

Project Title

Make a Difference: Falls Prevention for Safe & Dignified Care in Psychiatric Nursing Home

Project Lead and Members

Project lead: Ms Francisco Jovelyn Velasco, Staff Nurse

Project members:

- Gladys Mae O. Lucero, Enrolled Nurse
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- Althea T. Rabanal, Physiotherapy Aide

Organisation(s) Involved

Xiser CareServe

Project Period

Start date: April 2019

Completed date: April 2022

Aims

- Long Term Goal: To reduce the number of falls in Xiser CareServe by 30% over 3 years
- Short Term Goal: To reduce the number of falls in pilot ward from 15 per year (in 2018) to 8 per year (in 2020).

Background

See poster attached/ below

Methods

See poster attached/ below

Results

See poster attached/ below

Lessons Learnt

Learnings

- Collaborative learning is very useful and allows us to view things from different perspectives, be it within the organization (e.g. getting inputs from different staff groups) or from external organizations (e.g. learning from other Nursing Homes participating in the Falls Prevention collaborative)
- Learned to analyse and address the resident's specific needs and preferences

Future anticipated challenges:

- The implementation in Ward 4 will be quite challenging as there are no current project team members in Ward 4 and it will be difficult for the project team to supervise the implementation due to current split zone requirements.
- Lack of cooperation from some residents in implementing changes e.g.: Bed Cohorting

Conclusion

See poster attached/ below

Additional Information

Resident behavioural issues is a challenge for psychiatric Nursing Homes, but they are not impossible to handle. Resident engagement is important to manage behaviour, which can lead to improve care outcomes and resident quality of life.

Project Category

Care & Process Redesign

Keywords

Care & Process Redesign, Quality Improvement, Plan Do Study Act, Safe Care, Human Centred, Xiser CareServe, Falls Prevention

Name and Email of Project Contact Person(s)

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BACKGROUND

Falls prevention is a significant challenge in psychiatric nursing homes because of residents' poor safety awareness and behavioural issues.

XiSer CareServe is a 192-bedder psychiatric nursing home. In July to December 2018, there were a total of 9 falls in Xiser CareServe

A Falls Prevention team was formed in Jan 2019 to develop and implement falls prevention interventions in the Nursing Home. This team also participated in a Falls Prevention collaborative project organized by the Agency for Integrated Care, which brought together project teams from different nursing homes with similar goals and enabled cross-learning across institutions.

PROJECT AIM

Long Term Goal: To reduce the number of falls in Xiser CareServe by 30% over 3 years
Short Term Goal: To reduce the number of falls in pilot ward from 15 per year (in 2018) to 8 per year (in 2020).

ANALYSIS

To assess the problem, the team retrospectively collected 6 months baseline data on all fall incidents that occurred in Xiser CareServe from July 2018 to December 2018. This baseline data was then analyzed to identify the most common timing(s), location(s) and cause(s) of falls. The team also sought inputs from other staff groups including Doctors, Pharmacists, Physiotherapists, Occupational therapists, as well as other nursing and direct care staff.

Similar root causes were grouped together and the root causes were prioritized. Main root causes identified were:

1. Behavioral issues
2. Environmental and Equipment issues
3. Resident profile (comorbidities, medication side effects)
4. Manpower rostering – ratio of 2-3 staff to 48 residents per shift
5. Lack of training of new staff

SOLUTIONS

Based on the main root causes identified, various solutions were brainstormed. These solutions were evaluated for effectiveness, ease of implementation and sustainability by project team members together with input from relevant staff groups and management.

A decision was made to adopt a resident-centered care approach to prevent falls, focusing on 5 key elements (based on the main root causes identified).

Figure 1: Falls Prevention Strategies and Interventions

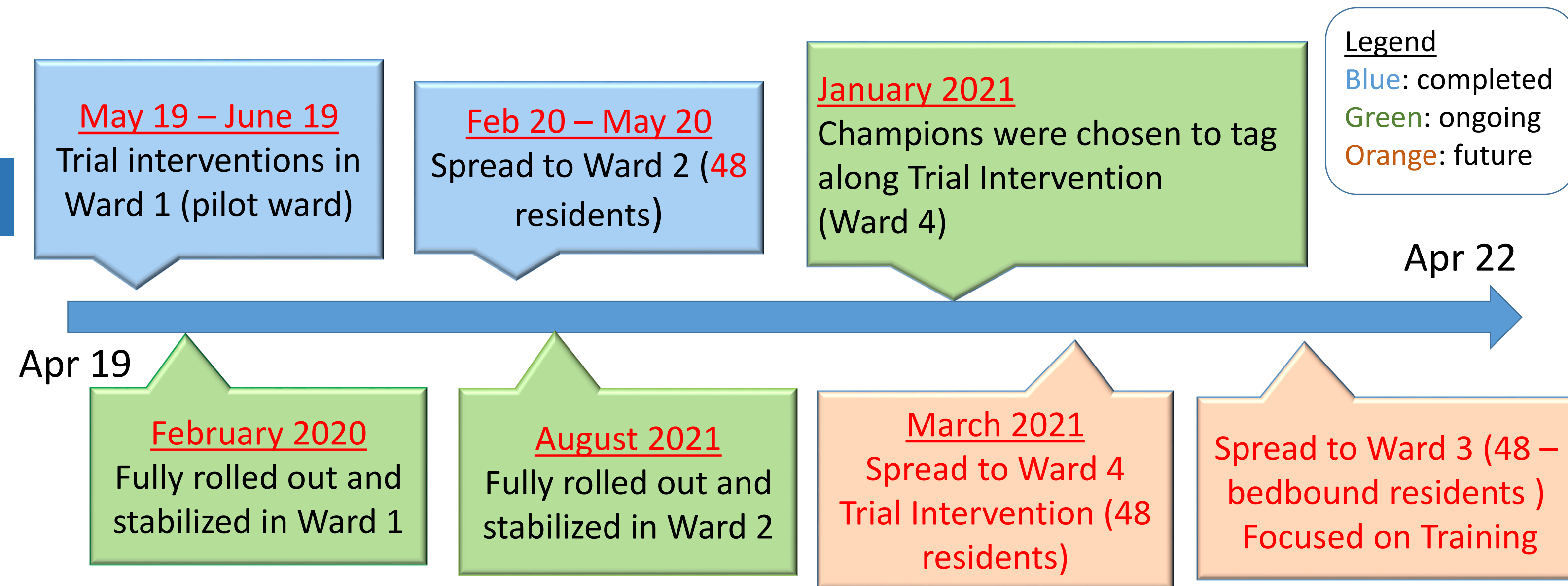


IMPLEMENTATION PLAN

This project was started in April 2019 with a planned completion date in April 2022. The project is still ongoing and the implementation plan for the project is outlined below.

- Each intervention was implemented using Plan-Do-Study-Act (PDSA) methodology:
- Plan: develop strategy / intervention
 - Do: conduct staff training / brief staff on intervention, trial intervention in a small group
 - Study: gather feedback from staff, monitor fall rate, monitor for compliance
 - Act: Revise intervention if necessary, implement intervention in a larger group of staff/residents

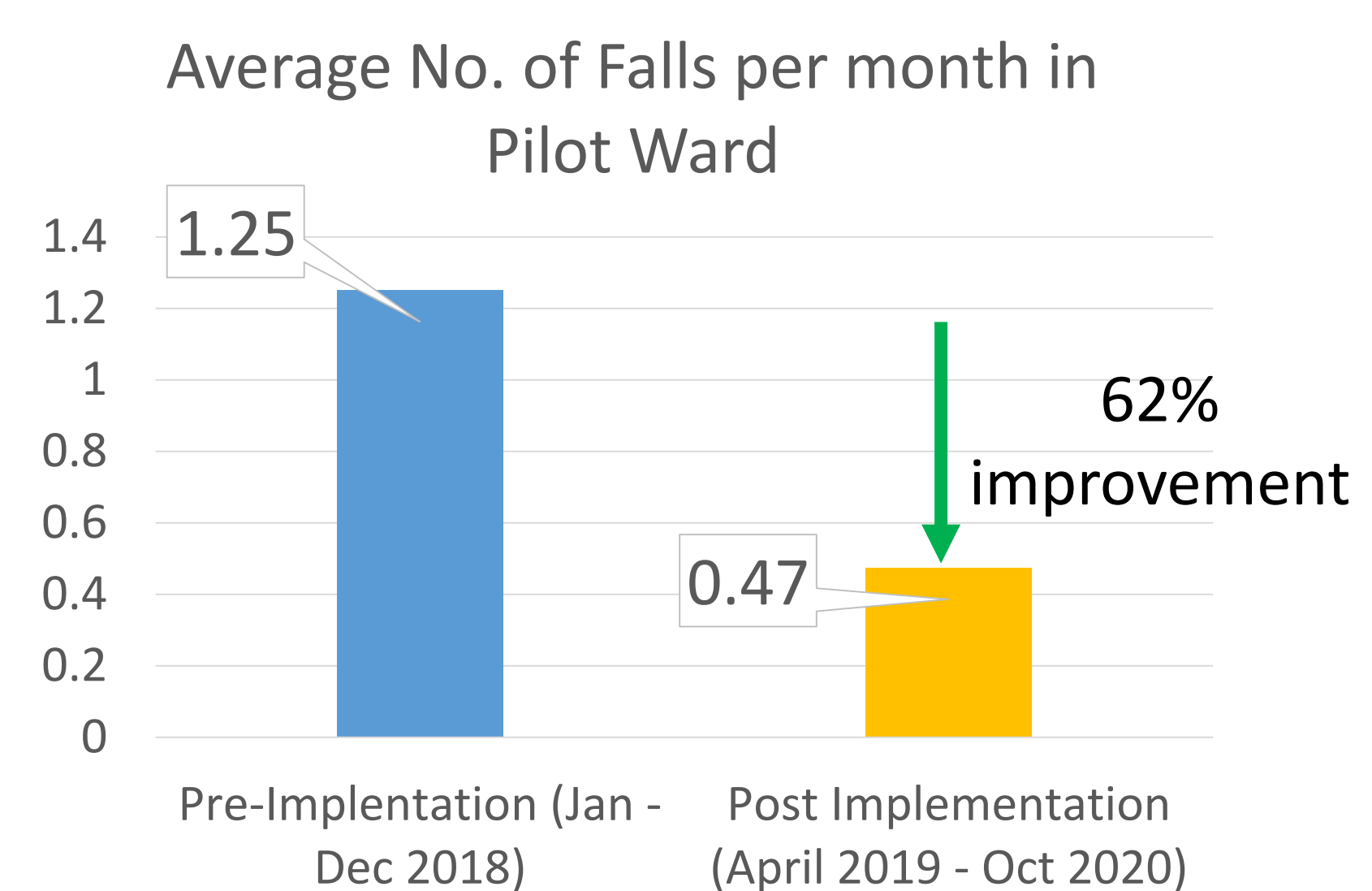
Figure 2: Implementation Plan



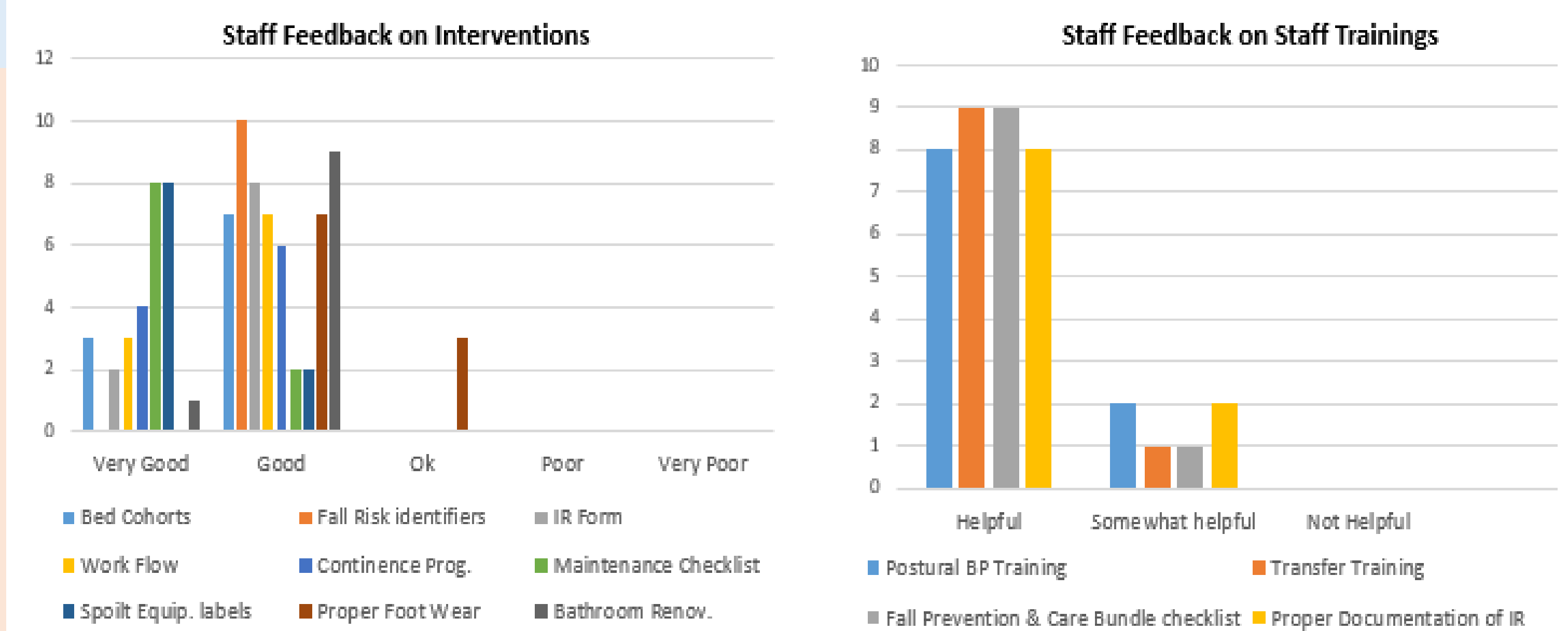
BENEFITS / RESULTS

As of October 2020, we have rolled out most of the interventions in Ward 1 and started the spread of all Fall Initiative except for Training that are in need of Physical contact in Ward 2.

As of October 2020, we have successfully reduced the number of falls in our pilot ward by 62% from 15 falls pre-implementation (Jan – Dec 2018, average of 1.25 falls/month) to 9 falls post-implementation (Apr 2019 – Oct 2020, average of 0.47 falls/month).



We have also received positive feedback from staff, with most staff rating all interventions as “Good” and all staff trainings as “Helpful”.



NEXT STEPS

While the project is still ongoing, our preliminary results are promising with a 62% reduction in number of falls in the pilot. The team plans to continue rolling out the falls prevention interventions to the remaining wards, with a target completion date for roll-out to entire nursing home in 2022.

To ensure sustainability, the team will continue with:

- Monthly data collection,
- Regular check-ins with staff to collect feedback, and
- Review and revise interventions as necessary.

Acknowledgements

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