Fall Prevention Initiatives to Reduce the Number of Falls With or Without Injury on a Multi-Specialty Progressive Care Unit

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Citation
Croswell, Claire, "Fall Prevention Initiatives to Reduce the Number of Falls With or Without Injury on a Multi-Specialty Progressive Care Unit" (2016). All Publications. 2702.
https://scholarlycommons.baptisthealth.net/se-all-publications/2702

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Introduction

- Baptist Hospital was a small organization established in 1960, and as the healthcare system changes, so does the increased challenges with the aging population in the community.
- In 2014, Baptist Hospital increased to a bed size of 728 to accommodate the influx of the admission rate of patients 65 years and older. With this in mind, the hospital began its journey by educating the staff to acquire NICHE Certification to enable them to gain knowledge of the aging process.
- As a Magnet Certified institution, we are dedicated to evidence-based practice and patient safety. In our continual effort to enhance patient care, our hospital achieved NICHE Certification in 2015.
- This performance improvement initiative focuses on fall prevention initiatives to reduce the number of falls with or without injury of patients 65 years and older.
- The purpose of this initiative is to increase nurses’ knowledge on high-risk falls medications, care equipment while preventing falls with or without injury.

Methods and Implementation

- A pre-test and post-test following interventions was developed and distributed to 50 nurses to assess the staffs’ knowledge on falls and falls precautions (See Appendix B and C).
- Creation of the “Fall Champions” and the “Extended Falls Precautions Bundle” (See Appendix E).
- Patient rounding addressing position, pain, and potty
- New beds with bed exit alarms
- Leadership rounding to assess patient and family needs daily
- Daily interdisciplinary rounds to assess patients at risk for falls
- Weekly audits for compliance
- Post fall debriefing
- Education on proper documentation of falls
- Improved handoff communication of falls and falls prevention during change of shift
- Created a badge buddy for all nursing staff with high-risk falls medications (See Appendix D).

Background

- Literature searches have shown a correlation between high-risk falls medications and care equipment (eg., sequential compression devices) relating to falls with or without injury among adults 65 years and older.
- The number of falls with or without injury relating to patients 65 years and older was investigated from year 2013 to 2015 (See Appendix A) and found to be an opportunity for improvement.
- Falls is defined as preventable under the new healthcare guideline and is a non-reimbursable cost to hospitals.

Results

- Results of this project indicated an overall increase in nursing knowledge as evidenced by the post-test results.
- Nursing staff felt that the educational initiative was beneficial to their work environment.
- An increase in communication has occurred through utilization of the registered nurse and clinical partner report sheet.
- Early implementation of the extended falls precautions bundle showed a significant reduction in falls with injury between its inception in 2013 through 2015 (See Appendix F).

Conclusion

- In an effort to improve the standards of care relating to fall prevention, having a performance improvement project focusing on patient’s safety was positively received by nursing staff.
- The current emphasis on practicing in a safer environment and encouraging every one to remember that the greatest way to treat our patients is by following best standards of care.
- Having a falls precautions bundle incorporating the assessment of high-risk medications, care equipment, and providing patient/family education has decreased our incidence of falls with and without injury.

Appendix A

Appendix B

Appendix C

Appendix D

Appendix E

Appendix F

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