

Prevention of Falls from Windows and Balconies Policy



Title:

Prevention of Falls from Windows and Balconies Policy (Health and Safety)

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Version Control

Date	Author	Version/Page	Reason for change
May 2011	Lead Health and Safety Adviser	v1	Policy review and update
May 2015	Lead Health and Safety Adviser	v2	Policy review and update
Feb 2018	Lead Health and Safety Adviser	v3	Review following patient near miss
Aug 2020	Lead Health and Safety Adviser	v3.1	Review following patient near miss and update onto new policy format
Dec 2020	Lead Health and Safety Adviser	v4	Approved by the Policy Approval Group

Executive Summary

NHS Lothian attaches the greatest importance to the health, safety and welfare of its staff, patients/service users and others who may be affected by its activities.

In particular it recognises the significance to vulnerable patients/service users of the greater risk of falls from a height likely to cause harm from open windows and unprotected/supervised balconies.

To adequately manage the risks from falls from windows and balconies NHS Lothian through its management teams will assess its premises to identify those risks. Where assessment identifies that vulnerable patients/services users are at a greater risk from falls from windows and balconies adequate arrangements will be put in place to manage and control those risks.

This policy sets out how NHS Lothian will ensure that such risks identified are eliminated or reduced to the lowest tolerable level.

This Policy outlines the principles to be adopted and implemented in order to achieve as a minimum statutory compliance with health and safety legislation. This statutory requirement is in addition to other NHS Lothian policies and procedures.

There is also other related technical standards documents that require to be complied with, specifically the Scottish Health Technical Memorandum 55: Windows, NHS Scotland Hazard Notice HAZ (SC) 04/02 Window Security in the NHS Scotland Estate and the Health and Safety Executive Health Services Information Sheet N^o 5: Falls from Windows or Balconies in Health and Social Care (Aug 2012).

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1.0 Purpose

The purpose of this policy is to prevent or minimise the risk of vulnerable patients/service users falling or exiting from a window or balcony at height likely to cause harm.

This policy is in support of and should be read in conjunction with the NHS Lothian Health and Safety Policy and the Prevention of Falls from Windows and Balconies Procedure.

2.0 Policy statement

NHS Lothian as an organisation through its management teams will manage and control all reasonably foreseeable risks associated with preventing vulnerable patients/service users falling or exiting from windows and balconies at a height likely to cause harm.

3.0 Scope

This policy shall apply to all premises from which NHS Lothian operates where vulnerable patients/ services users have use and access.

Clinical Areas who do not care for vulnerable patients/services users will not require to document the risks associated with falling or exiting from windows and balconies. The windows condition will be examined in detail as part of the planned preventative maintenance programme operated by the NHSL Estates Department or the Third Party Provider.

Non Clinical Areas/Common Areas: Windows in these areas will not require a risk assessment; their assessment/condition will be examined in detail as part of the planned preventative maintenance programme operated by the NHSL Estates Department or the Third Party Provider.

4.0 Definitions

Windows and Balconies at Height: Where assessment identifies that patients/service users are at risk from falling or exiting from windows or balconies at a height likely to cause harm. (e.g. above ground floor level)

Falls from windows involving vulnerable patients/services users include the following;

- *Falls arising out of a Confused Mental State (Vulnerable Patients)* – Many reported accidents involve patients in either a temporary or permanent confused mental state, often caused by senility or dementia, reduced mental capacity, mental disorder, or alcohol and drugs

- *Falls at Height from Open or Unrestricted Windows (Vulnerable Patients)* – Risk that patients (including children) will accidentally or otherwise fall from windows or balconies at a height that would cause harm.
- *Falls as a result of Deliberate Self-Harm (Vulnerable Patients)* – This is a recognised risk for patients with certain mental health conditions.

Vulnerable Patient/Service User Reference: Health and Safety Executive (Health Services Information Sheet 5 Falls from Windows and Balconies in Health and Social Care)

5.0 Implementation roles and responsibilities

5.1 NHS Lothian Chief Executive

The NHS Lothian Chief Executive has overall executive responsibility for ensuring that effective arrangements are in place to manage all safety, health and risk matters within NHS Lothian. The operational responsibility for those arrangements is delegated to the Executive Medical Director. The Chief Executive Officer remains accountable to the NHS Lothian Board.

5.2 Senior Managers and their Teams

Senior Managers and their Teams are responsible for leading on the implementation of the policy by ensuring that effective systems are in place to identify, manage and control both the clinical and environmental risks associated with preventing vulnerable patients/service users falling and or exiting from windows and balconies at a height likely to cause harm.

5.3 Clinical Nurse Manager(s) or equivalent

The Clinical Nurse Manager (s) or Equivalent working with their Charge Nurse(s)/Team Leads(s) or equivalent is responsible for the communication and implementation of policy in their areas of responsibility. The CNM(s) or equivalent will monitor the implementation of the policy via any existing ward/department walk rounds.

5.4 Charge Nurse/Team Lead or equivalent

The Charge Nurse/Team Lead or equivalent will ensure that their staff are aware of their roles and responsibilities contained within the Policy and the associated Procedure.

The Charge Nurse/Team Lead or equivalent will undertake a review/assessment of the patient/service user care requirements identifying if the ward/department/area will be providing care for those patients/service users who through their **vulnerability (see section 4 definitions)** are at a greater risk of falling/exiting from a window or balcony at height likely to cause harm. This assessment should identify the current control measures in place and if any further controls are required. The findings should be recorded and kept up to date using the NHSL General Risk Assessment form and action plan completed if required.

Charge Nurse(s)/Team Leads or equivalent are also responsible for ensuring that there is evidence based information contained in the quarterly reports to help determine the level of risk assurance and any actions taken to mitigate the likelihood of vulnerable patient/service user falling or exiting from windows and balconies. Any risks associated with windows and balconies that cannot be managed should be escalated accordingly to the CNM(s) or equivalent.

5.5 Staff

Staff must follow this policy and associated procedure and any other local procedural arrangements designed to ensure ways of minimising vulnerable patients/service users falling or exiting from windows and balconies at height likely to cause harm. They should report any adverse events associated with the use of windows and balconies on the DATIX system.

5.6 Hard Facilities Management Services (Estates)

Hard Facilities Management Services (Estates) including Third Party Facilities providers will ensure that they have in place a fully operational and up to date planned preventative maintenance (PPM) programme for all windows. The PPM programme should include the window glazing, their fixtures and fittings and window restrictors.

5.7 Capital Planning, Project and Design teams, Estates Managers and external Facilities Managers

Capital Planning, Project and Design teams, Estates Managers and external Facilities Managers and others responsible for construction, commissioning and maintenance will ensure that new and replacement windows conform to the current British Standards and Scottish Health Technical Memorandum (SHTM) 55.

6.0 Associated materials

- [Prevention of Falls from Windows and Balconies Procedure](#)

7.0 Evidence base

- The Health and Safety at Work Act 1974
- The Management of Health and Safety at Work Regulations 1999
- The Workplace (Health, Safety and Welfare) Regulations 1992
- Health and Safety Executive Information Sheet - HSIS5 Falls from Windows and Balconies.

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- Scottish Healthcare Technical Memorandum (SHTM) 55
 - Department of Health - Estates and Facilities Safety Alerts Window restrictors/cable and socket design- EFA/2013/002 and EFA/2014/003.
 - HSG 220 Health and Safety in Care Homes.

8.0 Stakeholder consultation

This policy was placed on the NHS Lothian Consultation Zone for a 4-week period for comment and adjustment as required.

9.0 Monitoring and review

The policy will be monitored for compliance via the information received from NHS Lothian Health and Safety Management System Quarterly Reports. This information is then provided to the local Health and Safety Groups and the NHS Lothian Health and Safety Committee to help determine the level of risk assurance and what, if any, actions may be required to reduce that risk.

This policy will be reviewed every three years, or before as a result of any changes in level of risk and/or in legislation which may occur before this. This policy may also be subject to review if new guidance or legal opinion is issued or NHS Lothian identifies a need for revision as the result of inspection, audit or following the investigation findings of an adverse event.