WE WILL CATCH YOU! A MENTAL HEALTH FALLS PREVENTION PROGRAM

WSLHD QUALITY AWARDS 2016 WINNERS FOR CATEGORY EDUCATION & TRAINING
Alexandra Sepulveda NUM and Chair of WSLHD Mental Health Falls Prevention Committee

Jennifer Hughes CNE

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http://www.youtube.com/watch?v=2wNeTf68klc&sns=em

- Was formed to provide a forum to discuss falls trends and identify preventative actions
- Falls champions were identified to be part of the committee and be responsible for the dissemination of falls prevention resources
- Increase awareness of falls prevention to improve patient outcomes in hospital and at home
- Evidenced based, resourced, supported education for all stakeholders
- Compliance with standard 10 requirements

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- Calendar and educational workshops were created to provide the structure for the delivery of the material, mentoring and preceptorship was offered as part of the development of the program to ensure the efficiency and sustainability of the program
- Post implementation of falls program there has been an increased awareness and preventative actions of 100%, reduction of falls 5%, increased confidence to deliver a training session by 100% and multidisciplinary involvement of 80%.
- > The development of inclusive programs providing: Tai-chi, Balance and Strength Exercises, Walking groups, Chair exercises, activities such as basketball, soccer, Zumba, New Moves Program and Physical Health Rehabilitation Exercise Program for all stakeholders to enjoy that results in the reduction of falls risks.

Patient and Carer



Strategies and Interventions:

- Falls Board in all patient areas
- Patient and carers education sessions facilitated by unit champion
- Scanning Awareness
- Heel / toe walking
- CEC Pamphlets made available to patient and carer
- Falls prevention strategies and interventions noted on Careplan an discussed with patient and carer
- Falls prevention information included on transfer of care/discharge

Collaboration and Education for all Stakeholders

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BEST

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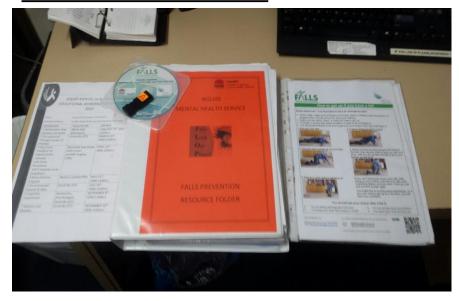


- Tai-chi
- Balance and Strength Exercises
- Walking group
- Chair exercises
- Various sports activities such as basketball, soccer, Zumba
- New Moves Program
- Physical Health Rehabilitation Exercise Program



Resource folder,

USB and website



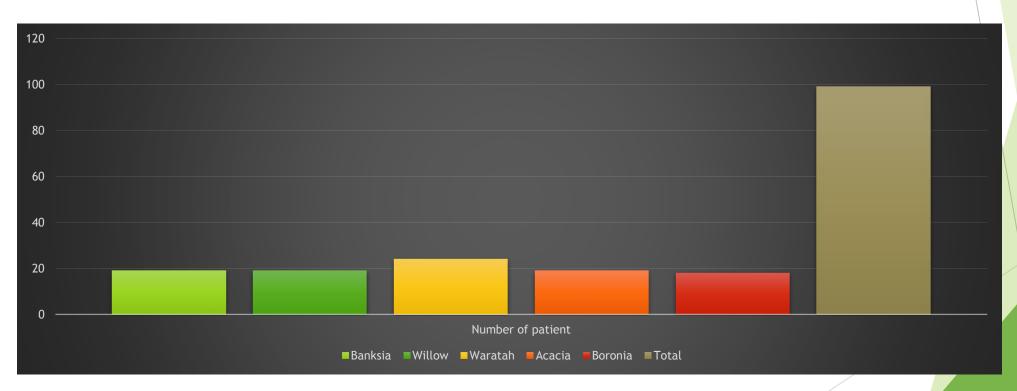
- CEC falls prevention patient
- education fact sheets
- Policy and procedures
- Audits
- Assessment tools
- Sac2/repeated falls form
- Education and workshop calendars
- DVD on standard10 preventing falls and harm from falls
- 100% compliance with falls prevention and management HETI modules

Barriers

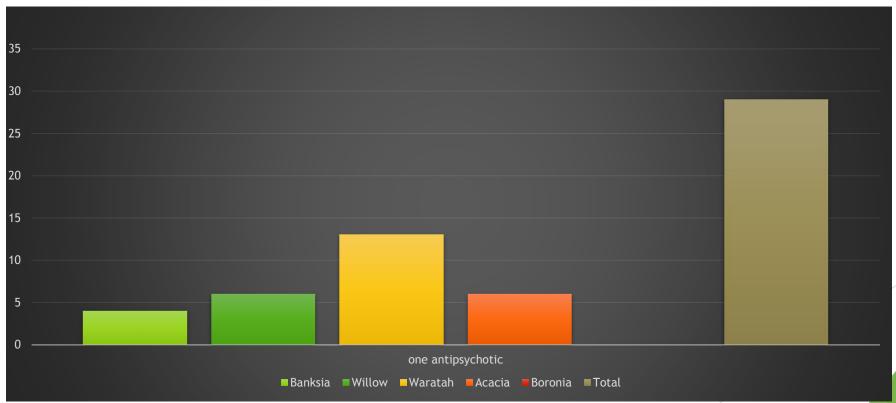
- Stakeholders engagement
- Culture Change
- Uncertainty with our facility redevelopment (Urban Growth)
- ▶ Point prevalence indicated that 100% of our patients were on psychotropic medications and polypharmacy.

► Under the guidance of Cumberland Hospital's Rehabilitation Director, a polypharmacy audit expedited through out Rehabilitation in August 2016

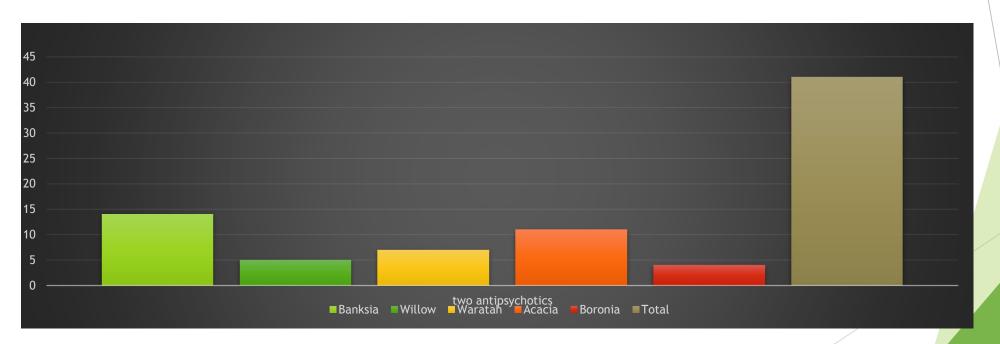
Cumberland Hospital Recovery Services Antipsychotic Audit Data August 2016



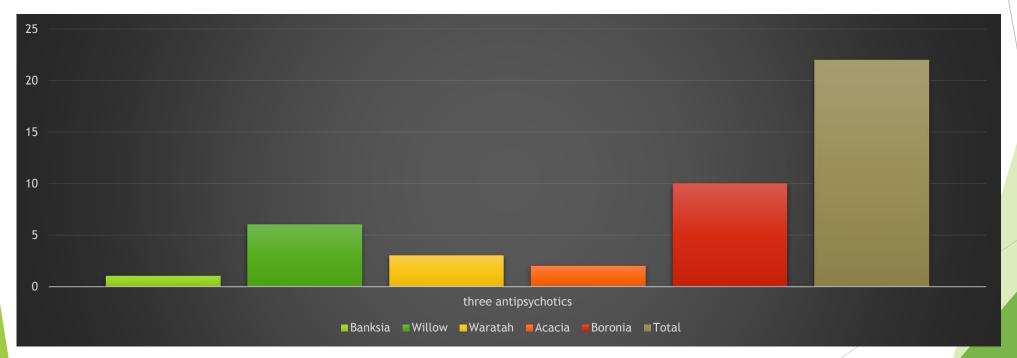
- Cumberland Hospital Recovery Services Antipsychotic Audit Data August 2016
- One antipsychotic



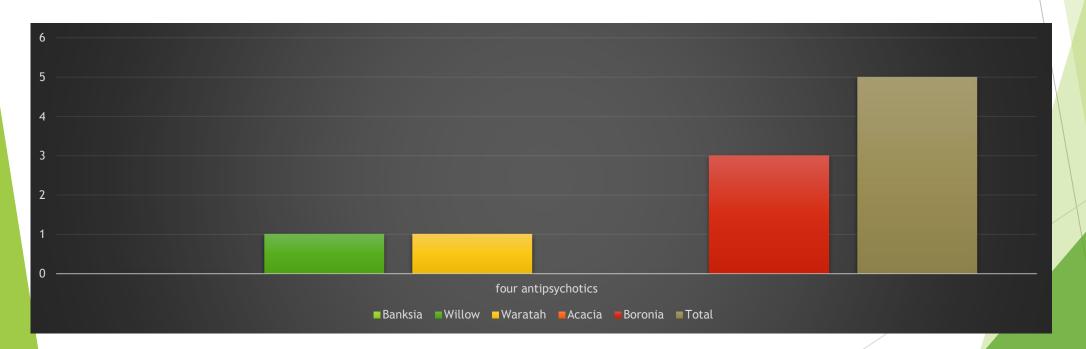
- Cumberland Hospital Recovery Services Antipsychotic Audit Data August 2016
- Two Antipsychotics



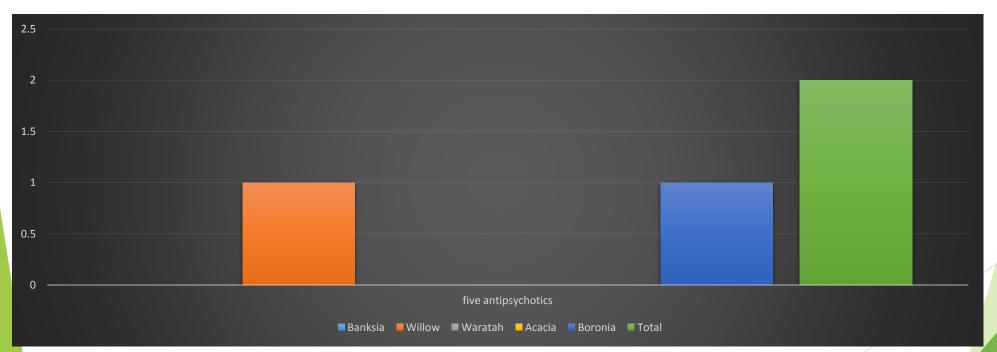
- Cumberland Hospital Recovery Services Antipsychotic Audit Data August 2016
- ► Three Antipsychotics



- Cumberland Hospital Recovery Services Antipsychotic Audit Data August 2016
- Four Antipsychotics

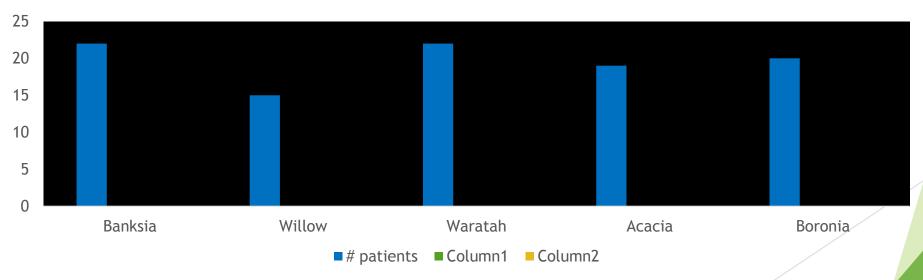


- Cumberland Hospital Recovery Services Antipsychotic Audit Data August
- ► Five antipsychotics



 Cumberland Hospital Recovery Services Antipsychotic Audit Data February 2017

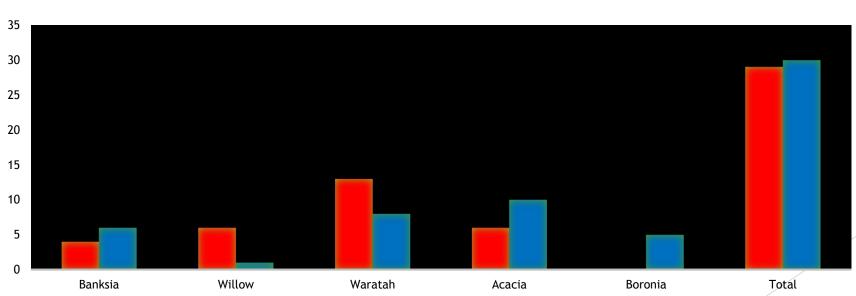




Antipsychotic Audit Comparing August 2016 and February 2017 in Cumberland Recovery Services

ONE ANTIPSYCHOTIC

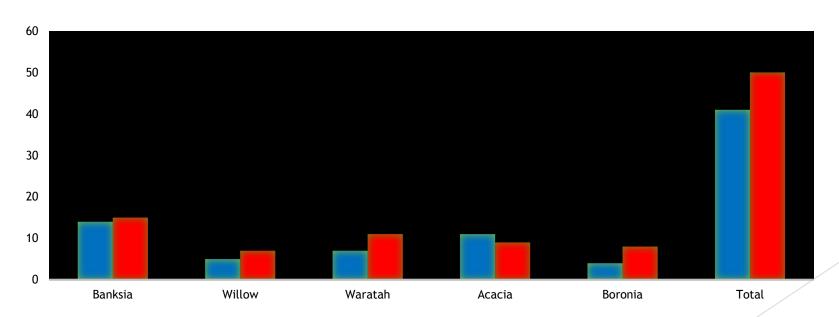
■ Aug-16 ■ Feb-17



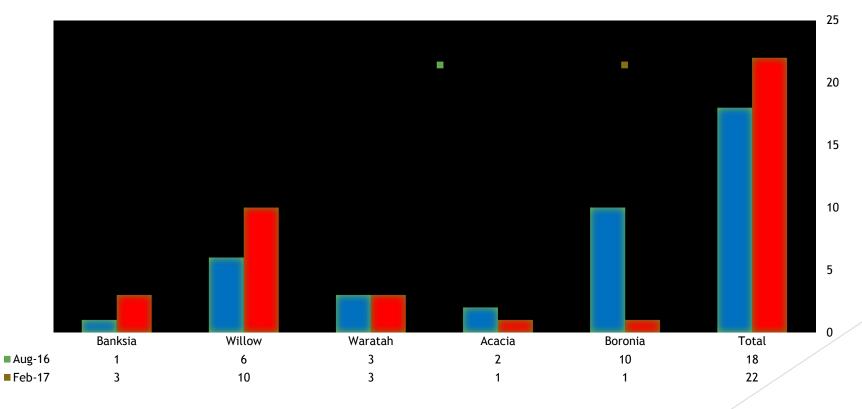
Antipsychotic Audit Comparing August 2016 and February 2017 in Cumberland Recovery Services

TWO ANTIPSYCHOTICS

■ Aug-16 ■ Feb-17



- ► Antipsychotic Audit Comparing August 2016 and February 2017 in Cumberland Recovery Services
- Three Antipsychotics



Antipsychotic Audit Comparing August 2016 and February 2017 in Cumberland Recovery

Services

- Number of patients 99
- One Antipsychotic 29
- Two Antipsychotics 41
- Three Antipsychotics 22
- Four Antipsychotics 5
- Five Antipsychotics 2

Number of patients 98

One Antipsychotic 30

Two Antipsychotics 50

Three Antipsychotics 18

- Medication reconciliation, simply by raising awareness that polypharmacy increases Falls Risks has provided evidence based opportunities for clinicians to critically review current practices in the use of polypharmacy and psychotropic medications. This change in practice has lead to
- Improved patient outcomes
- Reduced cost of pharmacy
- Reduction of length of stay
- Improved patient, Carer and workforce education
- Improved collaboration with patients and carers

► Following this data Cumberland Hospital's Rehabilitation Director developed recommendations which are before the Safe Use of Medication Committee, to improve medication reconciliation evidence based practice to reduction polypharmacy in Mental Health Patients.

Sustainability

- Patient and Carer collaboration to individualise falls prevention strategies for in patient hospital and home environment
- Interdisciplinary collaboration and involvement
- Falls prevention and management committee (identifying trends with patient stories and lived experiences)
- Staff mentoring, support and education
- Patient and Carer education
- Standardise processes around medication reconciliation
- Interdiciplinary awareness that polypharmacy increases falls risks

- Was developed to be sustainable through inclusive and supportive approach through education and training in 12 months has reduced falls by 5%
- Increased awareness throughout the workforce on the importance of falls prevention by 100%
- Review of polypharmacy
- Patient, Carer and Staff collaboration

For any more information of the WSLHD education and training

We Will Catch You! Mental Health Falls Prevention Program please contact author and Chair of MH Falls Committee or Jennifer Hughes CNE co-author