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Patient Fall Prevention

R9 West Cardiovascular

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Project: R9W Patient Fall Prevention in a Cardiology Unit

Last Updated: 2/5/2018

Executive Sponsor: Mark Parker
Facilitator: Cathy Palleschi

Team Members: R9W Quality Council & Staff, Diana Verrill, Cecilia Inman, Erica Weightman, Suneela Nayak, Stephen Tyzik, Ruth Hanselman

Countermeasures

<table>
<thead>
<tr>
<th>Action</th>
<th>Owner</th>
<th>Due Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conduct a root cause analysis</td>
<td>Diana Verrill</td>
<td>4/12/2017</td>
<td>Complete</td>
</tr>
<tr>
<td>Review AHRQ Fall tool kit</td>
<td>Quality Committee</td>
<td>4/12/2017</td>
<td>Complete</td>
</tr>
<tr>
<td>Develop &amp; educate 100% of the staff on falls</td>
<td>Diana Verrill</td>
<td>5/17/2017</td>
<td>Complete</td>
</tr>
<tr>
<td>Start mitigation strategy, monitor the number of falls and post results</td>
<td>Quality Committee</td>
<td>5/17/2017</td>
<td>Complete</td>
</tr>
<tr>
<td>Document STRATIFY &amp; post daily in patient room while concurrently completing fall risk tool in Epic</td>
<td>All staff</td>
<td>5/17/2017</td>
<td>Complete</td>
</tr>
<tr>
<td>Seek fall risk clip for ID bracelet</td>
<td>Stephen Tyzik &amp; Cathy Palleschi</td>
<td>NOW</td>
<td>Incomplete</td>
</tr>
<tr>
<td>Develop a patient educational tool that help pts understand the mitigation strategy R-9 is using to prevent falls.</td>
<td>All staff</td>
<td>6/17/2017</td>
<td>Complete</td>
</tr>
<tr>
<td>Share the tool with house-wide fall committee for their feedback</td>
<td>Cathy Palleschi</td>
<td>6/23/2017</td>
<td>Complete</td>
</tr>
</tbody>
</table>

Next Steps

Continue concurrent documentation of fall risk tool and STRATIFY tool, deploy the fall risk bracelet & assess patients reaction and deploy the fall risk education tool and assess feedback from patients.

Problem/Impact Statement:

Every year in the Unites States, hundreds of thousands patients fall in hospitals, with 30-50% resulting in injury. Injured patients require additional treatments and sometimes prolonged hospital stays. In one study, a fall with injury added 6.3 days to the hospital stay. The average costs for a fall with injury is about $14,000.

Scope:

In scope: Clinical Staff on R-9 will reduce the amount of patients who fall in their unit.

Goal/Objective:

Overall Goal: Reduce the prevalence and severity of falls in patients hospitalized on R-9 West.
- KPI 1: Educate 100% of the staff on falls
- KPI 2: Reduce R-9's fall rate from an average of 2.3 falls per 1,000 patient days to 0 within two quarters.

Baseline Metrics/Current State:

- Due to the R-9 patient population and their procedures, all patients were considered high fall risk
- Current tool did not predict which patients could fall
- There was not an educational tool designed for high fall risk patients that explained the mitigation strategy that would be deployed to prevent falls
- There was not any identifiable marker that visibly demonstrated that the patients was at high fall risk other than a sign on the door.

Root Cause Analysis:

- Patients with fall history
- Cognitive/visual impairment
- Effects of new medications (i.e. change in BP)
- Patients don’t see themselves as a fall risk
- No fall risk arm band
- Staff not remaining with patients who are at the highest fall risk when using commode or bathroom
- Patient room may not be reduced in clutter
- Patient belongings out of reach
- Staff not always completing hourly rounding with proper ratios
- Bed alarms not always armed
- Patient demands to not have the bed alarm on and remain alone in bathroom
- High Patient Fall Rates
- Patient Falls
- No fall risk arm band
- Patient demands not to have the bed alarm on and remain alone in bathroom
- Methods/Process
- Human Factors
- Material
- Knowledge
- Measurement
- Machine/Equipment

Outcomes

R-9 Fall Rate per 1,000 Pt Days

<table>
<thead>
<tr>
<th>Month</th>
<th># Falls/Month</th>
<th>Waste Associated Costs (Hard $)</th>
<th>Total Waste ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>April</td>
<td>2</td>
<td>$28,000.00</td>
<td>$-8,750.00</td>
</tr>
<tr>
<td>May</td>
<td>0</td>
<td>$0.00</td>
<td>$19,250.00</td>
</tr>
<tr>
<td>June</td>
<td>1</td>
<td>$14,000.00</td>
<td>$5,250.00</td>
</tr>
<tr>
<td>July</td>
<td>0</td>
<td>$0.00</td>
<td>$19,250.00</td>
</tr>
<tr>
<td>Aug</td>
<td>0</td>
<td>$0.00</td>
<td>$19,250.00</td>
</tr>
<tr>
<td>Sep</td>
<td>0</td>
<td>$0.00</td>
<td>$19,250.00</td>
</tr>
<tr>
<td>Oct</td>
<td>0</td>
<td>$0.00</td>
<td>$19,250.00</td>
</tr>
<tr>
<td>Nov</td>
<td>0</td>
<td>$0.00</td>
<td>$19,250.00</td>
</tr>
<tr>
<td>Dec</td>
<td>0</td>
<td>$0.00</td>
<td>$19,250.00</td>
</tr>
</tbody>
</table>

Pre-KPI Performance

<table>
<thead>
<tr>
<th>Waste</th>
<th># of Falls/Month</th>
<th>Cost/Missed Goal ($)</th>
<th>Total Waste ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Defects</td>
<td>1.375</td>
<td>14,000.00</td>
<td>19,250.00</td>
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</table>