Some patients were unable to be educated on fall risk due to level of consciousness and mental status and were not included in the data.
There were limited opportunities to collect the data to analyze how compliant nursing staff was to the established expectations.
Next Steps
•Expand the educational presentations, compliance audits, and rewards to PRN and night nursing staff.
•Implement fall prevention interventions throughout the remainder of the hospital.

# Fall Prevention and Nursing Staff Engagement for Sustainability

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## Abstract

Recent BSN-RN graduates at a community hospital focused on nursing staff engagement related to fall prevention activities. Evidence based practice, principles of High Reliability Organizations, Change Theory and the Iowa Model of Implementation were utilized to improve understanding of fall assessment and prevention measures and ultimately improve fall outcomes on two adult acute care units.

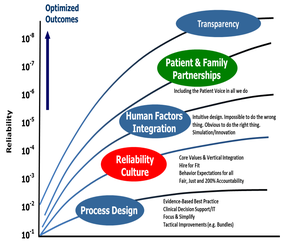
## Introduction and Background

Research provides abundant studies on how to implement fall prevention programs and the impact of falls, but little on how to engage nursing staff and "hardwire" or sustain fall prevention strategies long term. Residency nurses implemented interventions to enhance staff understanding of patient risk, examine root causes for process and system failures, and promote open communication among healthcare team members. Residency nurses observed resistance of staff to engage in the revised fall prevention program on the adult acute care units and implemented strategies to improve staff engagement.

## Methods

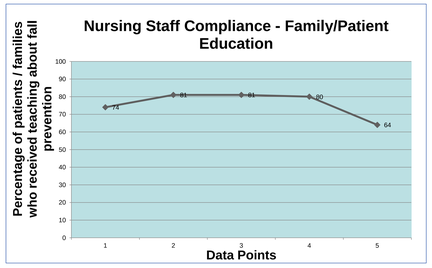
Utilizing hospital fall outcome data it became apparent that after the hospital revised and retrained nursing staff on the fall assessment & prevention practices compliance was increased, but not sustained. Residency nurses noted several factors that inhibited compliance including time and resource constraints, lack of availability of fall prevention equipment, lack of patient participation, family interference, lack of nursing staff education and the perception that the practices were additional work.

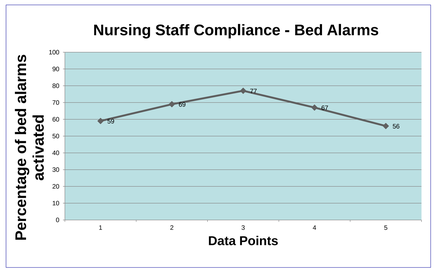
To improve staff compliance, engagement and sustainability fall prevention presentations were delivered to hospital leadership and unit staff. Presentations included current fall outcome data as well as unit goals and expectations. Staff were expected to include the patient falls score (MORSE fall scale) on communication white boards, use bed and chair alarms, and educate patients and families about fall prevention. Nursing staff were audited for compliance in these three areas over a period of one month. Compliant staff members were rewarded and recognized for meeting these expectations.

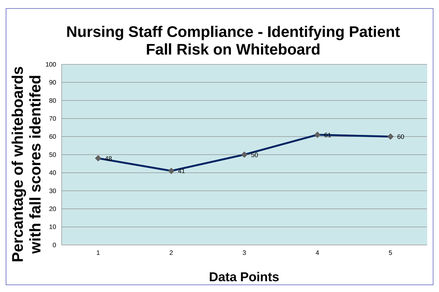



HRO Model

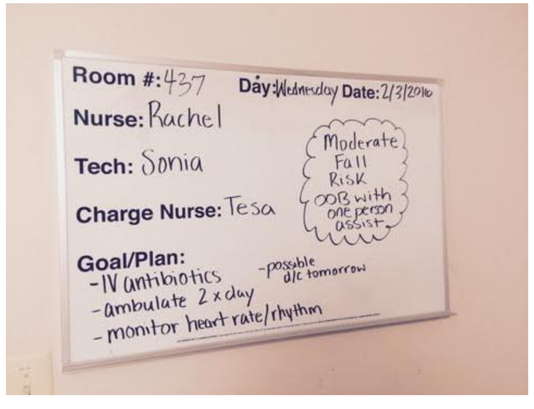
## Results and Findings



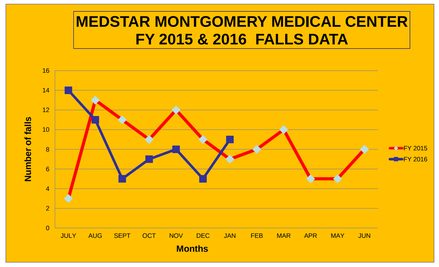



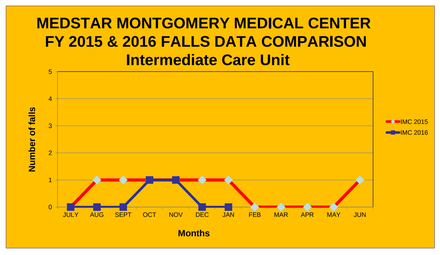



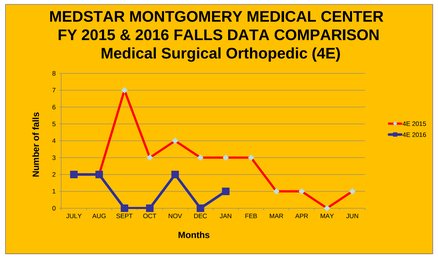

Continued efforts to enhance sustainability will include ongoing recognition and rewards of nursing staff found carrying out best practices, reminders during bedside handoffs, rounds and staff meetings.




There was an increase in compliance with nursing staff identifying patients fall risk on the whiteboard.




The two acute care units working to engage nursing staff and hardwire assessment and preventive measures saw a reduction in fall rates when compared to previous year. Interventions enhanced staff understanding of patient risk, examined root causes for process and system failures and promoted open communication among healthcare providers during rounds and at shift change.

## Limitations/Next Steps

### Limitations

The ability to provide education to all staff members on the unit including PRN and night shift team members was limited.
Some patients were unable to be educated on fall risk due to level of consciousness and mental status and were not included in the data.
There were limited opportunities to collect the data to analyze how compliant nursing staff was to the established expectations.

### Next Steps

- Expand the educational presentations, compliance audits, and rewards to PRN and night nursing staff
- Implement fall prevention interventions throughout the remainder of the hospital
- Added signage for units listing number of "Falls Free Days" and current unit fall rate as compared to previous year

## Conclusions

➢ Engaging nursing staff on two acute care units lead to a decrease in falls in comparison with other units in the hospital

➢ Increasing fall prevention sustainability activities such as improving awareness of the issue, engaging staff, patients, and families, and rewarding staff for positive changes, lead to overall positive outcomes

➢ Rewarding staff for compliance and sustained performance had a positive effect on staff engagement and the hardwiring process.

➢ Through the use of the Iowa Model Implementation Strategies for Evidence Based Practice, Change Theory and principles of High Reliability Organization a framework was designed to improve clinical performance as well as patient and staff engagement.

➢A peer to peer approach to hardwiring clinical best practice facilitated adoption of revised fall assessment and preventive measures.

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wise
WE IMPROVE THE SENIOR EXPERIENCE.
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