



FLOYD MEMORIAL HOSPITAL AND HEALTH SERVICES

Fall Prevention Initiatives



About Floyd Memorial

- Floyd Memorial Hospital was founded in 1953
- It is a 236-bed, acute care regional healthcare provider with Southern Indiana's only comprehensive cardiac surgery program.
- The hospital offers a full continuum of care from inpatient care to rehab services to home healthcare.
- Floyd Memorial is affiliated with Kleinert Kutz Surgery Center, a free-standing center offering expert care in hand, musculoskeletal, orthopedics, as well as plastic and reconstructive cosmetic surgeries.



Our Success

Continued recognition for providing high-quality healthcare

- U.S. News & World Report Best Regional Hospital for 2012-13
- Cardiac Rehab Program Achieves Re-certification by the AACVPR
- Floyd Memorial Home Healthcare once again made HomeCare Elite's Top 500 list
- Floyd Memorial Spine Center was designated a Blue Distinction Center for Spine Surgery by Blue Cross and Blue Shield
- Floyd Memorial Joint Replacement Center was also designed a Blue Distinction Center for Knee and Hip Replacement by Blue Cross and Blue Shield



Objectives

- Describe two interventions that have been successful in preventing injurious falls.
- Explain strategies to engage all staff in maintaining a focus on fall prevention.



Team Members

- Interdisciplinary team
 - Leadership
 - Bedside nurses
 - Risk Management
 - Environmental Services
 - Physical Therapy
 - Pharmacy



Problem Assessment

- Fall rate trending
- Increasing number
- Increasing injuries
- Significant injuries
- Developed Team
- Trended Data
- Initiated Research
- Best Practice



Initial Interventions

- Re-education of Braden Scale
- Patient Identifiers
- Initiation of Hourly Rounding in non-critical care areas
- Bed/Chair Alarms
- Post Fall Huddles-Interdisciplinary



Current Interventions

- Patient Identifiers
- Hourly Rounding
- Patient Agreement
- Bed/Chair/Commode Alarms
- Post Fall Huddle-Electronic



Achieving Better Results

- Trial Units
- Leadership Support
- TCAB- Hourly Rounding
- CQVA- Alarm System
- Post Fall Huddle



Biggest Bang for \$\$\$

- Alarm System
 - Trial-Free
 - Alarms-Free
 - Pads (interchangeable) at cost
- Post Fall Huddle
 - Time to format and educate staff
- Hourly Rounding
 - No additional costs



Barriers

- Re-educate Staff
- Middle Management Support
 - Consistency
- Buy-in for new interventions
 - Hourly Rounding
 - Post Fall Huddle
 - Patient Identifiers
 - Alarms

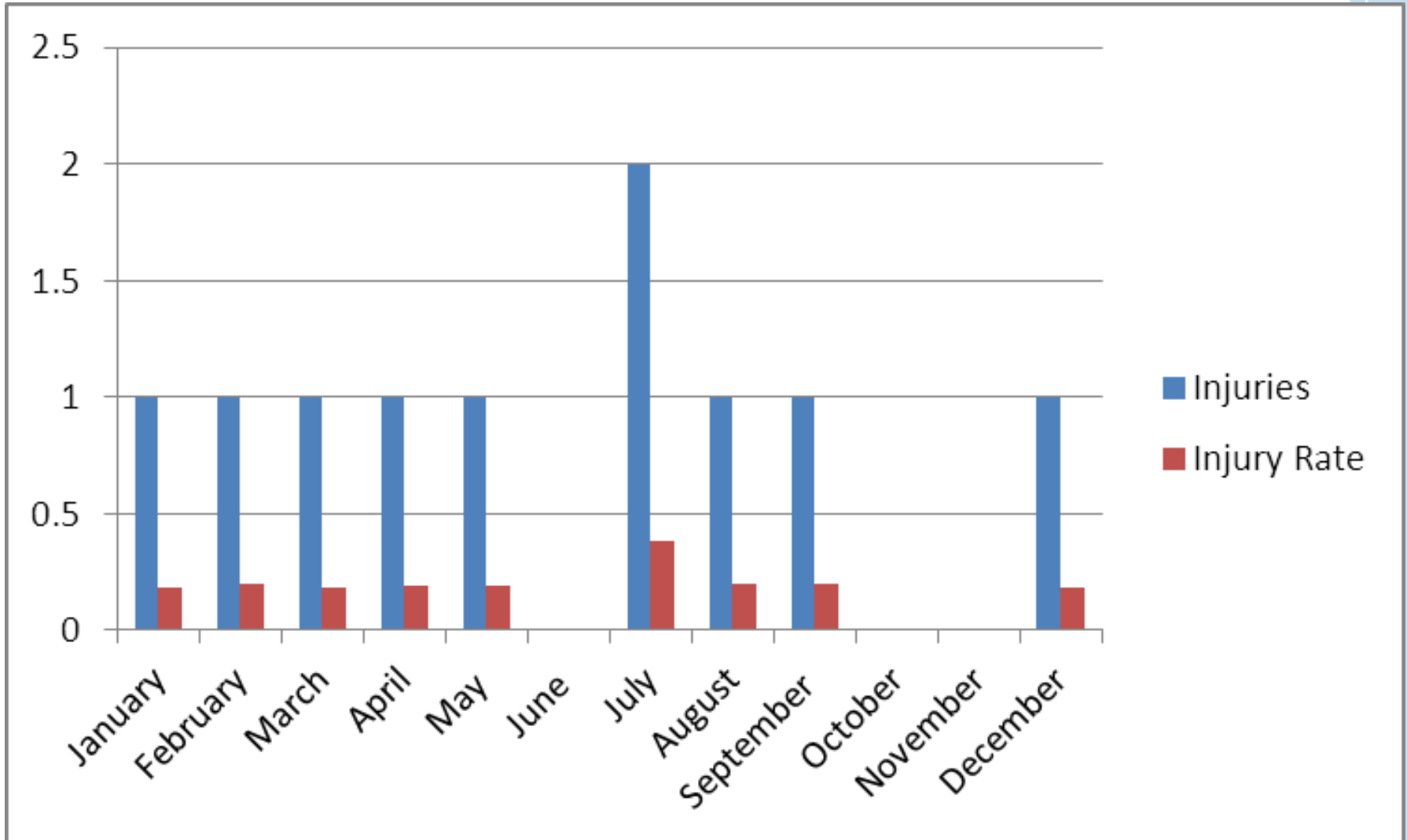


Lessons Learned

- Educate, Educate, Educate
- Bedside staff as active members of the team
- Multiple committees working toward the ultimate goal of patient safety
- Reinforce
- Consistency
- Progressive Discipline for lack of following policy
- Re-educate routinely

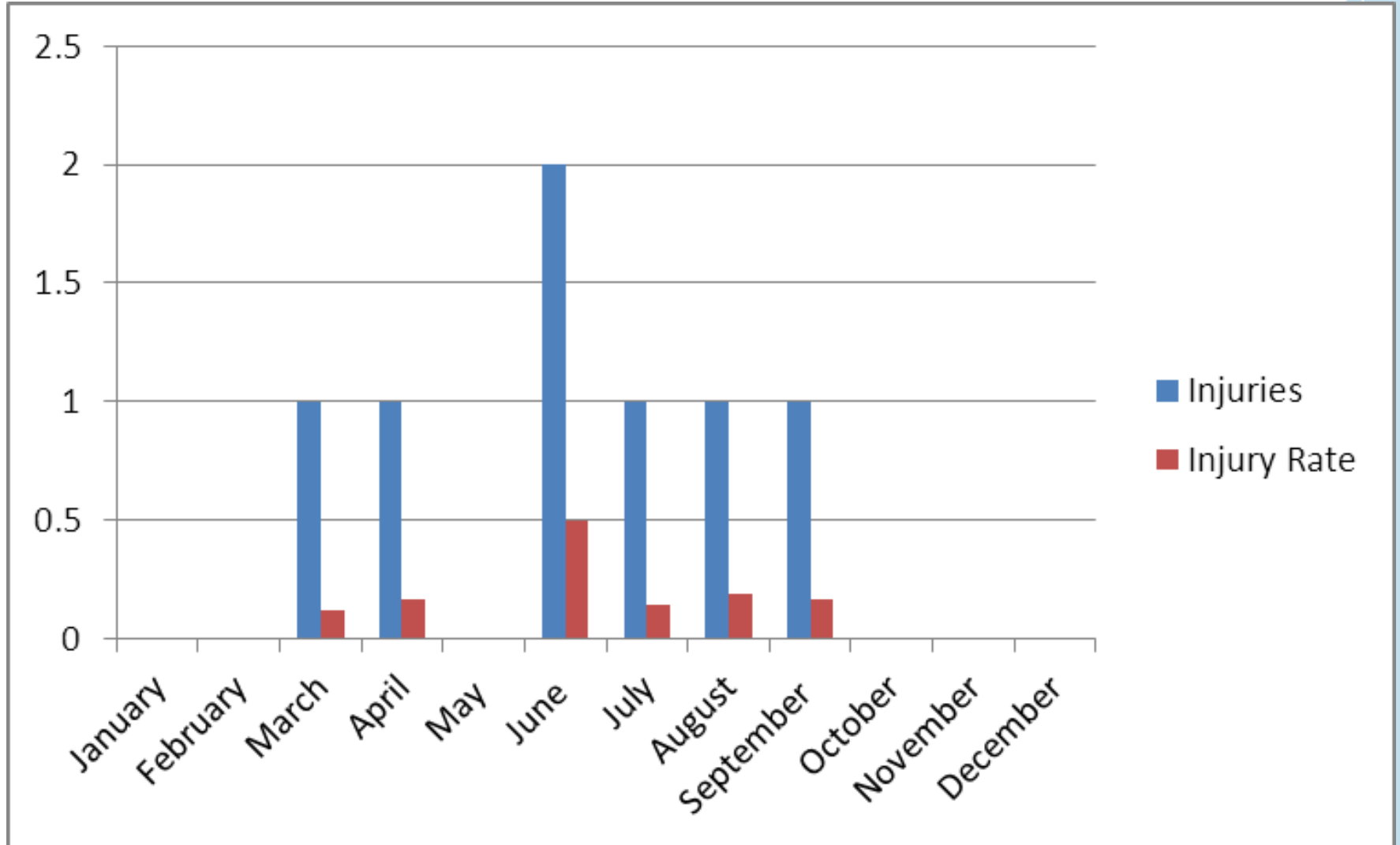


2011 Injury Rates



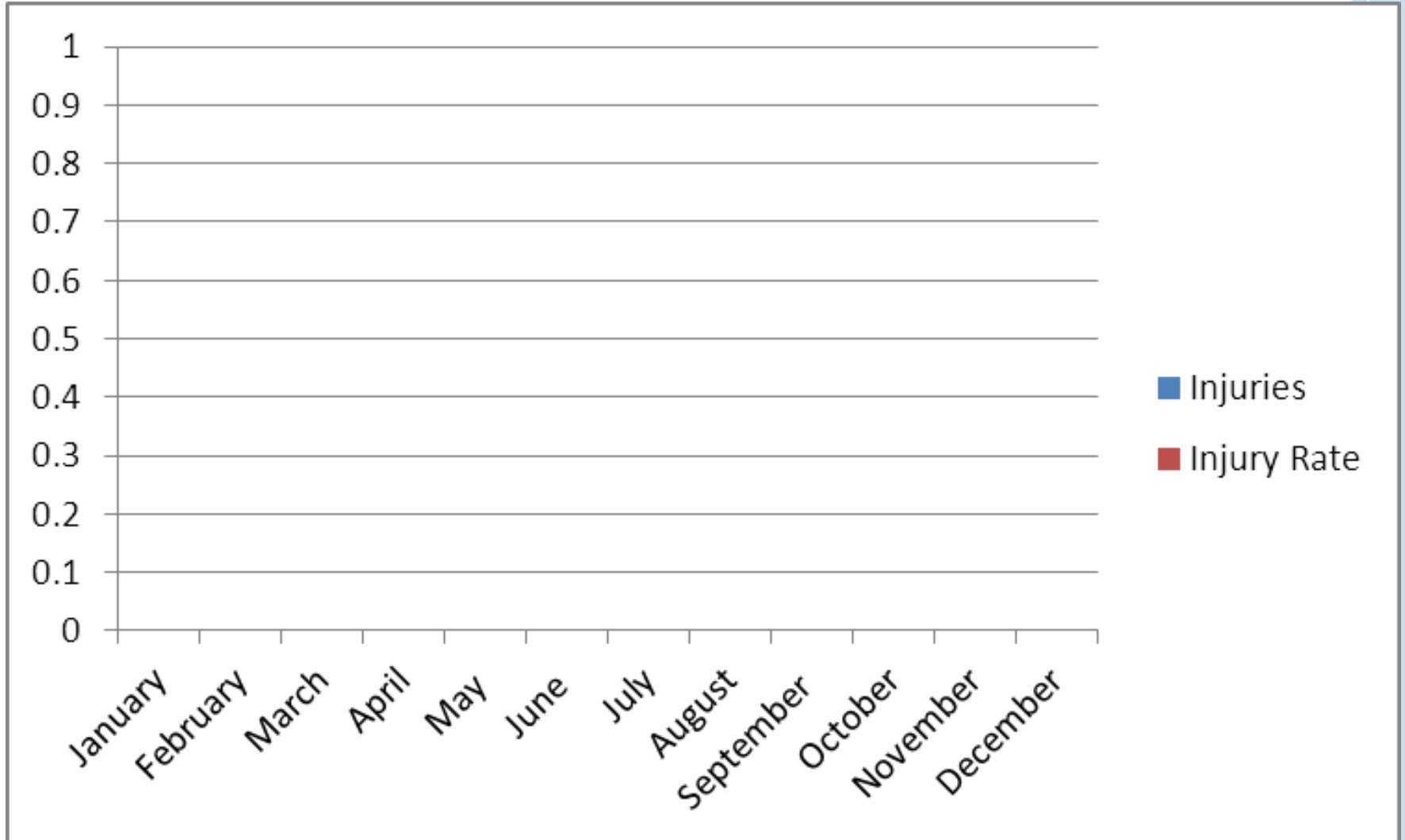


2012 Injury Rate





2013 Injury Rate





Team Members

- Lori Bosley-Medical Inpatient Services
- Melissa Bowling-Manager Critical Care Services
- Laura Crump-Surgical Inpatient Services
- Leann Dodridge-Pharmacy
- Sharon Goldsmith-Environmental Services
- Laurie Harral- Cardiac Intermediate Services
- Tina Merk-Physical Therapy
- Karen Tweedy-Women's and Children's Services



Questions