Guysborough Antigonish Strait Health Authority
Working Together for a Healthy Community

___ SMRH
___ SRH
___ GMH
___ EMH
___ SMMH

Falls Risk Assessment Tool

Please affix patient ID label here

To be completed on admission & with improvement or deterioration of conditions

	RATING SCALE				dd/mm/yy / /	dd/mm/yy / /	dd/mm/yy / /
CATEGORIES	**0**	**1**	**2**	**3**	**Score**	**Score**	**Score**
DAYS SINCE ADMISSION	On Admission	Up to 7 days	8 – 14 days	Over 14 days			
AGE	0 – 19 years	20 – 59 years	60 – 70 years	Over 70 years			
FALLS HISTORY	No falls in last year	Fall in last 6 months	Fall in last 3 months	Fall in last month			
MOBILITY	Chair / bedfast, stand & pivot with help	Needs assistive device & 2 people	Ambulates with assistive device & /or one person	Ambulates without assistance / device			
MENTAL STATE	Oriented to time, place and person or N/A*	Oriented to place & person	Oriented to person	Disoriented & /or impaired judgment & /or impulsive			
GENERAL HEALTH	Well nourished, normal sleep pattern	Poor appetite &/or sleep disturbance	Severe sleep disturbance	Malnourished, weight loss			
VISION	Normal	Wears glasses	Blurred vision cataract, glaucoma	Severe visual disturbance or blindness			
SPEECH	Normal	Speech defect but understood	Dysphasia/ language barrier	Severe defects or severe language barrier			
MEDICATIONS	No effectors	CV effectors e.g. Beta-blockers, diuretics, anti-hypertensives	CNS effectors e.g. Tranquilizers, sedatives, psychotropics	Both CV & CNS effectors			
CHRONIC ILLNESS	None	1 Chronic condition	> 1 Chronic condition	Multiple illnesses			
INCONTINENCE	None	Increased frequency	Nocturia, stress incontinence	Urge incontinence, indwelling catheter			
Score Assessment	1-10= Low Risk	11-33 Medium/High Risk		Total Score:			

Tool developed from the www.health.qld.gov.au/fallsprevention/best_practice/, as part of the Quality Improvement and Enhancement Program

(Mental State: *N/A indicates client is unresponsive, unconscious or is an infant.)

GASHA Nursing Practice Committee. April 2008
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Fall Risk Interventions

Place Patient ID label here

For all patients:

- ❑ Orientation to unit / room / bathroom
- ❑ Call bell / personal objects / fluid needs within reach
- ❑ Tray table / telephone within reach
- ❑ Minimum every hour patient observations
- ❑ Bed adjustments devices within reach (e.g.: urinal. bedpan and / or beside commode)
- ❑ Walker / cane within reach
- ❑ Eyeglasses / hearing aids within reach, if applicable
- ❑ Non-skid footwear
- ❑ Pain control /symptom management plan
- ❑ Encourage family to participate in care
- ❑ Lock brakes on bed / wheelchair / commode

Score 1-10= Low Risk

Low fall risk safety interventions: (Please indicate as appropriate)

- ❑ Consider lighting devices
- ❑ Consider re-orientation devices (e.g.: calendar, clock in patient view)
- ❑ Consider family / significant individual presence
- ❑ Consider frequent / scheduled toileting
- ❑ Assistance required: _____ One person
  _____ Two people
  _____ Walking aids (specify): _____
- ❑ Consider PT consult
- ❑ Consider OT consult
- ❑ Assign patient to bed that allows patient to exit towards stronger side

Score 11-33 = Medium-High Risk

Medium/High fall risk safety interventions: (Please indicate as appropriate)

- ❑ Re-orientation
- ❑ Side rails x ____2; ____3; _____4 = consult Minimal Restraints Policy (N.B. Full rails are not to be used as a Falls Prevention Strategy and can increase risk of injuries)
- ❑ Walker / Cane within reach
- ❑ Hip protector
- ❑ Bed alarms / chair alarms
- ❑ Toilet every 2-3 hourly
- ❑ Assistance required: _____ One person
  _____ Two people
  _____ Walking aids (specify): _____
- ❑ Consider PT consult
- ❑ Consider OT consult
- ❑ Consider lighting devices
- ❑ Family / sitter schedule in progress
- ❑ Pain / symptom management
- ❑ Evaluate current medications that may place patient at risk for falls.
  (Specify):_____
- ❑ Assign patient to bed that allows patients to exit toward stronger side
- ❑ Consider Pharmacy Consult
- ❑ Consider Dietary Consult

Date: _____ Signature: _____

GASHA Nursing Practice Committee. April 2008
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