

Dear Care and Support Provider,

Care and Support Provider Update: 12th May 2020

Please note that we are regularly updating the Care Providers page on the Sefton Council website with information for the public domain. <https://www.sefton.gov.uk/social-care/adults/adult-social-care-providers.aspx>.

CQC Information for adult social care services during the coronavirus (COVID-19) outbreak

The Care Quality Commission have been publishing the answers to questions adult social care providers have asked them during the coronavirus outbreak. The answers are dated so you can see how recent are and they will continue to update this page as things change. These can be found on the CQC website [External FAQs](#)

Falls FAQ's for Care Homes

Please find below a poster developed by the National Falls Prevention Coordination Group that provides advice on how to manage a fall that may require an ambulance during the COVID-19 pandemic.

Managing a fall that may require an ambulance during the COVID-19 pandemic

Why this is needed

Falls in care and residential homes are common. Fortunately most don't require an emergency ambulance response. Staff are experienced in managing what to do when a person in their care falls and have routine procedures to care for them, which for non-serious injuries may include calling a GP, out-of-hours care provider, falls service (if available) or NHS 111.

It is particularly important that the 999 service is used only when someone is seriously ill or injured and their life is at risk, and that care home staff know how they can support residents who have fallen and are waiting for an ambulance.

General advice

All information here follows good practice advice and guidance,^{1,2,3} and assumes that care and residential homes have already implemented existing falls prevention and management guidance.^{4,5,6}

Managers should support staff by ensuring that they:

1. Are clear about when to call an ambulance when a resident has fallen.
2. Know and understand how to access non-emergency clinical advice and support for a resident who has fallen, e.g. GP or out-of-hours provider or other community-based services.
3. Are trained to use assessments and observations to monitor for deterioration in the hours following a fall.
4. Have access to appropriate lifting equipment that complies with LOLER and PULER regulations.⁷
5. Have adequate, in date manual handling training so they can use the equipment safely.
6. Have 24/7 access to a computer wherever possible in order to access NHS and other websites for information and advice about what to do if a resident falls.

This cover page is intended as context for organisations.
Page two is intended to be used separately and can be displayed in areas where it can be seen by nursing and care staff for reference.

Developed by the National Falls Prevention Coordination Group (NFPCG):



British Geriatrics Society
Improving healthcare
for older people



ASSOCIATION OF
AMBULANCE
CHIEF EXECUTIVES

National Audit of
Inpatient Falls (NAIF)

1. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/978099/Admission_and_Care_of_Residents_during_COVID-19_Incident_in_a_Care_Home.pdf

2. <https://www.bgs.org.uk/resources/covid-19-managing-the-covid-19-pandemic-in-care-homes>

3. <https://www.nmc.org.uk/news/news-and-updates/how-we-will-continue-to-regulate-in-light-of-novel-coronavirus/>

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

5. <https://www.england.nhs.uk/ourwork/clinical-policy/older-people/frailty/living-with-frailty/>

6. <https://www.nice.org.uk/guidance/cg74/chapter/introduction>

7. Moving and Handling in Health and Social Care <https://www.hse.gov.uk/healthservices/moving-handling.htm>