



Fall Prevention Post Test

Name: _____ Date: _____

1. Fall Prevention is a current _____ of Loving Care's QAPI program.

2. Who is the Fall Coordinator? _____

3. What are the 6 things that are essential for a successful Fall Prevention PIP?

- _____
- _____
- _____
- _____
- _____
- _____

4. What is Loving Care's definition of a fall? _____

5. What are the two types of fall precautions?

- _____
- _____

6. After a patient fall, once it is confirmed that the patient is not in immediate danger, what is the first thing that should be done? _____

7. What are the 5 steps to a self-assessment?

- _____
- _____
- _____
- _____
- _____

8. Describe the correct steps to take if the patient falls when you are with them: _____
