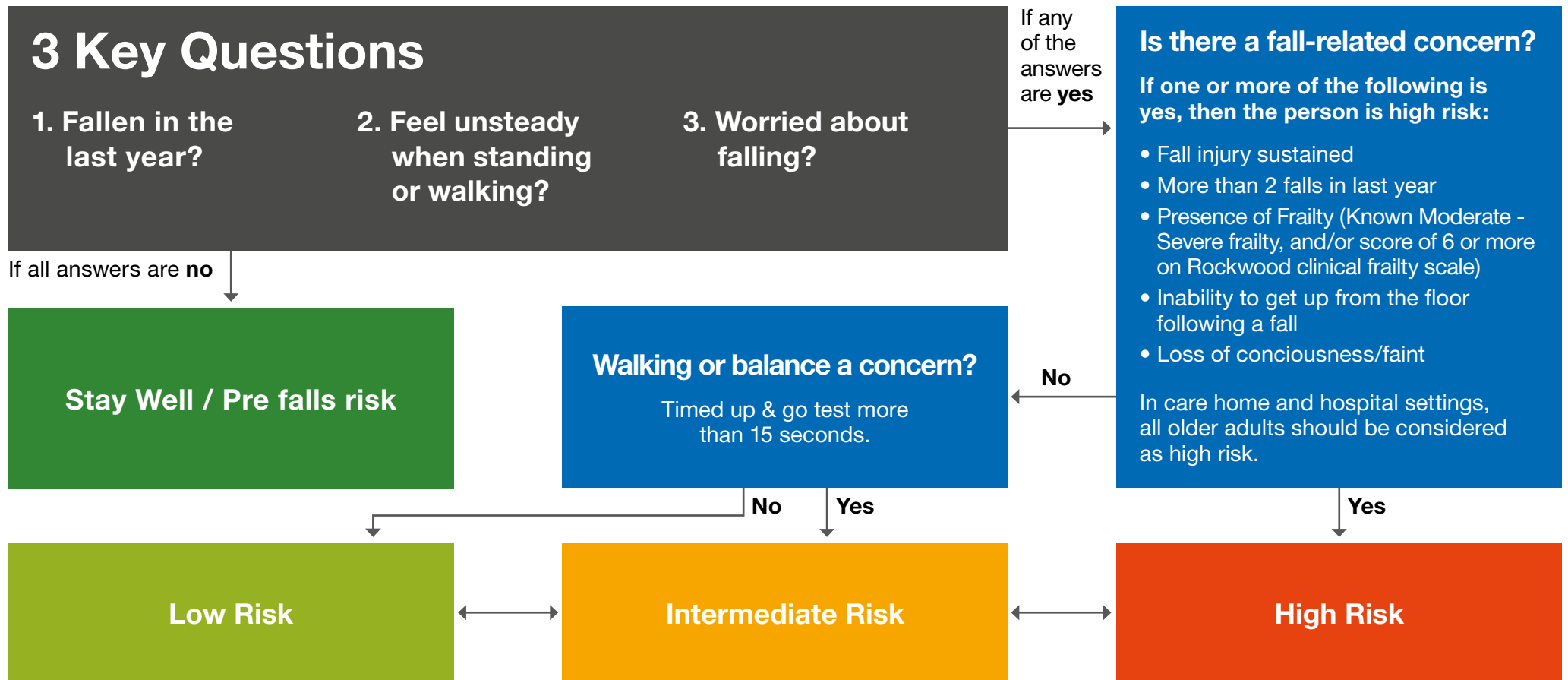


# Derby & Derbyshire 'Ask, Assess, Act'

## Falls Prevention approach in Community

Identifies Self | Opportunistic or Proactive Contact with an individual | Contact with an individual who has experienced a fall



ASK? ASSESS ASSESS ACT

<https://bit.ly/joinedupcarederbyshire-falls-prevention>



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### Stay Well Pre falls risk

People who have not fallen, but awareness and lifestyle changes could support risk reduction e.g.

- Increasing activity levels
- Increasing social connections
- Improving mental wellbeing
- Awareness of own individual risk

#### Impactful interventions

Focus on self care:

- Encourage people to be active every day to strengthen their major muscles.
- Connect individuals to community activities that improve health and well-being.
- The NHS Health Check, available every five years for those aged 40 to 74, helps find health risks and offers guidance and medical support.
- NHS Better Health offers online wellness advice.

### Ageing Well Low falls risk

People who have a fall related concern/risk present/voiced

#### Impactful interventions

Focus on Independence and Physical Activity:

- Encourage individuals to stay active and minimise sedentary time according to their preferences.
- Promote risk reduction by wearing proper footwear, having regular sight and hearing checks, reviewing medications, and adopting healthy lifestyle habits.
- Assistive Technology: Consider digital technologies, such as community alarms and telecare.

### Intermediate falls risk

People who have:-

- Had a single fall
- Presence of fall related concerns voiced/present
- Slower walking speed (more than 15s Timed Up & Go Test)
- Clinical Frailty score of 3 or above (mild frailty)

#### Impactful interventions

Focus on Addressing the First Fall to Prevent a Second:

- Prioritise muscle strength, balance, and flexibility exercises at least twice a week.
- Support access to structured exercise programs that include falls recovery education.
- Promote risk reduction by staying active, wearing proper footwear, having regular sight, and hearing checks, reviewing medications, assistive technology and adopting healthy lifestyle habits.

### High falls risk

People who have or are:-

- Recurrent falls in a year
- Care home resident
- Clinical frailty score above 6 or known mod-severe frailty
- Specific fall related concerns identified

#### Impactful interventions

Focus on a comprehensive falls or geriatric assessment to identify an individual's fall history and risk factors.

This will require multidisciplinary input and care coordination.

Develop a personalised care plan based on the individual's priorities.



### Linked resources

For linked resources on the four risk categories scan the QR or visit:  
<https://bit.ly/joinedupcarederbyshire-falls-prevention>



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