, and quality of life.

Assistive technology can prevent falls or assist with mobility in various ways, such as:

- Providing support and stability for walking, standing, or transferring, such as walking sticks, frames, crutches, or hoists.
- Reducing the risk of slipping, tripping, or losing balance, such as non-slip mats, grab rails, stair lifts, or ramps.
- Alerting the person or others to potential hazards, such as through using sensors, alarms, or monitors.
- Items such as bed, chair and passive infra-red sensors can help with notifying staff when someone who is at high risk of falls has mobilised and may require additional support.
- Enhancing the person's vision, hearing, or cognition, such as magnifiers, hearing aids, or memory aids.

Assistive technology should be tailored to the person's individual needs, preferences, and goals. Assistive technology should also be used in conjunction with other interventions.

Falls from windows

Falls from windows often result in serious or fatal injuries, but this harm can be prevented. Where somebody is identified as being at risk from falling from a window, precautions should be taken to ensure their safety and an appropriate risk assessment should be established for them.

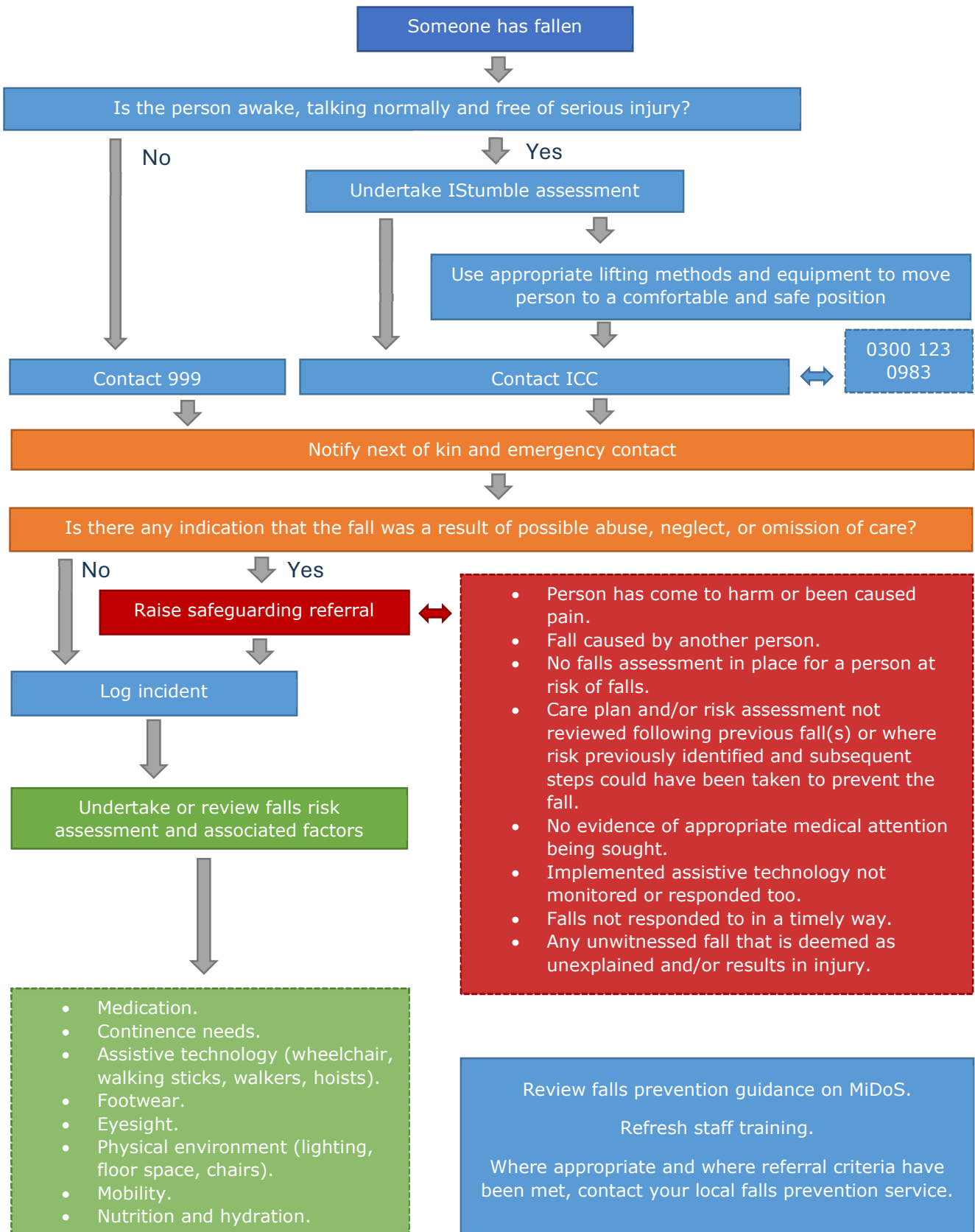
There should also be a risk assessment for the property that details the measures that have been put in place to mitigate the risk of people falling from windows.

Appropriate restrictors should be put in place on windows to prevent people accessing windows whereby they could come to harm should they fall from the window.

Regular checks of windows and installed restrictors should be carried out by an appropriate individual and these checks should be documented as part of an audit process.

Further reading on this subject is available from the [Health and Safety Executive](#) and the [Care Quality Commission](#).

Responding to a fall



General referral

Integrated Care Coordination for Urgent Care (ICC) can be contacted in the event of someone falling via 0300 123 0983, 8am-10pm, 7 days a week.

They can be contacted in the event of an unexplained fall or injury from a fall that is not a critical injury or illness.

The team cover a range of conditions to avoid hospital admission:

- Shortness of breath
- Delirium (new confusion, agitation, drowsiness, hallucinations, personality changes)
- Significant infection
- Sudden reduction in mobility
- Abdominal pain and/or vomiting
- Concern with clinical observations
- Palliative care crisis (sudden deterioration requiring support to avoid Emergency Department attendance)

If required, an urgent 2 hour visit from an Advanced Clinical Practitioner (ACP) will be arranged.

Stoke-on-Trent based locations

Stoke-on-Trent adult social care can offer the free **falls response service** to providers in the Stoke-on-Trent area. This service will come out to Stoke residents who have fallen and can't get up, and who do not show signs of requiring an ambulance.

If care staff discover someone who has fallen but may not need an ambulance, they can call them directly (they will need to stay on site until a Responder arrives, but this is likely to be much quicker than an ambulance callout as our average callout times are about 20 minutes).

They will:

- Carry out a phone triage with you when you call, to ensure an ambulance isn't required (if an ambulance is required they will advise you to call one)
- Check the individual for injuries and pains
- Provide first aid if required
- Raise the patient onto a chair or bed, using a Mangar lifting cushion and transfer board
- Check vital signs
- Assess for fire risks and for any basic community equipment that might be needed to lessen the falls risk
- Offer a welfare check for later/following day if we believe it is required

The service is:

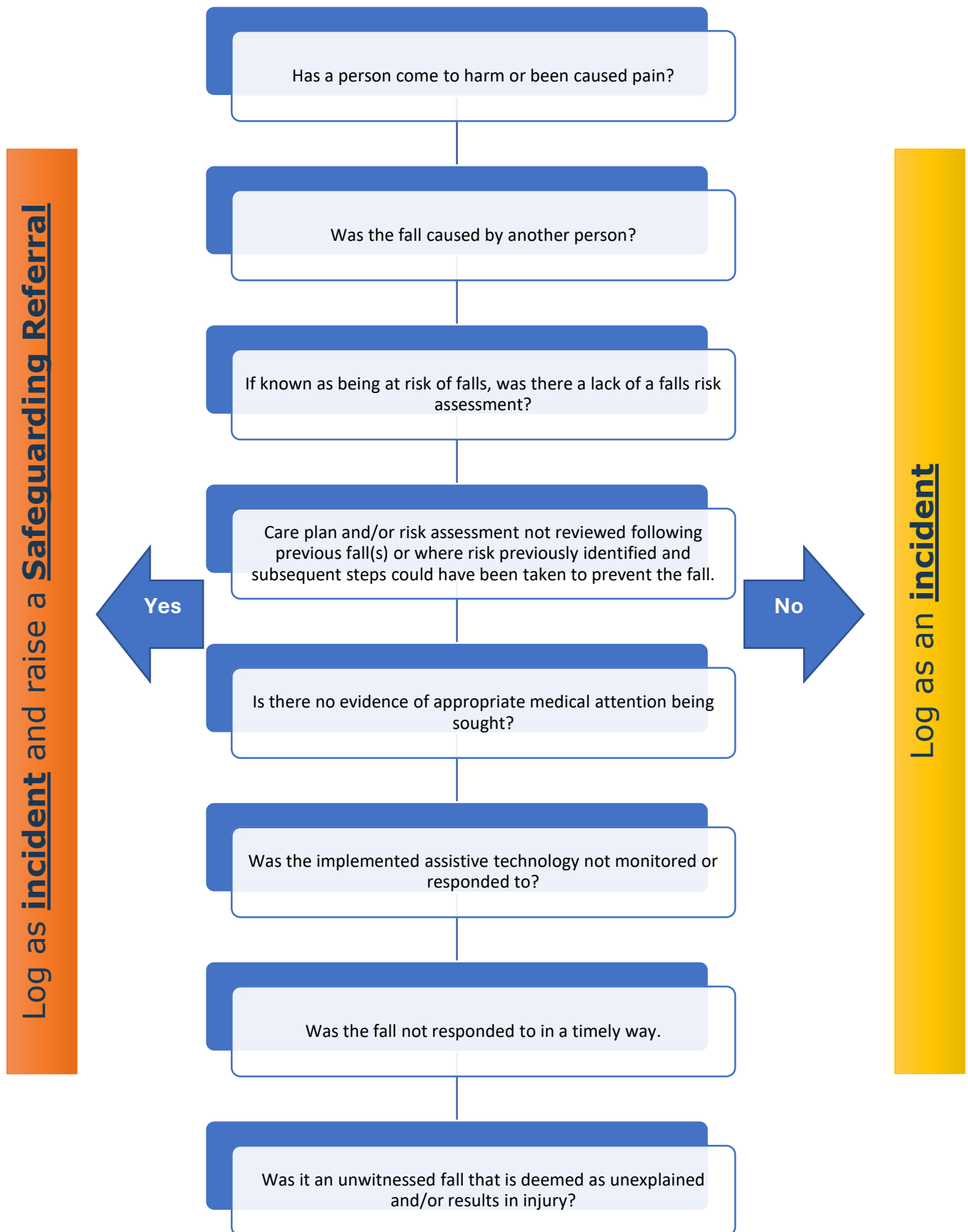
- Available 24/7
- Trained by St John's Ambulance in emergency first aid
- Trained in safe moving and handling, and equipped with lifting cushions and other moving and handling equipment to help people up safely following a fall

If you would like to sign up for this free service, please email Lifeline.group@stoke.gov.uk with the following details:

- Name of your care company
- Your company address
- Contact number and alternate contact number

They will then contact you to gather any further information and give you the phone number your staff can call when they need help.

Safeguarding thresholds



Summary

This guide provides information and advice on falls, which are a common and serious health risk for many people. It covers the causes and consequences of falls, how to prevent them, and what to do if someone falls.

Always put the person at the centre of the process and support them to make informed decisions.

For further information,
please contact
cmdt@staffordshire.gov.uk