AIM Statement

Reduce rates by 40% in falls with or without injury from the 2011 baseline of 1.99% to 1.2% and falls with injury from the 2011 baseline of .7% to .2% by December 2014.

Interventions

DMAIC Define-Measure-Analyze-Improve-Control


Implement: No One Walks Alone (A) 5 West (B) House-wide

Operational Changes:
- Every patient is a Fall Risk.
- Every bed alarm will be activated.
- Every patient will be accompanied by a staff when out of bed (ambulating, toileting).
- Fall risk identifiers removed: door and white board signage, yellow armband.

Culture Changes:
- UBT and Fall Project Team to champion new Fall Prevention Protocol.
- Relationship Based Care Commitments: “I will not let you fall on my watch/shift.” “I will partner with you and your family to keep you safe.”
- Commitment and involvement – “Improve” phase driven by Nursing Leadership.
- Generated more focus on pro-active toileting (staff driven, not management driven).

Control:
- Unit huddles - Share key learnings from falls and near misses.
- Daily Operational Briefing - Transparency when a fall occurs (everyone knows).
- Fall Focus Friday for Continued Education-Medications, mobility, environment of care, clinical judgment, etc.

Run Charts

EDM-Falls-37 Numerator: All patient falls with or without injury
Denominator: Patient days

EDM-Falls-38 Numerator: Patient falls with minor or greater injury
Denominator: Patient days

Data Source: Comprehensive Data System-HRET as of 09-09-2014

Lessons Learned

- Multi-disciplinary team approach was a successful key factor (Staff, Unit Based Teams, Pharmacy, Physical Therapy, Patient, and Labor Lead).
- Engagement of physician champion is critical at the initiation and throughout the project.
- Patient/family buy in is facilitated when all members of the healthcare team are clear on the concept of NOWA.
- Having a simple motto such as NOWA made it easy to do the right thing and easy to communicate across the healthcare team.

Next Steps

- Refine the role of clinical judgment/critical thinking in the process of fall elimination.
- Spread the NOWA practice to the ancillary areas.

Team Members

- Clinical Lead-Fall Champion: Leah Apatan, MSN, RN
- Project Co-leads:
  - Director, Business Strategy and Performance Improvement: Jenny Button, BIE
  - Director Risk & Patient Safety: Andree Neddermeyer, RN, CPHQ
- Nurse Manager-Pilot Unit: Estela Enriquez-Dominguez, BSN, RN
- Director: Medical-Surgical-Critical Nursing: Sally Franz, MSN, RN
- Sponsor-Chief Nurse Executive: Anne Marie Watkins, MSN, RN

Resources

- HQI Falls Harm Elimination Toolkit is available on the HQI website at hqinstitute.org < Tools and Resources.
- Questions: Contact Mahsa Farahani, Project Manager, HQI at 916-552-7521, email mfarahani@hqinstitute.org.