

Rochdale Borough Safeguarding Adults Board

Falls Protocol for care homes, nursing homes and domiciliary care providers

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ADAPTATION	<p><i>Adapted from the Falls Protocol published by Calderdale Council with their kind permission</i></p> <p>Adapted by:</p> <ul style="list-style-type: none"> • Carl Travis – Development Officer – RBSB • Jane Timson – Head of Safeguarding and Practice Assurance – RBC
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Introduction

This document is to help providers, particularly those offering 24 hour care, to understand their safeguarding responsibilities in respect of falls. The toolkit may be particularly useful where a fall has occurred in a residential care home, nursing home or hospital ward. It can also be useful within other services which could include homecare and respite care services.

Every year, more than one in three (3.4 million) people in the UK over 65 experience a fall. Some of these may cause serious injury or even death. Even a minor fall can have serious consequences for an older person's physical and mental health.

A fall can damage self- confidence, increase social isolation, reduce independence, and hasten a move into residential care. The fear of falling again may lead to deterioration in a person's well-being and quality of life, even if the fall itself does not result in serious consequences.

This protocol is to be used in conjunction with the **Rochdale Borough Safeguarding Adults Board Multi-Agency Policy and Procedures** which are available on www.rbsab.org

Please note – further information on fall prevention and management is available at

<https://www.rbsab.org/UserFiles/Docs/Falls-and-fractures-new-resource.pdf>

and

<https://www.gov.uk/government/publications/falls-and-fractures-consensus-statement>

Definition of Adult at risk

An adult to whom these Policy and Procedures apply is someone who:

- has needs for care and support (whether or not the local authority is meeting any of those needs) and;
- is experiencing, or at risk of, abuse or neglect; and
- as a result of those care and support needs is unable to protect themselves from either the risk of, or the experience of abuse or neglect.

The adult *may* be a person who:

- is elderly and frail due to ill health, physical disability or cognitive impairment
- has a learning disability
- has a physical disability and/or a sensory impairment
- has mental health needs including dementia or a personality disorder
- has a long-term illness/condition
- misuses substances or alcohol
- is a carer such as a family member/friend who provides personal assistance and care to adults and is subject to abuse
- is unable to demonstrate the capacity to make a decision and is in need of care and support.

(This list is not exhaustive.)

Raising a concern

Anyone who first becomes aware of concerns of abuse or neglect must report those concerns as soon as possible and in any case within the same working day to the relevant manager (or responsible person) identified in their internal agency procedures. As a general rule, concerns should be raised as soon as abuse or neglect is witnessed or suspected.

On receiving the concern, the person responsible must decide whether to make a referral to Rochdale Adult Care (0300 303 8886 Monday to Friday from 8.30am to 4.45pm, or 0300 303 8875 at all other times).

However anyone can report a concern:

- if discussion with the manager would involve delay in a high-risk situation
- if the person has raised concerns with their manager and they have not taken action.

Falls

Fall: Definition A fall is defined as: 'an event in which a resident (*or service user*) unintentionally came to rest on the ground or floor, regardless of whether an injury was sustained' (*SCIE research briefing 1: Preventing falls in care homes, April 2005*)

Falls can lead to increases in death rates, fall related injuries, individual physical and psychological damage, loss of independence and health costs, Fall prevention strategies and interventions need to take into account the fact that falls can have a number of causes, such a frailty, infection, confusion, and the effect of certain prescribed drugs that require many different interventions.

When is a fall a safeguarding concern?

Any fall that is deemed as **unwitnessed**, and **resulting in injury** should be referred to as an '**unexplained injury**' rather than an 'unwitnessed fall'. In circumstances where a person has sustained an injury the manager on duty should use judgement based on the evidence available to determine what may have happened. If the person has an injury which cannot be explained then this should be referred as a Safeguarding Concern.

If no injury is apparent, there is no observed change in function and actions and observations have been recorded, then a GP or Hospital review may not be necessary. This decision will be made by the manager or clinician on duty based on the individual circumstances of the case. Where the person has or may have sustained a head injury a medical assessment should always be arranged as a matter of urgency.

Falls where an injury occurs:

Any falls that result in injury should be reported through safeguarding procedures; including but not limited to:

- Pain
- Bruising
- Swelling
- Skin tear or laceration
- Fractures
- Requiring any medical treatment or investigation including urinalysis, x-rays, attendance by GP or Nurse, Accident and Emergency visit, stay in hospital etc.

Checklist to aide reporting of concerns to Rochdale Adult Care relating to falls and unexplained injuries

	Yes	No
Did the person sustain an injury that cannot be explained?	Report	
Has a falls risk assessment been completed?		Report
Is there a clear action plan in place to manage falls risk?		Report
If the person has a buzzer and is able to use it to summon help, was it left within reach for the person?		Report
Had the fall occurred due to a delay in responding to a buzzer?	Report	
Was there a delay in responding to any falls mat/sensors?	Report	
Was the individual seen by a medical professional, if they have sustained an injury/bruising/swelling?		Report
If the person was unwell or experiencing an acute change to their function, has a plan been put in place to address the increased risk of falling?		Report
Was a post-fall care plan implemented?		Report
Has the person fallen under similar circumstances more than once (not necessarily sustaining any injuries)	Report	

Where to report:

Call 0300 303 8886 or email adultpreventionsteam@rochdale.gov.uk
 Out of office hours, you can contact 0300 303 8875.

If you feel an adult is in immediate danger please contact the police on 999

What to expect when reporting a fall?

Once Adult Care have received information about the fall and any possible injuries:

- An Adult Care Practitioner will contact the person who submitted the report.
- Care home or provider service staff will be asked about any immediate response, risk management plans, the individual's consent and capacity in relation to the safeguarding concern and any further actions staff or the provider will take, and whether these are person-centred.
- Depending on the circumstances, the Enquiry Practitioner will speak with the individuals, their relatives and anyone involved in their care such as GP's, nurses, hospital staff, looking at care plans, daily records, and medical records, or may ask the provider to do this themselves and be asked to complete a Provider Safeguarding Report.
- The Enquiry Practitioner could make a decision for no further action. This outcome is often when a provider has taken appropriate, proportionate and timely action for example seeking medical treatment, updating risk assessments, referring for further investigation and/or support.
- The Enquiry Practitioner could make a further request for information, for example requesting updated risk assessments, further discussions with the individuals/family/those involved in the care.
- At any point it could mean a recommendation that the provider conducts their own internal investigation, or request further analysis of falls within the home.
- If an individual or their representative declines safeguarding there may be occasions where it is appropriate for the case to be pursued nonetheless, if there could be a risk to other residents.
- For further information regarding the procedures please **consult the RBSAB Multi Agency Policy and Procedures available on www.rbsab.org**

**Contact Details: Call 0300 303 8886 or email
adultpreventionteam@rochdale.gov.uk
Out of office hours, you can contact 0300 303 8875.**

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Flowchart

Did the individual sustain an injury from the fall, or require any medical treatment or investigation?

Pain?

Bruising?

Skin tear or laceration?

Fractures?

Or require any medical treatment or investigation?

NO

YES

No need to report through to safeguarding providing falls risk assessment and care plans have been updated, and appropriate measures have been put in place. If this is not the first fall, and preventative measures have not succeeded consider referring to the Falls Team or seeking further support on measures to put in place.

With the individual's consent or if assessed as lacking capacity to consent to raising a concern, as a best interest decision in consultation with any family or if a risk remains to other residents

Raise a safeguarding concern

If in doubt of whether to report to Adult Care, make the report and duty officer will decide on whether this meets criteria.