A Senior Level Review and Response Process for Inpatients having repeat Falls

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Ward D11 Aged Care

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Project Team

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Project Background

In May 2024, fall resulting in serious injury to patient

Review of the incident

Patient had repeat falls **(x3)** in the ward prior to latest fall resulting in injury.

For each fall, a post fall safety huddle occurred. However, the same strategies were used.

A huddle involving external clinicians from the ward was conducted, with a review of current strategies and new strategies were implemented.

Senior Safety Huddle for Falls

Framework: 
Review current Processes
Check if everything that could be done has been actioned
How effective are the strategies?
How do we support our staff?

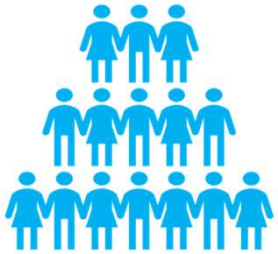
Who else is involved in addition to the local care team:

- Senior Nursing Leadership (ONM/DONMS)
- Patient Safety
- Medical Team
- Allied Health Team
- Subject Matter Experts (Aged Care CNC, Delirium CNC, ASET CNC)
- SWSLHD support (District Nursing Team- Falls/Safety culture coordinators and Clinical Stream)

How is the senior safety huddle different from the Post Fall Safety Huddle?

Ward Post Fall Huddle:

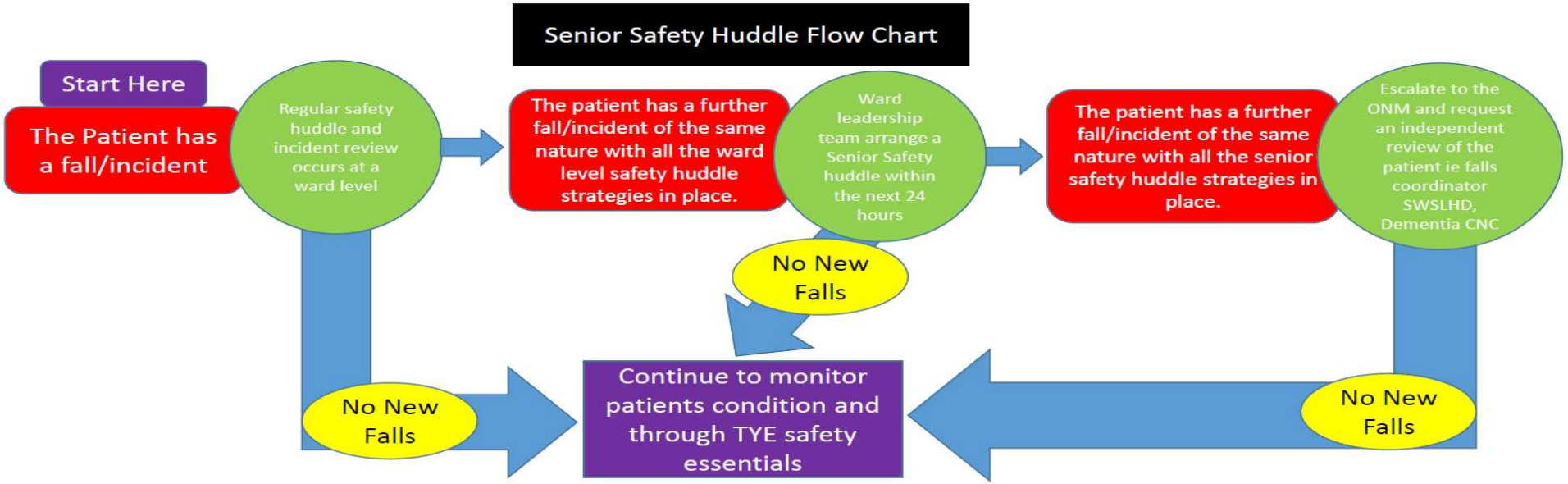
- ❑ For all falls post incident
- ❑ Immediate team (RN, NUM, CNE, MO, Allied Health)
- ❑ A quick review
- ❑ Usually 10-20 mins



Senior Safety Huddle:

- ❑ For high-risk patients (BPSD, Delirium & challenging behaviours)
- ❑ For repeat falls
- ❑ Subject Matter Experts
- ❑ More coordination to activate the huddle

Flowchart of the senior safety Huddle



Senior Safety Huddle

- Senior Safety Huddles are run by the senior leadership team from the ward or unit (NUM, CNE, CNC,CNS2)
- The Multidisciplinary team should be appropriate for the patient ie pharmacist, OPMH, MH
- Include the patient safety team and ONM in the senior safety huddle
- A calendar invite should go out to all appropriate members – if someone is unable to attend they need to document in the EMR their review and thoughts and liaise with the leadership team of the ward/unit
- Complete the senior safety huddle EMR documentation template and include the findings in the ward risk huddles and other TYE safety essentials.
- Other incidents might include; Aggression, behaviour, nutrition, restraints or any other repetitive incidents.

Workflow of the senior safety Huddle

Patient has a fall. Initiate regular safety huddle at ward level.

Review strategies and management plan

Patient has a further fall, despite current strategies.

Ward leadership to activate a senior safety huddle within 24hrs or as early as possible.

Leadership team coordinate subject matter experts and local team for the senior safety huddle.

Huddle is held face to face in the ward ideally otherwise via MST.

Outcomes document in eMR template.

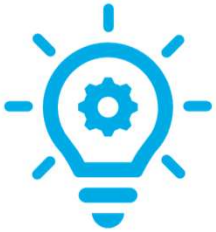
Framework of the senior safety huddle

What happened	If possible, have the patient explain what happened in their own words. The clinician who was present, or who found the patient, describes the fall and environment.
What contributed	Identifying what may have led to the fall. Review the effectiveness of the current strategies and are those strategies appropriate for the patient
What will reduce the risk	Consider medication review, proactive rounding, assistance with mobility and aids, toileting needs. Consider delirium, infection, sepsis or low BP.
What do we need to do	Communicate fall and interventions at clinical handover. Have we explored all the strategies? What support is required? (Education for staff, EAP, etc..)
What did we learn	Communicate lessons learnt and share at team meetings How to we build readiness in our team if it was to happen again?

Outcomes

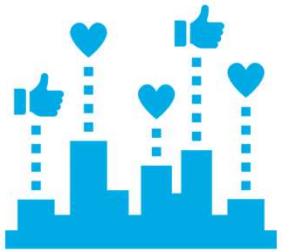
Since July 2024	12 Senior Safety Huddles
Falls (n=6) Delirium (n=2) Challenging Behaviours (n=4)	Post senior safety huddle only **1 patient** resulted in further fall
Positive Staff feedback	"Love the fact that we are supported and heard on what we need to keep the patient safe" "Good to see that our managers are more understanding" "They took the time to listen and acknowledge us" "Feel safer and well supported"

What's next



Prophylactic Senior Safety Huddle for our high-risk patient (previous history of multiple falls, co-morbidities BPSD, Delirium, Dementia).

Expand to:
Aggression & Restraints Incidents
Incidents involving nutrition



Shared with:
Fairfield and Bankstown Hospital
Nepean Blue Mountains LHD
Illawarra Shoalhaven LHD
SWSLHD District Falls Steering Committee
NSW Falls Coordinators

Questions

Come and chat with us during the breaks.

We are happy to share the learnings !!