Customized Fall Prevention(FP) Holder

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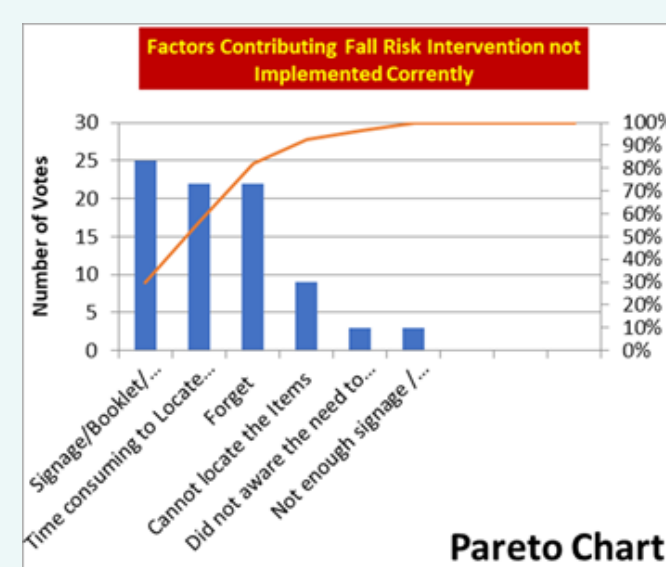Yumiao_Wang@cgh.com.sg

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Problem Statement

Approximately, 50% of patients with fall risk did not receive the appropriate interventions in the department, failing to implement fall precaution green wrist tag, headboard signage, patient family education, fall precaution booklets or high fall risk pictorial signage. Fall can result in serious consequence to patient, staff and organisation.

ROOT CAUSES

➤ Fall items located in different place
➤ Time consuming to gather all items
➤ Forget

Pareto Chart

Project Aim

To achieve more than 90% compliance on fall risk interventions for the fall risk identified patients in Ward49 within six months time by end of June 2022.

➤ Improve compliance
➤ Reduce time to locate all the items
➤ Reduce fall

Lessons Learnt

Whenever the problem arises, beyond the human factors, it is essential to look into other aspects, such as Materials, Process and Environments etc.

When the process is right, goal could be achieved and sustained. However, behind every success, it is the hard work and teamwork from all the care teams.

Potential Solutions

PDSA 1 - Jan 2022
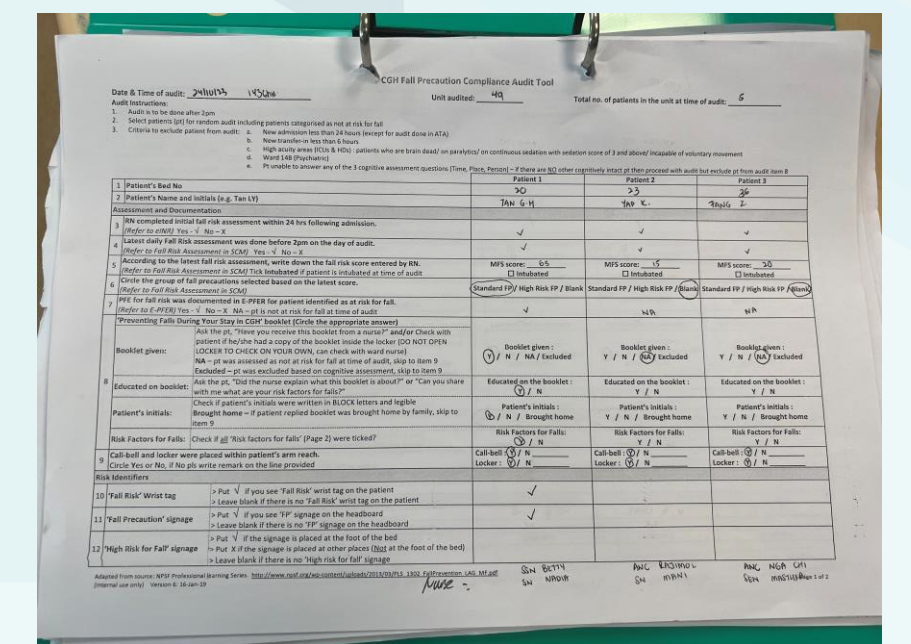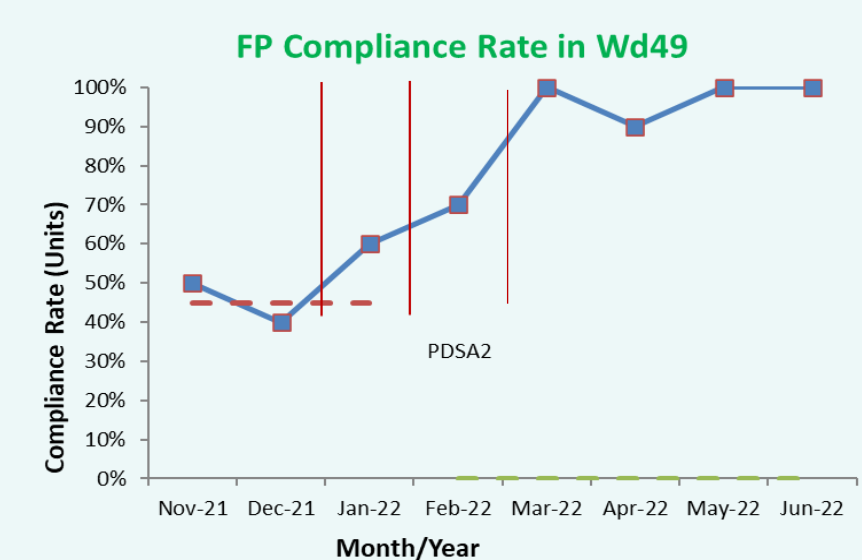A prototype of FP holder was created and implemented.

PDSA 2 - Feb 2022
A customized acrylic holder was made based on the prototype and placed on the admission trolley.

PDSA 3 - Mar 2022 to Present
Team adopted experiential learning by doing FP audits daily for new admissions by all the nurses at rotating basis.

Outcomes & Impacts

Fall precaution compliance rate has improved and reached 100% compliance rate in June 2022

Long term impact, cumulative fall rate days decreased from 1.83 to 0.83 and 0.35.

Period	Fall Rate Per 1000 PDS
April 2021 to March 2022	1.08
April 2022 to March 2023	0.83
April 2023 to July 2023	0.35

Saved 52 second per patient to locate all the fall risk items

Before Implementation	After Implementation
Average 62 Seconds	Average 10 Seconds

Our team is currently working with relevant stakeholders to implement the project to other departments.