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Evidence-Based Fall Prevention Strategies for MU Healthcare

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Patient falls are a significant problem in every hospital unit because they contribute to poor patient outcomes and increase length of stay and cost. The Fall Council at MU Healthcare collects monthly data, and data from the last year revealed an increase in in-patient and out-patient falls. The National Database of Nursing Quality Indicators sets goals for the number of patient falls per 1,000 patient days and ranks hospitals by percentile. Currently, 38% of MU Healthcare's in-patient units are performing above the 50th percentile, and 81% of the out-patient units are performing above the 50th percentile. The goal of this project is to review the literature for evidence-based fall prevention strategies and present the findings with an associated recommendation to MU Healthcare's Fall Council.

The research question examines the impact of conducting post-fall debriefs on preventing further falls in the hospital setting. The research team conducted literature reviews for each of the following areas: general medical-surgical, critical care, emergency, perioperative, psychiatric, pediatric, and perinatal. Decreasing the number of falls that occur in each of these departments in MU Healthcare is a priority for enhancing patient safety and classifying the institution with magnet status. Initial findings support the hypothesis that post-fall debriefs are an effective strategy in reducing the number of repeat falls and establishing improved safety culture and communication among staff. Post-fall debriefs were found to be most effective when strong and positive leadership runs the debrief meeting and when the team has strong group safety norms. The recommendation based on evidence-based research is that MU Healthcare creates a post-fall debrief tool and initiates post-fall debriefs after each fall with all staff present on the unit at the time of the fall.