Falls Prevention on an Observation Unit

Robert Rubino  
*Thomas Jefferson University, robert.rubino@jefferson.edu*

Niveka Cason  
*Thomas Jefferson University, niveka.cason@jefferson.edu*

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Introduction

Purpose
Reduce Falls in Patients who are CAM POSITIVE
Patients who are CAM Positive are at an increased risk of falling during their hospital stay on an Outpatient Observation Unit
For CAM Positive Med Surg patients does using a falls prevention huddle form reduce the future risk of falls compared with no falls prevention huddle form?

Methods

Sample Population: CAM Positive Med Surg Patients on outpatient Observation Unit
Falls Prevention Huddle form (given out to nurses who have a CAM positive patient)
• Morse falls score
• Yellow falls gown
• Bed alarm/posey
• Call bell in reach
• Bedside report with safety sweep
• Morning and afternoon briefing
  • Highest falls risks identified

Evidence

Literature Review
• The risk of major fall-related injuries, such as hip fractures, and mortality is increased among adults with dementia
• As a result of insufficient evidence, the most prominent fall prevention guidelines do not provide any recommendations for the population with cognitive impairment
• Falls in older adults with dementia are associated with multiple intrinsic and extrinsic risk factors, some shared with older adults in general and others unique to the disease.
• Fall prevention strategies that are successful in older adults without cognitive problems have not been successful in reducing fall risk in people with cognitive impairment
• Confounding factors related to falls risk (e.g., age, history of falls, gender, physical activity, psychological factors, balance and gait, environmental factors, medical conditions and comorbidities, and medication use)

Results

Data Recorded
• August 2020 (Prior to Fall Prevention Huddle)
  • For the month of August there were 3 total falls.
• September (Fall Prevention Huddle Form Implemented)
  • For the month of September there was 1 total fall.

Next Steps

• How can we implement fall prevention for every patient on the unit?
• Post intervention focus should balance Fall Prevention to be individualized to each patient
• Our fall prevention should not only focus on CAM POSITIVE patients when there are other risk factors presents
• How can we prevent Nursing Staff from drifting away from these fall prevention goals?

Conclusions

• Falls ratio before and after Fall Prevention Huddle Implementation 3:1
• Fall rates declined during the month that the fall huddle prevention was implemented
• Patients that did sustain falls did not meet the criteria for being CAM POSITIVE
• The unit’s (3H) fall rate in September declined more than 50% when compared to August

References


Haddad, Yara K. PharmD, MPH; Bergen, Gwen PhD, MPH, MS; Luo, Feijun PhD AJN, American Journal of Nursing; July 2018- Volume 118- Issue 7- p 21-22
doi: 10.1097/01.NAJ.0000541429.36218.2d