

A model guide providing recommendations to minimise the risk of falls and harm from falls within the emergency department

(Facilities are encouraged to develop and adopt localised processes and referral pathways)

Emergency department

On presentation to the emergency department, all patients require a falls risk **screen**.

All patients identified 'at- risk' of a fall need prevention strategies implemented.

Examples and minimal requirements:

• appropriate use of bed rails

• ensure direct observation and appropriate lighting

regular rounding

• call bell within reach

• patient/family education

• communicate falls risk at handover

• ensure usual mobility aid is available and within reach.

On discharge of 'at-risk' patient

Discharge checklist

- Refer patient to a healthcare professional or multidisciplinary team for a comprehensive falls risk assessment.
- In the discharge summary, inform the patient's General Practitioner (GP) of the outcome of the falls risk **screen**, and of any referrals made.
- Consider referral to GP and/or Multidisciplinary Community Team; consider home environment assessment; community exercise programmes.
- Provide education and ensure clear communication to patients and their families and/or carers about the rationale for referrals and interventions for reducing falls risk.

For more information: www.health.qld.gov.au/stayonyourfeet

Ward

On admission

- On admission to the ward, **all** patients require a comprehensive falls risk **assessment**.
- All patients require a multifactorial falls prevention plan developed and implemented to address the modifiable risk factors identified within the assessment.
- Consider inpatient referral to allied health professional for a patient identified 'at-risk' of a fall.

On discharge of 'at-risk' patient

Discharge checklist

- Consider referral to GP and/or Multidisciplinary Community Team to implement interventions to address modifiable risk factors including provision of community exercise programmes and home assessment.
- In the discharge summary, inform the patient's GP of the 'at-risk' falls assessment and of any discharge referrals made.
- Provide education to patients and their family and/or carers about the rationale for referrals and interventions for reducing falls risk.

