

Safety Against Fall Every time (SAFE) (Fall prevention Campaign)

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World Journal of Advanced Research and Reviews, 2023, 19(03), 1140–1145

Publication history: Received on 04 August 2023; revised on 10 September 2023; accepted on 12 November 2023

Article DOI: <https://doi.org/10.30574/wjarr.2023.19.3.1679>

Abstract

Falls are the second-leading cause of unintentional injuries or deaths worldwide. Inpatient falls result in significant physical and economic burdens for patients as well as for medical organizations. From January to November 2022, the number of fall incidents was 25. The causes identified were ineffective PFE, no hourly rounds, especially during night shifts, poor IPR with assigned patients, lack of awareness regarding disease conditions and medication administered, not giving effective PFE when the level of care changes, and not providing proper fall prevention education to the patient attendant. Group director nursing has initiated a campaign titled “SAFE” (Safety Against Fall Every time) in the month of November. The campaign was conducted till January 2023. Numerous campaign activities were planned to reduce the incidence of patient fall and to reinforce the compliance to fall prevention protocols. Various fun activities such as pocket charts, spin wheel, dart, quiz activities, poster competitions were planned to encourage participation of the staff in the campaign and to enhance learning. Daily audits were conducted to ensure correct assessment of vulnerable patients & AFRAT (Apollo fall risk assessment tool) monitoring. Daily briefing was held in all the three shifts on PFE & prevention of patient fall. Team leaders of the unit has been instructed to ensure hourly rounds specially during night shifts. The percentage of fall incidence in Jan to Nov 2022 was 62% which was reduced to 32% in Dec to Jun 2023. Daily audits on hourly rounds, assessment of vulnerable patient, AFRAT scoring and patient & family education was continued to ensure a culture of safety among the staff nurses.

Keywords: Patient Fall; Patient Safety; Fall Prevention Protocol; Campaign; Vulnerable Patients

1. Introduction

1.1. “Patient safety is everyone’s priority “

Health care professionals have a complex and potentially conflicting set of goals when treating patients. They have to ensure that the patient must be treated for the problem that led to their hospitalization, patient safety and assist in maintaining or regaining physical and mental function. Therefore, it is necessary to balance fall prevention against other needs. Fall prevention entails controlling a patient's underlying fall risk factors (such as difficulties with walking and transfers, drug side effects, disorientation, and frequent bathroom visits), as well as improving the infrastructure and environment of the hospital.

The second most common reason for unintended harm or death globally is falls. Over 80% of the estimated 684000 people who die from falls each year around the world live in low- and middle-income nations. The majority of fatal falls occur to those over the age of 60. Each year, there are 37.3 million falls that are serious enough to need medical attention. Inpatient falls place a heavy financial and physical strain on patients as well as on medical organizations (extended hospital stays, higher expenditures for care, and litigation)[1].

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From January to November 2022, the number of fall incidents reported was 25. The causes identified were ineffective PFE, no hourly rounds, especially during night shifts, poor IPR with assigned patients, lack of awareness regarding disease conditions and medication administered, not giving effective PFE when the level of care changes, and not providing proper fall prevention education to the patient attendant. Group director nursing has initiated a campaign titled “SAFE” (Safety Against Fall Every time) in the month of November. The campaign was conducted till January 2023. Numerous campaign activities were planned to reduce the incidence of patient fall and to reinforce the compliance to fall prevention protocols

1.2. Materials and methods

The campaign titled “SAFE” (Safe Against Fall Every time) was initiated in the month of November 2022 and conducted till January 2023.

The objectives of the campaign were to,

- To reduce the numbers of fall.
- To reduce the risk of injuries.
- To improve quality, safety and experience of care – at the level of the individual.
- To educate staff to provide effective Patient and family education.
- To reduce direct and indirect cost of workplace incidents due to fall.
- To evolving a culture of safety.

The campaign happened in three phases such as Pre phase, Intra phase and post phase.

1.2.1. Pre phase

The fall incidents reported from January to November 2022 was 25

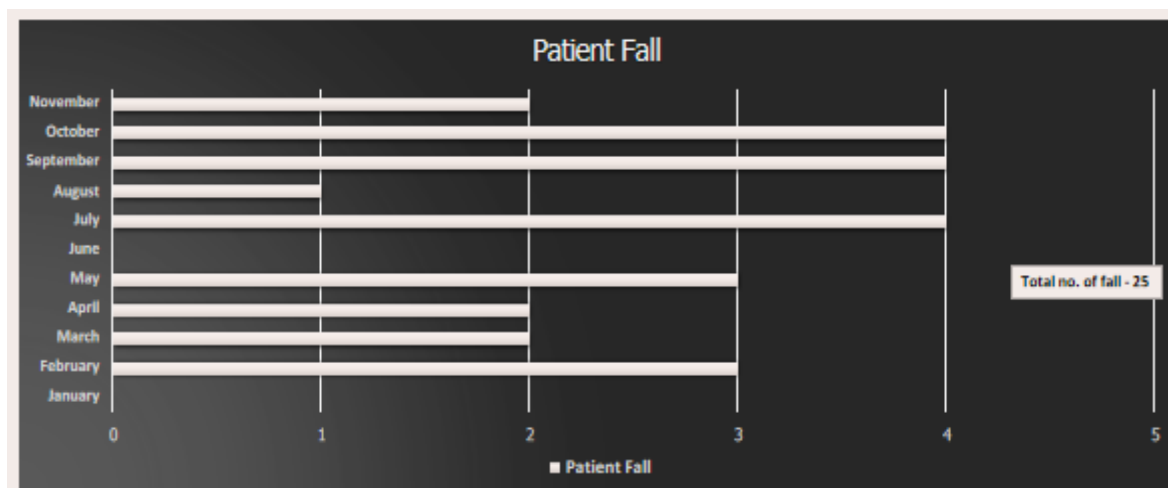


Figure 1 The data was analyzed for the reasons for the fall and the data showed that

- Time at which maximum fall happened is between 9pm to 8:30a
- The place in which fall happened are Inside & outside the washroom and Near bedside, while waking up from bed after a long duration.
- The major reasons of falls were:
- Patient left unattended inside the washroom.
Proper education not given related to side rails.
- Patient was not explained to sit for a while before getting out of the bed if they are waking up after a long duration.
- Patients was not properly briefed about the importance of call bell.
- Nurses/GDA's/Housekeeping are not seeking for help if they are unable to handle the patient alone.

1.2.2. Intra Phase

Campaign activities

- Special sessions are planned for on ground staff to increase the awareness about patient safety and PFE.
- Multiple activities related to patient fall prevention are organized in order to enhance the staff interest for learning.
- On ground trainings involving patients will be there which focuses on how to deliver fall prevention education to patient and patient attendant.
- Positive reinforcement will be provided to the staff who performed well in the activities of Fall campaign.

Various fun activities such as pocket charts, spin wheel, dart, quiz activities, poster competitions were planned to encourage participation of the staff in the campaign and to enhance learning. Daily audits were conducted to ensure correct assessment of vulnerable patients & AFRAT (Apollo fall risk assessment tool) monitoring. Daily briefing was held in all the three shifts on PFE & prevention of patient fall. Team leaders of the unit has been instructed to ensure hourly rounds specially during night shifts.

SAFE - Safety Against Fall Every-time			
Sl. No.	Activities	Date	Time
1.	Sessions	21-11-2022 & 26-11-2022	9-10am/1-2pm/3-4pm
2.	Pocket Charts	18-11-2022 to 23-11-2022	Whole Day
3.	Rotating Wheel	24-11-2022 to 29-11-2022	Whole Day
4.	Dart Activity	30-11-2022 to 03-12-2022	Whole Day
5.	QUIZ Competition	08-12-2022	1:45pm to 2pm
6.	Poster Competition	16-01-2023	1-2pm
7.	On ground trainings involving patients on PFE	From 18-01-2023 onwards	Between 12pm – 4pm
8.	Closing/Winner's Announcement	23-01-2023	3-4pm

Figure 2 Campaign Activities



Figure 3 Launch of SAFE campaign



Figure 4 Training session



Figure 5 Pocket Chart activity for Nurses and Doctors

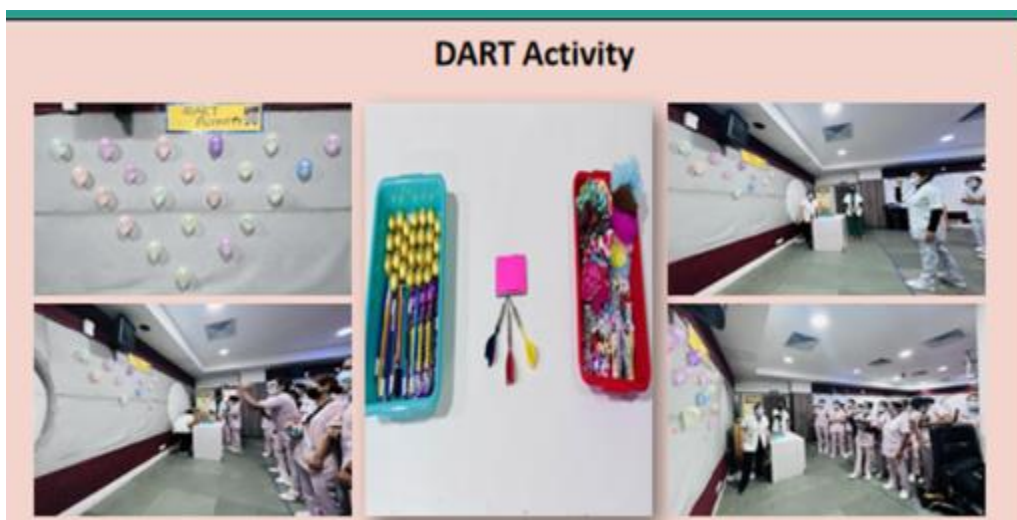


Figure 6 Dart Activity

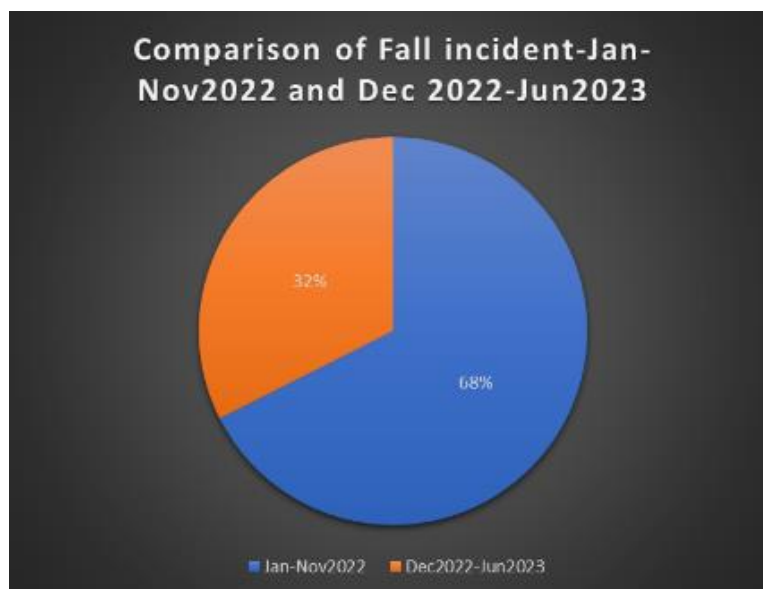


Figure 9 Comparison of the fall incidence between Jan-Nov 2022 and Dec 2022 to Jun 2023

3. Discussion

The impact of the campaign was visible in reducing the fall incidence rate from 68% in Jan to Nov 2022 to 32% in Dec 2022 to Jun 2023. To sustain the reduction in the fall incidence the following action plans were executed ;

- Team leader of the units had been instructed to ensure hourly rounds specially during night shifts. Daily briefing were held in all the three shifts on PFE & prevention of patient fall.
- Daily audits had been conducted to ensure correct assessment of vulnerable patients & AFRAT monitoring, hourly rounds and patient and family education .
- On ground training of staff nurses on Patient & family education.

4. Conclusion

Fall prevention programs that evaluate fall rates and fall injuries could be an effective intervention for improving patients' outcomes. Hospitals should include regular fall prevention programs for the health care professionals. Nurse leaders should consider patient centered and unit-based interventions that prevent patient falls in their hospitals.

Compliance with ethical standards

Disclosure of conflict of interest

There are no conflicts of interest in connection with this paper

Statement of ethical approval

The present research work does not contain any studies performed on animals/humans subjects by any of the authors. The campaign was conducted with the approval of the group director nursing and the all staff nurses participated with their own interest.

Statement of informed consent

Informed consent was obtained from all individual participants included in the study.

References

- [1] <https://www.who.int/news-room/fact-sheets/detail/falls>