Implementing an Enclosure Bed: Safety and Savings

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Objective: To reduce fall rate and constant companion use for patients at high risk for falls on the General Medicine (9-7) unit and Tr[a]nsplant/ Liver Service (9WP) unit

Method: This quality improvement project was started using the Plan-Do-Study-Act model. Evidence-based research was reviewed, along with a site visit to Bridgeport Hospital where the Soma™ bed has been implemented. Upon decision to pilot the Soma™ bed, collaboration with internal and external colleagues from various disciplines was used to help implement and educate all direct care staff on the bed's indications, contraindications and practical usage. These disciplines included Nursing Leadership, the Fall and Restraint Committees/ Champions at YNHH, Service Line Educators, Service Response Center, LIPs, and Materials Management. A Standard Operating Procedure was developed and a survey process was implemented. Educatidnal packets were developed for both units and all the staff were inserviced prior to the implementation of the Soma Safe Enclosure Bed. Weekly meetings with the implementation team and leadership were set-up to monitor the pilot phase. Data collected during the pilot phase included number of beds used, fall rate and constant companion use as well subjective data from staff; patients and their families about the bed and its purpose. At the end of the 2 month pilot and its evaluation, Yale New Haven Hospital (YNHH) adopted the use of the enclosure bed throughout the house.

Results: During the pilot phase, 9-7 and 9WP reduced their falls from a FY 2010 baseline average of 4.65 to 2.42 falls per 1,000 patient days. According to the surveys collected from both units, the staff found the new restraint effective in increasing patient safety. The total number of constant companion hours was reduced by 1,948 hours while the beds were in use on these units. Since implementation of the enclosure bed, there has been an estimated savings of$21,530 when comparing the cost of a sitter hourly to the cost of the bed daily.

Discussion: According to Aleshire (2009), "national averages indicate that acute care general hospitals experience approximately 1,000,000 fall occurrences, per year" (para. 1). National Patient Safety Goal #9 (Reduce the risk of patient harm resulting from falls) is an important target in reducing morbidity and mortality. The Soma™ bed has demonstrated its ability to prevent falls, reduce said morbidity and mortality, decrease constant companion use and prevent caregiver, patient and family distress from restrictive restraint methods. It has ensured an en[v]ironment that protects the rights, dignity, and physical integrity of the patient, to the fullest extent possible.

Implication for the YNHH Health System: The pilot phase resulted in positive outcomes on regulatory requirements, financial responsibility and patient safety and comfort. This is a simple project with dramatic results. The implementation of the pilot project was easy to replicate and implement to mul[t]iple populations within the Yale New Haven Health System.

References:
Risk. Health and Fitness: Healthcare Systems.
Aleshire, B. (September 2009). Health Care Success-How to Reduce Your Hospital Fall