Welcome to the KHC HIIN Falls Sprint

- **Our Goals**
  - Create a learning community
  - Support ACTION!
    - Testing
    - Innovation
    - Sharing
Sprint Coach

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Support team:
- Betsy Lee, Cynosure Health
- Michele Clark, Kansas Healthcare Collaborative
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21 Kansas Hospital Sprinters

- Clara Barton Hospital
- Coffey County Hospital
- Ellsworth County Medical Center
- F.W. Huston Medical Center
- Greenwood County Hospital
- Hillsboro Community Hospital
- Hodgeman County Health Center
- Jewell County Hospital
- Lawrence Memorial Hospital
- Mitchell County Hospital Health Systems
- Norton County Hospital
- Olathe Medical Center
- Osborne County Memorial Hospital
- Phillips County Hospital
- Rush County Memorial Hospital
- Scott County Hospital
- South Central Kansas Medical Center
- Sumner County Hospital District No. 1
- Washington County Hospital
- Wichita County Health Center
- William Newton Hospital
### Timeline

**October 24**  
Introduction and kick-off webinar  
Introduction to Falls Discovery Tool, Creating a Culture of Mobility

**November 30**  
Learnings from using Falls Discovery Tool, Develop AIM, Plan PDSA

**December 13**  
PDSA Learnings and intro to Teach-back

**January 24**  
PDSA Learnings and intro to post-fall huddles

**February 28**  
PDSA Learnings and next steps

**March 22**  
Wrap up and celebration!

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**Measuring Success**

**Outcome:**  
- HIIN Falls with Injury Measure

**Processes:**  
- Development of a SMART aim statement for preventing falls with injury  
- Completion of monthly PDSA cycles  
  *(Brief feedback via SurveyMonkey and/or KHC check-in calls)*  
- Share a summary of your experience and learnings  
  *(Completion of brief summary template)*

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**Recordings for previous Sprint sessions are available in the KHC HIIN Education Archive at:**  
https://www.khconline.org/initiatives/hiin/education/khc-hiin-past-educational-events
Steps Taken Since Last Time

- Write your aim statement
- Finish chart audits using process discovery tool
- Conduct tracer observations:
  - Post fall huddle
  - Bedside handoff
  - Bedside rounds for hazards and delirium prevention
  - Unit call light observation
- Identify ONE SMALL test of change

We will hear updates shortly

Hospital Aim Statements
The Power of the Patient

Patients have choices

- Need to go
  - Use call light
  - Get up and go
- Wait
- Can’t wait
- Don’t make me wait
Through the eyes of the patient

- Patients over-estimate their abilities and minimize their fall risk
- Patients over-estimate our ability to keep them safe
- Patients want privacy in the bathroom
- Patients respond positively to a nurse's authentic caring and concern

Changing Your Conversation with Patients

- Do you label Patients / Caregivers: Non-Compliant?
- What does Non-Compliant Mean to You?
- How do you measure your effectiveness?
- How do you evaluate effectiveness of your teaching?

The patient is non-compliant!
The patient won’t listen!
What works?

Structured Education
- Fall risks
  - Medications
  - Tripping hazards
  - Orthostatic hypotension, especially in morning
  - Footwear
  - Rolling equipment and furniture
- Risks for injury
- Consequences of a Fall
  - Serious injury
  - Increased length of stay
  - Discharge to rehab or SNF
- Safe ambulation
  - Level of assistance needed
  - Assistive devices
  - Promote progressive ambulation

This is not Enough!

CALL DON'T FALL

“Teach Back”

“Teach Back” Testing:
- Ask the patient to describe or repeat back in his or her own words what has just been told or taught. Return demonstration is a similar technique used by diabetic educators, physical therapists, and others. Never ask whether patients understand; they always say “yes”.

This is not Enough!
Teach Back Language

“I want to be sure I explained everything clearly. Can you please explain it back to me so I can be sure I did?”

Teach Back Question Card #1

“We covered a lot today about preventing falls, and I want to make sure that I explained things clearly. So let’s review what we discussed. What are three strategies that will help you prevent falls?”

Teach Back Question Card #3

“I want to make sure I explained this clearly. When you get back home in a few days, what will you tell your friend or family member about key point just discussed?”

Teach Back Question Card #2

“I want to be sure that I did a good job of teaching you today about risk for falls. Could you please tell me in your own words what you are doing to prevent falls? How will you prevent falls in the future?”

Teach Back Question Card #4

Teach Back for Fall Safety

Teach Back Tool for Fall Prevention

Knowledge Test after and Return Demonstration Checklist:
Delivery matters

Tools and Best Practices
Fall TIPS Tool

Patient Name: John
Date: 05/12/2016

Increased Risk of Harm If You Fall

- [ ] History of Falls
- [ ] Medication Side Effects
- [ ] Walking Aid
- [ ] IV Pole or Equipment
- [ ] Unsteady Walk
- [ ] May Forget or Choose Not to Call

Fall Interventions

- Communicate Recent Fall and/or Risk of Harm
- Walking Aids
- Cutches
- Cane
- Walker
- IV Assistance When Walking
- Toileting Schedule: Every 1 hour
- Bed Pan
- Assist to Commode
- Assist to Bathroom

Bed Alarm On
Assistance Out of Bed

FAMILY
STAFF
PATIENT

Patient agreement

http://www.hret-hiin.org/resources/display/prevent-a-fall-patient-agreement
Bedside Handout Reinforced at least Daily

- When is the best time to teach?
  - Initial teaching
  - Reinforcement in bedside handoffs
- Who is the best person to teach?
- How to engage families?


Fall Questionnaire

PREVENTING FALLS IN THE HOSPITAL

Circle yes or no for each statement below:

- Being in a crowded, unfamiliar environment increases risk for falls?
- Not being alert or aware increases risk for falls?
- Dizziness and dizziness-related events increase risk for falls?
- Being in unfamiliar environment increases risk for falls?
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Bedside handoffs

- Engage the patient and family
- Validate information with patient
- Reinforce, use teach back for safety
- Semi private rooms accommodations
  - Keep voices low
  - Pull curtain
  - Be alert of surroundings and information being discussed
- HHS.gov: Incidental uses and disclosures guidelines

Families as an intervention

- Phone calls
- Mealtime visits
- Mobilization
  - Wrist band once trained
- Hand off to the family
Family as Historian

Bedside Tools

Fall Tips Article
Register to receive the Fall TIPS tool
Fall TIPS Webinar: How to Implement on your unit
Fall Prevention Tips for Hospital Patients and Families
Cox Patient Agreement
Time to hear from you

► What have you learned from the discovery tool and tracer observations?
► Any surprises?
► What SMALL test of change are you considering?

Go Slow to Go Fast
Next Steps

▸ Submit your First PDSA Cycle to Michele
▸ Present your PDSA learnings at session January 24, 2019

Resources

Tools to Test:

▸ HRET HIIN Falls Discovery Tool
▸ Progressive Mobility Tools
  ▶ Banner Mobility Assessment Tool for Nurses (BMAT) video and Tool
  ▶ Timed Get up and Go Test
  ▶ Get Up and Go Test
  ▶ Project HELP Mobility Change Package - multiple tools included
  ▶ Med Surg Mobility Protocol
  ▶ ICU Mobility Protocol
Resources - future topics

Tools to Test:

Post-fall huddle

CAPTURE Falls mobility training videos, mobility tools - includes Post Fall Huddle training videos and documentation tools

Resources

Collaborative Tools:

- Monthly Virtual Learning Sessions
- List-serv
- Subject Matter Expert - Coach Jackie

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