Falls facts for nurses

Preventing Falls and Harm From Falls in Older People

Best Practice Guidelines for Australian Residential Aged Care Facilities 2009

Nurses have an important role to play in preventing falls and harm from falls in residents of residential aged care facilities. You are well placed to drive organisational change to prevent falls through a team approach to planning, implementing and evaluating a falls prevention program. You are also well placed to recognise a change in a resident's risk of falling, and therefore can play an integral part in communicating this to all members of the health care team.

The Australian Commission on Safety and Quality in Health Care has produced national guidelines to inform clinical practice and assist residential aged care facilities to develop and implement practices to prevent falls and injuries from falls. Successful falls prevention programs in residential aged care facilities use a combination of:

- tailored, multiple interventions for all residents as part of routine care
- a targeted and individualised falls care plan based on screening or assessment.

What can you do to help?

- Take an active part in targeted and individualised falls prevention care plans for residents, based on screening or assessment.
- Ensure that preventing falls is part of routine care for all residents.
- Encourage all residents to participate in exercise classes.
- Ensure that mobile residents can walk around safely.
- Assess and develop a care plan for residents with urinary incontinence.
- Treat orthostatic hypotension.
- Avoid using restraints or immobilising equipment.

 Supervise and assist residents with delirium or cognitive impairment (and who are not capable of standing and walking safely) during transfers.

Recommendations from the guidelines

Preventing Falls and Harm From Falls: Best Practice Guidelines for Australian Residential Aged Care Facilities 2009 recommends falls prevention interventions based on the latest evidence and practice. The following standard falls prevention interventions have been included in successful trials and should be included in routine practice:

- First, screen or assess residents for their falls risk, and then put in place the range of standard precautionary strategies.
- Second, develop an individualised care plan focusing on falls prevention and addressing the resident's unique combination of fall risk factors, as well as their preferences.

Key components from successful trials include:

- multidisciplinary team interventions
- comprehensive geriatric assessment
- staff education
- balance exercises (gait, balance and functional coordination)
- medication review
- environmental modifications
- hip protectors (for preventing hip fractures)
- post-fall management.

Successful single interventions include:

- medication review
- vitamin D with calcium supplementation (to prevent falls and fractures)
- hip protectors (to reduce hip fractures)
- gait, balance and functional coordination exercises.

This fact sheet has been adapted from *Preventing Falls and Harm From Falls in Older People:* Best Practice Guidelines for Australian Residential Aged Care Facilities 2009, developed by the Australian Commission on Safety and Quality in Health Care.

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The following resources have been developed to assist implementation of the Falls Guidelines:

2. Guidebook for Preventing Falls and Harm From Falls in Older People: Australian Residential Aged Care Facilities 2009.

A Short Version of Preventing Falls and Harm From Falls in Older People: Best Practice Guidelines for Australian Residential Aged Care Facilities 2009.



3. I Want to Stay Independent: Slips, Trips and Broken Hips Are Not For Me — Consumer Guide.



- 4. Fact sheets:
 - Falls facts for support staff
 - Falls facts for allied health professionals
 - Falls facts for health managers
 - Falls facts for nurses
 - Falls facts for doctors.



All publications are available from the Australian Commission on Safety and Quality in Health Care website www.safetyandquality.gov.au

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