FALLS COMMITTEE MEETING Minutes

Date: February 17, 2015

Attendance:

Sally Adams; Lynn Belcher; Nalleli Burciaga; Ann Carter; Nancy Hewson; Kerrie Iannuccilli; Tracey Krebs; Joe Love; Roberta Martinelli; Steve McMillan; Joyce Pierron; Judy Ricci; Corine Rice; Karla Ruggiero; Mary Toma; Trang Truong; Janet Wright; Carla Zeluff; Judith Hupe; Kim Pearl; Helena Conway (UNLV)

Topic	Discussion	Action	Follow-up
Review of Minutes	 Minutes from January 17, 2015 meeting were presented for review and approval. 	Minutes were approved as presented.	Approved.
• Fall Report	 Carla reported on the January Fall Report: Thirteen (13) falls occurred on night shift, twelve (12) occurred on day shift. One fall resulted in a nonsurgical fracture. Twenty-five (25) patient falls were reported in January. January fall rate was 2.01%. Below the Corporate benchmark of 2.39. Carla will laminate the fall scores and interventions for posting on each unit. Seventeen (17) patients who fell were over 60 years of age. 	All will continue to make efforts to reduce the fall number in their area of responsibility.	Continue to monitor fall rate.
 Falls Prevention Campaign Update 	Judy will provide a patient fall prevention presentation every Tuesday at 11:00am.	All new employees are expected to attend.	Approved.
Education Plan	 March 4th – 8th National Patient Safety Day, Steve stated the Patient Safety event was postponed. Lynn requested something to be done during that time to keep a focus on fall prevention. Perhaps the committee could be revived. 		Approved.

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MISCELLANEOUS:			
CNO Meetings Fall Review	Lynn will continue to hold monthly meetings with personnel involved in a fall event.	Next meeting scheduled for March 4 th at 8:00am in room 1B.	Review at March meeting.
	 Lynn provided feedback from her February meeting with those who had a patient fall on their shift. Everyone present was able to identify what steps were needed to be taken to prevent falls. Compliance to "doing it" is the challenge. Staffing was mentioned a lot at her meeting. 	Staff RN and CNA who were assigned to the patient that fell on their shift will be invited to attend.	
		It was decided that if all available fall precautions were not in place at the time of a fall, the employees involved would receive a verbal level I, counseling.	
 Availability of Prevention Aids on Units. 	Aids include break away belts, bed alarms, extra-large socks, gowns, etc. Joe said individual packets of socks are available.	All will check to see they have equipment needed and know where it is.	Review at March meeting.
	 It was suggested that all the safety items be kept together. 		
	Discussion of Battery change on the Parasol Unit.	 Joe said representative will return to assist all who need help regarding battery change. 	Approved.
• Fall Reduction	 Lynn requested that a focus be on the reduction of falls in patients 60 – 90 since most falls happen in that patient population. 	All focus on reduction of falls in 60 – 90 population.	Review at March meeting.
Falling Star Signs	Judy said that Mary ordered 300 signs.	Signs have not arrived.	Review at March meeting
February Fall Number	There were to date, 18 falls in 17 days in February. Lynn stated there seems to be a level of negligence present.	Employees involved in a patient fall will receive a verbal Level I unless ALL precautions were in place to prevent the fall. Progressive disciplinary action needs to be taken when a fall occurs and ALL	Review at March meeting.

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		precautions were not in place to prevent the fall. There is no gray area. Compliance to the policy MUST be adhered to. Make sure employees have had the fall education and have the equipment needed at that time. All need to be held accountable. This is fair.	
Fall Prevention Materials	It would be good to have all fall prevention items in one place.	Judy will speak to Joe about this.	Review at March meeting.
Reminder Belts	Joe demonstrated the belts now used and the bels from Royal.	Attendees voted to use Royal. If they prove to be not as good as the present belts, the hospital will resume using the present belts.	Review at March meeting.
Policy and Procedure Fall Prevention	Judy requested all to review the two Policies: one from Corporate and the present one of Summerlin. The intervention grid can be added to the Corporate Policy.	The two Policies will be discussed at the next meeting	Review at March meeting.
Fall Reduction (Suggestions)	 Decrease use of Ambien. Endorse at hand-off risk of fall if present. When rounding, look to see if precautions are present as appropriate. If not, intervene. Discuss high risk patients. Realize all post-op patients are high risk. They take medications for pain. If nurse ratio is high, census is high, and/or acuity is high, focus more on fall prevention and place precautions on patient. 	Implement as appropriate.	• Approved.

Topic	Discussion	Action	Follow-up
Attachments	 Fall Debriefing data 4th Quarter 2014 and YTD 2015. 		
	Get Up & Go		
	Modified Morse Fall Risk Assessment		
	Humpty Dumpty Fall Risk Assessment		
	Fall Policy and Procedure: Corporate and Summerlin.		
Next meeting	 The next meeting will be March 17, 2015 at 2:00pm Conference Room 1B. 		Next meeting March 17, 2015.