



Quality Improvement Project: Falls example



# Reducing patient falls example

### Problem:

Ward X has a high number of inpatient falls. This results in an increase in morbidity for patients, along with longer admission times. Staff nurse Judith wants to start a QI project to help reduce the number of falls and improve outcomes for patients on the ward.

### **Stakeholder mapping**

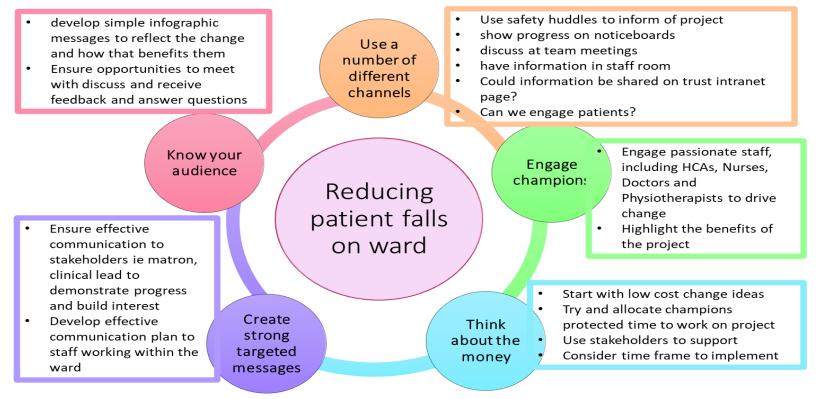
Before starting the QI project, the staff nurse must complete a stakeholder analysis. Here is an example of a stake holder analysis for Ward X. These staff members need to be informed of the project, as they can provide support and help drive improvements. There are many more stakeholders that could be included, from doctors to admin staff. It is important to consider all stakeholders prior to commencing your QI project.

Name	How much will the project impact them (Low, Medium, High)	How much influence will they have over the project (Low, Medium, High)	How will they contribute to the project?	How could they block the project?	How will you engage?
Senior Nurse	High	High	Part of the team		Explain the benefits of the project
Ward manager	Medium	High	Medium	Stop others helping with the project	Explain how this will help decrease their workload
Physio- therapist	High	Medium	Give guidance	NA	Show them the value by giving the falls data
HCA	Low	Low	Support the project		Explain the patient benefits

#### **Engagement and communicating**

Its important to engage with your staff and communicate your project effectively to help facilitate improvement and to also sustain change. Here is an example of how a QI project maybe implemented on Ward X.

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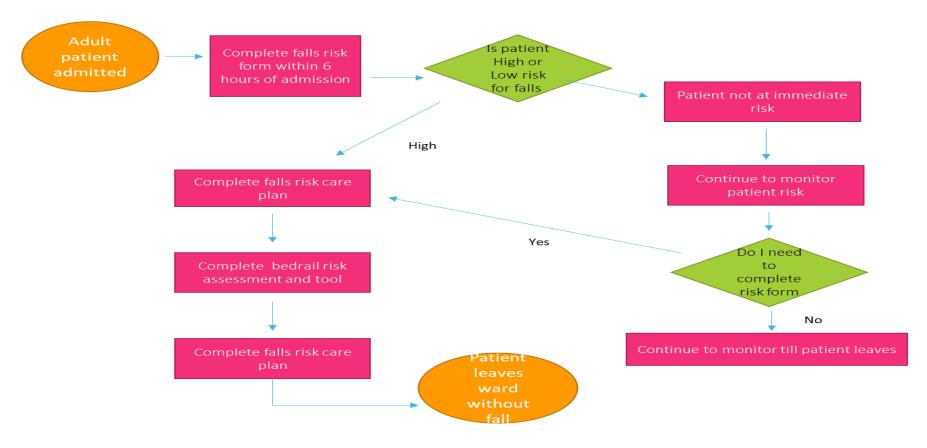


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#### **Process Mapping**

Staff nurse Judith created a QI project team, and together they processed mapped the current pathway, to help identify how they could reduce patient falls on Ward X.

### Process map example: Patient falls



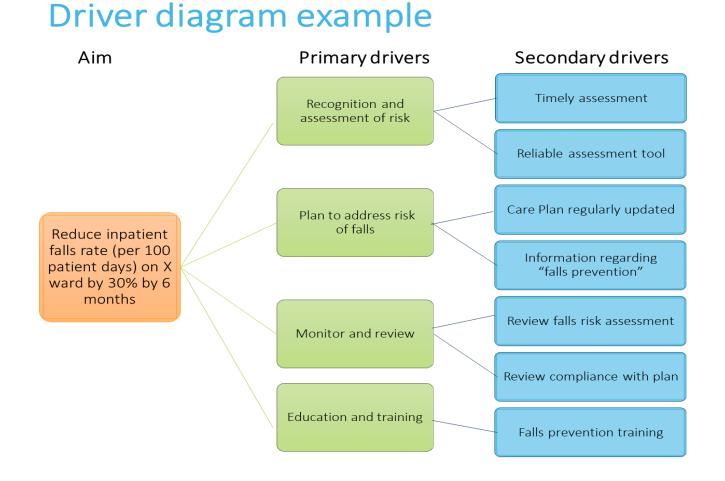
### Creating a SMART aim

It is important the aim for the QI project is SMART. The aim for ward x is to 'Reduce inpatient falls rate (per 100 patient days) on X ward by 30% by 6 months '.

Aim	Specific	Measurable	Attainable	Relevant	Time based
Reduce inpatient falls rate (per 100patient days) on X ward by 30% by 6 months	Reduce patient falls	Ву 30%	Yes	Yes (higher number of falls on the ward)	6 months

#### **Driver Diagram**

The team on Ward X have created the below driver diagram to help reduce the number of patient falls. A driver diagram can be considered a plan on a page of your QI project.



## Falls example of measures

# Aim:

Reduce patient falls by 50% in six months

### Outcome:

- Percentage of fall be 100 bed days
- Number of falls per week

### Process:

- Number of falls risk assessment forms
- Number of patients identified as severely frail

### Balancing:

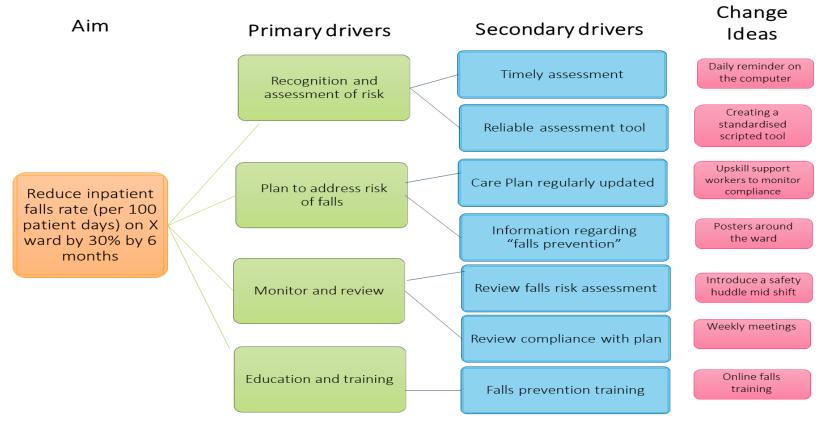
• Percentage of staff who are happy with the changes on a scale of 1 to 5

#### Measures

Measures are important to ensure we can assess if we are making an improvement or not. It is important to not have too many measures (no more than 6.) Here are Ward X's measures. Change ideas Staff nurse Judith and her team have created the following change ideas to test on Ward X, after mind mapping and creative thinking as a

# Link change ideas to your driver diagram: Falls

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team

### Edward De Bonos six thinking hats

For the key change ideas Ward X would like to test, the QI team completed the six thinking hats. Here is an example of how they considered poster implementation.



### **Red Hat: Feelings**

My instinct is that a poster will remind clinical staff about how to prevent patients from falling



### **Green Hat: Creativity**

A poster to remind clinical staff regarding falls prevention.

#### **Blue Hat: Process**

We will have to ensure that this follows hospital procedures. Consider, who will be in charge of managing the information on the poster? What information should be included?





Yellow Hat: Benefits

Creating a poster for falls prevention is a more cost effective way to spread the message across a wider White Hat: Facts Where will the clinical staff be able to view the poster.

How many posters will need to be printed?

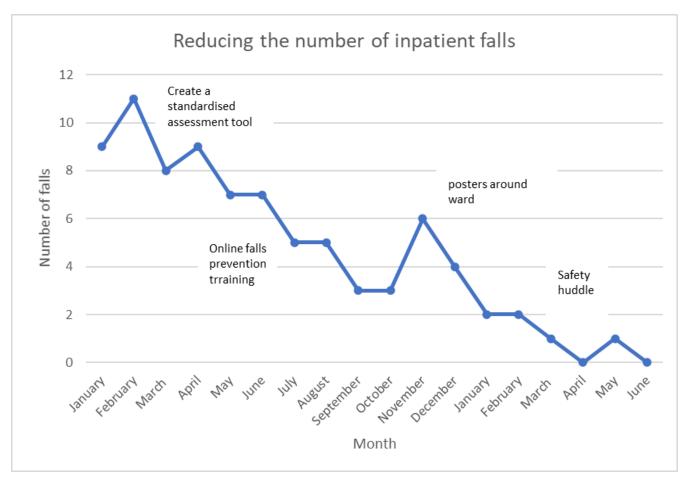




**Black Hat: Cautions** 

Too many posters already, this might get missed.

This run chart demonstrates the improvement on Ward X. The run chart is annotated to outline when change ideas were tested and implemented on Ward X. It is important to test one change idea first, so that you can identify what change idea resulted in an improvement. You can see that the number if falls decreased following the introduction of the assessment tool and online falls prevention. In November, the number of falls in creased, and therefore a new change idea was introduced. The final change idea tested was the introduction of a safety huddle which helped to sustain the improvement.



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