FRAT



Name of assessor

Date

Name of Person being assessed

| Score 1 for every category and total at the bottom of the 2 columns | | | |
|---|---|------|--|
| 1 | Is there a history of any fall in the previous year? How assessed? Ask the question | | |
| 2 | Is the client on four or more medications per day? How assessed? Identify number of prescribed medications | | |
| 3 | Does the client have a diagnosis of stroke or Parkinson's? How assessed? Ask the person | | |
| 4 | Does the client report any problems with their balance? How assessed? Ask the person | | |
| 5 | Is the client unable to rise from a chair of knee height without using their arms? | | |
| | Total | 2.47 | |

Level of predicted risk:

3 – 5 yeses = higher falls risk

- Complete full falls risk assessment (see service user risk assessment)
- Consult health and social care professionals
- Complete provider self assessment

Less than 3 yeses = lower risk

- If the person has mobility problems consider referral to Community Therapy Services
- Carry out exercises with the individual

Download a blank copy of this assessment from www.hcpastopfalls.info or complete it on the StopFalls mobile app and email the assessment to yourself.

FRAT Step-by-Step



This is a quick and easy tool used nationwide to assess a person's falls risk. This tool can be used for all people you think may be at risk of falling and gives guidance on specific areas surrounding the person's falls risk.

To address falls prevention, we must identify a person at risk and implement appropriate risk reduction measures. Best practice explains that older people who interact with health and care professionals should be asked routinely whether they have fallen in the past year and asked about the frequency, context and characteristics of any falls.

Are you using the FRAT on admission to your care organisation, what criteria are you using to determine whether or not a person needs an assessment? And is the FRAT being performed regularly for those already identified as being at a higher risk of falls.

Stage 1 - Who needs the assessment?

This questionnaire can be used for new admissions, updating a care plan for anyone you believe may be at risk of falling or after a fall has occurred. *It is advised to re-assess every 1-2 months or when a person's circumstances change.*

Stage 2 - How to use the FRAT

- Ask the participant each question on the sheet. Tick the response 'yes' or 'no' The greater the number of 'yes' answers, the higher the participants risk of falls. A score of 3 and above indicates the person is at risk of a fall
- Find a blank assessment on page 5 or download from <u>www.hcpastopfalls.info</u>
- All scores should be referenced in care plans and discussed with relevant health professionals

Stage 3 - Red flag questions

Consider the following three questions in all people. If the answer is yes to ANY, refer the patient to their GP for a medical review:

- Any history of any unexplained falls (No clear cause e.g. person blacked out, will need medical investigation)?
- Do they have any dizziness on standing (new or unknown cause, not previously investigated, affecting balance)? If able, assess for postural hypo-tension.
- Do they have new or worsening observed balance or gait problems not previously investigated or managed?

Stage 4 - Action & management

Once you have completed the FRAT assessment record actions and complete them. Ensure that the FRAT is recorded in the person's care plan and staff are made aware of any interventions.

Stage 5 - Additional assessments

If you're concerned about a person consider using additional assessments to create a more detailed description for their care plan.

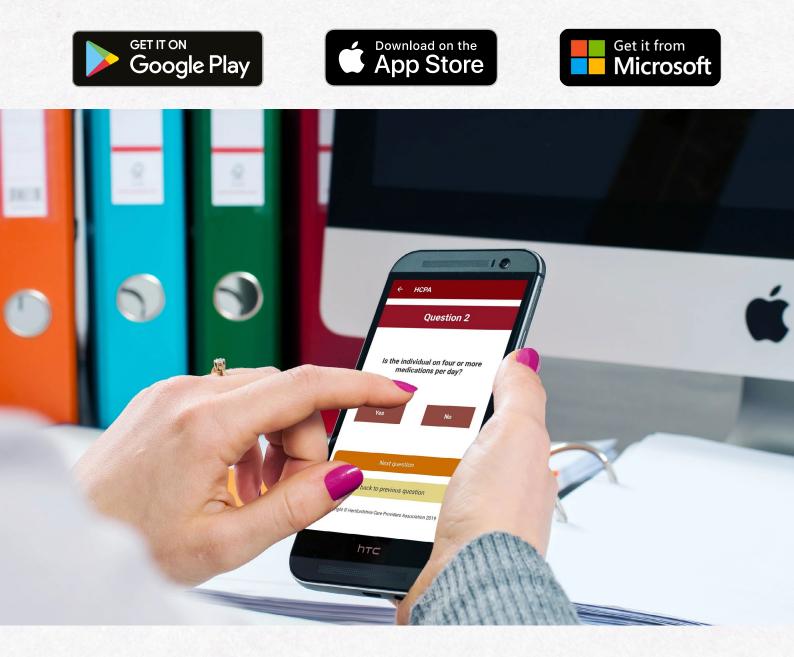
For frailty, have a look at the PRISMA 7 and the Rockwood Clinical Frailty Scale. For mobility, we suggest the Timed Up and Go.

| Risk Factor | | lf yes - Next Steps | | | |
|-------------|--|---|--|--|--|
| | | Further assessment / referral options | Interventions | | |
| 1 | ls there a history of a fall in the previous year? <i>How assessed?</i> <i>Ask the question</i> | Review circumstances of previous incident(s) if known to identify / decrease precipitating factors – see for risk factors in the StopFalls brochure Consider completing a Timed-up & Go assessment. | If you have serious concerns of the high number of falls consult GP or another health professional | | |
| 2 | ls the client on four or more medications per day? <i>How assessed?</i> <i>Identify number of prescribed</i> <i>medicines</i> | Some medicines can affect balance – consider associated risk factors. Make staff or the individual aware that they are taking a high number of medications that effect balance. Staff to take extra care and time when asking people to stand from a seated position to reduce the effects of postural hypo-tension. For a list of medications that cause falls. | Ensure medications are reviewed once per year- seeking support from a health professional. Please speak to your pharmacist or health professional if you are concerned about medications at any point. | | |
| 3 | Does the client have a diagnosis of stroke or Parkinson's? <i>How assessed?</i> <i>Ask the question</i> | Consider risk factors associated with the physical environment and manoeuvring safely – Environmental modifications may be required. Certain health conditions and individual fitness level must be considered before making a recommendation to exercise - see Hertfordshire's exercise matrix which can be found on hcpastopfalls.info/exercise | Consult GP or other health professional if there is worsening of balance, loss of strength or mobility. Community therapy referral may be suitable. Physiotherapy or exercise may help. | | |
| 4 | Does the client report any problems with their balance? <i>How assessed?</i> <i>Ask the question</i> | Consider risk factors associated with the physical environment and manoeuvring safely. Other factors including nutrition and hydration are also important. Consider a basic balance test such as a Timed Up and Go. Ensure staff are made aware of mobility levels and update mobility support plan. Certain health conditions and individual fitness level must be considered before making a recommendation to exercise - see Hertfordshire's exercise matrix which can be found on hcpastopfalls.info/exercise | Consult health professional if there is worsening of balance, loss of strength or mobility. Community therapy referral may be suitable. Physiotherapy or exercise may help. | | |
| 5 | Is the client unable to rise from a chair of knee high without using their arms? <i>How assessed?</i> <i>Visual Assessment</i> | Ensure staff are made aware of mobility levels and update mobility support plan. Consider exercise to improve strength and balance. Certain health conditions and individual fitness level must be considered before making a recommendation to exercise -see Hertfordshire's exercise matrix which can be found on hcpastopfalls.info/exercise | An Occupational Therapist will be able to assess mobility levels to identify if any aids are required. Community therapy referral may be suitable. Physiotherapy or exercise may help. | | |

How to use the interactive FRAT on the HCPA StopFalls Mobile App!

- 1. Open your StopFalls App on your phone or tablet
- 2. Select Assessments on the homescreen
- 3. Select Interactive Falls Risk Assessment Tool (FRAT) for all
- 4. Select Use the Live Assessment Tool and begin the assessment!

Once you have finished the assessment, you are given an option to **email a copy of this assessment to yourself. This is perfect for tracking risks and adding to care plans!**



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