

Service Priorities and Programmes Electronic Presentations

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Essential Component in Patient Fall Prevention: Active family engagement

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Introduction

There is various reason related to patient fall. In our department, investigation would be performed for all fall incidents. Data collected for year 2016 indicated that around 40% patient falls were mainly related to poor awareness and poor caring technique of patient family.

What is more, an evaluation on family knowledge on fall prevention found that patient families were not familiar with fall prevention strategies even they have received related information.

Findings also reflected that patient families did not aware the importance of their participation on preventing patient falls since they did not have opportunity for engagement.

In order to aware patient families on their roles on falls prevention, the current fall prevention strategies were reviewed. A quality improvement program 'Fall Prevention Education to Family' by multi-disciplinary approach was carried out.

Objectives

- ? To facilitate active family engagement on patient falls prevention
- ? To aware family that their important role on preventing patient fall
- ? To reduce patient fall which is related to family

Methodology

A multi-disciplinary quality improvement work group including nurses, physiotherapists and occupational therapists was formed to explore the current state. An educational program was co-created:

- ? Every patient would be assessed on admission and reviewed regularly for risk of fall. Family of patient who was at risk of fall would be recruited for the program promptly.
- ? Individual bed side teaching on caring technique would be provided by different professionals.
- ? A video which focused on family education to prevent patient fall was manufactured.
- ? Patient families were invited in group to attend an educational talk which

including video watching and fall education provided by different professionals. The talk was conducted monthly.

To enhance communication on identification of family who was completed the training, a signage was attached on the end of patient's bed. The signage shows which family member was skillful enough to take care of patient for ambulatory and activity of daily living.

Result

An evaluation by using questionnaire (pre and post) was conducted. Total 29 cases were recruited after 9 months implementation from April to December 2017.

- ? Family agreed that their participation was essential to reduce patient fall was increased from 14 % to 100%.
- ? Family agreed that their knowledge to prevent patient fall was increased from 7 % to 73%.
- ? Family agreed that their understanding on patient mobility was increased from 45 % to 100%.
- ? Family identified that patient was at risk of fall was increased from 57 % to 86%.
- ? No fall incident occurred on the recruited cases.

Conclusion:

The program created awareness and skills required for patient family on fall prevention. It was an opportunity for families to learn together and peer support was facilitated. It encouraged active engagement and increased family's awareness on their role to prevent patient fall.

In conclusion, family engagement is essential on preventing patient fall. The program facilitated reflection for family on their responsibility on falls prevention. With increased responsibility, patient family was able to take a more active role in reducing patient fall.