

Post-inpatient falls assessment: improving junior doctors' knowledge and confidence using simulation training

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Background

Inpatient falls are the most common adverse patient safety incidents in hospitals in the UK¹. The assessment and management following an inpatient fall is often the responsibility of the most junior doctor on call, particularly out of hours. With frequent omissions in the assessment and management of these patients, the **aim** of this study was to:

Improve the knowledge and confidence of foundation doctors in the assessment and management of inpatient falls using simulation.

Method

Preliminary analysis identified common areas of weakness which formed the key themes of the simulation scenario.

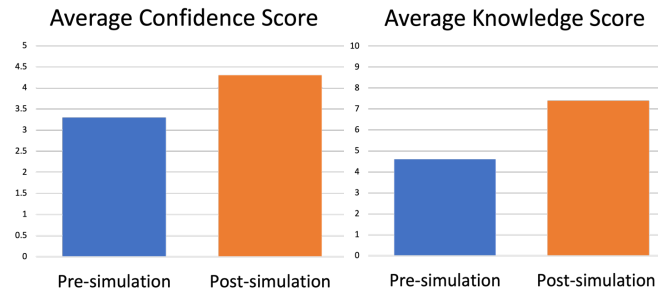
Pre-simulation knowledge and confidence surveys consisting of 10 multiple-choice questions and Likert scales were distributed.

9 foundation doctors participated in a high-fidelity inpatient fall simulation with a patient actor (see below right).

Post-simulation knowledge and confidence was re-assessed.

Results

Post-simulation confidence levels improved in all domains measured ($p = 0.05$) with an overall rise in average confidence levels from **3.3/5.0** to **4.3/5.0** ($p = 0.007$). Average post-simulation knowledge score increased from **4.6/10** to **7.4/10** ($p = 0.01$).



Domains in which the greatest improvements in knowledge and confidence were seen included:

Moving & Handling

Neurological Observations

Assessment of Suspected Hip Fractures

Escalating Concerns

"Very useful for on calls"

"I felt confident managing the situation"



"This teaching made a huge difference"

"... more comfortable reviewing medications"

Conclusion & Next Steps

- 1) The use of simulated patients improves the knowledge and confidence of foundation doctors in the assessment and management of inpatient falls.
- 2) The pilot project is due to be expanded with plans to incorporate this simulation scenario into the local **foundation teaching programme**.
- 3) An inpatient falls talk has also been featured within the local **induction programme** to all junior doctors starting at the Trust this August.

Stage 1: Assessment

Assessment of patient on floor with head injury and possible hip fracture

Stage 2: Moving & Handling

Assist MDT in transferring patient back to bed using appropriate methods

Stage 3: Management

Interpret x-rays and manage SDH including reversing anticoagulation