

Innovative Falls Management Through Collaborative Practices

Shelley Daubert, RN BScN DCA
Director – Supportive Living, CC EZ

Objectives

- Problem statement
- Pilot initiative: **Innovative Falls Management Through Collaborative Practices**
- Current State
- Next steps: Evaluation Framework

Problem Statement

How can we better educate and train our frontline care teams to manage the clients who are aging in place in our Supporting Living settings?



Pilot Initiative: Innovative Falls Management Through Collaborative Practices

Long-term strategy: June 2016- June 2020

LPN Leadership and Clinical Growth Program to address multiple clinical intervention areas

Pilot Initiative: December 2014- June 2016

Three demonstration sites; three control sites

Issue identification

- Falls is one of the leading causes of hospitalization for our client demographic
- Program trends of unnecessary ED utilization post fall; attributed to LPN lack in assessment confidence

Collaborative Practice

Supportive Living (SL) has partnered with the AHS Simulation (SIM) program to design and deliver a fall scenario, on site, for our Contracted Service Provider LPN teams.

Fall Management Education

The SL Physiotherapist Practice Leader and CNE completed the following:

1. Developed Post Fall Clinical Monitoring and Post Fall Clinical Pathway tools
2. Developed theory based education to discuss a thorough client assessment post fall and use of the tools to support client assessment and communication post fall
3. Collaborated with the SIM lab team to create a fall scenario with three phases to make the client's transition in care realistic
4. Delivered the education to LPN teams at their home sites:
 - Part 1: Theory based education delivery;
 - Part 2: Live simulation to work through the post fall scenario while using the education delivered in phase 1, and;
 - Phase 3: Supportive debrief of the education, training, and practice.

Evaluation Framework: In Progress

- Pre-education : chart audit of site's fall management
- Post-education: chart audit of site's fall management
 - Criteria and tool developed for consistency in auditing
- # Falls reported by site monthly
- # Clients sent to the ED with reason code being a fall
- # Clients admitted to an acute care site post fall(s)
- \$ Cost of acute care utilization
- # Clients who experienced an injury resulting from a fall
- LPN simulation lab experience survey: self-reported via Likert scale
- Focus groups with LPN team 6 month and 12 months post education
- Client survey testing self-efficacy post fall: at 6 months and 12 months

Conclusion

- LPNs have scored 4.5/5 on effectiveness of post fall education initiative
- The first set of data will be available December 2015
- The feedback from SL clinical team members and frontline staff is that this is a move in the right direction
- This education ensures clinical confidence and competency with hands on practice versus formal education delivery via PowerPoint and handouts

References

Images

- Slide 3: <http://theprismgroup.ca/>