Sustaining Fall Prevention Practices at Your Hospital

Presented by
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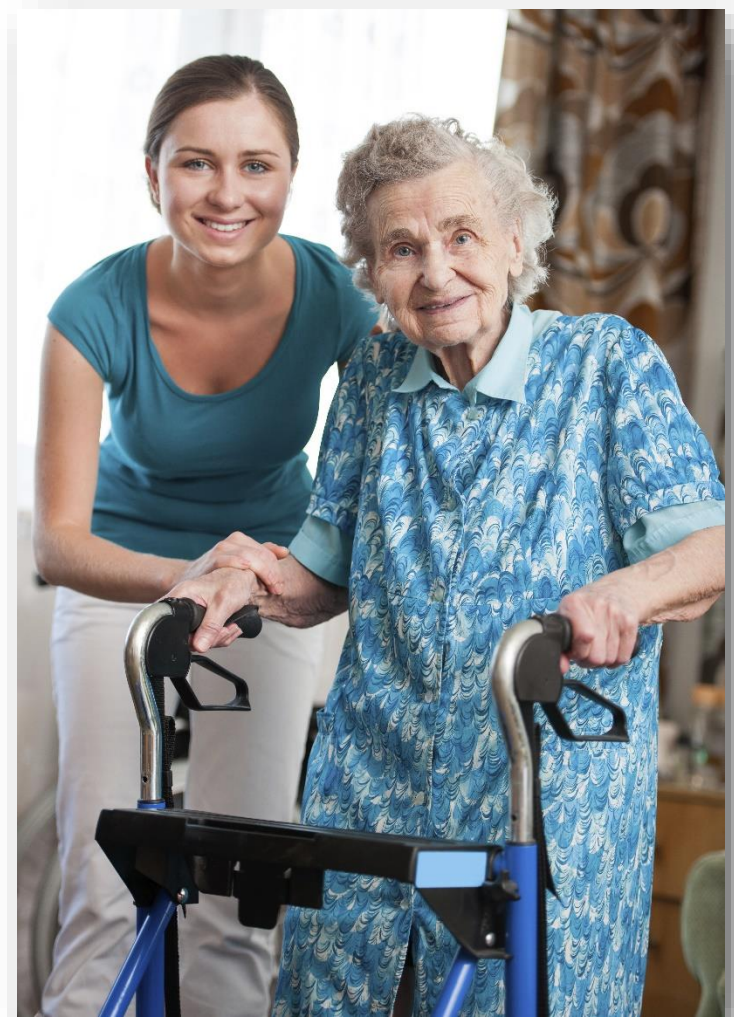Associate Chief for Nursing Service/Research

Welcome!

Thank you for joining this webinar about how to sustain fall prevention practices at your hospital.

A Little About Myself…

- Associate Director, VISN 8 Patient Safety Center of Inquiry
- Clinical Nurse Specialist and Nurse Practitioner in Rehabilitation
- Associate Chief of Nursing for Research and a funded researcher
- Emphasis on clinical practice innovations designed to promote elders' independence and safety
- Nationally known for my program of research in patient safety, particularly in fall prevention

Today We Will Talk About

- Purpose and challenges of sustaining fall prevention practices.

- Who will sustain these practices?

- Support needed to sustain these practices.

- Measuring fall rates and prevention practices.

- Other ways to sustain your program.

Please make a note of your questions. Your Quality Improvement (QI) Specialists will follow up with you after this webinar to address them.

Purpose of Sustaining Practices

- You will soon implement a Fall Prevention Program at your hospital.

- You'll know you have successfully implemented this program when you've had 3 to 6 months of consistent improvement.

- Still, your hard work will not be over. To ensure that your new practices continue over the long term, you will need to take active steps to sustain them.

Challenges of Sustaining Practices

- Once the novelty has worn off, people may slowly go back to old approaches.

- Needed resources may no longer be available.

- Practices may become harder to perform.

- Staff may leave and be replaced by others who do things differently.

Who Will Sustain Practices?

- Unit Champions

- Sustainability Team

Unit Champions

- Unit Champions (or staff members who serve as fall prevention resources) are key to sustaining fall prevention practices.

- Try to have multiple Unit Champions. That way, if one leaves, institutional memory will remain.

Unit Champions

Think about how to—

- Keep Unit Champions engaged
- Replace Unit Champions as needed
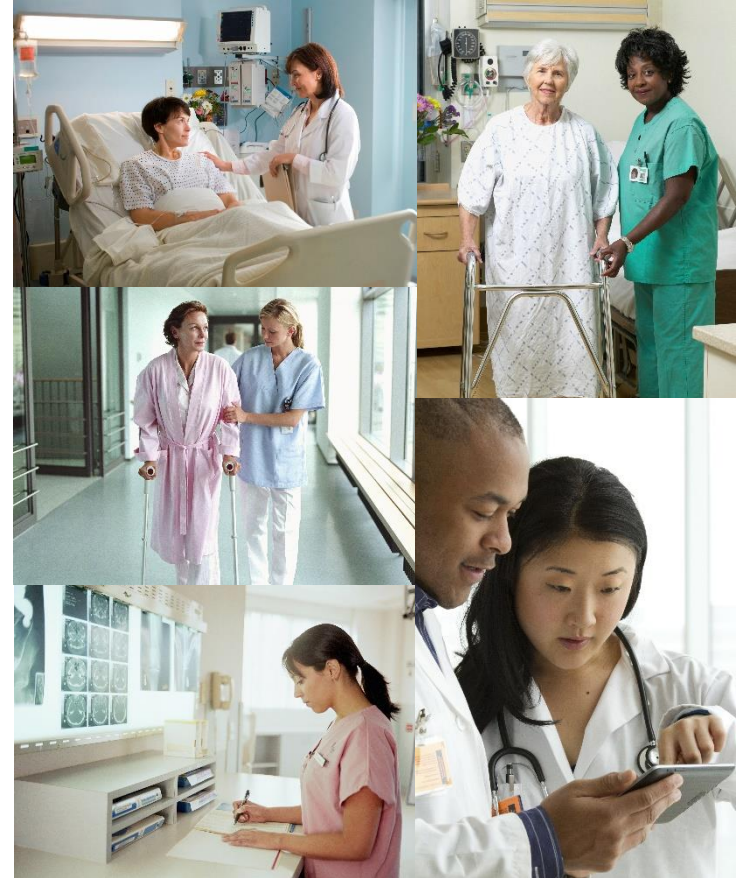
Sustainability Team Role

- Disseminate new information (e.g., staff bulletin, posters, flyers in staff bathrooms, staff education fairs).

- Hold meetings to discuss outcomes and update materials and policies.

- Keep staff enthusiastic about changes.

- Make sure data collection and reporting are fully integrated into routine work processes.

- Review literature to identify new best practices.

- Take up new challenges.

Sustainability Team Members

- Team members can be drawn from the Implementation Team or Unit Champions.

- **If not,** the Implementation Team should—
  - Clearly assign roles to the new project owners
  - Hand off all facts about the project to the new owners

Support Needed To Sustain Practices

- What the Sustainability Team can do

- What hospital leadership can do

What Sustainability Team Can Do

- Make sure unit staff—
  - Appreciate the need for fall prevention
  - Know that fall prevention is ongoing
  - Understand their role in fall prevention and how it relates to the roles of other staff members
- Provide feedback on the effectiveness of fall prevention strategies.
- Celebrate successes.
- Provide needed training and retraining.
- Track performance routinely.

What Sustainability Team Can Do

- Design systems and prompts to ensure that care is carried out appropriately.

- Designate a sufficient number of Unit Champions.

- Integrate fall prevention practices into existing organizational structures and routines.

- Monitor fall rates and fall prevention practices.

- Report to the hospital's oversight committee.

- Request needed supplies and equipment.

What Hospital Leadership Can Do

- Fund needed supplies, equipment, training, and retraining.

- Keep abreast of fall prevention efforts.

- Promptly fill staff vacancies.

- Support electronic data collection.
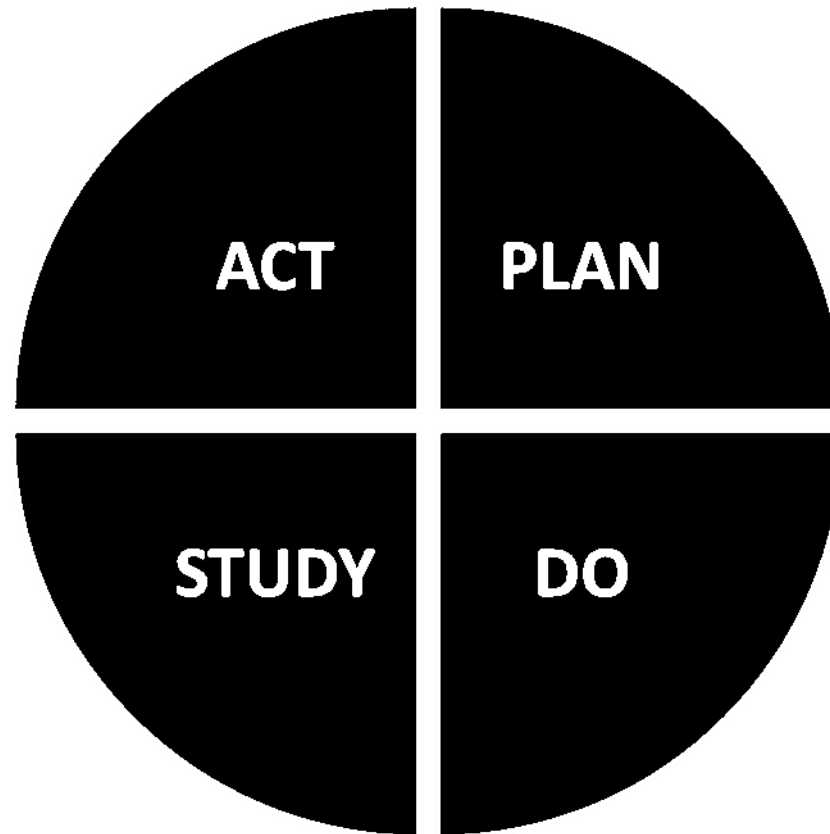
Measuring Fall Rates and Prevention Practices

- Purpose of measurement
- PDSA (Plan, Do, Study, Act)
- Examples of process measures
- Examples of outcome measures
- How to measure
- How to assess data

Purpose of Measurement

Measuring fall rates and prevention practices allows you to—

- Improve your Fall Prevention Program

- Keep your program on track

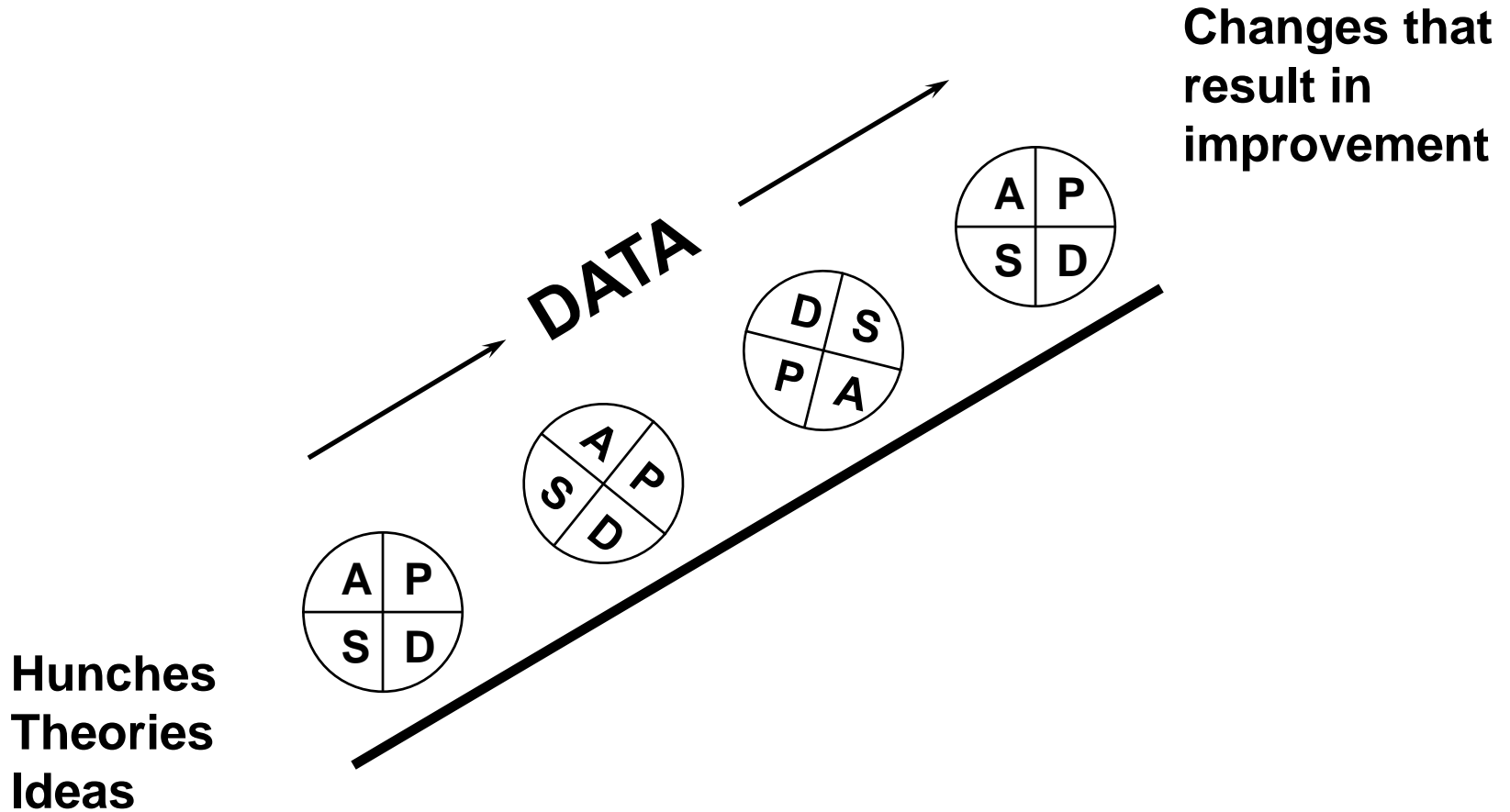- Demonstrate the success of your program to leadership

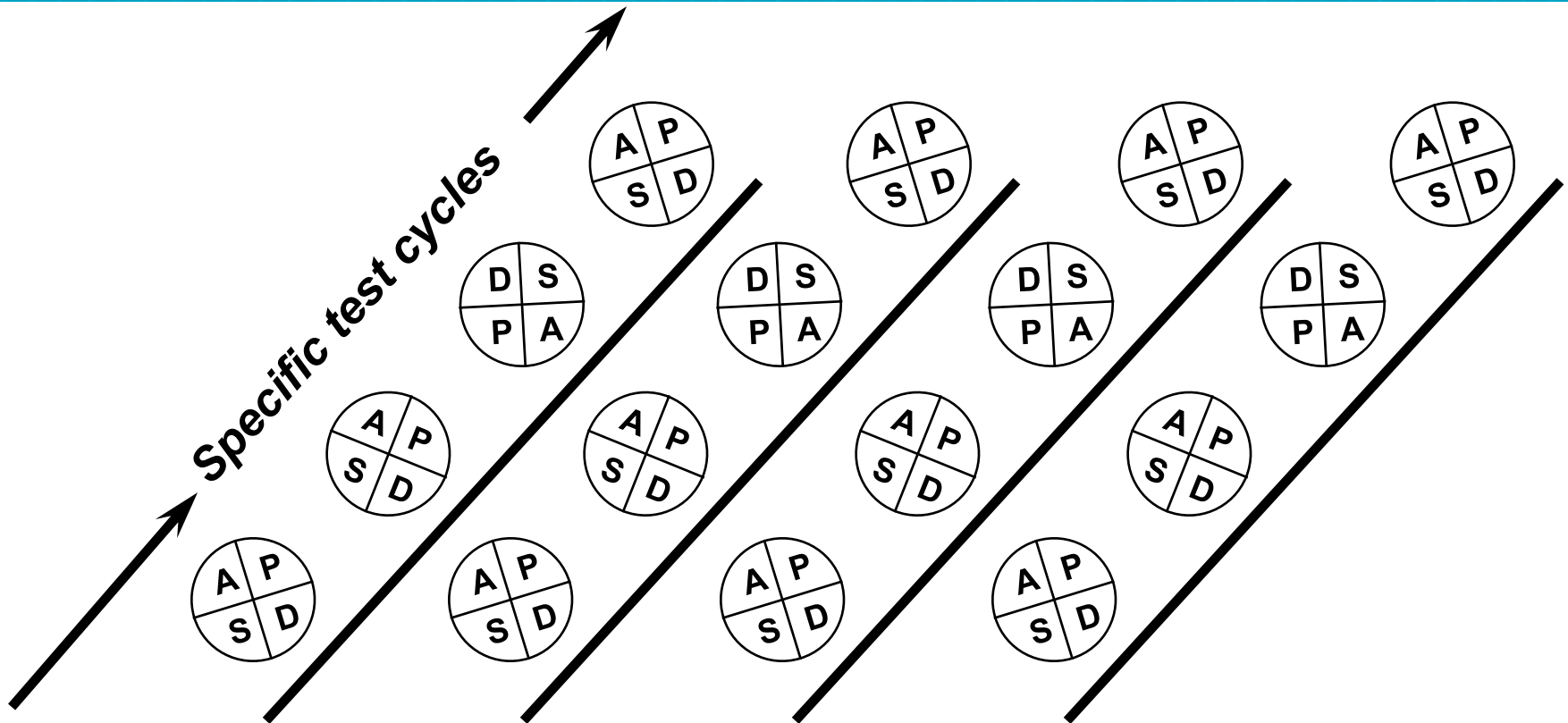# PDSA Cycle

PDSA (Plan, Do, Study, Act)

- PDSA is an iterative process based on the scientific method.

- It is assumed that not all information or factors are known at the outset.

- Repeated cycles of change and evaluation are needed to achieve the goal, with each cycle closer than the previous one.

- With improved knowledge, you may choose to refine or alter specific goals.

Repeated Use of Cycle

Changes that result in improvement

DATA

Hunches Theories Ideas

Specific test cycles

| Develop assessment protocol | Develop knowledge of falls | Develop environmental assessment | Develop specific interventions for fallers | Conduct staff and patient education |

Examples of Process Measures

Percentage of—

- Patients at risk for falls and fall-related injuries with interventions in place

- Patients with completed intentional rounding

- Observation, chart review

Process measures answer the question: *"Are we doing the things we think will lead to improvement in outcome?"*

Examples of Outcome Measures

- Fall incidence rate

- Fall prevalence rate

How To Measure

- Decide—
  - Who will measure fall rates
  - Who will measure fall prevention practices
  - Who will receive the data
  - What will be done with the data
- Set up a routine workflow for data collection.

Plan How To Assess Data

- Decide what changes in data represent a real success (or concern) for your hospital.

- This will keep you from reacting to temporary fluctuations.

Reinforcing Desired Results

- Celebrate successes

- Other ways to sustain your program

Celebrate Successes

- Recognizing the success of your Fall Prevention Program allows you to generate and maintain excitement about change.

- Rewards should be small, but regular, such as—
  – Gift certificates
  – Pizza parties
  – Plaques

Celebrate Successes

At **unit** level

- Find small successes early.
  - For instance, reward unit staff the first time they complete a fall risk assessment form correctly.
- Raise the bar over time.
  - For instance, reward staff for no preventable falls in 3 months.
- Reward the unit with the greatest decrease in fall incidence.
- Post results for each unit and for the hospital overall.

Celebrate Successes

At **individual** level

- Encourage and reward staff members who seek extra education on fall prevention.

- Recognize one staff member each quarter for success in preventing falls. Choose staff from a variety of disciplines.

Other Ways To Sustain Your Program

- Work with your hospital's QI Team to coordinate sustainability with other QI programs.
- Address staff turnover.
  - Train new staff in fall prevention practices.
  - Integrate new staff into the unit's Fall Prevention Program.
- Meet each month to address the root causes of falls.
  - Hospital fall committee co-chairs, managers, and clinical staff should attend.
- Continue to celebrate successes and to measure fall rates and prevention practices.

Today We Talked About

- Challenges of sustaining fall prevention practices.

- Who will sustain these practices?

- Support needed to sustain these practices.

- Measuring fall rates and prevention practices.

- Other ways to sustain your program.

Any Questions?

Thank you for being such great listeners. Please refer any questions you have to your QI Specialists.

Resources

- Ganz DA, Huang C, Saliba D, et al. Preventing falls in hospitals: a toolkit for improving quality of care. (Prepared by RAND Corporation, Boston University School of Public Health, and ECRI Institute under Contract No. HHSA290201000017I TO #1.) Rockville, MD: Agency for Healthcare Research and Quality; January 2013. AHRQ Publication No. 13-0015-EF. http://www.ahrq.gov/professionals/systems/hospital/fallpxtoolkit/index.html
  - Tool 1D: Business Case Form
  - Tool 6A: Sustainability Tool