IMPROVING PATIENT/FAMILY ENGAGEMENT TO REDUCE INPATIENT FALLS
Timothy Dunham, MSN, RN, CNL, RRT

BACKGROUND

Fall Facts
- Between 700,000 and 1 million patients fall in U.S. hospitals each year with 30-50% resulting in injury
- LOS increases by an average of 6 days
- Hospitals accrue $14,000 of additional care costs per fall with injury
- Average hospital fall rate in the U.S. is 3.12 per 1,000 patient days

METHODS

Fall Risk Questionnaire (FRQ) Self-Assessment

- Many older adults (>65) see falls as unavoidable and do not recognize they may be at risk

Purpose of this project:
- FRQs were placed in a Hospital Welcome Packet
- Administered by RN upon admission (convenience sampling)
- FRQ was completed by patients and/or family
- RN assisted patient with interpreting results

SUMMARY

- People who have already fallen are likely to fall again
- People who worry about falling or are at risk for a serious fall
- Unintentional and avoidable steps like walking on Signs of poison balance
- Cans or rails can take away the chance of falling, but only when used correctly
- Using furniture to assist in standing or a sign of leg weakness—this is a major contributor to falling
- Risking to the bathroom, especially when an increase your risk of falling
- Numbness in the feet can cause self-rated fall risk questionnaire (FRQ) for older adults.

FACTS ABOUT FALLS

- Falls are complex, multifactorial events
- Medication side effects, gait/balance alterations, urinary incontinence, and depression are major contributors
- Medical-surgical patient population is equally complex due to increasing age and comorbidities
- Multifaceted interventions for fall prevention are necessary

Patient Engagement is Key
- Facilitates communication and collaboration
- Empowers patients to be active participants
- Establishes trust, partnership
- Identifies knowledge deficits and gaps in care
- Patient and family-centered

Current Tools for Fall Risk Assessment

- Patient and Family Self-Assessment
- Patient and Family Risk Assessment

RESULTS (Patient Engagement △)

- Pre-Implementation
  - n = 30
  - Male = 13, Female = 17
  - Average Age = 74
  - Overall patient engagement = 46%

- Post-Implementation
  - n = 30
  - Male = 11, Female = 19
  - Average Age = 73
  - Overall patient engagement = 68% (22% increase)
  - ZERO falls reported during course of project (3 weeks)

IMPACT

- In conjunction with Morse Fall Risk Assessment and nursing judgment, the FRQ self-assessment will:
  - Initiate conversations about falls with healthcare providers
  - Raise patient awareness and knowledge of fall risk
  - Reduce incidence of falls
  - The long-term aim of this project was to reduce the fall rate on a medical-surgical unit to less than 1 fall per 1,000 patient days over a six month timeframe.

REFERENCES


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Elizabeth Davis DNP, CNL, RNC, BMN (Elmhurst College)
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PURPOSE

“Quest for Zero”

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Currently no fall risk self-assessment tools available for hospitalized patients.

MATERIALS

Healthy Driven
Education-Elmheart Healthcare

Increasing Fall Awareness and Patient Engagement

Partnering with patients and families to improve quality and safety

Healthy Driven
Elmheart College

Falling or failing is not an inevitable part of aging.

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