

# CAROLINA FAMILY HEALTH CENTERS, INC.

## PROCEDURE

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**TITLE:** RM-204P Fall Prevention and Evaluation

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**EFFECTIVE DATE:** May 12, 2025

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**SECTION:** Risk Management

**REFERENCE POLICY:** N/A

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**RESPONSIBLE CHIEF OF STAFF:** Chief Compliance Officer

**RESPONSIBLE COMMITTEE:** Central Compliance

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**REVIEWED:**

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### I. PURPOSE

The purpose of this procedure is to outline the current practices in place at Carolina Family Health Centers, Inc. (CFHC, Inc.) to reduce the risk of falls, support fall prevention efforts, and provide guidance for appropriate response and documentation when a fall occurs.

### II. PROCEDURE

CFHC, Inc. takes proactive steps to prevent patient falls through the following:

#### A. Environmental and Staff Practices

- All CFHC, Inc. locations are handicap accessible.
- Hallways and walkways are kept clear of obstacles.
- Staff adhere to the dress code policy to avoid footwear that could promote tripping or falls. Refer to *HR-203 Dress Code*.
- CFHC, Inc. provides wheelchairs in each medical facility for patients with mobility issues to use when the patient is seen within the clinics, if they do not already have assistive devices.
- Patients are escorted to the clinical areas by staff to ensure patient unsteadiness is monitored. Staff should walk behind or aside of the patient.
- Handicap accessible exam tables that lower to a height of 17-19 inches to facilitate transfers, and wheelchair accessible scales are available.
- Handrails are available in all bathrooms.

#### B. Identifying High-Risk Patients

- Patients are screened at the age of 65 for fall risk per national standards. A Health Maintenance topic alert automatically populates a fall risk alert in the patient's chart, reminding staff of the need to screen the patient and code appropriately.
- Patients with a history of falls (internal or external to CFHC, Inc.) or at risk for falls based on the screening will have their charts flagged.

#### C. Considerations for High-Risk Patients

- Patients who are at risk of falling are not left unattended or on an elevated exam table.

- Patients who require assistance during transfers should be taken to the room where the electric exam table is available.
- Patients with mobility issues are provided a hat for collecting urine samples and not a specimen container.
- Staff monitor patients' mobility and take extra time to allow the patient to maneuver safely. This includes bringing the high-risk patient to the clinical area alone, without other patients.

When a fall occurs within any CFHC, Inc. facility, the safety and well-being of the patient or staff member is the immediate priority. Staff should remain calm and respond promptly to assess the situation and ensure the person is safe and stable.

If possible, a provider assessment is required before the patient leaves the facility. This evaluation includes:

1. Determining the nature and extent of the fall;
2. Assessing any injuries sustained;
3. Contributing factors such as the patient's footwear, existing mobility issues, trip hazards, or environmental conditions;
4. Reviewing fall history; and
5. Inquiring as to the patient's perception of why the fall occurred.

All fall events must be documented in accordance with *RM-101.01 Incident Reporting*. The staff member reporting the incident must provide answers to the above items (#1-5) and include a photograph of the area where the fall occurred. The photo should be taken by the reporting staff member and/or supervisor. The provider's assessment is attached to the incident. An incident report must be completed for any fall, whether it involves a patient or an employee