Watching your Step: Engaging Patients to Prevent Falls

Bhruga Shah M Sc, B Sc, BSN-RN
Claire Barron BSN, RN
Maura O'Reilly BSN, RN

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Watch Your Step: Engaging Patients to Prevent Falls
Bhruga Shah, MSC, BSN RN; Brittany Baran, BSN, RN; Chinasu Ugoala, BSN RN; Claire Barron, BSN RN; Emilie Imbrlale, BSN, RN; Martha Ellen Fischer-Scrivo, BSN, RN; Maura O'Reilly, BSN, RN; Leila Elliott, MHA; Jacquelyn Hartley, MA; Rosemarie Kormann, MSN, RN, DNP Student*

Introduction and Problem Statement
Patient falls, incidental or accidental, are being used as a standard metric of nursing care quality and are a continuing patient-safety concern in the hospital setting.

Each year 700,000 to 1 million in-patients suffer a fall in U.S. hospitals.

According to the Agency for Health Care Research and Quality (2016) the national falls rate in acute care hospitals ranges from 1.3 to 8.9 falls/1,000 patient days, with higher rates occurring in units that focus on elderscare, neurology, and rehabilitation.

Patients with cardiovascular health problems on Cardiac Telemetry Unit South (CTUS) are at higher risk for falls due to blood pressure fluctuations caused by a new medication regimen (e.g., use of anti-hypertensives), weakness in lower extremities (e.g., neuropathy/poor blood circulation), medication-induced urgency (e.g., diuretics), and frequent use of patient care equipment (e.g., SCD, IV medications, O2 lines). In 2015, on CTUS a total of 32 patient fall events occurred, and 87.5% of the reported patient fall events were unassisted.

Research literature has shown that during hospitalization there is a need for engaging patients in understanding their risk for falling and involving them in fall prevention interventions. (Shuman et al., 2016). Using an evidence-based effective communication technique called Teach-Back, nurses can educate patients about their risks for fall and safety tips for preventing falls during their stay in hospital.

PICO Question
In adult cardiovascular patients on the acute care cardiac telemetry unit (CTUS): Will engaging patients and family members using an interdisciplinary Teach-Back education strategy to be more active participants in fall prevention result in a decrease in number of patient falls and fall related injuries? Will this strategy improve patient-nurse communication and nurses’ responsiveness as measured by the Hospital Consumer Assessment of Healthcare Provider and Systems (HCAHPS) Survey?

Project Goals
- Empower patients by providing patient-centered fall risk education to become an active participant in fall prevention interventions.
- Decrease the rate of patient falls on the unit.
- Decrease the number of unassisted falls.
- Improve “Patient Communication with Nurses” as measured by Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS).
- Enhance safe practices in patient care.

Intervention- Improvement Methods
Engage patients and family members from the month of May to September, 2016 in preventing falls using Teach-Back method for education.

Unit-based fall prevention efforts already in place:
- Fall risk assessment for every patient on every nursing shift using John Hopkins Hospital Fall Assessment Tool
- Use of bed alarm (only for high risk and/or confused patients), floor mats, fall risk wristband, non-skid socks, call bell button, hourly purposful rounding, and charge nurse rounding

Interventions:
Training:
- CTUS floor nurses trained on completion of “Fall Prevention Safety Plan”
- Team nurses involved in patient education were trained on Teach-Back method

Patient Education using Teach-Back Method:
Patient education was provided to all CTUS patients regardless of their individual fall risk
1. Verified that Fall Prevention Safety Contract completed for every patient on admission to the unit
2. Used Inova “Partnering for Patient Safety” guide to engage patient and family members (Fig: 1)
3. Watched Inova TIGER Patient Education Video: Preventing Falls in Hospital with patient and/or family members
4. Verified understanding using the following Teach-Back questions:
   i. Tell me two factors that increase your risk for fall during your stay in hospital?
   ii. How can you help in preventing falls?
5. A worksheet was created and used by team nurses to assess, educate, and engage patients in understanding their risk for fall prevention.

Limitations:
- The program was limited to patients and/or families who could participate in the education program.
- Education was provided on Monday, Wednesday, and Friday of the week.
- A high patient turnover rate on the CTUS floor presented challenges in engaging patients.

Affiliations & Acknowledgements
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*George Mason University, MSN RN

References
Inova Fall Prevention educational materials: Fall Prevention Safety Contract online training, TIGER Video, Fall prevention brochure, Fall Prevention Guide to engage patient and family members.

Fig. 1 Fall Prevention Guide developed by Inova Falls Committee

Outcomes
- Falls Rate per 1000 Patient Days = (Number of falls / Number of Patient Days) x 1000
- During the time of intervention, May to September 2016, 25% falls resulted in minor injuries: none of the falls resulted in moderate or major injuries. The National Falls Rate in acute care hospitals ranges from 1.3 to 8.9 falls/1,000 patient days.

Assisted vs Unassisted Falls

Percent of Assisted Falls

Recommendations
- The prevention of patient falls is an important program to sustain on the unit due to the risks of falls in the cardiovascular patient population.
- In order to sustain a downward trend in the patient fall rate, Teach-Back communication methods should be utilized as the standard method for nursing communication.
- Expand system wide communication regarding engaging patients and their family members in preventing falls.