

BACKGROUND

Falls remain one of the most preventable and frequently reported safety incidents in acute care hospitals. Despite existing protocols at University Medical Center (UMC), the medical-surgical units continue to experience a high number of falls. This quality improvement project was initiated to identify the ongoing gaps in current fall prevention strategies.

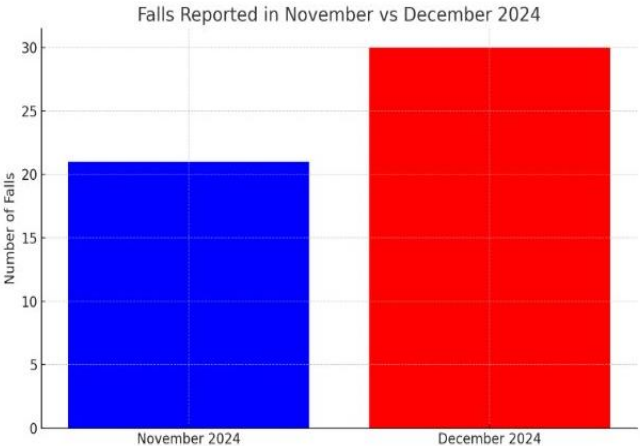
PURPOSE

The objective of this project was to examine fall-related data and current practices to identify specific areas of improvement in fall prevention within UMC's medical-surgical units.

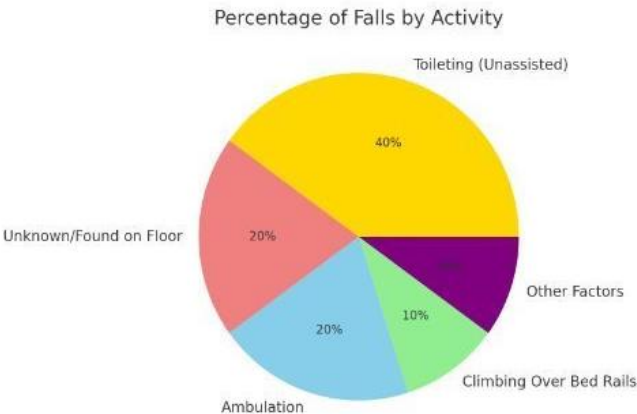
METHODS

Fall data from 2024 was reviewed using internal reports from the UMC Fall Workforce Committee. In addition, current hospital protocols and policies were analyzed. Specific attention was paid to activities leading up to each fall, as well as trends across different units. Key themes were identified through root cause analysis and input from frontline staff and leadership to uncover weaknesses in staffing patterns, assistive technology use, post-fall response, and patient/family involvement.

Total Reportable Falls Per Month of 2024
in UMC (Fall Workforce Committee, 2025)



Falls by Activity Prior to Incident
in UMC (Fall Workforce Committee, 2025)



RESULTS

The project revealed underutilization of assistive technologies, inconsistent rounding and staffing levels, insufficient post-fall debriefing processes, and minimal involvement of patients and families in prevention education. These factors contributed to continued fall incidents despite available preventive measures.

CONCLUSIONS

This project underscores the need for a more robust, multidisciplinary fall prevention approach. Enhancing technology use, strengthening staff communication, conducting timely post-fall evaluations, and engaging patients and families can significantly reduce fall rates. Future initiatives should focus on system-wide education and continuous feedback to create a safer care environment.

REFERENCES

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