#### CAPTURE

Collaboration and Proactive Teamwork Used to Reduce



## **Best Practices in Post-Fall Clinical Assessment**



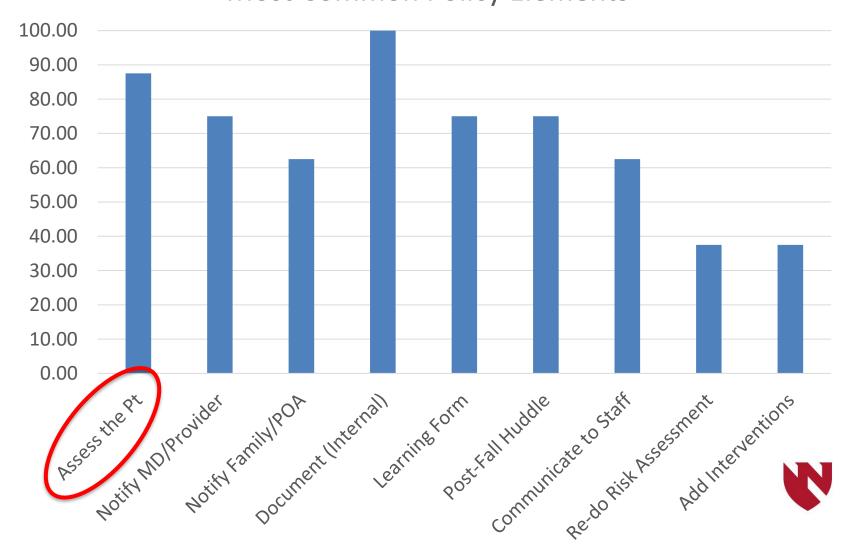
# What is Post-Fall Clinical Assessment?

- During a post-fall clinical assessment, staff assess the patient for injury and attend to the patient's medical needs.
- Assessment should occur immediately.
   Depending on the patient's risk factors, assessment may continue for several hours.



### Common Post-Fall Policy Elements: From Policies Shared by 8 NE Critical Access Hospitals

**Most Common Policy Elements** 



#### **Post-Fall Clinical Assessment:**

From Policies Shared by 8 NE Critical Access Hospitals

There was a variety of detail within policies regarding patient post-fall clinical assessment.

When assessment was explicitly described, the following was often listed: (\*Most Common)

- \*Vital Signs
- \*Pain
- \*Injury

Deformities
Ecchymosis
Lacerations
Bleeding

- Level of Consciousness
- Orientation
- Blood Sugar
- Observe cervical precautions
- "Head to toe assessment"



#### Agency for Healthcare Research and Quality Postfall Assessment, Clinical Review

- Explains how to assess and follow-up on injury risk in a patient who has fallen
- Provides separate recommendations for patients with or without head trauma or those with an unwitnessed fall

https://www.ahrq.gov/professionals/systems/hospital/fallpxtoolkit/fallpxtk-tool3n.html



US Department of Veterans Affairs Post Fall Procedures/Management (See Section VII and Attachment 3)

- Provides recommendations for initial post-fall assessment, documentation, and follow-up
- Differentiates follow-up for patients with and without head trauma

https://www.patientsafety.va.gov/docs/fallstoolkit14/05\_falls\_policy\_overview\_v5-1.pdf



#### Post-Fall Management Guidelines in Western Australia Healthcare Settings

(Government of Western Australia Dept. of Health)

- Thoroughly outlines steps to take immediately, and within various time intervals up to 48 hours post fall
- Considerations for patients at risk for bleeding and with potential head injury (including when to consider CT head scans)
- Differentiates course of action between witnessed vs. unwitnessed falls, struck head, or on anticoagulants/antiplatelets

https://ww2.health.wa.gov.au/-/media/Files/Corporate/general-documents/Health-Networks/Falls-prevention/WA-Post-Fall-Guidelines\_Final\_2018\_PDF.pdf



#### Clinical Excellence Commission – New South Wales, Australia

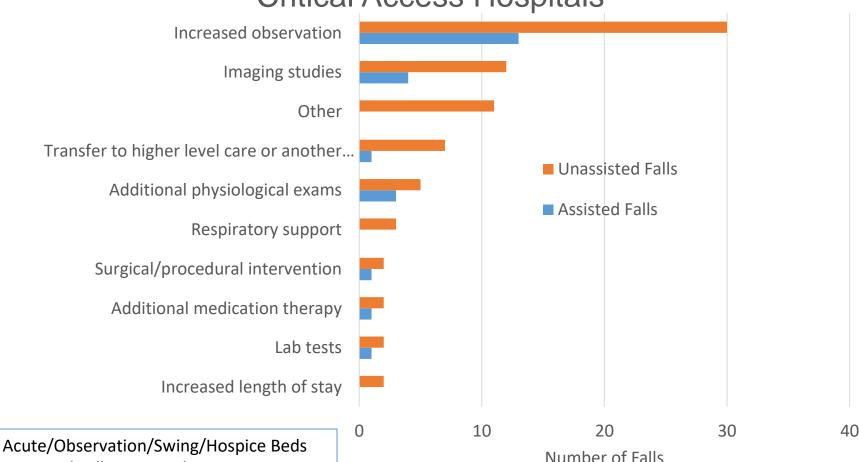
- Considerations for immediate response as well as ongoing observation/monitoring
- Considerations for patients at risk for bleeding, with potential head injury, and assessment for sepsis and delirium

http://www.cec.health.nsw.gov.au/keep-patientssafe/Falls-prevention/hospitals/post-fall



#### **Unassisted Falls Typically Result in Greater Need** for Additional Treatments and Monitoring

Additional clinical treatments and monitoring that occurred after 213 falls reported in 2017 by NE Critical Access Hospitals



213 Total Falls Reported

Portions of the content in this document were originally shared as part of a CAPTURE Falls Collaborative Support Call on January 23, 2018.



