Boosting Awareness: Key Fall Risk Factors for Burn Patients Among Healthcare Staff and Patients

LIONS BURN CARE CENTER

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BACKGROUND

In burn hospitalized patients, falls are a significant cause of morbidity and mortality that leads to increased healthcare costs and extended hospital stays.

Burn patients are at heightened risk due to factors such as:

- Altered mobility and range of motion (ROM) resulting from burn injuries and dressings
- Decreased strength and endurance from prolonged bed rest
- Cognitive impairment and disorientation from pain medication and trauma
- Ignoring new limitations post-injury, as young and active patients often struggle to adapt to their temporary disability
- Sensory deficits and neuropathic pain, which can affect balance and coordination
- According to a study published in the Journal of Burn Care and Research, "Burn patients are at increased risk of falls due to physical limitations, pain, and medications" (1).

PURPOSE

The aim of this project is to increase awareness and education among staff, ancillary personnel, and patients regarding fall risk factors specific to burn patients. Through a multidisciplinary approach, we aim to:

- Review fall data and identify fall risk factors specific to the burn patient population

- Develop targeted strategies to address these risk factors
- Decrease falls to zero

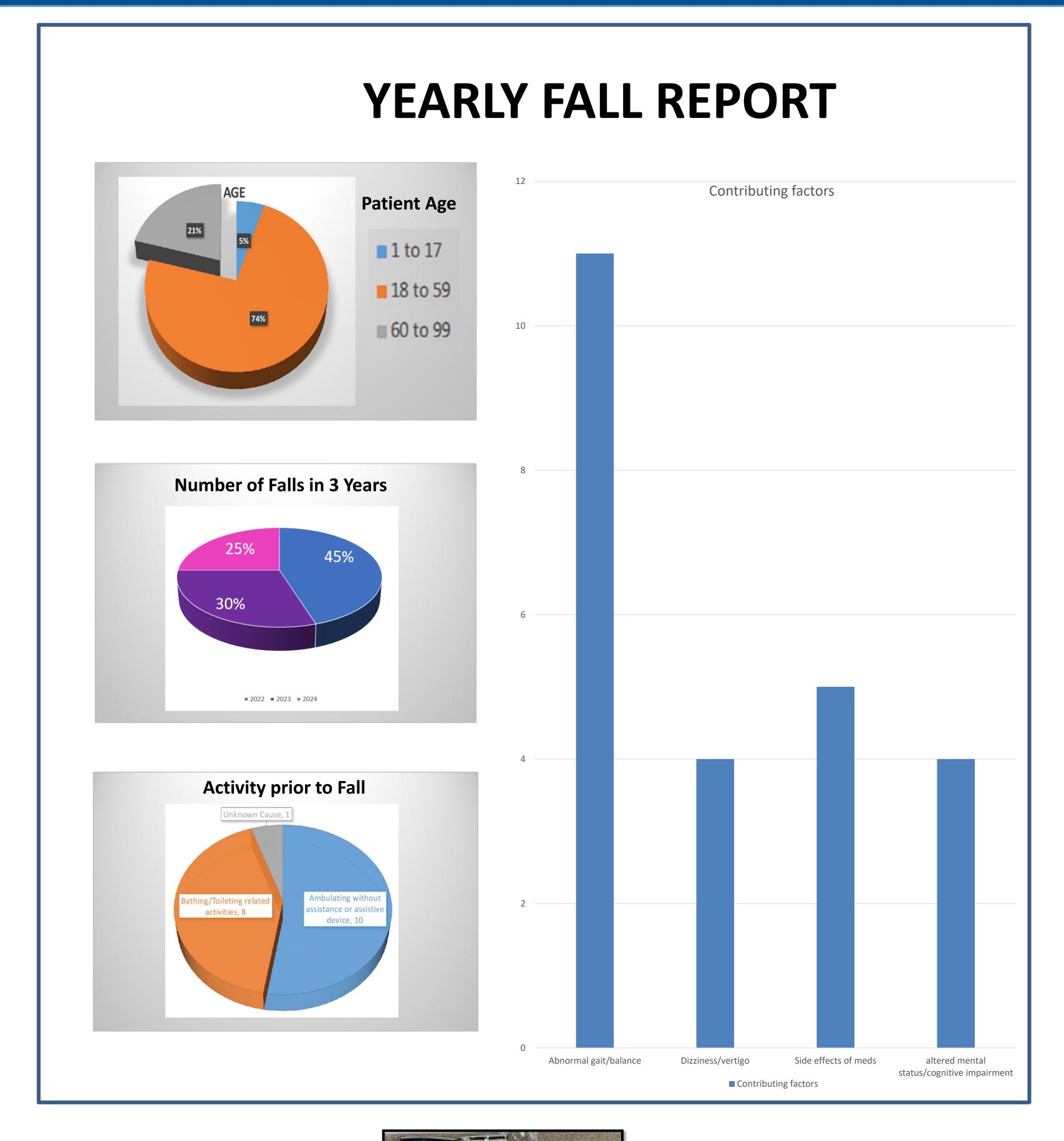
To achieve this goal, a multidisciplinary purposeful rounds consisting of workgroup Burn Surgeons, Physicians, Nurses, Nurse practitioner, Pharmacist, Patient safety officer, Quality improvement specialist, Rehabilitation Personnel, patient and family representative will be implemented. This collaborative team will work together to identify and address fall risk factors unique to burn patients, ensuring a comprehensive approach to fall prevention and patient safety.

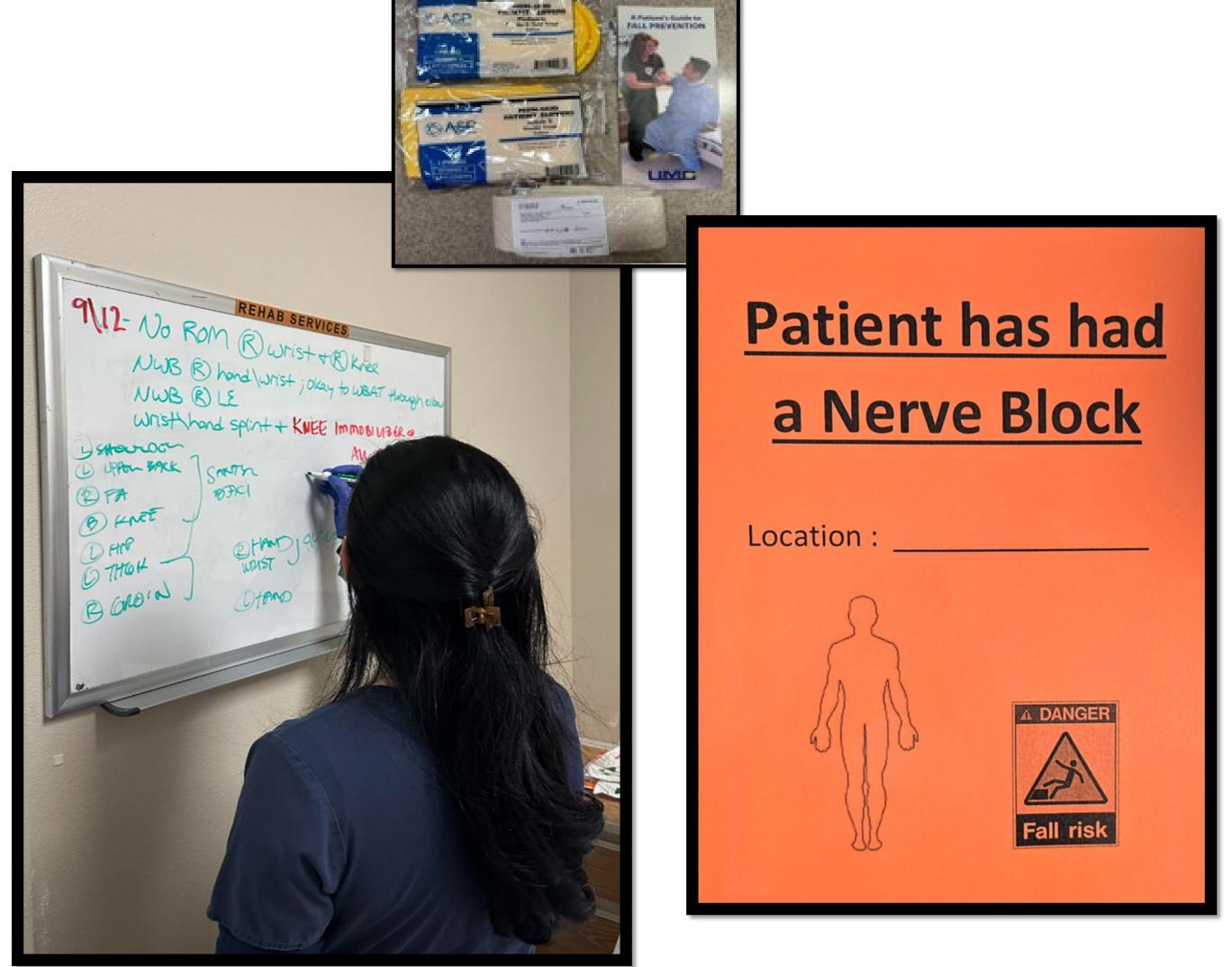
METHODS

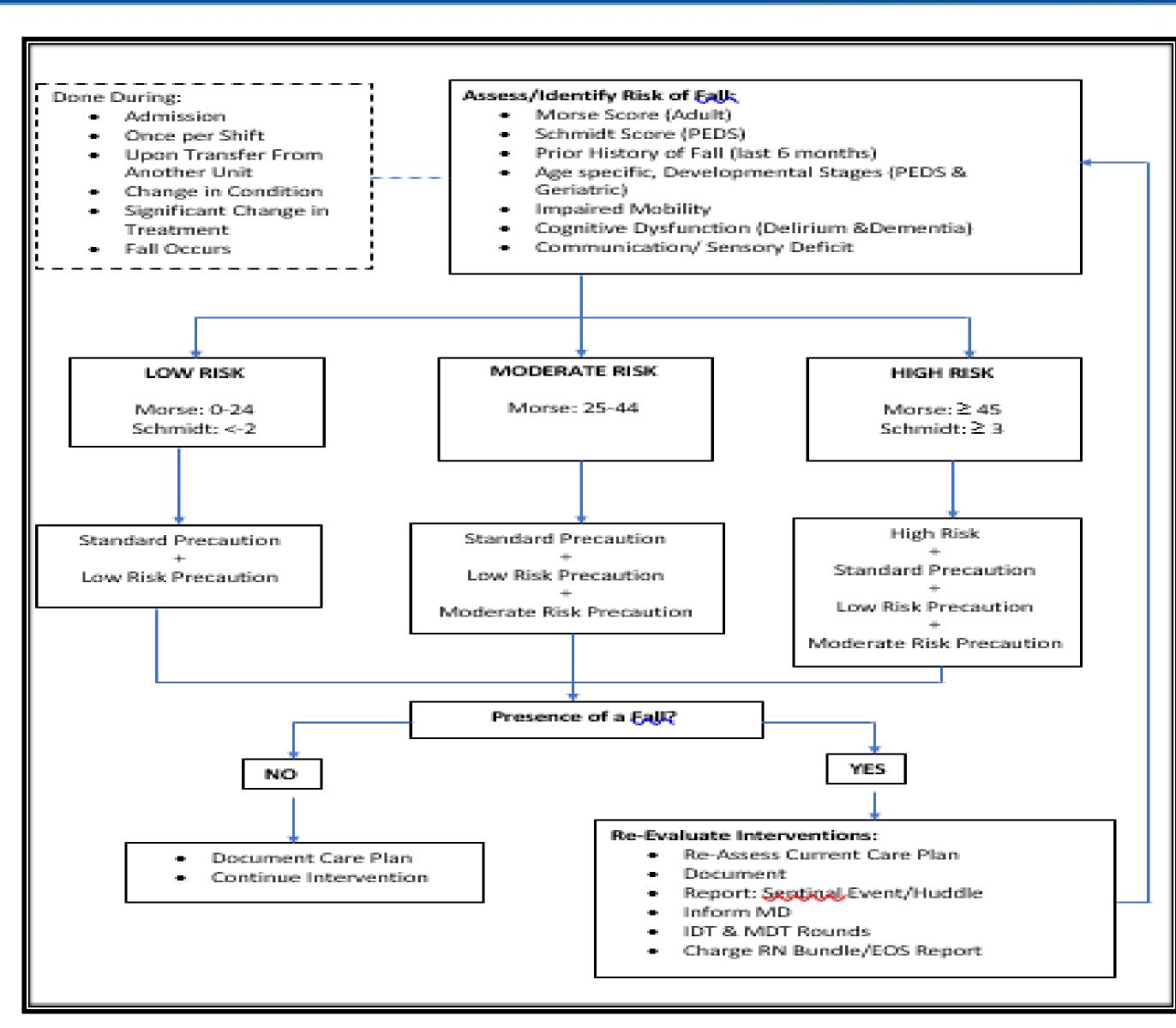
This quality improvement project will utilize the Plan-Do-Study-Act (PDSA) model to evaluate fall data on the burn unit and identify fall risk factors specific to burn patients.

The following steps will be taken:

- **1. Assessment of Current Practices:** The workgroup will conduct a thorough evaluation of existing fall prevention measures by:
- Review and analyze fall data on the burn unit to identify trends and risk factors
- Reviewing incident reports related to falls on the burn unit
- Discussing current fall protocols and burn mobility limitations
- Analyzing current practices and identifying areas for improvement
- PT and OT will identify patient fall risk factors during treatment sessions
- **2. Intervention Development:** The workgroup will create an enhanced fall prevention program tailored to the burn unit, incorporating:
- Staff training on fall prevention strategies and burn-specific risk factors
- Patient education on fall risk factors and prevention methods
- Environmental modifications to reduce fall risk
- Utilization of technology such as bed alarms and chair alarms
- 3. Implementation and Monitoring: The intervention will be deployed on the burn unit, with:
- Implementation of fall prevention strategies and education to patients, families, and staff Continuous monitoring of fall data and feedback from staff
- Ongoing adjustments to the program based on real-time data analysis
- Use of white boards to communicate patient-specific fall risk factors and precautions
- Documentation of patient limitations, use of walkers, and other assistive devices will be updated by PT, OT, and staff
- **4. Evaluation:** The program's effectiveness will be measured by:
- Comparing pre- and post-intervention fall rates on the burn unit
- Analyzing incident reports and fall data to identify trends and areas for improvement
- Conducting a cost-benefit analysis to assess the program's impact on resource utilization
 Ongoing monitoring and evaluation of fall data to assess effectiveness of interventions and
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RESULTS

The goal of this initiative is to decrease falls on the burn unit by scoring greater than 50% in 5/8 Quarters (above the average Magnet Mean).

A positive return on investment (ROI) will be measured by:

- Reduced costs associated with fall-related injuries and treatmentsDecreased length of stay and hospital readmissions
- Improved resource allocation and efficiencyEnhanced patient safety and quality of care

These outcomes will be tracked and analyzed to assess the program's effectiveness and identify areas for further improvement.

CONCLUSIONS

This proposed multidisciplinary project aims to develop and implement a comprehensive fall prevention program specifically tailored to the burn patient population. Identifying and addressing risk factors unique to burn patients, our goal is to decrease patient falls by scoring greater than 50% in 5/8 Quarters (above the average Magnet Mean).

Through collaboration and innovation, we seek to establish a model program that can be replicated and scaled across hospital units, ultimately enhancing patient safety and quality of care.

REFERENCES



