



Road to Quality Improvement

Administrator:

Ms. Melba Freeman

Falkville Healthcare Center & Rehab

10 West 3rd Street

Falkville, Alabama 35622

(256) 784-5291



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In 100 words or less, describe your Best Practice

Ensuring the safety of our residents is a high priority at our facility. But what's the best way to ensure safety? Nursing home residents may sometimes be unsteady and forgetful. Various types of alarms have been used in attempts to prevent falls and injuries. We have used these devices in the belief that they were acting in the best interests of their loved ones. New information, however, indicates that there are more effective safety methods that can be substituted for physical restraints. Over the last 10-15 years, medical research has produced strong evidence that alarms do not prevent injury, and may in fact represent a safety hazard for the resident. Along with the concern about the quality of life in nursing homes and ensuring they have a more home like environment has challenged us to stop using alarms in this building.

What problem does your Best Practice address, and what is its primary purpose?

To assure the resident maintain their dignity. To work toward an alternative fall prevention program. With alarms they tell the resident to NOT MOVE with can lead to Increase in loss of muscle tone, Pressure sores, Decrease in mobility, increased agitation, and increased stiffness, Loss of dignity, incontinence and constipation. Studies have shown that alarms did not stop falls, but rather agitate and disrupt sleep that is making them tired the next day. It is also a known fact that it makes some residents believe their clothes dryer is signal them that it is going to stop. So the resident is trying to get to the dryer before their clothes wrinkle.

What has your Best Practice accomplished and how have you been able to tell this?

All alarms in this building have been removed. The staff now walks with residents that want to get up and they walk them to dine. Alarms traditionally cause responses from staff of "Sit Down" now we say "what do you need" thus improving quality of care and life. We have also noticed less agitation among the residents with less noise in the facility from what the alarms caused.

What problems, obstacles, or challenges might other facilities face in replicating part or all of your innovation?

Getting the families on board. They did not want us to remove the alarms. I took some time for them to see that we were working to improve quality of life so they would feel more like they were at home and not in an institution. We still have some families not happy and have bells on their family members chair and shoes. One family wanted to know if he could bring a cow bell to put on his mother so the staff would know when she was up. I simply took the

material from the in-service we received through the Nursing Home Association and shared with the families. Our falls did go up when we got rid of the alarms. We started with five residents per week on each floor that had not fallen we removed the alarms and observed them for a week if anyone had a fall we would leave the alarm on them for another few weeks. We took thru the QA process each week until we had successfully removed all alarms.

What are the reasons you consider this Best Practice to be excellent and innovative?

In order to shift into the culture change and make our homes more home like and give our residents a sense of home we felt like getting rid of the alarms was a giant step towards making this happen. We feel like it has decreased agitation in our home. Staff has moved from sit down to “How can I help them get what they need” We have put our staff on a focus shifts from safety at all costs to the staff figuring out what the needs are and attempt to meet them being it walking, hungry, toileting, pain or thirsty.

