

Talking Points for Inpatient Staff Educating Patients and Families about Falls

These talking were designed to help staff to provide falls education to patients and families. They were developed by the Falls Committee, with input from the hospital's Family Partnership Coordinators. For questions or concerns, please contact the Falls Committee Chairs Lynne Hancock at <u>lynne.hancock@childrens.harvard.edu</u> or Megan Geno at <u>megan.geno@childrens.harvard.edu</u>.

In addition, we recommend providing daily verbal reminders to families about their child's fall risk as well as correction of behaviors that could lead to a fall (e.g. "I see the crib rail is down. Please remember to keep it all the way up for Paige's safety.").

Talking points for inpatient staff speaking with families

I wanted to take a few minutes to speak with you about some ways we can work together to keep your child from falling while they are in the hospital. Is now a good time to talk about this? (IF YES, PROCEED; IF NO, SCHEDULE A TIME TO COME BACK). Great!

- All patients, like your child, are at risk for falling while in the hospital. It's because they are in an unfamiliar place and around medical equipment. The risk for falling is also higher in children (TRY TO MAKE THESE PERSONAL TO THE FAMILY WHEN YOU SAY THEM):
 - Who have certain health conditions or are weak (e.g. "Emily's leukemia can make her weaker than normal.")
 - Who are taking medication (e.g. "Robert is on [insert name of medicine] and this can cause dizziness, increasing his risk for falls.")
 - Who have a developmental delay or sensory issues (e.g. "Because Rebecca has Down syndrome, she is at a greater risk for falling while here and not feeling well.")
 - Have trouble staying in bed (e.g. "We know James is an active 5 year old and doesn't want to stay in bed! But this can increase his risk of falling, especially if he trips on something in the room, like medical equipment.")
- Falling can be dangerous. We will do everything we can to keep your child from falling, and we ask for your help to keep your child safe.

It's important for everyone to work together to keep your child from falling. I'd like to tell you about some important ways we do this and how you can help.

Please note: These ages and stages are general recommendations. We recommend that you use clinical judgment in determining the right tips based on the child's age and developmental ability.

For infants 0-12 months & toddlers 1-3 years

- 1. Keep the crib rails all the way up and keep the crib at the lowest height.
- 2. Put the crib top down if your child can stand even if you are in the room with your child.
- 3. **Never leave your child alone** outside the crib. Please call a nurse if you want help getting your child back in the crib before you leave.
- 4. Please do not let your child jump or climb, or play on the parent sleep chair.

For preschool 3-5 years and gradeschoolers 5-12 years

- Do not let your child jump or climb, or play on the parent sleep chair.
- We have hard, slippery floors here in the hospital so we will give your child **grippy socks or skid-proof slippers** to wear. Please encourage them to wear them.

For teens 12-18 and young adults 18-21+

- Please call your care team when your child wants to get out of bed. We are here for you 24 hours a day, 7 days a week to help with *anything* you need. This includes helping to take your child to the bathroom or for a walk.
- Please call us each and every time. You are never a bother.
- If you find that someone is not available quickly enough to help, please let your nurse know and we will try to make sure we respond faster.
- Make sure your child wears grippy socks or skid-proof slippers.

Here is **our Family Education Sheet for you to read** about fall safety. I know this is a lot of information, and I want to make sure I explained everything well. Can you tell me some

things we can do to keep your child from falling while in the hospital?

Talking points for inpatient staff speaking with older children

I wanted to take a few minutes to speak with you about some ways we can work together to make sure you don't fall while you're in the hospital. Is now a good time to talk about this? (IF YES, PROCEED; IF NO, SCHEDULE A TIME TO COME BACK). Great!

- All patients are at risk for falling while in the hospital. It's because you are in an unfamiliar place and around medical equipment. The risk for falling is also higher in if you (TRY TO MAKE THESE PERSONAL TO THE PATIENT WHEN YOU SAY THEM):
 - Have certain health conditions or are weak (e.g. "Because of your leukemia, you're weaker than usual.")
 - Are taking medication (e.g. "Because you're on [insert name of medicine] and this can cause dizziness, it increases your risk for falls.")
 - Have sensory issues
 - Like to get out of bed a lot (e.g. "We know that you like to get out of bed a lot, but this can increase your risk for a fall since you're not feeling well.")

- It's important for everyone to work together to keep you from falling. I'd like to tell you about some important ways we do this and how you can help.
 - Please always call a member of your care team for help when you're ready to get out of bed. This includes getting up, getting to the bathroom, taking a shower or going for a walk.
 - Please call us each and every time and we will come help you. You are never a bother.
 - If you find that someone is not available quickly enough to help, please let your nurse know and we will try to make sure we respond faster.
 - Our floors are hard and slippery. We'll give you nonslip socks to wear. Please also make sure that your clothes don't drag on the floor. It could cause you to trip.

I am going to give you our Family Education Sheet for you to read about ways fall safety.

I know this is a lot of information, and I want to make sure I explained everything well. Can you tell me some things you can do to help keep you safe from falling while in the hospital?