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Project #37: Outpatient Rehabilitation Fall Prevention: Working Towards a Safer Journey

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Outpatient Rehabilitation Fall Prevention: Working Towards a Safer Journey

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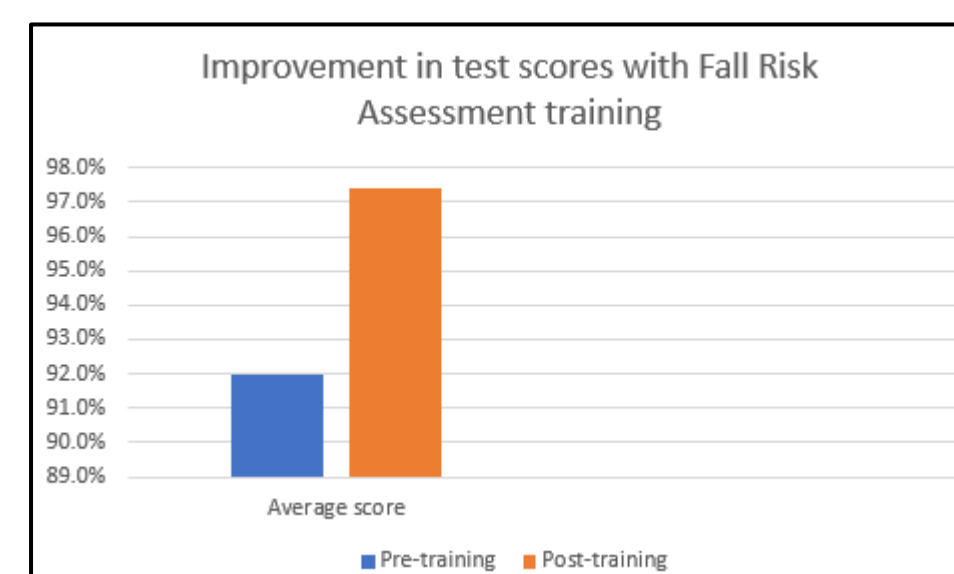
PLAN

1. Utilize the Modified STEADI questionnaire from the Centers for Disease Control with patients who are age 65 years and older or those who are referred to outpatient Rehabilitation Services with Vestibular or Neurological issues.
2. Utilize the same EPIC flowsheet as Primary Care for completion of this questionnaire so that the same yellow warning banner will be added in the patient chart if the patient is deemed a fall risk. (see Figure 1).
3. Require clinicians to follow up with an appropriate Objective balance assessment to determine the extent of the fall risk.
4. Require clinicians to designate **Fall Risk precautions** in the treatment flowsheet within EPIC when the patient is deemed increased fall risk to ensure all precautions are taken to keep the patient as safe as possible while in our clinic spaces.
5. Utilize the **Post-Fall Learning from Deficits form (LFD)** from the Clinical Quality and Safety Department as a guideline to educate staff how to more thoroughly complete the R/L form to help aid in the post-fall investigation process.

DO

- Worked with Helios to incorporate the same workflow for Fall Risk Assessment (FRA) as Primary Care. The same criteria are used to determine fall risk as recommended by the CDC. If answers to these questions indicate a patient as **Increased Fall Risk,** a yellow banner automatically flags the patient's chart (see Figure 1).
- Ensured Outpatient Rehab workflow will auto-load options for Objective balance assessment for any patient with increased fall risk to determine the extent of the fall risk (see Figure 1)
- Created an online education module in HFH University including-
  - How to complete the FRA
  - Best use of Objective balance assessments
  - Best precautions to take with high fall risk patients
  - How to complete an R/L in cases where a fall occurs.

Figure 1- Modified STEADI Questionnaire EPIC workflow in Outpatient Rehab Navigator

Total clinicians trained in Fall Risk Assessment since 4/1/22

213

Improvement in test scores with Fall Risk Assessment training

AIM

Patient falls within the Rehab Services outpatient clinics are the primary safety event reported through the Henry Ford Health R/L process. **According to the report from the American Physical Therapy Association from September 2023, "The Economic Value of Physical Therapy in the United States" the average cost savings for fall prevention programs is estimated to be $2144 per Episode of Care.** For these reasons, fall reduction was set as a goal in the Rehab Services Line Strategic Plan. This project was developed to:
- Identify patients at higher risk for falls
- Improved documentation of fall risk
- Enhance communication of fall risk precautions
- Improve R/L reporting documentation
- Minimize falls in our outpatient rehab clinics

CHECK

1. Used the monthly report from the Rehab Quality liaison to delineate the number of fall R/Ls submitted (see Figure 2)
2. Completed 10 chart reviews per clinician to determine if the FRA was completed for patients who met either the age or diagnosis criteria
3. Shared completion rates during Annual Performance reviews with each clinician. Feedback received from this process-
   - "Forgetting" was the main reason for not completing the FRA
   - Supervisors and the core members of the team gave feedback that it would be too tedious of a task to continue to do chart reviews to check for completion

ACT

- Based on feedback from the chart review process-
  - Worked with Helios to embed a SmartLink in the Therapy Assessment templates to remind clinicians to complete the FRA for all patients 65 and older to make it easier to document the results. This made significant improvements in our completion rates (see figure 3).
  - We collaborated with Business Intelligence to develop a Power BI dashboard. This dashboard shows FRA completion rates per clinic/clinician. All Supervisors, Regional Managers and the Rehab Services Director have access to this dashboard.

Figure 3- Impact on FRA Completion Rates from implementation of SmartLink within EPIC templates

MEASURES

- Performed qualitative analysis of the brief description of fall R/Ls submitted in 2019/2021 compared to those done in 2022/2023 to check for completeness based on education provided to clinician
- Send monthly reminders to all Supervisors to review the Power BI dashboard for FRA completion rates and follow up with clinicians as needed
- Review the monthly graph report developed by quality that shows the number of outpatient rehab fall R/Ls submitted by Medical Group and Macomb outpatient sites.
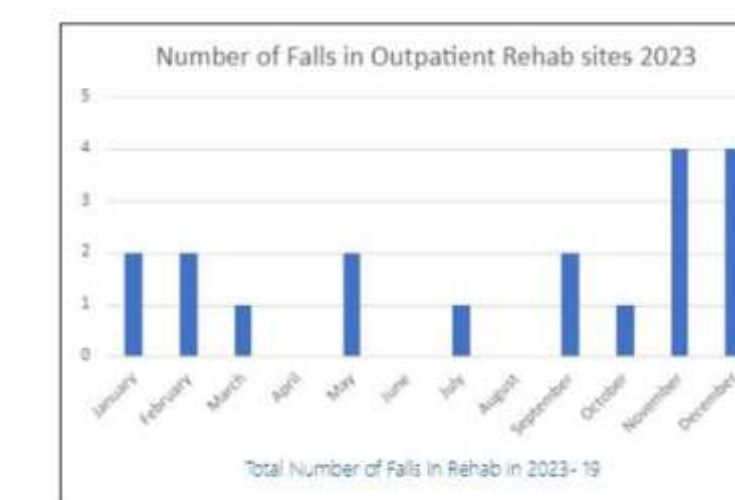- Review of University Education data to ensure the FRA modules are completed by all outpatient clinical staff.

Number of Falls in Outpatient Rehab sites 2023

Total number of Falls in Rehab 2023-19

Figure 2- Monthly reported fall RL's submitted by Outpatient Rehab staff

Fall Risk Assessment completion across HFMG and HFMH Rehab Sites in 2023

10K Template Assessments	13,946 Patients	73.35% Percentage

KEYS TO SUCCESS/LESSONS LEARNED

- The core team cared about the project. It dealt with patient safety which was important to everyone involved.
- The core team was diverse in their experience and talents
- Our leadership was invested in our success and supported our suggestions
- Our rehab team gave valuable feedback so that we could implement changes to improve the process
- We had good contributions from other system departments including Quality, University Education, and Business Intelligence
- Importance of reminders within EPIC templates
- Need for follow up loop back to primary care should an increased risk for fall be determined and further assessment and treatment are recommended

ACKNOWLEDGEMENTS