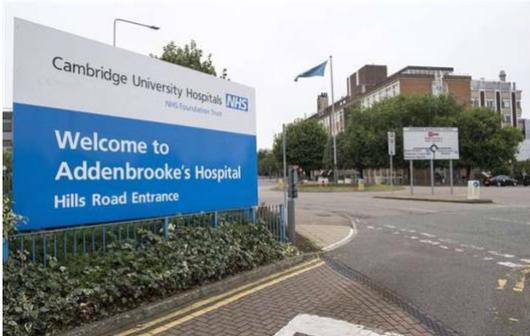


Cambridge University Hospitals (Addenbrooke's Hospital) - Falls Prevention Project - Wards F6 & G6



The lead Falls Prevention Specialist and Dementia Specialist Nurse piloted the use of Reminiscence Interactive Therapy Activity systems (RITA) on wards with a high incidence of patients with dementia and falls. The aim of the pilot was to ascertain if the intervention of RITA would improve patients' experience, wellbeing and reduce falls in older people in an acute setting.

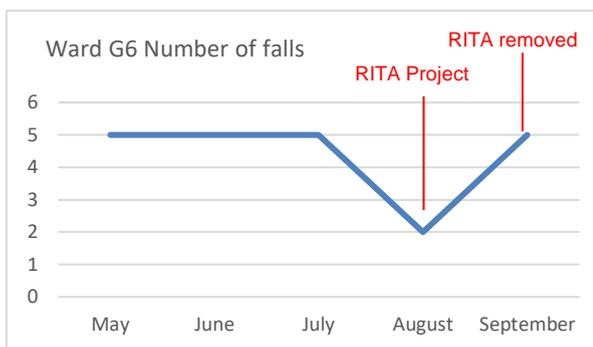
Wards F6 and G6 cares for people with a wide variety of medical conditions who require admission to an acute hospital. These wards cater for people with delirium and dementia and therefore were chosen to take part in the project.

The acquisition of three RITA Reminiscence Interactive Therapy Activity systems for use on these wards has enabled the wards to reduce falls and reduce 1-1 support. One patient benefitted from the person-centred content, as she no longer puts herself on the floor, which had been a regular occurrence.

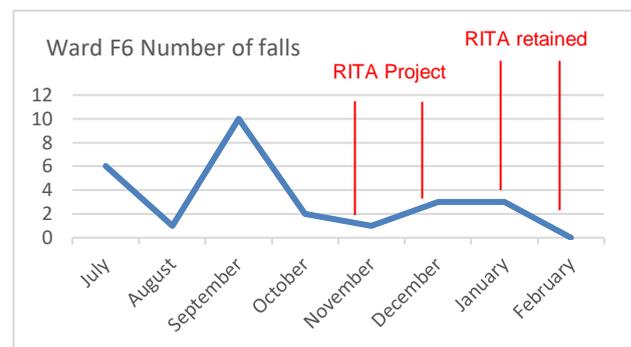
The pilot comprised of two large 24-inch RITA screens contained on a trolley which could be wheeled around the wards and one small 10" RITA tablet which can be used to further enhance 1-1 person-centred care.

Falls Reduction of over 60%

Initially ward G6 was identified to take part in the falls prevention project in which RITA was applied as a tool to support the initiative. Data was collected over one month in August 2020. On average ward G6 had been experiencing 5 falls a month in the months leading up to the project. The result of applying RITA saw a 60% reduction in falls in the month of August on ward G6. Whilst this is very powerful evidence on its own, what is far more compelling is the result of RITA being removed from ward G6 in the month of September. As you can see from graph below, falls went straight back up. To establish if these results were reliable and valid, a similar ward was identified, ward F6. The process was replicable over a longer time period of two months (November and December 2020). F6 was experiencing on average 4.75 falls leading up to the project. The results of applying the RITA over two months on F6 saw a 63% reduction in falls and the second graph demonstrates on ward F6 who retained RITA, falls continued to decrease.



Ward G6 Falls stats May – September 2020



Ward F6 Falls stats July 2020 – February 2021

Following the success of the project, the lead Falls Prevention Specialist and Dementia Specialist Nurse recommend the following to be considered by the organisation:

1. Education around importance and relevance of RITA in supporting care in vulnerable adults
2. All clinical areas to access RITA to enhance patient experiences and journeys and reduce the incidence of falls in this vulnerable patient group

Patient and staff experience:

"We have used RITA to play Bingo with a group of four patients in C bay. They really loved being together round a table and to have something to concentrate on. They also enjoyed chatting together. We used biscuits from the Ward drinks trolley as prizes. Great fun had by all!" **Registered Nurse**

"RITA has been of benefit to most of the patients. On one occasion, 4 patients (one of which is on 1-1 special observation and the others cohorted) were sitting at the table and watching an action film. Most of them were engrossed and enjoying the film. We observed afterwards that they were wandering less.

Additionally, it also has been a good companion for patients who do not sleep well at night. We would play soft blues or relaxation music and it made them doze a little bit and feel less anxious of the fact that they have not had a good night sleep.

Lastly, there have been occasions where we have played relaxation music continuously for end of life patients. Family have since expressed their gratitude because it lessened the feeling of grief and the anxiety that their parent's life was coming to an end." **Deputy Sister**

"Dora is an 85-year-old lady with a diagnosis of Alzheimer's Dementia. On admission, she was very confused and agitated; walking constantly, she had intentionally sat herself on the floor on several occasions and there were multiple episodes of physical aggression.

Initially Dora required 1:1 support due to her aggressive behaviour, falls risk and risk of absconding. Dora had no next of kin and had been living at home prior to admission; therefore, the staff were unable to gain any information as to what was important to Dora and would help to calm her when agitated.

The staff started to use RITA with Dora; it was trial and error at first, not knowing what Dora liked or disliked, but staff soon realised that DORA liked to look at the fish in the aquarium while listening to soft relaxing music.

Within a few days of using RITA, Dora became calmer: there were no more aggressive episodes or episodes of her intentionally putting herself on the floor. Within a week of starting to use RITA Dora was taken off 1:1 nursing.

The staff on the ward feel that the use of RITA for patients with cognitive impairment has a positive impact on their behaviour and will help to reduce the number of falls and the need for 1:1. The staff on the ward would highly recommend the use of RITA on all wards. **Ward manager**

"Using RITA for some patients can be effective. Most patients who are confused can become more settled if RITA is used appropriately to suit the patient's likes.

For instance, we put on a movie and played music for a lady who kept getting upset in the afternoons. I was unable to console her at first. Finding out what type of music she liked helped, it also gave me more information about her, we talked about what she did when she was younger for a job and that she had seen the musician we were listening to live. I was then able to transfer this information onto the 'What is Important to Me' poster for other colleagues to use, which may help them at another time to settle her. This lady told me she was missing her sister, they used to sing together." **Healthcare worker**

"Admission to Hospital results in a significant change of environment and routine for a person with cognitive impairment and this can lead to negative behaviours as the attempt to gain control over these changes. Falls in hospital among patients who have cognitive impairment are generally linked to these negative behaviours: agitation, aggression, poor sleep patterns, poor oral intake etc. Providing some level of comfort and familiarity through the use of RITA can not only introduce some level of normality but also give back a level of control: they can choose the music they like, the films or TV programmes they remember or play games that are familiar. By allowing patients to feel more settled and in control in the hospital environment then negative behaviour is reduced and this in turn leads to a reduction in falls."

Debra Quartermaine – Lead Falls Prevention Specialist



Scenario	Action	Outcome
Shouting patient suddenly became agitated, shouting about going home	Accessed the Puzzles	Patient stopped shouting and enjoyed doing all the puzzles
Patient on EOL care was agitated	Played relaxation music with a visual	Patient became calmer and more settled
Other EOL patients	Listened to relaxation music with the turtle and with kittens on screen	Patients became settled and fell asleep
Patients on 'Red Special' getting out of bed and wandering, at risk of falling	Played music and films	Patients became more relaxed and calmer or fell asleep listening to the music.
A patient receiving personal care was getting angry, getting out of bed	Played relaxation music	Patient stayed in bed and became less aggressive
Patient was confused, asking to go to the cinema	Played a film	Patient much happier and more settled
Patients on Red and Amber who were generally anxious, agitated, restless, sometimes in and out of bed constantly	Played relaxation music, films or other music	Patients became more settled, and talked about the music, or slept. Patients also started singing together.
Patient was pulling out cannula	Played relaxation music	Patient became settled
Bay was getting animate as people were bored and restless	Classical music was played	This calmed the environment
Patient wanting to go home to see his dad, wandering in and out of the toilet	Played a film	Patient had a cup of tea and was talking to another patient
Patient could not sleep, kept getting out of bed	Played relaxation music	Patient became calm, stopped wandering, fell asleep, stayed asleep all night
Unsettled patient refusing food and medication	Played relaxation music	Patient became settled, had a drink of juice, medication and fell asleep.

“People living with dementia may struggle to process what is happening to them whilst in hospital, in a strange environment, especially during Covid-19. Seeing photographs, movies and hearing music that is familiar to them will promote positive feelings and memories. These help patients engage in tasks and be cognitively stimulated as well as diffusing situations and providing a calming place. RITA can enhance care delivered by Healthcare Professionals and improve well-being for all. The staff on F6 and G6 have demonstrated the variety of activities RITA offers and how this easy-to-use tool, can reduce falls, improve 1:1 interaction and sleep cycle and dignity for patients in end-of-life care.”

Jacqueline Young - Dementia Specialist Nurse

