FRAT

STOPFALLS

Name of assessor ....

Date ....

Name of Person being assessed ....

Score 1 for every category and total at the bottom of the 2 columns		Yes	No
1	Is there a history of any fall in the previous year? **Assessed as:** Ask the question		
2	Is the client on four or more medications per day? **Assessed as:** Identify number of prescribed medications		
3	Does the client have a diagnosis of stroke or Parkinson's? **Assessed as:** Ask the person		
4	Does the client report any problems with their balance? **Assessed as:** Ask the person		
5	Is the client **unable** to rise from a chair of knee height without using their arms? **Assessed as:** Ask the person (are they able to stand up from a chair of knee height without using their arms?)		
	Total		

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

STOPFALLS

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 FIRST identify a person at risk (using the FRAT) and THEN implement appropriate risk reduction measures. Download and use our Falls Risk Assessment Tool for getting people Back On their Feet (FRAT-BOF) (page 49) and Multi-factorial Falls Risk Assessment Tool (or use your own if it is comprehensive) to reduce the risk of falls.

Best practice states that older people who receive Care should be asked routinely whether they have fallen in the past year, and should be 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 a person needs an assessment?
- Are you using a Multi-factorial Risk Assessment Tool to reduce risks for those already identified as being at a higher risk of falls?

Step 1 - Who needs the assessment?

The FRAT 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.*

Step 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 participant's 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 www.hcpastopfalls.info
- All scores should be referenced in care plans and discussed with relevant allied health professionals

Step 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), that has not been previously investigated? If able, assess for postural hypotension
- Do they have new, or worsening, balance or gait problems not previously investigated or managed?

Step 4 - Action & management

Use our Falls Risk Assessment Tool for getting people Back On their Feet (FRAT-BOF) (page 49) and Multi-factorial Falls Risk Assessment Tool (or use your own if it is comprehensive) to manage and reduce the risk of falls for that person.

Ensure that the results of the FRAT, and of any tool used to reduce falls risk, are recorded in the person's care plan and that staff are made aware of any necessary actions/interventions. Record all actions and review these regularly.
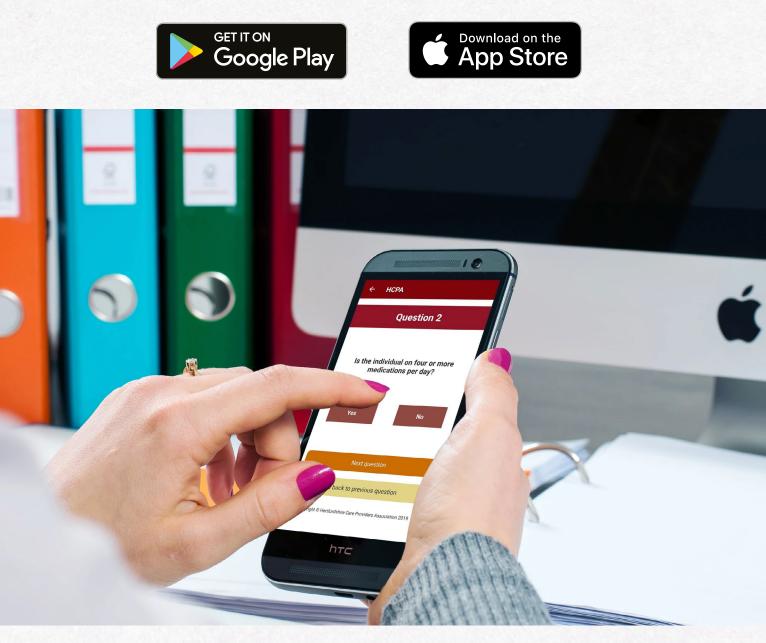
Step 5 - Additional assessments

Additional assessments If you are concerned about a person, consider using additional assessments to create a more detailed description of falls risk for their care plan. For frailty, have a look at the PRISMA 7 (page 46) and the Rockwood Clinical Frailty Scale (page 48). For mobility, we suggest the Timed Up and Go (page 47).

	Risk Factor	If yes - Next Steps	
		Interventions	Further assessment / referral options
1	Is there a history of a fall in the previous year? *Assessed as:* *Ask the question*	Review circumstances of previous incident(s) if known to identify / decrease precipitating factors – see page 8 for risk factors Consider completing a Timed-up & Go assessment. See page 47	If you have serious concerns of the high number of falls consult GP or another allied health professional
2	Is the client on four or more medications per day? *Assessed as:* *Identify number of prescribed medicines*	Some medicines can affect balance – consider associated risk factors. Make staff or the person 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 hypotension. For a list of medications that cause falls. Refer to page 11	Ensure medications are reviewed once per year- seeking support from a allied health professional. Please speak to your pharmacist or allied health professional if you are concerned about medications at any point.
3	Does the client have a diagnosis of stroke or Parkinson's? *Assessed as:* *Ask the question*	Consider risk factors associated with the physical environment and manoeuvring safely – Environmental modifications may be required. Certain health conditions and individual fitness levels 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 allied health professionals 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? *Assessed as:* *Ask the question*	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 levels must be considered before making a recommendation to exercise - see Hertfordshire's exercise matrix which can be found on hcpastopfalls.info/exercise	Consult an allied 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? *Assessed as:* *Visual Assessment*	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 levels 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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