

Fall Risk Reduction in the Home Health Care Setting

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Abstract

Purpose:

The overall goal of this project is to reduce incidence of patient falls in the home health care setting through effective education.

Relevance/Significance:

This project's goal of improving patient safety relevant to fall risk and injury reduction is in keeping with the conference goal of introducing and implementing a viable solution - via a patient friendly education tool - to continually improve multidisciplinary practice with our home care population.

Strategy and Implementation:

High prevalence of falls across the care continuum prompted development and testing of a visual tool to be used in the home care setting to teach patients fall precautions. The Fall Risk Reduction Tool was created by a team of nurses and therapists in a hospital-based home care agency. Pictures of interventions are shown including, in part, the appropriate use of assistive devices, eliminating trip hazards, awareness of medication effects, and counting to ten before walking. The visual tool was tested in a sample of 2263 patients assessed at risk for falls, and over age 65 as part of a falls reduction program that promotes patient participation in care and safety. The two part form was initiated by the home care admitting clinician and thereafter used by multidisciplinary professionals involved in the patient's care during each home visit.

Implications for Practice:

The visual tool makes it possible for nurses to efficiently and effectively teach to identified interventions to reduce patient falls. Promoting awareness of fall risks at home through the use of a visual tool effectively addresses National Patient Safety Goals and the Magnet Culture of Safety.

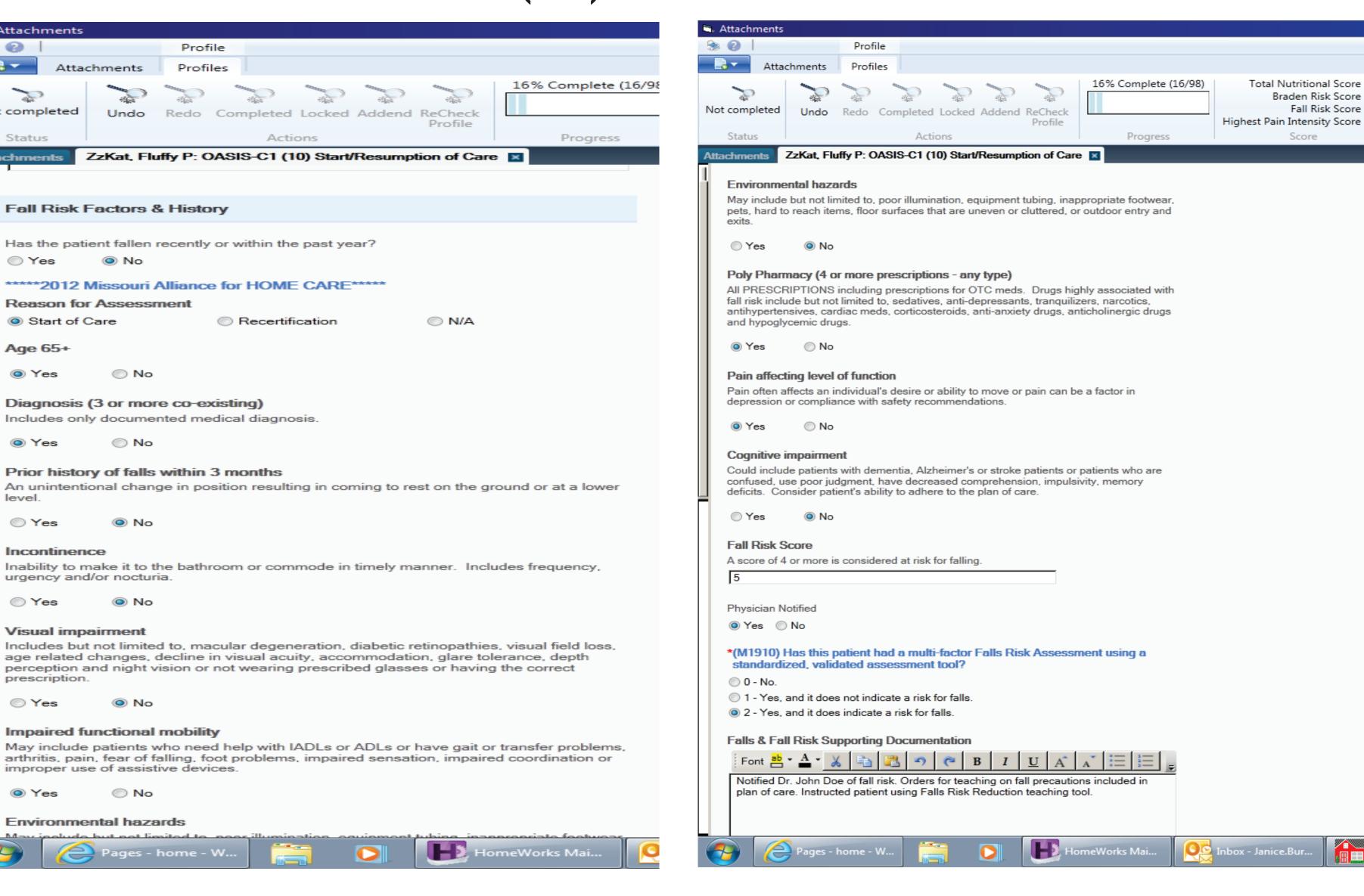
Why We Chose Falls:

- We chose falls for our project due to our own family falls, as well as recent multiple patient falls, some with injuries.
- One of the National Patient Safety Goals is to reduce harm from injury due to falls.
- Also, the highest incidence of occurrence reports for us is falls.

PICOT Question:

In patients identified with fall risks by OASIS, 65 years old and above, does a standardized teaching tool vs. our current fall prevention teaching reduce falls over a 16 month period?

Oasis-C1 (10) Fall Risk Assessment



Challenges to the Program:

- Getting patients signed up to program consistently.
- Consistency and thoroughness of occurrence reporting.

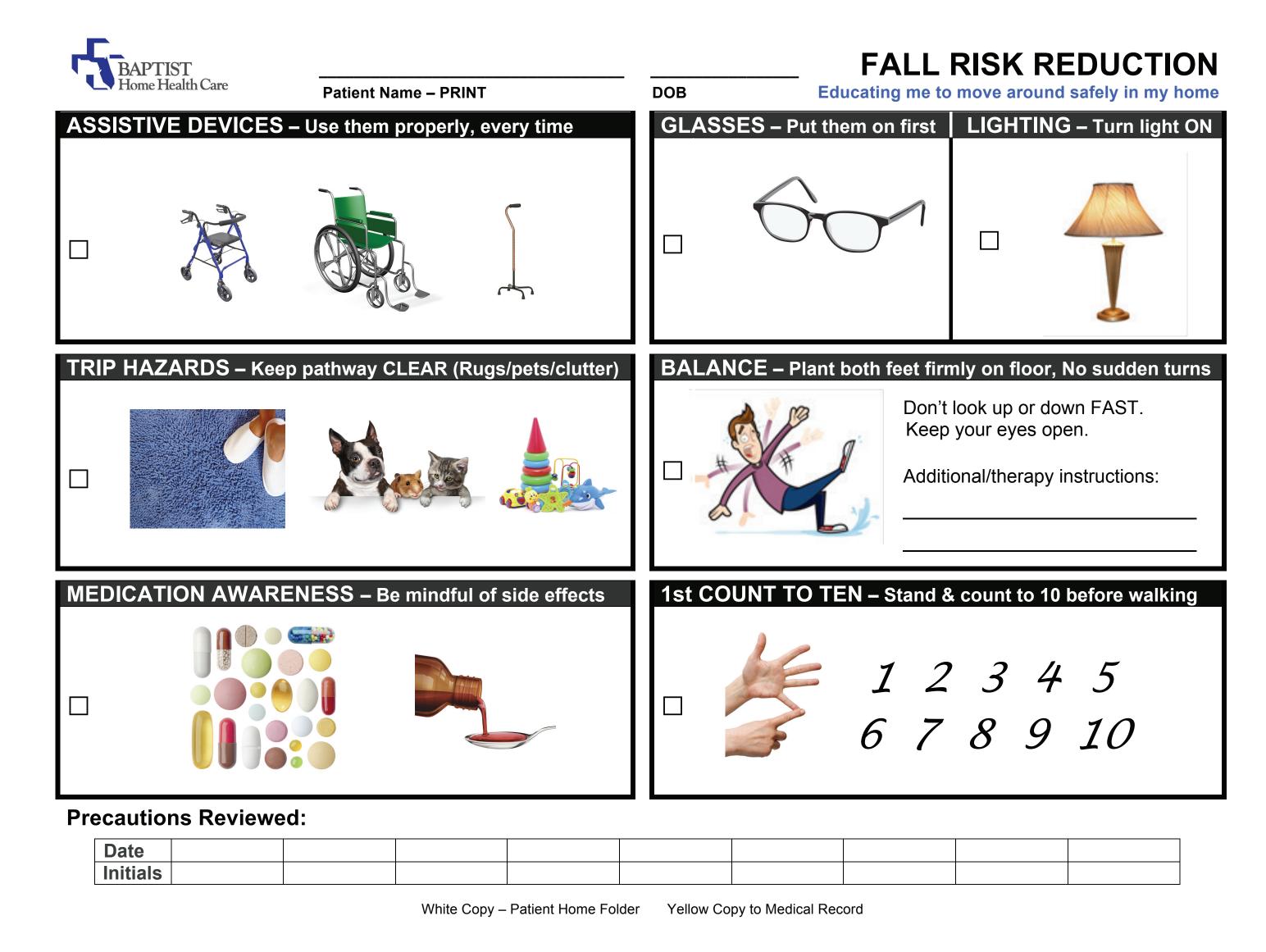


How We Developed Our Teaching Tool:

As an evidence based practice, through the 10 articles that we researched on falls history, we identified areas of risk for the Fall Risk Reduction teaching tool that we developed. We went over all falls reported over the year prior to the project starting, so we could compare number and types of falls We developed the pictorial teaching tool that can be left in the home for reference for the patient, as well as providing consistency of teaching by all clinicians.

In the process of evaluating the falls and the reason patients fell, we iden-tified a trend with loss of balance. With additional Evidence Based Re-search, we discovered 2 new research articles that identify balance deficit as a problem for patients over the age of 65. The Fall Risk Reduction picto-rial teaching tool was updated to incorporate balance education and teaching.

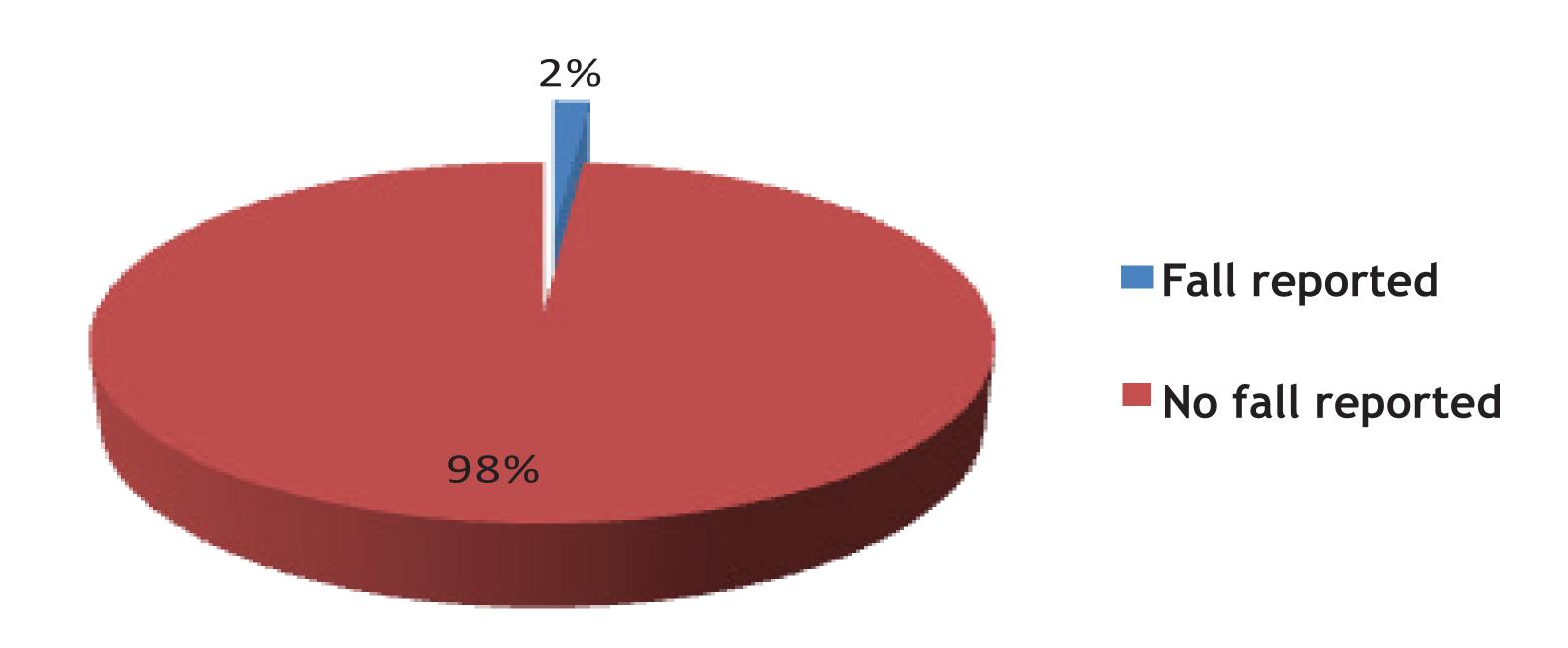
Additionally, we met with Physical Therapists to incorporate consistent balance teaching into the teaching tool.



We have currently completed receiving the copies of the teaching tool, logging and identifying patients in the program, and tracking the results of any falls during the 16 months.

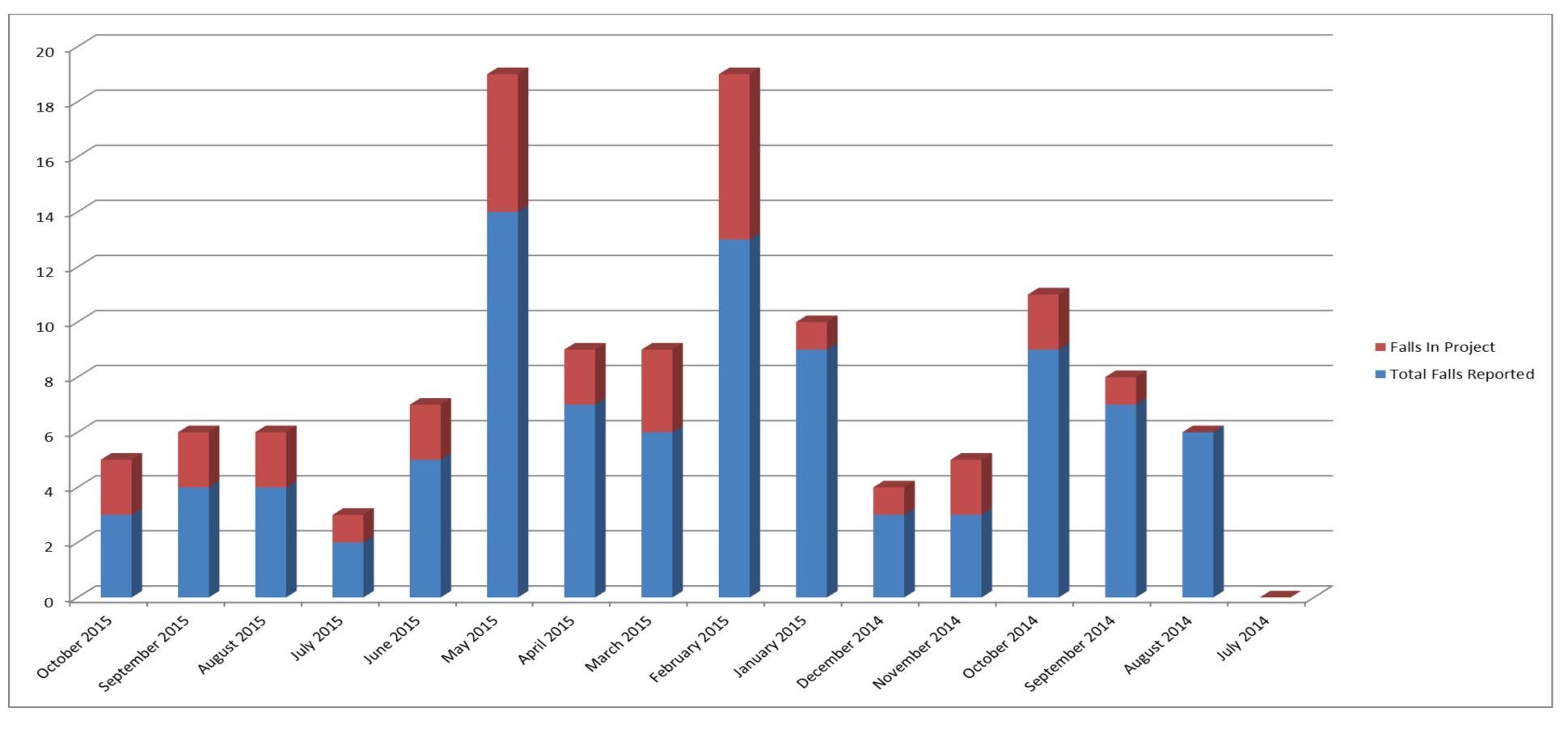
At the end of the 16 month period we have compared previous vs. current fall incidence to identify the difference using this tool—and our collective teaching—has made.

Patients At Risk For Falls



Results:

- We have identified after analyzing the occurrence report data that patients logged in the project had reduced falls with minimal injuries. They had consistent teaching using the pictorial teaching tool.
- We saw increased consistency of reporting due to the continued education on the reporting process. We had a total of 2263 patients involved in this project which met the eligibility criteria.
- We identified that a total of 95 falls were reported over the 16 month period.
- Of those, 32 were in the project.
- 1.41% of those in the project had falls reported during the 16 month period.



This graph shows that although patients in our project were prescreened and fell into the "high risk" for falls category, they actually had fewer falls over the 16 month period of our project than patients not in our project, who were either under age 65, or determined to not be at risk for falls at SOC according to the admission assessment. In 16 months we had a total of 95 falls reported, and only 32 of those patients were in our project, 63 were not.

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