"TRIPPING OVER OUR FALLS": THE FALLS REDUCTION & PREVENTION PROGRAM AT HAHNEMANN UNIVERSITY HOSPITAL

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OBJECTIVES

- Identify nursing's role in promoting patient safety and protecting patients from harm.
- Describe innovative strategies implemented by the Falls Prevention and Reduction Program aimed at reducing and preventing falls.
- Discuss interdisciplinary roles in reducing and preventing patient falls.
- Compare patient fall rates pre and post implementation of innovative strategies.

FALL PREVENTION RELEVANCE

Governing Factors

- Center for Medicare & Medicaid Services
- The Joint Commission
- National Quality Forum
- NDNQI
- State Authorities
  - Pennsylvania State Reporting System

Fact

Fall are most commonly reported safety event reported in hospitalized patients & most common adverse effect reported in facilities.

NURSING'S DUTY TO PREVENT HARM

- ANA Code of Ethics
  - Provision 2 Nurse's Commitment
  - Provision 3 Promotes, Advocates, & Protects
- Standards of Practice and Professional Performance
  - Education
  - Quality
  - Collaboration

CURRENT KNOWLEDGE

- General Facts
- Multiple Fall Assessment Tools
- Falls Definitions
  - National
  - State
  - Institutional definitions
- Fall Prevention Interventions

PATIENT EXPERIENCE WITH FALLS

- Embarrassment
- Added medical treatments
- Fear of recurrent fall
- Fractures & Injuries
- Loss of mobility
- Increased length of stay (LOS) in acute care facilities
- Admission to Long-Term Care Facility post hospitalization

STAFF NURSE EXPERIENCE

- Guilt, Anxiety, & Self-blame
- Failure to keep patient free from harm
- Increased Workload and Resources
- Increase LOS: 6.27 days
- Financial Implication:
  - $13,000 to $25,000
- Legal Implications

S.W.O.T. ANALYSIS

Strengths:

- Reporting Process
- Care Delivery Model
- Administrative Support
- Corporate Support

Weaknesses:

- Standard Follow-up
- Awareness
- Formalization
- IS Involvement
- Interdisciplinary Support

Opportunities:

- Education
- Policy Revision
- Committee Development
- Benchmarking
- State Involvement

Threats:

- Over-Reporting
- Costs
- Patient Safety
- Fear of Reporting
- “Fall Fatigue”

FALLS PREVENTION COMMITTEE DEVELOPMENT

COMMITTEE ELEMENTS

- Consistency
- Analytical
- Accountability
- Creative
- Progressive
- Goal Oriented
- Multi-disciplinary

FALL COMMITTEE ACTIONS

- Weekly meetings
- Fall Alert Team
- Post Fall Investigation
- Unit-based Fall Trending
- Unit-based Fall Champions
- Outpatient Setting Involvement
- PA Hospital Engagement Network (HEN) Project
- National Falls Awareness Day

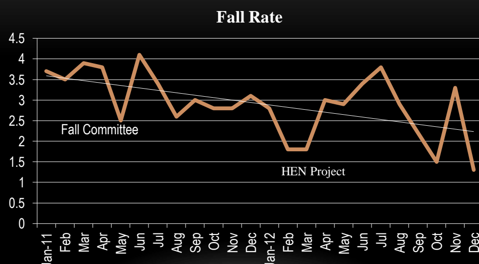
FALLS COMMITTEE ACTIONS

- Equipment
  - BSC with transfer benches
  - Mobility Alarms
  - Beds
    - Low to ground
    - Built-in alarms
- Technology
  - CPOE high risk meds
  - IMPACT Project
- Products
  - Short gown trials
  - Stationary furniture

PREVENTION STRATEGIES

- Safety Huddles every shift
- Recognize Common Risk Factors
- Be proactive, not reactive
- Remain with patients while toileting
- Family Education
- Utilize bed alarms when appropriate
- Bed alarms with every patient falling within 3 mos.
- Patient specific plan of care.
- Round on patients
  - PEP Rounds (Pain, Elimination, Position)
  - Q2 hours
  - No Pass Zone
- E-Learning competency

HUH FALL RATE TRENDS



CONCLUSION

- Governing Healthcare Agencies
  - ANCC & Magnet
  - CMS
  - AHRQ
- Patient Safety
  - Quality Care
  - Multi-disciplinary
  - Evidence-Based
- Organizational Awareness

NATIONAL FALLS AWARENESS DAY

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