

Recognising and Responding to Falls in Care Home Residents

A practical workbook for using the Safe To Move Tool in Care Homes

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Introduction

This workbook is designed to support your understanding and use of the Safe To Move Tool. It includes practical scenarios, guidance, and exercises to help you recognise when and how to escalate care after a fall. You can use it alongside your training sessions or as a refresher tool in your daily practice.

Please note that if you recognise an immediate threat to life, please call 999. Do not delay. This guidance covers most situations care staff are likely to encounter when a person falls, but it cannot foresee every possible scenario. It must be used together with your own judgement, common sense, organisational policies and procedures with consideration to duty of care. If in doubt call for further assistance.

First Aid should be used where appropriate.

If you are not certain what to do, call 111 or 999 according to your own judgement

Here is a link to a short introduction video which you may like to watch before you begin, although it is not necessary: [Safe To Lift - How To Use - v0.4.mp4](#)

Aims and Objectives

Aim

To build confidence and competence in using the Safe To Move Tool after a resident has fallen.

Objectives

- Understand how to navigate and apply the tool in practice.
- Identify red flags and know when to escalate.
- Reflect on real-life fall scenarios.
- Improve team communication and care planning after a fall.

Use the link below to access the Safe to Move tool on your mobile, laptop, or tablet. When using a laptop or tablet, the card number will appear in the web address (URL) at the top of the screen, which confirms you've landed on the expected page.

<https://safetomove.app.humberandnorthyorkshire.org.uk>

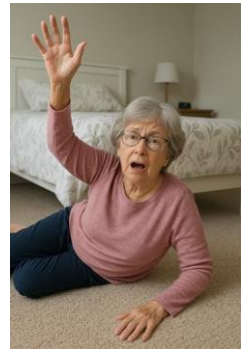
Practice Scenario 1

Mary, 85 years old

Situation: Mary has fallen in her room and is found lying on the carpet. The area around her is free of obstacles, and she is calling for help. The fall occurred from a standing height.

Observations:

- No bleeding or bruising, no signs of limb deformity, no pain or breathlessness
- She seems to be her usual self
- She does not know how she fell



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? [Yes the scenario states no obstacles](#) Card 2:

[Click Yes](#)

Is she alert? [She is calling for help therefore must be alert](#)

Card 3: [Click Yes](#)

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? [There are no signs of injury described](#) Card 4: [Click No](#)

[You can safely move Mary but continue for further checks](#)

Card 5: Continue

Triage for illness causing the fall

Are there signs of acute illness which could have caused the fall and require an urgent response? [There are no signs of acute illness because Mary is described as seeming to be her usual self. A collapse or faint is unlikely because she is calling for help and immediately back to her usual self, rather than being pale, clammy, dazed, confused or drowsy.](#) Card 6: [Click No](#)

Are there soft signs of deterioration? [There are no signs of acute illness because Mary is described as seeming to be her usual self](#) Card 8: [Click No](#)

Further actions continue through cards 10 and 11

Outcome: [Safe to support Mary to move either independently or using appropriate equipment. Observe and reassess for changes over the next 24 hours.](#)

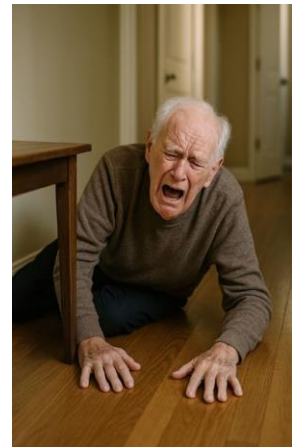
Practice Scenario 2

Resident Name: John, 92 years old

Situation: John has fallen in the hallway and is crying out in pain. There is a small table nearby, which has been moved away to create a safe space.

Observations:

There is a deep laceration on his arm with significant bleeding - bleeding there is a pool of blood on the floor about 20cm x 10cm



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected response:

Triage for 999

Is the area clear? **Yes** the scenario states the table has been moved away to create a safe space Card 2: **Click Yes**

Is she alert? **He is crying out in pain and therefore must be alert**
Card 3: **Click Yes**

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? **Yes - the description is of a significant amount of bleeding and a deep laceration**

Card 4: **Click Yes this takes you to card 99 and you can call 999 directly from the call 999 button if you wish to**

Outcome: **Call 999 for an emergency ambulance, and do not move John.**

We cannot cover all first aid scenarios in the tool, so as the home page explains, please use first aid where appropriate. For example, in this scenario, applying pressure directly over the wound with a clean cloth or bandage until the bleeding stops or help arrives.

Practice Scenario 3

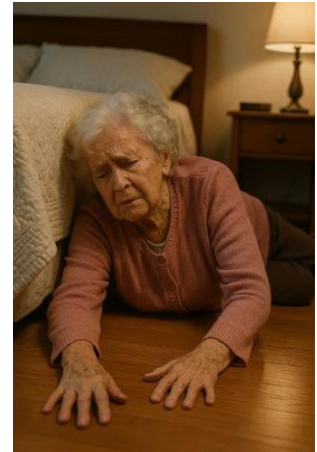
Resident Name: Susan, 88 years old

Situation:

Susan has fallen while attempting to get out of bed. She is alert but reports new pain in her neck and some dizziness.

Observations:

- No bleeding or visible bone injuries.
- Complains of pain in the back of her neck and seems to be more disorientated than usual.
- She is moving all 4 limbs



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? Yes there is nothing in scenario to suggest the room is an unsafe environment

Card 2: Click Yes

Is she alert? Yes she is described as alert and articulating pain

Card 3: Click Yes

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? Yes, the pain in her neck could indicate a potential neck injury, and the disorientation a potential head injury Card 4: Click Yes this takes you to card 99 and you can call 999 directly from the call 999 button if you wish to

Outcome: Do not move Susan. Call 999 for an emergency ambulance due to potential head and or neck injury

We cannot cover all first aid scenarios in the tool, so as the home page explains, please use first aid where appropriate. For example, in this scenario, try to keep hold Susan's head and neck to keep her as still as possible until an ambulance arrives.

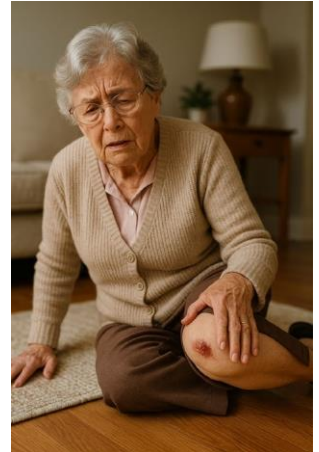
Practice Scenario 4

Resident Name: Alice, 89 years old **Situation:**

Alice tripped over a rug and fell to the ground.

She appears alert and is not in visible distress. **Observations:**

- No signs of bleeding, broken bones, or any injuries.
- No chest pain, breathing issues, or other symptoms.
- She has a graze to her left knee but is able to bend it normally. It has stopped bleeding.
- She is moving all 4 limbs



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? **Yes there are no obstacles other than a rug described, so assume yes**

Card 2: **Click Yes**

Is she alert? **Yes she is described as alert**

Card 3: **Click Yes**

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? **The description of the knee injury is of a graze with normal range of movement and the bleeding has stopped. Therefore, this suggests there is no break. There are no other injuries described.**

Card 4: **Click No**

Card 5: Continue **You can safely move Alice but continue for further checks**

Triage for illness causing the fall

Are there signs of acute illness which could have caused the fall and require an urgent response? **There are presumed to be no signs of acute illness because Alice is described as not having any other symptoms.** Card 6: **Click No**

Are there soft signs of deterioration? **There are presumed to be no softs signs of acute illness because Alice is described as not having any other symptoms.** Card 8: **Click No**

Further actions continue through cards 10 and 11

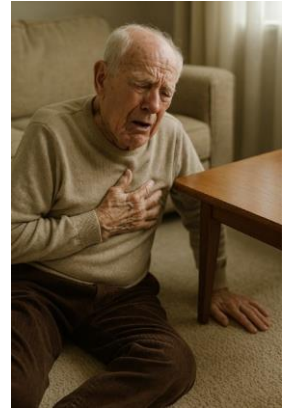
Outcome: Safe to support Alice to move either independently or using appropriate equipment. Observe and reassess for changes over the next 24 hours.

Practice Scenario 5

Resident Name: William, 90 years old

Situation: William fell while trying to sit down and hit his chest against a table. **Observations:**

- He is awake but has difficulty breathing and is holding his chest.
- No visible signs of bleeding or limb deformity or swelling
- He is moving all 4 limbs



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? Yes there is nothing in scenario to suggest the room is an unsafe environment

Card 2: Click Yes

Is he alert? Yes he is described as awake

Card 3: Click Yes

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? Yes, the difficulty breathing and apparent pain in his chest could indicate significant trauma to his chest from falling on to the table edge

Card 4: Click Yes this takes you to card 99 and you can call 999 directly from the call 999 button if you wish to

Outcome: Do not move William. Call 999 for an emergency ambulance due to potential chest injury

Practice Scenario 6

Resident Name: Emily, 87 years old

Situation: Emily fell while walking in the garden. She is trying to get up and there are no signs of severe injuries **Observations:**

- No bleeding or signs of broken bones.
- She seems slightly short of breath with a cough (started 1 day prior to the fall) and appears more fatigued than usual.
- She is talking
- No history of fainting



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? **Yes there are no obstacles described, so assume yes**

Card 2: **Click Yes**

Is she alert? **Yes she is trying to stand so must be alert**

Card 3: **Click Yes**

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? There are no descriptions of severe injuries. The slight shortness of breath described does not sound like evidence of a chest injury

Card 4: **Click No**

Card 5: Continue **You can safely move Emily but continue for further checks**

Triage for illness causing the fall

Are there signs of acute illness which could have caused the fall and require an urgent response? **The description is of a possible chest infection but not of sepsis so expect to answer no** Card 6: **Click No**

Are there soft signs of deterioration? **Yes – the new cough and breathlessness for the previous day are signs of a possible chest infection, which could have contributed to the fall**

Card 8: **Click Yes**

Card 9: **Continue** - Safe to support Emily to move either independently or using appropriate equipment move using appropriate equipment but call for medical advice via usual route (e.g., GP, 111, Urgent community response).

Card 11: Continue

Outcome: Safe to support Emily to move either independently or using appropriate equipment but call for medical advice via usual route (e.g., GP, 111, urgent community response). Continue to observe and reassess for changes over the next 24 hours.

Practice Scenario 7 Resident Name: Robert, 91 years old

Situation: Robert fell in the bathroom. He is lying on the floor and says he is fine.

Observations:

- No bleeding, fractures, or other visible injuries.
- He appears more confused than usual and is shivering. His temperature is 39°C.
- He does not seem breathless or complaining of any pain.



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? **Yes there are no obstacles described, so assume yes**

Card 2: **Click Yes**

Is he alert? **Yes he says he is fine so must be alert**

Card 3: **Click Yes**

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? There are no descriptions of severe injuries.

Card 4: **Click No**

Card 5: Continue **You can safely move Robert but continue for further checks**

Triage for illness causing the fall

Are there signs of acute illness which could have caused the fall and require an urgent response? **Yes - he has a very high temperature, is shivering and confused. This could be sepsis**

Card 6: **Click Yes and call 999**

Card 7: **Call 999**

Outcome: Safe to move but call an urgent ambulance via 999 due to signs of possible sepsis.

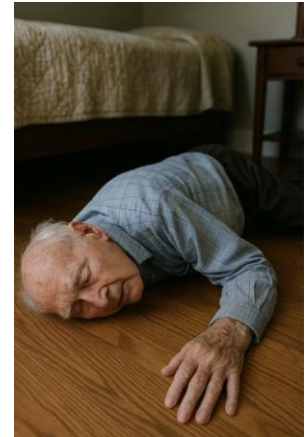
Moving Robert to a bed will not worsen his sepsis and may ease transfer to an ambulance stretcher. However, if in a real-life scenario you felt it was not appropriate to move him, then that is ok too. You are calling 999 for possible sepsis, so you should have a quick response. Therefore, he is hopefully unlikely to remain on the floor for a prolonged period and experience any associated harms from this, such as pressure sores (these can develop more quickly in the context of sepsis).

Practice Scenario 8

Resident Name: George, 93 years old

Situation: George was found on the floor of his bedroom by a carer. He is not responding to verbal cues and appears unconscious.

Observations: No visible bleeding or injuries. He is breathing but does not respond when his name is called or when lightly shaken. The area around him is clear of any dangers.



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? **Yes** the area is described as clear of dangers

Card 2: **Click Yes**

Is he alert? No - he is not responding to your voice. He is unconscious, which could be due to an injury from the fall or be the cause of the fall. Call 999 and do not move him.

Card 3: **Click No** this takes you to card 99 and you can call 999 directly from the call 999 button if you wish to

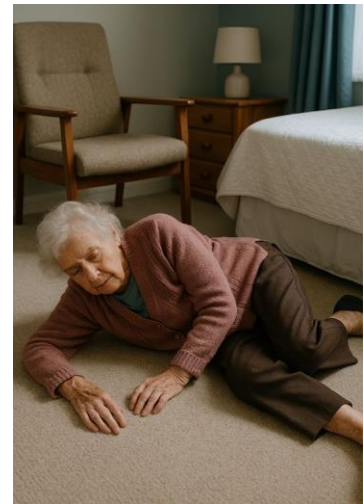
Outcome: Call 999 for an emergency ambulance and keep George on the floor.

Practice Scenario 9

Resident Name: Margaret, 88 years old

Situation: Margaret fell in her bedroom while trying to stand from her chair. She is lying on her side and not moving her right leg.

Observations: She is alert but grimacing, especially when her right leg is touched. Her right leg is visibly shorter and rotated outward. There is no apparent bleeding.



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? [Yes there are no obstacles described so assume yes](#)

Card 2: [Click Yes](#)

Is she alert? [Yes she is described as alert](#)

Card 3: [Click Yes](#)

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? [Yes, the description of a painful, shortened and rotated leg is highly suggestive of a newly broken hip](#)

Card 4: [Click Yes this takes you to card 99 and you can call 999 directly from the call 999 button if you wish to](#)

Outcome: [Do not move Margaret. Call 999 for an emergency ambulance due to a potential hip fracture](#)

Practice Scenario 10

Resident Name: Patricia, 86 years old

Situation: Patricia tripped over her slippers in the lounge and fell to the ground. You find her alert and aware of what happened

Observations: No visible bleeding, broken bones, or other injuries. No signs of head, neck, or back injury. She takes Edoxaban, an anticoagulant, for atrial fibrillation.



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? **Yes there are no obstacles described, so assume yes**

Card 2: **Click Yes**

Is she alert? **Yes she is described as alert**

Card 3: **Click Yes**

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? There are no descriptions of severe injuries, specifically no evidence of head injury or bleeding.

Card 4: **Click No**

Card 5: Continue **You can safely move Patricia but continue for further checks**

Triage for illness causing the fall

Are there signs of acute illness which could have caused the fall and require an urgent response? **There are no signs of acute illness.** Card 6: **Click No**

Are there soft signs of deterioration? **There are no signs of deterioration over the preceding hours / days**

Card 8: **Click No**

Card 10: **Continue - Contact 111 as there are no signs of injury or deterioration and she is alert but taking an anticoagulant.**

If someone who is taking an anticoagulant falls with no signs of head injury and can describe the incident, they can be observed for deterioration. They do not meet the criteria for a CT head unless there are signs of head injury, so there is no need to call 999. If someone has dementia or delirium and cannot articulate the events but there are no signs of head injury (for example they are found sitting up, alert, seem their usual self, no bumps or bruises, no vomiting or seizures) then you can call 111 for advice and ask for a clinical advisor to call you back. It is likely that they also can be observed for 24 hours, and only if something changes, requires a CT head. If your home policies are different to this advice you will need to follow your policies

Outcome: **Safe to support Patricia to move either independently or using appropriate equipment. After moving, contact 111 to report the fall and anticoagulant use, as there is a risk of delayed bleeding or other complications.**

Observe her closely for at least 24 hours for any changes in condition, if changes call 111/999

Practice Scenario 11

Resident Name: Thomas, 85 years old

Situation: Thomas fell while walking to the bathroom and landed on his outstretched arm.

Observations:

- He is alert and responsive.
- He is holding his upper arm and is in significant pain.
- There is swelling and a visible deformity in his upper arm, suggesting a possible fracture. No other injuries or concerns.



Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? **Yes there are no obstacles described so assume yes**

Card 2: **Click Yes**

Is he alert? **Yes he is described as alert**

Card 3: **Click Yes**

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? **Yes, the description of swelling and deformity is highly suggestive of a newly broken upper arm**

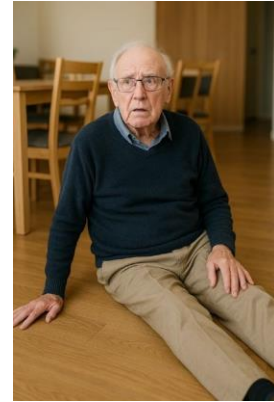
Card 4: **Click Yes this takes you to card 99 and you can call 999 directly from the call 999 button if you wish to**

Outcome: **Do not move Thomas. Call 999 for an emergency ambulance due to a potential fractured humerus**

Practice Scenario 12

Resident Name: Albert, 87 years old

Situation: Albert was found on the floor of the dining area after what appears to be a collapse. He was sitting in a chair and suddenly slid to the floor. You saw the event and noted that he didn't trip or stumble but seemed to faint. He did not hit his head.



Observations: Albert is now alert but seems confused about what happened. He has no visible bleeding, injuries, or signs of broken bones. There is no head, neck, or back pain, and no injuries from the fall. He has previously had fainting episodes due to drops in his blood pressure.

Use the space below to record your response to this scenario.

As you work through the situation using the Safe To Move Tool, note down each decision you make and explain the reasoning behind your response. This will help you reflect on your thought process and identify key learning points.

Expected Response:

Triage for 999

Is the area clear? **Yes** there are no obstacles described, so assume yes

Card 2: **Click Yes**

Is she alert? **Yes** he is described as alert

Card 3: **Click Yes**

Triage for severe injuries

Are there severe injuries requiring immediate 999 response? **There are no descriptions of severe injuries, specifically no evidence of head injury or bleeding.**

Card 4: **Click No**

Card 5: Continue **You can safely move Albert but continue for further checks**

Triage for illness causing the fall

Are there signs of acute illness which could have caused the fall and require an urgent response? **This is suspected collapse which he is known to have recurrently due to drops in his blood pressure (BP). It is likely to recover if he is put to bed for a period. So unless there is something different to his usual presentation to suggest an alternate cause, there is no need for 999.** Card 6: **Click No**

Are there soft signs of deterioration? **The description of confusion after a faint can be normal but should be short lived. Albert can be supported to move and be monitored. If he does not start to recover quickly then reassess and consider an alternate cause.** Card 8: **Click No**

Card 10: **Continue** – if Albert returns to his usual self but has not had a recent medical review, ask for assessment at next weekly check in as he may need his medications reassessing. Observe him closely for at least 24 hours for any changes in condition, if changes call for medical assessment

Outcome: **Safe to move, ideally back to his bed for a period to allow his BP to recover.**

Since the collapse is part of his known condition and he has a care plan in place, continue monitoring his condition as per usual care plan. Observe for any changes and reassess regularly – if he is not returning to his usual self, call GP / 111 / UCR.

Learning Quiz

1. Name 2 signs that may suggest a head injury.
2. What should you do if a resident has fallen and is on anticoagulants?
3. When should you call 999 after a fall?
4. Why is it important to observe for changes up to 24 hours after a fall?
5. What are 2 signs of a possible fracture?
6. What role does temperature play in post-fall assessment?

Learning Quiz Suggested Answers:

1. Name 2 signs that may suggest a head injury:

- Confusion or drowsiness
 - Vomiting or a severe headache
-

2. What should you do if a resident has fallen and is on anticoagulants?

- Seek medical advice, even if there are no visible injuries. It may be safe to observe and monitor but seek advice.
-

3. When should you call 999 after a fall?

- If the person it is unsafe to approach them, if they are unconscious, not breathing, no pulse, (unless there is a do not attempt resuscitation form in place), if there are signs of severe injury (eg deformed limb) or illness (eg stroke or sepsis).
-

4. Why is it important to observe for changes up to 24 hours after a fall?

- Because some symptoms of serious injury, such as a head injury or internal bleeding, may not appear immediately and can develop over time.
-

5. What are 2 signs of a possible fracture?

- Swelling and bruising
 - Pain on movement or inability to move the affected limb
-

6. What role does temperature play in post-fall assessment?

- An increase in temperature may indicate an infection which could have caused the fall. Therefore, medical advice should be sought. If there are other signs of possible sepsis call 999

Links to useful websites

Falls prevention

React to Falls: Reducing the risk of falls in your care home: [React To Falls - Best Practice in Managing Falls for Care Home Residents | React To](#)

Example refresher videos are of using the chair method or available appropriate equipment (e.g. hoist, Raizer chair, lifting cushion, banana sling).

Raizer chair: [How to use the Raizer M Manual Emergency Lifting Chair](#) (youtube.com)

Elk: [Mangar Elk Lifting Cushion: How It Works](#) (youtube.com)

Camel: [Mangar Camel Training Video](#) (youtube.com)

Chair Method: [Chair Method](#) (youtube.com)

[How to assist a fallen person from the floor without equipment](#) Recognising

deteriorating residents:

[RESTORE2™ official :: NHS Hampshire and Isle of Wight](#)

[NHS Vale of York Clinical Commissioning Group - Recognising and Responding to Deterioration in Residents Using a Softer Signs Tool](#)