Fall Prevention and Alarm Fatigue

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Nursing Leadership 444
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Background: Falls in Nursing Homes

- Of the 1.6 million residents in U.S. nursing facilities, approximately half fall annually. One in three will fall two or more times in a year.
- Fall related injuries decrease residents quality of life and ability to function.
- Falls increase resident dependence on staff.
Setting of Fall Prevention Project

- 258 bed Skilled Nursing facility
- 43 bed secured dementia unit
- 43 bed sub acute short term rehabilitation unit
Project Objectives/Goal

- Evaluate and improve the existing fall prevention policy and procedure.
- Reduce Falls.
- Eliminate routine use of alarms.
Prevention policy

- Risk Assessment
- Interdisciplinary process
- Algorithm of interventions
- Evaluation of implemented interventions
- Falling Star: Frequent fallers program
- Subsequent assessments
Facility observations from audit results:

- 50% fall rate over 6 months
- Fall prevention policy followed inconsistently
- Interventions not effective in preventing recurrent falls
- Staff desensitized to sound of alarms
- Residents agitated with noise from alarms
<table>
<thead>
<tr>
<th>Unit Name</th>
<th>Day shift</th>
<th>Evening shift</th>
<th>Night shift</th>
<th>Total</th>
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</thead>
<tbody>
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<td>Ashokan</td>
<td>7</td>
<td>6</td>
<td>10</td>
<td>23</td>
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<tr>
<td>Brink(dementia)</td>
<td>4</td>
<td>19</td>
<td>11</td>
<td>34</td>
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<tr>
<td>Catskill(subacute)</td>
<td>14</td>
<td>17</td>
<td>15</td>
<td>46</td>
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<tr>
<td>DeWitt</td>
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<td>Esopus</td>
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<td>10</td>
<td>5</td>
<td>19</td>
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<tr>
<td>Foxhall</td>
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<td>12</td>
<td>6</td>
<td>30</td>
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<tr>
<td><strong>Total</strong></td>
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<td><strong>59</strong></td>
<td><strong>190</strong></td>
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</tbody>
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Change Agents:

- **Nursing input**
  - Certified Nursing Assistants
  - LPN’s
  - RN Unit Managers
  - Supervisors

- **Interdisciplinary input**
  - Physical and occupational therapists
  - Recreational therapy staff
  - Social Work
  - Environmental services staff
Implementation process:

Education
  Making Alarms Extinct Webinar
  Falls Jeopardy Game
  Alarm Fatigue and Fall Prevention bulletin board
  Therapy and Nursing Transfer training
  Recreational therapy diversional activities
Implementation process, cont.

- Interdisciplinary review of all falls
- Investigation of circumstances
- Alarms removed strategically
- Increase resident monitoring first 72 hours post fall
- Fall risk reassessment
- Care plan revision
- Monitor implementation and resident response
Evaluation

- Since September a 70.8% decrease in the use of alarms for residents has been noted.
- Preliminary data from incidents and accidents reports for the last 2 weeks in November show a decrease in the number of falls.
- Quality Measures data will take time to validate ongoing reduction in fall rates.
- Continuation of this process for monitoring and evaluating the implementation and effectiveness of program has been agreed to by the Quality Assurance Committee for a minimum of six months.
References

- Australian Commission on Safety and Quality in Health Care (2009) Preventing falls and harm from falls in older people: Best Practice Guidelines for Australian Residential Aged Care Facilities. ACSQHC, Canberra, SA.
References Cont.