Lanarkshire Falls Strategy

Strengthening Falls, Fracture and Frailty Prevention and Management

This is Lanarkshire

- Population c 658,000
- Scotland in microcosm
  - Rural & Urban
- Declining heavy industry/high unemployment /increasing indices of ill health
- New towns / increasing elderly population & increasing indices of long-term limiting illness exceeding national trends

LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Estimated 38000 people over 65 in Lanarkshire will fall each year.

- **73%** of all fall admissions are via A&E.
- Average stay due to fall is **14 days**.
- **291 individuals** (66%) return home after their fall; the rest are either transferred, delayed or pass away.
- **22%** of fall admissions result in a delayed discharge – average length of delay is **6 days**.
- **37 individuals** pass away within three months of their fall; 19 of them in the same falls admission.

Source:ISD 2019

LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Our story so far: Co-creating a shared vision

The Up and About Pathway

Stage One
Supporting active ageing, health improvement and self management

Stage Two
Identifying high risk of falls and/or fragility fractures

Stage Three
Responding to an individual who has just fallen and requires immediate assistance

Stage Four
Co-ordinated management including specialist assessment

Supporting people to:

- ✓ be informed about falls and bone health
- ✓ keep active, steady & well
- ✓ have a safe & enabling home and community
- ✓ connect with their community

http://www.scotland.gov.uk/Publications/2014/10/9431

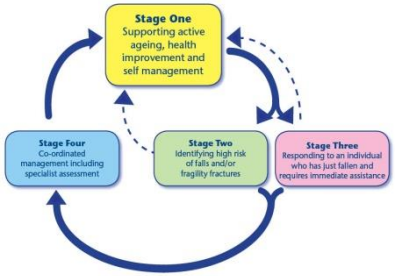
LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Falls Pathway Stage 1: Building resilience at a population level



Voluntary Action South Lanarkshire
Putting the Voluntary Sector FIRST

SCOTTISH FIRE AND RESCUE SERVICE
Working together for a safer Scotland

seniors together in South Lanarkshire

NL LEISURE

VANL Voluntary Action North Lanarkshire

SOUTH LANARKSHIRE Leisure & Culture

EVERY PERSON EVERY TIME 247 SCOTTISH PATIENT SAFETY PROGRAMME

SCOTTISH AMBULANCE SERVICE

LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

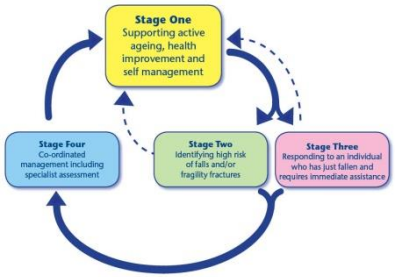
LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Falls Pathway Stage 2: Take action earlier



Name:	**LEVEL 1 FALLS SCREENING**
D.O.B./ CHI:	
Address:	
Telephone:	
GP Name/ Practice:	
GP telephone number:	

It is important to identify people who would benefit from further assessment after falling, or those who are at risk of falling. Complete the following level 1 falls screening tool and send to the falls registry at the email address below.

*** Please note that this is not a direct referral to the falls specialist service or falls medical clinic.**

BASIC SCREENING QUESTIONS

	YES	NO
1. Have you fallen more than once in the last 6 months (NOT the result of simple accidental slips/ trips)?		
2. Do you have any unsteadiness on your feet, or have difficulties with your walking or balance? *OR* **Has the screener observed any unsteadiness or difficulties with the persons walking or balance?**		
3. Did you experience a blackout or any dizziness/ light-headedness when you fell?		
4. Have you experienced any difficulties carrying out your usual activities since you fell?		
5. Are you worried about falling again?		
6. Were you unable to get up from the floor after you fell?		

If the answer is **YES** to any of the above questions in the shaded boxes, further assessment is required and a level 2 falls assessment needs to be completed. Please ensure the person is aware of this and is agreeable to further input.

Additional comments regarding Level 1 Screening e.g. environmental issues/ hazards/ social issues/ cognitive or hearing and visual impairments etc:

Does the person have **Internet access?** YES / NO

CONSENT TO SHARE INFORMATION:

The person has given informed consent (Information Sharing protocol: ISP) to share with:

☐ Health ☐ Social Work ☐ Leisure ☐ Other (specify) :

Written consent obtained date: Verbal consent obtained date:

Declined/not obtained (delete as applicable) Falls Register information leaflet supplied: Yes/No

NO FURTHER INTERVENTION REQUIRED		**Supply person with falls information and send completed level 1 screenings to: FALLS REGISTER** *Via MiDIS or Secure Email:* **falls.register@lanarkshire.scot.nhs.uk**
REQUIRES LEVEL 2 ASSESSMENT		
LEVEL 2 ASSESSMENT ALREADY COMMENCED BY REFERRER		
PERSON DECLINED FURTHER INPUT		

SCREENERS INFORMATION

Name: **Designation:**

Service/ Dept/Team/ Practice:

Location/ Address:

Contact telephone number: **Date level 1 screening completed:**

Version 21/04/2014

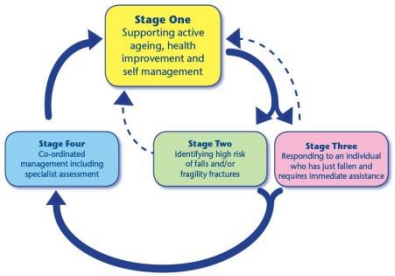
LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Falls Pathway Stage 3: The right response and care at the time of a fall and the right care thereafter



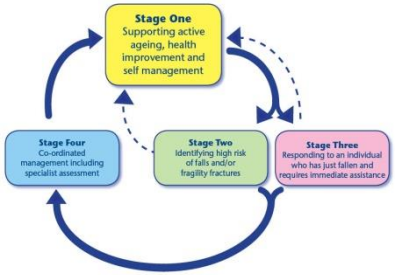
LQA
Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Falls Pathway Stage 4: target evidence-based and personalised support



Chi Number/ DOB:	**LEVEL 2 – MULTIFACTORIAL FALLS ASSESSMENT**
Name:	
Address:	
Tel:	
GP Name/ Address:	

When did falls start?		
Recent life/ medical changes:		
Number of ACTUAL falls in last 6 months		
Are you anxious about further falls?	YES / NO	Is this anxiety related to: ☐ General Anxiety ☐ Mobility ☐ Functional Tasks/ Activities of Daily Livings

QUESTION PROMPTS	FALL 1 (most recent)	FALL 2	FALL 3
When did the fall occur?			
Where did the fall occur?			
What activity were you doing when you fell?			
How did you feel before you fell? (dizzy/ faint/ lightheaded)			
Did you experience any incontinence?			
Was the fall witnessed?			
Were you able to rise from the floor?			
If not, how did you get help? Did you lie for long before help arrived?			
Did you sustain any injuries? What injuries?			
Did you require medical attention- A&E/ GP?			
Had you had any alcohol before the fall?			
Were you using a walking aid at the time of the fall?			

Chi/DOB:	**LEVEL 2 FALLS ASSESSMENT RISK FACTORS IDENTIFIED/ INTERVENTIONS**
Name:	

Using the falls assessment and intervention tool, identify falls risks and interventions actioned/ completed. Provide the person with Falls Prevention Information.

Falls risk identified		Intervention/ Action Completed
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

GENERAL COMMENTS RELATING TO LEVEL 2 FALLS ASSESSMENT
OUTSTANDING ISSUES/ ONWARD REFERRALS MADE

If there are unresolved falls issues remaining after level 2 assessment has been completed, consider referral to specialist Falls Service (North Lanarkshire) or ICST (South Lanarkshire). ALL onward referrals for Level 3 specialist assessment/ falls clinic MUST be accompanied by a copy of this level 2 assessment form and a copy of full assessment completed to date- including details of medical/ medication and social history; and completed physiotherapy/ nursing/ occupational therapy assessments where appropriate.

Send a copy of all Level 2 assessments completed to: falls.register@lanarkshire.scot.nhs.uk

Date Level 2 Assessment Completed:	
Completed by (PRINT):	Signature:
Designation:	Service/ Team:
Contact telephone no:	Address:

LQA Lanarkshire Quality Approach
South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community
Health&Social Care North Lanarkshire
NHS Lanarkshire

LEVEL 2 – Falls Assessment Guidance Notes

Dizziness / Blackout

Complaints of Dizziness, Light-headedness or "just went down"

Check
- Lying & Standing BP
- Manual Heart Rate
- Blood glucose

Consider
- Referral to DN, ICST
- If loss of consciousness ref to GP
- Discussing with specialist falls service

Medications

Polypharmacy High Risk Drugs
(See appendix2)

Check
- If any dizziness light-headedness, visual disturbance, hallucinations
- Any recent changes to medications
- Compliance Use
- Use of over the counter medication

Consider
- Pharmacy / GP review of medication
- Referral for compliance aids
- Social work for medication prompt

Mobility & Balance

Unsteady gait/ balance/ Muscle weakness/ Fear of falling

Check
- Need for walking aid
- Appropriate walking aid being used
- Condition of current walking aid.
- Splints/prosthesis correctly fitted.
- Assessment of balance

Consider
- Referral to Community physiotherapist (house bound) / out-patient physiotherapy dept/ CARS/ICST
- Discussing with specialist falls service
- Referral to NHS Falls Class or Leisure class

Continence

Incontinent of urine & / or Faeces

Check
- Urinalysis
- Clothing easy loosened
- Catheter bags secured to leg
- Changes to elimination habits

Consider
- Referral to DN or Practice Nurse for continence assessment
- Provision of commode

Vision & Hearing

Visual or Hearing Impairment

Check
- If vertigo symptoms (room spinning)
- Hearing aids fitted correctly & working
- Wearing current prescription glasses
- Good lighting

Consider
- Optician for eye test
- Local domiciliary opticians
- Discourage use of multifocal glasses- provide visual leaflet
- Referral to Social Work Sensory Impairment Team

- *Practice nurse for ear assessment*

LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

LEVEL 2 - Falls Assessment Guidance Notes (continued)

Bone Health

Osteoporosis / Previous Fractures

Check
- Osteoporosis risk factors
- If had Dexa Scan
- Prescribed bone medications
- Compliance with bone medication
- Calcium rich diet

Consider
- Referral to Osteoporosis Service
- Lifestyle/ dietary advice.
- Referral to Community physiotherapist (house bound) / out-patient physiotherapy dept
- Referral to leisure class

Feet / Footwear

Foot pain / discomfort Splints / Prosthesis

Check
- Appropriate footwear
- Skin colour / sensation / movement
- Compliance with Splints / prosthesis
- Appliances are fitted properly

Consider
- Referral to podiatry
- Referral to Orthotics
- Footwear / foot care advice - provide foot care leaflet as appropriate

Cognitive Impairment

New / increased confusion Known cognitive impairment

Check
- For signs of infection
- If any recent medication changes
- Cognitive Assessment

Consider
- Referral to Community Mental Health Teams or GP
- Refer to Social Work Dept. for assistive technology assessment

Environment

Is the environment safe / suitable?

Check
- Transfers (e.g. bed, toilet, chair)
- Safety on internal / external stairs
- Lighting suitable
- Home hazards
- Pathways around home clear

Consider
- Referral to OT (CARS / ICST / Day hospital)
- Referral to Social Work Dept
- Making Live Easier for equipment provision.

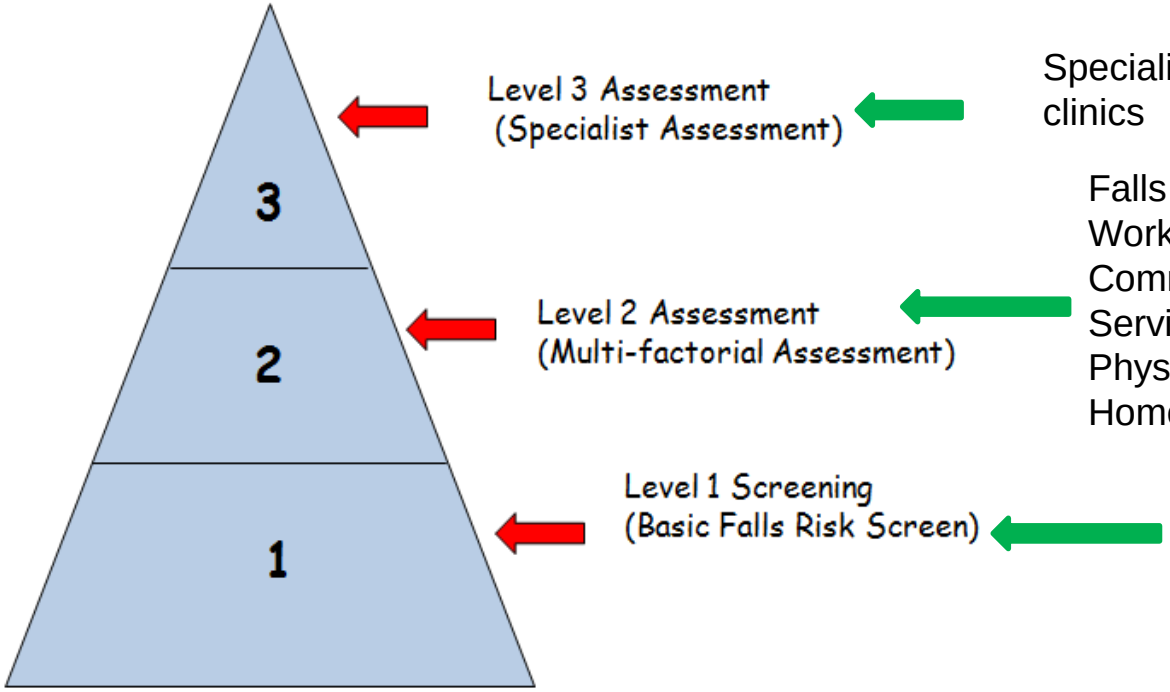
Frailty

Evidence of weight loss or poor oral intake

Check
- Weight
- Dentition
- Ability to make meals

Consider
- Referral to dietician for nutritional assessment.
- Referral to Dentist for issues relating to dentition
- Referral to OT and Social Work Dept.

Lanarkshire Falls Pathway



Specialist falls service and falls clinics

Falls Register, ICST; CARS; Social Work Staff (Home Support Managers, Community OT, Care Managers); Day Services; Care Homes; Community Physiotherapy; Day Hospital; Hospital at Home; new acute falls documentation

Scottish Fire & Rescue; Scottish Ambulance Service; GPs; Podiatry; Orthotics; MSK Physiotherapy; Voluntary groups; Self Referral,Fracture Liaison Service

Level 1 & 2 of the Community Falls Pathway are supported by a comprehensive programme of Falls Awareness & Pathway Training.

Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Why Do We Need The Strategy?

- There was a disjointed approach to falls prevention in NHSL
- Process mapping showed carried **16** different independent falls groups, each group with their own approach.
- The revised falls strategy seeks to set out a common approach and purpose to tackling the incident of falls across NHS Lanarkshire.
- In developing the strategy a wide range of engagement took place with a range of stakeholders such as health improvement, community pharmacy, Scottish Fire and Rescue, Leisure Services Green Health Partnership

Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

The Ambition For Lanarkshire

Our shared vision for Lanarkshire is:

Where possible more people live a life free from harm from falls.

We will:

- **build an integrated approach**: working more closely together across the system and with individuals and communities to design, plan, fund and deliver falls and fragility fracture prevention and management, and frailty prevention, identification, management and care.

- **build resilience at a population level**: working together across sectors and with individuals and communities to enable more people to maintain or build their resilience and reduce their exposure to risk factors for falls and osteoporosis

LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

The Ambition For Lanarkshire

- **take action earlier**: working together across sectors and with individuals and communities to cultivate a shared responsibility for recognising and exploiting valuable opportunities to take earlier preventative action – when signs of frailty and functional decline are first recognised and, after one fall or fragility fracture, to prevent another

- **target evidence-based and personalised support**: collaborating to deliver evidence-based, falls and fragility and fracture prevention interventions, for those at highest risk and with complex needs, with a focus on supporting people to achieve outcomes that are important to them

LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Falls Pathway Stage 1: Building resilience at a population level

Ambition 1: build resilience at population level: working together across sectors and with individuals and communities to enable more people to maintain or build their resilience and reduce their exposure to risk factors for falls and osteoporosis

Outcome 1: A culture where behaviours to prevent falls and maintain bone health are the norm.

Primary Driver

Community engagement

Secondary Driver

The community environment reflects the needs of local people

The public are aware of resources available in the community to build resilience

Falls, frailty and bone health prevention spans a lifetime and engagement should happen in early years

Current services & Resources

Place standard tool

Making Life Easier

Falls register hub

Locator Tool

Schools

Children and Young People Work

Unintentional injuries group

Link to Cancer services

Pharmacy in GP practice to link with prevention of falls frailty

Optometry – explore LENS – Falls Conversation

Change ideas

Place standard tool is completed by North and South Lanarkshire HSCP to determine the extent which people have a physically active lifestyle

Review locator tool

Increase intergenerational working

Increase use of third sector opportunities/social enterprise

Transport review to support access to local opportunities

Mandatory training on falls prevention and management to include community engagement

Promotion of services and self-management tools – linked to whole systems group

Develop passenger assist in third sector to support building confidence and access more independent lives.

Bus driver falls prevention awareness

Alcohol and Drugs services to increase awareness of bone health and physical activity

Communication re self-referral options not just digital

?Physical Activity Prescription for North

Health Promoting Health Service link to hospital

Promotion of dietetic pathways

GP practice SLWG to explore package for GP solar screens falls frailty and bone health

Pharmacy champions could falls be their remit?

Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership

Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Falls Pathway Stage 2: Take action earlier

Ambition 2: take action earlier: working together across sectors and with individuals and communities to cultivate a shared responsibility for recognising and exploiting valuable opportunities to take earlier preventative action – when signs of frailty and functional decline are first recognised and, after one fall or fragility fracture, to prevent another

Outcome 5: More people proactively recognising their risk of falls and/or fractures and taking action to reduce risk.

Outcome 6: More people taking action after a first fall or fracture to prevent another.

Primary Driver

Falls, frailty and fracture risk identification

Secondary Driver

- Anyone admitted to hospital/care home/day care is screened on admission for falls, frailty and fracture
- Workforce across the whole system has the knowledge and skills to have a meaningful conversation leading to beneficial actions
- Every contact counts anyone in contact with an individual should have a conversation about falls, frailty and fracture
- Falls, frailty and fracture risk should be considered in harmony
- Information shared across the whole system on the screening and interventions for falls, frailty and fractures
- People proactively recognise their own risk of falls, frailty and/or fractures and take action to reduce risk
- Anyone attending ED is screened for falls, frailty and fracture
- Following screening appropriate action is taken to update falls register and signpost to interventions
- Any falls risk screening is reviewed and

Current services

- Scottish Fire & Rescue Service
- Hospital
- Fracture liaison services
- Health & Social Care Professionals
- Falls Register Hub
- Making Life Easier Clinics
- Care Homes
- Day care

Change ideas

- Scale and spread plan for conversation
- Increase opportunities for Care at Home staff to have conversations
- Leisure complete level 1 screening
- Consider use of fracture tool
- Mandatory training on falls to include falls risk screening
- Development of the Falls Register database
- Pharmacy/volunteers complete level 1
- High profile campaign
- IT flag alert for falls, frailty fracture
- MLE used for screening
- Post diagnostic support use level 1
- Level 1 self assessment

Falls Pathway Stage 3:The right response and care at the time of a fall and the right care thereafter

Ambition 3: target evidence-based and personalised support: collaborating to deliver evidence-based falls and fragility fracture prevention interventions for those at highest risk and with complex needs, with a focus on supporting people to achieve outcomes that are important to them.

Outcome 7: People receiving a proportionate response at the time of a fall that minimises harm and enables the best possible recovery.

Primary Driver

Response following a fall

Secondary Driver

- People receiving a proportionate response at the time of a fall
- Long lies avoided
- Use of technology is maximised
- Post fall protocol included in level 1
- Reduce conveyance to hospital
- People uninjured following a fall receive appropriate assistance to
- Reduce the need for forced entry
- Workforce attending have the knowledge and skills including access to pathway

Current services

- Scottish Fire & Rescue Service
- Scottish Ambulance Service
- Health & Social Care Professionals
- Sheltered Housing
- Police
- Care Homes
- Care at home
- Community alarms
- GP
- NHS 24
- Falls Service
- LRT/SW duty/OOH
- Community nurse
- SW OOH
- istumble

Change ideas

- Clear pathways injured and uninjured
- Public awareness campaign
- Operational triage checklist
- Telehealth information post fall
- Datix to link to referral
- Mandatory training on moving and handling includes falls prevention and management
- Anyone responding completes level 1
- ED front door refer to falls register hub on discharge
- New staff induction includes falls prevention and management
- Access to property of vulnerable people is ensured
- Care at home and other staff trained to instruct persons up from floor
- Help define level of risk and inform other agencies
- Explore long lies - enable a focus on long lies - create data set ? within falls register to learn from long lie episodes, how can frequency and duration of long lies be reduced, is there a post code effect? How do we identify patients at risk?

Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Falls Pathway Stage 4: target evidence-based and personalised support

Ambition 3: target evidence-based and personalised support: collaborating to deliver evidence-based falls and fragility fracture prevention interventions for those at highest risk and with complex needs, with a focus on supporting people to achieve outcomes that are important to them

Outcome 8: Personalised falls prevention for people at higher risk and with complex needs.

Outcome 10: Evidence-based fragility fracture prevention.

Primary Driver

Specialist falls service including clinic

Outcome 9: Evidence-based and personalised approaches to preventing falls in community settings, in hospitals and in care homes.

Secondary Driver

Lanarkshire shows commitment to safe, effective and person centred care by investing in specialist service

Lanarkshire links to national pieces of work through the specialist service

Lanarkshire services remain current to evidence base through the specialist service

There is access to specialist led medical assessment with a focus on falls & frailty

There is a specialist multidisciplinary team available within Lanarkshire for complex

Outcome 11: Evidence-based and personalised care following hip fracture.

Current services

Specialist falls team

Falls hub /register

Falls Clinics UHH & Coathill

Day Hospital UHW

Hospital @ Home

DEXA

Fracture Liaison Service

Day Hospital Coathill Hospital

Change ideas

Specialist team support care navigation to clinics

Develop expert role of Falls ANP, Falls PT & OT

Review of current Lanarkshire wide training

Review discharge letters – work

Use of audit/ 6 & 12 month review

Level 3 assessment and personalised care plan visible across the whole system

Raise profile of specialist team / recognition of highly specialist resource within Lanarkshire

Quality of stakeholder's engagement is measureable

Improve communication between specialist team and stakeholders

Support GP transformation with development of MDT review for falls, frailty and fractures

Specialist team seek to ensure the quality of provision between North / South Lanarkshire

Recognise pathway back to self-management

Pathway from ED including referral to Falls Register and Specialist Team

LQA Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

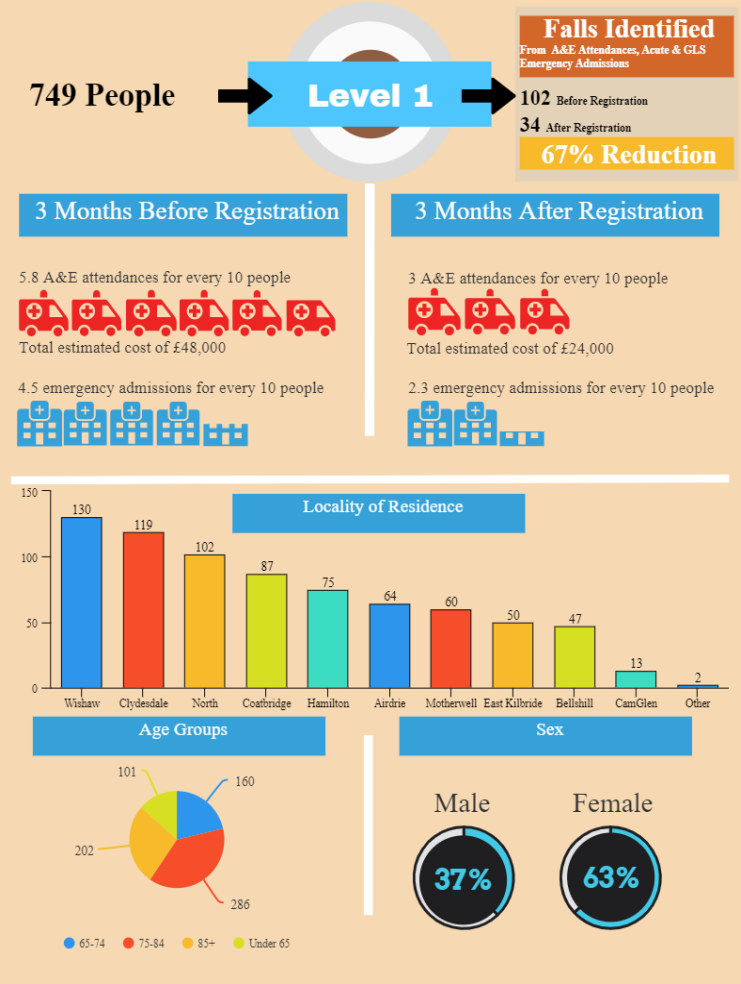
Stage 5 : Whole systems approach -

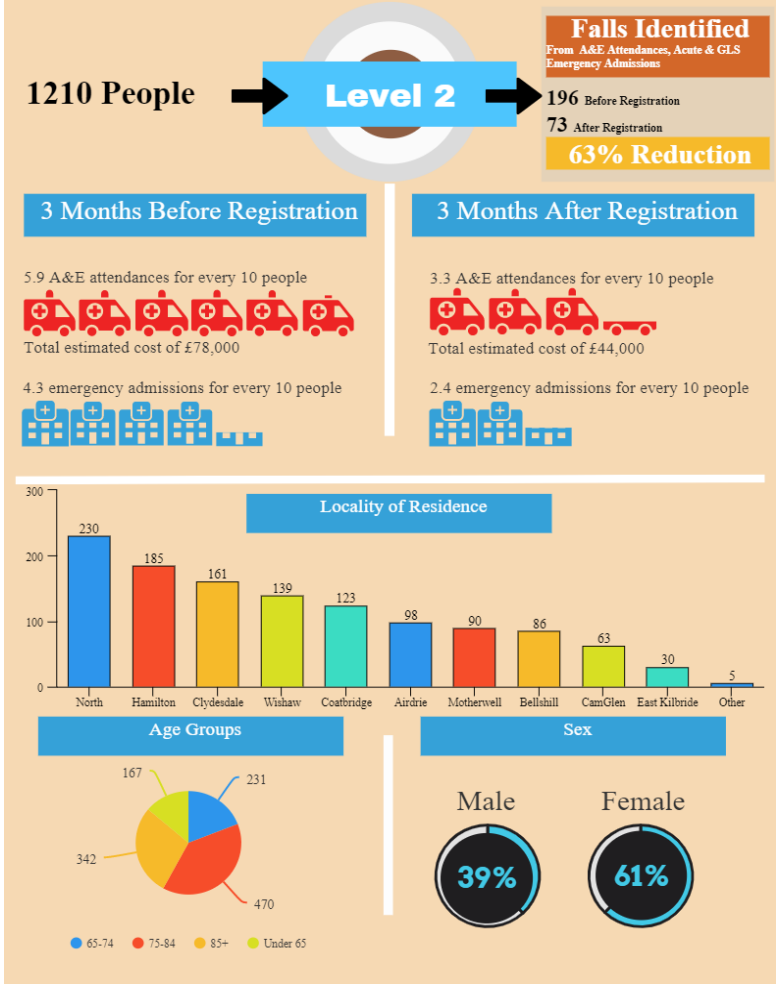
Ambition 4: build an integrated approach: working more closely together across the system and with individuals and communities to design, plan, fund and deliver falls and fragility fracture prevention and management, and frailty prevention, identification, management and care.

Outcome 12: A whole-system approach that is joined-up, collaborative and co-designed with communities.

Primary Driver	Secondary Driver	Current services	Change ideas
Whole system enablers to support the whole system	A whole-system approach that is joined-up, collaborative and co-designed with communities.	Falls register hub	Conversion of falls register to web based resource that services can access.
		Improvement team	Enhance connections between acute and community falls pathway
		ISD	Electronic data sharing across agencies
		Data and measurement team	Development ideas to include level 1 being built into self assessment part and level 2 assessment built into staff platform and inclusion of falls prevention solutions throughout both
			Pan Lanarkshire approach – North / South split not helpful for staff
			Alert system that flags up if individual has fallen recently and is on falls register
			Increased visibility of falls register
			Develop standard pathways analysis of patients
			Falls to be everyone's business
			A national campaign of health promotion
			Agencies at all levels to be trained to level 1
			Incident reporting systems ie Datix have a link to referral systems
			Index of shared support and education ie a quick reference guide
			Share testimonies of positive outcomes
			There would be feedback from the falls register when a level 2 has been completed for someone
			Work together with SAS and fire service to identify people at risk of falling
			Enhance connections between acute and community falls pathway

Falls Register Analysis 2018/19





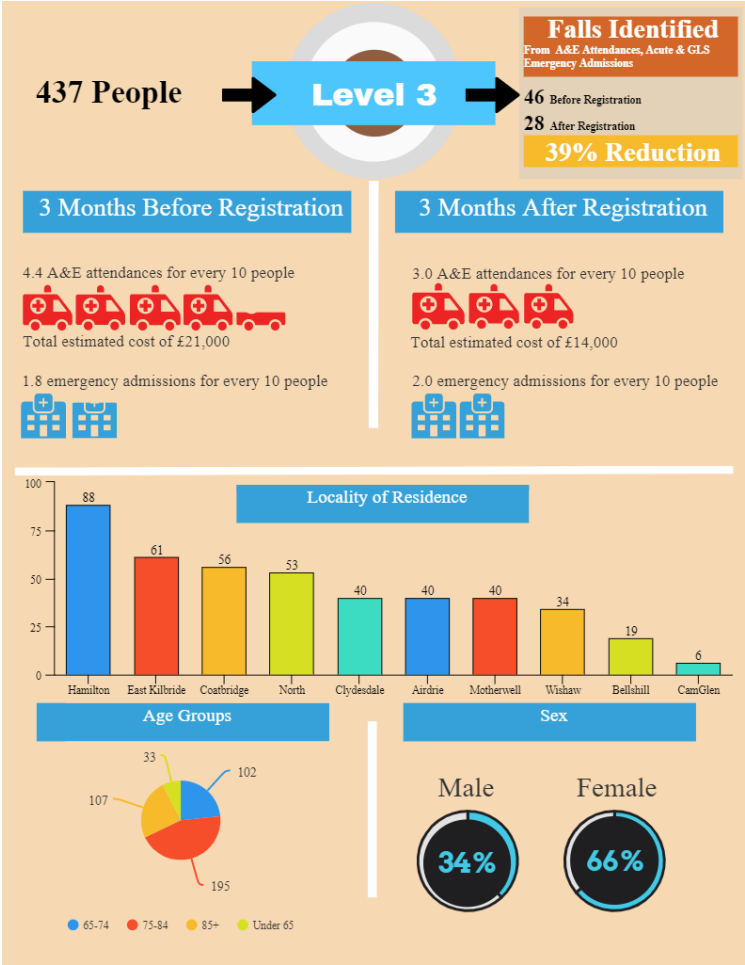
Source: ISD Analysis of Falls Register data 2019/2020

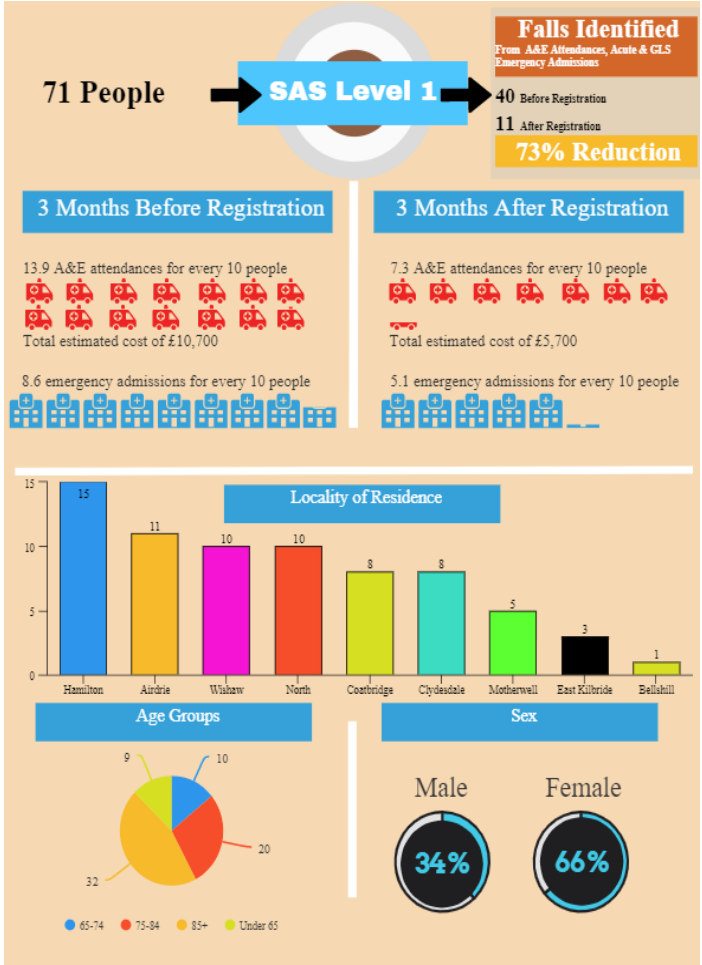
Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire





Source: ISD Analysis of Falls Register data 2019/2020

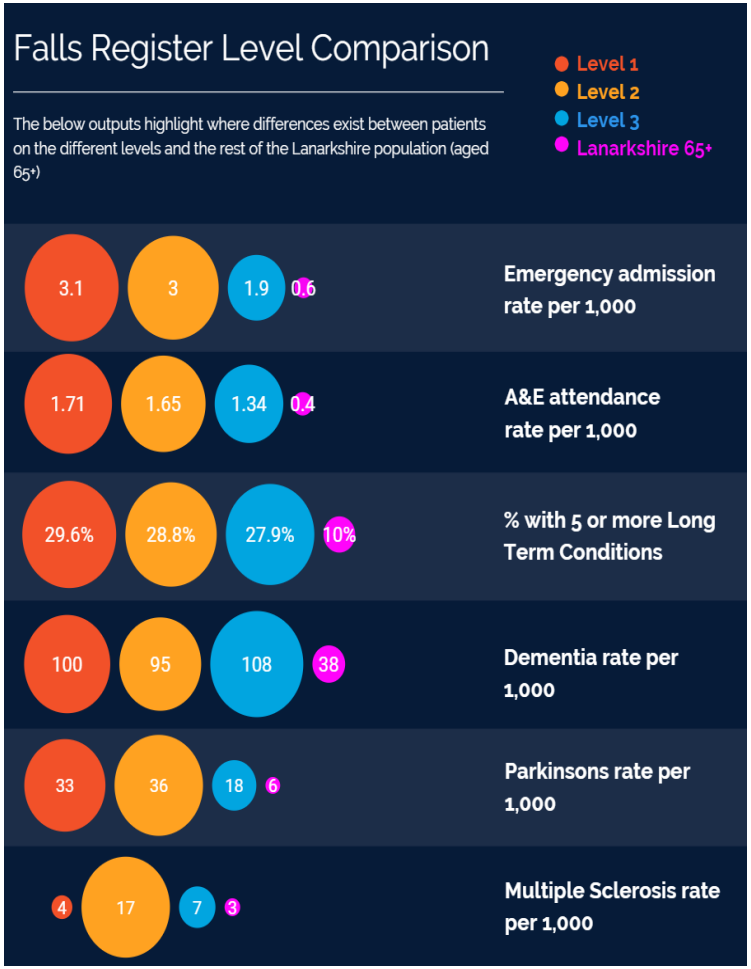
Lanarkshire Quality Approach

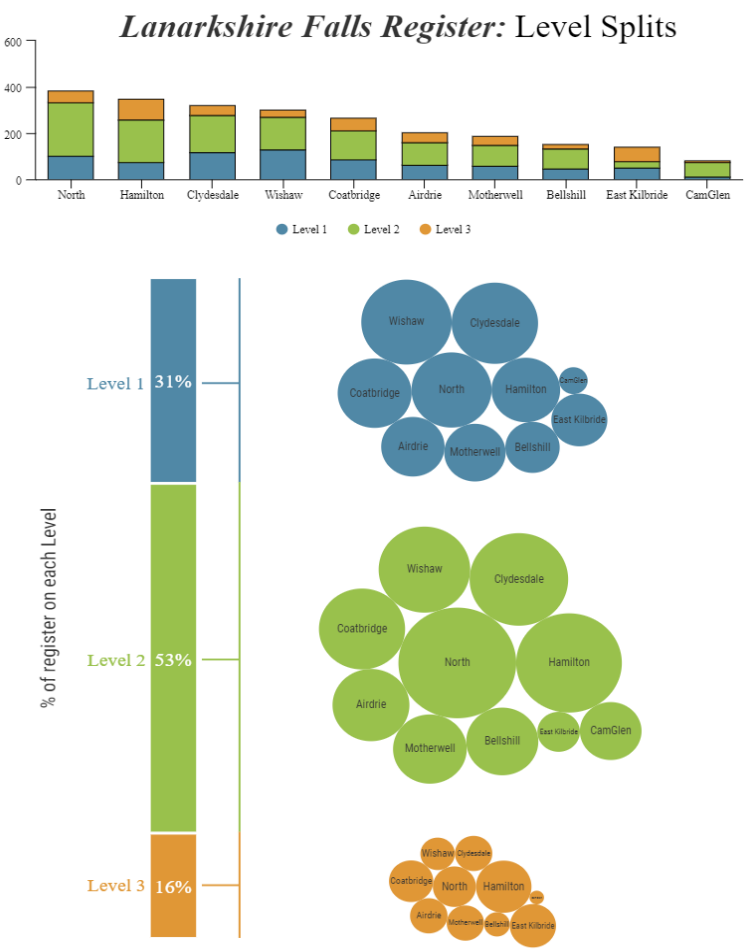
South Lanarkshire Health and Social Care Partnership

Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire





Source: ISD Analysis of Falls Register data 2019/2020

LQA Lanarkshire Quality Approach

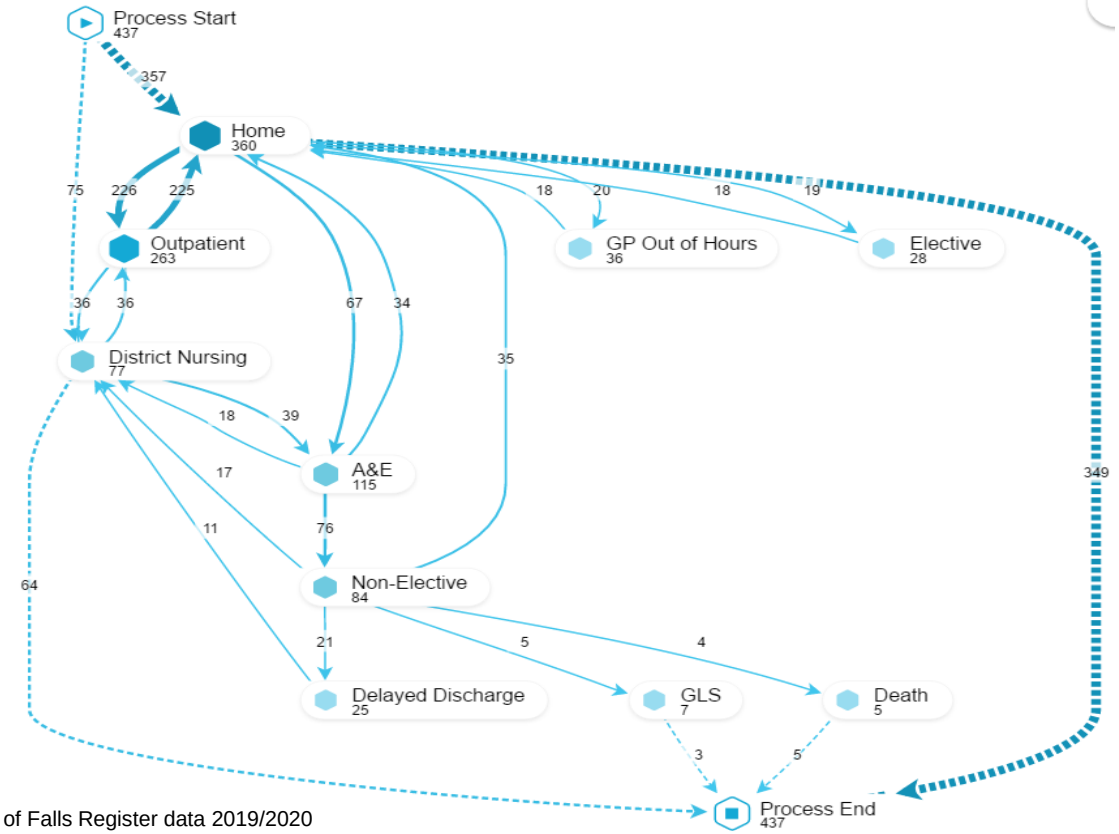
South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Falls Pathway Analysis

Level 3 – Analysis of 437 patients



Source: ISD Analysis of Falls Register data 2019/2020

Lanarkshire Quality Approach

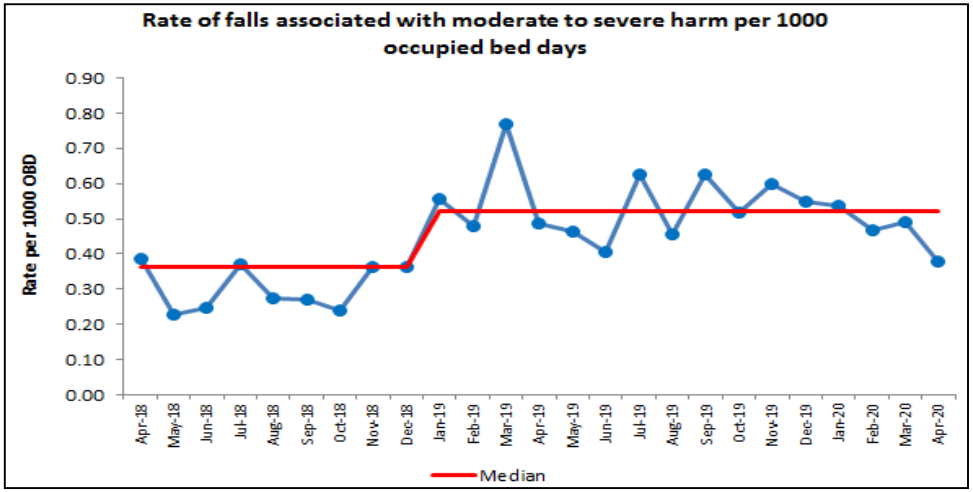
South Lanarkshire Health and Social Care Partnership

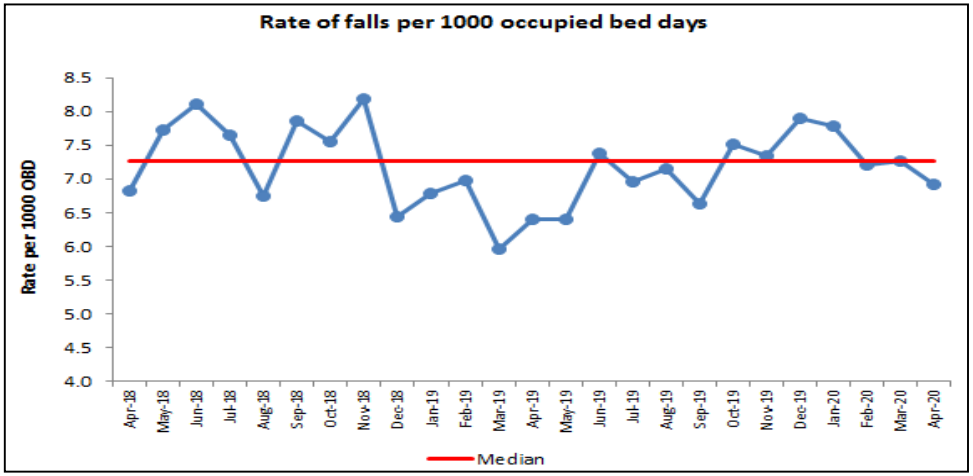
Working together to improve health and wellbeing in the community – with the community

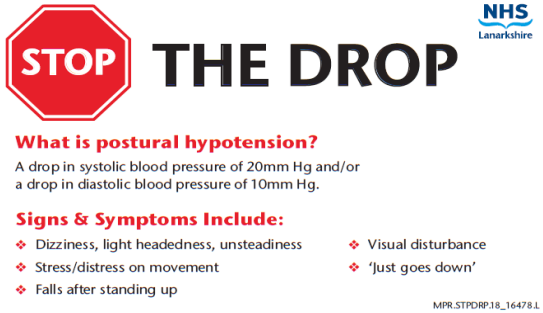
Health&Social Care North Lanarkshire

NHS Lanarkshire

Hospital Falls Collaborative







DATIX INCIDENT REPORTING GUIDANCE FOR SLIPS, TRIPS & FALLS

	CATEGORY 3	CATEGORY 2		CATEGORY 1	
DESCRIPTOR	NEGLIGIBLE	MINOR	MODERATE	MAJOR	EXTREME
Policy Guidance	Near miss or adverse event leading to minor injury NOT requiring first aid/dressings sterile strips	Minor injury or illness, first aid treatment required wound required sterile strips	Significant injury requiring medical treatment and/or counselling	Major injuries/long term incapacity of disability (loss of limb) requiring medical treatment and/or counselling.	Incident leading to death or major permanent incapacity
FALLS Examples	Minor physical injury not requiring first aid eg: • Fall that does not result in physical harm or injury • Short term pain, scratch not breaking the skin • Small bumps, grazes, redness or slight bruise • Muscle/joint strain • Short term feeling of emotional upset/anxiety	Minor physical injury requiring first aid eg: • Cuts, bruises, sprains • Minor lacerations requiring sterile strips • Skin flaps or moderate bruising	Injury requiring medical treatment and/or counselling e.g.: • Laceration requiring sutures • Fractured fingers or toes • Dislocation of fingers, toes, wrist, or ankle • Significant bruising • Fracture requiring minimal intervention (e.g. cast) • Internal injury requiring treatment and prolonged stay in hospital	Injury resulting in long term incapacity or disability requiring medical treatment and/or counselling eg: • Head injuries requiring neurological observations • Limb amputation as result of fall • Long bone fractures requiring surgery (significant intervention) • Dislocation of hip, shoulder, knees or spine	Injury resulting in death or major permanent incapacity eg: • Fall leading to death • Head injury, facture or internal injury requiring Intervention to save life • Permanent impairment as a result of fall • Unable to return to work
RESULT	NO HARM	HARM	HARM	HARM	HARM
Additional Note	*Near Miss as an incident result would only be applicable to incidents were the patient could have had a Slip/Trip or Fall but did not. This result would not relate to an actual Slip/Trip or Fall incident as this would either have resulted in Harm or No Harm.*				

LQA
Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Care Homes

Care Home liaison physiotherapist provides training on the ‘Managing falls and fractures in care homes good practice resource.’

This has included a walking aid review of all 80 care homes.

Lanarkshire Quality Approach

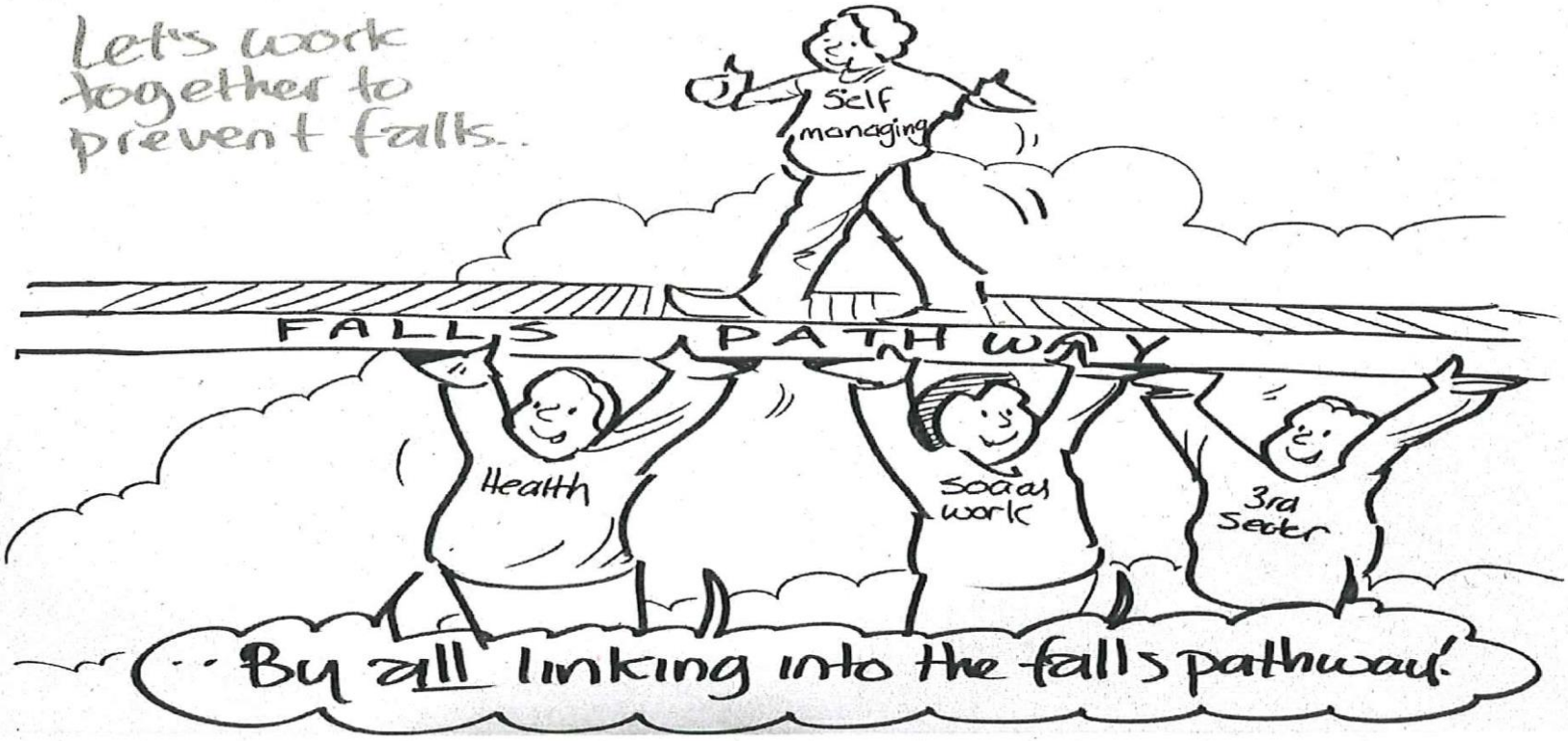
South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire

Next Steps

- Plan to establish sub groups for Falls Strategy Implementation - Falls Strategy Sub Group Leads already identified
- Falls Register e-Health Development – ?Morse, and visability!
- Hospital Falls Collaborative to be rescheduled that was due to start on 1st April
- Links to electronic frailty index in community, focus of dementia and rehabilitation strategy
- Mandatory Educational Programme for staff



LQA
Lanarkshire Quality Approach

South Lanarkshire Health and Social Care Partnership
Working together to improve health and wellbeing in the community – with the community

Health&Social Care North Lanarkshire

NHS Lanarkshire