### Community Falls Assessment and Management Plan

**Facility:**

**Community Falls Assessment**

**and Management Plan**

- **Identify risk factors**
  - **Screen:**
    - The client has had a fall in the last 6 months
    - The client is observed to be unsteady
    - The client is using a non-prescribed mobility aid
    - The client has a pre-existing neurological disorder that affects balance, or uses a mobility aid and has not been reviewed in the last 12 months
    - The client is visually impaired
    - The client requires supervision or assistance with transfers or ADL
    - The client has new onset or increased confusion / delirium
    - The client is usually confused
    - The client has new onset or existing incontinence
    - The client is on one of the following medications: antihypertensive, antidepressant, sedative, benzodiazepine, antipsychotic
    - The client is on more than 4 medications
    - The client reports postural symptoms (e.g., regular dizziness, light headedness, recent history of syncope)
    - The client has a minimal trauma fracture and / or history of osteoporosis

- **Initiate actions**
  - **Date**:
  - **Time**:
  - **Initial**:
  - Refer client to physiotherapist for gait and balance assessment
  - Review client footwear and / or foot problems
  - Conduct or refer for visual assessment
  - Refer to OT for environmental assessment
  - Complete ADL assessment (as indicated)
  - Refer to OT for environmental assessment
  - Notify GP
  - Conduct or refer for cognitive assessment (as indicated)
  - Liaise with GP (as indicated)
  - Refer to GP for investigation (new onset)
  - Refer for home hazard assessment (as indicated)
  - Refer to GP for investigation
  - Measure lying and standing BP
  - Refer to GP to assess causes of osteoporosis and treatment options (where appropriate)

**Partner with client and carer to develop a falls prevention plan**

Ensure verbal and written falls prevention education is provided (e.g. Stay On Your Feet® booklet)