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Title: Safety Auditing as a Nursing Accountability Measure for Hospital Fall Prevention  

Abstract:  

**Background:** Preventing falls is important to patient safety. Our hospital was not consistently reducing falls to desired benchmarks. Decreasing falls through a sustainable culture change where care team members are held accountable for intervention compliance was instituted.  

**Purpose:** To decrease our hospital’s inpatient fall rates by ensuring intervention compliance by all staff.  

**Methods:** Baseline followed by quarterly Safety Audits (SA) were completed by Unit Fall Peer Leaders (UFPL) in all inpatient areas. The SA Form reflected evidence-based fall prevention interventions that are implemented based on patient’s fall risk assessment score. SA were performed prospectively allowing for real-time observation of implemented interventions and offering an educational opportunity if staff had not complied with expected interventions by the UFPL. Unit SA results are compiled and shared with the unit UFPL and leadership. Fall prevention action plans are developed to continue to support a culture of fall prevention and safety. SA results are also shared at Fall Committee meetings, Risk and Quality Committee meetings, and Shared Leadership meetings to address compliance and accountability by all hospital staff.  

**Results/Outcomes:** Eight fall prevention interventions are consistently audited. Over 12 quarters, each unit showed improved practice adherence to fall prevention interventions per patient risk assessment. From baseline to most recent audit each area showed a percent increase in compliance. In Critical Care areas there was an 81% increase in compliance with correct documentation, 48% increase with bed being low, and 171% increase in bed/chair alarm compliance. In Floor Areas there was a 50% increase in compliance with correct documentation, 20% increase with having non-skid footwear available, and 33% increase in bed/chair alarm compliance. Within the first three months of SA institution falls decreased from 3.41 to 3.05 falls/1000 patient days. Rates continued to decrease to a low of 1.35 falls/1000 patient days.  

**Implications:** Fall prevention is important for patient safety and satisfaction. Our hospital needed a sustainable culture change to ensure patient safety and reduce patient fall rates. Safety Audits as part of a culture change and as an accountability measure has proven a marked increase in intervention compliance and decrease of hospital fall rates.