



**COHESIVE HEALTHCARE MANAGEMENT & CONSULTING
MANGUM REGIONAL MEDICAL CENTER**

PEDIATRIC FALL INTERVENTIONS

Low Risk Standard (Score 7-11)

- Assess elimination needs, assist as needed
- Call light is within reach
- Educate patient/family on its functionality
- Environment clear of unused equipment, furniture in place, clear of hazards
- Orientation to room
- Bed in low position, brakes on Side rails X2 or 4 up, assess large gaps, such that a patient could get extremity or other body part entrapped
- Use additional safety precautions
- Use of non-skid footwear for ambulating patients
- Use of appropriate size clothing to prevent risk of tripping
- Assess for adequate lighting, leave nightlights on
- Patient and family education available to parents and patients
- Document fall prevention teaching and include in the plan of care

High Risk Standard (Score > 12)

- Evaluate medication administration times
- Remove all unused equipment out of room
- Protective barriers to close off spaces, gaps in the bed
- Keep door open at all times unless specified isolation precaution are in use
- Keep bed in the lowest position, unless patient is directly attended
- Educate Patient/Family regarding falls prevention
- Document in the nursing narrative teaching and plan of care
- Identify Patient with Fall Risk Bands on patient

All Pediatric Patients

- Identify Patient with Fall Risk Bands on patient
- Check patient minimum every hour
- Accompany patient with ambulation
- Move patient closer to nurses' station
- Assess need for 1:1 supervision