

CAPTURE Falls

Collaboration and Proactive Teamwork Used to Reduce

Quarterly Collaborative Call #41

October 19, 2021 2:00 – 2:30 p.m. CT

**Gap Analysis – How do you Stack Up
with Other Nebraska Critical Access
Hospitals?**

AGENDA

- Housekeeping
- Aggregate results from statewide Fall Risk Reduction Program Assessment



Housekeeping



1. Quarterly Reports

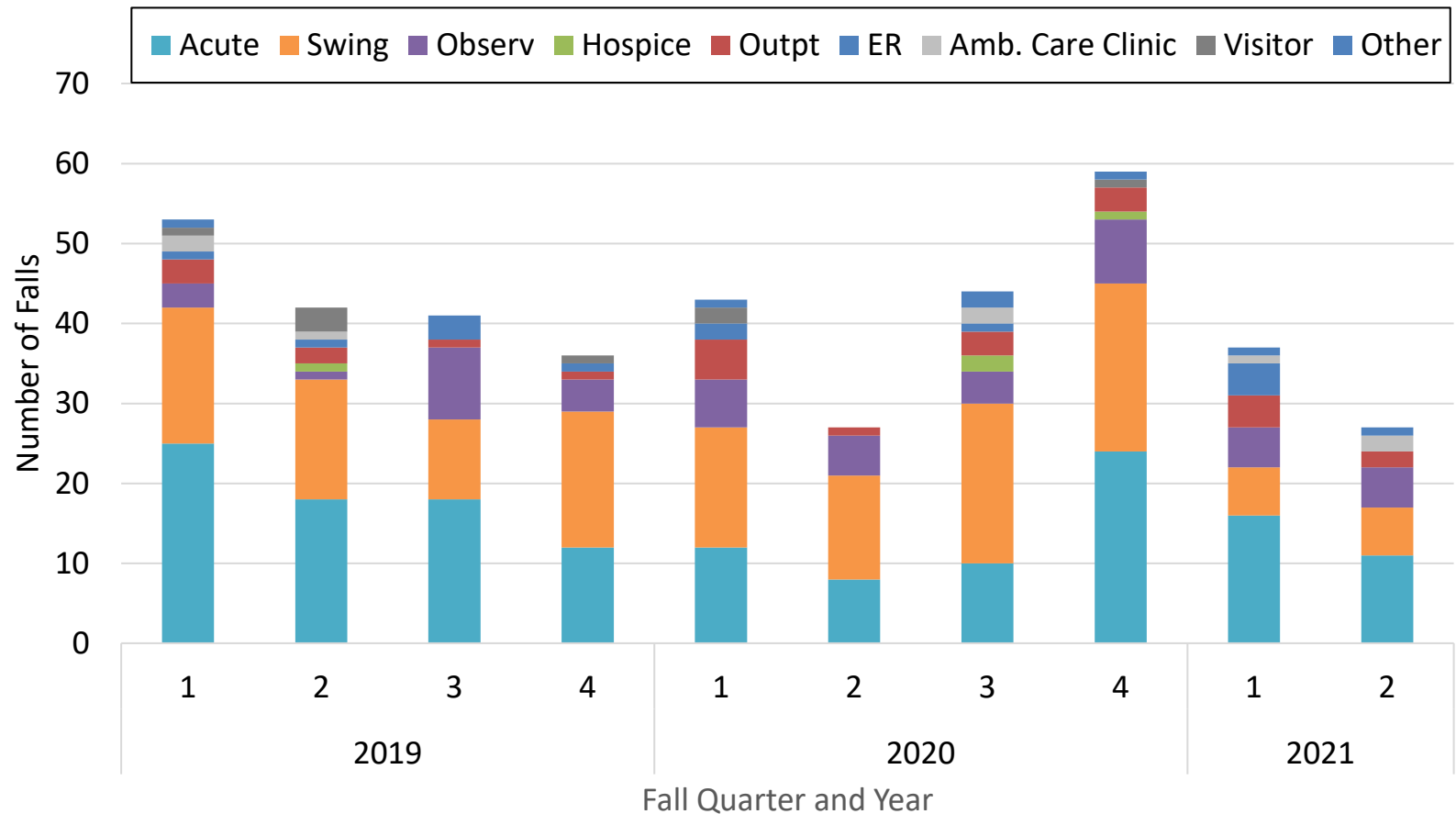
- Fall Data Reports through the 3rd quarter of 2021 will be sent out **late October**. Your hospital should receive a report if at least one fall was reported in the Know Falls Learning System within the last 12 months.
- Reporting of all falls is encouraged—including outpatient, ER, ambulatory care, LTC, etc.
- Contact Anne at askinner@unmc.edu with REDCap issues (add users, remove users, password resets, **expired accounts**) and special report requests.



Housekeeping

All CAPTURE Falls Hospitals

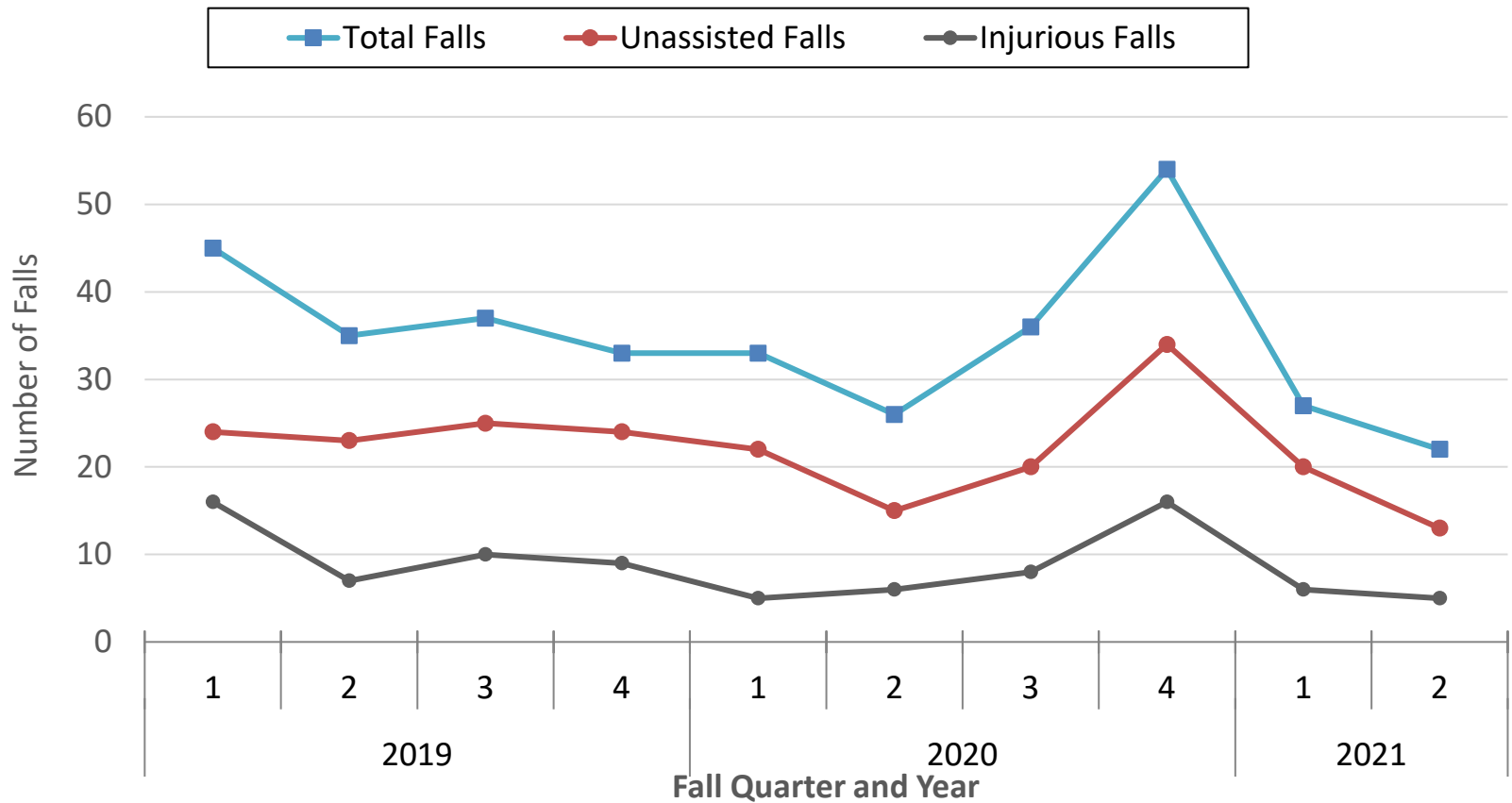
All Reported Falls by Bed Type (except LTC)



Housekeeping

All CAPTURE Falls Hospitals

Inpatient Fall Event Summary Reported Total, Unassisted, and Injurious Falls Over Time Acute, Swing, Observation, Hospice Admissions

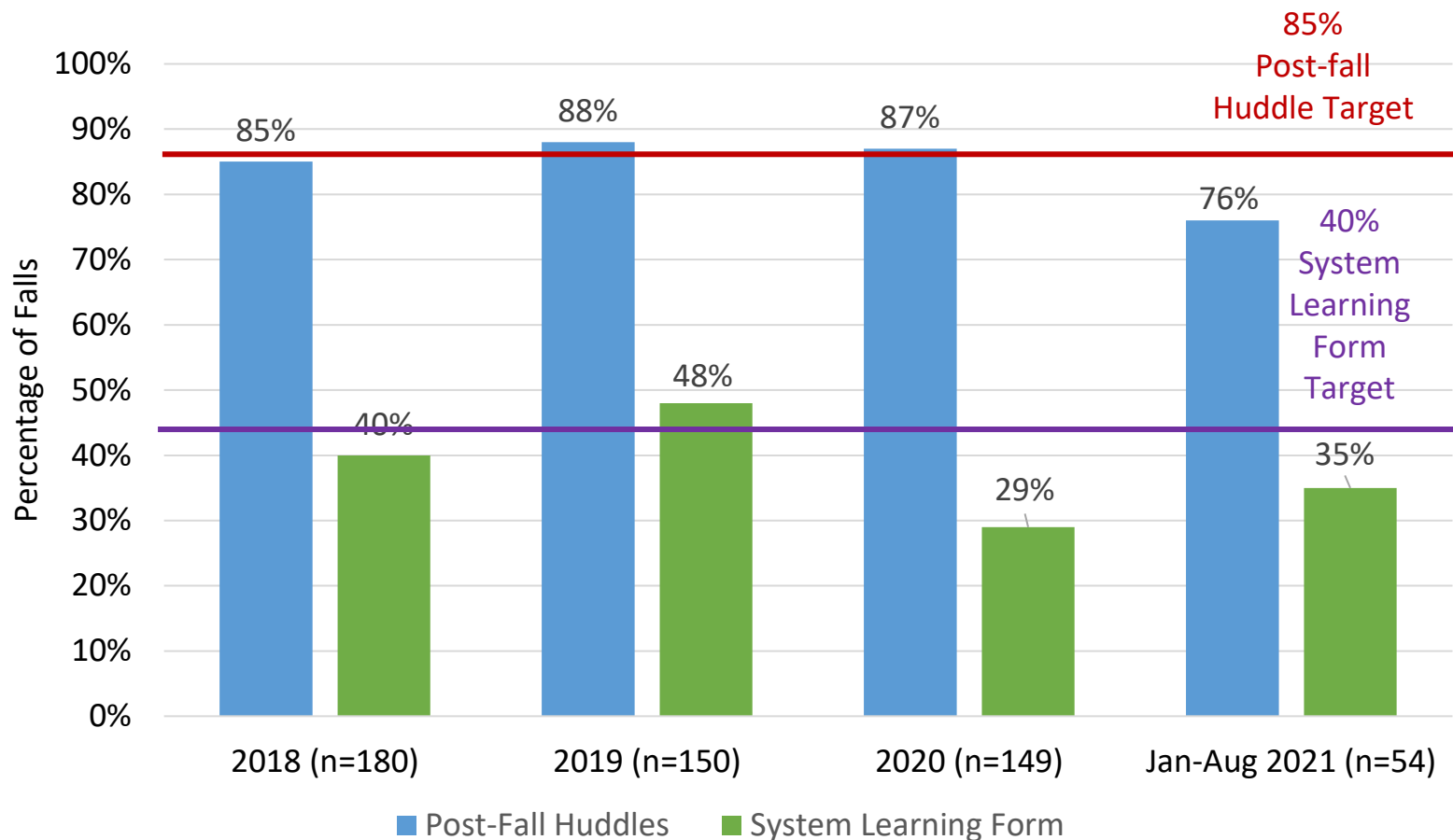


Housekeeping

All CAPTURE Falls Hospitals

Completed Post-fall Huddle and System Learning Forms

Acute, Swing, Observation, Hospice Admissions

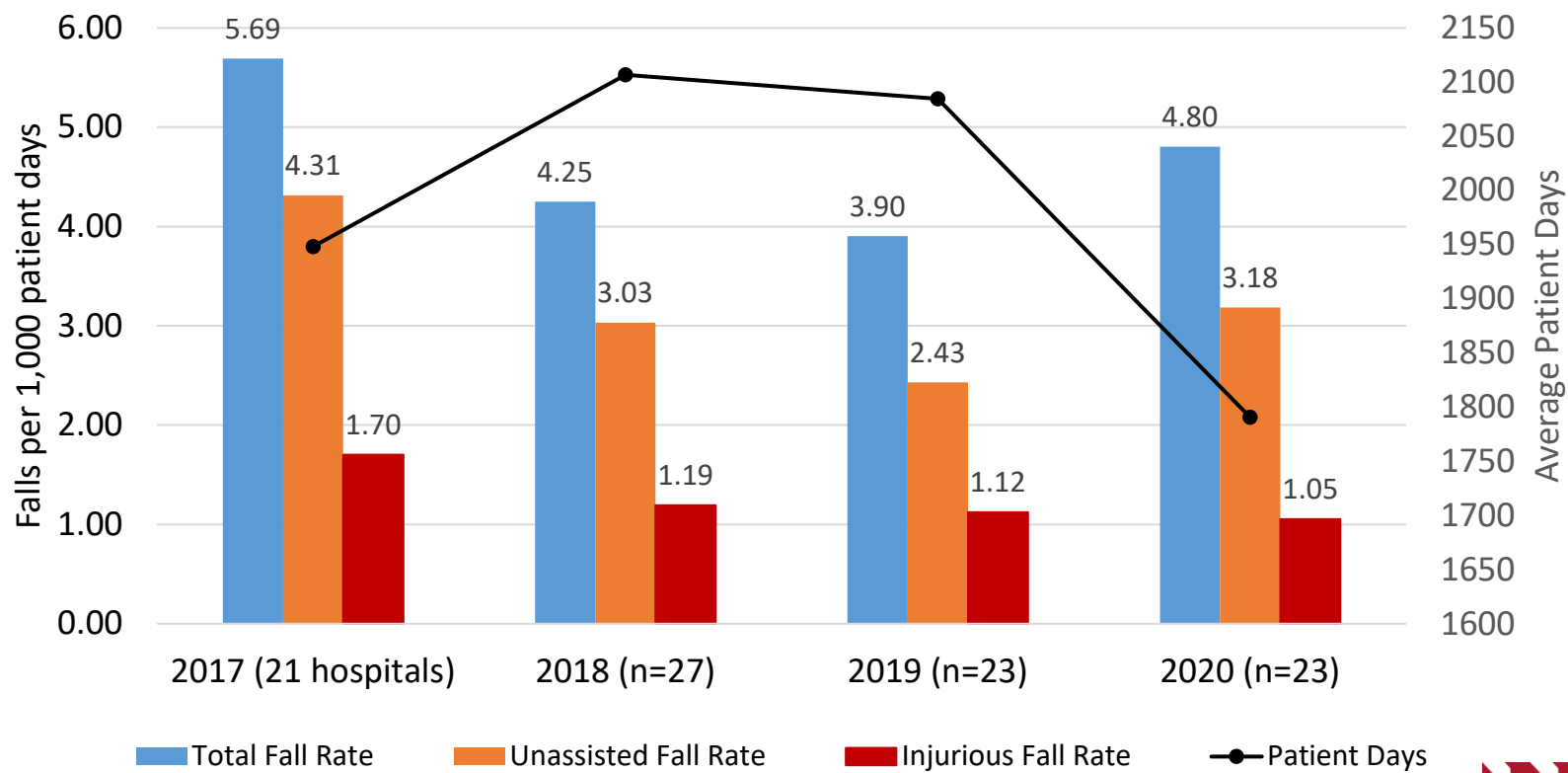


Housekeeping

All CAPTURE Falls Hospitals

Total, Unassisted, and Injurious Fall Rates

Acute, Swing, Observation, Hospice Admissions



What is a Gap Analysis?

- Method to examine/assess performance to identify and understand the differences between your *current* practices and *desired/target* state (best practices)



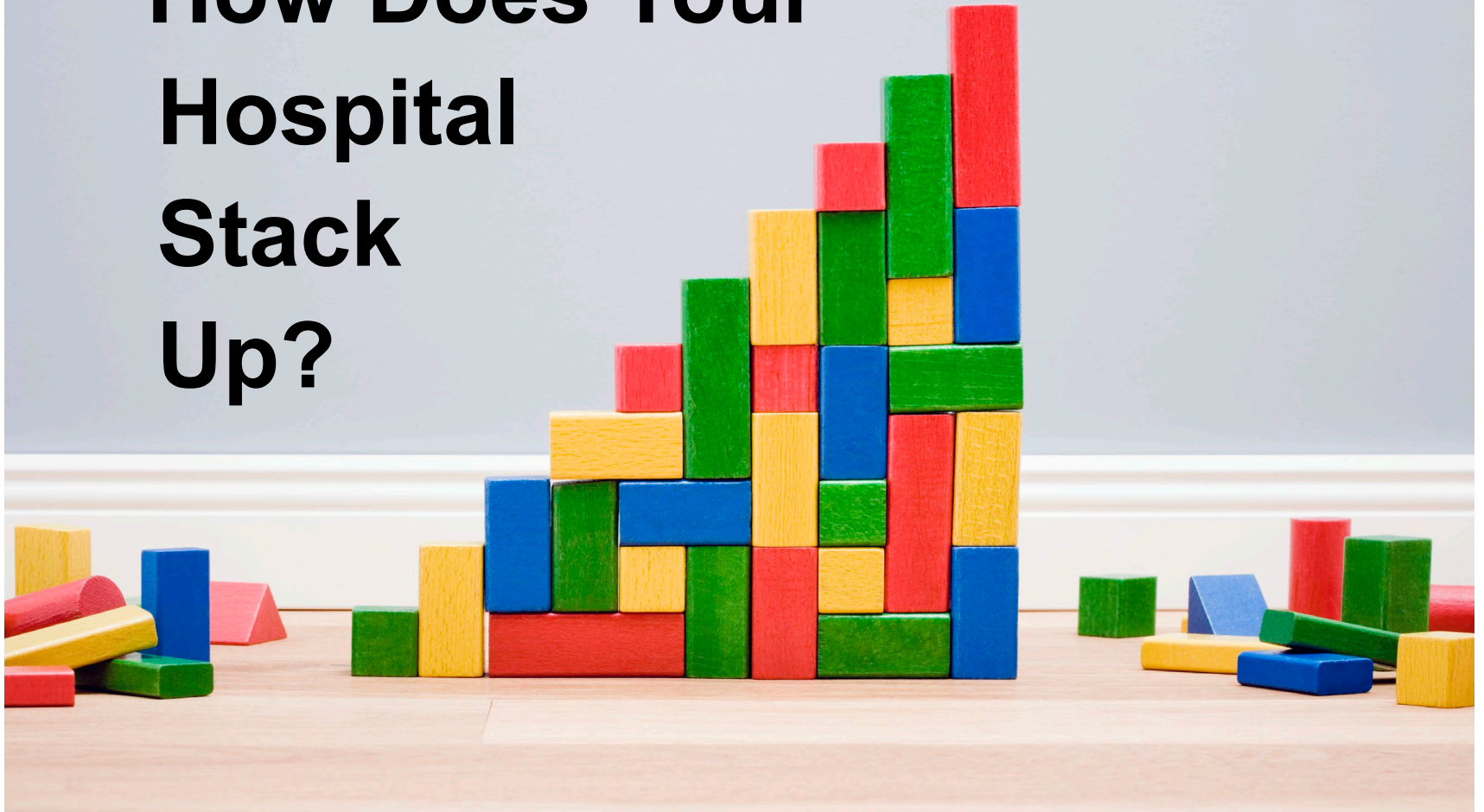
Current State



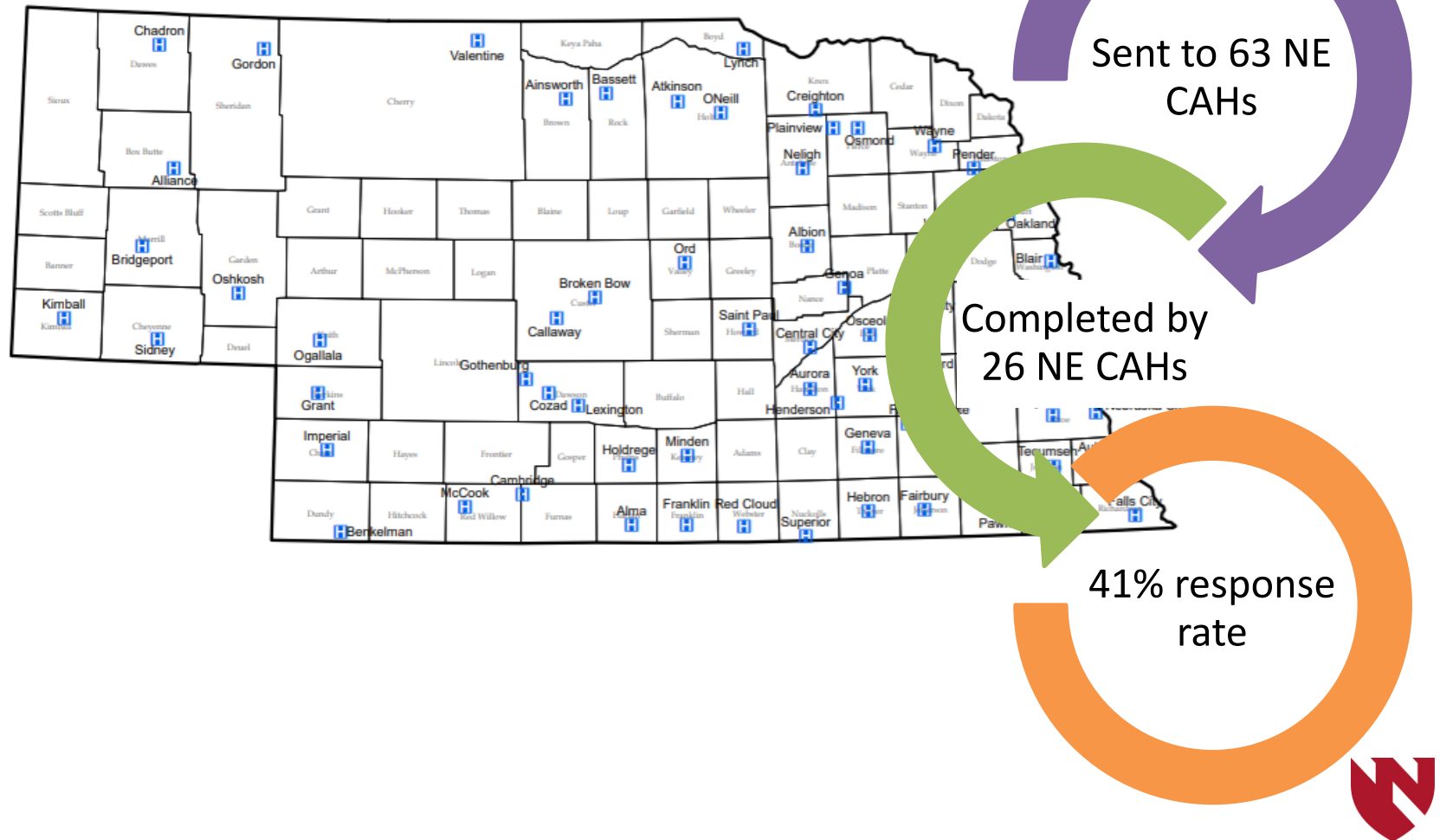
Desired/
Target State



How Does Your Hospital Stack Up?



Results of the Fall Risk Reduction Program Assessment



Results of the Fall Risk Reduction Program Assessment



Interprofessional
fall risk reduction
team

88.5% have a team
accountable for implementing
the fall risk reduction program^a

Average team size = **5**
(range 3-8 members)^b

Role	Percent of hospitals with role represented in fall risk reduction program ^c
Administrator/CEO	12.0%
Director of Nursing/Chief Nurse Executive	80.0%
Quality Improvement Professional/Specialist	92.0%
Risk Manager	48.0%
Patient Safety Officer	16.0%
Physician	4.0%
Registered Nurse	84.0%
Licensed Practical Nurse	16.0%
Certified Nursing Assistant	32.0%
Occupational Therapist	32.0%
Physical Therapist	52.0%
Physical Therapy Assistant	8.0%
Pharmacist	52.0%
Medical Laboratory Technician	4.0%
Radiology Technician	8.0%
Facilities Management	4.0%
Other	28.0%

CAPTURE Falls Roadmap
Resources:

<https://www.unmc.edu/patient-safety/capturefalls/roadmap/fall-team/index.html>



^aN = 26 hospital respondents; ^bn = 13 hospital respondents; ^cn = 25 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Gap analysis

23% had completed a gap analysis of their fall risk reduction program within the past two years



Action plan

58% have a current action plan for their fall risk reduction program

****Contact**
askinner@unmc.edu
if you would like to
still complete the
assessment

N = 26 hospital respondents

CAPTURE Falls Roadmap Resources:

<https://www.unmc.edu/patient-safety/capturefalls/roadmap/gap-analysis/index.html>

<https://www.unmc.edu/patient-safety/capturefalls/roadmap/action-plan/index.html>

Results of the Fall Risk Reduction Program Assessment



Fall risk reduction policies and procedures

- No, our hospital does not do this activity
- Yes, but our hospital could do this activity better
- Yes, and our hospital does this activity well

Develop fall risk reduction policies and procedures (n = 26)

11.5% 46.2% 42.3%

Update fall risk reduction policies and procedures as needed (n = 26)

11.5% 46.2% 42.3%

Educate staff about fall risk reduction policies and procedures (n = 26)

15.4% 50.0% 34.6%

Percent of Hospitals Performing Fall Risk Reduction Policies and Procedures Related Activities for the Fall Risk Reduction Program

N = 26 hospital respondents

CAPTURE Falls Roadmap Resources: <https://www.unmc.edu/patient-safety/capturefalls/roadmap/fall-policies/index.html>

Results of the Fall Risk Reduction Program Assessment



Fall risk reduction
policies and
procedures

	n	Response option	% of hospitals*
Which staff are required to attend this education?	22	Nursing staff only	95.5%
		Patient care staff other than nursing	50.0%
		Non-patient care staff	27.3%
		Unknown	0%
When is this education offered to staff?	22	Annually	59.1%
		When changes are made to this aspect of our fall risk reduction program	54.5%
		New employee orientation	68.2%
		Other	0%
		Unknown	4.5%
*Note that total percentages for each question may exceed 100% because questions instructed recipients to “Mark all that apply.”			

Staff Participation and Frequency of Staff Education on Fall Risk Reduction Policies and Procedures

N = 22 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Fall definition

Adopt a standardized definition of a fall for use in your hospital (n = 26)

Educate staff on the definition of a fall, including fall types (assisted/unassisted) and outcomes (injurious/non-injurious) (n = 26)

- No, our hospital does not do this activity
- Yes, but our hospital could do this activity better
- Yes, and our hospital does this activity well

11.5%

23.1%

65.4%

15.4%

42.3%

42.3%

Percent of Hospitals Performing Fall Definition Related Activities for the Fall Risk Reduction Program



CAPTURE Falls Roadmap Resources: <https://www.unmc.edu/patient-safety/capturefalls/roadmap/fall-definition/index.html>

N = 26 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Fall definition

	n	Response option	% of hospitals*
Which staff are required to attend this education?	22	Nursing staff only	81.8%
		Patient care staff other than nursing	36.4%
		Non-patient care staff	18.2%
		Unknown	9.1%
When is this education offered to staff?	22	Annually	50.0%
		When changes are made to this aspect of our fall risk reduction program	54.5%
		New employee orientation	54.5%
		Other	9.1%
		Unknown	13.6%
*Note that total percentages for each question may exceed 100% because questions instructed recipients to “Mark all that apply.”			

Staff Participation and Frequency of Staff Education on the Definition of a Fall

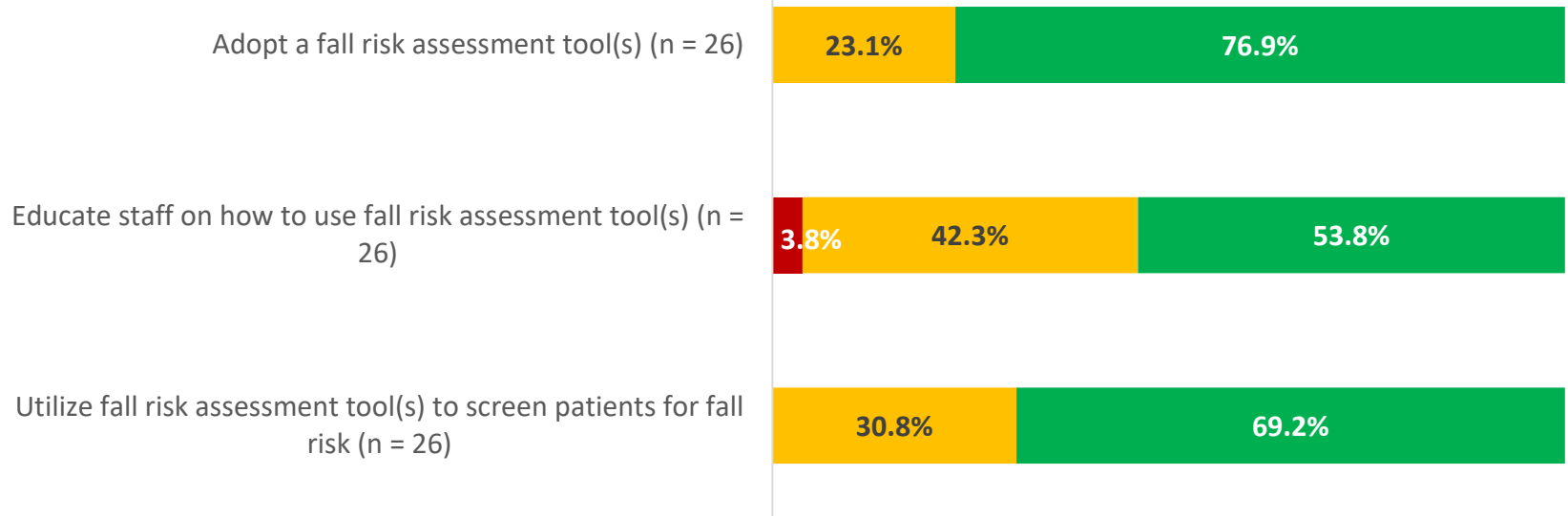
N = 22 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Fall risk assessment

- No, our hospital does not do this activity
- Yes, but our hospital could do this activity better
- Yes, and our hospital does this activity well



Percent of Hospitals Performing Fall Risk Assessment Related Activities for the Fall Risk Reduction Program



CAPTURE Falls Roadmap Resources: <https://www.unmc.edu/patient-safety/capturefalls/roadmap/fall-risk-assessment/index.html>

N = 26 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Fall risk
assessment

	n	Response option	% of hospitals*
Which staff are required to attend this education?	25	Nursing staff only	96%
		Patient care staff other than nursing	32%
		Non-patient care staff	4%
		Unknown	0%
When is this education offered to staff?	25	Annually	32%
		When changes are made to this aspect of our fall risk reduction program	64%
		New employee orientation	72%
		Other	4%
		Unknown	4%
*Note that total percentages for each question may exceed 100% because questions instructed recipients to “Mark all that apply.”			

Staff Participation and Frequency of Staff Education on Fall Risk Assessment

N = 25 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Fall risk reduction interventions

- No, our hospital does not do this activity
- Yes, but our hospital could do this activity better
- Yes, and our hospital does this activity well

Ensure staff have the resources needed to deliver interventions to reduce fall risk for patients (n = 25)



Link targeted interventions to identified risk factors to reduce the risk of falls (n = 25)



Utilize interventions to reduce fall risk for patients (n = 25)



Percent of Hospitals Performing Fall Risk Reduction Intervention Related Activities for the Fall Risk Reduction Program



CAPTURE Falls Roadmap Resources: <https://www.unmc.edu/patient-safety/capturefalls/roadmap/interventions/index.html>

Results of the Fall Risk Reduction Program Assessment



Fall risk
reduction
interventions



Staff Education on Linking Specific Interventions to Patient Fall Risk Factors

	n	Response option	% of hospitals*
Does your hospital provide staff education on this topic?	25	No	36.0%
		Yes	48.0%
		Unknown	16.0%
Which staff are required to attend this education?	12	Nursing staff only	91.7%
		Patient care staff other than nursing	41.7%
		Non-patient care staff	25.0%
		Unknown	0%
When is this education offered to staff?	12	Annually	58.3%
		When changes are made to this aspect of our fall risk reduction program	91.7%
		New employee orientation	91.7%
		Other	0%
		Unknown	0%

*Note that total percentages for each question may exceed 100% because questions regarding staff required to attend the education and when the education was offered to staff instructed recipients to "Mark all that apply."

Delivery of Staff Education, Participation, and Frequency of Staff Education on **Linking Specific Interventions to Patient Risk Factors**

Results of the Fall Risk Reduction Program Assessment



Fall risk
reduction
interventions



Staff Education on Use of Alarm Systems

	n	Response option	% of hospitals*
Does your hospital provide staff education on this topic?	25	No	12.0%
		Yes	80.0%
		Unknown	8.0%
Which staff are required to attend this education?	20	Nursing staff only	95.0%
		Patient care staff other than nursing	25.0%
		Non-patient care staff	5.0%
		Unknown	0%
When is this education offered to staff?	20	Annually	35.0%
		When changes are made to this aspect of our fall risk reduction program	80.0%
		New employee orientation	80.0%
		Other	0%
		Unknown	0%

*Note that total percentages for each question may exceed 100% because questions regarding staff required to attend the education and when the education was offered to staff instructed recipients to "Mark all that apply."

Results of the Fall Risk Reduction Program Assessment



Fall risk
reduction
interventions



Staff Education on Use of Delivery of Patient/Family Fall Risk Reduction Education			
	n	Response option	% of hospitals*
Does your hospital provide staff education on this topic?	25	No	44.0%
		Yes	52.0%
		Unknown	4.0%
Which staff are required to attend this education?	13	Nursing staff only	100.0%
		Patient care staff other than nursing	38.5%
		Non-patient care staff	7.7%
		Unknown	0%
When is this education offered to staff?	13	Annually	53.8%
		When changes are made to this aspect of our fall risk reduction program	76.9%
		New employee orientation	84.6%
		Other	7.7%
		Unknown	0%

*Note that total percentages for each question may exceed 100% because questions regarding staff required to attend the education and when the education was offered to staff instructed recipients to "Mark all that apply."

Results of the Fall Risk Reduction Program Assessment



Fall risk
reduction
interventions



Staff Education on Safe Transfers and Mobility			
	n	Response option	% of hospitals*
Does your hospital provide staff education on this topic?	25	No	4.0%
		Yes	92.0%
		Unknown	0.0%
Which staff are required to attend this education?	24	Nursing staff only	91.7%
		Patient care staff other than nursing	66.7%
		Non-patient care staff	16.7%
		Unknown	0%
When is this education offered to staff?	24	Annually	79.2%
		When changes are made to this aspect of our fall risk reduction program	41.7%
		New employee orientation	45.8%
		Other	8.3%
		Unknown	0%

*Note that total percentages for each question may exceed 100% because questions regarding staff required to attend the education and when the education was offered to staff instructed recipients to "Mark all that apply."

Results of the Fall Risk Reduction Program Assessment



Auditing fall risk reduction practices

- No, our hospital does not do this activity
- Yes, but our hospital could do this activity better
- Yes, and our hospital does this activity well

Conduct audits to monitor adherence to fall risk reduction practices (n = 25)

28%

52%

20%

Communicate results of audits to staff (n = 25)

36%

48%

16%

Percent of Hospitals Performing Auditing Fall Risk Reduction Practice Activities for the Fall Risk Reduction Program



CAPTURE Falls Roadmap Resources: <https://www.unmc.edu/patient-safety/capturefalls/roadmap/fall-audit/index.html>

N = 25 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Post-fall clinical assessment

- No, our hospital does not do this activity
- Yes, but our hospital could do this activity better
- Yes, and our hospital does this activity well

Adopt a post-fall clinical assessment protocol (n = 25)

20%

36%

44%

Educate staff to use the post-fall clinical assessment protocol (n = 25)

24%

40%

36%

Utilize the post-fall clinical assessment protocol after a patient fall (n = 25)

20%

40%

40%

Percent of Hospitals Performing Post-Fall Clinical Assessment Activities for the Fall Risk Reduction Program



N = 25 hospital respondents

CAPTURE Falls Roadmap Resources: <https://www.unmc.edu/patient-safety/capturefalls/roadmap/post-fall-assessment/index.html>

Results of the Fall Risk Reduction Program Assessment



Post-fall
clinical
assessment

	n	Response option	% of hospitals*
Which staff are required to attend this education?	19	Nursing staff only	94.7%
		Patient care staff other than nursing	42.1%
		Non-patient care staff	0%
		Unknown	0%
When is this education offered to staff?	19	Annually	26.3%
		When changes are made to this aspect of our fall risk reduction program	63.2%
		New employee orientation	57.9%
		Other	5.3%
		Unknown	5.3%
*Note that total percentages for each question may exceed 100% because questions instructed recipients to “Mark all that apply.”			

Staff Participation and Frequency of Staff Education on Post-fall Clinical Assessment

N = 19 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Post-fall huddles

- No, our hospital does not do this activity
- Yes, but our hospital could do this activity better
- Yes, and our hospital does this activity well

Conduct a post-fall huddle after a patient fall (n = 25)

28%

40%

32%

Educate staff to conduct post-fall huddles (n = 25)

28%

48%

24%

Adopt post-fall huddle tools and processes (n = 25)

24%

44%

32%

Percent of Hospitals Performing Post-Fall Huddle Activities for the Fall Risk Reduction Program



N = 25 hospital respondents

CAPTURE Falls Roadmap Resources: <https://www.unmc.edu/patient-safety/capturefalls/roadmap/post-fall-huddle/index.html>

Results of the Fall Risk Reduction Program Assessment



Post-fall
huddles

	n	Response option	% of hospitals*
Which staff are required to attend this education?	18	Nursing staff only	94.4%
		Patient care staff other than nursing	50.0%
		Non-patient care staff	6%
		Unknown	0%
When is this education offered to staff?	18	Annually	11.1%
		When changes are made to this aspect of our fall risk reduction program	77.8%
		New employee orientation	66.7%
		Other	0%
		Unknown	16.7%
*Note that total percentages for each question may exceed 100% because questions instructed recipients to “Mark all that apply.”			

Staff Participation and Frequency of Staff Education on Post-fall Huddles

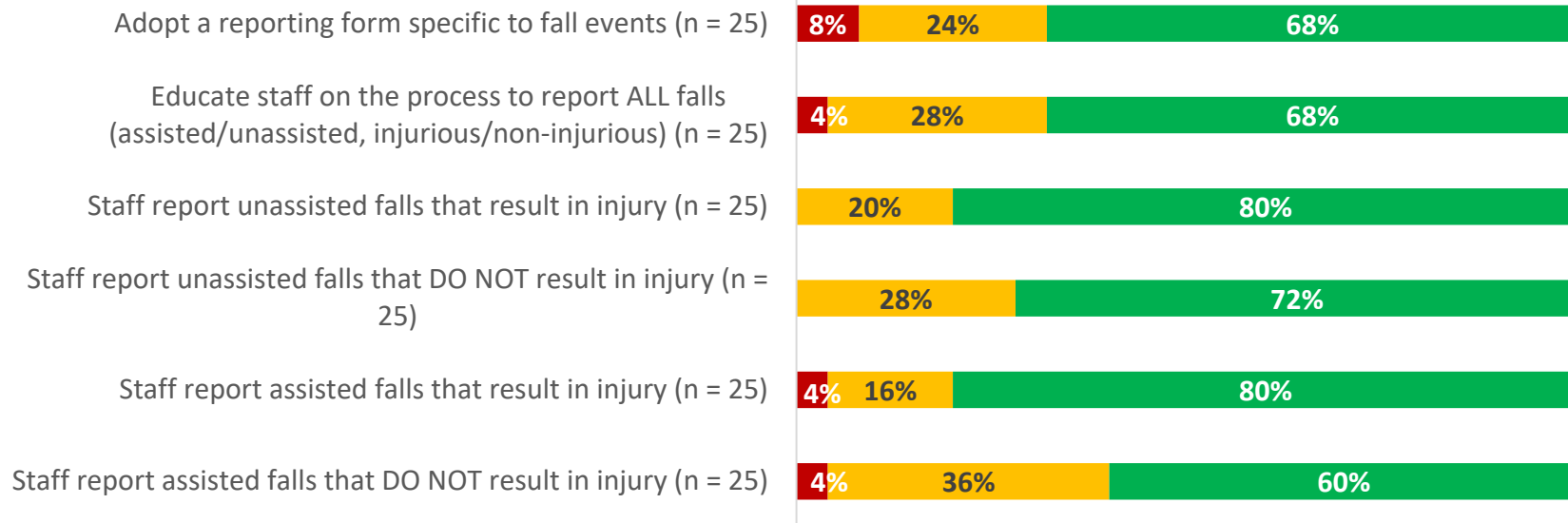
N = 18 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Fall event and rate reporting

- No, our hospital does not do this activity
- Yes, but our hospital could do this activity better
- Yes, and our hospital does this activity well



Percent of Hospitals Performing Fall Event Reporting Activities for the Fall Risk Reduction Program



CAPTURE Falls Roadmap Resources: <https://www.unmc.edu/patient-safety/capturefalls/roadmap/fall-reporting/index.html>

N = 25 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Fall event and
rate reporting

	n	Response option	% of hospitals*
Which staff are required to attend this education?	24	Nursing staff only	95.8%
		Patient care staff other than nursing	54.2%
		Non-patient care staff	33.3%
		Unknown	0%
When is this education offered to staff?	24	Annually	37.5%
		When changes are made to this aspect of our fall risk reduction program	62.5%
		New employee orientation	70.8%
		Other	0%
		Unknown	8.3%
*Note that total percentages for each question may exceed 100% because questions instructed recipients to “Mark all that apply.”			

Staff Participation and Frequency of Staff Education on Fall Event and Rate Reporting

N = 24 hospital respondents

Results of the Fall Risk Reduction Program Assessment



Learning from data

- No, our hospital does not do this activity
- Yes, but our hospital could do this activity better
- Yes, and our hospital does this activity well

Analyze and/or discuss data regarding fall risk reduction program (n = 23)

17.4%

52.2%

30.4%

Conduct or participate in a root cause analysis for patient falls (n = 23)

21.7%

52.2%

26.1%

Make changes to your fall risk reduction program based on fall-related data (n = 23)

21.7%

43.5%

34.8%

Communicate to staff about changes made to your fall risk reduction program based on fall-related data (n = 23)

17.4%

56.5%

26.1%

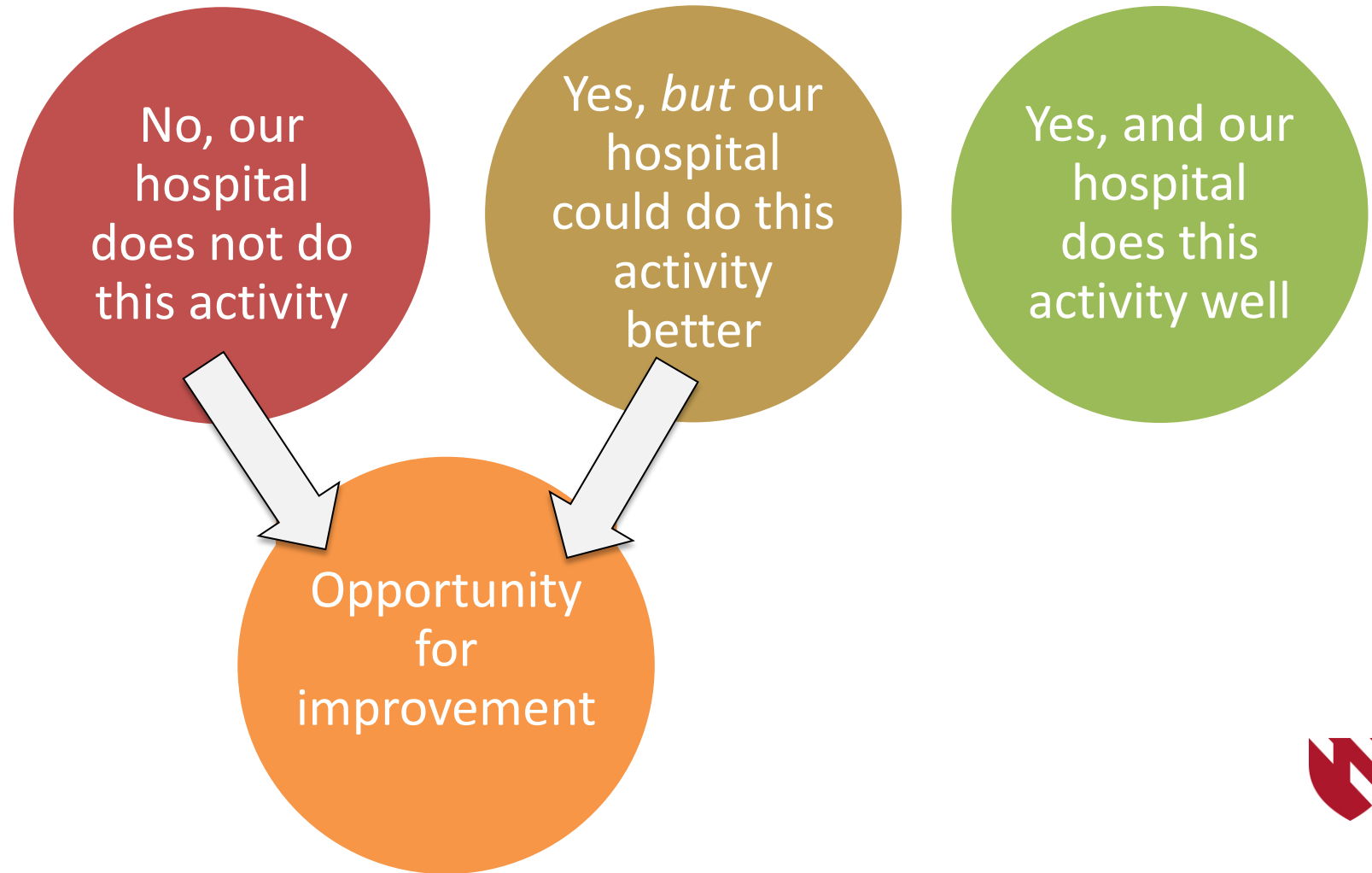
Percent of Hospitals Performing Learning from Data Activities for the Fall Risk Reduction Program



N = 23 hospital respondents

CAPTURE Falls Roadmap Resources: <https://www.unmc.edu/patient-safety/capturefalls/roadmap/learning-from-data/index.html>

Opportunities for Improvement in Fall Risk Reduction Activities



Opportunities for Improvement in Fall Risk Reduction Activities



Auditing fall risk
reduction
practices



Post-fall clinical
assessment



Post-fall huddle



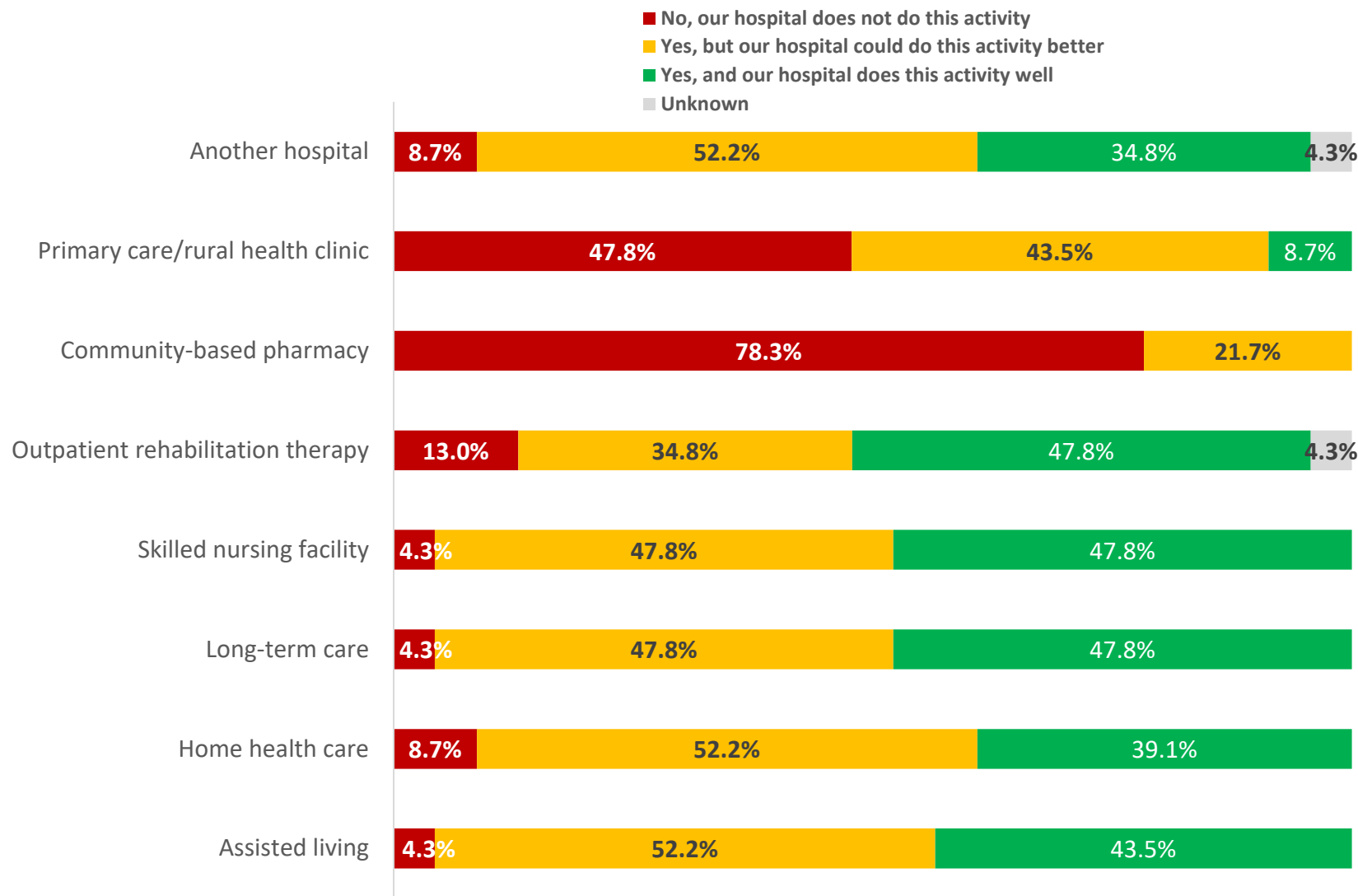
Learning from
data



Staff Education
in Various Areas



For patients at risk for falls, with which outside healthcare entities does your hospital coordinate during transitions in care (e.g., to the hospital, from the hospital) to ensure all relevant parties are aware of fall risk concerns?



Percent of Hospitals Coordinating with Other Health Care Entities During Transitions in Care to Ensure Awareness of Patient Fall Risk Concerns

Collaborative Member Sharing and Discussion

What opportunities do you see for improvement in fall risk reduction practices in your facility?

What would you like us to cover in our CAPTURE Falls collaborative calls in 2022?



2022 CAPTURE Falls Quarterly Collaborative Call Schedule

All on Tuesdays, 2:00-2:30 p.m. CT

January 25
April 26
July 26
October 25



REMINDERS

1. Future Collaborative Calls/Educational Opportunities:
 - January 25, 2022; 2:00-2:30pm CT
 - Topic – TBA
 - ***What would you like to discuss?***

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!

C A P T U R E

Collaboration and Proactive Teamwork Used to Reduce

Falls

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

