

Preventing Falls in the Surgical Setting by Implementing a Fall Prevention Bundle

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Problem Statement

- Perioperative adult patients are at an increased risk of falls due to risk factors such as:
 - Gait and balance disturbances
 - Postoperative polypharmacy
 - Intravascular volume status changes
 - Unfamiliarity with the perioperative environment
- Falls can lead to:
 - Injuries
 - Hospital admissions, readmissions, and prolonged stays
 - Considerable financial liability
 - Death
- In 2020, there were eight preventable falls in outpatient adult/geriatric perioperative patients.

Purpose of Project/Goals

Purpose: To evaluate a fall prevention bundle, which includes a fall safety agreement, patient falls education, and the Fall Tailoring Interventions for Patient Safety tool (Fall T.I.P.S.).

- Goals:**
- 100% of staff will implement the Fall T.I.P.S. tool for patients with Morse Fall Scale (MFS) score ≥ 51 .
 - 100% of staff will implement Fall Safety Agreement
 - 100% of staff will document the Fall Prevention Bundle in the patient's electronic health record (EHR).
 - 100% reduction in falls and fall-related injuries in adult outpatient surgical patients in the surgical setting.

Methods

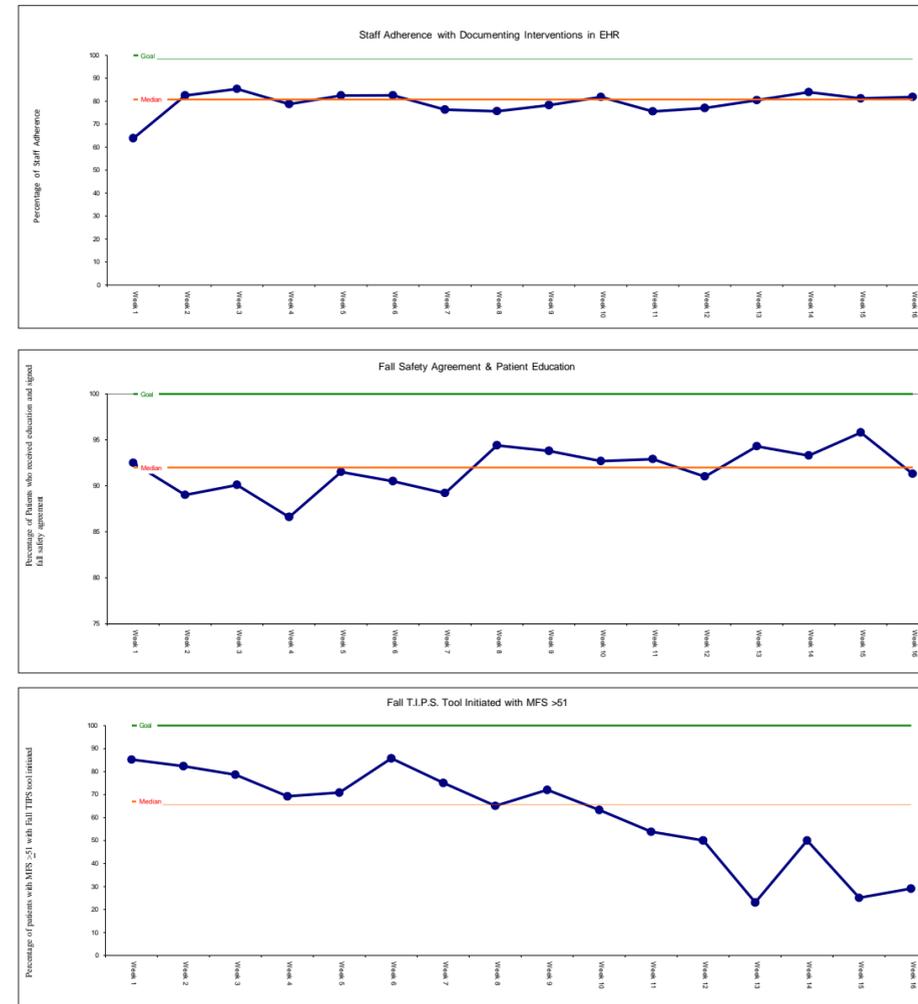
Setting: Three ambulatory surgical units within an urban hospital

Target Population: All adult outpatient surgical patients

Implementation:

- Staff educated on Fall Safety Agreement and Fall T.I.P.S. tool
- The Fall Safety Agreement was given to patients to review and sign.
- Preop Nurse implemented the Fall T.I.P.S. tool for all adult patients with Morse Fall Scale score ≥ 51 .
- Preop Nurse documented interventions implemented in EHR.

Results



Discussion

- During project implementation there were no patient falls reported.
- Data were collected weekly during implementation.
- Adherence of nursing staff documenting interventions implemented in the EHR improved from 64% during week one to 80.8% by week 16.
- The percentage of patients who received education and signed the Fall Safety Agreement during week one was 92.5%. As of week 16, the average rate remained at 92%.
- The implementation rate of the Fall T.I.P.S. tool for patients with MFS ≥ 51 during week one was 85.2%, however, the rate decreased to an average of 67.1% at week 16.
- The average number of patients with MFS ≥ 51 was 3.62 patients per day, which can cause a high variability in the implementation rate making the results less meaningful and unreliable.
- Strategies to facilitate uptake included:
 - Staff input/feedback on interventions and barriers
 - Utilized Champions dedicated to supporting the project
 - Provided positive reinforcements and reminders

Conclusions

- The Fall Safety Agreement provides standardized fall education for patients and their families and can be modified to fit practically any setting.
- The Fall T.I.P.S. tool is an effective communication tool used to quickly notify staff of a patient's risk of falling and individualized interventions.
- To promote sustainability, the Fall Prevention Bundle should be incorporated in new-hire orientation.

References/Acknowledgements/Contact




Fall T.I.P.S. Tool



References



Acknowledgements

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