

SE1EOb – PROFESSIONAL DEVELOPMENT

IMPLEMENTING STRETCHER ALARMS IN THE ED TO DECREASE FALLS

Using the required empirical outcomes (EO) presentation format, provide an example from an ambulatory care setting, of an improved patient outcome associated with the participation of clinical nurse(s) serving as a member(s) of an organization-level interprofessional decision-making group.

Problem

NewYork-Presbyterian/Columbia University Irving Medical Center (NYP/Columbia) strives to maintain a zero-harm environment and closely monitors the patient falls rate across all areas. The NYP/Columbia Falls Committee, an organization-level interprofessional decision-making group, develops fall prevention strategies influencing all units at NYP/Columbia. The Falls Committee includes clinical team representatives from all units and various departments across the organization, inclusive of Nursing, Rehabilitation Medicine, Operations, Finance, and Strategic Sourcing. Falls Committee member Kenyatta Dean, BSN, RN, Clinical Nurse Manager (clinical nurse), Emergency Department (606045-46-48) [ED] (an ambulatory care setting), noted that the ED total falls rate per 1,000 patient visits had increased.

Pre-Intervention

May 2021:

- The ED total falls rate per 1,000 patient visits was 1.06.
- Ms. Dean maintained regular attendance at the NYP/Columbia Falls Committee meetings to identify opportunities for implementing new evidence-based practices. At the NYP/Columbia Falls Committee monthly meeting, Ms. Dean learned about the upcoming stretcher alarm implementation program. During the product presentation by Sara Lampin, Director, Strategic Sourcing (at the time), and Preston Appleby, senior analyst, Strategic Sourcing, they shared that the

new stretcher alarm was equipped with a sensor placed underneath the patient while lying on the stretcher. When the patient would attempt movement to potentially fall or stand, the sensor would activate an audible alarm to alert the nursing staff. The NYP/Columbia Falls Committee sought clinical nurses interested in implementing this new device. Ms. Dean volunteered the ED because ED patients were generally on stretchers that did not have any alarm mechanism.

- With the approval of Vepuka Kauari, DNP, RN, CEN, Director of Nursing, ED, Ms. Dean met with Mayflor Santos, BSN, RN, CEN, and Nicholas Christian, BSN, RN, CEN, Clinical Nurse Managers, ED, as well as ED clinical nurses Mareena Pazhukayil, BSN, RN, CMSRN, and Leonette Olobia, BSN, RN, CMSRN to identify how many stretcher alarms were needed for the ED. As falls champions, Ms. Pazhukayil and Ms. Olobia disseminated information on the upcoming stretcher alarm implementation program to the ED clinical nurses.

Goal Statement

To decrease the total falls rate per 1,000 patient visits in the ED at NYP/Columbia

Participants

Name/Credentials	Discipline	Title	Department/Unit
Kenyatta Dean, BSN, RN	Nursing	Clinical Nurse Manager (clinical nurse)	ED
Mayflor Santos, BSN, RN, CEN	Nursing	Clinical Nurse Manager (clinical nurse)	ED
Nicholas Christian, BSN, RN, CEN	Nursing	Clinical Nurse Manager (clinical nurse, at the time)	ED
Mareena Pazhukayil, BSN, RN, CMSRN	Nursing	Clinical Nurse	ED
Leonette Olobia, BSN, RN, CMSRN	Nursing	Clinical Nurse	ED
Vepuka Kauari, DNP, RN, CEN	Nursing	Director of Nursing	ED
Sara Lampis	Operations	Director, Strategic Sourcing (at the time)	Procurement and Strategic Sourcing
Preston Appleby	Operations	Senior Analyst Sourcing	Procurement and Strategic Sourcing

Diana Alemar, DNP, RN, AMB-BC, NPD-BC, NEA-BC, CNL	Nursing	Program Director, Nursing Professional Development	Nursing Professional Development
Nate Sherman, MBA	Healthcare Administration	Manager, Business Administration	Finance
Emmanuel Taveras, BS	Healthcare Administration	Project Manager	Nursing

Intervention

June 2021:

- Ms. Dean, Ms. Pazhukayil, and Ms. Olobia collaborated with Diana Alemar, DNP, RN, AMB-BC, NPD-BC, NEA-BC, CNL, Program Director, Nursing Professional Development, to secure the vendor for the stretcher alarms to facilitate in-services for the ED clinical nurses. Together with the vendor’s educator, Ms. Dean, Ms. Pazhukayil, and Ms. Olobia provided product and safety education to 80 percent of the ED clinical nurses on the following topics using demonstration, return demonstration, and teach-back techniques:
 - Nurse call connectivity
 - Alarm tones
 - Mute mode
 - Customer voice recording
 - AC/battery operated
 - Ports
 - Audible/visual cues

Impact Statement: Hands-on education through return demonstration and evidence-based teach back methods strengthened the ED nurses confidence and proficiency in safely operating the new stretcher alarms, thereby preventing falls in the ED.

- Ms. Dean, Ms. Santos, and Mr. Christian collaborated with Ms. Lampis, Mr. Appleby, Mr. Emmanuel Taveras, BS, Project Manager, Nursing, and Nate Sherman, MBA, Manager, Business Administration, to acquire quotes, complete purchase orders, and acquire the new stretcher alarms.

Impact Statement: Financial investment in an adequate supply of the new stretcher alarms ensured that there was an ample number of these devices to meet patient needs and help prevent falls in the ED.

July 2021:

- On July 1, 2021, the clinical nurses implemented the new stretcher alarms to keep patients safe in the NYP/Columbia ED.

○ **Key references:**

Dykes, P.C., Adelman, J., Alfieri, L., Bogaisky, M., Carroll, D., Carter, E., et al. (2019). The Fall TIPS (Tailoring Interventions for Patient Safety) Program: A Collaboration to End the Persistent Problem of Patient Falls. *Nurse Leader*, 17(4), 365-370. <https://doi.org/10.1016/j.mnl.2018.11.006>

Dykes, P.C., Burns, Z., Adelman, J., et al. (2020). Evaluation of a Patient-Centered Fall Prevention Tool Kit to Reduce Falls and Injuries. *JAMA Network*, 3(11), e2025889. <https://doi.org/10.1001/jamanetworkopen.2020.25889>

Outcome

