

The Three C's ***"CHECK, CALL, CARE"***

1. Immediately go to the resident, stay with the resident.
2. If you are not a nurse, call for a nurse.
3. Encourage the resident not to move. Ask, "Are you OK?"
4. Ask them, "What were you doing just before you fell?" and/or "What were you trying to do just before you fell?"
5. Begin asking answers to the "10 Questions."
6. Stay for the fall huddle, assist in getting a fall huddle started, utilize a diverse team.



Developed by Mountain-Pacific Quality Health, the Medicare Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for Montana, Wyoming, Alaska, Hawaii and the U.S. Pacific Territories of Guam and American Samoa and the Commonwealth of the Northern Mariana Islands, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. Contents presented do not necessarily reflect CMS policy. 11SOW-MPQHF-MT-C2-17-61

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10 Falls Questions

1. Ask the resident, "Are you OK?"
2. Ask the resident, "What were you trying to do?"
3. Ask the resident or determine, "What was different this time?"
4. What is the position of the resident?
 - Did they fall near a bed, toilet or chair? How far away?
 - Are they on their back, front, left side or right side?
 - What is the position of their arms and legs?
5. What was the surrounding area like? • Was it noisy, busy or cluttered? • If the resident fell in the bathroom, what were the contents of the toilet? • Was there poor lighting? What was the resident's visibility? • What was the position of the furniture and equipment such as canes, walkers and wheelchairs? • Was the bed height correct?
6. What was the floor like? • Was the floor wet? Was there urine on the floor? Was the floor uneven? Was the floor shiny? • Was there carpet, tile or linoleum?
7. What was the resident's apparel? • Was the resident wearing shoes, socks (non-skid?), slippers or bare feet?
 - Was the resident wearing poorly fitting clothes?
8. Was the resident using an assistive device? Specify whether it was a walker, cane, wheelchair, merry walker or other.
9. Was the resident wearing glasses and/or hearing aids?
10. Who was in the area when the resident fell?

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