Healthcare Organization Commitment

Contact Details

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Commitment Details

Commitment Name
Fall Prevention Program

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

How Many Hospitals Will This Commitment Represent
37

Commitment Summary
Fall Reduction and Prevention Program

Commitment Description & Detail
Dignity Health has committed to a standardized Fall Reduction and Prevention Program. The Dignity Health Fall Team is interdisciplinary including system and facility leaders in nursing, therapy, patient safety, quality, IT, informatics, supply chain, outpatient, patient access, safe patient handling, educators, and fall team leaders from each facility and other partners based on identified issues. The team has revised the System-wide policy and electronic education plan that was developed for both clinical and non-clinical staff. Fall reduction and prevention is everyone’s responsibility. The System Fall team identified the minimum membership for the local fall team to include: Safe Patient Handling (SPHM) and Fall Team (Co-chairs), Quality Director, Patient Safety Officer, Educators, Physical Therapy, Nursing Leadership with Representation From Each Unit, Bedside staff representation, Logistics/Transportation, CMO, Pharmacist, and CNEO (Executive Sponsor). Ad Hoc: Materials Management, Engineering, and other disciplines as needed. Each organization is provided access to their data with both a monthly data dashboard and a process dashboard to track trends and process compliance. Fall reduction interventions include the use of a fall bundle (yellow slippers, blanket, wristband, signage, fall mat). In addition, each facility has patient beds with fall prevention features, bed/chair alarms and safety attendant expectations. Additionally, facilities have in place or are piloting: commode alarms, camera monitoring, nurse call systems,

Action Plan
Monthly Dignity Health Fall Team WebEx Meetings Monthly Fall Shared Learnings Monthly Facility Fall Team Meetings Trending data and comparison data provided by hospital to include but not limited to: location, date/time, shift, patient status, patient activity, interventions Fall debrief reviews completed for each fall Pilot programs including but not limited to: cohorting beds with fall prevention features, #days since last fall, camera monitoring, computer alert aids, bed/chair alarms synced to nurse call or phone system Top 5 facilities with the greatest opportunities to partner with like-facilities with success fall prevention programs

Commitment Timeline
3 month - Data and Process Dashboards populated and discussed at both the Dignity Health Fall Team and Facility Fall Team monthly meetings. Implementation of the #days since last fall program; Ongoing fall policy education and unit based observations to ensure practice reflects policy; review of fall data and identify additional strategies and interventions 6 month - Review of cohorting of bed pilot data to determine efficacy and to determine strategies for implementation in other facilities; review of fall data and identify additional strategies and interventions; Fall Prevention Program review to determine effectiveness of current plan or rapid cycle improvement strategies 9 months - Dignity Health Fall Team performance improvement activities and program evaluation to determine next steps necessary to “getting to zero” 12 months - Fall Program Evaluation
Impact Details

Lives Saved

Lives Spared Total = 0.6600000000000002

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

Lives Spared Total
1