

Falls Risk Checklist

This sample checklist can help determine whether your facility's falls risk assessment tool screens for certain risk factors associated with greater risk of falls and falls with injury. As your falls team or staff reviews your facility's falls risk assessment tool, evaluate and check "Yes" or "No" for each falls risk variable.

Facility name: _____	Date: _____
Name of risk assessment tool: _____	
This tool is:	<input type="checkbox"/> An evidence-based falls risk assessment tool, unaltered <input type="checkbox"/> An evidence-based falls risk assessment tool, customized to our facility <input type="checkbox"/> A facility-developed falls risk assessment tool
The falls risk assessment tool is:	<input type="checkbox"/> Used facility-wide <input type="checkbox"/> Unit-based (specify unit type): _____

Section A—Six Significant Falls Risk Variables

Risk assessment tools with high sensitivity and specificity assess six risk factors. For any risk factor that is answered "No," consider adding it to your falls risk assessment tool.

Does your risk assessment tool screen for:

Gait instability?	Yes	No
Lower extremity weakness?	Yes	No
Altered mental status?	Yes	No
Urinary incontinence/frequency?	Yes	No
History of falls?	Yes	No
High-risk medications associated with falls (e.g., sedatives and hypnotics, antidepressants, benzodiazepines, cardiac drugs [e.g., diuretics, antihypertensives, antiarrhythmics], analgesic drugs [opioid and nonopioid]) and use of four or more medications, regardless of drug class?	Yes	No

Section B—Injury Risk Assessment

Injury risk can be identified through application of the ABCS algorithm, representing risk factors associated with high risk of injury. Combined screening for falls risk and injury risk can identify patients at highest risk of falls with serious injury. For any injury risk factor that is answered "No," consider adding it to your risk assessment process.

Does your risk assessment process screen for:

Age \geq 85?	Yes	No
Bones (e.g., osteoporosis, history of previous fracture, bone metastases, prolonged steroid use)?	Yes	No
Coagulation (e.g., bleeding disorders, anticoagulation)?	Yes	No
Surgery (i.e., postsurgical patients, especially those who had recent limb amputation or major abdominal or thoracic surgery)?	Yes	No

For more information, visit <http://www.patientsafetyauthority.org>.

This checklist accompanies

Feil M, Gardner LA. Falls risk assessment: a foundational element of falls prevention programs.

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[http://patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2012/Sep;9\(3\)/Pages/home.aspx](http://patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2012/Sep;9(3)/Pages/home.aspx).

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