

Fall and Fall-related Injury Quality Improvement Clinical Decision Support Tool

Overview:

This offering provides Information to support nurse leaders to access and utilize the Quality Improvement Decision Support Tool (QI-CDS) for Fall and Fall-related Injury Prevention.



Course Objectives:

After completing this course you will be able to:

- Understand how the Quality Improvement (QI) Clinical Decision Support (CDS) Tool is designed to extract data from the electronic health record (EHR) to support quality improvement.
- Explain access the software and run the report by unit and quarter/year
- Describe the information that is available on report
 - Summary Details
 - Fall Event Details
- Identify how the data can be verified and used to drive quality improvement efforts on your unit

Why is Fall Prevention Important?

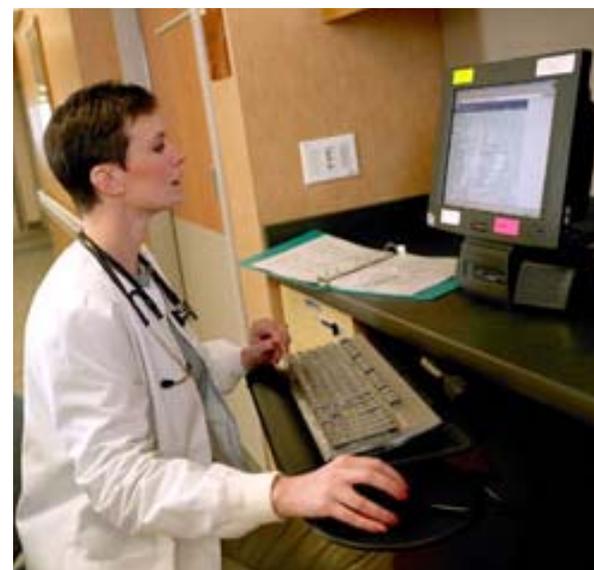
- Falls can result in serious injury to patients.
- *Patient Falls* and *Patient Falls with Injury* are two of the four “nurse sensitive” indicators of quality in acute care identified by the National Quality Forum (NQF) & the Joint Commission (TJC).
- “*Reducing Risk of Harm resulting from Falls*” has been one of the National Safety Goals recommended by TJC (Goal 9 - 09.02.01 in the past.
- *Falls with Injury* (fracture, dislocation, and intracranial injury) has been added to the Centers for Medicare and Medicaid Services (CMS) List of hospital-acquired conditions (“*Never*” Events).
- **Nurse Leaders** are often held accountable for the quality and quantity of nursing care on their units. Data from multiple sources are needed to identify causes for falling their units and help nurse leaders to intervene appropriately to improve patient care quality.

The AHRQ* ACTION Project:

Title: “Using Evidence-based Nursing Practices and Electronic Decision Support to Reduce Fall-related Patient Injuries in Acute Care”

Purpose:

- To develop and test an evidence-based nursing practice clinical decision support (CDS) tools that extract data from an existing electronic health record into a report to support quality improvement activities related to fall prevention
- Educate nurse leaders to use a new **Quality Improvement (QI) CDS tool** for gathering data about falls and fall-related injuries and using the data for quality improvement activities.



*Agency for Healthcare Research & Quality (AHRQ) ACTION Project TO# HHSA290200600016I

How Will A New QI-CDS Tool Help You?

The QI-CDS tool provides:

- Data are entered into the EHR by caregivers during routine patient care. These data are extracted and used to populate individual and aggregate data into the report template.
- A mechanism for gathering care and event results, verifying data accuracy, analyzing causes and trends, communicating feedback to individuals and groups of care givers, and tracking the impact of improvement efforts.

How to Access the QI CDS Report

- Use your login ID and password to log into the BusinessObjects/PowerInsight program.

You will be prompted to enter your ID and password



The screenshot displays the Business Objects login interface. At the top, there is a blue header with the 'Business Objects' logo. Below this, a white dialog box titled 'Log On to InfoView' is centered. The dialog box has a subtitle 'Welcome to Business Objects' and a prompt: 'Enter your user information and click Log On. (if you are unsure of your account information, contact your system administrator)'. The form contains four input fields: 'System:' with the value 'HEICpiay001:6400', 'User name:' with the value 'YOUR ID', 'Password:' (empty), and 'Authentication:' with a dropdown menu set to 'Enterprise'. A 'Log On' button is located at the bottom of the form.

Select the Appropriate Report

The screenshot shows the Business Objects application window. The title bar reads 'Business Objects' and 'Welcome: 150122'. The interface is divided into a 'Folders' pane on the left and a main content area on the right. In the 'Folders' pane, the 'KBNI Metrics' folder is highlighted with a red circle. The main content area displays a table of reports under the 'KBNI Metrics' folder. The table has columns for 'Title', 'Last Run', 'Type', 'Owner', and 'Instances'. One report is listed: 'Fall Prevention - Quarterly Summary', which has a 'Last Run' of 'Never run' and a 'Type' of 'Desktop Intelligence'. Below the table, there are links for 'Schedule | History | Properties | Modify'.

Title	Last Run	Type	Owner	Instances
Fall Prevention - Quarterly Summary	Never run	Desktop Intelligence	037979	0

To open the report click on "Fall Prevention-Quarterly Summary"

To open the "Public Folders" and select the "KBNI Metrics" subfolder

The QI CDS Report Opens on Falls Summary Tab

Report Name: Fall Prevention - Quarterly Summary
Facility: SLMC
Unit: -SLMC
Time Range: Q4 2009
Refresh Date/Time: 02-03-2010 1:19:22 PM
Page Number: 1 of 1

	Oct 2009	Nov 2009	Dec 2009	
Number of Patients	207	199	199	
Number of Encounters	216	200	202	
Number of Patient Days	748.0	690.1	688.7	
Number of Patients with a Fall	6	7	2	
Number of Falls	6	9	2	17
% of Patients with a Fall	2.9 %	3.5 %	1.0 %	2.7 %
Number of Falls Per 1000 Patient Days	8.0	13.0	2.9	8.0
% At Risk Prior to Fall	100.0 %	88.9 %	100.0 %	94.1 %
% Non-Risk Prior to Fall	0.0 %	11.1 %	0.0 %	5.9 %
Number of Injuries From a Fall	0	3	1	4
Number of Injuries per 1000 Patient Days	0.0	4.3	1.5	1.0

Refresh Data

Falls Summary

Refresh Date: February 3, 2010 1:20:1

Unit & Time Period specified for Report

The report opens on the Fall Summary tab. Click on the "Refresh Date" icon to select a different unit or time period.

Falls Summary Tab

Refreshing the QI CDS Report (new Unit or Time)

Business Objects

Welcome: 15012

Folders

Home

My Folders

Public Folders

Fall Prevention - Quarterly Summary

Document View Find Undo Redo Zoom 100%

Refresh Data

Prompts

Reply to prompts before running the query.

- 1 - Unit: 9LM-SLMC
- 2 - Quarter: 4
- 3 - Year: 2009

Run Query

Cancel

Refresh Values

1 - Unit:

- 10T-SLMC
- 11LM-SLMC
- 11T-SLMC
- 5KLM-SLMC
- 9LM-SLMC
- CICU-SLMC
- MRICU-SLMC

More Information

9LM-SLMC

Falls Summary Patient Falls

Refresh Date: February 3, 2010 1:20:18 PM

1. Specify desired Unit, Quarter, & Year

2. Click "Run Query"

Data Element Definitions

- There are many data elements in this report that come from many sources including the patient admission/transfer/discharge (ADT) fields, fall risk assessment screens, devices used for fall prevention, the care plan, the education form, and the post-fall assessment tool documentation.
- Each data element brings in unique information and should not be taken at face value. A “Definition Key” document has been created to define each data element.
- This training program will not review each field in the report. Endusers are encouraged to print out the definitions for ready access during use of the tool.

Falls Prevention Summary Report (Tab 1)

Report Name: Fall Prevention - Quarterly Summary

Facility:

Unit:

Time Range: Q4 2009

Refresh Date/Time: 02-03-2010 12:48:47 PM

Page Number: 1 of 1

	Oct 2009	Nov 2009	Dec 2009	QTD
Number of Patients	207	199	199	552
Number of Encounters	216	200	202	574
Number of Patient Days	748.0	690.1	688.7	2126.8
Number of Patients with a Fall	6	7	2	15
Number of Falls	6	9	2	17
% of Patients with a Fall	2.9 %	3.5 %	1.0 %	2.7 %
Number of Falls Per 1000 Patient Days	8.0	13.0	2.9	8.0
% At Risk Prior to Fall	100.0 %	88.9 %	100.0 %	94.1 %
% Non-Risk Prior to Fall	0.0 %	11.1 %	0.0 %	5.9 %
Number of Injuries From a Fall	0	3	1	4
Number of Injuries per 1000 Patient Days	0.0	4.3	1.5	1.9
Number of Minor Injury per 1000	0.0	2.9	0.0	0.9
Number of Moderate+ Injury per 1000	0.0	1.4	1.5	0.9
% of Falls Resulting in Injury	0.0 %	33.3 %	50.0 %	23.5 %
% of Falls with Minor Injury	0.0 %	22.2 %	0.0 %	11.8 %
% of Falls with Moderate+ Injury	0.0 %	11.1 %	50.0 %	11.8 %
% Assessed within 24 Hrs of Admission	100.0 %	99.3 %	100.0 %	99.8 %
% Assessed for Risk Daily	95.2 %	95.7 %	95.9 %	95.6 %
% Identified at Risk for Falls	64.4 %	72.0 %	67.8 %	67.2 %
% Identified at Risk for Fall Related Injury	73.1 %	77.0 %	73.3 %	74.2 %
% At Risk with Fall Prevention Plan Initiated	85.6 %	86.1 %	88.3 %	86.5 %
% At Risk with Education Documented	7.9 %	6.3 %	7.3 %	7.5 %

Patient Falls Detailed Report (Tab 2)

Business Objects Welcome

Document - View - Find - Undo - Redo - Zoom 100%

Folders: Home, My Folders, Public Folders, KBNI Metrics, PowerInsight Training

Report Name: **Fall Prevention - Monthly Fall Details**

Facility: SLMC
 Unit: -SLMC
 Time Range: Q1 2010
 Refresh Date/Time: 03-17-2010 2:26:25 PM
 Page Number: 1 of 2

Jan 2010

FIN	Fall Date	Fall Time	Time to Document (hrs)	Admit Dt/Tm	Discharge Dt/Tm	Enc Type	Age	Sex	Activity at Time of Fall	Location of Fall	Initial Injury Asmt	24 Hr Injury Asmt	24 Hr Injury Asmt
	01/09	10:20	0.42	01/02/2010 14:17	01/12/2010 13:20	Inpatient			Transferring	Bedside Commode	None	None	01/10
Progress Note													
Patient states she was transferring from the commode to the bed without calling for staff on the call light. Writer was commode. Writer offered to transfer patient to bed but patient stated she was not													
	01/12	15:15	2.16	01/09/2010 15:21	01/15/2010 15:00	Inpatient			Bedrest	Other: low bed	None	None	01/15
Progress Note													
Bed check went off. Aide ran to room and found patient kneeling next to bed. Fall vitals initiated. MD called. No appare													

Refresh Date: March 17, 2010 2:26:

Falls Summary
Patient Falls
Patient Falls Tab

How to Use the QI-CDS Report

- The fall event data will populate into the report as soon as the form/field from the EHR is signed (near-real time).
- Reports can be viewed, saved, or printed for individual nurse leader use
- Details in the report can be used to follow up regarding issues identified for individual patient fall events
- Details in the report can be analyzed for trends in aggregate patient data or used for quality improvement processes.
- Reports can be printed and shared at the unit level

How to Save the Report

Business Objects Welcome: 150122

Document View Find Undo Redo Zoom 100%

Close
Save as
Save to my computer as

Excel
PDF
CSV

Facility: MC
Unit: MC
Time Range: Q4 2009
Refresh Date/Time: 02-03-2010 1:19:22 PM
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Falls Summary Patient Falls Refresh Date: February 3, 2010 1:20:18 PM

How to Print the Report

Business Objects Welcome

Document View **Print** Find Undo Redo Zoom 100%

Report Name: Fall Prevention - Quarterly Summary
Facility:
Unit: -SLMC
Time Range: Q4 2009
Refresh Date/Time: 02-03-2010 1:19:22 PM
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Falls Summary Patient Falls Refresh Date: February 3, 2010 1:20:1

Key Points to Remember:

- Falls are considered “never events”; but CDS tools populated with EHR data entered during routine care can save time and support nurse leaders to conduct quality improvement activities
- The QI-CDS Tool was designed to provide near-real time access to:
 - Aggregate unit-level patient day, fall/injury, and care plan data
 - Individual case fall event details
- Use the “QI CDS Tool” to conduct fall prevention quality improvement activities in your department
 - Identify individual issues and trends
 - Compare your department specific data to benchmark data



This content has been based on
a quantitative analysis of current fall metric data,
observation, focus group, and survey data.

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Accelerating Change and Transformation in
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Project
TO# HHSA290200600016I



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