

# FALLS:

## *to admit or not to admit*

### Determine acuity

- > What level of observation or intervention is required?
- > Can these be managed outside of hospital e.g. at home or in a rehab unit?

### Is there reversibility?

- > If yes, determine acuity
- > If no, is there support that might lessen risk? How quickly is this required?

### Falls are often multifactorial

- > Look for and find as many as you can
- > Build a plan that looks at all of them
- > Which are acute / reversible?
- > Which need long term optimisation?

### What are the aims of admission?

- > Would you admit this person from community?
- > Community falls teams good at looking at wider environment and longer term risk.

