Reducing Patient Falls... Progress and Insight

The Problem

Patient falls are a national problem.

- CDC estimated cost for fall injuries for those 65 and older is expected to exceed \$19 billion
- MDPH estimated the total charges for acute care hospitals events associated with falls were \$471 million in 2006

Aim/Goal

In working towards our institutional goal of eliminating preventable harm, one place that we focused our efforts was in preventing falls with injury.

The Team

Falls Committee, and Tri-Chairs: Deborah Adduci, PT, Christine Kristeller, RN, MS, and Sharon O'Donoghue, RN, MS

The Timeline of Interventions

2007

- Daily Morse Fall Risk added to daily Nursing Note
- Red Caution High Fall Risk signs were created to signify a patient at risk
- Patients noted as fall risk on POF alternate dashboard



2008

- Replaced single-treaded slipper socks with doubletreaded
- Patient Education tool created regarding fall prevention
- Do Not Get Up signs available in many different

languages



- In depth fall analysis done after every fall
- Patients admitted after a fall were admitted to rooms near the nurses' station

2009

- Electronic nursing care plans developed and included falls prevention
- Falls algorithm steers staff toward fall prevention strategies based upon the reason the patient is at risk to fall
- Improved chair alarms purchased



2010

- GRACE initiative (addressed unique concerns of vulnerable elders)
- We Promise initiative
- Capacity for low beds to ring centrally
- Delirium kits distributed to each unit

 We Promise...

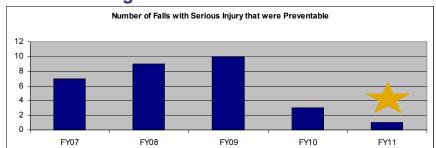
 We Promise...

2011

- IHI Bundle trialed
- Patient/staff member letter to Oncology patients to raise awareness



The Results/Progress to Date



Lessons Learned

By reviewing each fall with injury and altering our falls prevention strategies, we have been able to improve our number of preventable falls with injury.

Next Steps/What Should Happen Next

- Roll out of a new falls risk assessment
- Nursing Lean Documentation Group is developing an improved method to document falls risk assessment, fall prevention initiatives and GRACE initiatives.

For More Information Contact

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