## <u>STRATIFY – Falls Risk Assessment</u> Tool

## How likely is the patient to fall?

Use this assessment tool for:

All patients over 65 or those with a condition that may predispose them to falls

Reassess after any fall or change in condition

Score 0 / 1 – reassess if condition changes or patient falls Score 2+ - implement **falls care plan**. Access **falls pathway** 



Adapted from Good Hope Hospital

STRATIFY document

Affix patient ID label

	Date
<ul> <li>Did the patient present to the hospital with a fall or have they fallen on the ward since admission? (Yes = 1, No = 0)</li> </ul>	
Do you think the patient is:-	
2. Agitated / confused (Yes = 1, No = 0)	
3.Visually impaired to the extent that everyday function is impaired?  (Yes = 1, No = 0)	
4. In need of especially frequent toileting? (Yes = 1, No = 0)	
5. Needs physical assistance with transfers & / or mobility?  (Yes = 1, No = 0)	
TOTAL SCORE	
To be completed & signed by registered nurse	

Patient to be assessed on admission

## Re-assess overleaf:

- Weekly
- After a fall
- •If a change in the patient's condition alters the likelihood of them falling