CAPTURE Falls

Collaboration and Proactive Teamwork Used to Reduce Falls

Quarterly Collaborative Call #54

January 21, 2025

2:00 – 2:30 p.m. CT

Topic:

Staff Education for Fall Risk Reduction

University of Nebraska Medical Center℠

AGENDA

- Housekeeping
- Topics for Staff Education on Fall Risk Reduction
- Your Needs for Resources and Support

Housekeeping

1. **Know Falls Event Reporting**
    - 2024 Quarter 4 reports will be sent early February; please have falls entered by 01/31/25 for up-to-date reports
    - Reports will be sent to any hospital that reported at least one fall within the past year
    - Continue reporting to help facilitate learning from fall events and track your outcomes
    - Reminder for NCPS members: reporting to Know Falls = reporting to NCPS
    - Contact us with REDCap issues (add users, remove users, etc.).

Housekeeping

2. **Coming Soon – Request for Data to Calculate 2024 Annual Fall Rates to Support Nebraska's CAH-Specific Benchmark**
   - Benchmark fall rates serve as a helpful comparison point for your hospital; to our knowledge, we establish the only CAH-specific fall rate benchmark in the country.
   - In February, your hospital's key contact will receive an email with a REDCap link to enter and/or confirm fall count and patient day data needed to calculate your hospital's fall rates.
     - Some fields are pre-populated for those hospitals that actively use Know Falls.
   - No action needed at this time except entering all 2024 fall event data (for those hospitals that actively report into Know Falls)

Housekeeping

3. **Collaboration with Strategic Quality Support System (SQSS)**
   - Many CAHs in NE use SQSS to support their QI efforts
   - We have been working with SQSS over the last several months to develop process to “push” data from SQSS into Know Falls to reduce duplicate data entry.
   - Current status: question template is built; we have been able to pull data from SQSS. Now working with SQSS to ensure data fields between the two systems align correctly.
   - We will keep you informed on progress. It’s getting close!

Housekeeping

4. **Coordinated Action Toward Community Health: RedUce Risk And Limit (CATCH RURAL) Falls update**
    - We still have room for a few more RHCs to participate in our first 6-month CATCH RURAL Falls program cohort on Fall Risk Screening. If any of your affiliated RHCs are interested in joining us, please let us know!
    - Visit the start of our CATCH RURAL Falls program website at: https://www.unmc.edu/patient-safety/catch-rural-falls/index.html

Housekeeping – Question from a CAPTURE Falls Hospital

5. **Challenges with non-slip footwear for patients with excessive edema and/or bandaging on lower extremities**
   - These patients may be unable to wear typical non-slip socks or their own footwear during mobility. What to do???
   - Possible solutions:
     - Bariatric-sized non-slip socks worn only over the foot (cut vertically over the lower leg and rolled down as needed; worn only during mobility to avoid prolonged uneven compression)
     - Post-surgical sandals (though some styles may not have a large enough sole to fit well, and can be costly)
     - Until edema and/or bandaging is reduced, focus only on mobility goals of standing at bedside, marching in place, and pivot transfers (not walking), and use a non-slip floor mat (e.g. Dycem)
   - What ideas do you have? Drop them in the chat!

Staff Education for Fall Risk Reduction

What Do Review Articles Say About the Efficacy of Interventions for Hospitalized Patients?

Mostly inconclusive and/or weak evidence for several single interventions:

- Exercise
- Medication review
- Alarms
- ID bracelets
- Low beds
- Sitters
- Rounding
- Non-slip socks

Stronger evidence for:

- Multifactorial interventions
- Patient/family education
- **Staff education**

- Cameron ID, Dyer SM, Panagoda CE, Murray GR, Hill KD, Cumming RG, Kerse N. Interventions for preventing falls in older people in care facilities and hospitals. Cochrane Database of Systematic Reviews 2018, Issue 9. Art. No.: CD005465. https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD005465.pub4/epdf/full
- LeLaurin JH, Shorr RI. Preventing falls in hospitalized patients: State of the science. *Clin Geriatr Med*. 2019;35(2):273-283. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6446937/pdf/nihms-1519397.pdf
- Morris ME, Webster K, Jones C, Hill AM, Haines T, McPhail S, Kiegaldie D, Slade S, Jazayeri D, Heng H, Shorr R, Carey L, Barker A, Cameron I. Interventions to reduce falls in hospitals: A systematic review and meta-analysis. Age Ageing. 2022;51(5):afac077. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9078046/pdf/afac077.pdf

Topic Areas for Staff Education

Policies and Procedures

Overall fall risk reduction program policies and procedures

Fall Definition

What counts as a fall

Types of falls

Categories of fall-related injury

Fall Risk Assessment

When and how to conduct a fall risk assessment

What to do with the risk assessment results

Interventions

What fall risk reduction interventions are available and appropriate for use for patients given their specific fall risk factors, and how to implement them

Post-Fall Clinical Assessment

When and how to conduct a post-fall clinical assessment

Post-Fall Huddle

When and how to conduct a post-fall huddle

How to complete post-fall huddle documentation

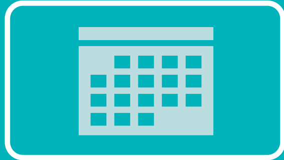
Fall Event Reporting

When and how to complete a fall event report

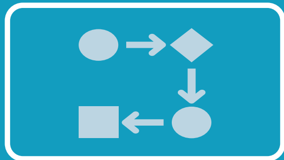
What topics could be covered…and, ***why***!

Other Considerations for Staff Education

Who should receive this education?



When/how often should they receive this education?



How/by what method(s) should we deliver this education?

How do we evaluate this education?

What resources are needed to support this education?

Other Considerations for Staff Education

Learning objectives

Cognitive (knowledge) and psychomotor (skill) needs

Strategies to assess knowledge and skill (did our education 'work'?)

Ability to integrate into online learning management systems

General education vs. individualized to facility specific policies

Your Needs for Resources and Support for Staff Education for Fall Risk Reduction

Discussion Questions on Staff Education for Fall Risk Reduction

What staff education topic area(s) are of greatest need for improvement?

What resources or tools would help?

Summary of Discussion Points Raised

- Outline of educational content and/or case studies may help for certain fall risk reduction topics
- Staff education extends beyond formal education. Informal opportunities to educate and/or reinforce fall risk reduction to staff can support a culture of safety (e.g., team rounds, huddles, audits)
- Need to determine the fall risk reduction education that is appropriate for clinical and non-clinical staff
- “Room of Doom” (room set up with fall hazards) is a fun way to engage staff in learning about typical environmental hazards and solutions for those hazards
- Challenges exist in teaching night shift staff about post-fall huddles

Engagement with the CAPTURE Falls Program

Initial Steps

- Begin engagement or re-engagement with UNMC team on a rolling basis
- Review and sign Data Registry and Quality Improvement Agreement that acknowledges UNMC's relationship with the Nebraska Coalition for Patient Safety (NCPS) and associated confidentiality protections for data and information sharing.
- Form your team
- Complete gap analysis
- Participate in at least one consultative meeting with UNMC team to review gap analysis and establish priorities/goals

Additional Resources Available

- Use of the CAPTURE Falls online roadmap
- Further consultation with UNMC team "on-demand"
- Quarterly collaborative calls for education and program updates
- Know Falls REDCap database for reporting and learning from falls
  - Quarterly reports for hospitals that report into Know Falls
  - Participation in establishing CAH-specific fall rate benchmarks

Sustainment

- Monitor progress towards goals
- Monitor fall rates; compare with benchmarks
- Update gap analysis when appropriate

Can also "jump in" anywhere in your fall risk reduction process for focused topic-specific support

Reminders

1. Future Collaborative Calls/Educational Opportunities: Let us know if there is a topic or series of interest!
    - April 22, 2025 at 2:00pm CT
    - July 22, 2025 at 2:00pm CT
    - October 21, 2025 at 2:00pm CT
2. Looking for fall risk reduction resources?
   Click here: https://www.unmc.edu/patient-safety/capturefalls/index.html
   Still can’t find what you are looking for? Let us know what we are missing!

Assistance is an email away!

Contact us for more information about:

- Fall risk reduction best practices: Dawn (dvenema@unmc.edu)
- Team performance, quality improvement and implementation challenges: Vicki (victoria.kennel@unmc.edu)
- Know Falls (REDCap): Dawn (dvenema@unmc.edu) and/or Matt (matthew.mcmanigal@unmc.edu)
- General questions or not sure?: CAPTURE.Falls@unmc.edu

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