CAPTURE Falls

Collaboration and Proactive Teamwork Used to Reduce

Quarterly Collaborative Call #34

January 28, 2020 2:00 – 2:30 p.m. CDT

Fall Risk Reduction from the Perspective of Patients and Families

UNMC

AGENDA

1. Housekeeping
2. Patient and Family Engagement in Fall Risk Reduction

Housekeeping

1. Event Reporting
    - Quarterly data reports (Q4 2019) will be sent within the next week 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.
2. 2019 Fall Rate Benchmarking – collecting Patient Days and Falls for 2019. This request will be sent to all CAPTURE Falls hospitals, and will accompany quarterly data reports for those reporting into Know Falls.

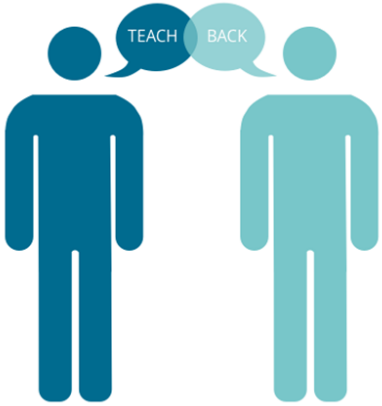
Housekeeping #2

1. Edits on the horizon to KNOW falls
    - Fall event reporting, post-fall huddle, system learning forms
    - Goal: streamline your process (i.e. shorten the forms)
    - Contact Anne if you have suggested edits. askinner@unmc.edu

2. Goal is to share draft with you for further feedback before implementing changes

Ideas to Engage Patients and Families in Fall Risk Reduction

Teach Back



"We discussed a lot today about preventing falls while you are in the hospital. I want to make sure I explained things clearly. What are three things we will do that will help to prevent you from falling while you are here in the hospital?"

Ask Me 3

That puts them at fall risk

To keep from falling in the hospital

Create an open dialogue with patients and family members about falls

What are your fears about falling?

How confident are you in moving around without falling?

How will you change your behavior to minimize fall risk?

Ideas to Engage Patients and Families in Fall Risk Reduction

Bedside shift report

Handoffs

Ideas to Engage Patients and Families in Fall Risk Reduction

Report concerns and falls to staff

Participate in post-fall huddles

Ideas to Engage Patients and Families in Fall Risk Reduction

Engage Patient and Family Advisory Council on fall risk reduction initiatives

Invite patient/family advisors to join your fall risk reduction team

Ask patient/family advisors to review fall risk reduction education materials/documents/tools received by patients

Ideas to Engage Patients and Families in Fall Risk Reduction

Integrate their voice or participation into staff education on fall risk reduction

- Ask a patient who experienced a fall in your facility to share their experience with staff
- Ask a patient who was at high risk for falls but did not fall in your facility to share their experience with staff
- Share patient and family member feedback on fall risk reduction program

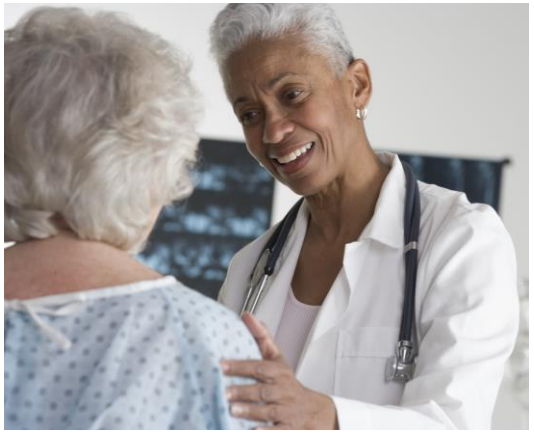
Collaborative Member Sharing and Discussion

1. What are you currently doing to facilitate patient/family engagement for fall risk reduction
2. Are there things you would like to try, but don't know where to start?
3. Are there things you have tried that didn't work well? What did you learn?

Resources

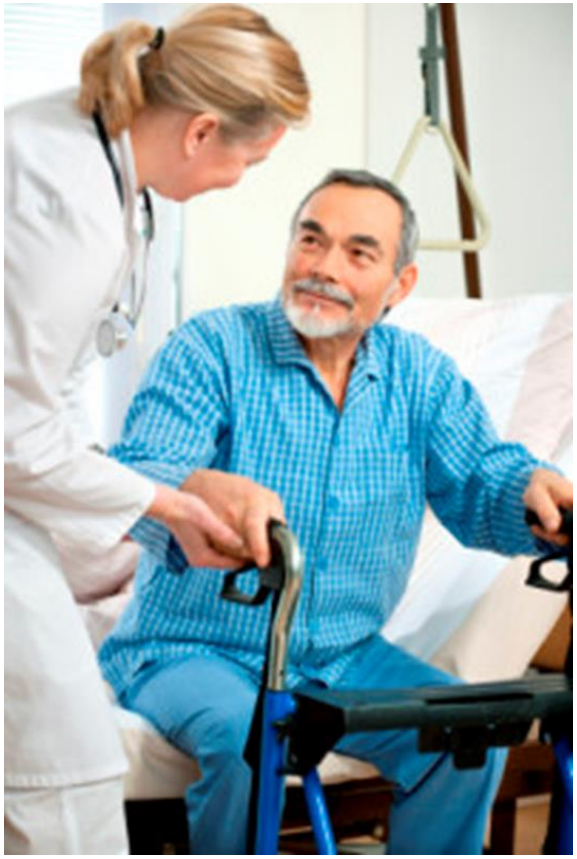
- Teach Back Resources https://www.ahrq.gov/health-literacy/quality-resources/tools/literacy-toolkit/healthlittoolkit2-tool5.html
- Ask me 3 Resources http://www.ihi.org/resources/Pages/Tools/Ask-Me-3-Good-Questions-for-Your-Good-Health.aspx
- Patient Family Advisory Councils
  - AHRQ Working with Patient and Families as Advisors Implementation Handbook https://www.ahrq.gov/sites/default/files/wysiwyg/professionals/systems/hospital/engagingfamilies/strategy1/Strat1_Implement_Hndbook_508_v2.pdf
  - Institute for Patient and Family Centered Care Mini Toolkit for Partnering with Patients and Families to Enhance Safety and Quality https://www.ipfcc.org/resources/Patient-Safety-Toolkit-04.pdf
  - AHA Partnering to Improve Quality and Safety: A Framework for Working with Patient and Family Advisors https://www.aha.org/system/files/2018-01/partnering-improve-quality-safety-framework-working-patient-family-advisors.pdf

Patient and Family Perspectives on Fall Risk Reduction – Review of Literature



- Qualitative Research – uses narrative data via interviews or focus groups to document perceptions
  - Richer information than what can be captured quantitatively
- Caveat #1: People are individuals! Perceptions of your patients may differ from individuals in these studies.
- Caveat #2: Patients in these studies were free of cognitive impairment

Review of Literature



Patients want to know:

- Why they are at risk for falling
- What staff is doing about it
- What they can do to reduce their own risk

Review of Literature

Patients want:

- Consistent messaging from all staff
- Repetition of information
- Input on their plan of care
  - Prefer two-way conversation vs. one-way (staff to patient) flow of information
  - Even worse is being made to feel like a child or threatened

Review of Literature

Patient's don't want:

- To be incontinent
  - More embarrassing than a fall
- To burden staff
  - Emphasize that you want to help
  - Don't send implicit message that you're too busy by acting rushed or impatient

Review of Literature

Patient perception of their own risk is an important factor in how they feel about fall risk reduction efforts:

- Those who recognize their risk are more likely to seek help
- Individualized information preferred to generalities
- May not understand how/why mobility status could change suddenly
- Falls happen to other people, not me
- Messages are better received if focus is on achieving positive outcome (e.g. retain/regain strength; go home) vs. only preventing a negative outcome (fall)

List of Literature Reviewed

*1: Carroll DL, Dykes PC, Hurley AC. Patients' perspectives of falling while in an acute care hospital and suggestions for prevention. Appl Nurs Res. 2010 Nov;23(4):238-41. doi: 10.1016/j.apnr.2008.10.003.
2: Gettens S, Fulbrook P, Jessup M, Low Choy N. The patients' perspective of sustaining a fall in hospital: A qualitative study. J Clin Nurs. 2018 Feb;27(3-4):743-752. doi: 10.1111/jocn.14075.
3: Lim ML, Ang SGM, Teo KY, Wee YHC, Yee SP, Lim SH, Ang SY. Patients' Experience After a Fall and Their Perceptions of Fall Prevention: A Qualitative Study. J Nurs Care Qual. 2018 Jan/Mar;33(1):46-52. doi: 10.1097/NCQ.0000000000000261.
4: Shuman C, Liu J, Montie M, Galinato JG, Todd MA, Hegstad M, Titler M. Patient perceptions and experiences with falls during hospitalization and after discharge. Appl Nurs Res. 2016 Aug;31:79-85. doi: 10.1016/j.apnr.2016.01.009.
5: Turner N, Jones D, Dawson P, Tait B. The Perceptions and Rehabilitation Experience of Older People After Falling in the Hospital. Rehabil Nurs. 2019 May/Jun;44(3):141-150. doi: 10.1097/rnj.0000000000000107.
*6: Twibell RS, Siela D, Sproat T, Coers G. Perceptions Related to Falls and Fall Prevention Among Hospitalized Adults. Am J Crit Care. 2015 Sep;24(5):e78-85. doi: 10.4037/ajcc2015375.
7: Tzeng HM, Yin CY. Perspectives of recently discharged patients on hospital fall-prevention programs. J Nurs Care Qual. 2009 Jan-Mar;24(1):42-9. doi: 10.1097/NCQ.0b013e31818f557c.

*Open Access (freely available online without a subscription)

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:
    - April 28, 2020; 2:00-2:30pm CST
    - Topic – TBA

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!