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MMC Fall with Injury Prevention Project

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**Project: MMC Fall with Injury Prevention Project**

**Last Updated:** 9/24/18

**Team Members:** Members of MMC Fall with injury task force. Joanne Chapman, RN, Laurie Wilson, RN, Rhonda Babine, RN Jennifer Laflamme, Melissa Vanmeter, RN, Angela Smith, RN

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**Problem/Impact Statement:**

Patients falls with injury remains an elusive problem at MMC. Over the past 8 quarter, (2016 and 2017) MMC has outperformed 3 of the last 8 quarters of data. The average rate for the past 8 quarters is .37/1000 patient days with the mean benchmark of .54/1000 patient days. MMC has determined a focus goal for all the inpatient units to be below .70/1000 patient days as a goal for falls with injury. MMC having the largest volume must be below NDNQI mean to drive this change as the .70 is the average of all MH hospitals. A fall with injury costs on average cost of a fall with injury is $14,000, more importantly the cost to the patient may be in increase in hospital stay, and increase in level of care. Injuries range from lacerations to fractures and head trauma and death. Approximately 50% of all falls incur an injury. Putting interventions in place to decrease total falls will decrease injuries at MMC.

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**Scope:**

Decreasing falls with injury on inpatient units will focus on pilot projects on the inpatient units, excluding P6 (inpatient Psychiatric) and BBCH (Pediatrics) as they have a separate fall reduction strategies for their specific populations. However, both of these units are included in the MMC inpatient data. ED is out of scope since this is an outpatient area.

The focus of the plan is to address assessment of falls, inter-professional education on fall reduction strategies, patient education and implementation of task of changes of evidence based interventions to prevent falls and falls with injury. Because the work on EPIC must be done at a MH level, collaboration with MH Nursing Practice Committee and Fall Reduction committee will occur. R2, medical unit was identified as having the most falls with injury. Because the work on EPIC must be done at a MH level, implementation of test of changes of evidence based interventions to prevent falls and falls with injury. Decreasing falls with injury costs on average cost of a fall with injury is $14,000. More importantly the cost to the patient may be an increase in hospital stay, and increase in level of care. Injuries range from lacerations to fractures and head trauma and death. Approximately 50% of all falls incur an injury. Putting interventions in place to decrease total falls will decrease injuries at MMC.

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**Goal/Objective:**

Decrease the fall with injury rate below the NDNQI means by out-performance with the NDNQI metric for the majority of quarters continuing to outperform on the majority of inpatient units. (must maintain this metric). We will do monthly developing test of change projects on two inpatient units. If successful, test of change will be rolled out to other inpatient units.

1. Improve patient education to 95% per chart audit on every fall with injury and EPIC report when completed
2. Improve fall risk tool utilization with accurate injury and risk reported to include fall risk and key interventions so that falls with injury will decrease on the unit.
3. Improve inter-professional handoff – rehab, nursing, pharmacy related to falls
4. Education of all staff on use of updated tool in epic and accompanying education.

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**Baseline Metrics/Current State:**

- **FY 2018:**
  - R2: Fall risk assessment standardization and documentation of huddle
  - R6: Education developed/ tested

- **FY 2019:**
  - Standardize ED assessment with NY Presbyterian assessment
  - Continue interactive fall prevention education

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**Study:**

- **Fall Patient Education**
  - R2: June 2018
  - June 2018
  - June 2018
  - July 2018
  - August 2018

**Outcomes:**

- **Overall MMC Patient Education**
  - Percentage: June 74%, July 76%, August 78%

**Next Steps:**

- FY 19 Continue Fall Prevention interactive inter-professional education.
- FY 19 Behavioral Health Patient EDUCATION roll out
- FY 19 Post fall assessment standardization and documentation of huddle
- FY 19 Follow-up on FMEA related to falls in the Bathroom
- FY 19 Develop standardized post fall order set
- FY 19 Continue interactive fall prevention education
- FY 19 Standardize ED assessment with NY Presbyterian assessment