"PTP" or Prime Time Prevention
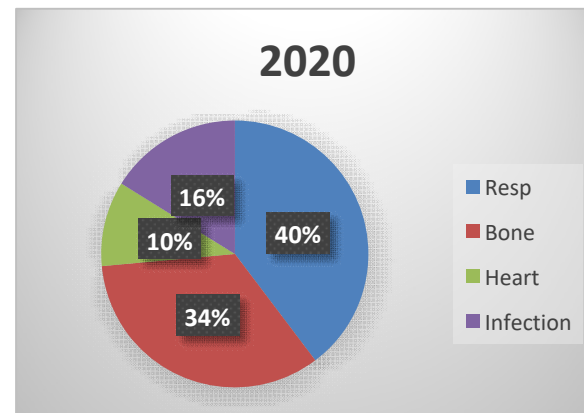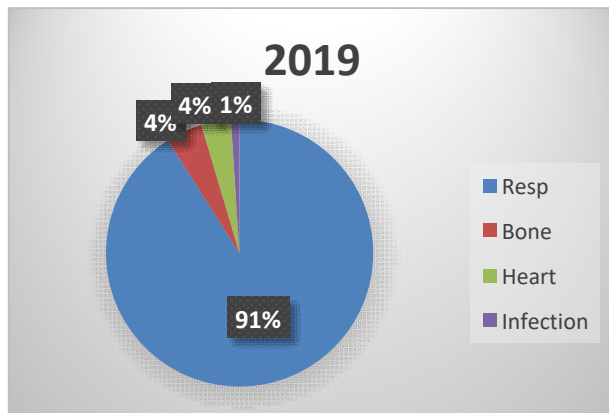# A Falls Reduction Initiative

FCH saw a sudden increase in Inpatient falls after increasing the Swing Bed population. While the falls subcommittee was meeting after every fall and trying to identify trends, patterns and missed opportunities we were unable to grasp what had changed in our patient population.

Patient comparison by diagnosis pre-swing 2019 and post-swing bed in 2020

2019

4% 4% 1%

91%

- Resp
- Bone
- Heart
- Infection

2020

16%
10%
40%
34%

- Resp
- Bone
- Heart
- Infection

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- A comprehensive year end deep dive was performed. This included a map of our nursing unit to trend geographical location, age, time and gender of the patients were all trended.

- What did we find? The rooms that we thought were the best for high fall risk patients had the most falls. We had the most falls between 4-8 pm and they were our 60+ year old population.

- What came next was multiple brainstorming efforts to produce a multidisciplinary initiative that provided support to our front-line staff, increased morale and focused to increase patient satisfaction. We focused on the time frame first. We felt this was a "prime time" for falls. Next, we decided our main area of concentration would be potty, position and property. Lastly, we knew in order to provide the support staff needed and to increase staff morale this would take the village. Respiratory therapy, Physical and Occupational therapy, Quality and nurse leadership were all engaged to provide support and structure to staff.

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- "PTP" was born. Flyers were created and scripting for staff was made. "PTP" was rolled out and primary players met on the Med/Surg unit at 4pm. "PTP" began February 22, 2021. Everyone was assigned their patient to round on and then met back at the nurse's station.

- What did they learn? They were disorganized. It took longer than they had anticipated to decide who would have what patient and then to ensure all the patients had been seen. They performed debriefs after every "PTP" for the first 2 weeks and began to get a flow. Rooms were assigned on a white board with each staff member present. Scripting was practiced and staff felt more comfortable. Initially staff were not very engaged and not participating in debriefs. By the end of the 2nd week, they were making suggestions and providing positive feedback. Staff appreciated the "extra help", stated they noticed call bells did not seem to ring as much after "PTP" allowing them to catch up on charting. Consistency and positive reinforcement from leaders seemed to be key.

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- While this process was still fresh with staff participation and the overall buy in had exceeded expectations, they felt it was imperative to share as much data and results with staff in real-time to ensure sustainability. This led to the creation of a data board in the breakroom. Staff will typically have the white board ready when everyone arrives on the unit at 4pm with assignments already made. They saw a 66% decrease in falls compared to the same time frame in 2019. Prime Time Prevention boosted staff morale and has continued to be successful in reducing our number of Inpatient falls.

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Data Board