‘No Fall Zone’ Reduces Patient Falls in CSI Academy Project

Initiative saved an Indiana hospital more than $230,000.

Falls are one of the leading causes of disability and death in the United States. According to Centers for Disease Control and Prevention data, falls disproportionately affect older Americans: Each year, one in three Americans older than 65 falls, with nearly a third of those falls requiring medical treatment. Falls are also expensive, costing healthcare providers more than $19 billion annually.

A team of progressive care nurses from Franciscan St. Francis Health in Indianapolis set out to reduce patient falls and educate patients and families on prevention of falls as its capstone project in AACN Clinical Scene Investigator (CSI) Academy.

The team created a “No Fall Zone” campaign to accomplish its goals and presented impressive results at November’s CSI Academy Innovation Conference in Indianapolis. Piloted in the hospital’s Heart Center Progressive Care Unit (PCU), the initiative has proven successful in meeting patient safety and financial improvement goals with components that include:

- A video explaining the project and its significance
- A patient/family teaching contract on falls
- PCU staff education about protocols to prevent falls
- No Fall Zone signage throughout the PCU
- A post-implementation clinical practice audit

The teaching contract proved to be particularly effective, enabling staff to review upon admission these consequences of falls and pertinent safety information:

- The patient’s fall-risk score and how it is calculated
- Explanation of the medical equipment attached to the patient
- Descriptions of medications being administered for blood pressure, pain and sleep, and their effect on balance and increased risk of falling
- An expectation that high-fall-risk patients call for assistance before getting out of bed or a chair
- Awareness that bed and chair alarms would be used to assist with ambulation

The No Fall Zone initiative — whose stated goals were to decrease patient falls on the PCU by 50 percent and to increase the use of bed/chair alarms on high-fall-risk patients to 100 percent — enabled the unit to decrease patient falls by 70 percent from 2011 to 2013 and increase by 77 percent the use of bed and chair alarms on all high-fall-risk patients. The initiative saved the hospital more than $230,000 compared to the previous year.

View the results of this and other CSI Academy initiatives on the CSI Academy Innovation Database, a free, evolving online library of project outcomes and documentation. Access the database at www.aacn.org/csi.