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Let's reflect on the fall

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Let's reflect on the fall

Abstract
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"LET'S REFLECT ON THE FALL"

INVESTIGATORS

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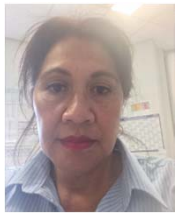

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INTRODUCTION

Falls prevention is a major challenge in hospitals especially with older people . Falls contribute to 40% of injuries in acute care (Oliver, 2004). Despite the use of multiple prevention strategies, falls prevention continues to be a major challenge in hospitals (Cameron et al, 2010). Evidence suggests that many health professionals fail to reflect on their own practice which can contribute to errors. There is paucity of research around utilising a reflective model for nurses an patient to prevent falls.

OUR STUDY

This is a mixed method study using an Action Research approach following a "Plan, Do, Study, Act" model

AIM

In this Project, we aim to minimise the falls and related injuries by involving the staff and patients in taking action through critical reflection on what has occurred, developing ideas about how things could be done differently, implement these ideas and evaluate them to see what works in reducing the falls.

This Research also aims to support **culture change around falls prevention practices** for which an **action oriented approach** through evidence is best suited as it engages people in looking at their own practices and enables them to create potential solution for the real problem – Falls

"LET'S REFLECT ON THE FALL"

PHASE-1

- Data collection
- Engagement sessions

PHASE-2

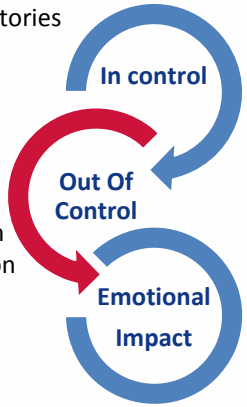
- Staff Reflections (written or verbal)
- Patient Stories

PHASE-3

- Data Collection
- Feedback session

PDSA WILL BE REPEATED AGAIN

THEMES



RESULTS

No. of Falls	No. of patient stories collected	Unable to Obtain stories	No. of Staff Reflections
29	12	17	13

STAFF QUOTES

"When any patient falls somehow it makes all the nursing staff feel as if we haven't provided adequate care or supervision"

"I should have provided supervision when she was in the toilet but I had to attend the other patient at the same time who was in need"

"I would have brought the patient into the corridor during the handover time if I knew the patient was a climber and very high risk for falls"

PATIENT QUOTES

"After the fall, I thought I was going to kick the bucket"

"Well, when they know that someone is weak as I am may be they should be, I don't know…a bit closer, come a bit quicker"

"I did not press the buzzer, I didn't want to bother the nurses"

"I feel silly the fact that I had fallen and got the girls to help me. I am used to being so independent at home and that's it. I thought I will be alright"

References:

Oliver D (2004). Prevention of falls in hospital inpatients: agendas for research and practice. *Age and Ageing vol.*33,iss. 4, pp. 328–330.

Cameron I, D, Murray G, R, Gillespie L, D, et al. 2010, Interventions for preventing falls in older people in nursing care facilities and hospitals. Vol 1, *The Cochrane Library*, Art. No: DC005465