

Fall Prevention

Davis 14

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Background

- In-patient falls can result in poor patient outcomes, increased length of stay and costs
- Up to 50% of all in-patient falls are related to toileting.^{1,2,3}
- In hospitalized patients over age 65, toileting can account for up to 83% of falls.⁴
- On average 70% of Davis 14 patients are age 65 +
- This fiscal year, 18 patients on Davis 14 fell within the first 4 months, compared to 36 total in the entire previous year.
- Root Cause Analysis for each fall this fiscal year demonstrated that 64% of falls were related to toileting.
- Safe mobility and increased function decreases falls
- BMAT assessment once per shift



Purpose

The purpose of this project is to decrease the number of falls on Davis 14 from the previous fiscal year by 10%.

Methods/Process

- D14 falls committee created November
 2020 and completed A3
- 2. Identified need for bedside audit in February 2021
- 3. Created audit tool in February 2021
- 4. Completed audits in March 2021

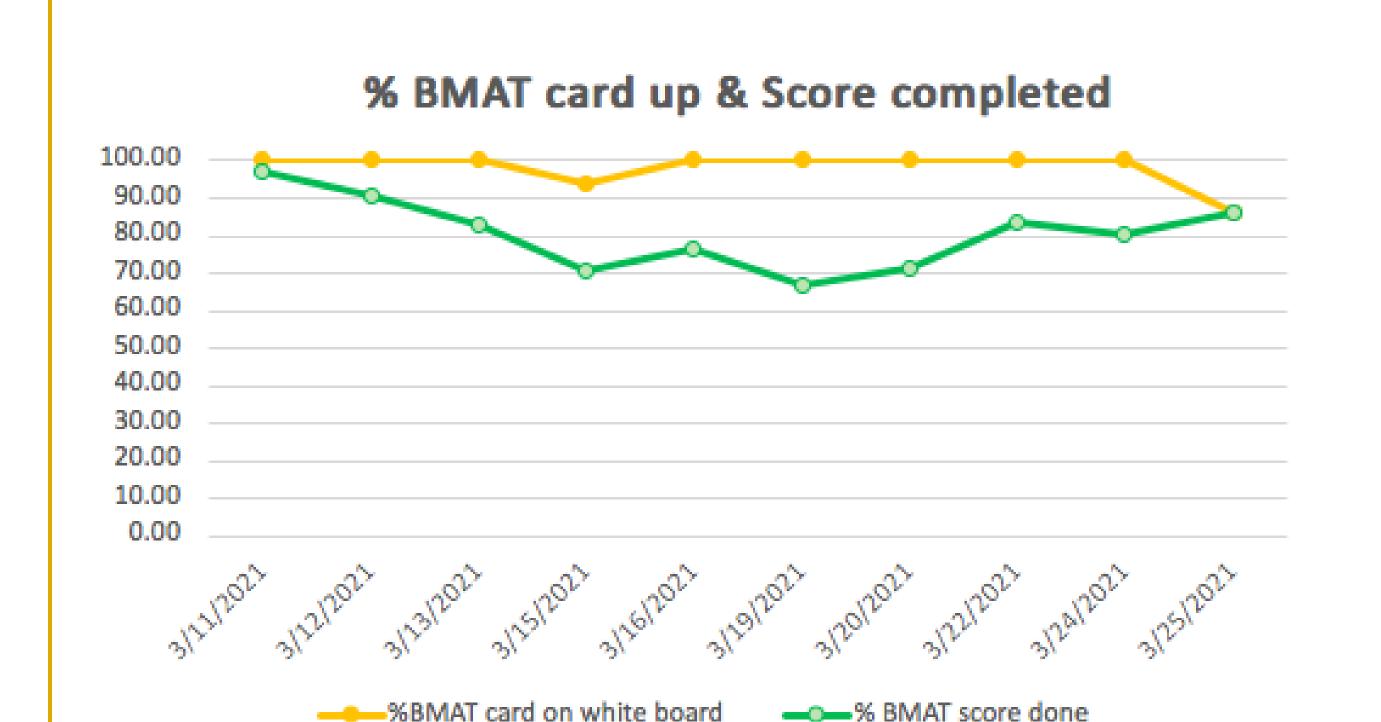
Implementation

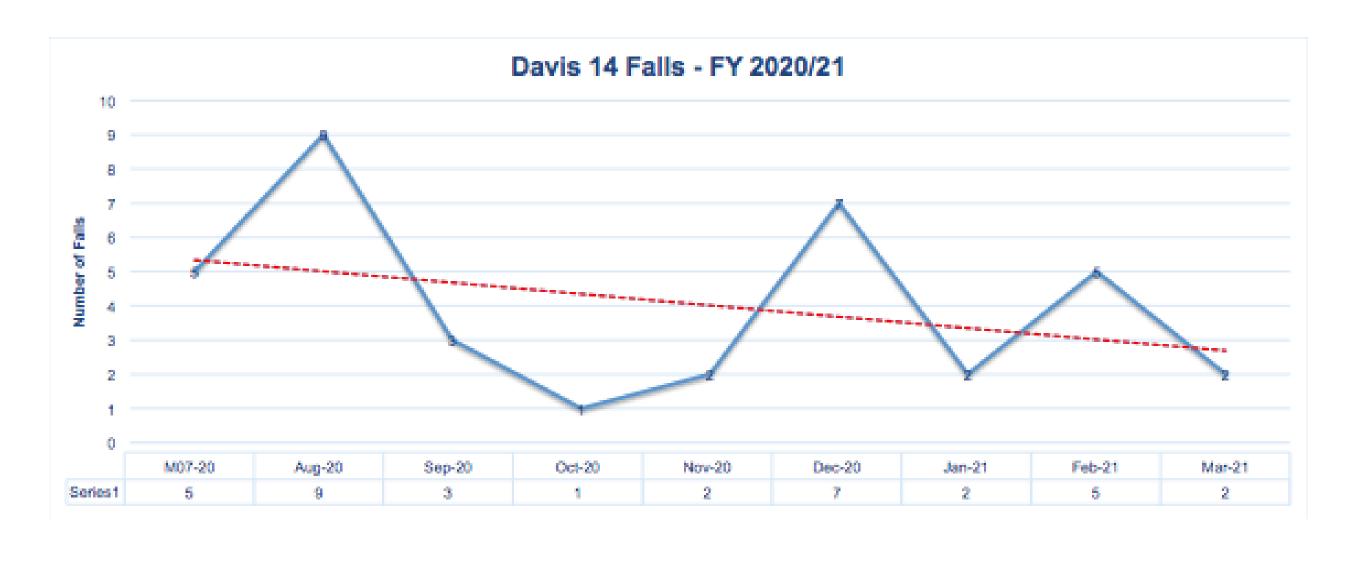
- 1. Shared knowledge with 72 Staff Nurses
 - ☐ Fall Prevention reminders during pre-shift Safety Huddles November Present
 - Bed alarms, hourly rounding, 4 P's (Pain, Position, Potty, Personal items), encouraged staff staying with patient during toileting, utilization of BMAT scores
 - ☐ Presented Fall Prevention PowerPoint in November 2020 and again in April 2021
 - Shared A3 process with toileting identified as our focus for improvement
 - Reviewed fall prevention expectations
 - Emphasized importance of mobility assessment in fall prevention
- 2. Audits
 - ☐ Performed by student nurse externs 10 days in March 2021

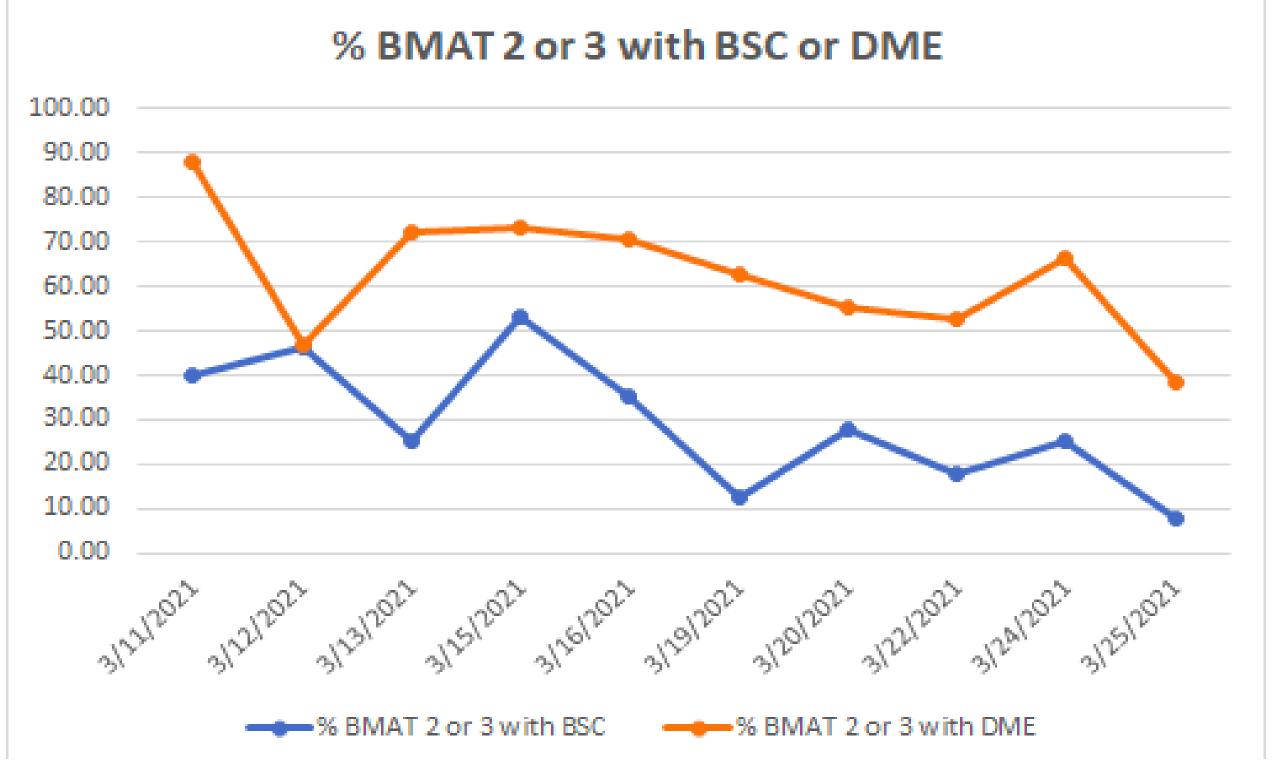
	D14 Audit BMAT, DME								Audit Date:			
ROOM	BMAT card on white board			BMAT score					BSC set up & at Bedside (N/A if w/foley)		DME at bedside (walking aides: i.e. walker/cane)	
147431	YES	NO	1	2	3	4	NONE	YES	NO	N/A	YES	NO
147432	YES	NO	1	2	3	4	NONE	YES	NO	N/A	YES	NO
147451	YES	NO	1	2	3	4	NONE	YES	NO	N/A	YES	NO

Results

- Overall decrease in number of falls each quarter
- Average 98% white boards with BMAT card, average 81% filled out
- Average 29% with BMAT 2 or 3 had a commode and average 63% had assistive mobility devices set up







Conclusion

By providing staff Nurses with knowledge and resources related to fall prevention we have seen a decrease in number of falls.

While we did not decrease falls by 10%, we are hopelful that this study will lead to an improvement in standard of care hospital-wide for high fall risk patients.

Next Steps

- 1. Share audit data with staff.
- 2. Reinforce BMAT education and commode/DME use for score 2 or 3.
- 3. Reaudit performance by June 2021.

Implications

Hopefully by improving practice and knowledge about safe mobility by using the BMAT, it will help ensure safe toileting and prevent falls.

References

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- 3. Tzeng, H.-M. (2010). Understanding the prevalence of inpatient falls associated with toileting in adult acute care settings. *Journal of Nursing Care Quality, 25*(1), 22-30.
- 4. Hitcho, E. B., Krauss, M. J., Birge, S., Claiborne Dunagan, W., Fischer, I., Johnson, S., Nast, P. A., Costantinou, E., & Fraser, V. J. (2004). Characteristics and circumstances of falls in a hospital setting: a prospective analysis. *Journal of general internal medicine*, 19(7), 732-739

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