



ALL patients are at risk to fall.

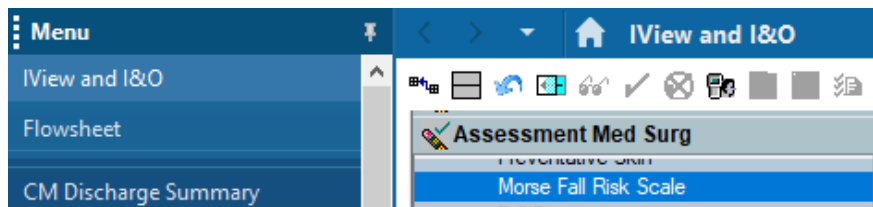
We need to identify those at high risk

Fall prevention starts with a fall assessment



Cerner documentation is completed in **IView and I&O**

Morse Fall Scale



Complete the risk & Active interventions

Morse Fall Risk Scale	
Assess fall risk	Yes
History of falling (Immediate)	Yes
Secondary diagnosis	No
Ambulatory aid	None/bedre...
IV/heparin lock	Yes
Gait/transferring	Weak
Mental Status	Oriented to ...
Morse Fall Risk Score	55
Morse Fall Risk Level	High Risk
Active fall prevention interventions	☐ Assistive devices ☐ Bed/chair alarm ☐ Floor Mat ☒ Diversion techniques ☐ Gait Belt ☐ Low bed ☒ Med review/timing optimize ☐ Physical PSA ☒ Slow position changes ☒ Supervised/ assisted amb ☒ Supervised toileting ☐ Virtual PSA ☐ Visual aids accessible ☐ Other additional interv

Fall assessments are completed on Every patient

On Admission
Every Shift
Transfer between units
Change in caregivers
Change in patient condition
Immediately after a fall

****Sarasota Doctors Hospital** is piloting an initiative to ensure all patients are assessed and documented within 4 hours of assuming care.

Document Education including the Learning Assessment

Education	
Learning Assessment	
Admission	
ADL/Safety	
Restraint Education	
Blood Products	
Central Line	
Delirium Bundle	
Equipment	
Falls, Ed	
Isolation	
Medications	
NICU	
Nutrition Ed	
Pain	
Pediatric	

Learning Assessment	
Education Time	min 10
Education Provided By	Unit RN
Person Being Taught	Patient, Fam...
Facilitators	
Barriers	
Teaching Method	Demonstrati...
Language Materials Pro...	
Falls, Ed	☒
Falls Education	Activity Rest...
Falls Education Underst...	Needs Revie...
Fall Prevention Patient ...	Needs Revie...
Fall Prevention Video	
Patient Safety Contract	
Patient Observer Camer...	

Fall Assessments (clickable):

[Morse Fall Risk](#)

[Wilson Sims Fall Risk](#)

[CHAMPS](#)

[Newborns](#)