**Aim: Reduce fall rate from 2.82 to less than 2.5 by June 2014**

**Lead Measure:**
- Percent compliance to falls bundle

**Lag Measures:**
- Number of days between falls
- Number of days between falls with Harm
- Fall rate (# of falls per 1000 inpatient patient days)

**Results**

**IP Fall Rate Per 1000 Patient Days**

**Days Between Falls with Harm**
As of September 26, 2014 - 172 days between falls with harm!

**Falls Bundle/Fall Reduction Strategies**
- House wide education
- Ceiling tiles: CALL - don’t Fall
- Signed patient safety agreements
- Yellow gowns for high risk patients
- Nurse manager fall bundle audits
- Weekly nurse manager accountability sessions
- All physicians, volunteers and ancillary staff were educated to monitor for patients in yellow gowns getting up or walking unassisted
- All high risk patients are required to have a bed/chair alarm that activates at the nurses station
- Increased awareness hospital-wide of the Falls Reduction Program