

P041_A Falls Management Policy

1. Purpose

This policy is designed to inform all employees of their obligations as District 360 employees in relation to the safety and wellbeing of participants when they have experienced a fall.

2. Scope

This policy applies to all employees and volunteers and supports District 360 risk management strategy and good governance of organisational and individual risk.

The Management team will identify, mitigate and manage risk with the organisation. The office manager is responsible for reporting any breach of privacy and confidentiality to Management.

3. Policy Statement

District 360's policy is to ensure that participants are safe from harm in their interactions with District 360.

In supporting participant safety, District 360 is committed to upholding participant's rights and ensuring:

- risks to participants are identified and managed
- all staff operating under District 360, including contracted staff, are appropriately screened and comply with relevant legislation.

4. National Principles for Participant Safety Following a Fall

Employees will follow the below instructions following a participant fall. This procedure must be followed exactly, to ensure safety for participants, and ongoing delivery of quality support.

Upon appointment, all employees must view this policy, and present a current first aid and CPR certificate.

Employees will complete an incident report as soon as is practicable following a fall, detailing the response they provided.

5. Reduce Falls risk

- Ensure all relevant assessments to support the resident with their activities of daily living are completed and up to date. These should outline how to support and assist the resident with everyday physical activities.
- Regular reviews by a resident's General Practitioner (GP) can also help to identify and respond to changes in a resident's mobility.

6. Falls minimisation strategies

a. Be alert to falls

Whenever you provide support to residents, routinely observe the resident when they stand and walk:

- Does their movement look uncoordinated?
- Are they off balance?
- Are they limping?
- Are they unsteady?

b. What to do if standing or walking looks unsafe

- Identify issues that may be affecting mobility e.g. complaints of dizziness, pain, weakness, medication change, changes in vision.
- Encourage and redirect the resident ensuring the correct use of the gait/mobility aid/orthoses (if prescribed).
- Confirm that medications have been taken as per treatment sheet.
- Implement recommended strategies from Falls & Balance Clinic, Physiotherapist or Occupational Therapist where they have been consulted for advice.

c. What to do if the issue does not improve?

- Arrange a GP appointment for review.
- Redirect resident to sit down and/or provide additional assistance/ supervision until review by GP.

Further falls risk minimisation strategies

a. Environmental

Area of house	Action and advice
All areas of the home	NO uneven floor surfaces within the home.
	NO uneven floor surfaces in main access areas to or from the home.
Bathroom	Nonslip surfaces in all bathrooms.
	Handrails in place in all showers and baths.
	Optimise lighting (especially night-time bathroom lighting).
Other areas	• Remove trip and slip hazards (e.g. no cords draped across the floor).
	• Remove or minimise clutter (e.g. enough room to move around the outside of a dining table).
	Remove throw rugs and occasional tables in walk areas.
	Clean up spills immediately, regardless of how small the spill is.

Area of house	Action and advice
	Clean floors outside of peak times. If not practical, introduce a system so that people do not walk on surfaces until they are dry.
Steps/stairs	 Handrails are in place on all steps and staircases. Maximise the contrast between steps if any resident is visually impaired.

b. Personal

Guidance	Action and advice
Encourage residents to	• Wear firm fitting footwear when walking (avoid sloppy slippers, avoid improperly sized footwear, avoid walking in socks).
If prescribed	 Glasses are worn correctly (don't walk when wearing reading glasses). Hearing aids are in place and working. Orthoses (e.g. braces, helmets, splints) are correctly applied and well maintained. Mobility aids are used correctly and are well maintained. Medication is taken as per treatment sheet.

c. Physical health

Guidance	Action and advice
All residents should be encouraged to keep active	 Strong bones, healthy eating (e.g. include dietary calcium, avoid sugary drinks), and engage in physical activity
Recommend adherence to Australian Physical Activity Guidelines (Dept of Health, 2019)	 Doing any physical activity is better than doing none. If the resident currently does no physical activity, encourage them to start by doing some, and gradually build up.
	 Be active on most, preferably all days, every week.
	 All residents should be encouraged to engage in incidental physical activity (e.g. park further away from shops/appointment; get off the bus one stop earlier) to reduce sedentary behaviour.

7. Procedure Following a Fall

Participant falls and has head trauma

- Ensure participant is safe, and place in the recovery position.
- Phone 000 for an ambulance.
- Notify team leader/service facilitator.
 - Team leader/service facilitator to notify NOK.
- Complete incident report.

Participant falls and does not have head trauma or visible injury

- Ensure participant is safe, and if required, place in the recovery position. If recovery position is not required, monitor for symptoms.
- Notify team leader/service facilitator.
 - Team leader/service facilitator to contact NOK for further instructions, i.e., phone an ambulance, monitor for symptoms.
- Complete incident report.

Participant falls and sustains other injury

- Ensure participant is safe and provide first aid as required.
- If serious injury (i.e., suspected broken bone), phone 000 for an ambulance.
- Notify team leader/service facilitator.
 - Team leader/service facilitator to notify NOK.
- Complete incident report.

8. Other relevant District 360 policies

Staff, especially managers and supervisors, are encouraged to read this policy in conjunction with other relevant District 360 Supports policies.

Relevant legislation.

- The National Disability Insurance Scheme Act 2013 (NDIS Act)
- NDIS Practice Standards
- WA Disability Services Act 1993
- VIC Disability Amendment Act 2017
- <u>https://providers.dffh.vic.gov.au/sites/default/files/2023-05/practice-advice_falls-</u> <u>minimisation.docx</u>

9. More information

If you have a query about this policy or need more information, please contact the management team at <u>info@district360.com.au</u>

10. Review details

Approval Authority	Tanya Johnston
Responsible Officer	Coco Johnston
Approval Date	05 January 2023
Last updated Date	31 July 2024
Next Review Date*	31 July 2025
Last amended	

* Unless otherwise indicated, this procedure will still apply beyond the review date.

Printed versions of this document are not controlled. Please refer to the D360 Policy Library for the latest version

11. Employee Agreement

Upon appointment, all Employees must sign the attached Confidentiality Statement. Breaches to the Privacy and Confidentiality Policy will be treated seriously and will result in disciplinary action or dismissal.

I have read and fully understand my responsibilities in relation to District 360 Privacy and Confidentiality Policy and understand that this policy should be read in conjunction with my Position Description and reference documentation and legislation, and as such agree to abide by its contents.

Employee Name	Position
Signature	Date
Oignature	Date
Witness Name	Position