

# The Impact of Fall Preventions Audits

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## Introduction

Hospital fall rates in the US are estimated from 3-11 falls per 1000 days (Turner et al., 2020). The highest incidence of falls occurs in the elderly over 65 years old (Wallis et al., 2022). Falls can lead to further injury, decrease functionality, and have sequela on quality of life. Patients admitted to hospital units are assessed for fall risk upon admission, however the preventative interventions are incohesive. Study shows that older patients who are from home are less likely to return home post-fall with injury. This change in environment post-fall has both financial and emotional costs (Stockwell et al., 2020).

## Desired Outcomes

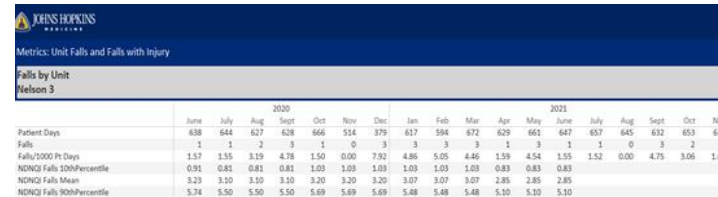
- improve patient outcomes
- decrease patient falls especially falls with injury
- promote patient safety while building consistency that will translate into practice such as improvement of nurse sensitive indicators

## K Card Audits

Nelson 3 utilized the K-card audit provides a broader understanding on barriers and challenges while providing real time feedback and mentoring to staff. It is a visual tool with a green and red side to indicate pass or fail. There are 4 categories with 14 subcategories of intervention. Fall committee members does daily audits and provides direct feedback to primary nurse and clinical technicians.

## Nelson 3 Metrics

Comparison of Nelson 3 Metrics Pre and Post K Card Audit Project.  
FY21: Fall = 25 and Falls with Injury total = 5

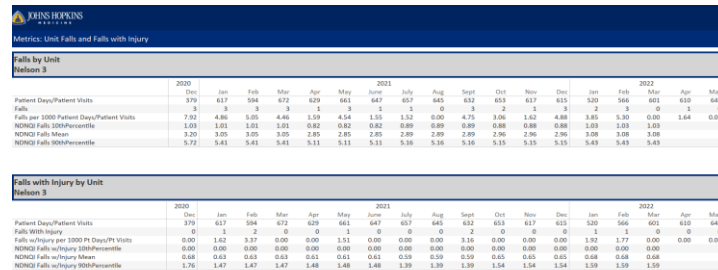


| Metric                     | 2020 |      |      |      |      |      |      |      |      |      |      |      | 2021 |      |      |      |      |      |  |  |  |  |  |  |
|----------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--|--|--|--|--|--|
|                            | June | July | Aug  | Sept | Oct  | Nov  | Dec  | Jan  | Feb  | Mar  | Apr  | May  | June | July | Aug  | Sept | Oct  | Nov  |  |  |  |  |  |  |
| Patient Days               | 638  | 544  | 627  | 628  | 666  | 514  | 379  | 617  | 594  | 672  | 629  | 661  | 647  | 657  | 645  | 632  | 653  | 627  |  |  |  |  |  |  |
| Falls                      | 1    | 1    | 2    | 3    | 1    | 0    | 3    | 3    | 3    | 3    | 1    | 3    | 1    | 1    | 0    | 3    | 2    | 1    |  |  |  |  |  |  |
| Falls/1000 Pt Days         | 1.57 | 1.55 | 3.19 | 4.78 | 1.50 | 0.00 | 7.92 | 4.86 | 5.05 | 4.46 | 1.59 | 4.54 | 1.55 | 1.52 | 0.00 | 4.75 | 3.06 | 1.62 |  |  |  |  |  |  |
| NONQI Falls 10thPercentile | 0.91 | 0.81 | 0.81 | 0.81 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 0.83 | 0.83 | 0.83 |      |      |      |      |      |  |  |  |  |  |  |
| NONQI Falls Mean           | 3.23 | 3.50 | 3.50 | 3.20 | 3.20 | 3.20 | 3.07 | 3.07 | 3.07 | 2.85 | 2.85 | 2.85 |      |      |      |      |      |      |  |  |  |  |  |  |
| NONQI Falls 90thPercentile | 5.74 | 5.50 | 5.50 | 5.50 | 5.69 | 5.69 | 5.69 | 5.48 | 5.48 | 5.48 | 5.10 | 5.10 |      |      |      |      |      |      |  |  |  |  |  |  |



| Metric                              | 2020 |      |      |      |      |      |      |      |      |      |      |      | 2021 |      |      |      |      |      |  |  |  |  |  |  |
|-------------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|--|--|--|--|--|--|
|                                     | June | July | Aug  | Sept | Oct  | Nov  | Dec  | Jan  | Feb  | Mar  | Apr  | May  | June | July | Aug  | Sept | Oct  | Nov  |  |  |  |  |  |  |
| Patient Days                        | 638  | 644  | 627  | 628  | 666  | 514  | 379  | 617  | 594  | 672  | 629  | 661  | 647  | 657  | 645  | 632  | 653  | 627  |  |  |  |  |  |  |
| Falls With Injury                   | 0    | 0    | 0    | 0    | 1    | 0    | 0    | 1    | 2    | 0    | 0    | 1    | 0    | 0    | 0    | 2    | 0    | 0    |  |  |  |  |  |  |
| Falls w/Injury/1000 Pt Days         | 0.00 | 0.00 | 0.00 | 0.00 | 1.50 | 0.00 | 0.00 | 1.62 | 3.37 | 0.00 | 0.00 | 1.51 | 0.00 | 0.00 | 0.00 | 3.15 | 0.00 | 0.00 |  |  |  |  |  |  |
| NONQI Falls w/Injury 10thPercentile | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |      |      |      |      |      |  |  |  |  |  |  |
| NONQI Falls w/Injury Mean           | 0.67 | 0.70 | 0.70 | 0.70 | 0.68 | 0.68 | 0.68 | 0.64 | 0.64 | 0.64 | 0.61 | 0.61 | 0.61 |      |      |      |      |      |  |  |  |  |  |  |
| NONQI Falls w/Injury 90thPercentile | 1.62 | 1.61 | 1.61 | 1.61 | 1.72 | 1.72 | 1.72 | 1.48 | 1.48 | 1.48 | 1.48 | 1.48 | 1.48 |      |      |      |      |      |  |  |  |  |  |  |

FY22: Falls = 16 and Falls with Injury total = 4



| Metric                                     | 2020 |      |      |      |      |      |      |      |      |      |      |      | 2021 |      |      |      |      |      |      |      |      |      |      |     | 2022 |  |  |  |  |  |  |  |  |  |  |  |
|--|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|-----|------|--|--|--|--|--|--|--|--|--|--|--|
|  | Dec  | Jan  | Feb  | Mar  | Apr  | May  | June | July | Aug  | Sept | Oct  | Nov  | Dec  | Jan  | Feb  | Mar  | Apr  | May  | June | July | Aug  | Sept | Oct  | Nov |      |  |  |  |  |  |  |  |  |  |  |  |
| Patient Days/Patient Visits                | 379  | 617  | 594  | 672  | 629  | 661  | 647  | 657  | 645  | 632  | 653  | 627  | 620  | 566  | 601  | 610  | 610  | 610  | 610  | 610  | 610  | 610  | 610  | 610 |      |  |  |  |  |  |  |  |  |  |  |  |
| Falls                                      | 3    | 3    | 3    | 3    | 3    | 1    | 3    | 1    | 1    | 0    | 3    | 2    | 1    | 3    | 2    | 3    | 3    | 0    | 1    | 0    | 1    | 0    | 1    |     |      |  |  |  |  |  |  |  |  |  |  |  |
| Falls per 1000 Patient Days/Patient Visits | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 0.82 | 0.82 | 0.89 | 0.89 | 0.89 | 0.89 | 0.89 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 0.00 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 |     |      |  |  |  |  |  |  |  |  |  |  |  |
| NONQI Falls 10thPercentile                 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 | 0.00 | 1.03 | 1.03 | 1.03 | 1.03 | 1.03 |     |      |  |  |  |  |  |  |  |  |  |  |  |
| NONQI Falls Mean                           | 1.76 | 1.47 | 1.47 | 1.47 | 1.48 | 1.48 | 1.48 | 1.39 | 1.39 | 1.39 | 1.39 | 1.39 | 1.54 | 1.54 | 1.54 | 1.54 | 1.54 | 1.59 | 1.59 | 1.59 | 1.59 | 1.59 |      |     |      |  |  |  |  |  |  |  |  |  |  |  |
| NONQI Falls 90thPercentile                 | 1.76 | 1.47 | 1.47 | 1.47 | 1.48 | 1.48 | 1.48 | 1.39 | 1.39 | 1.39 | 1.39 | 1.39 | 1.54 | 1.54 | 1.54 | 1.54 | 1.54 | 1.59 | 1.59 | 1.59 | 1.59 | 1.59 |      |     |      |  |  |  |  |  |  |  |  |  |  |  |

35% decrease of patient falls and 20% decrease in Falls with injury.

## Lessons Learned

- Creating an individualized fall prevention plan for each patient, with inclusion of both patient and provider education to enhance patient safety. This type of intervention has been shown in studies to reduce falls in the acute care settings with full implementation (Wallis et al., 2022).
- Fall Committee members noted changes in staff documentation compliance as well as fall prevention intervention compliance. Staff is more cognizant of fall prevention strategies.

## References

- Turner, K., Staggs, V. S., Potter, C., Cramer, E., Shorr, R. I., & Mion, L. C. (2020). Fall prevention practices and implementation strategies: Examining consistency across hospital units. *Journal of Patient Safety*, 18(1).
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- Wallis, A., Aggar, C., & Massey, D. (2022). Multifactorial falls interventions for people over 65 years in the Acute Hospital Setting: An Integrative Review. *Collegian*, 29(1), 100-108.