

YEAR DEVELOPED

1987; 1995

PURPOSE

To facilitate determination of an individual's risk for falls and initiate a prevention protocol.

VARIABLES OF INTEREST

Intrinsic characteristics related to risk of falls in the domains of patient disease and physiological control of instability.

ORIGINAL POPULATION

A sample of 338 inpatient records, 102 from patients who experienced a fall and 236 from patients who had not fallen.

QUESTION FORMAT

The instrument is comprised of assessment and intervention sections. In the assessment section, the rater places a checkmark next to any of the seven patient disease and physiological control of instability variables present in the patient. Variables include: confusion/disorientation, depression, altered elimination, recent history of falls, nonadaptive mobility/generalized weakness, dizziness/vertigo and primary cancer diagnosis. Once scores are summed, the rater identifies the appropriate score-based intervention schedule to be implemented for the patient. Intervention activities selected are initialed and dated.

ADMINISTRATION

Rater-administered in less than one minute.

SCORING

Each of the assessment variables has an assigned score ranging from +2 to +7. Scores were based on measures of relative risk calculated from logistic regression coefficients. Checked assessment variables are summed to obtain a total score. An appropriate intervention strategy is selected based on the assessment score.

PSYCHOMETRICS

Logistic regression was used to determine the ability of assessment variables to accurately predict group placement. The resulting assessment portion of the instrument has a sensitivity of 77 percent (79 of 102 patients) and a specificity of 72 percent (169 of 236 patients).

HOW TO OBTAIN

The tool is reproduced in the Applied Nursing Research article listed below, along with scoring and intervention information. For permission to use it and additional scoring information, please contact Ann Hendrich, RN, MSN, 430 W. CR 200N, Greencastle, IN 46135.

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MODIFICATIONS

First developed in 1985, the 1995 revision reduces the number of items in the assessment

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component of the instrument. According to the author, the instrument has recently been tested in a large concurrent study of 1400 patients. Study analysis is underway and results will be released in 1997.

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