

Team Collaboration Paper

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NR527: Communication and Collaboration for Advanced Nursing Practice

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Identification of the Problem

Patient falls are the most common adverse events reported in hospitals. Each year, roughly 700,000 to 1 million patient falls occur in U.S. hospitals resulting in around 250,000 injuries and up to 11,000 deaths (LeLaurin et al., 2020). With the amount of individuals falling every year, the potential adverse effects must be well understood to be able to implement prevention measures. One of the most common post fall complications in older adults is fractures, particularly hip fractures. Not only do fall and post fall complications prolong patients' hospital stays, but they increase the risk of serious injuries, extend recovery times, and surge mortality rates. The risk of falls among older adults is multifactorial. Risk factors associated with falls include health-related factors such as poor nutrition, cognitive impairment, functional disabilities, and environmental factors such as home safety (Baumann et al., 2022).

There are various fall prevention measures and while falls are preventable, implementing prevention strategies can sometimes pose challenges, especially within healthcare settings. Traditional fall prevention methods, including alarms and sitters, often fall short due to limitations such as alarm fatigue, decreased staff vigilance, and high costs (Li et al., 2025). Evidence has proved that fall prevention is not only a vital aspect of healthcare but critical for individual well-being and implications from an economic perspective as well.

According to Baumann et al. (2022), Given the gravity of the issue, addressing falls necessitates an interprofessional approach. Interprofessional collaboration is crucial for inpatient fall prevention, with a team coordinated approach ensuring a comprehensive understanding of patient needs and facilitates the implementation of targeted fall