Best practices to prevent fall in the outpatient setting



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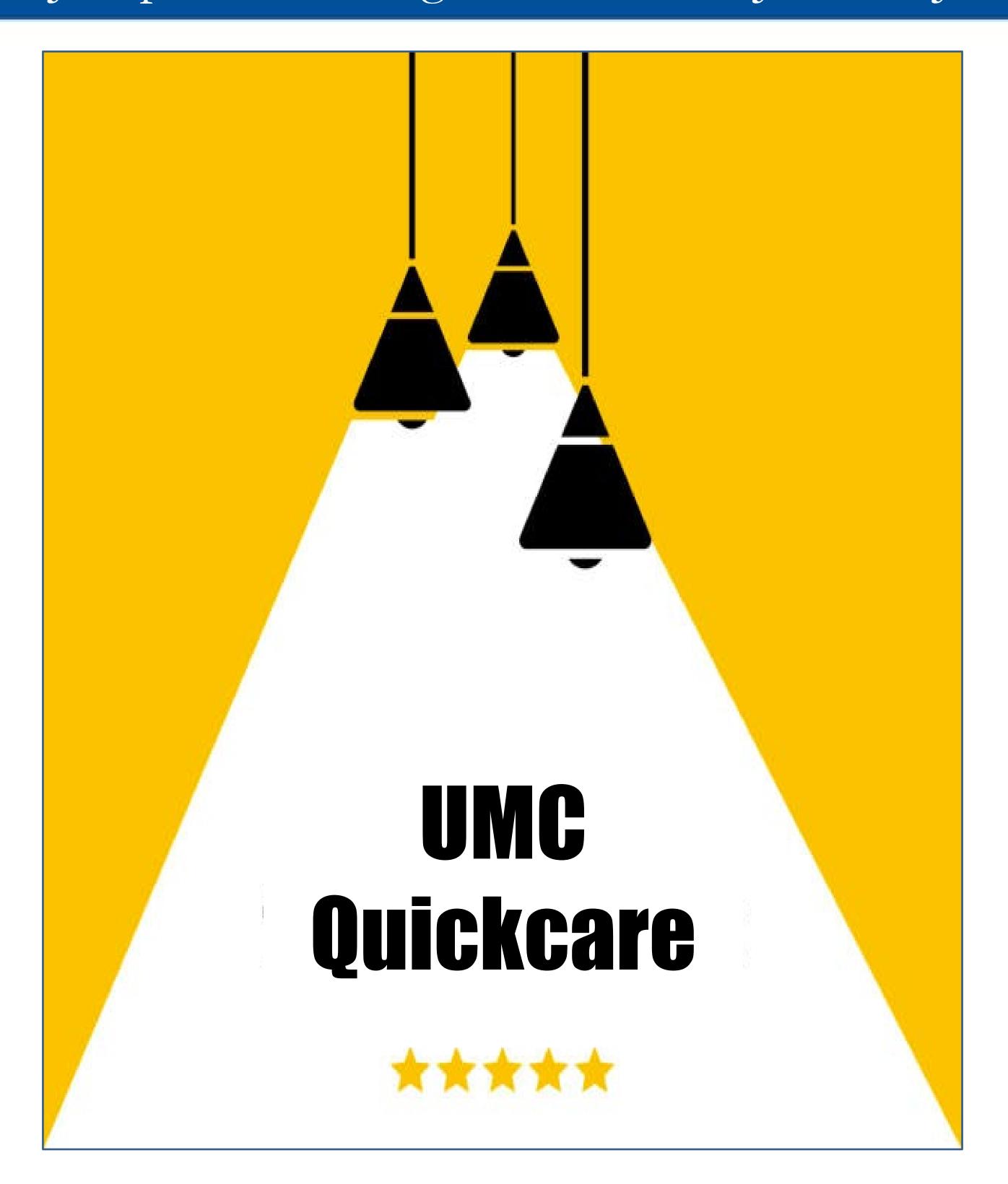
BACKGROUND

- Since falls are the most common cause of non-fatal injuries and of hospital admissions for trauma, fall identification and prevention awareness is crucial in hospital settings and all efforts begin with assessing individual patient's risk for falls
- Falls are the most common reported adverse event in an inpatient setting in the United States, and up to 33% result in injury (Choi et al., 2011). Falls create dependency, disability, decreased quality of life for fallers, increased risk of injury to caregivers, risk of fall recurrence, and higher hospital costs associated with falls (Powell-Cope et al., 2014).
- Currently, the clinic has collaborated with the hospital fall committee to brainstorm how to decrease fall at an outpatient setting
- Due to the high rate of falls, it is imperative to improve the current fall prevention interventions in place. The current protocol consists of bed alarms, fall risk bracelets and a fall risk sign outside the patient room.

PURPOSE

Identification and prevention of important factors in an outpatient fall risk prediction model to improve the quality of care and to determine the most important predictors of outpatient falls.

- A fall risk assessment upon admission
- Visual identification of individuals at high risk for falls
- Fall risk factor directed interviews
- Standardized multifactorial education for staff, patients and their families





METHODS

OUTSIDE OF CLINIC

- Increased lighting in the parking lot
- Pavement repair done in the parking lot

POSSIBLE IDENTIFIERS INSIDE OF THE CLINIC

- Yellow arm bands
- Have fall champion
- Put star identification in patient EMR
- Assign patients room close to the nurse's station.
- Use of Morse scale to identify the level of fall risk
- Fall risk patient education pamphlet

RESULTS

- The desired outcome is a reduction in the number of falls for geriatric patients
- The incidence of falls in the outpatient clinics will be monitored over the course of a 6-month period.
- Morse Fall Scale scores will be calculated by nurses at the time of admission and reports from SI the number of falls will be conducted on a monthly basis to compare the rate of falls (e.g. falls per person year).

CONCLUSIONS

To decrease the number of falls in an outpatient setting by education the staff on the importance to assess for fall risk and also to educate the patient how to prevent falls and give resources.

REFERENCES

References available upon request

