WE DON’T FALL AROUND...
SAFETY ROUNDS Q15 MINUTES

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OBJECTIVES

- Summarize the history of falls at Phelps Memorial Hospital Center
- Identify statistics and negative outcomes related to falls
- Describe the changes and strategies implemented hospital wide from unit-based performance improvement initiatives

- 238-bed, not-for profit, acute care community hospital
- Located in Westchester County, on the Hudson River
- 3 miles north of the Tappan Zee Bridge
- 25 miles north of New York City
> **Acute Care since 1955**

> $240 Million Operating Budget

> Over 1,700 Employees and 500 Physicians  
> (7th Largest Employer in Westchester County)

> **1995** - Memorial Sloan-Kettering Cancer Center was established at Phelps. First non-Manhattan location for MSKCC

> **2012** - Family Medicine and Dental Residency was established

> **2015** - Phelps became the 1st hospital in Westchester County to join the **North Shore-LIJ Health System**

> **North Shore-LIJ has:**

> 19 hospitals

> More than 400 Outpatient Physician practices

> 54,000 Employees

> The Feinstein Institute for Medical Research

> Its own Medical School – Hofstra North Shore-LIJ School of Medicine
FALLS AS DEFINED BY NDNQI

Fall - An unplanned descent to the floor, with or without injury, assisted or non-assisted

Major Injury - results in surgery, casting, traction, required consultation for neurological (basilar skull fracture, small subdural hematoma) or internal injury (rib fracture, small liver laceration) or patients with coagulopathy who receive blood products as a result of the fall

FALLS

- Every 15 seconds an older adult is treated in an Emergency Department for a fall-related injury
- Every 29 minutes, an older adult dies from a fall

FALLS

- Between 700,000 and 1 million patients suffer a fall in US each year. 30-51% of falls result in an injury
  Agency for Healthcare Research and Quality, 2015
- Approximately 11,000 fatal patient falls occur in US hospitals annually
  Joint Commission, 2014
- In 2013, 2.5 million nonfatal injuries among older adults were treated in the ED and more than 734,000 older adults were hospitalized
  CDC, 2015
One out of three older adults fall each year but less than half talk to their healthcare providers.

Falls are also the leading cause of both fatal and nonfatal injuries among older adults.

Falls can cause moderate to severe injuries, such as hip fractures and head traumas, and increased risk of early death.  
CDC, 2015

In 2011, about 22,900 older adults died from unintentional fall injuries.

Falls are also the most common cause of traumatic brain injury (TBI).

Over 95% of hip fractures are caused by falls.  
CDC, 2015

Estimated cost of patient falls: $4,233 per fall occurrence.  
American Nurse Today, 2012

In 2012, the total cost of fall injuries was over $36 billion dollars.  
NCOA, 2015

The financial toll for older adult falls is expected to increase as the population ages and may reach $ 85 billion per year by 2020.

A single fall, without injury cost $2500 while a single fall with injury cost $27,000. (Wu, Keeler, et al.)
FALL RISK FACTORS

- Age
- Psychoactive medications
- Acute or recent illness
- Cognition problems
- Abnormalities of balance and gait
- Decreased vision or hearing
- Wheelchair bound patients
- Sensory deficits

5 NORTH JOURNEY

- 2009- to 2010- There was an increase in falls noted within a 3-month period
- 2009 to 2010- Every 2 hour rounding was implemented
  - It significantly increased quality of patient care in terms of pain assessment, reassessment and pressure ulcers prevention
- Falls continued to be a major concern in the hospital, particularly on 5 North (a 29-bed medical unit)

CONT.

- Majority of falls, on 5N, were related to problems with mobility and gait
- 2011 - Modified get-up-and-go test was trialed and implemented. The test was and is being performed upon admission, patient transfer, and change in activity level
- Physical Therapy (PT) evaluation is initiated according to the assessment by the nurse
- 2012 - Purposeful rounding every 2 hours was changed to every 1 hour
MODIFIED GET UP AND GO TEST

ROUNDING ON THE 15

2014 GOALS

- Reduction in fall rates and injury
- Pro-active in fall prevention
- Increase patient satisfaction
WHY ROUND EVERY 15 MIN?

- Based on literature review, frequent rounding has been shown to decrease falls by 50%.
- Q2 hour and Q1 hour purposeful rounding at our facility showed no major decrease in falls and severe injuries.
- There is an increased opportunity to observe patients with Q15 min rounding allowing staff to “catch” patients trying to get “OOB”.

INCIDENCE OF FALLS AT PMHC

<table>
<thead>
<tr>
<th>YEAR</th>
<th>NO. OF REPORTED FALLS</th>
<th>%R</th>
<th>%R RATE</th>
<th>% OF PMHC FALLS TO HOSPITAL FALL RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>107</td>
<td>34</td>
<td>4.01</td>
<td>12%</td>
</tr>
<tr>
<td>2010</td>
<td>177</td>
<td>62</td>
<td>7.15</td>
<td>35%</td>
</tr>
<tr>
<td>2011</td>
<td>157</td>
<td>46</td>
<td>5.62</td>
<td>38%</td>
</tr>
<tr>
<td>2012</td>
<td>100</td>
<td>34</td>
<td>5.10</td>
<td>34%</td>
</tr>
<tr>
<td>2013</td>
<td>129</td>
<td>33</td>
<td>4.62</td>
<td>25%</td>
</tr>
</tbody>
</table>

IMPLEMENTATION

- Staff educated to Fall rates of 2012-2013.
- Introduction to Q15 minute safety rounding and why a change was needed.
- Safety rounds include: visualizing each patient twice Q15 min as staff walk up and down corridor. Patients are checked for feet in bed or are safely on the ground.
- Observers include: Manager, Coordinator, CNS, Nurses, Techs, Environmental Services, Nursing Students.
COMPONENTS

- Stop watch for consistency passed from staff member to staff member...never left on counter
- Handed to next staff member who will round as watch counts down to zero
- Rounding log is completed for 24 hours, using 15 minute blocks by manager/coordinator for 24 hours
- Staff initial log after their 15 minute rounding is completed

CONT.

- Staff may change/swap times if dealing with urgent patient issues
- Rounding is done around nurses and techs schedules involving med administration, patient cares, vitals signs, and scheduled finger stick blood sugars
- Safety Rounding does not replace Q1 hour purposeful rounding

DISSEMINATION

- Communicating change: staff educated to the new process via staff meetings, e-mail, and on unit postings
- Daily signage of “how many days since last fall” is a staff motivator
- Vocera is used for additional patient assistance during Q15 min rounds
WHY NOT ROUND Q15 MIN?

- No increase in staff required and staff workload
- Rounds only take 3-5 minutes
- Good way for staff to see other patients being cared for on the unit
- Patients able to see more staff rounding, thereby increasing their feelings of being safe

EVALUATION

- Fall rate, per month has decreased
  - First 7 months of 2014 was 4.09% (Decrease from 2013)
- Program regularly assessed by Fall Committee
- Due to success, Q15 rounding has been implemented on other nursing units
- 2014 - Press Ganey Patient Satisfaction Scores... call bell response and pain management both improved in 2014

NUMBER OF REPORTED FALLS

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of All Hospital Reported Falls</th>
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<tbody>
<tr>
<td>2012</td>
<td>120</td>
</tr>
<tr>
<td>2013</td>
<td>100</td>
</tr>
<tr>
<td>2014</td>
<td>80</td>
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</table>
However… First quarter of 2015:
• 3 falls compared to 10 in 4th quarter of 2014
• 5 falls in the first quarter of 2014
• Attributed to more diligent rounding and increase in use of 1:1 observation
**REPORTED MAJOR INJURIES RELATED TO FALLS**

![Bar Chart]

Number of Reported Severe Injuries of Patients

<table>
<thead>
<tr>
<th>Year</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>4</td>
<td>14</td>
<td>6</td>
</tr>
<tr>
<td>2013</td>
<td>2</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td>0</td>
<td>12</td>
<td>5</td>
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**PRESS GANEY® SCORES**

**Response of Hospital Staff - Always**

![Line Chart]

Response of Hospital Staff

<table>
<thead>
<tr>
<th>Quarter</th>
<th>1Q 2013</th>
<th>2Q 2013</th>
<th>3Q 2013</th>
<th>4Q 2013</th>
<th>1Q 2014</th>
<th>2Q 2014</th>
<th>3Q 2014</th>
<th>4Q 2014</th>
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<tbody>
<tr>
<td>Score</td>
<td>52</td>
<td>60</td>
<td>64</td>
<td>68</td>
<td>62</td>
<td>66</td>
<td>70</td>
<td>74</td>
</tr>
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</table>

**Staff Do Everything To Help with Pain - Always**

![Line Chart]

Staff Do Everything Help with Pain

<table>
<thead>
<tr>
<th>Quarter</th>
<th>1Q 2013</th>
<th>2Q 2013</th>
<th>3Q 2013</th>
<th>4Q 2013</th>
<th>1Q 2014</th>
<th>2Q 2014</th>
<th>3Q 2014</th>
<th>4Q 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Score</td>
<td>74</td>
<td>82</td>
<td>86</td>
<td>88</td>
<td>84</td>
<td>90</td>
<td>86</td>
<td>92</td>
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REFERENCES

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