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## 2006: A Safe Year for Falls at John Dempsey Hospital!

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## 2006: A Safe Year for Falls at John Dempsey Hospital!

### Our Goal: To Prevent Harm

The most important goal for the Collaborative Center for Clinical Care Improvement (C4I) Patient Falls Group is to prevent any serious injury should a fall occur. While our goal is also to reduce the number of patient falls, it is especially important to prevent any serious harm to the patient. During calendar year 2006 (January-December), we accomplished our most important goal - there were no serious injuries related to any patient falls that occurred in the hospital during the past twelve months.

### The “Secrets” of Our Success

There are a number of improvements in our clinical practice that have helped us reach this critical goal for patient safety:

1. Patients are being assessed on a regular, scheduled basis for their risk to fall, using the “Fall Risk Identification Tool” (see next page).
2. Interventions are put in place to decrease a patient’s risk to fall, and decrease the risk of serious injury should a fall occur:
  - Hospital beds that lower to just 16 inches above the floor
  - Night lights on the hospital beds to help with safer movement after dark
  - Protective pads for patients to wear to cushion patient movement
  - Communication among care providers for a patient’s risk to fall:
    - Yellow bracelets worn by the patient,
    - Yellow buttons placed near the patient’s bed, so all care providers can be aware of monitoring the patient for safety.



*Thank you to all the staff in our hospital for your attention to this important part of patient care. Congratulations to us all for meeting this goal!*

### The Delirium Protocol

In addition to the interventions described above, a new plan of care is being piloted on Medicine 4 and Psychiatry-Medicine 3. This plan of care is to treat patients who have Delirium. Delirium causes patients to be confused, to have difficulty understanding what is being said to them, and to have difficulty being aware of their surroundings. Delirium can also increase a patient’s risk to fall.

The plan of care for Delirium provides assessment of how a patient is thinking and responding to his/her surroundings. If the patient is delirious and confused, a number of interventions are implemented. These interventions can clear the patient’s symptoms of delirium, and can then also decrease the risk to fall.

We will keep you updated on how this new plan of care is helping our patients.

***“During calendar year 2006 (January through December), we accomplished our most important goal - there were no serious injuries related to any patient falls that occurred in the hospital during the past twelve months.”***

**-The C4I Patient Falls Group**

**C4I—Visit us on the Web:**  
<http://patientsafety.uhc.edu>

“C4I” is dedicated to making John Dempsey Hospital the safest hospital in Connecticut. We’d like your feedback and comments! Call us at Ext. 7650 or e-mail us at [C4I@uchc.edu](mailto:C4I@uchc.edu). Patient Safety Alerts can be e-mailed to: [PSA@uchc.edu](mailto:PSA@uchc.edu)  
**James O. Menzoian, MD** and **Rhea Sanford, RN, PhD, CS**—Co-Directors  
**Kevin Larsen, QA Specialist**—**Susan Garthwait, Executive Assistant**



**Fall Risk Identification Tool**

Risk Factor	Score
Fall History to ground or floor • In past 3 months or fall during hospitalization	2
Confusion/Disorientation • Unable to follow instructions, poor safety awareness, unaware of own ability • Attempts to get out, restless, agitated	4
Mobility Impaired • Transfers with assist, device, or supervision • Leg weakness, unstable gait	2
Elimination altered • Frequency, urgency, nocturia • Diarrhea, incontinence	2
Poly Pharmacy • Narcotics, antihypertensives, sedatives, psychotropic medications	2
<b>SCORE</b>	

All patients will be minimally assigned Universal Fall Risk.

For Score 4 or more, implement Fall Prevention Protocol.

The RN/LPN may institute the Protocol after an assessment of the patient.

The Fall Prevention Protocol remains in effect as long as the patient and/or others are at risk of accidental injury.

If free of low risk indicators for 24 hours, progress patients to Universal Fall Risk; remove all alerts.

Excluded from protocol are patients who are comatose or incapable of independent movement.

**Definition of Fall:**

A person unintentionally and abruptly goes from a standing, sitting or lying position to a lower level. Excluded from this definition are such positive changes caused by spontaneous medical diagnosis (e.g. seizure, stroke, syncope episode) or overwhelming force (e.g. being pushed).

**Reportable Falls:**

Assisted, observed or unobserved falls  
Falls that result in an injury  
Falls that result in injury

Notify immediate family for any patient fall, if possible.

Notify Nurse Manager or Administrative Manager for falls resulting in moderate to major injury (laceration, requires sutures, laceration, fracture, head injury, internal injury requiring surgery).

Recommend P. T. consult for patient fall during admission.

**Fall Prevention Protocol Purpose:**

To effectively identify patients who are at risk for falls, to protect patients from injury and to promote patient safety.

**Desired Outcome:**

Optimal safety of patients will be maintained during hospitalization.

**Procedure**

1. Post Yellow safety alert:
  - At Patient doorway
  - Yellow wristband in place
  - On patient chart and Nursing Kardex
2. Provide patient/family education
  - Notify patient and/or family of high risk to fall status
  - Educate patient education
  - Explain to patient/family the need for safety precautions and purpose of any devices
  - Encourage family assistance.
3. Develop plan of care based on patient's specific risk factors.



ENLFPN Signature \_\_\_\_\_

Date/Time \_\_\_\_\_

**Patient Falls Quiz**

1. An important goal for John Dempsey Hospital is to prevent any serious patient injury should a patient fall occur. **True or False?**
2. During calendar year 2006, there were no serious patient injuries at John Dempsey Hospital that were related to patient falls. **True or False?**
3. Delirium is a condition that causes patients to feel confused, to have difficulty being aware of their surroundings, and increase their risk to fall. **True or False?**
4. John Dempsey Hospital has implemented a plan of care for patients with Delirium as a pilot on Medicine 4 and Psychiatry-Medicine 3. This plan of care can treat the delirium and help patients to again think clearly and move safely. **True or False?**

The answer to all of the questions above is: "True"

Rhea Sanford, RN, PhD, CS  
Co-Director, C4I  
Chair, C4I Patient Falls Group

**The C4I Patient Falls Group**

The C4I Patient Falls Group meets twice per month to review patient falls. Members are: **Barbara Boucher** (Rehab. Services), **Deb Cratty** (Organization & Staff Development), **Lorraine Huffaker** (Psychiatry) **Linda Manzelli**, (Cardio-Pulmonary Clinic), **Shannon Rankin** (Med 4/5), **Margaret Rathier** (Gerontology), **Rhea Sanford** (C4I), **Linda Stawski** (Psychiatry), **Kelly Susco** (Psychiatry), **Cheryl Tafas** (Staff and Patient Education), **Stephanie Tapia** (Med. 4/5), and **Healthier Wilcox** (Med. 4).

**C4I News and Updates**

**8 New "Good Catch" Winners Announced for February 2007**

We would like to thank the following individuals for their "Good Catches" and dedication to Patient Safety. They will be recognized at the February 20 "PAW/ Good Catch" Award Ceremony.

- **Dan Tynan, RN**, Inpatient Psychiatry
- **Jane Steele, RN**, Nursing Float Pool
- **Susan Schwartz, Dental Asst.**, Dental
- **Rebecca Rudeen, Med. Asst.**, Cardio-Pulmonary
- **Deborah Beckmann, RN**—NICU Nursing Float Pool
- **Margaret Balvol, RN**—Med 4
- **Jill Zimmerman, RN**—Med 4
- **Susan Morrissey, RN**—Med 4

**UHC Patient Safety Net®**

Patient Safety Net ("PSN") is now fully operational across the clinical enterprise. We are receiving numerous reports every day, and feedback about the system has been extremely positive. Thank you for working so hard to help make this successful change from our paper "RIR" reporting system to the online system. We look forward to a continuing increase in the use of PSN. Please contact Kevin Larsen if you have any PSN questions.

**C4I Website is a Source of Information**

Please visit our new website:

<http://patientsafety.uchc.edu>

In addition to information about the activities of the C4I Groups (Patient Falls, Infection Control, Culture, Pain, Medication Safety, Ambulatory and Performance Improvement Measures), and the "Good Catch" Award, you will find many helpful patient safety links!