

# Call, Don't Fall



## Guidelines for Using Signs to Communicate Falls Risk

### What are signs to communicate falls risk?

- One type of communication strategy; not an intervention
- A method of identifying patients/residents who are at risk for falls to staff and family/visitors
- A visual cue to remind the patient/resident that they are at risk of falling
- The use of signs does not replace standard communication strategies

### Who should use them?

- Two visual tools have been approved for use at the Huron Perth Healthcare Alliance
  - A sign reminding staff that a patient/resident is at risk for falls which is attached to their walker/mobility chair
  - A sign to remind the patient/resident that they are at risk of falling and should call for assistance

**Visual identifiers don't have to be used by all units/programs.** If a unit/program feels that their patient/resident population and/or staff would benefit from using one of all of the approved signs as part of their falls prevention strategy, they can choose to do so.

### Requirements for Use:

- Signs should be placed in appropriate areas which limit their visibility by non-essential people ie inside patient/resident rooms vs in the hallway
- Patient identifiers cannot be placed on signs
- Informed verbal consent is required from the patient/resident or substitute decision maker (SDM)
- Informed verbal consent needs to be obtained and documented on the health record. Include the following information:
  - Where the sign will be placed
  - That the reason for posting a sign was explained
  - Whether or not the patient/resident or SDM agreed
- If a patient/resident declines to have a sign posted, document that this strategy was offered to the patient/resident or SDM

### Guidelines/Reminders:

- All patients/residents, family and visitors should be educated in recognizing and understanding the purpose of the identifiers and be aware of how to obtain help from staff
- All members of the interdisciplinary team need to receive education about the use of visual identifiers and follow a consistent process for use
- If a patient/resident is transferred to a different bed/room, staff need to remember to move the sign
- Change the sign with change in falls risk as appropriate
- All patients/residents admitted from other health care facilities must be assessed for falls risk on admission. Consent is required to utilize any visual identifiers at our organization – staff can't continue to utilize those from other facilities (armbands, chart stickers etc)