

KEY POINT SUMMARY

OBJECTIVES

This study evaluated the prevalence of falls and the effectiveness of three interventions in decreasing falls in a nursing home population.

DESIGN IMPLICATIONS

Appropriate environmental changes such as repositioning beds with one side to the wall can be effective in reducing falls in nursing homes because they can allow more room for maneuvering within patient rooms.

Decreasing the Incidence of Falls in the Nursing Home in a Cost-Conscious Environment: A Pilot Study

Hofmann, M. T., Bankes, P. F., Javed, A., Selhat, M. 2003 | Journal of the American Medical Directors Association Volume 4, Issue 2, Pages 95-97

Key Concepts/Context

About 30% of seniors living in the community fall per year, but that figure jumps to 60% in the nursing home elderly, with 4% of those resulting in a fracture. In addition to the pain and suffering these individuals endure, these falls increase healthcare costs. Research shows that incurring one or more falls with injury increases nursing home costs \$5,325 per year. Several strategies have been used to reduce falls and their complications; however, they have mixed results.

Methods

Researchers reviewed charts and records to determine how prevalent and severe falls were, as well as the times and places they occurred. Then they implemented interventions in three areas: (1) environmental actions (Reposition furniture allowing for room for staff to maneuver and, where appropriate, move beds so one side was against the wall.), (2) staffing (Add one staff member during the time when falls were the highest.), and (3) restorative activity program (Add activities such as game playing or arts and crafts for 1 or 2 hours during peak fall times.) Falls data were again collected after the intervention.

Findings

Prior to the intervention, the data showed that there were 479 falls that resulted in 16 fractures; 221 (46%) of the falls occurred during the 3-11 shift and resulted in 63% (n = 10) of the fractures. After intervention, there were 299 falls and 8 fractures, representing a statistically significant 38% reduction in the number of falls and a 50% reduction in the number of fractures. In addition, falls on the evening





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and night shifts were significantly reduced from 221 to 115 falls and 91 to 29 falls, respectively.

Limitations

No limitations were discussed in the article.