Healthcare Organization Commitment

Contact Details

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Commitment Details

Commitment Name
APSS #14: Falls & Fall Prevention

What Patient Safety Challenge does your Commitment address?
Challenge 14 - Falls and Fall Prevention

Commitment Start Date
01/01/2015

How Many Hospitals Will This Commitment Represent
Commitment Summary
Although a more significant problem in hospitalized adults, pediatric patients are also at risk for injury from falls. By far the most common are “developmental falls,” in which the child is developing ambulation and self-protection skills appropriate for age and is simultaneously hospitalized or in other health care settings. Less common but generally more potentially serious are falls in ill or injured older children and young adults, similar in etiology to those in older adults. Often this group is characterized by chronic diseases of adolescence with long hospital lengths of stay, perhaps best characterized by oncologic conditions. It is this group that has long been our targeted focus for fall risk detection and injury prevention.

Commitment Description & Detail
Reducing harm from moderate and severe falls is a Children's Hospitals' Solutions for Patient Safety (CHSPS) HEN network Hospital-Acquired Condition (HAC) being measured and improved. The goal is to have zero moderate or severe harm from preventable falls at CHOC. Notably, with our risk identification and fall mitigation program in place, there have been zero such falls at CHOC for over 24 months. In alignment with the Patient Safety Movement Foundation’s Actionable Patient Safety Solutions (APSS) checklist, CHOC Children’s Hospital has reached our goal and completed our implementation plan around this APSS challenge.

Action Plan
CHOC will continue to implement both PSMF and CHSPS processes around Serious Fall Prevention and will report on an annual basis. Patient falls are a major cause of in-patient injury and even death. Healthcare administration must develop, revise and support the plan through the following actionable steps: (“Preventing falls in hospitals: a toolkit for improving quality of care.”, 2013; Boushon et al., 2008) • Assess the existing fall prevention and protection from injury policies, procedures, protocols, and educational programs in relation to current evidence and emerging research. • Identify existing needs or gaps in the fall prevention and protection from injury policies, procedures, protocols, and knowledge application for employees. • Identify Opportunities for Improvement and Set Aims (Goodwin et al., 2014; Mion et al., 2012; Mccurley and Pittman, 2014; Waters et al., 2015). • Collect fall and injury data to assist in advancing precision performance of fall prevention and protection from injury program. • Debrief all falls, including non-injury falls. Analyze for trends or patterns that assist in advancing performance of the fall prevention and protection from injury strategy. • Consider bundling evidence-based recommendations to achieve greater outcomes. • Consider provider training on how to partner with patients and their loved ones on safety strategies to prevent falls and protect from injuries. • Consider technological advancements to advance performance and reduce injuries. • Develop a multidisciplinary team to create, implement, and sustain fall prevention and protection from injury initiatives. This team should include, but is not limited to, Executive sponsor, Environmental Manager, Risk Manager, Physical Therapist, Occupational Therapist, Medical
Doctor, Unit Manager, frontline nursing staff, or Certified Nursing Assistant. Efforts should be made to get as many representatives from all shifts. − Develop fall champions throughout all departments who further drive organizational knowledge and action in the healthcare setting. − Provide clear and concise communication regarding the champion’s role and responsibilities. − Develop feedback mechanisms to learn what is working and what can be improved upon in the fall prevention and protection from injury plan from the champion’s perspective.

**Commitment Timeline**

The CHOC Children’s commitment to this APSS will be ongoing and reported annually to the PSMF.

**Impact Details**

**Lives Saved**

Lives Spared Total =
0

*For reporting purposes, the number has been rounded up to the nearest whole number.*

Lives Spared Total
0