

Reducing the Incidence of Falls

The Current Situation:

45% of patients who fall in the hospital have malnutrition,¹ which is significantly associated with reduced mobility.²



Collaborative Leadership

How can you and your care team reduce the incidence of falls?

Work together with peer clinicians to incorporate nutrition therapy into your system's fall prevention policies and procedures.

Nutrition intervention is associated with weight gain and reduced frailty.³



Nutrition Intervention

Rapid nutrition intervention is important to your patients' recovery.

Nutrition care has been shown to positively affect patients' nutritional status, thus reducing the risk of falls. Some specific evidence-based guidelines from ESPEN* are:

- In frail elderly, use oral nutritional supplements to improve or maintain nutritional status.⁴ (Strength of Evidence A)
- In geriatric patients after hip fracture and orthopedic surgery, use oral nutritional supplements to reduce complications.⁴ (Strength of Evidence A)



^{*}ESPEN = European Society for Clinical Nutrition and Metabolism



Enhanced Procedures

How can your hospital's procedures be enhanced to help reduce the incidence of falls?

- 1 Recognize and diagnose all patients at risk of malnutrition
 - Identify patients at risk of falling within 24 hours with facility-specific screening tools, like the Malnutrition Screening Tool.
 - Utilize and maximize your nutritional screening process to help identify patient targets.
- ig(2ig) Rapidly implement nutrition interventions and continue monitoring your patients
 - Enhance policies to include automatic nutrition intervention for patients at risk of malnutrition.
- (3) Develop a discharge plan for patient nutrition care and education
 - Empower nurses to provide patient education, outpatient instructions, and other resources for continued compliance with the nutrition care plan post-discharge.

Visit **malnutrition.com** for more information on the simple steps to help reduce the incidence of falls.

References: 1. Bauer JD, et al. J Hum Nutr Diet. 2007;20:558-564. 2. Vivanti A, et al. J Nutr Health Aging. 2011;15:388-391. 3. University of Texas at Austin School of Nursing, Family Nurse Practitioner Program – Academic Institution 2006. 4. Volkert D, et al. Clin Nutr. 2006;25:330-360. 5. Jensen M, Hessove IB. Nutrition. 1997;13:422-430.









