

# Reducing Falls in a Small Community Hospital

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## BID-Needham

### Introduction/Problem

Annually, hundreds of thousands of patients fall in hospitals, with 30-50% resulting in injury. Injuries from falls result in extended length of stay (>6 days), increased morbidity and additional cost of > \$14,000 per fall. Serious falls are consistently among the top ten sentinel events reported to the Joint commission(Joint Commission 2016). Falls are particularly prevalent in the elderly population during acute illness. BID-N is a small community hospital with a patient population whose age averages >75 years.

In 2015, through monthly quality surveillance, the nursing department and falls committee at BID-N identified an increase in patient falls; since 2015, there were two falls reportable as SRE's. As a result, the nursing department and the falls committee studied the pattern and types of falls that occurred through the RCA process. The Morse falls scale is used at BID-N to assess fall risk for every patient admitted. Through the detailed study of falls occurring at BID-N, the process for assessing risk for falls as well as fall prevention techniques were found to need updating to include the current best practices for fall prevention.

### Aim/Goal

- Overall goal was to reduce all patient falls to under the benchmark goal of 2.5
  - Reduce falls with injury to 0
- Educate patients and families to participate in falls prevention at BID-N

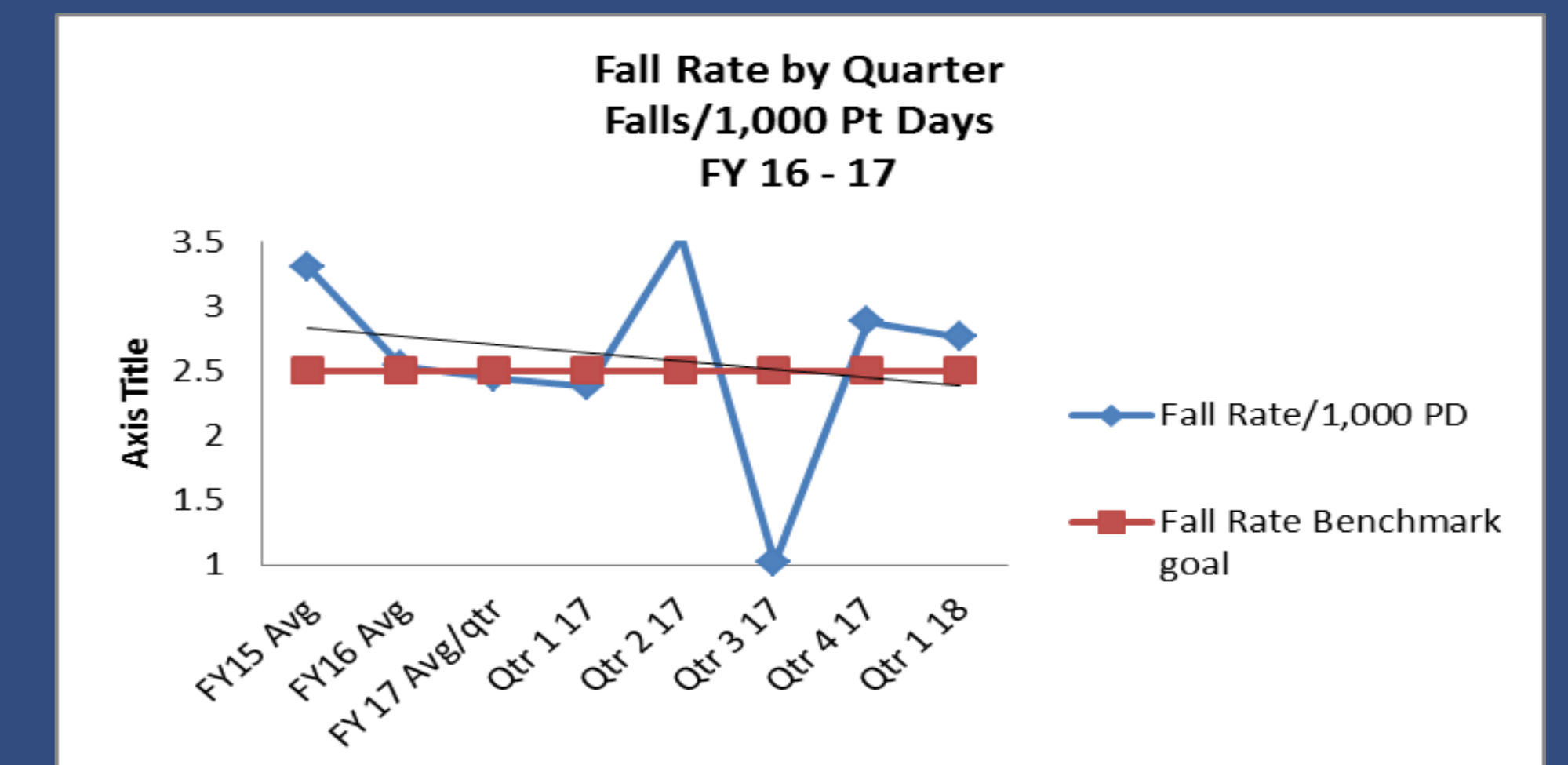
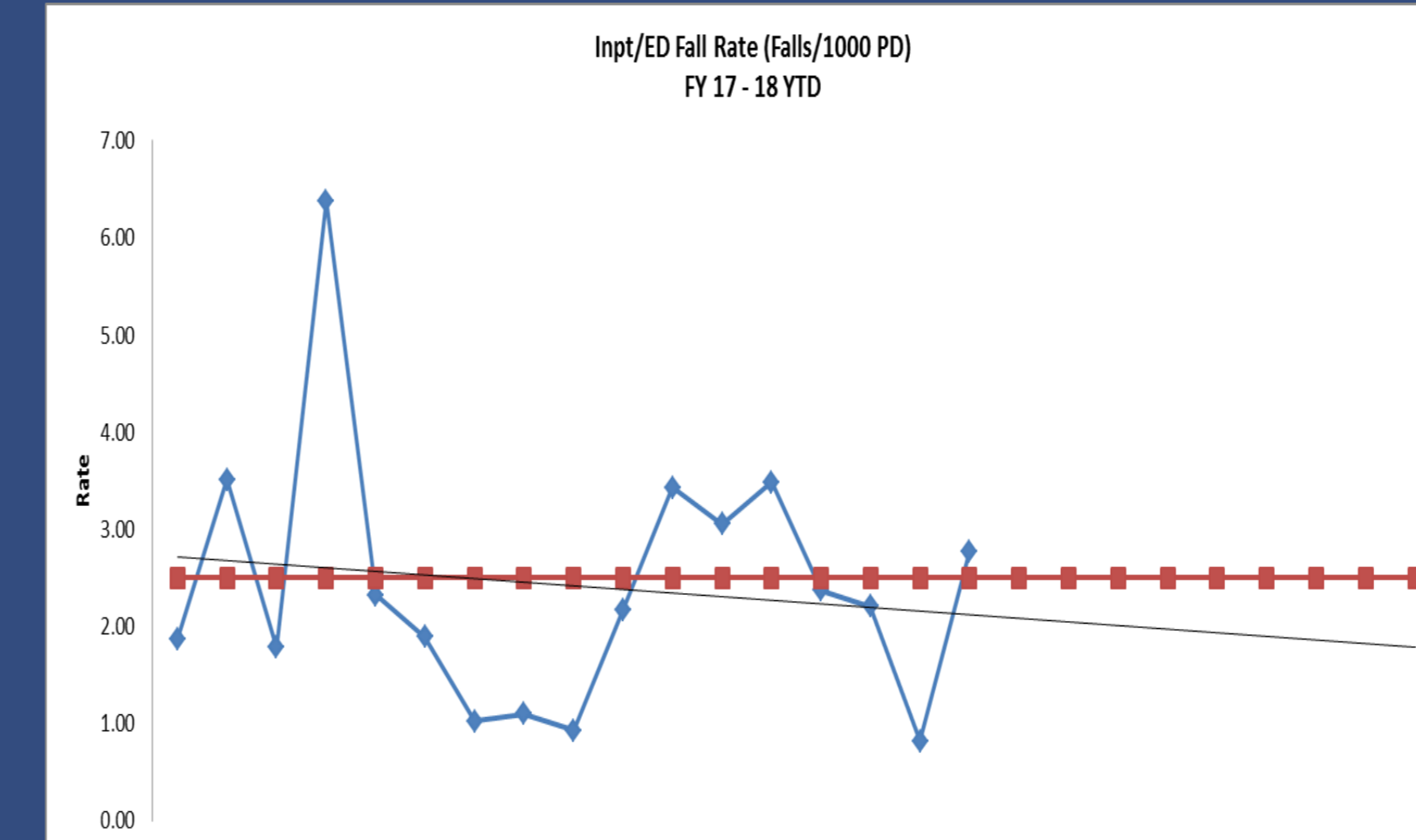
### The Team

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### The Interventions

- Policy and guidelines for Fall Precautions updated based on current evidence
- Fall Prevention resources were updated and new resources added: low beds, rubber floor mats, bed and chair alarms for every patient room, new patient lounge chairs that were easier to operate.
- Broadened safety and assistance throughout the toileting process
- Revised the Morse Fall Scale tool to be more comprehensive re: patient history of falls, expanded advice re: tethering devices;
- Expanded patient and family engagement practices to increase 'buy-in' for adhering to fall prevention activities
- Falls Committee now has two PFAC members

### Results/Progress to Date



Patient falls per month and quarterly fall rate have steadily decreased since project implementation. No falls with reportable injury since March 2017  
PFAC members contributing significantly to the falls prevention discussions

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