

Use of Bed and Chair Sensor Alarm Mats for Preventing Falls in Adult Patients Clinical Guideline

V2.0

November 2019

1. Aim/Purpose of this Guideline

1.1. This guideline is to support the use of bed and chair sensor alarm mats with adult patients when used as part of a patient's individualised falls prevention intervention plan.

1.2. Sensor alarm mats are an early warning system to highlight to staff when a patient who is at risk of falling has got up from the bed or chair; the pressure on the mat is removed and the alarm on the falls monitor will sound.

1.3. Sensor alarm mats, on their own, will not prevent a person from falling. They only work best when the patient has been carefully assessed that they would benefit from the use of a sensor alarm mat, and they form part of an active falls prevention plan.

1.4. This version supersedes any previous versions of this document.

1.5. Data Protection Act 2018 (General Data Protection Regulation – GDPR) Legislation

The Trust has a duty under the DPA18 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed and documented. We can't rely on Opt out, it must be Opt in.

DPA18 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the DPA18 please see the 'information use framework policy', or contact the Information Governance Team rch-tr.infogov@nhs.net

2. Guidance

2.1. Patients who would benefit:

- Patients with impaired mobility /unsafe transfers but is forgetful or unwilling to ask for help or use the call bell.
- Patients with a history of incontinence, infection, retention, nocturia which may cause urinary urgency.
- Patients who are newly admitted or transferred, and have a cognitive impairment and are disorientated.
- Patients are unable to recognise their own physical capabilities.
- Patients whose cognitive function is suddenly declining but whose functional mobility is the same.
- Patient being de-escalated from a level 3 Enhanced Care (line-of-sight) to level 2 (CARE Rounding).

2.2. Patients who would not benefit:

- Patients who cannot settle, constantly 'walking about' or trying to get up out of the bed or chair. The alarm will be going off continually and may cause distress to the person and others around.
- Patients who are liable to interfere with the equipment i.e. pick it up, walk off with it.
- Patients who decline (refuse).
- Patient who are using pressure relieving equipment to manage risk of pressure area. Falls alarm mats can potentially affect the way a pressure relieving mattress/cushion works.

2.3. Standards for the use of a sensor alarm mat:

The decision to use a sensor alarm system must be made following a holistic multidisciplinary risk assessment; and when in use the following must be completed;

2.3.1. Clearly document its use on the patient's individualised falls prevention care plan (CHA3897). This should include reference to the patient's capacity and if mat is being used in patients best interests. If the patient has capacity and refused, it should be clearly documented.

2.3.2. Clearly communicate to the patient and/or carer why the system is being used.

2.3.3. Ensure that 'bed/chair alarm system in use' is documented on the patient's board above their bed.

2.3.4. Ensure it is clearly communicated at Safety Huddles.

2.3.5. When in use ensure the equipment is regularly checked to make sure that it is still working effectively, i.e. not alarming unnecessarily and that no lights are flashing to indicate it has lost signal or has a low battery; and ensure it is still correctly positioned underneath the patient. This check should be completed at every care round.

2.3.6. Ensure that the mats are positioned correctly on the bed and chair to ensure they do not cause any pressure damage to the patient's skin.

2.3.7. They are not a form of restraint as the person is not prevented from moving as a result of using it; however some patients (and relatives) may be unwilling to use the alarms and their wishes should be respected and documented.

2.3.8. If a sensor alarm mat is still required when a patient is being transferred/discharged, ensure that the receiving area are made aware that a sensor alarm mat is in use and that they have adequate time to make arrangements for this to be in place for when the patient arrives. Sensor Alarm systems purchased by RCHT should not leave the Trust premises. Each sensor mat can be tracked via the RDIF system.

2.4. How to use:

Each system consists of 3 components, a bed and chair pressure mat; and a monitor which all must have matching serial numbers and are stored together. Please refer to the manufacturer's instructions for use and care of the equipment.

2.5. Review and discontinuation of use:

2.5.1. Review appropriateness of the system in managing the patient's risk every 24 hours and update the patient's individualised falls prevention care plan (CHA3897) accordingly.

2.5.2. Ensure that the equipment is cleaned after every patient use, following the care instructions on the mat.

2.5.3. Ensure that the equipment is safely stored when not in use, not folded; and if it has been borrowed from another ward/central stock then please ensure the equipment is returned when no longer in use.

3. Monitoring compliance and effectiveness

Element to be monitored	<ul style="list-style-type: none">• Appropriate use of the sensor alarm system as per the clinical guidelines• Audit of the equipment to ensure in safe working order (supported by manufacturer)
Lead	Lead Nurse for Quality, Safety and Innovation
Tool	PAudit and Review Tool using patient documentation
Frequency	Annually
Reporting arrangements	Falls Workstream Group
Acting on recommendations and Lead(s)	Care group representation at the Falls Workstream Group
Change in practice and lessons to be shared	Via Falls Workstream Group to filter down into the clinical areas through local arrangements.

4. Equality and Diversity

4.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the ['Equality, Inclusion & Human Rights Policy'](#) or the [Equality and Diversity website](#).

4.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Appendix 1. Governance Information

Document Title	Use of Bed and Chair Sensor Alarm Mats for Preventing Falls in Adult Patients Clinical Guideline V2.0		
Date Issued/Approved:	October 2019		
Date Valid From:	November 2019		
Date for Review:	November 2022		
Directorate / Department responsible (author/owner):	Lorrie Maltby, Lead Nurse for Quality, Safety & Innovation		
Contact details:	01872 25 2638		
Brief summary of contents	This guideline is to support the use of bed and chair sensor alarm mats with adult patients		
Suggested Keywords:	Alarm, mats, falls, sensor,		
Target Audience	RCHT/ ✓	CFT	KCCG
Executive Director responsible for Policy:	Director of Nursing, Midwifery and Allied Health Professionals		
Date revised:	October 2019		
This document replaces (exact title of previous version):	Clinical Guideline For Use Of Bed And Chair Sensor Alarm Mats For Preventing Falls In Adult Patients V1.0		
Approval route (names of committees)/consultation:	Falls Workstream Group		
Care Group Manager confirming approval processes	Louise Dickinson, Acting Deputy Director in Corporate Nursing		
Name and Post Title of additional signatories	Not Required		
Signature of Executive Director giving approval	{Original Copy Signed}		
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet & Intranet	✓	Intranet Only
Document Library Folder/Sub Folder	Clinical / Corporate Clinical		
Links to key external standards	The National Service Framework for Older People (2001)		

	NICE Clinical Guideline 161: “Falls: Assessment and prevention of falls in older people (2013). NICE Falls in older people: assessment after a fall and preventing further falls (Quality Standard 86, 2015).
Related Documents:	RCHT Policy for Prevention and Management of Falls in Hospital, and the Safe Use of Bedrails with Adult Patients
Training Need Identified?	Yes – this is supported by the programme of falls prevention and management for the Trust

Version Control Table

Date	Version No	Summary of Changes	Changes Made by (Name and Job Title)
10/08/16	V1	First version circulated to Falls Workstream Group Members for comments	Lorrie Maltby – Lead Nurse for Quality, Safety and Innovation
17/10/19	V2	Updated to reflect Trust changes	Isabel Smith Improvement Practitioner for Falls, Dementia and Delirium

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry.

This document is only valid on the day of printing

Controlled Document

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy on Document Production. It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Initial Equality Impact Assessment Form

Name of the strategy / policy /proposal / service function to be assessed						
Use of Bed and Chair Sensor Alarm Mats for Preventing Falls in Adult Patients Clinical Guideline V2.0						
Directorate and service area: Corporate Clinical			New or existing document: Existing			
Name of individual completing assessment: Lorraine Maltby			Telephone: 01872 253050			
1. <i>Policy Aim*</i> <i>Who is the strategy / policy / proposal / service function aimed at?</i>		To provide guidance on the use of bed and chair sensor alarm mats to reduce the risk of falls in adult patients				
2. <i>Policy Objectives*</i>		<ul style="list-style-type: none"> To provide a consistent approach to the use of fall sensor mats within the RCHT and WCH To maintain patient safety and improve outcomes for adult patients at risk of falls 				
3. <i>Policy – intended Outcomes*</i>		<ul style="list-style-type: none"> Consistent use of falls sensor mats at RCH sites. Reduction in risk of falls in adult Patients within the RCHT and WCH 				
4. <i>*How will you measure the outcome?</i>		Audit Datix Reporting Review of medical / nursing documentation as required				
5. Who is intended to benefit from the <i>policy?</i>		All adult patients at risk of falls within all RCH sites				
6a Who did you consult with		Workforce	Patients	Local groups	External organisations	Other
		X				
b). Please identify the groups who have been consulted about this procedure.		Please record specific names of groups Falls Work stream Group				
What was the outcome of the consultation?		Agreed				

7. The Impact

Please complete the following table. **If you are unsure/don't know if there is a negative impact you need to repeat the consultation step.**

Are there concerns that the policy **could** have differential impact on:

Equality Strands:	Yes	No	Unsure	Rationale for Assessment / Existing Evidence			
Age		X					
Sex (male, female, trans-gender / gender reassignment)		X					
Race / Ethnic communities /groups		X					
Disability - Learning disability, physical impairment, sensory impairment, mental health conditions and some long term health conditions.		X					
Religion / other beliefs		X					
Marriage and Civil partnership		X					
Pregnancy and maternity		X					
Sexual Orientation, Bisexual, Gay, heterosexual, Lesbian		X					
<p>You will need to continue to a full Equality Impact Assessment if the following have been highlighted:</p> <ul style="list-style-type: none"> You have ticked "Yes" in any column above and No consultation or evidence of there being consultation- this <u>excludes</u> any <i>policies</i> which have been identified as not requiring consultation. or Major this relates to service redesign or development 							
8. Please indicate if a full equality analysis is recommended.				Yes		No	X
9. If you are not recommending a Full Impact assessment please explain why.							
Not indicated							
Date of completion and submission	17/10/19		Members approving screening assessment		Policy Review Group (PRG) 'APPROVED'		

This EIA will not be uploaded to the Trust website without the approval of the Policy Review Group.

A summary of the results will be published on the Trust's web site.