



Post Fall Head Injury Support for Care Providers (Version 1)

The frail population that reside within care homes are three times more likely to experience a fall than people living in the community. Each year around one third of people aged over 65 experience one or more falls, rising to 50% in those over 80 years of age.

Head injuries are often sustained following a fall, whether evident or not. The severity of injury varies with differing treatment pathways depending on the seriousness of the harm caused and the wishes of the patient. The importance of making the right decision for the patient is vital to ensure those that need it have the treatment they require and those who would not benefit have their choices and best interests recognised.

The National Institute for Health and Care Excellence (NICE) guidelines are focused on the consideration of performing a computed tomography (CT) scan on a person's head following a fall to identify intracranial events so that early neurosurgical intervention can take place. High numbers of CT scans are performed in the emergency department (ED) on older adults who have fallen, and, for our frailer population, neurosurgical intervention may not be appropriate. Automatic conveyance of these patients to an ED without regard for their wishes and a holistic approach can be detrimental by worsening delirium and causing deconditioning and distress. It also adds unnecessary workload and pressure to the ambulance service and the wider NHS system.

If someone has sustained a head injury apply the *Post Fall Decision Support Tool for Head Injury*. This tool aims to provide support when establishing what is best for your service user.

Useful Guidance

South Western Ambulance Service NHS Foundation Trust (SWASFT) Post Falls Guidance
<https://www.swast.nhs.uk/falls>

Providing proactive care for people living in care homes – Enhanced health in care homes framework

<https://www.england.nhs.uk/long-read/providing-proactive-care-for-people-living-in-care-homes-enhanced-health-in-care-homes-framework/>

Falls in older people: assessing risk and prevention

<https://www.nice.org.uk/guidance/cg161/chapter/1-Recommendations#preventing-falls-in-older-people-during-a-hospital-stay-2>

Get Up & Go – Falls risks and what to do after a fall

https://www.csp.org.uk/system/files/get_up_and_go_0.pdf

National Institute for Health and Care Excellence – Tools and resources

<https://www.nice.org.uk/guidance/cg161/resources>

NHS Institute for Innovation and Improvement – SBAR Training Guides

[https://healthinnovationwessex.org.uk/img/projects/sbar-communication-tool%20\(NHSI%20-%20ACT\)-1543920817.pdf](https://healthinnovationwessex.org.uk/img/projects/sbar-communication-tool%20(NHSI%20-%20ACT)-1543920817.pdf)

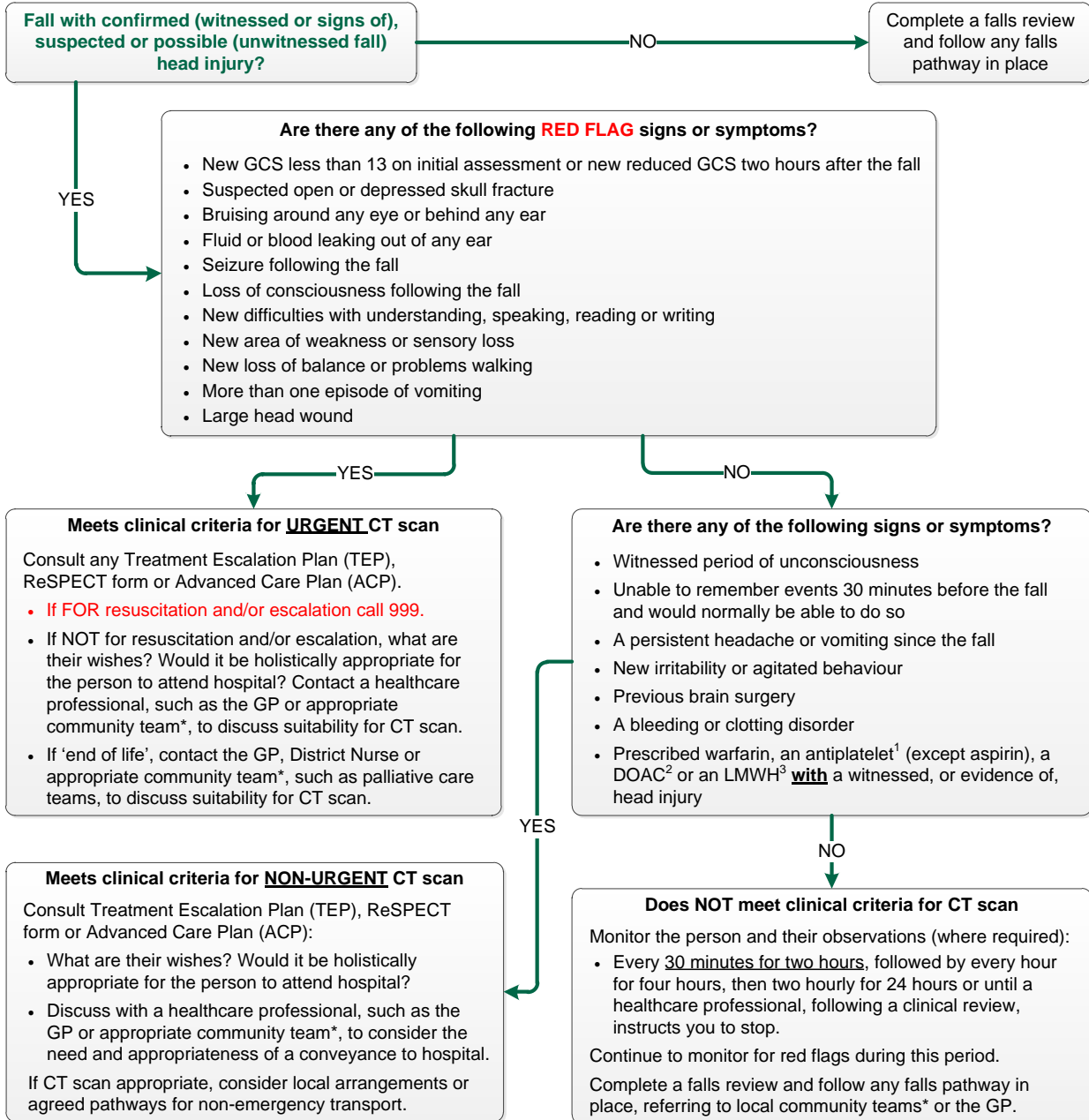
React To – Training resources designed for care home staff and healthcare providers

<https://reactto.co.uk/>





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If the persons condition changes at any stage, REASSESS

<p>*If you are unsure of who the relevant contactable community team or healthcare professional is, please contact your manager, the local authority or other relevant association to establish who the point of contact would be, where in place.</p>	<p>1 Antiplatelets</p> <ul style="list-style-type: none"> Clopidogrel Ticagrelor Prasugrel Cilostazol Dipyridamole 	<p>2 Direct Oral Anticoagulants (DOAC)</p> <ul style="list-style-type: none"> Dabigatran Rivaroxaban Apixaban Edoxaban Betrixaban 	<p>3 Low Molecular Weight Heparin (LMWH)</p> <ul style="list-style-type: none"> Dalteparin sodium Enoxaparin sodium Tinzaparin sodium
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