

CAPTURE Falls

Collaboration and Proactive Teamwork Used to Reduce

Quarterly Collaborative Call #33

October 29, 2019 2:00 – 2:30 p.m. CDT

**Closing the Loop on Collaboration:
Results of Nursing/Rehab Survey in
Relation to Fall Rates**

AGENDA

1. Housekeeping
2. Survey results: Perceptions of Collaboration Between Nursing and Rehabilitation Therapy Staff to Support Fall Risk Reduction



Housekeeping



1. Patient and family education tools for fall risk reduction
2. Event Reporting
 - Quarterly data reports sent to hospitals that reported at least one fall in Know Falls in 2019.
 - Reporting of all falls is encouraged—including outpatient, ER, ambulatory care, LTC, etc.
 - Contact Anne at askinner@unmc.edu with REDCap issues (add users, password resets) and special report requests.



Survey Background

Health and monetary costs associated with hospital falls

Unassisted falls more likely to result in injury

Rehab staff have a strong background in safe patient mobility

Nursing staff have a large responsibility for mobilizing patients (among several other responsibilities!)

Better collaboration between MDs and nurses was associated with lower fall rates
(Ma et al, 2018)

What about collaboration between nursing staff and rehab staff?



Survey Purpose

- Determine if collaboration between nursing and rehabilitation therapy staff is related to unassisted and injurious fall rates



Survey Timeline

Q4 2018: Survey developed and pilot tested by nurses, PTs, and OTs from non-CAPTURE Falls hospitals



Q4 2018: Invitations to participate sent to CAPTURE Falls hospitals currently reporting into KNOW Falls



Q4 2018: 18 hospital CEOs agreed to have their staff participate



Q1 2019: Over 700 nursing and rehab staff received the survey; 2018 fall rates calculated



Q2-Q4 2019: Data analysis and sharing of results

Survey Topics

Mechanisms and Quality of Verbal Communication

(e.g. huddles, rounds, handoffs)

Mechanisms of Written Communication

(e.g. white boards, medical record)

Perceptions of Other Profession

(e.g. respect, understanding of roles, cooperation)

Interprofessional Training on Safe Patient Mobilization

(e.g. effects on skills, confidence, and collaboration)

Survey Recipients



- At least 19 years old
- Employed by hospital at least 6 months
- Spent time each week engaged in direct inpatient care
- Member of nursing or rehabilitation therapy staff
 - Nursing staff = RN, LPN, CNA, or NA
 - Rehab therapy staff = PT, OT, PTA, OTA



Survey response rate

- Response rate for individual hospitals ranged from 21% to 70%
- Mean response rate for all hospitals = 47%
- 320 total respondents
 - 243 nursing; 76 rehab



Survey Results = Positive Perceptions of Nursing Staff

Sample Survey Item	N of positive responses	% of positive responses
Nursing staff can communicate openly with rehabilitation therapy staff.	215	89.2
It is difficult to ask advice from rehabilitation therapy staff. (Reverse coded)	183	75.3
Rehabilitation therapy staff uses a white board or other signage to communicate with nursing staff.	161	68.2
Nursing staff understands the role of rehabilitation therapy staff.	224	93.7
Rehabilitation therapy staff understands the role of nursing staff.	216	89.6
Nursing staff respects rehabilitation therapy staff.	229	95.4
Nursing staff is respected by rehabilitation therapy staff.	208	86.7
Nursing and rehabilitation therapy staff work together as a team.	212	89.8

Survey Results = Sample of Positive Perceptions of Rehab Staff

Sample Survey Item	N of positive responses	% of positive responses
Rehabilitation therapy staff can communicate openly with nursing staff.	73	97.3
It is difficult to ask advice from nursing staff. (Reverse coded)	54	72.0
Nursing staff uses a white board or other signage to communicate with rehabilitation therapy staff.	67	94.4
Rehabilitation therapy staff understands the role of nursing staff.	73	97.3
Nursing staff understands the role of rehabilitation therapy staff.	70	93.3
Rehabilitation therapy staff respects nursing staff.	72	97.2
Rehabilitation therapy staff is respected by nursing staff.	64	87.7
Rehabilitation therapy and nursing staff work together as a team.	70	93.3

Survey Results: Factor Analysis* of Nursing Responses

**Statistical method to combine individual survey items into “factors” that represent related variables*

Factor 1: Working Relationship with Rehab Staff

- Open communication
- Mutual understanding of roles
- Mutual respect
- Work as a team
- Both contribute expertise

Factor 2: Training on Patient Mobilization

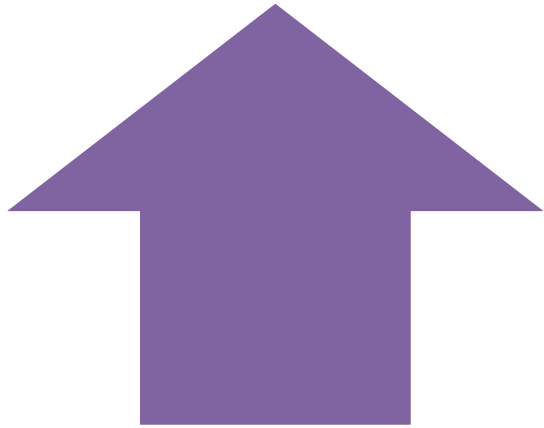
- Skills improved
- Encourage mobility
- Seek help from other professions
- Use equipment when assisting patients

Factor 3: Rehab Staff Use of Written Communication

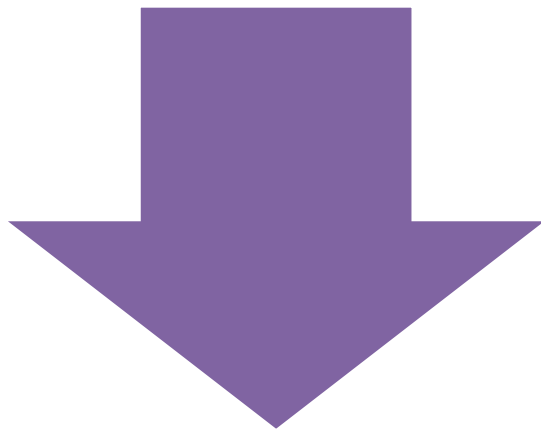
- White board or other signage
- Medical record



Survey Results: Relationship between Survey Responses and Fall Rates



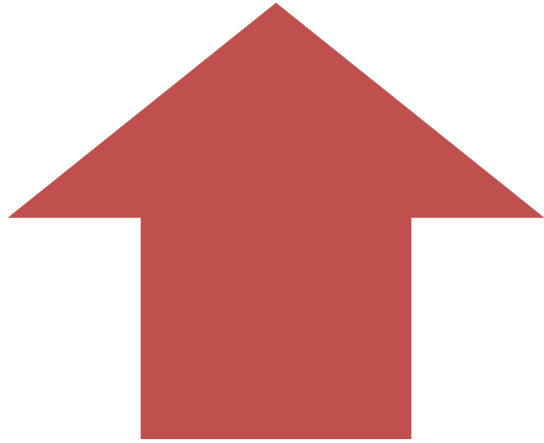
The more nurses felt rehab staff used written strategies to communicate



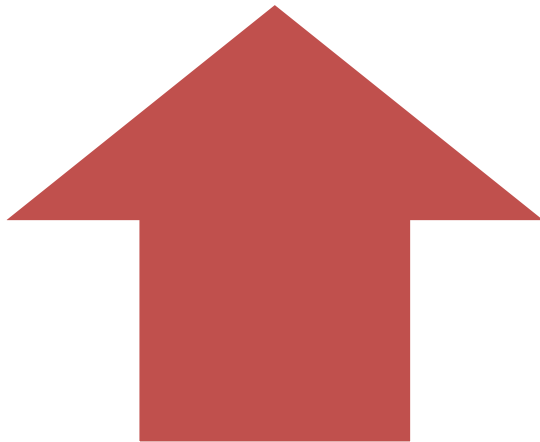
The lower the injurious ($r = 0.34$) and unassisted ($r = 0.35$) fall rates

r = Spearman's rank order correlation coefficient. Higher values indicate stronger relationships. Generally, absolute values between 0-0.25 = little to no relationship, 0.25-0.50 = fair relationship; 0.50-0.75 = moderate relationship; and values > 0.75 = good relationship.

Survey Results: Relationship between Survey Responses and Fall Rates



As injurious fall rates increased



Nursing staff felt more positive about their working relationship with rehab ($r = -0.32$) and about training for patient mobilization ($r = -0.32$)

Higher fall rates may create more need for collaboration.



Survey Results: Relationship between Survey Responses and Fall Rates



As unassisted fall rates increased



Nursing staff felt more positive about training for patient mobilization ($r = -0.30$)

Higher fall rates may create more need for collaboration.

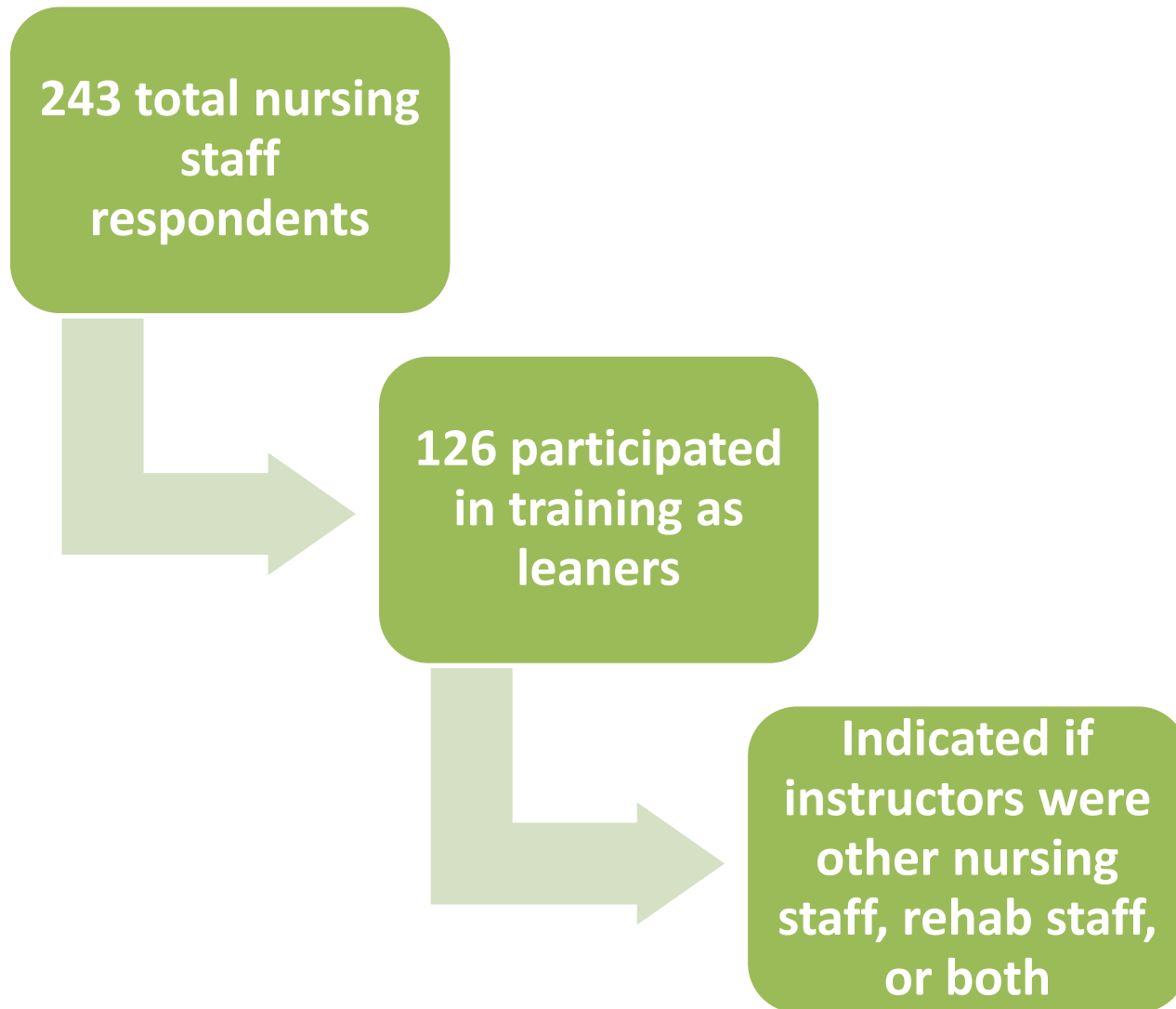


Survey Secondary Purpose: Descriptive Results Specific to Training on Patient Mobilization

- Nursing staff report lack of training and reduced confidence as barriers to patient mobilization (*Hoyer et al, 2015; Dermody et al, 2017*).
- Given their expertise in patient mobility, rehab staff are well-suited to provide training in this area to nursing staff.



Survey Secondary Purpose: Descriptive Results Specific to Training on Patient Mobilization



Survey Secondary Purpose: Descriptive Results Specific to Training on Patient Mobilization

As a result of the training, and regardless of which profession provided training, nursing staff were more likely to:

- Feel skills for mobilizing patients had improved
- Encourage patient mobility
- Utilize equipment for patient mobilization
- Seek help from profession(s) who provided instruction
- Feel training helped both professions have similar goals for patient mobilization



Survey Secondary Purpose: Descriptive Results Specific to Training on Patient Mobilization

As a result of the training, if rehab staff took part in instruction, nursing staff were more likely to:

- Feel confidence for mobilizing patients had improved (85% if rehab involved in instruction vs. 57% if instructed by nursing alone)
- Feel training was important for fall risk reduction (91% if rehab involved in instruction vs. 67% if instructed by nursing alone)



THANK YOU for participating from the survey research team

- Dawn Venema, PT, PhD
- Meagan Reiners, SPT
- Robin High, MA, MBA
- Anne Skinner, MS, RHIA
- Vicki Kennel, PhD



Discussion:

- Your thoughts on what you have heard?
- Strategies that have worked or not worked for you?



Assistance is an email away!

- Contact us for more information about:
 - Fall risk reduction best practices: Dawn (dvenema@unmc.edu)
 - KNOW Falls and Online Learning (RedCAP): Anne (askinner@unmc.edu)
 - Team performance, implementation challenges: Vicki (victoria.kennel@unmc.edu)
 - General questions or not sure?: CAPTURE.Falls@unmc.edu



REMINDERS

1. Future Collaborative Calls/Educational Opportunities:
 - January 28, 2019; 2:00-2:30pm CST
 - Topic – Event Reporting

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!

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Falls