

A Review of Fall Risk Interventions, Implementation Strategies, Measures and Recommended Outcomes: A Literature Review and Project Recommendations

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Background: Patient falls commonly occur while hospitalized or after the transition of care. This study examines how the implementation of a fall prevention tool before discharge can aid in fall prevention after the transition of care.

Objectives: To produce a policy recommendation that can reduce falls and fall-related injuries in adults over 65 years of age through the development and dissemination of education and training.

Supporting Literature: Though there are numerous fall risk assessments available, few are to help providers assess patients prior to discharging home. The STEADI tool proves to be the most promising to help prevent falls in an outpatient setting due to the interventions associated with the differing fall risk levels.

Methods: A literature review was conducted reviewing fall prevention throughout the transition of care of older adults from an acute care setting to home. A policy was created based on research conducted and reviewed by three expert evaluators.

Results: A qualitative review of the proposed policy was completed by three expert evaluators proving that the policy recommendation addresses a needed gap in healthcare.

Conclusion: After discharge from an acute care setting patients aged 65 years and older are at an increased risk of falls. During the transition from the hospital to home, patients are susceptible to falls from medication changes and general weakness from their hospital stay. Through the creation of a policy recommending the implementation of the STEADI toolkit, agencies can equip their healthcare providers with the tools needed to provide safe transitions for their patients as they transition out of the hospital setting.

Keywords: Transition of care, fall risk tool, falls after discharge, fall risk provider education, STEADI