# **QUALITY IMPROVEMENT STORY BOARD**

Contact: Amber Brown, Rehabilitation Assistant

## Improving Hip Protector Adherence for Dementia Clients at Terraceview Lodge

Date: May 31, 2019

#### Background:

- TVL is a 95 bed Long term care facility located in Terrace BC. Located within the facility is Copper community, a 27 bed Special Care unit for clients with dementia (24 permanent, 3 respite).
- From May 1/18 to Oct 19/18, 49 out of 90 reported falls at TVL occurred on Copper community (54%). Of these 49 falls, only 3 were reported wearing hip protectors at the time of the fall.
- According to the Northern Health's Falls Prevention Strategy Clinical Practice Standard, the health care cost of a single hip fracture in Canada is \$24,400 to \$28,000; 20% of seniors who suffer a hip fracture die within one year (Scott, 2004; Herman, 2006).

#### **Objective:**

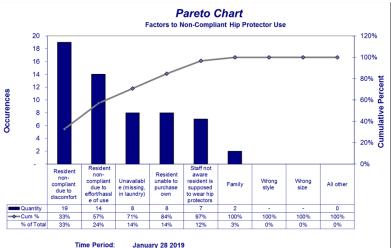
By May 2019, 100% of clients on Copper Community that are assessed as needing them will be wearing appropriate hip protectors.

# Solution:

We held improvement events (kaizen events) January 30, February 20 and April 16, 2019.

Our improvements included:

- Purchased several styles of hip protectors and created a sample hip protector cart so that they can be trialed by clients to ensure an optimal fit
- Brought in more pant-style hip protectors which are easy to use, are less prominent, and have pockets
- Adopted an Interior Health handout for staff and families about the benefits of hip protectors
- Increased staff awareness of which clients need and are wearing hip protectors
- Adopted a new process, based on new NH policy, for the nurse to recommend hip protectors based on the Scott Falls Risk Assessment Tool where scores were 7 or greater
- ✓ Created a presentation with case studies to assist with staff education
- ✓ Coached staff how to determine appropriate size and style of hip protectors  $\checkmark$  Created a visual cue to place on the dresser for clients who should be wearing hip protectors
- Identified peer hip protector champions on the Copper unit



Presented at a Family Information Night

#### **Current State:**

According to the Scott Fall Risk Tool for LTC:

- <7 = Low Risk</p>
- >7 = High Risk
- >12 = High Risk and Unsafe

At Dec 2018, of the 25 Copper Unit clients, 8 were assessed as at high risk for falls (32%):

- 5 clients had a Scott Score of 12 or greater
- 3 had a Scott Score of 7 or greater
- Out of these 8 clients, only 5 owned hip protectors
- o Only 1 was wearing them at time of check
- · Three of clients that owned hip protectors weren't wearing them due to wrong style or poor fit, making adherence difficult for both staff and client.
- · At baseline, information on hip protectors in the nursing stations was different or missing, and didn't identify local vendors.
- More clarity was needed for staff as to which style was appropriate to best suit needs for TVL clients assessed as high risk of falls by the Scott Fall risk assessment.
- · Families also didn't always have a good understanding about the different styles of hip protectors and where to purchase and view styles locally.
- In the past, TVL did not have a designated staff champion for hip protectors.
- There was no standardized process or tracking system in place to identify which TVL clients were assessed for hip protectors, who had them, which style, how many pairs, who was refusing/non-compliant.
- There was no standardized process for recommending hip protectors to high risk clients. At baseline, recommendations were found in various locations of client's chart.

#### **Results**:

Our improvements resulted in an increased use of hip protectors by those who were assessed as needing them.

Note: When one client had a change in health status and no longer required hip protectors they were dropped from the sample.



### Next steps / Sustaining the Gains:

- We will be purchasing additional hip protector samples so we can spread the falls prevention work to other units in Terraceview Lodge. We will be creating a "fall wall" that includes fall prevention supplies and resources (fall mats, hip protectors, chair alarms, algorithm, etc.)
- We will have a feature in our family newsletter about falls prevention, highlighting the new resources and to inform them about the hip protector cart. Pamphlets will also be placed in the main entrance.
- We will document falls using a "safety cross", a user-friendly data tracking tool to document falls and ensure Patient Safety Learning System (PSLS) reporting is occurring.
- We are working on a tracking system to know which clients are wearing hip protectors, what style, and specifics such as date of purchase so clients are always wearing clinically effective hip protectors.

Primary email contact: Amber.Brown@northernhealth.ca

Secondary email contact: Cheryl.block@northernhealth.ca



After we reviewed the results from the staff survey, we ordered more pant style hip protectors in a variety of sizes to ensure proper fit, style and comfort, as well as a laundry process that including labeling and communication.