Falls Prevention Team

NEW STANDARDS MAKE HOSPITALS MEASURABLY SAFER

The 1999 Institute of Medicine’s landmark report, To Err Is Human: Building a Safer Health System, highlighted the magnitude of deaths and serious injuries that can occur in health care. The report emphasized that health care institutions need to recognize errors as complex phenomena requiring organizational change.

Falls are the commonest adverse event occurring in hospitalized patients, with 2% of all inpatients sustaining a fall during a stay. The typical rate is 4 falls per 1,000 patient days, according to UAB geriatrician Cynthia Brown, MD, who is working with the Centers for Medicare & Medicaid Services to address hospital falls. In the United States, the estimated cost of falls was $20 billion in 1995, rising to $32.4 billion by 2020 (Rubenstein, LZ, Josephson, KR, Clinical Geriatrics Medicine. 2002;18[2]:141-158).

The best way to prevent errors is to design safety into the system, Debbie Soniat, RN, University Hospital Quality Improvement (QI) coordinator, says. “How can we predict who is going to fall in an acute care setting? How can we reduce the risk?”

QI recognizes the majority of falls result from a failure of processes, as opposed to individual staff behaviors, she continues. “For example, a QI falls committee at one hospital reviewed incident reports and noted most falls occurred during change of nursing shifts. This observation led to a review of staffing patterns and identification of patient characteristics that may contribute to higher fall rates during shift changes.”

A further analysis determined that individuals who fell were either able to ask for assistance but did not want to “bother” staff or were cognitively unable to use a call bell. The data led to changes in staffing patterns, such as staggered shifts and an overlap of nursing assistants during this time. “The fall team realized a follow-up review of fall patterns over the next few months would allow evaluation and possible revision of the policy,” committee Cochair Stephanie Burnett says.

In 2004, the interdisciplinary University Hospital Falls Prevention Team convened to track, report, and reduce falls within the hospital. It includes Chair Jacqueline Richardson-Westbrook, RN, Stephanie Burnett, RN, Kimberly Ayers, RN, Cynthia Brown, MD, Faye Elliott, RN, James Johnson, RN, Terry Motes, RN, John Perkins, Sandra Rudolph, RN, Melanie Schultz, RN, Kerry Shapiro, Debbie Soniat, RN, and Tonya Wright.

In addition to a literature review of fall risks, incidents, and interventions, their efforts have included product evaluation, electronic incident reporting, communication among departments, data collection and reporting to a national data base, staff education, and documentation.

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The Falls Prevention Team also revised the UAB Falls Risk Standard and developed the 2005 Mandatory Education and Testing Standard for all patient caregivers. Elements of the initiative include previously tested fall reduction strategies, such as assessment of medication effects, signage encouraging patients to call for assistance, attention to elimination needs, addressing environmental issues such as nonskid footwear, and other available technologies, including bed alarms and low-height beds. Increased use of restraints also was examined, although a restrained patient is not necessarily at low risk for a fall, Dr. Brown says.

To test interventions, the Falls Team coordinated a 2-month bed evaluation on 9 South and C7 South that highlighted lowering beds to inches from the floor to reduce risk and impact of patient falls. The team also piloted coded patient identification bracelets on the orthopaedic units to alert staff of fall risk. The group plans to implement these interventions hospital-wide.

In addition, the Falls Team began a review of the electronic incident reporting system related to falls. Members streamlined data input and investigated succinct methods to communicate falls data to department leadership to enhance departmental QI efforts. A new admission assessment database (IPAA) also improved documentation of fall risk assessment during hospital admission.

The PIN screen was revised to include a Fall Risk Alert and escort notification. Communication regarding patients at risk for falls to the escort service has already improved by 25% via the use of PIN notification. Fall risk armbands have added to communication efforts, as well. The Falls Prevention Team is now creating a fall prevention toolkit for departmental distribution.

The team also plans to conduct ongoing surveillance of hospital falls, staying abreast of current trends through continuous literature review and educational consultations to the UAB patient-care delivery team. “Fall reduction is an important problem in patient safety and involves the efforts of everyone in the health care system,” Burnett concludes.

Board Of Trustees Honors UAB Medical Faculty

Two UAB faculty members were recognized at the June 17 University of Alabama (UA) Board of Trustees meeting. Thomas R. Hunt III, MD, professor and director of the Division of Orthopaedic Surgery, was appointed the second holder of the John D. Sherrill Chair of Orthopaedic Surgery. Mary MacDougall, PhD, professor and associate dean of research and director of the Institute of Oral Health Research at UAB, was appointed the second holder of the James R. Rosen Chair of Dental Research.

Dr. Hunt served as head of hand surgery and director of the Cleveland Clinic Hand and Upper Extremity Center at The Cleveland Clinic Foundation for 7 years before joining UAB in 2004. He also holds appointments as senior scientist in UAB’s Center for Metabolic Bone Disease and the UAB Cell and Matrix Adhesion Research Center. Dr. Hunt’s work in hand and microvascular surgery and minimally invasive techniques has revolutionized the field of orthopaedic surgery. He is a national speaker and holds key committee appointments within the American Society for Surgery of the Hand and the American Academy of Orthopaedic Surgeons.

Dr. MacDougall joined the Department of Pediatric Dentistry at the University of Texas Health Science Center (UTHSC), San Antonio, in 1993. In 1999, she became UTHSC School of Dentistry’s first associate dean for research, which she held until joining UAB’s School of Dentistry in June 2005 as professor, associate dean for research, and director of the UAB Institute of Oral Health Research. Dr. MacDougall is internationally known for her research in craniofacial genetics and biomimetics. Since 1985, the National Institute of Dental and Craniofacial Research has funded her continuously, and her research has been featured on the Discovery Health channel.

Con Application

Baptist Medical Center Princeton has applied to the State Health Planning and Development Agency for a Certificate of Need (CON) for renovation of existing space to accommodate a fifth cardiac cauterization laboratory.
Strong opposition, and we defeated the bill,” continued Nowak, who predicted data reporting legislation will be reintroduced in the next session. Alabama is 1 of only 4 states in the U.S. that does not have some form of data reporting — this type of legislation is desirable and inevitable; we just wanted to make sure the language of the law is clear and fair.

**UAB OPINION MAKERS**

This year, Nowak sent 22 bills to UAB experts for review. After wading through complex legal language, faculty responded with clear-cut, influential opinions.

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**Dr. Robert Rich**

Vice President and Dean of the School of Medicine Robert Rich, MD, strongly opposed a bill that would ban some cloning technologies. “All responsible scientists oppose human reproductive cloning, which involves use of cloning technologies that result in uterine implantation with the intent of producing a human being. But I opposed this legislation because it would have also prohibited use of similar technology — so-called **therapeutic cloning** — that would never result in cloning of a human being but has potential to provide new approaches to many important diseases, such as type 1 diabetes, Parkinson disease, spinal cord injury, and others.”

“As UAB physicians, we are dedicated to prevention and treatment of illness in our patients. Although much more research must be done, therapeutic cloning has that potential. I would not want Alabama patients **denied opportunities** that are likely to become available through the work of researchers elsewhere in the United States and around the world.”

The proposed cloning ban died early in the session without generating much controversy, Banister said, noting that bills can get derailed at any point in the legislative process — on introduction, in committee, during a full vote of the house and senate, or through gubernatorial veto.

Dean of the School of Optometry John Amos, OD, reviewed several bills for UAB and recommended support for all of them. “I appreciated the opportunity to review proposed legislation related to the optometric profession. All three of the bills, which covered license renewal, the continuation of the Alabama Board of Optometry, and identification and treatment of impaired practitioners, were probably proposed by the Alabama Optometric Association, but I had not seen them until they came to me.

“Review allowed me to delve a little deeper and consider how the legislation would impact the school and the profession — I enjoyed being involved.”

Dean of the School of Dentistry Huw Thomas, PhD, strongly supported a bill that proposed regulating dental use of oral conscious sedation.

“Oral conscious sedation, which in dental care is most often used for anxious children, requires initial training and continuing education. The proposed legislation is a great idea — it ensures the safety of these young patients by mandating adequate training for individuals delivering care, but the requirements are not so burdensome as to make the process impractical.” The bill was indefinitely postponed, but will likely be reintroduced in the next session, Banister said.

Sometimes, proposed health care legislation is in conflict with medical literature. Neonatologist Wally Carlo, MD, reviewed just such a bill during the last session and took a strong stance against it. The legislation required health care providers to inform parents of newborns about availability of sleep apnea monitors for prevention of sudden infant death syndrome (SIDS).
In his response, Dr. Carlo said, “The monitoring aspect of the bill is ill-conceived, as there is no evidence SIDS can be prevented with apnea monitoring. In fact, a large National Institutes of Health study concluded that apnea and obstructive breathing events are quite common, even in term infants, but the timing of such events suggest they are not likely to be precursory to SIDS.”

He went on to note that American Academy of Pediatrics guidelines say home cardiorespiratory monitoring should not be prescribed for SIDS prevention and that inappropriate use of such monitoring would result in large increases in health care costs. Dr. Carlo contacted other Alabama neonatologists to rally opposition to the bill, which died after being reviewed in committee.

“Dr. Carlo’s expertise was noted, and he was asked to design the neonatal services section of the state health plan,” Nowak said. “Strong faculty responses lead to strong positions in Montgomery, increasing UAB’s impact on the law-making process and extending our influence into other arenas.”

Banister agreed, noting, “There’s no higher comfort level than having UAB faculty, who are among the world’s foremost experts, give their opinion on legislation. This input gives UAB’s positions a degree of credibility other interest groups do not enjoy. On a related note, another election year has begun, and I hope our faculty, staff, and friends will consider a timely contribution to UASPAC, our political action group, to help ensure our continued success in Montgomery.”

**APPRECIATION**

Former SOM Associate Dean Remembered

Pediatrician Paul A. Palmisano, MD, a former associate dean in the School of Medicine (SOM) and director of student affairs, died in Dayton, Ohio, May 24. A dedicated teacher and medical student advocate, he was famous for “Palmisano Rounds” conducted weekly at Children’s Hospital, says SOM Senior Associate Dean for Clinical Affairs and Interim Chair of Psychiatry F. Cleveland Kinney, PhD, MD, who was one of Dr. Palmisano’s students. “He knew each of us by name and offered support and encouragement when needed. He was an exemplary teacher and an insightful clinician and showed by example what it means to be a caring physician.”

Dr. Palmisano previously served as a medical officer for the Food and Drug Administration and was instrumental in developing a successful poison control center and child safety programs, working for approval of the Poison Prevention Packaging Act. After his retirement from UAB in 1990, he received the American Academy of Pediatrics Lifetime Achievement Award. The School of Medicine Paul A. Palmisano Excellence in Pediatrics Award was established to recognize achievements in pediatrics and the Palmisano Conference Room in Volker Hall was named in his honor.

The family suggests donations to The Founders Fund, which supports pediatric residency training and was established to honor Drs. John Benton, Ralph Tiller, and Palmisano (Department of Pediatrics, Children’s Hospital, 1600 7th Ave S, Birmingham, AL 35233).