Evaluation of Fall rates on a Medical-Oncology Unit after the Implementation of Fall Prevention Education: A Program Evaluation

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Abstract

Background: Falls are costly for patients in terms of physical and emotional injury. Falls also cost an organization upwards of $15,000 dollars per fall and can extend patient length of stays.

Local Problem: A fall prevention education program was implemented on a medical-oncology unit in an effort to reduce fall rates and educate the nursing staff on the organizations fall prevention bundle. An evaluation of this education was implemented in November of 2020 to evaluate the efficacy, maintenance, sustainability, and adoption of the fall prevention education.

Purpose: To evaluate how the fall prevention education program effected fall rates on the unit, determine sustainability of the program, and identify ways to improve the education.

Methods: The evaluation methods for this program evaluation were developed using dimensions of the RE-AIM framework and central criteria of the Health Belief model to help gain a better understanding of the true effects of the fall prevention education.

Intervention: The evaluation consisted of a survey distributed to staff, collection of budget data and education materials from the unit and analysis of data. The survey used was developed using the RE-AIM framework and Health Belief model.

Results: Fall rates for the unit increased from 2019 to 2020 and the greatest contributors to this problem, according to staff, were not being employed on the unit thus not having access to the education module; and increasing the frequency of education was a recommendation for improvement.

Conclusion: Increasing the frequency of the education and incorporating case studies could improve education and combat the barriers to participation to reach as many nurses as possible.

[Keywords: Fall Prevention Education, Program Evaluation, Nurse Education, RE-AIM Framework, Health Belief Model]