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Facing Falls by Staying in the Zone



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Introduction /Background

- Patient fall-related injuries are a serious problem in acute care hospitals. The Centers for Disease Control and Prevention [CDC] (2010) estimates that by 2020, the annual direct and indirect cost of falls will reach \$ 54.9 billion. These falls are reasonably preventable by following the falls prevention guidelines.
- According to fall huddle documentation for the period of April 27th to June, 13th 2013, 3-South at Homestead Hospital had **10 falls, 3 with injuries**.

Project Goal

- The goals of this performance improvement project were:
 - To determine the root causes of falls on 3-South
 - To eliminate falls with injury to a rate of zero in a one year period.



The Plan Do Check Act (PDCA) model for performance improvement was used to guide the development and implementation of the project.

Plan

- The UPC members examined the falls data to determine root causes.
- Created block assignment process and fall prevention toolkit during June 2013 UPC meeting.
- A pre- and post-implementation data was obtained to determine staff's perception of the effectiveness of the fall prevention tool kit.

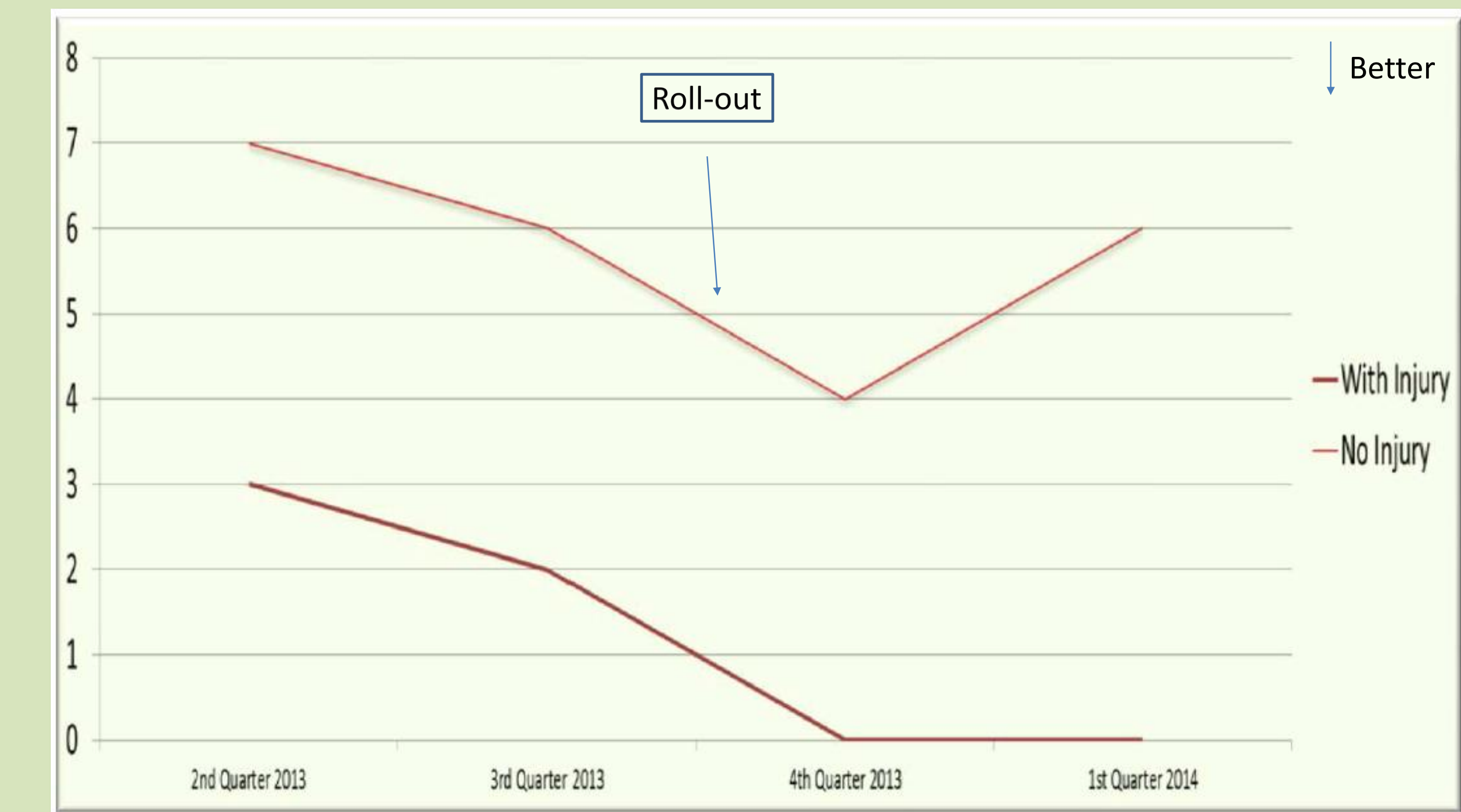
Do

- Education was provided to staff before the implementation and reinforced throughout the project
 - Staff education conducted through in services and reinforced in stand-ups
- The block assignment process & fall prevention toolkit were rolled-out in July 2013
 - Staff positioned to stay in their patient zone
 - Incorporate family in patient care , walking rounds
 - Promote correct use of minimal lift equipment
 - Bed alarms in place for high risk patients
 - Door magnets properly placed for visual alerts
 - MORSE fall score became part of hand-off report (Spiva, & Hart, 2013)

Check

There were no falls with injuries after the implementation of the project.

- Barriers encountered during project:
 - Too many admissions/discharges for some block assignments
 - When blocks had few patients - RN was assigned a high number of admissions
 - Acuity distribution of blocks was uneven
 - Lack of teamwork – need for culture change
 - Bed alarms were off
 - Magnets used, blue (fall risk) and red (already fell) were not being used properly
 - Falls prevention champion was assigned but never exercised role



Number of falls on 3-South with & without injuries
January 2013 – December 2014.

Act

- Since the implementation of this project in July 2013, 3-South has had six consecutive quarters with no falls that resulted in injuries. UPC members continue to monitor falls data for changes.
- Periodic in-depth falls assessments to identify problems are also conducted. The current focus is to identify factors that contribute to non-injury falls in order to implement appropriate evidence-based interventions.

References

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