



Abstract Title:	The Dynamic Process of Assessing Patients Fall Risk and Safety
Author and Co-authors:	Sara M. Montgomery, BSN, RN; Leslie Miller, ADN; Elizabeth Jelnick, BSN, RN; Susan Campis, MSN Grady Health System, Burn Center, Atlanta, GA
Objective:	Upon completion of the lecture, attendees should be better prepared to: <ul style="list-style-type: none">• Identify patient populations who are at risk for fall injury• Identify and implement adequate fall prevention measures specific for each patient• Assess and identify equipment functionality to maintain patient safety• Assess and recognize barriers that may not have been captured by Morse Fall Scale to prevent injury
Abstract:	<p>Introduction: Patient falls can have detrimental effects on patient outcomes. Patient falls can be responsible for extended length of stay, decreased independence, and result in injury. Falls place a financial strain on hospitals and healthcare system. According to The Joint Commission the average cost of a fall with injury is about \$14,000 (Joint Commission 2015). In 2017, Grady Health System had 69 falls with injury: 5 Major, 48 Minor, and 16 moderate injury (NDNQI 2017). It was found on our unit after several falls in May that functionality of equipment may have been compromised. This triggered an in depth review of all equipment.</p> <p>Methods: We initiated daily rounding to collect data regarding patient environment for compliance with current protocol on our step down unit of 15 beds. We audited if the room had the correct bed, the bed was plugged in, and the communication cable was present and plugged in. We created a process to notify facilities management of equipment requirements to ensure necessary safety items are present and functioning. We used this information to provide educational in-service in daily safety huddle and meetings. We conducted weekly chart audits and reviews to ensure compliance with Hospital based Fall Prevention Policy.</p> <p>Results: Collaborating with Facilities Management, providing educational staff in-services, implementing daily rounding, and conducting chart audits have ensured 100% functionality of communication between bed alarms and our call system. This resulted in increased staff awareness and responsiveness to potential falls, and decrease in fall events.</p> <p>Conclusions: Through increased education, daily surveying of patient environment,</p>

collaboration with facilities management and chart audits and reviews, the burn unit was able to remain fall free for remaining months of 2018.

Disclosure:

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