Development of an Evidence-Based Pediatric Fall Prevention Program
Carole Cooper, RN, BSN, MHA, BC, CPN, CAN
ccoooper@childrenscentralcal.org
Children’s Hospital Central California

**Problem:** Efforts to reduce the risk of patient harm resulting from falls has created many challenges for pediatric hospitals. The Nursing Research Committee (NRC) was asked to develop an organizational evidence-based pediatric fall prevention program. The Co-Chairs choose to use the project to promote use of nursing research and evidence-based practice to support program development.

**Evidence:** The NRC performed an extensive literature review in search of pediatric-focused fall risk factors and risk assessment tools. There is extensive literature published on adult patient falls that has provided research-based fall assessment tools and best practice fall prevention guidelines for hospitalized adult patients. There were no identified studies on hospitalized pediatric patients. Fall-related Occurrence Forms collected from October 1, 2003, to December 31, 2005, were reviewed along with their respective patient charts to identify the epidemiology of pediatric hospital falls to include information about characteristics of patients who fall, circumstances surrounding falls, and fall-related injuries.

**Strategy:** To identify appropriate interventions specific to the patient population, additional information was needed to identify variables increasing a patient’s fall risk. The NRC developed a Falls Assessment Form to identify variables that have been shown in the literature to contribute to patient falls. The NRC completed a pilot study, a prospective, descriptive chart review, to validate its Falls Assessment Form.

**Practice Change:** An evidence-based Fall Prevention program was initiated hospital-wide.

**Evaluation:** The NRC performs ongoing data collection and analysis to evaluate the effectiveness of the fall prevention program in reducing the rate of falls.

**Results:** There has been a slight increase in falls, 0.2/1000 patient days since implementation of the program; which may be the result of increased reporting of falls.

**Recommendations:** The NRC gained knowledge in the use of evidence to support nursing practice and became aware of the challenges involved with implementing a hospital-wide program.
References


