

NICE CATCH! An Evidence Based Safety Program for Preventing Postpartum Infant Falls

Sharon Kurtz, BSN, RN

CLINICAL CONCERN

- Approximately 600-1,600 newborn falls occur annually in the United States
- Infant falls can result in serious injury
- Many risk factors can contribute to infant falls
 - Exhaustion
 - Immobility
 - Anesthesia
 - Analgesia
 - Prior near-miss catch of unsafe sleep

PICO QUESTION

Will the implementation of a nurse-led, evidence-based safety program preventing postpartum infant falls reduce the number of falls and/or injuries and lead to better patient safety and parental satisfaction compared to the current standard of care?

REVIEW of the LITERATURE

Databases and Internet Sources Searched

- CINAHL, MEDLINE, ACADEMIC SEARCH COMPLETE
- Professional Organization Websites
- Google, Google Scholar
- Clinical Practice Guidelines

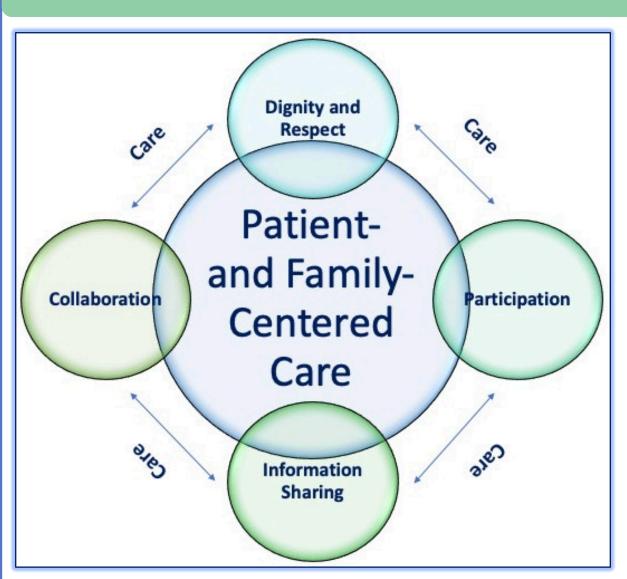
Keywords

- "infant falls and hospitals"
- "postpartum infant falls"

Advanced Search Parameters

- Published within last five years
- English language only

THEORETICAL FRAMEWORK and SAFETY BUNDLE INTERVENTION



Incidences

and

Outcomes

Evidence-

Based

Strategies

Risk

Factors

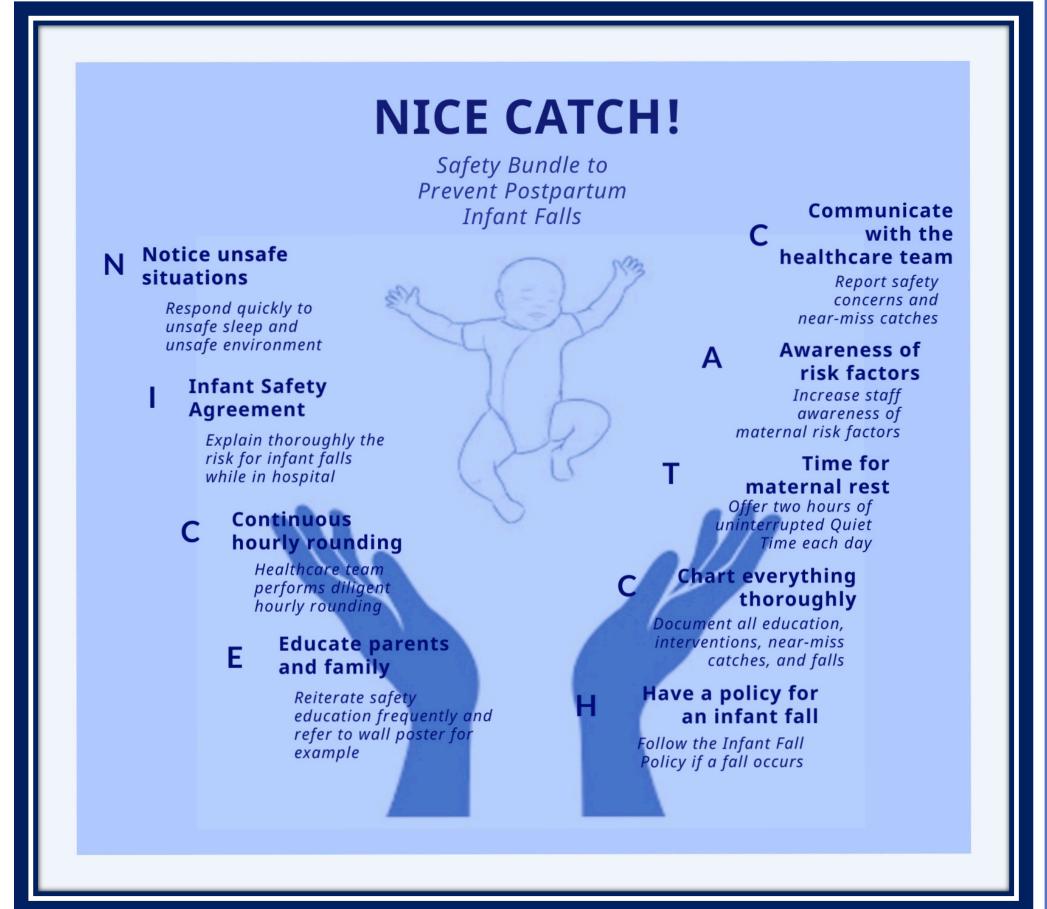
THREE

THEMES

EMERGED

Incorporating care within the Patient- and Family-Centered Care Model

- Dignity and respect will be maintained throughout the postpartum hospital stay
- Participation from the family in all infant care will be anticipated and encouraged
- Information sharing will be offered between the healthcare team and the infant's family
- Collaboration will occur between the healthcare team and the family regarding the infant's care plan and decision-making



CONCLUSIONS/DISCUSSIONS

An evidence-based safety program has the potential to improve the mother-infant couplet experience through decreasing fall rates and/or injuries and increasing parental satisfaction of postpartum care





Hospitals should consider using an evidence-based safety program to prevent postpartum infant falls



REFERENCES

- Carr, H., Crotto, J., Demirel, S., Fisher, S., Logue, L., Marcott, M., Miller, L. R., Mochnal, M., & Scheans, P. (2019). A system-wide approach to prevention of inhospital newborn falls. *MCN: The American Journal of Maternal Child Nursing*, 44(2), 100–107.
- Hodges, K. T., & Gilbert, J. (2015). Rising above risk: Eliminating infant falls. *Nursing Manage*ment, *46*(12), 28-32.
- Hughes Driscoll, C. A., Pereira, N., & Lichenstein, R. (2019). In-hospital neonatal falls: An unintended consequence of efforts to improve breastfeeding. *Pediatrics*, 143(1), 1–5.
- Janiszewski, H. (2015). Reducing the risk of baby falls in maternity units. *Nursing Times*, *111*(28-29), 21–23.
- Lipke, B., Gilbert, G., Shimer, H., Consenstein, L., Aris, C., Ponto, L., Lafaver, S., & Kowal, C. (2018). Newborn safety bundle to prevent falls and promote safe sleep. *MCN: The American Journal of Maternal Child Nursing*, *43*(1), 32–37.
- Miner, J. (2019). Implementation of a comprehensive safety bundle to support newborn fall/drop event prevention and response. *Nursing for Women's Health*, 23(4), 327-
- Mulligan, C. S., Adams, S., Tzioumi, D., & Brown, J. (2017). Injury from falls in infants under one year. *Journal of Paediatrics & Child Health*, *53*(8), 754–760.

CONTACT INFORMATION

Sharon Kurtz, BSN, RN, CLC, C-EFM, RNC-OB, RNC-MNN, RNC-LRN

Kurtz_Sharon@roberts.edu