

TRUST WIDE/DIVISIONAL DOCUMENT

<b>Delete as appropriate</b>	Policy
<b>DOCUMENT TITLE:</b>	<b>Slips, Trips And Falls Prevention Policy</b>
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<b>LEAD EXECUTIVE DIRECTOR DGM</b>	Associate Director of Quality and Safety
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<b>TARGET AUDIENCE:</b>	All Trust Personnel
<b>DOCUMENT PURPOSE:</b>	To define and describe the Trust's commitment to the prevention and management of risks associated with slips, trips and falls.

<b>To be read in conjunction with (identify which internal documents)</b>	ELHT CO52V5 Health and Safety Policy Slips, Trips and Falls Guidance available on OLI
<b>SUPPORTING REFERENCES</b>	Workplace (Health, Safety & Welfare) Regulations 1992 HSE L24 Preventing Slips And Trips At Work HSE INDG 225 Slips And Trips In The Health Services, HSE HSIS 2 Falls from windows and balconies in health & social care, HSE HSIS 5 National Institute of Clinical Excellence (NICE) (2013) Clinical practice guideline for the assessment and prevention of falls in older people National Institute of Clinical Excellence (NICE) (2004) Falls: The assessment and prevention of falls in older people - Quick reference guide

<b>CONSULTATION</b>		
	<b>Committee/Group</b>	<b>Date</b>
<b>Consultation</b>	Falls Prevention Group Health and Safety Committee	
<b>Approval Committee</b>	Patient Safety and Risk Assurance Committee	
<b>Ratification date at Policy Council:</b>	June 2017	
<b>NEXT REVIEW DATE:</b>	June 2020	
<b>AMENDMENTS:</b>	New Front Sheet Addition of Falls Link Staff duties	

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## 1 INTRODUCTION

The document describes the Trust's management arrangements for the prevention of slip, trip, and fall accidents which may adversely affect patients, staff, contractors and visitors.

Incident investigations and research undertaken by the Health and Safety Executive have identified the following main causes of slip and trip accidents.

- a. Slippery and wet surfaces – caused by water and other fluids.
- b. Slippery surfaces caused by dry or dusty floor contamination, such as plastic, lint, or talcum powder.
- c. Obstructions, both temporary and permanent.
- d. Uneven surfaces and changes in levels, such as unmarked ramps.
- e. Other causes include, poor lighting and glare, use of improper cleaning regimes, unsuitable foot wear and human factors such as running and carrying cumbersome objects.

In addition to the above many patients will be at greater risk due to their age, medical conditions, disability and unfamiliar environment.

## 2 BACKGROUND

Slip and trip accidents are attributed comic or cartoon character images and may not have previously been taken seriously. In reality slip and trip accidents are responsible for many serious injuries including deaths, particularly in older people. Simple injuries such as fractures in older people often lead to complications such as thromboses and embolisms, which may be fatal. One health professional was the victim of two slips at work and as a result had many operations before having her leg amputated to prevent further deterioration.

## 3 POLICY STATEMENT

- 3.1 East Lancashire Hospitals NHS Trust recognises that slip, trip and fall accidents are a very significant cause of harm to patients, staff and visitors. The Trust is committed to the reduction of these accidents and this will be achieved by ensuring that the following are features of the Trust's health and safety management arrangements.

- a. Safe design, specification and maintenance of all the Trusts internal and external surfaces.
- b. Use of risk assessments/risk based inspections to identify significant environmental risks and unsafe practices.
- c. Identification of patients who may be more likely to slip or fall and subsequent use of measures to minimise the likelihood of harm.
- d. Actively monitoring the effectiveness of risk controls.
- e. Investigation of and learning from incidents.

## 4 ROLES AND RESPONSIBILITIES

### 4.1 Chief Executive

The Chief Executive of the Trust is responsible for the effective identification and control of all risks including slips and trips. However, the Chief Executive delegates the authority for the development and action of the policy to the Medical Director.

#### **4.2 Medical Director**

The Medical Director has the delegated responsibility from the Chief Executive to identify and develop the following elements.

- a. Policy development – including consultation with staff and stakeholders
- b. Providing Health and Safety Risk Assessment and Audit Tools
- c. Providing an assurance of compliance with the Policy to the Chief Executive and Trust Board through review of the policy.
- d. Ensuring that staff are competent to carry out their responsibilities under this policy in partnership with the Director of Human Resources by identifying and providing training in the prevention of slips, trips and falls. Ensure resources are prioritised based upon risk assessment to implement this policy

In addition the Medical Director will ensure the provision of suitable and sufficient competent health and safety advice to all parts of the Trust on the requirements of the policy and assist in providing statistical data to the Trust Board via the Quality and Safety Committee on the effectiveness of the policy. The Medical Director has delegated the day to day development and implementation of this policy to the Associate Director of Patient Safety and Governance. Awareness about preventing and reducing the number of accidents and harm caused by slips, trips and falls will be coordinated by the Falls Prevention Group.

#### **4.3 Director of Estates and Facilities**

The Director of Estates and Facilities is responsible for ensuring that all premises owned or leased by the Trust are as safe as is reasonably practicable and do not present a slips, trips and falls hazards to patient, staff, contractors and visitors using the Trust.

#### **4.4 Corporate Directors / Divisional Management Teams**

Will ensure the successful delivery of this policy within their area of responsibility and put management arrangements in place to achieve the following:

- a. Support the aims and objectives of the Slip and Trip Prevention Policy.
- b. To ensure that each Directorate is aware of this policy and has a plan to ensure compliance.
- c. Use the slip, trip and fall assessments detailed in the associated procedures to identify and reduce occurrences
- d. To investigate and report all slip, trip and fall accidents in accordance with Trust reporting policy.

#### **4.5 Heads of Service/Service Managers/Matrons**

Heads of Service/Service Manager or equivalent will ensure that the following occur within their areas of responsibility:-

- a. Suitable and sufficient proactive risk assessments are undertaken and reviewed for the risks of slips and trips in their area of responsibility, (including falls from heights if working from height activities take place).
- b. Each Head of Service/Service Manager or equivalent will coordinate the delivery of the risk assessments and ensure that it includes necessary control measures to eliminate or minimise the risks of slips, trips and falls in that area..

Reduce risks so far as is reasonably practicable using the control measures identified in the appendices and slips and trips sections below.

- c. Significant risks that cannot be eliminated or reduced immediately should be progressed through the risk management process.
- d. Receive information from the review all eIR1 forms and ensure that they are reviewed and that immediate actions are identified and implemented to prevent recurrence.
- e. Ensure that any damage to the fabric of the building which poses a slip, trip or fall hazard is reported immediately to the Estates department/identified PFI partner for action.
- f. Investigate slip, trip and fall incidents to identify the underlying causes and learn lessons, in accordance with the Trust's Incident and Reporting Procedure / Serious Untoward Incident Procedure.
- g. Have systems in place to identify and report RIDDOR reportable incidents to the Governance Unit for reporting to The Health and Safety Executive.

#### **4.6 Ward Managers, Departmental Supervisors and Similar Managers**

To undertake the following responsibilities:

- a. Carry out suitable and sufficient risk assessments of slip and trip hazards within their areas seeking the assistance of the Trust's Specialist Advisors if necessary.
- b. Ensure that any damage to the fabric of the building which poses a slip, trip or fall hazard is reported immediately to the Estates department/identified PFI partner for action.
- c. Ensure all slip, trip and fall incidents are reported in accordance with Trust policy.
- d. Investigate slip, trip and fall incidents to identify the underlying causes and learn lessons, in accordance with the Trust's Incident and Reporting Procedure / Serious Untoward Incident Procedure.
- e. Where employees work in premises that are not owned by the Trust the manager of those employees must liaise with the landlord of the premises to ensure that similar standards are maintained in accordance with this policy.
- f. Nominate a falls prevention link nurse and ensure attendance at falls prevention meetings in accordance with terms of reference.

#### **4.7 Falls Lead**

To undertake the following responsibilities:

- a. To develop falls prevention strategies within the Trust
- b. To provide such training as is necessary to enable staff to prevent and manage falls within their scope of practice
- c. To provide specialist advice and information in the prevention and management of slips, trips and falls within the Trust.
- d. To co-ordinate meetings of falls prevention link nurses and facilitate speakers and events to aid the prevention and management of slips, trips and falls.

#### **4.8 Community Falls Lead**

To undertake the following responsibilities:

- a. To carry out those duties in 4.4 within the community setting
- b. To develop partnerships in the wider community to promote the prevention and management of slips, trips and falls
- c. To provide STEADY ON!™ training to partners and community members

#### **4.9 Fall Link Staff**

To undertake the following responsibilities

- a. Be the specialist resource for colleagues in relation to falls.
- b. To increase falls' education and training in their area of responsibility.
- c. To support staff in the drive towards making significant improvements in inpatient care and falls prevention and management.
- d. To fully maintain the content of the falls link file with relevant evidence and work produced to support the link role including monthly audits on falls policy compliance and action plans to reflect required improvements and their achievement.
- e. To cascade relevant information provided at the Falls Prevention Link meetings through their area of responsibility and to provide evidence of staff understanding.
- f. To identify gaps in staff education and training and provide feedback to the Ward or Department Manager and the Acute Falls Prevention Lead as necessary.
- g. To attend bi-monthly Falls Prevention Link meetings or to ensure a representative can attend in their absence.

#### **4.10 All Staff**

All staff regardless of grade and occupation have a duty to adhere to this Policy and work safely at all times. In particular all staff will:

- a. Behave in a safe and responsible manner; reduce the risks of slips, trips and falls.
- b. All staff must immediately inform line managers of any situation that is considered to be a significant risk and promptly report all health and safety Incidents via the Trust's Incident Reporting System.

- c. Ensure that tripping hazards are not created – for example, locating wires and cables safely, not blocking designated walkways.
- d. Ensure that slipping hazards are not created – for example cleaning spillages of liquids and powder promptly and reporting leaks.
- e. Ensure that falls hazards are not created – for example by standing on chairs rather than steps or other appropriate equipment.

#### **4.11 Falls Prevention Group**

The Falls Prevention Group will provide such instruction, information and training as is necessary to enable all staff to reduce slips, trips and falls throughout the Trust area.

In particular the group will:

- a. Establish risk assessment procedures.
- b. Establish procedures for falls screening and care plans
- c. Provide advice on the prevention of slips, trips and falls.
- d. Encourage and administer the work of the falls link nurses.

#### **5.0 TRAINING**

Slips, Trips and Fall Management training will be provided within the core mandatory training syllabus.

#### **6.0 MONITORING**

The Trust Health and Safety Committee will have responsibility for monitoring the effectiveness of this policy and for receiving assurances in relation to slips, trips and falls, including falls from height.

The H&S Committee will submit reports to the Patient Safety and Risk Assurance Committee through its minutes and such specific reports as may be required.

The Falls Prevention Group will undertake an annual audit into the effectiveness of the policy in relation to patient falls.

The Health & Safety Team will undertake an annual audit into the effectiveness of the policy in relation to staff falls.

Both audits will be submitted to the Health and Safety Committee at the June meeting.

#### **7.0 FURTHER GUIDANCE AND DOCUMENTATION**

Further guidance and access to the required documentation is on the trust intranet in the Falls Prevention Section which can be accessed by following the link to Clinical information on the home page

Or click the link below

[Slips Trips and falls guidance](#)