



### **RNAO Best Practices: Evidence Booster**

# The Perley and Rideau Veterans' Health Centre: Impact of Best Practices on Fall Rates

#### **Background**

The Perley and Rideau Veterans' Health Centre, located in Ottawa, Ontario, Canada, is one of the largest LTC homes, with 200 beds for community members alongside 250 beds for veterans of the Second World War and the Korean War. Throughout its 119-year history, the Perley Rideau, as it is popularly known, has evolved continually to meet the needs of the people it serves.



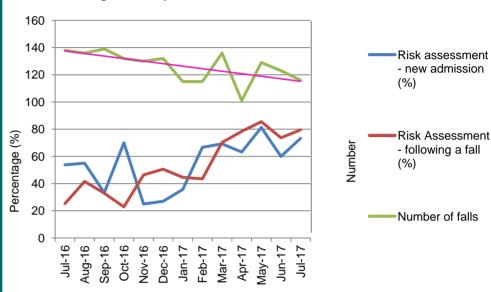
During 2016, the latest step in this evolution saw the Perley Rideau shift towards excellence in frailty-informed care which included a strategic partnership with RNAO to implement five best practice guidelines (BPGs) as a Long-Term Care Best Practice Spotlight Organization® (LTC BPSO®):

- Assessment and Management of Pain, 2013, (2<sup>nd</sup> Ed.)
- Caregiving and Screening Strategies for Older Adults with Delirium, Dementia and Depression, 2010 (two separate BPGs)
- Prevention of Falls and Falls Injuries in the Older Adult, 2011 (3rd Ed.)
- Risk Assessment and Prevention of Pressure Ulcers, 2011 (2<sup>nd</sup> Ed.)



With more than 800 staff and 391 volunteers (approximately) the Perley Rideau enables all residents to live their lives to the fullest in a safe, supported and cheerful environment.

Figure 1: Impact of Falls Assessments on Fall Rates



Source: RNAO Nursing Quality Indicators for Reporting and Evaluation® (NQuIRE®) indicators: July 2016 to July 2017

**Impact:** The number of falls risk assessments completed on admission increased by 20%. Post falls assessment increased by 54% and informed specific individualized strategies documented on the care plan to prevent future falls. Overall, the number of falls decreased on average by 2 per month within the organization (see Figure 1).

## **Practice Change**

The Falls BPG was the first to be implemented at the Perly Rideau. An interprofessional team was formed and together they analyzed the current processes related to assessing fall risk at admission, as well as post-fall management. They reviewed falls data and used this information to complete a gap analysis. The team than held a two-day kaizen event ("change for better") and had staff identify the top priority areas related to the practice gaps based on the gap analysis. Staff identified the following priorities:

- · Fall assessment/screening
- · Post-fall assessment/care planning
- · Interprofessional approach
  - o Comfort Care Rounding
  - o Falls discussed at ALL care plan meetings
  - o Standardization of communication requirements
- Engaging/informing residents and families (in-person and written materials)





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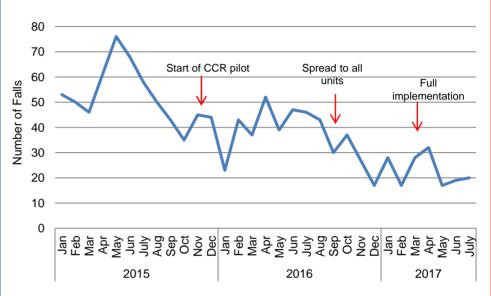
## The Perley and Rideau Veterans' Health Centre Implements Comfort Care Rounding

### **Practice Change**

To build on the success of a 2015 pilot project, the Perley Rideau continues to expand the process of checking regularly on residents in a structured and strategic way, known as Comfort Care Rounding (CCR). During Comfort Care Rounding staff must:

- 1. Introduce themselves.
- 2. Provide any resident care required
- Assess for four Ps and a T which include: Pain, Positioning, Placement of Personal items and Toileting.
- 4. Address additional comfort needs.
- 5. Ensure environmental safety.
- 6. Close the conversation with: "Is there anything else I can do for you? I have time."
- 7. Advise the resident when they expect to return.
- 8. Document.

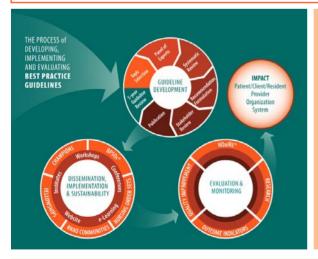
Figure 2: Number of falls after Comfort Care Rounding on 3 pilot units



(Source: RNAO NQuIRE indicators: January 2015 to July 2017)

Impact: Figure 2 depicts a 50% decrease in falls that were achieved following the introduction of comfort care rounding.

**Conclusion:** This analysis demonstrates several practice changes including the introduction of comfort care rounding, which contributed to a considerable increase in falls risk assessments with a corresponding decrease in fall rates following implementation of the RNAO BPG, *Prevention of Falls and Falls Injuries in the Older Adult, 2011* (3<sup>rd</sup> Ed.).



RNAO launched the BPG Program in 1999 with funding from the Ministry of Health and Long-Term Care in Ontario, Canada. The 53 evidence-based BPGs developed to date are transforming nursing care and interprofessional work environments in all sectors in health systems worldwide. BPSOs are health-care and academic organizations that implement BPGs and evaluate the impact of their efforts, using NQuIRE and other data systems. Currently, there are 109 BPSOs across Canada and around the globe, representing more than 550 implementation sites.

**NQuIRE**, a unique nursing data system housed in the International Affairs & Best Practice Guideline Centre, allows BPSOs to measure the impact of BPG implementation by BPSOs worldwide. The NQuIRE data system collects, compares, and reports data on human resource structure, guideline-based nursing-sensitive process, and outcome indicators.

The LTC Best Practices Program's mission is to enhance the quality of care for residents in long-term care homes and create a culture of evidence-based practice by encouraging staff in LTC homes to use RNAO's best practice guidelines. To learn more about RNAO's LTC Best Practices Program, please visit RNAO.ca/LTC or contact LTCBPP@RNAO.ca. This work is funded by the Ontario Ministry of Health and Long-Term Care. All work produced by the Registered Nurses' Association of Ontario is editorially independent from its funding source.