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Falls Prevention and Risk Assessment in Domiciliary Care Policy

Policy Statement

This policy shows how the agency assesses service users' risks of falling and how it can prevent their suffering from falls. It aims to promote service users' independence and choice but help them avoid taking unnecessary risks. The policy follows current NICE guidance, CG161: *Falls in Older People: Assessing Risk and Prevention*, and should apply generally.

The policy links to that on *Slips, Trips and Falls* which addresses the service's responsibilities under health and safety legislation to prevent injuries to employees from falls.

Procedures

The agency recognises that many of its service users will receive help with problems associated with falls from other community and health services, including falls prevention specialist teams. However, it also recognises that it can make an important contribution to any falls risk assessments and prevention programmes required by its service users, particularly those who are paying for their own care and support services.

Each service user has a full risk assessment conducted at the time of the start of the service which includes their risk of falls. This is recorded in their service user plan (care/support plan) and must be read by all care workers to ensure that they are aware of each person's support needs.

The falls risk assessment includes:

- any history of falls, no matter how minor, which includes discussion with the person and their informal carers on their experiences of falling and how they have coped
- any medical risk factors, eg osteoporosis or blood pressure problems
- a full assessment of the user's mobility or need for mobility aids/help with mobility (including getting in and out of bed, in and out of the bath, in and out of a chair, etc)
- a review of footwear and ability to dress
- any psychological factors, such as fear of falling, that might have limited the resident's activities

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- any rehabilitative factors, such as recovery from an existing falls injury or a related condition such as stroke, etc
- an environmental assessment (if necessary, by an occupational therapist) to identify potential hazards and how they should be addressed to reduce risks.

Each person has a plan of care, which considers the significant risks of their falling, as identified in the falls risk assessment and includes interventions designed to reduce or eliminate those risks. Examples include ensuring that service users:

- are encouraged not to get up from chairs too quickly
- have help getting out of the bath where necessary (bathroom slips, where water adds to the hazards faced by a frail person, are very common)
- with mobility problems have up-to-date mobility aids and know how to use them properly
- have adequate well-fitted footwear, including slippers
- who are at risk of falling are, where agreed, escorted by care workers, eg to go shopping.

All service users will have a regular review of their medication.

All service users will have a regular health check/review.

Any service user identified as having sensory/healthcare problems will be advised to seek help from an appropriate specialist (eg an optician in the case of eyesight problems) or by referral to the person's GP in the case of, say, hearing or balance problems.

All falls risks are managed in collaboration with relevant local healthcare professionals (eg district nurses, community nurses, occupational therapists, etc) and in line with local falls prevention strategies and procedures. Service users are also advised to seek help from their local Falls Prevention Team, which can advise on a suitable falls' prevention programme.

Every precaution is taken to advise the service user about the hazards associated with slips, trips and falls so they can be effectively controlled, not only to protect at-risk service users but also to protect people who live in or visit the person's home. The service accordingly routinely carries out a household hazard assessment to include:

- trailing wires, cables and power leads (including temporary plugged-in devices like fires, vacuum cleaners and lights)
- hazards in stairways and doorways
- any hazards from slopes in the house or the garden, including pathways and driveways
- carpets and rugs that are worn, damaged, rucked up, curled at the edge or loose

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- areas that are sometimes slippery due to spillages, such as bathrooms and kitchens
- rooms that are cluttered with furniture
- areas that are dimly lit
- areas that become icy in winter, particularly slopes or steps.

All staff responsible for conducting a risk assessment and falls assessment are trained:

- in this falls risk assessment and prevention policy, and have their training regularly reviewed and updated
- to be aware of the importance of falls prevention and of reporting any changes to a person's condition that could increase their level of risk
- to be aware of slips, trips and falls hazards and to act to minimise those risks in line with health and safety guidelines.

Training

The service's policy on falls prevention is covered in induction training.

Further and specialised training is provided for staff with specific roles and responsibilities for implementing the service's policy on falls prevention and management.

Review

This policy will be reviewed annually.

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