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Redesigning fall and fall injury prevention strategies for stroke patients

Falls and fall-related injuries remain a frequent complication of strokes. Fall and injury prevention based on fall risk scores and level of fall risk, such as low, moderate or high, is insufficient, requiring that clinicians redesign fall prevention programs based on patient's individualized fall and injury risk factors. Accepting that stroke is one of the leading causes of disability world-wide, all efforts should be made to protect these patients from falls and fall-related injuries. It is well known that falls result in fear of falling, greater disability and even loss of life. While the evidence for stroke-specific fall prevention interventions is still emerging, clinical experts must rely on clinical expert knowledge to conduct stroke-specific fall risk assessment needed to individualize fall prevention plans of care, while assuring injury risk and prevention strategies are included. This population-based approach presented in this lecture redesigns traditional universal programs in order to enhance infrastructure and capacity to individualized fall and injury risk factors and history, and protection from injury should a fall occur. Increased attention is essential to protect stroke patients from fall-related injuries. Clinical expertise is essential for safe practices for these patients. Equipment use specifically designed to reduce trauma during a fall, such as hip protectors and floor mats, must be reliably integrated into patient care. Even though acute care units have diverse patients, known fall and injury risk factors specific to type and severity of stroke must be implemented and tested for effectiveness.

Biography

Dr. Patricia Quigley, PhD, ARNP, CRRN, FAAN, FAANP, Nurse Consultant, both a Clinical Nurse Specialist and a Nurse Practitioner in Rehabilitation. Her contributions to patient safety, nursing and rehabilitation are evident at a national and international level – with emphasis on clinical practice innovations designed to promote elders' independence and safety. For over 40 years, Dr. Quigley has practice in the field of rehabilitation nursing, 32.5 years with the Veterans Administration. Her leadership resulted in redesign measurement of patient safety indicators for falls and fall injuries that link organizational unit and patient-level variables that are relevant and evidence-based. She has conducted large-scale studies to examine trends and cost savings on national interventions to reduce harm from falls. Dr. Quigley has served as principal or co-investigator in 35 research studies, totaling over \$7.5 million. She has a track record of interdisciplinary research with health economists, epidemiologists, and statisticians for population-based outcomes research. She has co-authored and served as associate director for 11 VISN 8 Patient Safety Center of Inquiry center grants from 1999-2016, totaling over \$13 million. She has authored, co-authored over 60 peer-reviewed manuscripts and over 50 non-peer reviewed manuscripts, book chapters, products and media works. She provides on going consultation to the nursing staff, quality management, and patient safety coordinators for management of complex patients at risk for falls.

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