

# TAILORING INTERVENTION TO PREVENT HOSPITAL FALL

## *Quality Improvement Project*



PRESENTER:

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### INTRODUCTION:

- Hospital falls are a major public problem worldwide causing patient morbidity, mortality, and economic loss for healthcare (Dykes et al., 2020).
- Falls prolong hospital stays by 6 to 12 days (Dykes et al., 2020).
- Inpatient falls result in injuries, extended hospitalization, and death (Leland et al., 2022).
- Adult fall death rates have risen from 2012-2021, by 41% (CDC,2023).
- Falls cost US hospitals up to \$32 000 a year (Dykes et al., 2020).
- This project utilizes the EBP TIPS, which is a multi-component intervention that has been shown to reduce inpatient falls.

**PRACTICE QUESTION:** For patients in a Medical-Surgical unit, will implementing the Tailoring Interventions for Patient Safety (TIPS) approach to preventing falls, compared to current practice, impact fall rates in 8-10 weeks?

**METHODS:** Database search was conducted using CINAHL, EBSCOhost MEDLINE Complete, and the academic search Applicable articles were appraised using the Johns Hopkins Research Evidence appraisal tool.

**RESULTS:** Ten peer-reviewed research articles were included. Three articles were Level I/A, high-quality evidence, and seven articles were Level II/B good quality evidence.

**BEST-EVIDENCE RECOMMENDATIONS:** Following the TIPS three steps process that includes fall risk assessment, developing a fall prevention plan, and implementing the plan consistently reduce fall rates effectively (Christiansen et al., 2020; Dykes et al., 2020; Hopewell et al.,2019; Morris et al., 2022). The intervention can be adapted throughout the hospital to prevent inpatient falls.

**TRANSLATION:** The TIPS interventions are specific to patients' fall risks, which helps to prevent falls however, proper assessment and implementing a patient-tailored intervention is the key.

**IMPLEMENTATION:** This quality improvement project used the Tailoring Intervention for Patient Safety (TIPS) evidence-based approach to reduce inpatient fall rates at Sibley Memorial Hospital - 7A- Medical/Surgical unit.

Setting: Hospital, Med/Surg, 24 beds.

Population: Adult patients including geriatric patients.

Inclusion Criteria: Patients 18 years and older.

Exclusion Criteria: Pediatric patients and patients not admitted to the floor.

Summative Evaluation: Audits using a checklist 2 - 3 X a week.

Formative Evaluation: Pre- and Post-fall data.

Outcome: Decrease fall rate

Data Collection: Fall rate pre- & post-intervention from EHR.

Data Analysis: using patient days.

Timeframe: 10 weeks.

Evidence shows that TIPS reduces falls by 15% and fall injuries by 35%

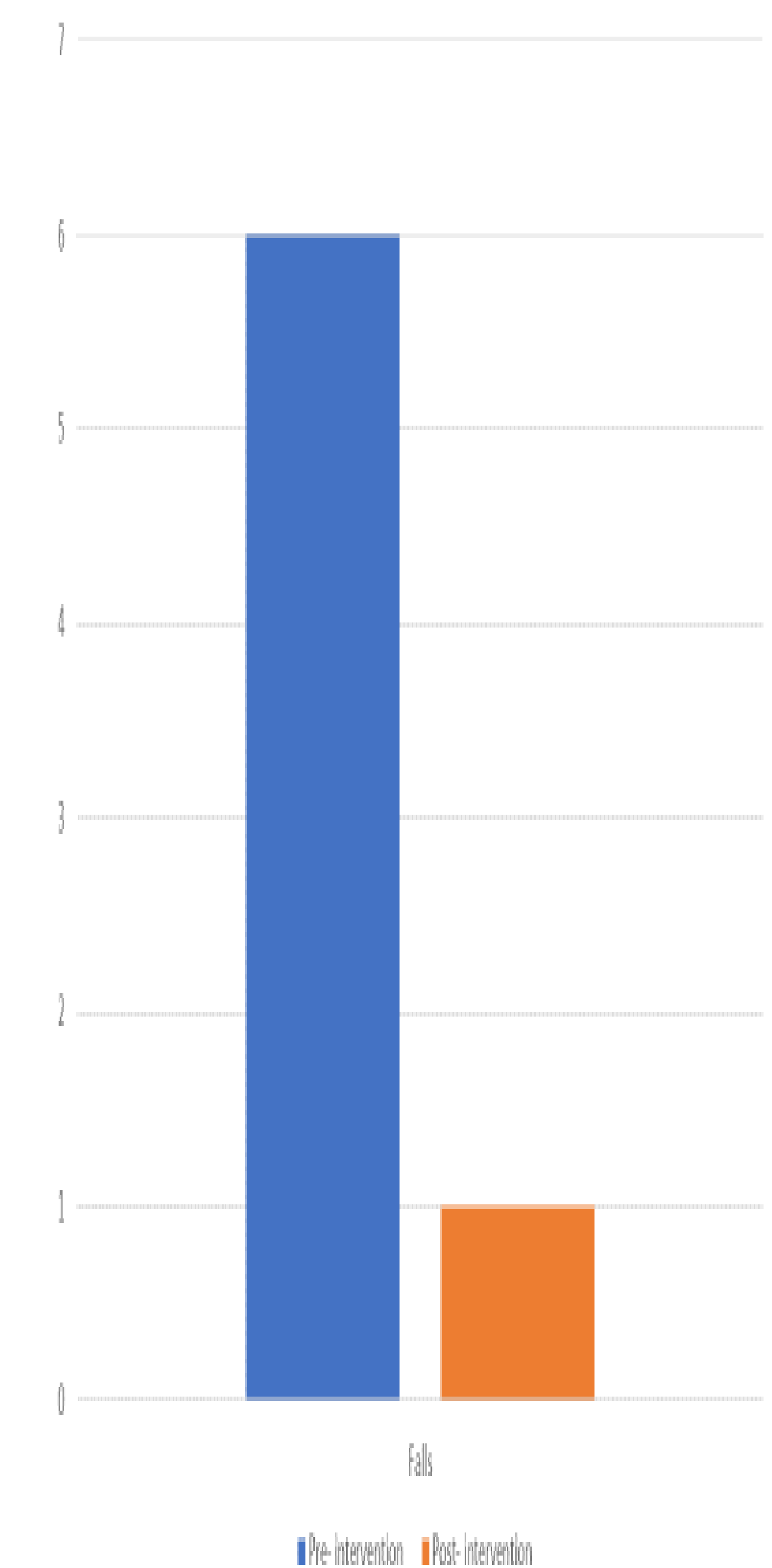
(Dykes et al., 2020; Christiansen et al., 2020; Morris et al., 2022).

By using the TIPS intervention, the project decreased fall rates from 6 falls in

8 weeks of the

pre-implementation period to 1 fall during post intervention period.

Number of Falls Eight weeks Pre- and Post TIPS Intervention



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References available in the QR code below

