To reduce the incidence of patient falls through improved accountability with evidence-based fall standards.

**Significance**

- Falls are the most widely reported safety concern in hospitals and add excessive costs.
- For patients, falls are associated with functional decline, loss of independence and even death.
- For organizations, falls are considered “Never Events” and are preventable costs that are absorbed by hospitals.

**Missed Nursing Care Model**

- Missed nursing care, as conceptualized within the Missed Nursing Care Model, is defined as any aspect of required patient care that is omitted (either in part or in whole) or delayed.

**Strategy and Implementation**

**Hierarchy of Improvement**

<table>
<thead>
<tr>
<th>Track and Triage Individual Nurse</th>
<th>Track and Triage Environment</th>
<th>Staff Training and Coaching</th>
<th>Build Standard into EMR</th>
<th>Proactively Review Standards of Care Prior to Fall with Associated Coaching</th>
<th>Set Expectations for Standardization and Affiliation</th>
<th>Education to Standards of Reference</th>
<th>Create an ERP Standard for Fall-Prevention</th>
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**Fall Standard of Care**

**Basic standard of care interventions for every patient**

- Provide adequate lighting in room, hallway and bathroom.
- Assure that the floor is dry at all times.
- Remain with patient when assisting to bathroom or commode.
- Keep bed in the low position.
- Side rails up on bed if indicated.
- Lock chair with or without arms.
- Educate family on the importance of safety and fall prevention.

**High risk interventions for patients with Morse Score >45**

- Assessed at risk for falls accurately.
- Fall Alert Door sign if class.
- Red slippers on patient/non-skid footwear available and used appropriately.
- Yellow fall-risk sticker on wrist band.
- Bed/hair arm of place and working properly.
- Hourly monitoring in place with intent to talk.
- Cluster-free room, position, standing, and equipment checks to create a safe environment for patient to ambulate about.
- Assessments in reach.
- Deliberate assessment with appropriate equipment identified and used per MI and MM standards.
- PT referral initiated due to mobility concerns.
- Prioritizing patient call light and response.
- Progressive mobilization plan.
- Assisted devices and other equipment inspected and deficits corrected.
- Diaper desagitation via item placement or staff and family involvement.
- Pharmacy referral for medication interactions and reactions.
- Financial risk management tooling protocol if needed.

**Evaluation**

- Our data indicates that implementation of Missed Care Nursing Model in conjunction with Just Culture has contributed to a reduction in falls below national benchmark for the last two consecutive quarters.

**Implications and Strategy**

- Inconsistencies in practices are at the heart of why some organizations cannot obtain sustainable results.
- Fall reduction strategy success:
  - Understanding how to assess and intervene when important standards are omitted
  - Promoting a coaching and learning environment when standards are misunderstood
  - Addressing system level issues
  - Holding staff accountable when required standards are consciously disregarded

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