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Fear Not...No Falls

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Published In/Presented At

Rabenold, J. (2020, April). Fear Not...No Falls. Poster presented at: NICHE 2020 Conference. New Orleans, LA.

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Fear Not…No Falls

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INTRODUCTION

- Falls are a major safety concern for hospitalized patients which impact:
  - Length of stay (LOS)
  - Cost
  - Quality of life
- Despite established fall prevention tactics, nurses noted sustained patient falls on two medical-surgical units.
- From September 2018–December 2018, the baseline fall rate average was 4.38 falls/1,000 patient days.
- Noted a gap in knowledge of geriatric syndromes for unlicensed assistive personnel (UAP)
- Opportunities were identified to improve understanding and increase collaboration for unlicensed clinical staff to:
  - Decrease falls
  - Promote optimal patient outcomes

LEARNING OBJECTIVES

At the end of this offering the learner will be able to:

- Describe methods used to educate unlicensed clinical staff in pragmatic tactics to affect fall rates in older adults.
- Name factors that support implementation and ongoing use of the NICHE Geriatric Patient Care Associate (GPCA) curriculum™ in the acute care setting.

EVIDENCE

- Opportunity for growth, educational enhancement and development are generally overlooked for unlicensed support staff (Callahan, B., 2004).
- Unlicensed support staff play an integral role in delivering a large percentage of nursing care. Therefore, it is essential to cultivate and foster their knowledge and skills (Small, A., Okungu, L.A., & Joseph, T., 2012).
- Attending exclusive educational programs for non-professional staff enhances self-esteem and promotes improved patient care and the achievement of positive outcomes for the geriatric population (Callahan, B., 2004).

BARRIERS/LIMITATIONS

- Cost
- Turnover
- Scheduling limitations

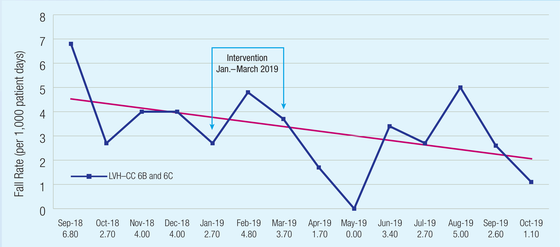
METHODS

- Identified barriers to learning in the UAP – included:
  - Time
  - Varying shifts
  - Lack of knowledge of electronic learning availability
  - Intimidated by electronic learning
- Conducted an educational initiative to reduce the units' fall rate
- Classroom education was provided to all UAP utilizing the NICHE GPCA curriculum™
- Tactics:
  - 17 GPCA course modules facilitated by organization's NICHE coordinator
  - 2 four-hour didactic workshop sessions offered X4 (Jan.–March 2019)
    - 5 UAP per workshop.
    - 20 UAP total completed education
  - Salary paid to attend education beyond scheduled shift
- Interactive teaching strategies used:
  - Case scenarios, role play, PowerPoint
- Pre and post-tests completed to assess learning

RESULTS

- All attendees demonstrated successful completion of the educational initiative and post-test
- Post intervention:
  - Fall rate average decreased to 2.36 falls/1,000 patient days. This represents a 46% decrease from baseline.*

* Post-intervention data reported April–October 2019



- Increased engagement and collaboration using evidenced-based practices to promote safe patient care
- Staff recognition:
  - Certificate at program completion

NEXT STEPS

- Commitment to ongoing education of UAP on highlighted medical-surgical units
- Expansion of UAP education on medical-surgical units organization-wide

KEY LEARNINGS OR TAKE-AWAYS

- Improving knowledge for unlicensed clinical staff regarding geriatric syndromes increases collaboration and pragmatic tactics to prevent falls.
- Information gained during this presentation can be incorporated within a wide variety of settings to positively impact patient fall rates.

REFERENCES

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