A person-centered approach to injurious fall reduction

Many hospital fall prevention programs focus primarily on falls caused by environmental factors, such as clutter, slips and trips, and improper footwear, even though most injurious falls are caused by intrinsic risk factors that travel with the person. These programs often restrict the mobility of persons who would be strengthened by walking or other activity.

The unintended consequence: The hospitalized person’s functional and mobility skills decline, increasing the risk of an injurious fall and other hospital-acquired conditions, with potentially devastating physical, psychological, and financial outcomes.

The Hendrich II Fall Risk Model takes a different approach. By assessing eight scientifically valid risk factors known to predict falls, the model enables your team to efficiently target the modifiable root causes of the person’s fall risk with specific interventions that also prevent hospital-acquired complications and prepare the person for a healthier return to home and community.
The model, care pathways and care plans provide the content you need:

1. Assess 8 risk factors that matter.
2. Evidence-based care pathways are available for each risk factor.
3. Care plans can be adopted or edited for your EHR or practice.

Innovative work is underway with major platforms to auto populate the Hendrich II Fall Risk Model® with existing chart data to improve reliability and save nursing time.

Steps 2 and 3 can become a “pick list” in your EHR or you can customize based on current or desired practice.

Hendrich II Fall Risk Model validation

To create the model, more than 600 variables were evaluated in fall and non-fall patients to scientifically identify 8 factors necessary to predict falls.

The model is backed by more than 20 years of research and experience, appearing in more than 300 peer-reviewed articles and 30 validation studies in the U.S. and abroad.

A recent study of almost 215,000 patients, over a 3-year period, confirms sensitivity of 78.72% to predict falls. The negative predictive value is 99.9%, confirming fall potential is not missed.


Isn’t it time to rethink your fall risk model?

To learn more, please visit us at: www.hendrichfallriskmodel.com or call us at 866.653.6660. or contact:

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A license agreement grants access at all sites of care within your system.

Evidence-based care pathways and plans are ready to address root causes of fall risk.

Unlimited, contact-hour approved online education for registered nurses, with nurses teaching nurses from patient scenarios, and a short 10-minute module for ongoing competency assessment:

- An interface for your learning management system (LMS) or use our LMS.
- Customized reports to track completion and competency.
- Education module for assistive personnel also available.

Toolkits to support rapid adoption and sustainment of the program, including methods, techniques and tools for change management, quality improvement/project management, and the creation of a culture of safety.

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