

Aim

1. To reduce all falls by 20% by Sept 2015.
2. To reduce moderate to severe harm from falls by 20% by Sept 2015

Why is this important to service users and carers?

Falls represent an unnecessary extra harm to service users.

Our service users are often elderly with variable physical health, so falls present an especially heightened risk .

Driver diagram

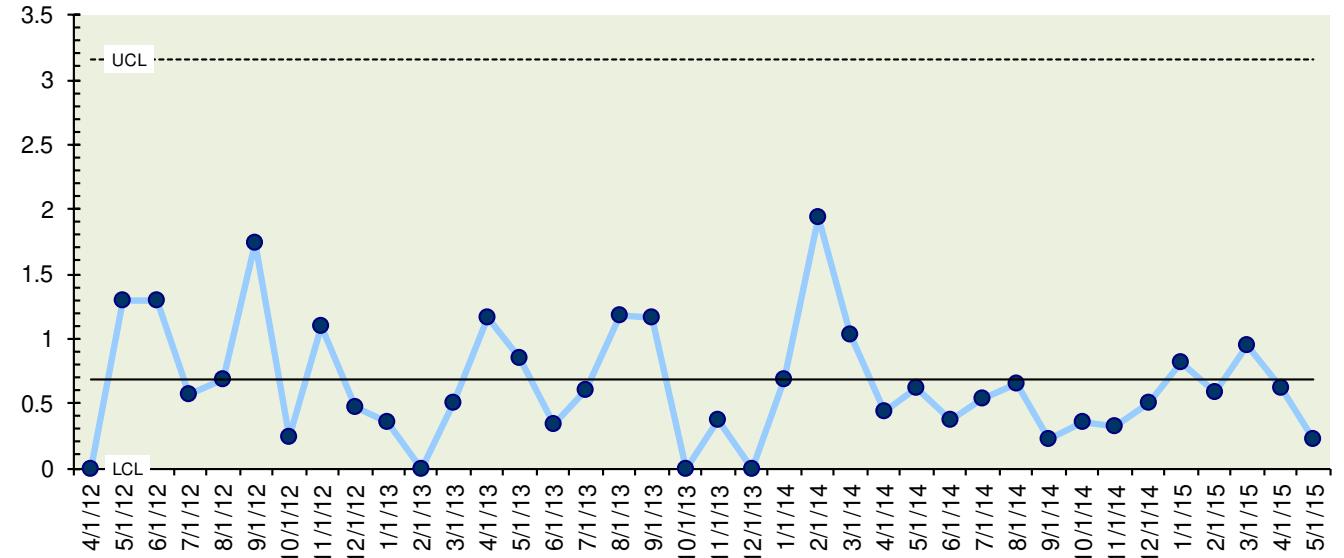
Aim	Primary Drivers	Secondary Drivers	
<p>Reduce falls by 20% by June 2015.</p> <p>Reduce falls resulting in moderate to severe harm by 20% by June 2015</p>	Staffing	Staffing per shift; Skills mix on the ward; The use of 1:1s	
	Ward systems and activities	Review daily activities; Therapy / expert intervention	
	Education & training	Communicate risk and raise awareness at forums, staff meetings	Increase awareness of falls risks and prevention among service users and their families
		Transfers and manual handling	MFA
	Physical environment	Furniture ; Toilets; Rails/handles; Lighting; Doors; Corridors; Bedroom	Clothing that fits inc. appropriate footwear
		Access to outside space	Response times to falls
Identifying risk factors and acting on them	Physical health needs e.g. hydration and continence	Using MFA reliably	
	Individualised care planning and adapting interventions	Review medication	
Using data	Reviewing trends and learn from incidents	Communicate risks	
		Identify risk takers	
	Reporting incidents and linking reporting systems, Rio coding		

Tests of Change

- Identifying those at risk of falling
- Falls risk re-assessment
- Environmental interventions
- Customised interventions for patients

Data

Falls per 100 bed days - Columbia ward - C Chart



Falls per 100 bed days - Leadenhall ward - C Chart

