

Ms Sreelekha Nair
Rehab at Ang Mo Kio (AMK)

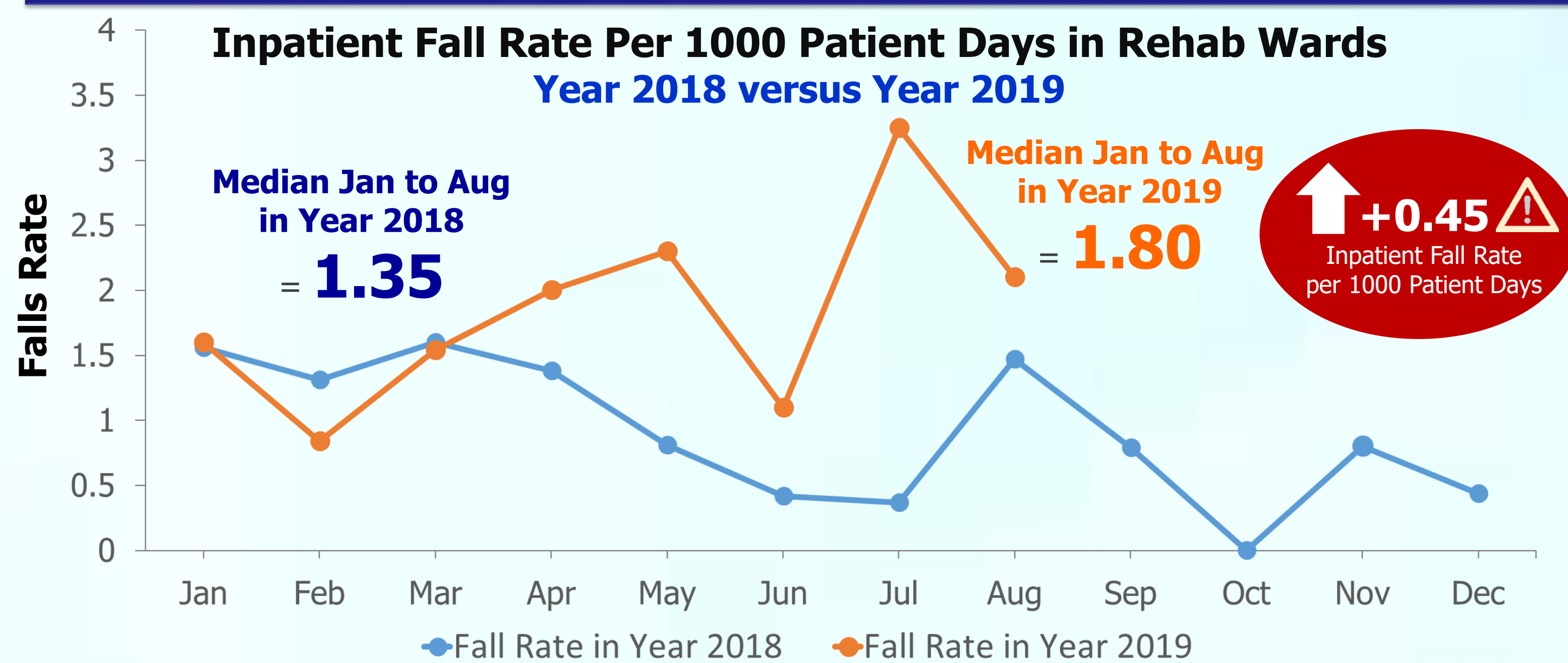
Mission Statement

To reduce inpatient fall rate in Rehab Wards from current fall rate of 1.8/1000 patient days to 1.0/1000 patients days over a sustained period

Team Members

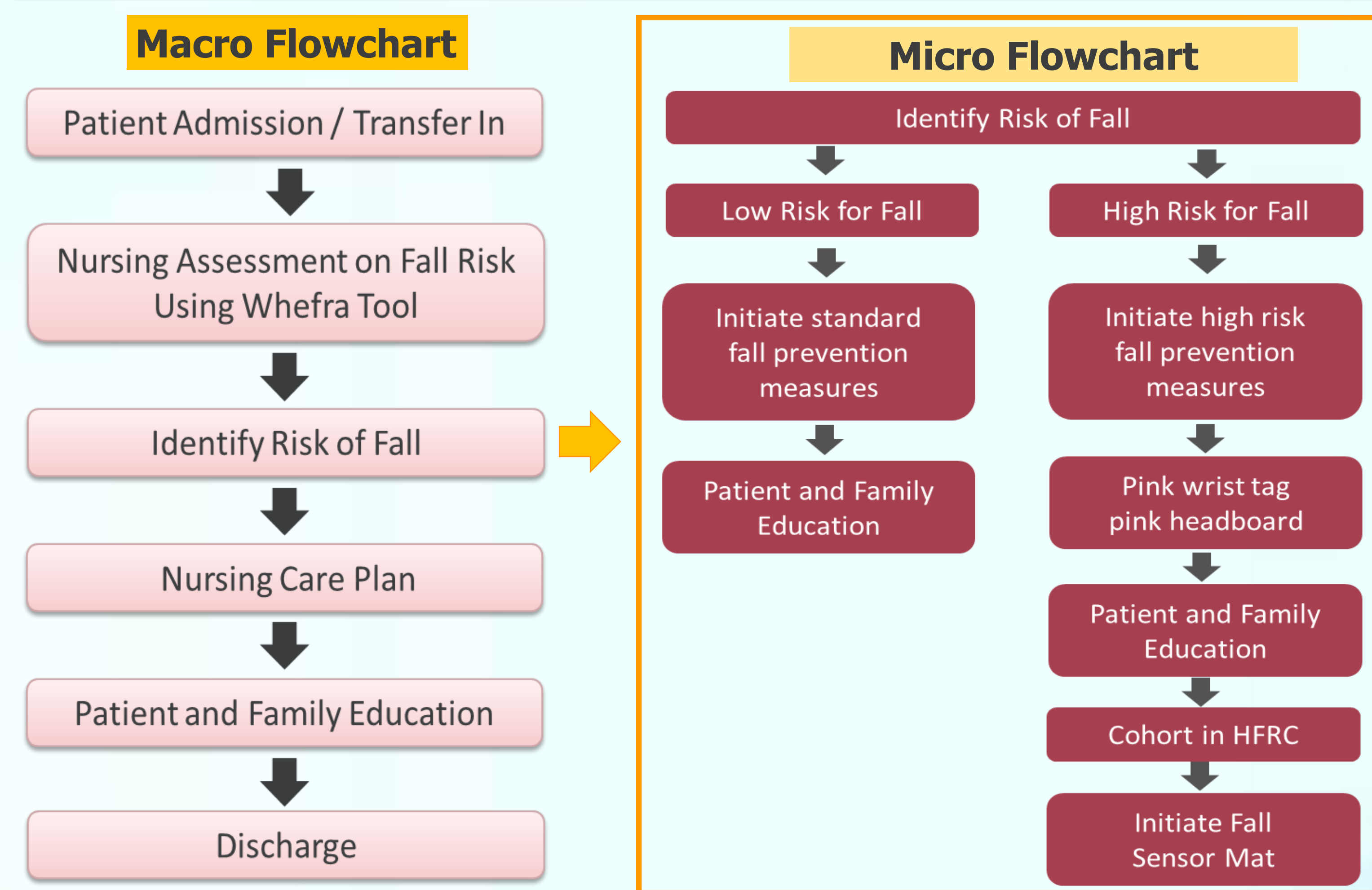
	Name	Designation	Department
Team Leader	Ms Sreelekha Nair	Nurse Clinician	Rehab @ AMK
Team Members	Mr Satria Ayu Bin Ramjudi	Senior Staff Nurse	Rehab @ AMK
	Ms Sinny Sebastian	Senior Staff Nurse	Rehab @ AMK
	Ms Kristine Daet	Senior Staff Nurse	Rehab @ AMK
	Dr Low Yee Hong	Senior Resident	Rehab @ AMK
	Ms Priya Rajendran	Senior Assistant Nurse	Rehab @ AMK
	Ms Tan Sheyin	Physiotherapist	Rehab @ AMK
Sponsor	Ms Magdalene Lim	Senior Nurse Manager	Rehab @ AMK
Mentor	Ms Goh Lee Lee		

Evidence for a Problem Worth Solving

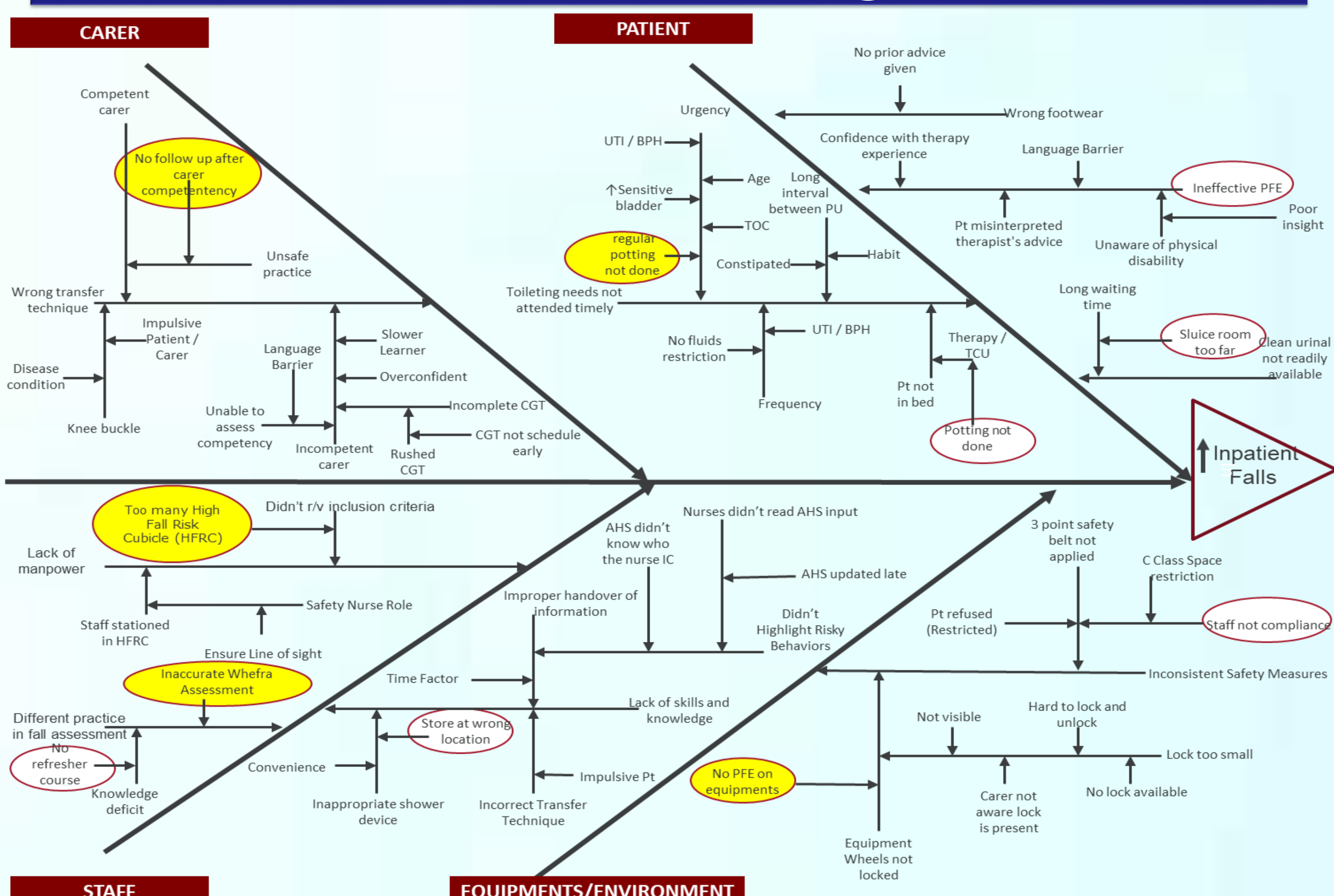


TTSH inpatient fall rate target = **1.0/1000 patients days**

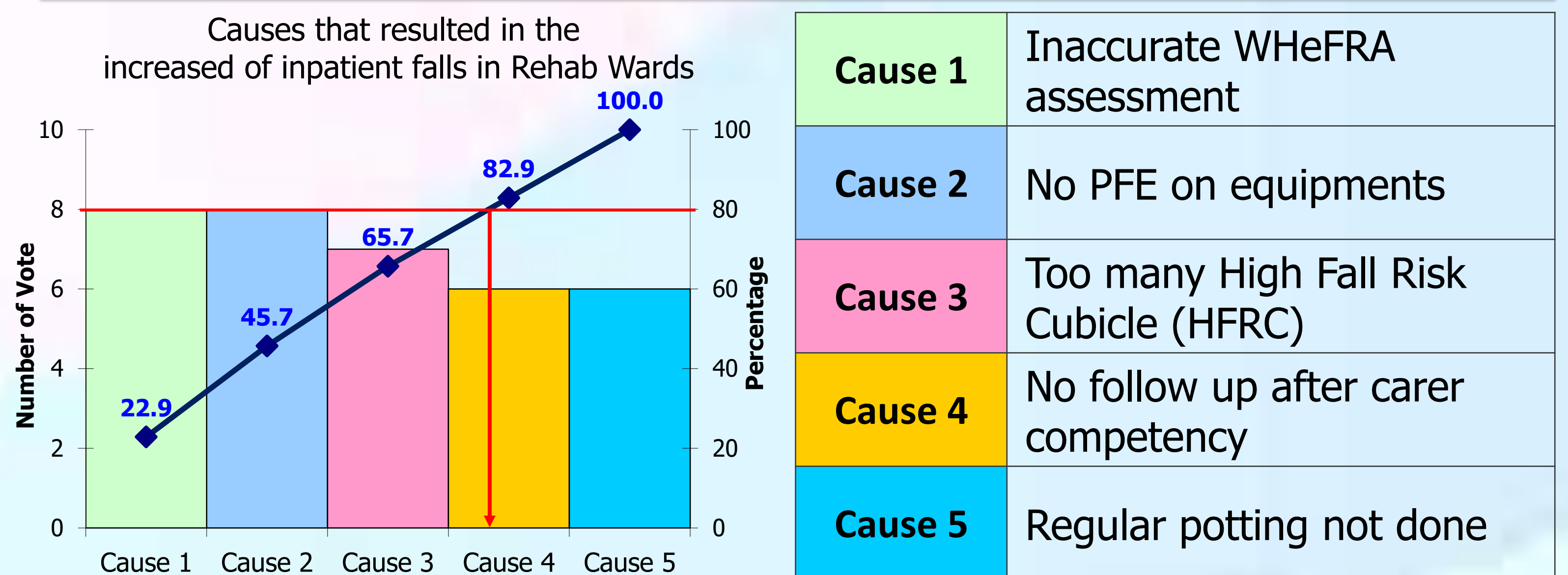
Flow Chart of Process



Cause and Effect Diagram



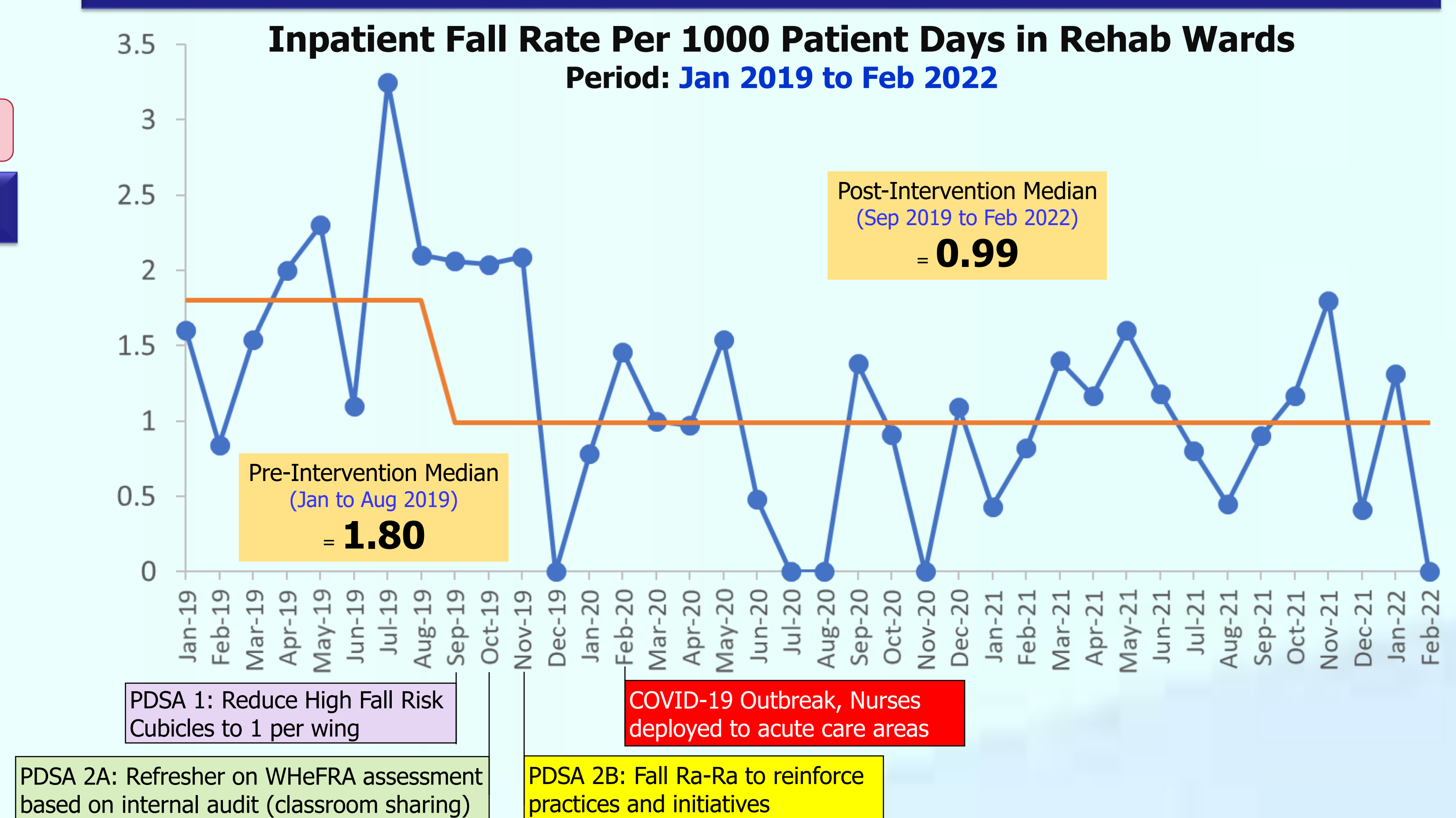
Pareto Chart



Implementation

Root Cause	Intervention
Cause 3: Too many High Fall Risk Cubicle (HFRC)	PDSA 1: Reduce High Fall Risk Cubicles to 1 per wing Implementation Date: 1 Sep 2019
Cause 1: Inaccurate WHEFRA Assessment	PDSA 2A: Refresher on WHEFRA assessment based on internal audit (classroom sharing) Implementation Date: 2 Oct 2019 PDSA 2B: Fall Ra-Ra to reinforce practices and initiatives Implementation Date: 1 Nov 2019

Results



Cost Avoidance

	Year 2018	Year 2019	Year 2020
Number of Level 3 Injury related to Falls	1	0	0
Impact	Patient stayed in hospital for another 3 weeks then transferred to Nursing Home		
Cost Avoidance	(3 weeks x 7 Days) x \$1,114 = \$23,394		

Note: Unit Cost for Inpatient Stay Per Day Per Patient in TTSH = \$1,114

Problems Encountered

1. Need to do multiple sharing to reach out to large group of nurses
2. Every healthcare workers play a part in fall prevention

Strategies to Sustain

1. Continue monthly random audit on WHEFRA documentation
2. Unit based orientation for new joiners in the department on new initiatives for compliance
3. Active screening and cohorting of high fall risk patients to fall risk cubicle
4. 6 Monthly Fall Ra-Ra