Patient Fall Prevention

P6 Inpatient Geri-Med Psychiatry

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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

Countermeasures

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

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

Moderate Fall Risk:
These falls are attributed to the result of subtle clinical episodes that generally do not impair the patient significantly.

High Fall Risk:
Falls are high risk if patients fall whilst wearing a yellow shirt and bracelet, and this predefined situation is made worse by the patient’s condition.

Behavioral Fall Risk:
These falls are exclusively the result of a behavioral episode, and sometimes these patients are not highlighted in these efforts.

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 not highlighted in these efforts.

Next Steps

- The yellow shirts for high fall risk patients have become hard-wired throughout all of P6 with 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

Study

![Figure 1: Baseline number of falls per month, prior to implementation of the KPI and new falls prevention procedures.](image1.png)

![Figure 2: Number of falls after implementation of KPI and new fall prevention work-flow.](image2.png)