

Cracking the Code to Improve Falls Rate

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Background

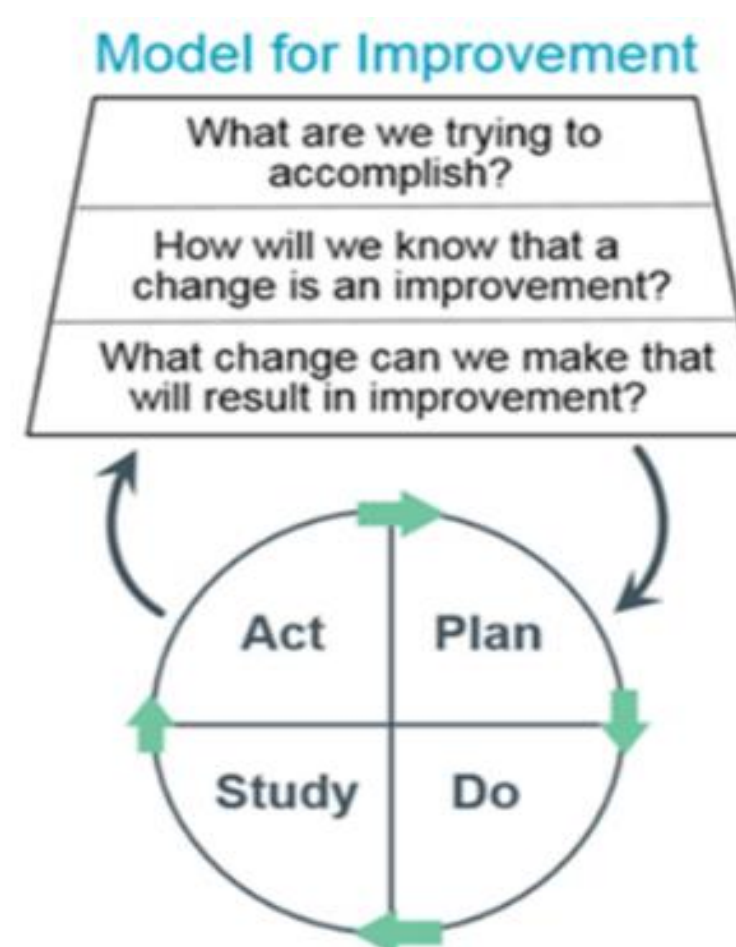
Patient falls are a known nurse-sensitive clinical quality indicator that contributes to patient harm. The Emergency Department (ED) Council including physicians, nurses, technicians, license social worker, educator, identified a rise in the ED fall rate and reviewed falls trends. The council recognized an opportunity for quality improvement (QI) and aimed to reduce the rate of falls per 1000 visits.

Objective

This study aims to determine whether implementing simulation-based education (SBE) utilizing a QI framework will improve clinical judgement and patient fall rates in the ED.

Design Method

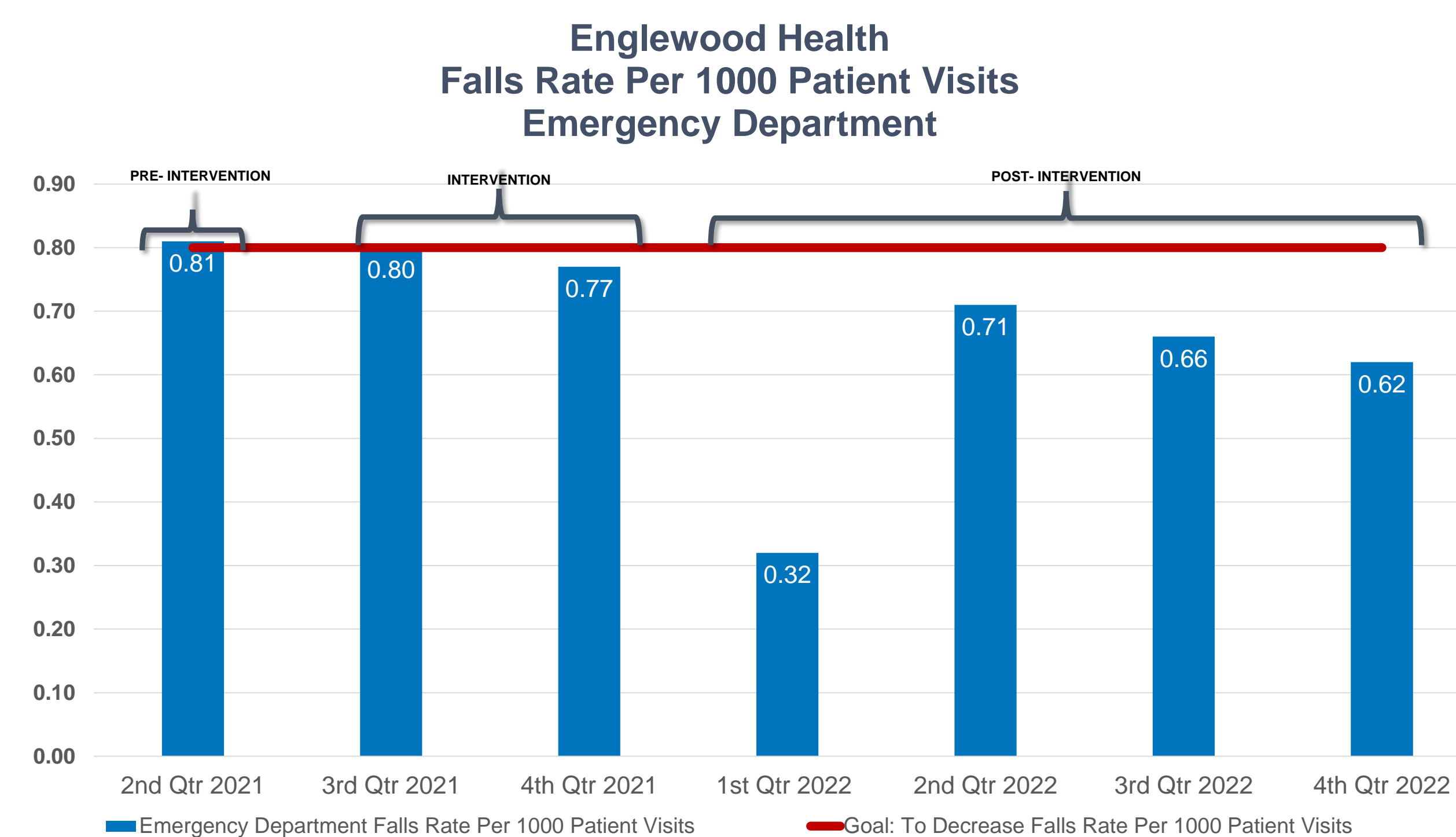
- 42 interdisciplinary ED team members
- Four-stage methodological QI framework Plan-Do-Study-Act
- Descriptive statistics of post-simulation quantitative questionnaire



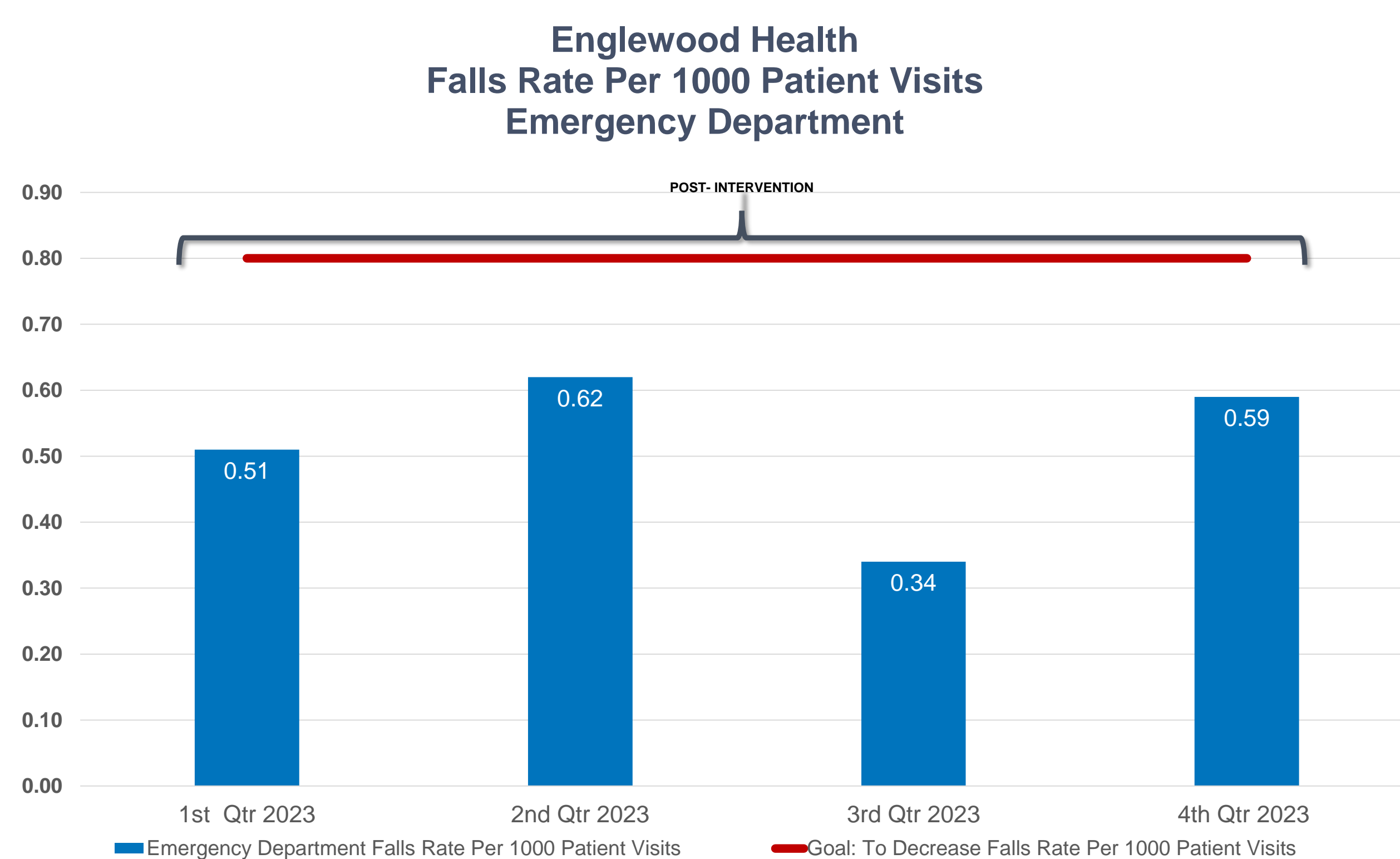
- Setting: In-situ SBE
- **Plan:** Four fall scenarios were developed for SBE
- **Do:** Implemented best practices using the SBE methodology of fall scenarios
- **Study:** Real-time post-simulation survey
- **Act:** ED adopted changes learned for sustainability and QI of the nurse-sensitive clinical quality indicator

Results

ED Falls Rate 2021 – 2022 Unit benchmark type: 30,000-49,000 annual visits



ED Falls Rate 2023 Unit benchmark type: 50,000-79,000 annual visits

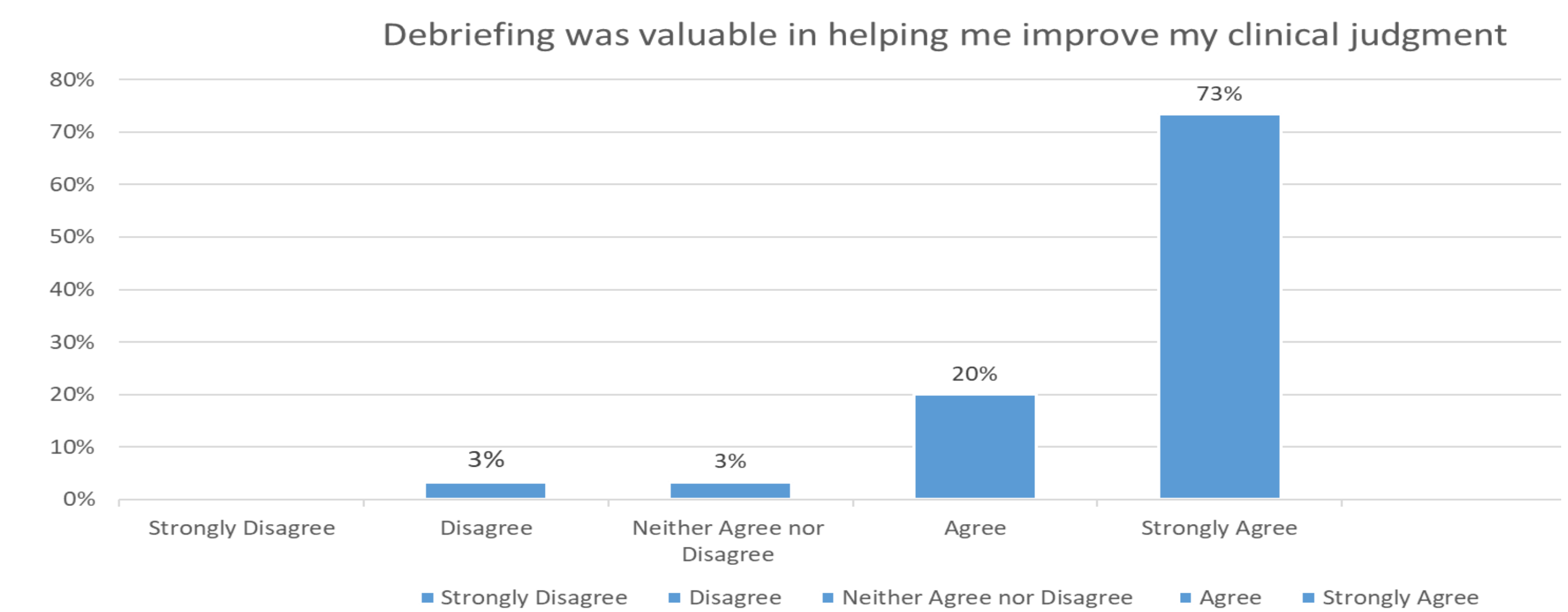


The fall rate decreased by 60%

73% Debriefing “strongly agree” valuable in improving my clinical judgment

20% Debriefing “agree” valuable in improving my clinical judgment

Post Simulation October 2021



Conclusions

Simulation-based Education (SBE), combined with a four-stage quality improvement framework, demonstrated systematic actions that were completed to improve fall rates in the ED.

Team members successfully recognized fall risk in scenarios and used various strategies for fall prevention.

Participants could reflect on the simulation experience and identify safety goals to address fall intervention in the future.

Recommendations

Perform continuous post-SBE reflections and support.

To reduce falls, conduct a needs assessment in 2023 regarding additional SBE training, using an interdisciplinary focus group approach and the four-stage QI framework.

Research is needed to observe or evaluate interdisciplinary team clinical judgment and falls in the ED.

References



ENGLEWOOD
HEALTH

THE KAPLEN INSTITUTE
FOR NURSING EXCELLENCE

