SYNOPSIS

KEY POINT SUMMARY

OBJECTIVES

The objective of this project was to evaluate the implementation of a research-based procedure and identify and remove obstacles in an attempt to reduce patient falls.

DESIGN IMPLICATIONS

In order to reduce falls, a definitive observation unit was designed in a hospital in California. This study suggests for the unit to be successful in its objective, evidence-based nursing protocols may be practiced.

Reducing falls in a definitive observation unit: An evidence-based practice institute consortium project

Gutierrez, F., & Smith, K. 2008 | *Critical Care Nursing Quarterly*. Volume 31, Issue 2, Pages 127-139

Key Concepts/Context

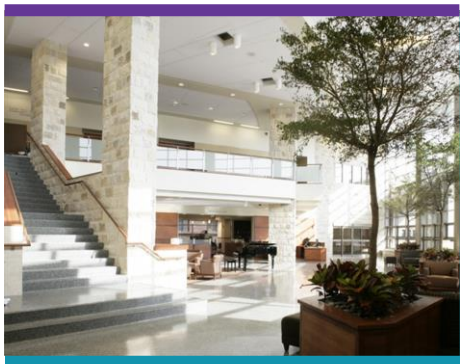
A Definitive Observation Unit (DOU) in a hospital in California maintains high standards of nursing and follows an evidence-based practice of fall prevention. Yet the facility's fall rates continue to be higher than the benchmark for similar hospitals. Although fall prevention protocols in hospitals involve a range of clinicians – physicians, pharmacists, physical therapists, occupational therapists, and nurses – given that nurses facilitate patient care, protocols are nurse centered. An improvement project was designed in this hospital to determine if identifying and then modifying practices would contribute to the reduction in falls among high-risk patients. A combination of feedback gathering and education on fall prevention practices decreased the fall rate in the unit.

Methods

In the first phase, the project involved a literature review on patient falls, a survey of healthcare providers, and training of champion staff on evidence-based practices. In the second phase, the champion staff educated and trained other staff, collected data on interventions carried for fall prevention, and surveyed nurses on the success of interventions in preventing falls. Data were analyzed statistically. Resources used in this project included a low bed with a built-in alarm, diversion equipment, TV with VCR, and rocking chairs for patients to sit in the hallway. During the project period a previously planned Specialty Adult Focused Environment (SAFE) unit was inaugurated in the DOU; this was not part of the improvement project. The SAFE was a specific area in the DOU for patients at a high risk for falls.

Findings

The project yielded the following findings:



The Center for Health Design: Moving Healthcare Forward

The Center for Health Design advances best practices and empowers healthcare leaders with quality research that demonstrates the value of design to improve health outcomes, patient experience of care, and provider/staff satisfaction and performance.

Learn more at www.healthdesign.org

- Falls decreased from 3.59 per 1000 patient days at the start of the project period to 1.37 per 1000 patient days at the end of the project.
- Patient communication with staff was at 50% during phase 1 of the project; this improved to 80% at the end of phase 2.
- At the end of phase 2, patients with dementia had significantly fewer falls ($P<0.05$).
- Nurses were implementing fall prevention practices accurately. The education and training improved their awareness and ability to implement these practices.

Limitations

The author identified the project to have the following limitation: data collection could not be completed because several of the champion team discontinued working on the project because of job transfers or personal injury.

Other limitations identified for this project included:

- There is no mention of the interventions used prior to or after the start of the project; hence it is not known what contributed to the reduction in the fall rate.
- The introduction of the SAFE unit may have contributed to the drop in fall rate.
- Patient data (in terms of number of fall-risk patients and number of dementia patients) could have provided more context for the fall rate.

The Knowledge Repository is provided with the funding support of:

AIA Academy of Architecture for Health of the American Institute of Architects

ASHE American Society for Healthcare Engineering, A personal membership group of the American Hospital Association

AAHF Academy of Architecture for Health Foundation

FGI

Additional key point summaries provided by:

NIHD Nursing Institute for Healthcare Design — LEADERSHIP · EDUCATION · ADVOCACY

RESEARCH·DESIGN connections