

A Program Evaluation of Falls Prevention in a Medical/Renal Unit

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Abstract

BACKGROUND: Despite extensive efforts and evidenced based practices, patients continue to fall during their hospital stay. It is estimated between 700,00 to 1,000,000 hospital patients fall in United States each year with 11,000 of those falls reported as fatal (Health Research & Educational Trust, 2018). Injuries from falls can increase a patient's hospital stay an additional 6.3 days at a cost per serious injury averaging \$14,056 per patient (Health Research & Educational Trust, 2018).

LOCAL PROBLEM: At Providence Saint Peter's Hospital (PSPH) falls with injury continue to be a priority as the hospital continues to report fall rates above the National Data Base for Nursing Quality Indicators (NDNQI) benchmark.

PURPOSE: The specific aim of this program evaluation was to assess the efficiency and effectiveness of the current fall prevention program in place on a medical/renal unit at PSPH.

INTERVENTION: A focused program evaluation was conducted over three months utilizing the Center for Disease Control and Prevention (CDC) program evaluation framework to guide a process evaluation of the fall prevention measures already in place at PSPH.

RESULTS: Data collected included both quantitative and qualitative measures including fall rates with injuries statistics as well as staff evaluation survey responses. Results demonstrated the medical/renal unit's continued inability to consistently meet quality benchmarks for fall prevention.

CONCLUSION: A successful program evaluation provided an opportunity for specific evidence-based recommendations to be proposed for a comprehensive fall prevention program focused on increasing rather than limiting patient mobility. Initial steps include staff education and switching to a reliable and valid patient mobility scale such as the JH-HLM for use in each room as well as the electronic medical record.