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Using the Team Care Model to Effectively Reduce the Incidence of Falls in Neurosurgery Patients

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INTRODUCTION

Falls are a patient safety issue that is valued by various medical institutions. Older age, past experience of falls, ADL needs assistance, impaired balance, unsteady gait, multiple medications, cognitive impairment, environmental obstacles, etc. are all causes of falls in inpatients Risk factors for events (Ambrose, Paul, & Hausdorff, 2013; Hayakawa et al., 2014). In addition, the patient's failure to perceive himself as a high-risk group for falls, family members' insufficient awareness of fall prevention, and lack of teamwork in fall prevention measures are also reasons for patients' falls (Zhuang Jiawen et al., 2017; Huang Lijing et al., 2016).

AIM

Use the team care model to establish a high-risk fall assessment model for patients to improve the quality of life of patients.

RESULTS

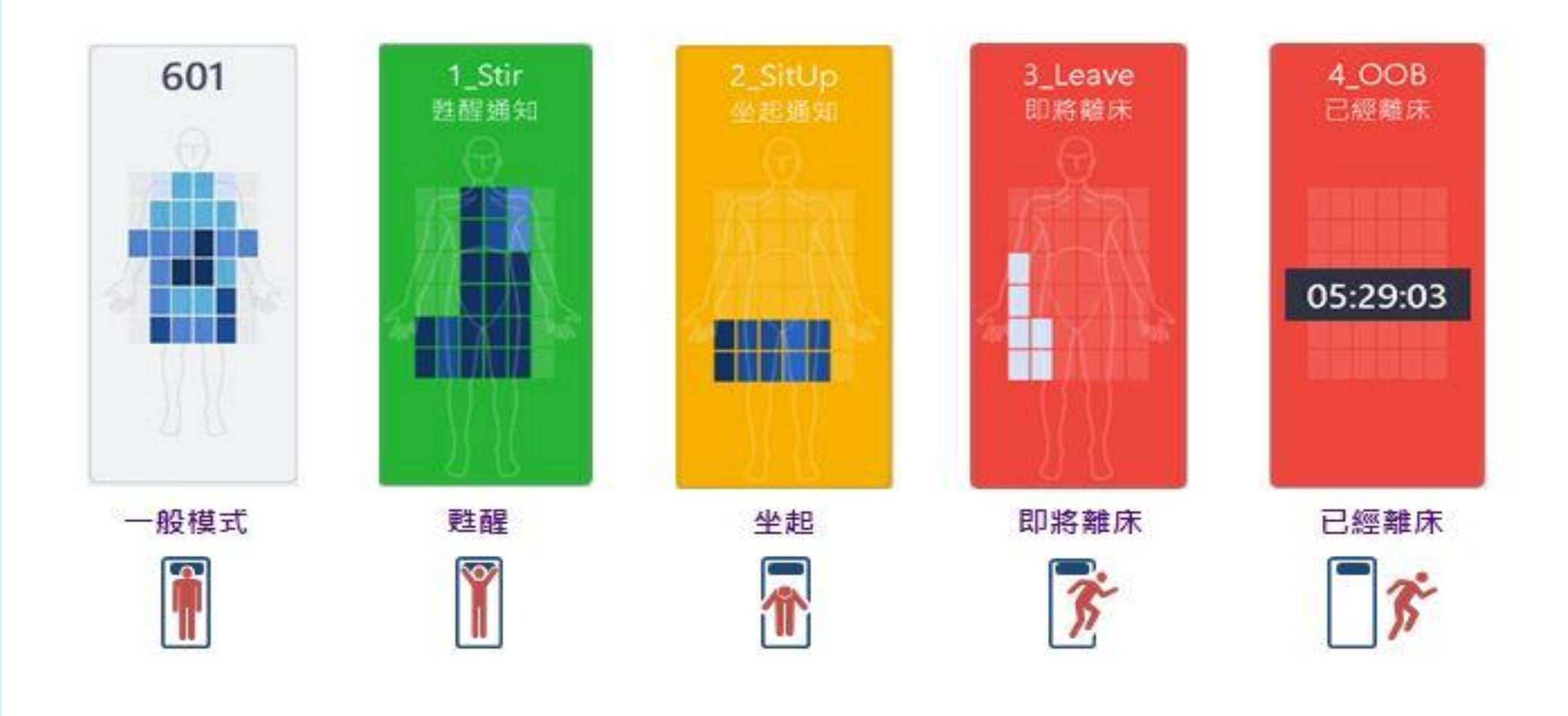
1. The cognitive ability to prevent falls increased from 55% to 100%.
2. The achievement rate of being able to tell the fall prevention measures and distinguish which high-risk group is at risk increased from 75% to 100%.
3. Improve nurse Morse fall scale assessment 77% increase 100%.
4. The bed-leaving warning mattress usage rate increased from 30% to 90%.



Anti-fall kit:
(1) Bedside anti-fall card
(2) Anti-drop measures
(3) Anti-fall reminder



Add night-time sensor lights to each bedside and aisle



bed-leaving warning mattress

METHOD

1. Improve the cognitive ability of patients to prevent falls,
2. Improve the skills of implementing high-risk fall regulations.
3. The accuracy and consistency of the falls assessment scale can improve nurses' Morse falls scale assessment skills.
4. Provide a suitable environment and equipment, use correct assistive devices, and install night-time sensor lighting.
5. Bed-leaving warning for mattress use, early detection of high-risk patients falling out of bed, and providing timely assistance.

CONCLUSIONS

With the operation of this team care model and the establishment of a high-risk fall assessment model for patients, the fall rate of patients has significantly decreased.

However, some countermeasures cannot be fully presented within the time due to the cooperation with the hospital policy process, and will continue to be tracked.

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