IMPLEMENTATION OF POST FALL HUDDLES IN A SKILLED NURSING FACILITY

Princess Lomax MSN, APRN, FNP-C, DNP Student

Background & Significance

- Inpatient falls are rampant in hospitals and have become a devastating issue to both patients and the healthcare facilities.
- Inpatient falls in the top five of the most prevalent causes of preventable patient injury, prolonged hospital stay, hospital cost and most importantly patient death.
- According to the Agency for Healthcare Research and Quality (2016), approximately 700,000 to 1,000,000 falls occur each year in the hospital setting.
- As of 2008, the Centers for Medicare and Medicaid Services (CMS) do not reimburse hospitals for certain types of traumatic injuries that occur while a patient is in the hospital

PICOT

Is there a relationship between implementing an immediate post fall huddle compared to the weekly fall huddle impact and the number of resident falls over an eight-week period?

Decision to Change Practice

•The study on the post-fall huddle strategies, therefore, enlightens health facilities to identify the cause of falls
•Prevent future occurrences by employing think tanks with the ability to assess situations leading to the falls
•Furthermore, the study also elaborates on the relevant stakeholders needed to actualize the post-fall huddles strategy
* Organizational policy change

▪**EBP Framework**

Betty Neuman's Health Care System Model

▪**EBP model**

Kurt Lewin's Change Theory

•Both EBP Framework and model were used to guide the systematic implementation of EBP

Review of Literature

Review of Literature

Database	Keywords	Limiters	# searches	# Used
JBI	Falls Prevent*	<10 years	26	3
Medline	Fall Huddle*	< 10 years	200	0
PubMed	Falls Elderly	< 10 years	91	1
CINAHL	Post-Fall	< 10 years	221	4
Cochrane	Post-Fall	English	56	3

Synthesis of Evidence

- Multifactorial fall prevention interventions are most effective
- Successful factors for the implementation of multicomponent fall prevention interventions
- Taking a proactive, preventative approach has the potential to decrease the rate of falls
- Post fall assessment enables the identification of risk factors
- Immediate implementation of a post huddle following a patient falls

Evidence Appraisal

2 Level 1- Systematic Reviews/Meta-analysis of RCTs
0 Level 2- RCT Design
1 Level 3- Controlled Trials, Quasi-experimental Designs
6 Level 4- Case-Control, Cohort Studies/retrospective
0 Level 5- Systematic Reviews/ integrative reviews of Descriptive or Qualitative Studies
1 Level 6- Descriptive, Qualitative Studies
1 Level 7- Expert Opinion, Report of Expert Committees

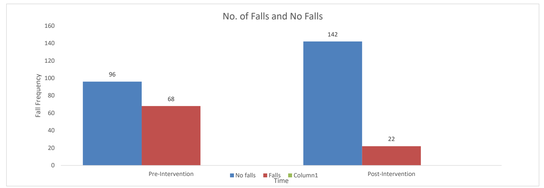
Implementation

- The EBP was performed at a skilled nursing facility, located in the East Coast of the United States.
- The Skilled Nursing Facility (SNF), which is a 164 bed SNF, specializes in the provision of skilled nursing, rehabilitation, and respite care services
- Primary target group of this EBP project included elderly residents age 65 and older, residing in a SNF with multiple chronic conditions
- Implementation timeframe occurring over a 8 week period

Evaluation

- Chi-square and Fisher's test were used to evaluate the homogeneity of variables related to the demographic, clinical and unit characteristics in the pre-intervention and post-intervention groups.
- Chi-square test of independence was used to evaluate homogeneity of variables related to the residents' gender, comorbidities, ambulatory status, time of fall, and fall status, and the number of staff present on unit where the falls occurred.
- The chi-square test results showed that the two groups were homogenous in terms of gender (p =0.875), presence of comorbidities (p =0.940), ambulatory status (p =0.716), time of fall (p =0.732), fall status (p =0.835), and the number of staff present on unit (p =0.724)
- Fisher's exact test was used to evaluate homogeneity of variables related to the age of the participants. Fisher's exact test results showed that the two groups were homogenous in terms of age (0.319)

Demographics Data



Conclusions

- Analysis results showed that the implementation of the intervention led to a 67% reduction in the number of fall events at the SNF.
- Additionally, the results showed that a significant association between the implementation of the intervention and a reduction in the number of residents who sustained falls compared to those who did not ($X^2(1) = 32.402$, $p < 0.0001$).
- These results demonstrated that there is statistical evidence to encourage the implementation of immediate post-fall huddles to reduce the number of fall events among older adults in LTC facilities
- The results also validate the importance of immediate post-fall huddles in identifying root causes of falls, which facilitates prompt development of individualized interventions in the care of seniors to prevent future falls.

Recommendations

- Further research is required to validate the efficacy of post-fall huddles in reducing the incidence of falls among residents in LTC facilities.
- Future research studies is indicated to measure the sustainability of the outcomes and the impact of such interventions on fall-related injuries.

Acknowledgements

•Dr. Jeffrey A. Coto, DNP, MS-CNS, RN, CCRN -Project Advisor
•Dr. Marga Ngwang – Clinical Site Advisor
•Clinical site of project implementation
•My fellow student peers for routinely peer-reviewing my project

Valparaiso University