

8-21-2017

# Identification Strategies For The Very High Fall Risk Patient In An Acute Inpatient Psychiatric Unit

P6 Inpatient Geri-Med Psychiatry


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## Recommended Citation

P6 Inpatient Geri-Med Psychiatry; Pelletier, Haley; Nayak, Suneela; Tyzik, Stephen; and Hanselman, Ruth, "Identification Strategies For The Very High Fall Risk Patient In An Acute Inpatient Psychiatric Unit" (2017). *Maine Medical Center*. 10.  
<https://knowledgeconnection.mainehealth.org/mmc/10>

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**Project: P6 - Patient Fall Prevention**  
**Last Updated: 8/21/2017**

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**Problem/Impact Statement**

Patients in the inpatient psychiatric unit of P6 at Maine Medical Center (MMC) are of a much higher fall risk than the average patient population in the remainder of the hospital. Quality improvement around falls prevention is warranted, due to a recent increase in number of falls on the unit.

**Scope**

**In scope:** All clinical staff working within the P6 unit at MMC

**Out of scope:** Psychiatric units at non-MMC hospitals, as well as units within MMC that care for patients of high fall risk

**Goal/Objective**

100% of the time, very high fall risk patients will be wearing a yellow shirt and yellow bracelet, denoting their “very high fall-risk” status

**Overall goal: Improve patient safety by reducing falls on the inpatient psychiatric unit at MMC**

**Baseline Metrics/Current State**

**A patient who has the status of “very high fall risk” is someone who:**

- Needs assistance with all mobility
- Has any cognitive impairment that requires they should not be moving without help

**At baseline**, the unit felt that their falls rates had been “creeping up,” leading them to partake in new falls-prevention procedure.

- Formerly, patients wearing purple on the unit were considered “moderate to high risk for falls”
- This was ambiguous in that patients with “high” fall risk should be treated differently than those patients only of “moderate” fall risk

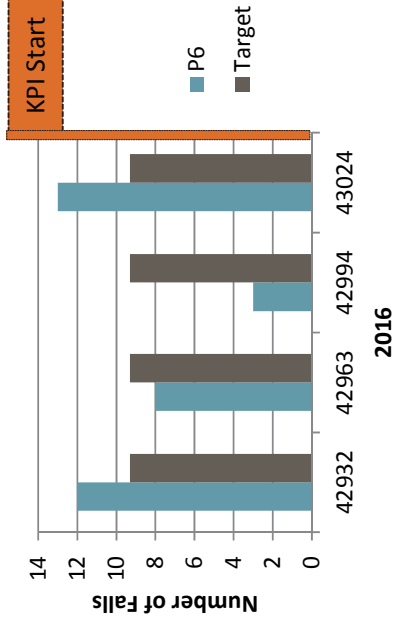
**Root Cause Analysis**

**Fall- Risk Assessment:**

- Balanced score card tool
- Get Up & Go assessment performed by the Occupational Therapy Staff
  - This assessment is different than the one that the nursing staff completes
  - Due to the different scales, there needs to be a way to make sure the fall levels match

The focus of this KPI is focused only on those patients that are falling as the result of geriatric and psychiatric impairment, all behavioral fall & the prevention of those were not highlighted in these efforts.

**Baseline: Number of Falls on P6**



**Figure 1:** Baseline number of falls per month, prior to implementation of the KPI and new falls prevention procedures.

**Countermeasures**

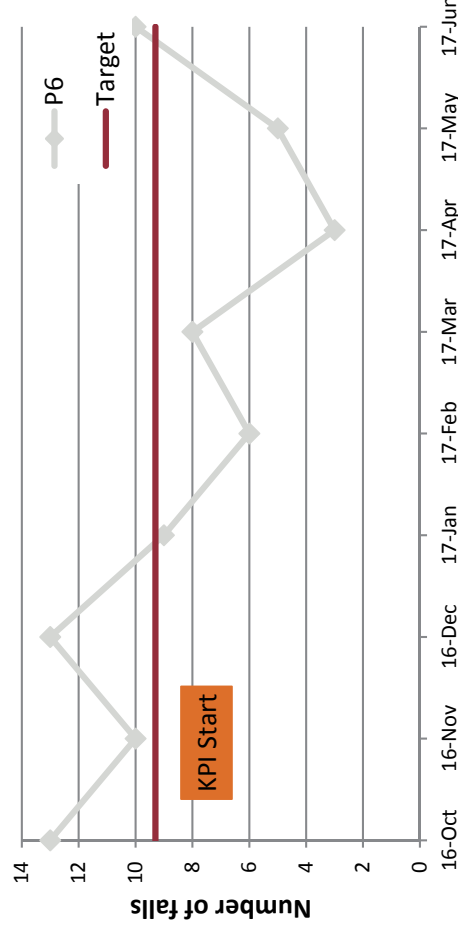
Action	Owner	Due Date	Status
Study falls data of patients on P6 wearing yellow bracelet only	P6 Practice Counsel	Oct. 2016	Complete
Develop KPI to implement the addition of yellow shirts	P6 Practice Counsel	Oct. 2016	Complete
Partnered with Linen Services to stock yellow shirts and yellow hospital gowns	P6 Practice Counsel	Life of the project	Ongoing
<b>Change in workflow when patient is flagged as “very high fall risk,” and is wearing a yellow garment:</b>	P6 Practice Counsel	Life of the project	Ongoing

1. Nursing staff conduct fall-risk assessment on patient
2. At morning report: OT and RN discuss updates with patient

- If there was a fall in the past 24 hours there is an immediate new fall risk assessment & care plan developed by the OT
- 3. All patients with high fall risk status are put in clean yellow shirts/ gowns each day during their hygiene time
- 4. There is a whiteboard with patient name & associated fall risk in different colors, reflected on the bed board
- 5. On each patient this question is considered:
  - “Is this a patient who is receiving rehab, and could they benefit from PT to get them back to a lesser fall risk?”
- 6. Every 15 minutes, available CNAs on the unit do ongoing sweeps for clutter that could contribute to falls

**Outcomes**

**Number of Falls by Month**



The unit reports a 95% reduction in falls by patients who are deemed “very high fall risk” since they began utilizing operational excellence.

**Figure 2:** Number of falls after implementation of KPI and new fall prevention work-flow.

**Next Steps**

- The yellow shirts for high fall risk patients has become hard-wired throughout all of P6 will all staff members. The staff on P6 will continue to remain diligent (sustainment)
- The best practice measures, and changes in workflow innovated by the Inpatient Psychiatric unit at MMC have been adopted by other units at MMC (spread)
- It is a hope for the unit that a higher proportion of patients requiring 1:1 care will be able to receive it