

## Fall Risk Care Plan - Acute Care Inpatients

<b>Site Applicability</b>	<b>Practice Level</b>
PHC Acute Care Inpatient Units at MSJ, SPH, HFH-Rehab, May also be used in Hemodialysis Outpatient Units	RN, RPN, LPN

- Morse Fall Risk Assessment score 45 or more indicates the patient is at risk for falling
- [Universal Fall Prevention Strategies](#) are in place for all patients

Falls Risk – Prevention Interventions (as in Cerner Documentation)			
Mobility	Environment	Elimination	Sensory
<input type="checkbox"/> Collaborate with OT/PT <input type="checkbox"/> Encourage handrail /safety bar use <input type="checkbox"/> Encourage personal mobility support item use <input type="checkbox"/> Protective barriers for side rail gaps <b>**use with caution**</b> <input type="checkbox"/> Mobilize <input type="checkbox"/> Use gait belt <input type="checkbox"/> Accompanied ambulation <input type="checkbox"/> Non-slip footwear or socks ( <b>Red Socks</b> ) <input type="checkbox"/> Appropriate pain management <input type="checkbox"/> Wheels locked for transfers <input type="checkbox"/> Bed at patient knee height (mobile patients) <input type="checkbox"/> Bed in low position (if immobile/high risk of fall) <input type="checkbox"/> Mobility device safety harness <input type="checkbox"/> Developmentally appropriate bed <input type="checkbox"/> Pediatric crib or stretcher side rails up <input type="checkbox"/> Upper or half-length side rails up <input type="checkbox"/> Lower length side rails down	<input type="checkbox"/> Alarms on <input type="checkbox"/> Familiarize with surroundings <input type="checkbox"/> Family with patient <input type="checkbox"/> Hourly or more frequent monitoring <input type="checkbox"/> Traffic path in room free of clutter <input type="checkbox"/> Sensory aids within reach <input type="checkbox"/> Personal items within reach <input type="checkbox"/> Call device within reach <input type="checkbox"/> Minimize distractions during ambulation <input type="checkbox"/> Move close to the nurses station <input type="checkbox"/> One to one observation <input type="checkbox"/> Keep door open at all times <input type="checkbox"/> Provide visual cues or reminders <input type="checkbox"/> Adequate room lighting <input type="checkbox"/> Organize lines, tubes and drains <input type="checkbox"/> Other	<input type="checkbox"/> Incontinence product(s) <input type="checkbox"/> Bathroom <input type="checkbox"/> Bedpan/urinal <input type="checkbox"/> Toileting at regular intervals <input type="checkbox"/> Bedside commode <input type="checkbox"/> Collaborate with continence advisor <input type="checkbox"/> Diapered <b>**Use briefs (pull-up), only use diapers if all other interventions unsuccessful**</b> <input type="checkbox"/> Increased toileting as indicated <input type="checkbox"/> Supervision with toileting <input type="checkbox"/> Appropriate elimination drainage bag (e.g. leg bag) <input type="checkbox"/> Other	<input type="checkbox"/> Communication board or device <input type="checkbox"/> Glasses <input type="checkbox"/> Hearing aids or amplification device <input type="checkbox"/> Large print reading materials provided <input type="checkbox"/> Translation services or translated material <input type="checkbox"/> Other

**\*\*PHC Considerations\*\***

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**Universal Falls Prevention Practices apply to all patients**

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|---|---|
| <ul style="list-style-type: none"> <li>• Bottom bed rails are down</li> <li>• Familiarize patient to surroundings</li> <li>• Individual toileting schedule/plan in place</li> <li>• Review medications that cause urgency &amp; consider referral to Pharmacy</li> <li>• Clutter-free access to bathroom</li> <li>• Assistance for transfers to/from bed/wheelchair/toilet/commode</li> <li>• Ensure bed/chair brakes are on for transfers</li> </ul> | <ul style="list-style-type: none"> <li>• Non-slip socks/ well-fitting shoes with enclosed heel</li> <li>• Bed in lowest position</li> <li>• Call bell &amp; personal items within reach</li> <li>• Increase supervision (e.g. when patient mobilizes or completes ADLs)</li> <li>• Discuss fall prevention strategies with patient &amp; family</li> <li>• Remove clutter/physical hazards</li> </ul> |
|---|---|

Evaluate/Re-evaluate falls prevention strategies:

- On admission
- With change in condition
- Following a fall
- On transfer to another unit
- Every 3 months for hemodialysis outpatients

## Related Documents

[B-00-07-10011](#) - Fall Injury Prevention

[B-00-12-10022](#) - Falls: Assisting Patient Post Fall in Acute/Sub Acute Care

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