What is STRAS?

• A 20 bed Aged Care Transition Unit located at Belmont District Hospital (BDH)
• Service began in 2003 at Royal Newcastle Hospital
• Relocated to BDH in October 2006

GOAL: To provide a seamless transition from the hospital environment into RAC

ADMISSIONS: Are drawn from the Greater Newcastle Sector

<table>
<thead>
<tr>
<th>John Hunter Campus</th>
<th>Belmont District Hospital</th>
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<tbody>
<tr>
<td>Rankin Park Centre</td>
<td>Calvary Mater Hospital</td>
</tr>
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</table>
‘Residential’ and ‘Acute’

What makes STRAS unique?

• Inpatient Residential Aged Care Unit
• Person Centred Care Model
• Managed by GNC – Community Services
Admission Criteria

- Current delegated Aged Care Clinical Record (ACCR) – from ACAT
- Planned for admission to an Aged Care Facility
- Medically stable
- Family meeting has occurred with Social Work - processes explained
- HNELHD Policy Transfer to Residential Aged Care provided to family and explained
- Income and Assets Assessments given to family for completion
- Choice of six suitable facilities from family
Falls: Our biggest challenge

• This is a snapshot of our falls journey in STRAS to implement strategies to prevent patient falls and fall injuries

• Our journey is a team approach with many big and little ideas all contributing to falls risk reduction
There is no magic answer to stop falls!
History of Assessment

- Prior to 2011 STRAS had developed a unit specific falls screening tool.
- User friendly.
- Not an official HNE LHD approved form.
- Not a standard form which could be compared with other units.
Process of Change:

A new tool had to be chosen!!!

Which one???
Which Tool and Which Policy??

- Residential or Acute?

- July 2012: NUM and GNC management decided to use the HNE Health Acute/ Subacute Care Falls Prevention Policy Compliance Procedure (PCP)
- HNE Ontario Modified STRATIFY-SS/ Falls Injury Prevention Screening Tool
Support

- Face to Face education
- Resource folder
- Aiming to trial for 3 months prior to auditing

October 2012 😊
Feedback

- Nursing staff report that scores are inaccurate.
- Nursing staff report assessment questions are not as detailed as previous screening tool.
October 2012, Further discussion with GNC management other departments and senior nurses.

• U Turn performed

• Residential Aged Care Falls Prevention PCP using …

Peninsular FRAT
Falls Risk Assessment Tool
Extensive Support

• In-services provided by CNC Aged Care and STRAS CCC (13 in total)
• Resource folder
Assessment of progress

- 2013: Audits at 8 & 9 months
- Staff Positive about the FRAT
- 2013 October Safe Footwear Flow Chart designed
STRAS: Safe Footwear Assessment

**STRAS Safe Footwear Process**

On Admission

- RN completes Fall Risk Assessment and AIN completes Safe Footwear Checklist with RN supervision

Daily Review of Footwear by AIN/EEN/RN Documented on Care Plan

- EEN to review footwear and review Safe Footwear Checklist as part of Falls Risk Assessment Tool during Functional Assessment

- NO Footwear unsafe

- EDUCATE resident and family on the importance of Safe Footwear.
  - Give Safe Footwear Leaflet to resident/family

- YES Footwear safe in accordance with ‘Safe Footwear Checklist’

- REMOVE Footwear. Place in a labelled bag for family to collect.

- EDUCATE resident and family Re: Use of ‘Buzzer’ asking for Nurse Assistance/Supervision for Mobility, Falls Risk Minimisation, Strengthening exercises

- Contact Family to bring in replacement Safe Footwear

- Document in Resident’s Notes

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**On Admission**

- RN completes Fall Risk Assessment and AIN completes Safe Footwear Checklist with RN supervision

---

**Daily Review of Footwear**

- Review by AIN/EEN/RN Documented on Care Plan

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**EEN to Review Footwear**

- Review Safe Footwear Checklist as part of Falls Risk Assessment Tool during Functional Assessment

---

**NO Footwear Unsafe**

- Contact Family to bring in replacement Safe Footwear

---

**YES Footwear Safe**

- Education of resident Re: Use of ‘Buzzer’ asking for Nurse Assistance/Supervision for Mobility, Falls Risk Minimisation, Strengthening exercises

---

**Document in Resident’s Notes**

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**General Education**

- Educate resident and family on the importance of Safe Footwear.
  - Give Safe Footwear Leaflet to resident/family

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**Summary**

- Educate resident and family on the importance of Safe Footwear.
  - Give Safe Footwear Leaflet to resident/family
Results and more change!!!

2014 March Audit

• NSW Health: all to use Ontario (Sydney Stratified Scoring) and FRAMP (Falls Risk Assessment Management Plan) – the CEC tools

• So…..in April…

……..more changes!!!!
Change to FRAMP

• More In – Services!!!!!!
• Case Study
• HETI modules of Falls Prevention and Post Falls Prevention

• Updated Resource Folder
Audits

• June 2014 (First audit using the CEC tools)
• 6 months into new system…
• September Audit: Results show a lack of resources for residents/visitors
## Audit Results 2014

<table>
<thead>
<tr>
<th>Comment</th>
<th>Observational</th>
<th>Ward Level</th>
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</thead>
<tbody>
<tr>
<td>First audit post FRAMP</td>
<td>89.9%</td>
<td>79%</td>
</tr>
<tr>
<td>Different Auditor</td>
<td>72.6%</td>
<td>54.6%</td>
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**June 2014**

**Sept 2014**
Partnering with Consumers Initiative

So……

….Since October 2014, information is provided:

• At the front Desk
• On the walls (outside each room)
• Patient Care Boards
• In Bedside folders
Partnering With Consumers….At Reception….  

Falls Prevention Information Folder
Outside the room…
For the Patient Care Boards…..(1)

Dear Visitors, Please Read and discuss with STAFF

Falls Prevention Information on the wall outside the room

Thank You,

STRAS Nursing Staff

(Leaflets also available at the Front Desk)

24/10/2014
For the Patient Care Boards.....(2)
Evaluation

• Formal evaluation of the Partnering with Consumers project is ongoing.

• Audit results positive.
CEC Audit Results (Post FRAMP)

- Audit results:

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<td>79%</td>
</tr>
<tr>
<td>Sept 2014</td>
<td></td>
<td>72.6%</td>
<td>54.6%</td>
</tr>
<tr>
<td>Dec 2014</td>
<td>Falls information now available</td>
<td>97.1%</td>
<td>91.9%</td>
</tr>
<tr>
<td>Mar 2015</td>
<td></td>
<td>97.1%</td>
<td>89.7%</td>
</tr>
</tbody>
</table>
What do we do well?

- Appropriate location in the unit
- Assessment
- Low beds against the wall
- Alarm mats
- Nurse call bell in reach
- Hourly rounding
- No restraint policy
The Future

• Improve documentation of family involvement

• Staff to ensure FRAMP completed for all near miss/ falls

• Clutter free environment
The Future

• The NUM is negotiating with the Physiotherapy Department to commence an Exercise Program for patients who are able to participate