A review by the clinical team after a consumer fall will promote improvement to care, team learning, and highlight issues that may be a risk for other consumers.

Use this process for investigation and review of:
- SAC 1 and 2 and some SAC 3 fall incidents
- Frequent faller (2 or more falls by the same consumer during this admission)

Refer Post Fall Management Protocol
Take immediate action to address safety. Notify family and arrange medical review as required.

Senior Staff member
- reviews incident report
- investigates outcome of incident
- assign Safety Assessment Code (SAC)
If a team review is required:
- decides membership of review team (refer to Section A)
- arranges meeting

Review team considers
- current incident report
- previous incident report(s) for that patient
- current fall and fall injury risk assessment, and re-assessment post fall
- current care plan

Review team
- discusses key contributing factors in this fall incident (refer to Section B)
Then;
- formulates agreed recommendations and actions to improve safety and reduce risk
- Discusses changes to care plan with consumer and family
- update risk flagging system (if in use)
- ensures that changes are made to care plan, and actions documented and included in handover

Senior staff member
- Informs all relevant staff about outcomes of investigation and recommendations to be implemented
- completes the management component of incident report, and post fall team review summary in SLS
- communicates relevant recommendations to senior staff and Patient Safety/Risk Managers
- communicates the recommendations outside the responsibility of the team through the appropriate channels including Clinical Governance Committee
- ensures agreed changes are implemented

REPORT TYPES
- Incident reporting completed (refer SLS Topic Guide - Reporting a patient fall)
- Notify appropriate line Managers
- If required
  - Public liability form/s completed by appropriate area/senior manager.
  - Notify appropriate person and SA Health Insurance Services

SECTION A.
- Review team to include (where possible)
  - Nursing, Medical, Pharmacy, Allied Health, Fall prevention committee member and any other relevant staff

SECTION B.
- Key questions for discussion at Team Review
  - Note – Refer to recommended actions on the risk assessment form
  - What were possible contributing factors to this incident?
  - I. Patient factors, such as:
    - Poor balance, muscle weakness or mobility deficit
    - Incontinence/ toileting
    - Cognitive impairment or other condition affecting behaviour
    - Medication – type(s), poly pharmacy, recent changes
    - Malnutrition, dehydration, anaemia
    - Sepsis, UTI, other acute illness
    - Sensory impairment
  - II. Environmental Factors such as:
    - Hazard in immediate environment
    - Equipment- aids, devices in use
    - Clothing/footwear
  - III. Clinical Practice such as:
    - communication error - staff and/or patient
    - Other

- What were possible contributing factors to the injury sustained?
  - Factors in the immediate environment / area (eg sharp edges)
  - Patient Factors: individuals’ fragility (bone, skin, soft tissue etc)
  - Nature of injury: Head injury; fracture; skin tear
- Any other possible contributing factors?
A post fall team review forms part of the Incident review and analysis phase of the patient incident.

As such, any documents developed:

> are to be used for quality improvement purposes
> are to be uploaded into the managers section of the SLS incident
> are not to be released publicly
> do not form part of the medical record

The recommendations arising from the post fall team review can be used to:

> inform changes to the consumer's care plan, which are documented in the medical record
> support shared team learning and quality improvement
> inform consideration of area or service-wide practice changes

Reference: Health Care Act 2008 (SA) Part 7 and 8 s72(1)(b)