

Does Video Monitoring Decrease Falls in NSICU Transfers?

Thomas Price BSN, RN

Lehigh Valley Health Network, Thomas.Price@lvhn.org

Therese Manidis BSN, RN

Lehigh Valley Health Network, Therese_C.Manidis@lvhn.org

Alexa Kromko BSN, RN

Lehigh Valley Health Network, Alexa.Kromko@lvhn.org

Annmarie Marzen BSN, RN

Lehigh Valley Health Network, Annmarie.Marzen@lvhn.org

Stephanie Bragg BSN, RN

Lehigh Valley Health Network, Stephanie.Bragg@lvhn.org

Follow this and additional works at: <https://scholarlyworks.lvhn.org/patient-care-services-nursing>

Published In/Presented At

Price, T. Manidis, T. Kromko, A. Marzen, A. Bragg, S. (2018, August 2). *Does Video Monitoring Decrease Falls in NSICU Transfers?*

Poster presented at: LVHN Vizient/AACN Nurse Residency Program Graduation, Lehigh Valley Health Network, Allentown, PA.

This Poster is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact LibraryServices@lvhn.org.

Does Video Monitoring Decrease Falls in NSICU Transfers?

Thomas Price, BSN, RN; Therese Manidis, BSN, RN; Alexa Kromko, BSN, RN; AnnMarie Marzen, BSN, RN; Stephanie Bragg, BSN, RN

Lehigh Valley Health Network, Allentown, Pennsylvania

Background

- Patients are at risk for falls when transferred from NSICU due to:
 - Patient perception of increased independence
 - Higher nurse to patient ratio than ICU settings
- Video monitoring provides around-the-clock visualization of patients
 - Staff member called directly when patient is attempting to get up or at risk of falling
- Pre-implementation period July 2017-March 2018
 - 50 patient falls reviewed for control group data
 - 19 falls were NSICU transfer patients
 - 3 patients on video monitoring prior to falling, although one fall was considered intentional and one fall occurred due to technical difficulty with video camera
 - Video monitoring implemented for 4 patients post-fall

Evidence

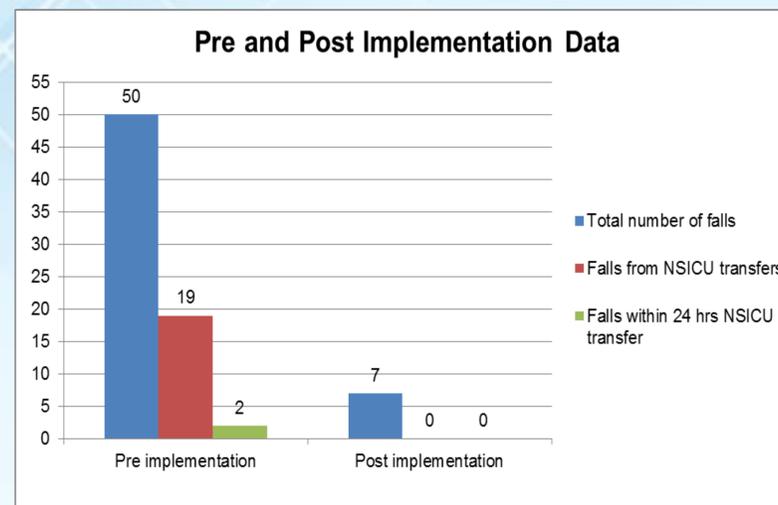
- Fall reduction plan is criteria of The Joint Commission (Goodlett et al, 2009).
- Falls add an estimated 6.3 days to a patient's typical hospital stay (Westle et al, 2017).
- In a three month study with ninety-eight patients on video monitoring, zero unassisted falls occurred (Westle et al, 2017).
- In a two year study with 2,500 patients on video monitoring, only two falls occurred (Brown & Sterne, 2015).
- In a twelve month study with 417 patients on video monitoring, sitter cost was reduced from \$960 to \$240 per four patients (Goodlett et al, 2009).

Purpose of Study

- On a medical-surgical unit, does the use of patient video monitoring for the first 24 hours upon transfer from NSICU and longer if deemed necessary reduce the risk of falls?
 - Population: NSICU transfers to 7A/Neuroscience Unit
 - Intervention: 24 hour video monitoring on admission and longer if deemed necessary, in addition to existing fall precautions
 - Comparison: pre-existing fall precaution procedure
 - Outcome: fall reduction in the NSICU transfer patient population

Implementation

- Implementation period April 8th-May 30th 2018
 - 55 NSICU patients transferred to 7ANS with 28 successfully put on video monitoring
 - 14 of the 28 required monitoring beyond 24 hours
 - Zero NSICU transfer falls on video monitoring during trial period



REFERENCES
1. Brown, Susan, and Priscilla Sterne. "Keeping Watch: Enhancing Fall Prevention through Targeted Video Surveillance." *American Nurse Today*, 8 Dec. 2015. www.americannurse.com/keeping-watch-enhancing-fall-prevention-targeted-video-surveillance/.
2. Goodlett, D., Robinson, C., Carson, P., & Landry, L. (2009). Focusing on video surveillance to reduce falls. *Nursing2009*, 39(2), 20-21. doi: 10.1097/01.NURSE.0000342333.00590.79
3. Westle, M. B., Barker, G. R., & Pallas, R. A. (2017). Reducing Inpatient Falls by Integrating New Virtual Sitter Technology. *NEJM Catalyst*. <https://catalyst.nejm.org/reducing-inpatient-falls-virtual-sitter/>

Barriers

- Limited video monitoring equipment
 - 12 cameras shared amongst 3 units
 - Wait listed- difficult to triage based on complexity of patients currently on camera
- Inability to receive consent for monitoring
- Confounding variables
 - Lack of awareness: gaps in the implementation process
 - Varying patient population
 - Other implemented fall preventions
 - Not appropriate for monitoring – need for 1:1 observation due to escalated behaviors

Conclusions

- Successful use of video monitoring to aid in preventing falls in NSICU transfers
 - For the first 24 hours
 - Beyond trial period when indicated

Next Steps

- Disseminate the findings
 - Develop an abstract and present at professional conferences
- Potential for publication of research findings within the American Association of Neuroscience Nurses (AANN)
- Identify diagnoses and conditions that may serve as potential precursors to falls
- Compare methods used in our study to methods of other organizations across the nation in order to develop a gold standard

© 2014 Lehigh Valley Health Network