Facts about the Preventing Falls Project

The Joint Commission Center for Transforming Healthcare’s seventh project aims to prevent falls that occur in health care facilities and result in injury to patients. Hundreds of thousands of patients fall in hospitals every year. Between 30 to 35 percent of patients who fall sustain an injury.¹⁻⁶ Each of these injuries, on average, add 6.3 days to the hospital stay.⁵ Cost for a fall with injury is about $14,056.⁷,⁸

Falls have been identified by the Centers for Medicare & Medicaid Services (CMS) as an event that is preventable and should never occur. CMS has also identified “falls and trauma” on its list of Hospital Acquired Conditions (HAC) for which reimbursement will be limited, specifically for falls that result in fractures, dislocations and intracranial injuries. Hundreds of thousands of patients fall in hospitals every year.

New measurement systems and solutions from the Joint Commission Center for Transforming Healthcare Preventing Falls project were able to reduce the rate of patient falls by 35 percent and the rate of patients injured in a fall by 62 percent. If the approach is translated to a typical 200-bed hospital, the number of patients injured in a fall could be reduced from 117 to 45 and avoid approximately $1 million in costs annually through falls prevention efforts. Similarly, a 400-bed hospital could reduce falls with injury by 133 and expect to avoid $1.9 million in costs annually.

The hospitals that worked on this project ranged from a 178-bed community hospital to a 1,700-bed academic medical center. All of the organizations used Robust Process Improvement® (RPI®) to identify causes and develop solutions to prevent patient falls. RPI® is a fact-based, systematic, and data-driven problem-solving methodology that incorporates tools and concepts from Lean, Six Sigma and change management.

The Preventing Falls Targeted Solutions Tool® (TST®) is now available. The TST® is an online resource that provides a step-by-step process to assist Joint Commission-accredited health care organizations in measuring performance, identifying barriers to excellent performance, and implementing the Center’s proven solutions that are customized to address specific barriers. TST® modules are now available for improving hand hygiene, hand-off communications, and safe surgery. Accredited organizations can access the TST® and solutions free of charge on their secure Joint Commission Connect extranet. Staff at Joint Commission accredited organizations can request access via the website.

Project team
Barnes-Jewish Hospital, Missouri
Baylor Health System, Texas
Fairview Health Services, Minnesota
Kaiser Permanente, California
Memorial Hermann Healthcare System, Texas
Wake Forest Baptist Medical Center, North Carolina
Wentworth-Douglass Hospital, New Hampshire

For more information visit the Center website.

² Fischer, I., Krauss, M., Dunagan, W., Birge, S., Hitcho, E., Johnson, S., Fraser, V. (2005). Patterns and predictors of inpatient falls and fall-related injuries in a large academic hospital. Infection Control & Hospital Epidemiology, 26(10), 822-827

