The Effect of Multimedia Falls Educational Program for Hospital Falls Prevention
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Introduction
Patient education has been frequently cited as one component of multifactorial falls prevention interventions, and a subgroup analysis has shown that it is the most effective component. With the advance in digital video disc (DVD)-based technology and its lower costs have made this approach an important means of education strategy; especially in elderly who prefer audiovisual means of learning and commonly have lower functional health literacy. There is little research in identifying the effect of using multimedia for patient educations as a single means of hospital falls prevention.

Objectives
To study the effect of multimedia falls education program on the improvement of patients in the falls risk self-appraisal, knowledge, attitude and practice. To evaluate the motivation of change of behavior after the program.

Methodology
A DVD-falls educations video (about 13 minutes) with a narrative approach was made based on the Health Belief Model framework which emphasized on falls risk self-appraisal; cost and consequence of falls; motivation to avoid falls and empowering falls prevention strategies. Patients admitted to Tuen Mun Hospital Rehabilitation Wards and Acute Medical, Surgical and Orthopedics wards were recruited for 3 days if they were cognitively sound, medically stable and consented to the study. A Pre- and Post-video questionnaire measuring the change in falls risk self-appraisals, knowledge, attitude and practice was given to each patient separated by at least 1 day to ensure information retention. A post video motivation of change assessment was assessed. The video were displayed by notebooks by a group of volunteers, year 3 nursing students, as one-to-one beside teaching basis or group
result
A high proportion of patients were approached (n = 117) and finally recruited (n = 99) for analysis, mean age 63 ± 16, and 59 (60%) were male. Patients had significant improvement in falls risks self-appraisal, falls knowledge and falls consequences (p < 0.05). Also, there is significant change in practices for falls prevention (p < 0.05) after video. 44% still felt that asking healthcare staffs for help was embarrassing. 78% agreed (agree to strongly agree) that they were motivated to prevent themselves from falling. 88% believed these strategies could reduce their risk of falling and 88% intended to use these strategies during their hospital stay. Conclusion: Multimedia Falls Prevention Educations can effectively improve the patients in hospital falls risk self-appraisal, falls knowledge, and change of their practices. A high motivation of changes of the patients was found.