

#### **PROBLEM STATEMENT**

Falls are a major problem in the United States with fatal falls costing an estimated \$754 million in 2015.

- In a 150 bed LTCF around 20-30 falls occur monthly
- The elderly experience the highest fall rates among age groups
- Lack of adequate fall prevention processes in the project setting

#### **PROJECT PURPOSE**

The purpose of this project is to implement a fall prevention QI process that incorporates evidencebased practices at an LTCF located in central Florida.

The objective of the project is to implement an hourly rounding process with the aim of decreasing or preventing falls.

By providing education to nursing staff, and leveraging the hourly rounding technique, the aim is to reduce the frequency of falls within the facility by at least 50% within a two-month period

### **MODEL/NURSING THEORY**

The Six Sigma model was used to improve the processes around fall prevention. There are five steps in the model:

- Define project purpose and scope
- Measure baseline data on current processes
- Analyze root causes and validate against data
- Improve the process by addressing root causes of the major issues
- Control the documentation of results by performing and after analysis

# Falls Prevention techniques have reduced weekly falls by an average of 14%

## FALLS PREVENTION IN ADULTS 65 YEARS AND OLDER IN THE LTCF Arlene Laing, DNP, APRN-C

## **METHODS**

#### **Subjects (Participants)**

LTCF residents 65 years and older.



<u>Setting</u>

A 150 bed LTCF located in central Florida



#### **Instruments/Tools**

Rounding competency checklist Daily hourly rounding log Weekly hourly rounding log Hourly rounding checklist

DATE				
NAME				
DEPARTMENT				
EVALUATOR	SELF YES	ASSES5	EVALUATOR YES NO	COMMENTS
INT RODUCTIONS				1
Knock on door prior to entering - ask permission Manage up your skill or that of your co-worker Use good eye contact				
EXPLAIN HOURLY ROUNDING UPON ADMISSION				
Explain the purpose of hourly rounding (initial visit) Use key words "vary good" care Describe rounding schedule (6am-10pm q1hr. 10pm-6am q2hr.)				
UPDATE WHITE BOARDS				
Place nume on white board Update numing plan of care/goals for patient				
ADDRESS 5P'S PAIN_POSITION_POTTY				1
How is your pain?				

### Intervention and Data Collection

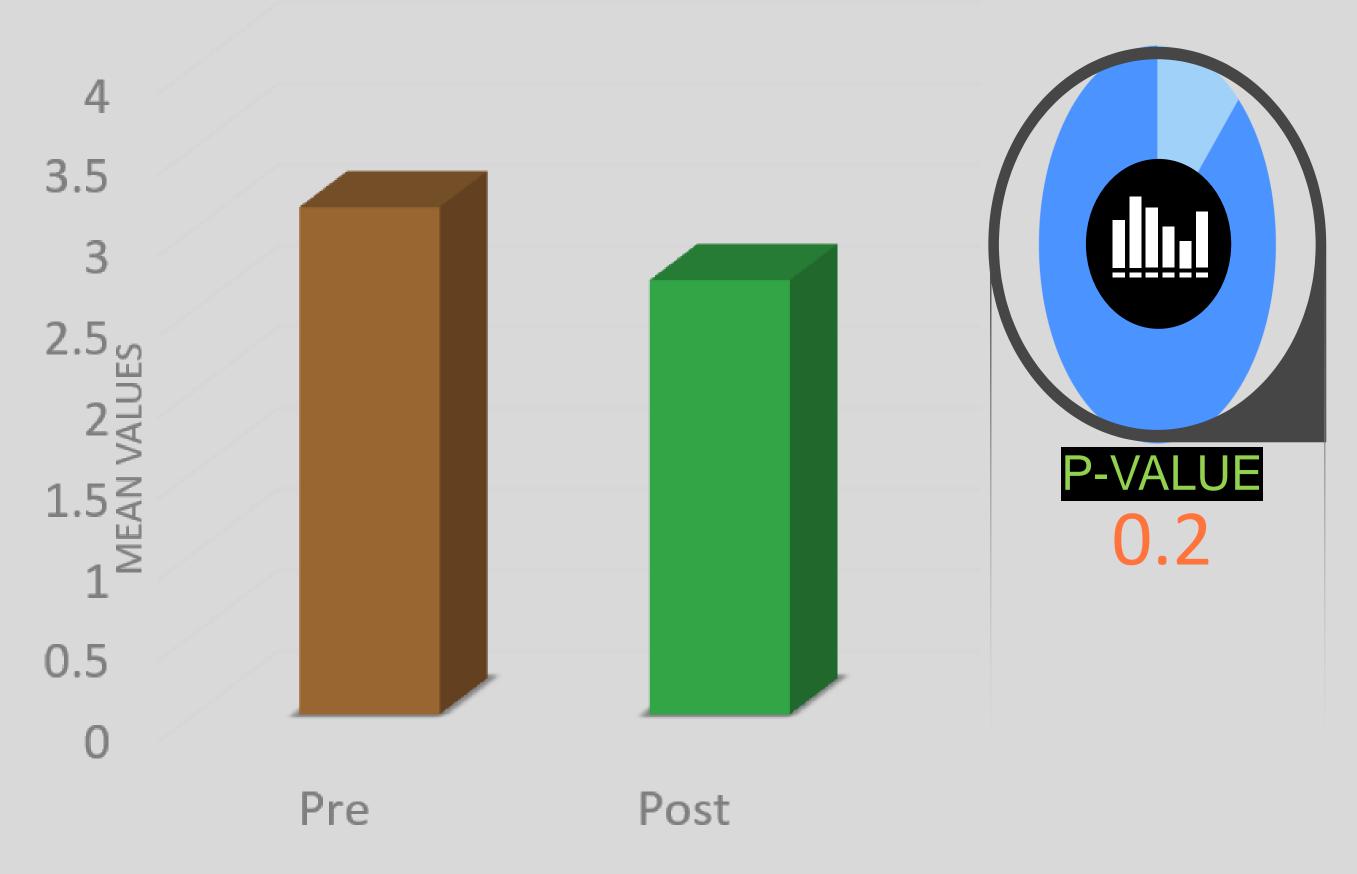
The QI project will focus on implementing a fall prevention process on hourly rounding to address 5 Ps (pain, position, potty, possession, and pumps)

Interdisciplinary team to discuss implementation and education dates of hourly rounding process.

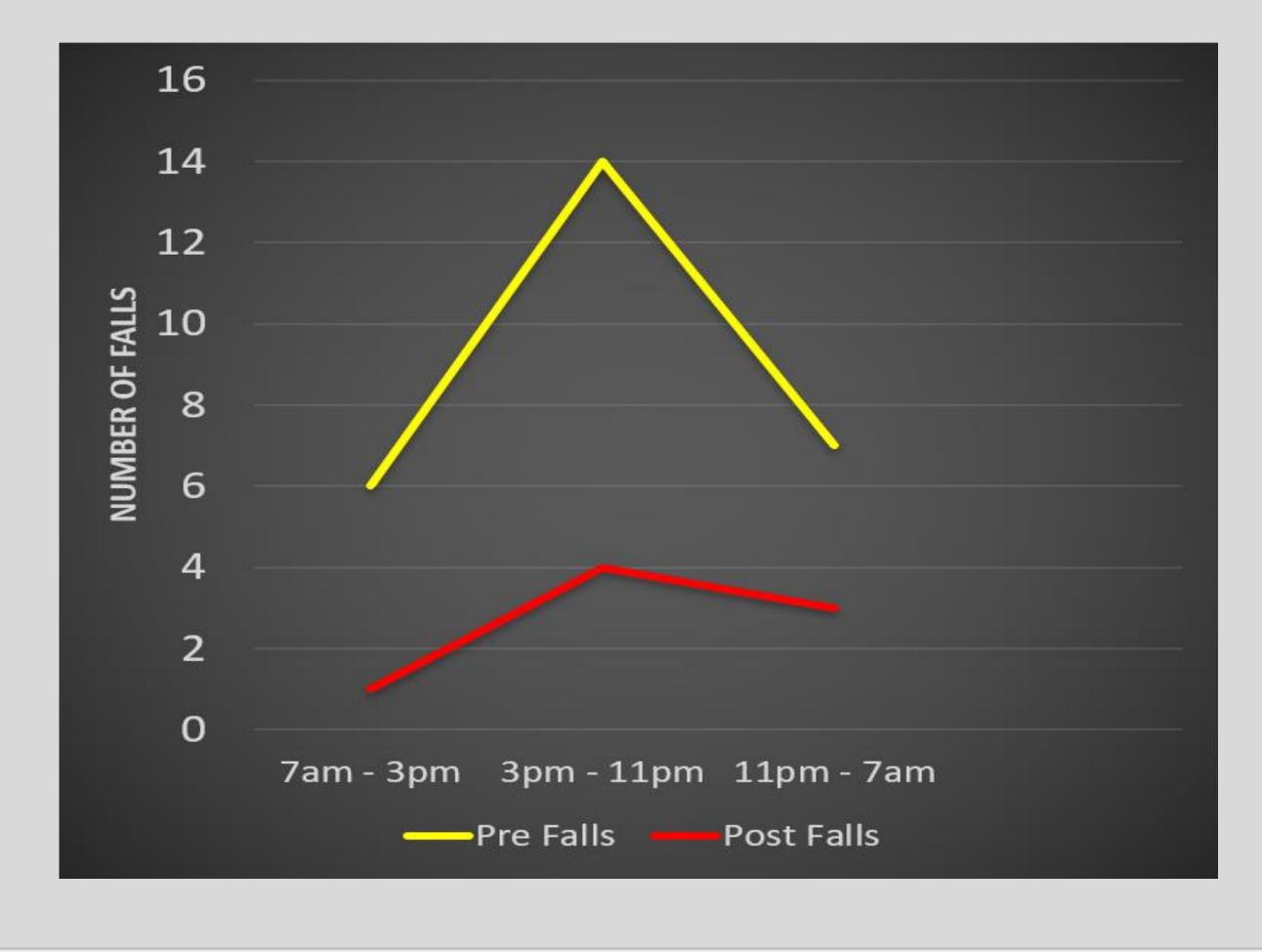
Fall prevention education to staff Hourly rounds on each shift Introduction of hourly rounding forms Data collection and analysis.

## RESULTS

## Average Number of Falls per week



## Number of Falls per Shift





#### DISCUSSION

This quality improvement project discovered that falls prevention can be challenging.

Having a vested stakeholder, solid interdisciplinary team and involvement of nursing staff the rate of falls can be decreased significantly.

The data collected in the pre and post falls showed hourly rounding was effective in decreasing the rate of falls.

#### **IMPLICATIONS FOR ADVANCE PRACTICE** NURSING

Advanced practice registered nurses (APRNs) have the professional duty to ensure the health and well-being of their LTCF residents. Fall-prevention strategies have been linked to a reduction of falls in the LTCFs.

By implementing a standardized evidence-based hourly rounding tool APRNs can impact the incidence of resident falls.

#### SUSTAINABILITY

The LTCF staff can sustain this project by continuing to use the tools with their day to day practice.

With dedication and available resources, the project is likely to form part of the normal operations of the LTCF especially where improvements are identified.

Any resulting reduction in costs, injury and death will provide the business case for the project's continuation.

#### REFERENCES

Blain, H., Bernard, P. L., Boubakri, C., & Bousquet, J. (2019). Fall prevention. In J.-P. Michel (Ed.), Prevention of chronic diseases and age-related disability (pp. 137–147). Cham, Switzerland: Springer.doi: 10.1016/j.maturitas.2019.01.012

Burns, E. & Kakara, R. (2018). Deaths from falls among persons aged ≥65 Years: The United States, 2007–2016. Centers for Disease Control and Prevention Weekly,67(18),509–514. doi: 10.15585/mmwr.mm6718a1

Centers for Disease Control and Prevention. (2019, September). Home and recreational safety: Older adult falls. Retrieved from https://www.cdc.gov/homeandrecreationalsafety/falls/fallcost /falls-by-state.html



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