Transforming Falls Prevention with Digital FRAMP: A Collaborative Innovative partnership between SLHD/SWSLHD

Wendy Tilden
Falls Prevention Coordinator
SLHD

Shereen Ivy Gacayan
Safety Culture Coordinator
SWSLHD

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NSW Health

NSW GOVERNMENT

Project Team

SWSLHD & SLHD:

- Digital Health Team (eMR clinical applications)
- Clinical Governance
- Falls Prevention Coordinators
- Change Manager
- Implementation Working Group (Nursing, Allied Health & Medical)

Background – why change ?

Recommendations from HS1 and HS2 incidents

Poor compliance Hybrid versions

- *pre-completed notes in eMR vs paper FRAMP*
- *causes confusion with staff re: source of truth*

Align with best practice

- *Removal of Falls Scoring CEC White Paper and World Falls Guidelines*

Previous Practice

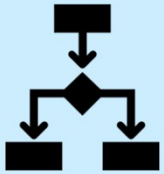
On admission to ward, falls management:

1. Adult Admission Assessment Checklist
2. Ontario Falls Risk Scoring
3. If Score >9, complete FRAMP (paper-based)
4. Document strategies in pre-completed notes
5. Strategies updated in Clinical Handover

Staff feedback:

- *Current process is repetitive*
- *The scoring does not reflect the actual risk of the patient*
- *Using the paper form does not ensure continuity of care with management strategies*
- *Clinicians were frustrated with how time-consuming the process is to complete risk scoring and paper FRAMP*

Aim

	• To have a Falls Risk Assessment and Management Plan (FRAMP) in eMR
	• To support clinicians with identifying falls risk factors and implement an individualised management plan for falls prevention
	• To simplify current process and enhance critical thinking

Methodology

Electronic FRAMP
from WSLHD

eMR Applications Team replicated the build

User- Acceptance Testing

Broad consultation with all the disciplines

User-Acceptance Testing (UAT) and Clinicians Input

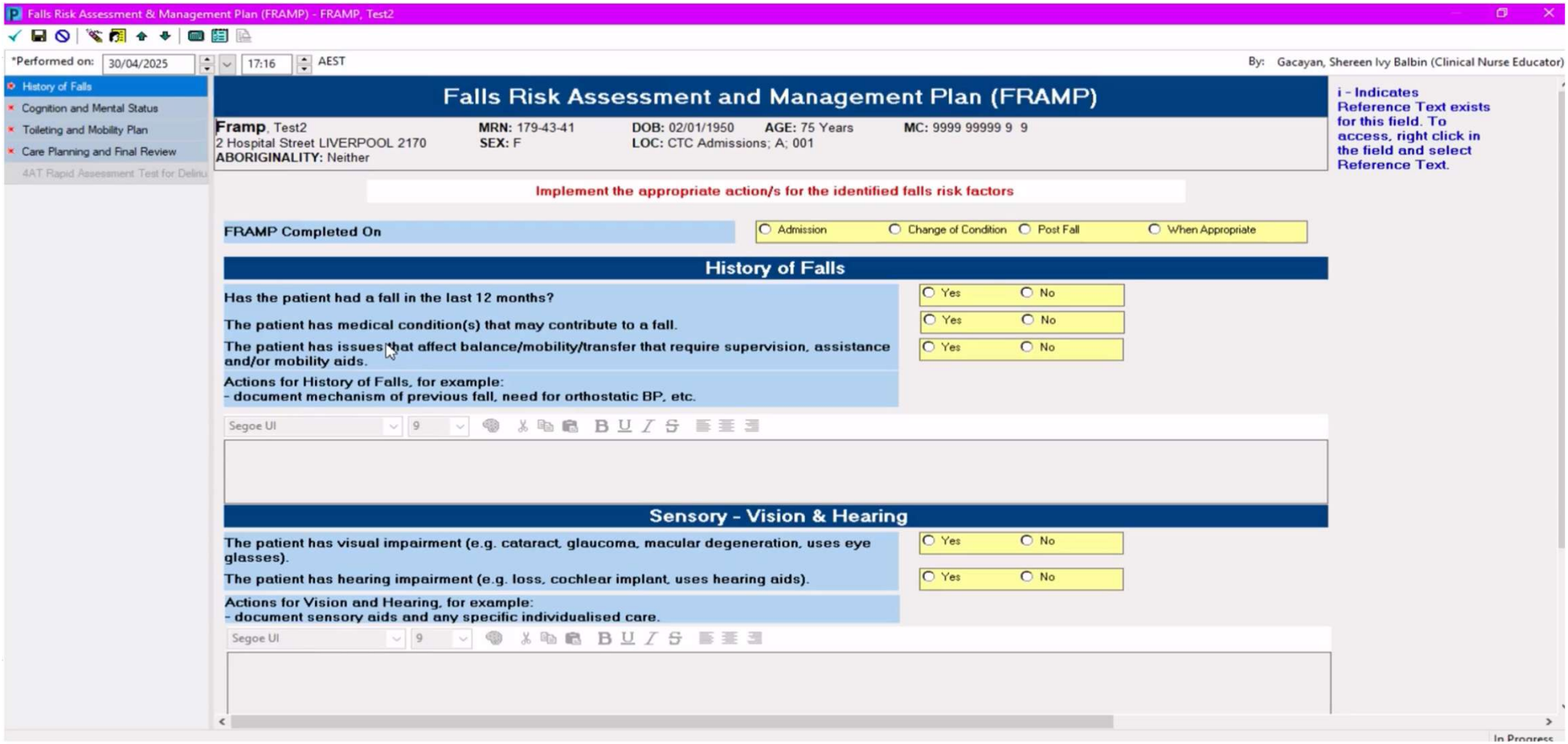
80 clinicians

- From both LHDs to validate workflow and functionality
- Allied health, medical and nursing

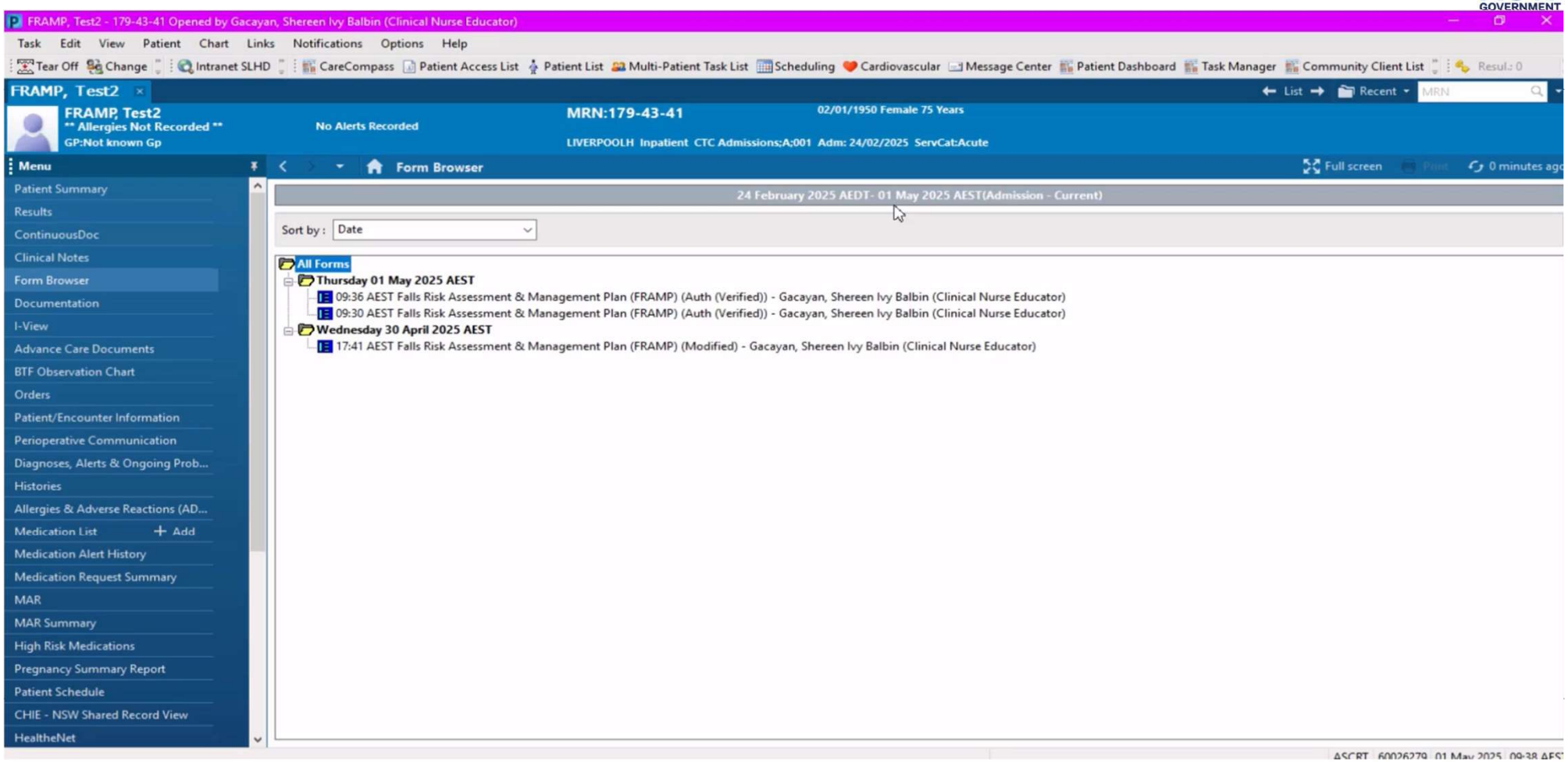
Scenario-based testing to:

- Validate documentation or actions are clear, intuitive and complete
- Evaluate form workflow supports consistency, continuity, supports or hinders safe and efficient care

FRAMP Demo


Falls Risk Assessment & Management Plan (FRAMP) - FRAMP, Test2
*Performed on: 30/04/2025 17:16 AEST
By: Gacayan, Shereen Ivy Balbin (Clinical Nurse Educator)
History of Falls
Cognition and Mental Status
Toileting and Mobility Plan
Care Planning and Final Review
4AT Rapid Assessment Test for Delirium
Falls Risk Assessment and Management Plan (FRAMP)
Framp, Test2
2 Hospital Street LIVERPOOL 2170
ABORIGINALITY: Neither
MRN: 179-43-41
SEX: F
DOB: 02/01/1950
AGE: 75 Years
LOC: CTC Admissions; A; 001
MC: 9999 99999 9 9
i - Indicates Reference Text exists for this field. To access, right click in the field and select Reference Text.
Implement the appropriate action/s for the identified falls risk factors
FRAMP Completed On
Admission
Change of Condition
Post Fall
When Appropriate
History of Falls
Has the patient had a fall in the last 12 months?
The patient has medical condition(s) that may contribute to a fall.
The patient has issues that affect balance/mobility/transfer that require supervision, assistance and/or mobility aids.
Yes
No
Actions for History of Falls, for example:
- document mechanism of previous fall, need for orthostatic BP, etc.
Segoe UI
9
Sensory - Vision & Hearing
The patient has visual impairment (e.g. cataract, glaucoma, macular degeneration, uses eye glasses).
The patient has hearing impairment (e.g. loss, cochlear implant, uses hearing aids).
Actions for Vision and Hearing, for example:
- document sensory aids and any specific individualised care.
In Progress

FRAMP Demo


FRAMP, Test2 - 179-43-41 Opened by Gacayan, Shereen Ivy Balbin (Clinical Nurse Educator)
Task Edit View Patient Chart Links Notifications Options Help
Tear Off Change Intranet SLHD CareCompass Patient Access List Patient List Multi-Patient Task List Scheduling Cardiovascular Message Center Patient Dashboard Task Manager Community Client List
FRAMP, Test2
FRAMP, Test2
** Allergies Not Recorded **
GP:Not known Gp
No Alerts Recorded
MRN:179-43-41
02/01/1950 Female 75 Years
LIVERPOOLH Inpatient CTC Admissions;A;001 Adm: 24/02/2025 ServCat:Acute
List Recent MRN
Menu
Form Browser
Full screen
0 minutes ago
Patient Summary
Results
ContinuousDoc
Clinical Notes
Form Browser
Documentation
I-View
Advance Care Documents
BTF Observation Chart
Orders
Patient/Encounter Information
Perioperative Communication
Diagnoses, Alerts & Ongoing Prob...
Histories
Allergies & Adverse Reactions (AD...
Medication List Add
Medication Alert History
Medication Request Summary
MAR
MAR Summary
High Risk Medications
Pregnancy Summary Report
Patient Schedule
CHIE - NSW Shared Record View
HealtheNet
24 February 2025 AEDT- 01 May 2025 AEST(Admission - Current)
Sort by : Date
All Forms
Thursday 01 May 2025 AEST
09:36 AEST Falls Risk Assessment & Management Plan (FRAMP) (Auth (Verified)) - Gacayan, Shereen Ivy Balbin (Clinical Nurse Educator)
09:30 AEST Falls Risk Assessment & Management Plan (FRAMP) (Auth (Verified)) - Gacayan, Shereen Ivy Balbin (Clinical Nurse Educator)
Wednesday 30 April 2025 AEST
17:41 AEST Falls Risk Assessment & Management Plan (FRAMP) (Modified) - Gacayan, Shereen Ivy Balbin (Clinical Nurse Educator)

Go-live FRAMP 11th March 2025

Falls Prevention and Management Procedure

Very successful Engagement and awareness through:

- Roadshows across SLHD and SWSLHD
- Memo
- Countdown banner on the intranet

Training and Education Prior to Go-live

- Mixed modes: face to face and webinar sessions
- Train the trainer
- Quick Reference Guide, My Health Learning Training Module, FAQs, training video

What are our clinicians telling us

"fosters collaboration between MDTs"

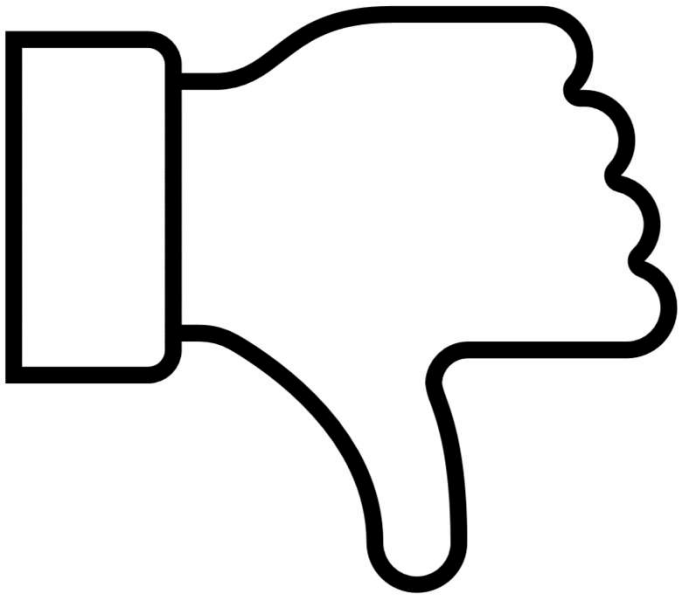
"love the reference guide"

"very comprehensive"

"The form is more clear and useful to fill in correct information about the patient's risk factors of falling"

"I like that you do not lose the information previously provided once you re-launch the form for re-assessment'

Did we miss the Falls Risk Scoring?



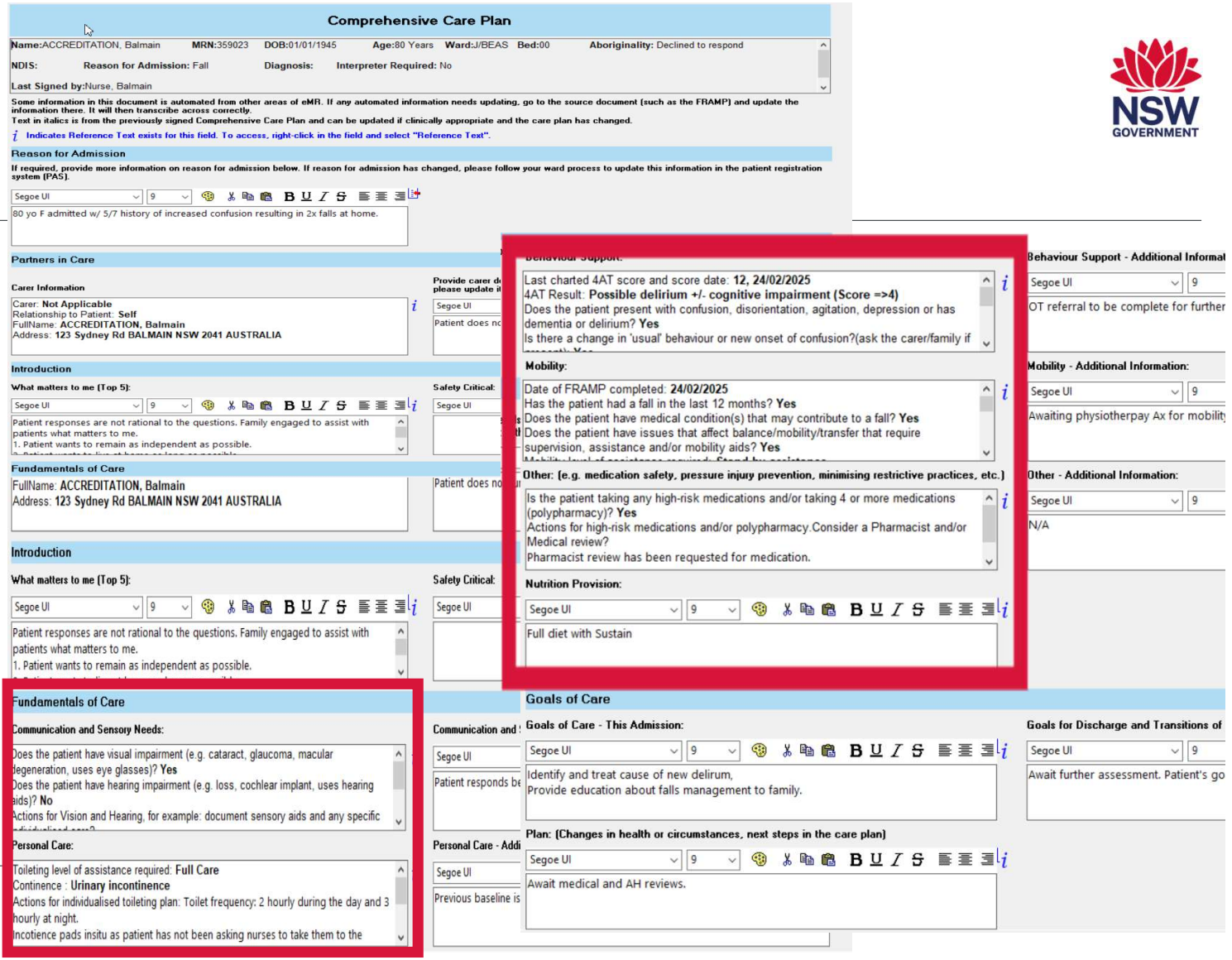
Comprehensive Care Plan

FRAMP

Input from FRAMP is automatically populated into Comprehensive Care Plan:

- *Mobility*
- *Medication safety*
- *Cognition*
- *Communication and sensory needs*
- *Personal Care*

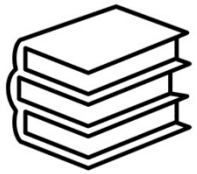
Comprehensive Care Plan



What's next?

Formal evaluation

Impact on patient care and safety



Research on risk management vs. risk scoring

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Simon Lathem
Shona Hanson
Tamsin McVeigh
Wendy Tilden

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