Preventing Falls Through Patient and Health Care Staff Engagement

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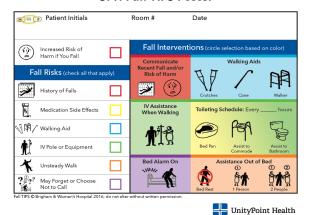
Purpose

- •Falls in hospital settings can cause harm, injury and even death to patients while also increasing hospital costs through additional testing and care related to fall related injuries.
- •The purpose of this evidence-based project was to reduce fall rates in a large medical facility comprised of three campuses by incorporating the use of an evidence-based fall prevention patient engagement tool, the Fall TIPS poster.

Project Development/Implementation Strategies

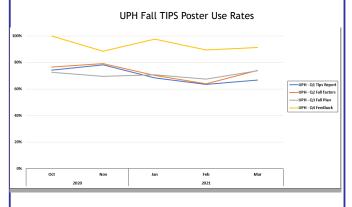
- •The Iowa Model guided the project development and implementation (The Iowa Model Collaborative, 2017). We selected evidence-based implementation strategies appropriate for each stage of the project using The Iowa Model.
- •Brigham & Women's Hospital in Boston, MA developed and tested a Fall Prevention toolkit which included a formal risk assessment and tailored plan of care for each patient in a Fall TIPS poster (Dykes et al., 2018).
- •We implemented the Fall TIPS poster to assess and help develop each patient's plan of care. The Fall TIPS tool was trialed on one inpatient unit with licensed and non-licensed nursing staff and the transportation team. Full implementation of TIPS posters on all adult inpatient units began in July 2020.
- •Patients and families (when present) were also educated on the engagement tool and their role in working with nursing and hospital staff to prevent falls.
- •Other key elements of our implementation plan:
- Development of a fall prevention slogan, "We Won't Stand for Falls"
- Updated education and policies about falls
- A video featuring our Chief Nurse Executive explaining our fall prevention program
- A Fall TIPS poster audit performed weekly with a peer feedback component built in
- Audit data was also shared with each unit's shared governance group for actionable steps to improve audit outcomes as needed

UPH Fall TIPS Poster



Project outcomes

- •The Fall TIPS Toolkit (Dykes et al., 2018) provides four audit questions about poster use and patient/family engagement. This audit data is housed on an internal shared website which is readily available for leadership and staff to view.
- ·Audits of poster use began in October 2020.
- A review of the TIPS poster audit shows gradual adoption and use throughout the organization. The audits and peer review demonstrated improved use by staff as well as patient ability to describe their own fall risks and personalized interventions to prevent falls.



•Yearly fall rate data remained the same for 2020 and 2019 (3.18 falls per patient days). Rate of harm remained the same for 2020 and 2019 (0.06).

UPH Falls and Fall Rates

	2019	2020
# of Falls	616	638
Fall rate	3.18	3.18
Rate of	0.06	0.06
Harm		

Potential for use in other settings

- •The Fall TIPS poster is part of an evidence-based toolkit and has been demonstrated to be effective in lowering fall rates (A patient-centered fall prevention toolkit, 2020). The collaborators are working on adapting the tool for use in psychiatry, rehabilitation and long-term care facilities. It is also being used in ICUs, EDs and at VA hospitals (A patient-centered fall prevention toolkit, 2020).
- •This poster and audit includes elements that have been demonstrated to reduce falls such as individualized interventions, engaging patients and families in their plan of care, and leadership engagement (Godlock, et al., 2016; Ambutas et al., 2017; Silva, 2017; Dykes et al., 2017; Porter, 2018).
- •Reduction of falls in any setting requires a comprehensive and individualized fall prevention program (Giles et al., 2015).
- •Audits are also critical to sustain fall prevention efforts and decrease fall rates (West, 2018).

Project Evaluation

- •This project was initially started and delayed due to the Covid 19 pandemic. This lack of continued implementation could have contributed to confusion about the project's value and importance leading to a lack of initial use.
- •The delay and restarting of the poster use also impacted the audit process. However, once the poster was restarted with clear communication from leaders about its importance and expectations of its use, the audit process has demonstrated improved use.
- Staff education was also challenging with virtual meetings rather than in-person meetings.
- •Due to the Covid 19 surge and subsequent visitor limitation policies, the full implementation of this new tool was greatly impacted because we were not able to educate and engage families in their role in fall prevention as planned. Lastly, due to Covid 19 infection prevention strategies, patients were not allowed to walk outside of their rooms which could have contributed to weakness and debilitation which can contribute to increased risk of falls.

Conclusion:

- Utilizing an evidence-based patient engagement tool to assist in fall prevention and harm reduction is a key element in a comprehensive fall prevention program.
- •Falls are a complex problem, and this tool is one of the many strategies that can be used to reduce falls and falls with harm.
- •This tool specifically engages patients and/or family in fall prevention and helps develop a partnership with healthcare staff.
- •Although fall rate data did not improve, an audit analysis of Covid 19 patients determined these patients had a higher fall rate than non Covid 19 patients.
- •Lastly, leadership support has been critical to the tool's adoption and continued use

References

Using the QR code, references available upon scan.



Acknowledgments

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