

## PATIENT CASE STUDIES | GERIATRIC

# Dawn: Preventing a fall

As told by Tina Rowe, Nurse



Dawn<sup>1</sup> is in her 70s and was admitted to an inpatient geriatric unit. Dawn is at risk of falling, particularly when she gets out of bed. She often wakes in the night and can become confused by her surroundings.

“Dawn sleeps on an airflow mattress to prevent bedsores and **needs assistance when getting out of bed**. I check her every 15 minutes to confirm she’s fine, but in the meantime anything can happen. Dawn relies on us to help her use the bathroom and to get dressed and so we need to be aware as soon **as she tries to get up**.

At around midnight one night, minutes after I had been in to check on Dawn, **Oxevision alerted us that she was getting out of bed**. I went straight to her room and assisted her with using the bathroom. Using the system in this way has **definitely helped me to prevent Dawn from falling**. It gives you that **extra lifeline** and it’s reassuring to both the patient and the staff member.”

Tina cares for Dawn in a room equipped with Oxevision. The system alerts staff when Dawn is sitting on the edge of her bed, indicating to staff that she likely needs assistance.

<sup>1</sup> A pseudonym has been used to maintain patient anonymity

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# Carla: Relearning behavior

As told by Stella Umeh, Healthcare Assistant

Carla<sup>1</sup> is in her 80s and was admitted to a geriatric unit at Manor Hospital with a diagnosis of advanced dementia with behavioral disturbance. She is frail and has a high risk of falls.



“Carla has problems with her personal hygiene and is often **incontinent in bed**. We wouldn’t know if she needed help until we checked on her, but this could be 15 minutes too late and she would be **in distress**.

We can now **intervene before** Carla is incontinent [by responding to an edge of bed or out of bed alert], **relieving her distress** and discomfort.

Intervening earlier has also **promoted Carla’s continence**. She’s **relearning** to use the bathroom which is reducing stress.

It’s been wonderful to see her **behavior changes**.”

Oxevision alerts Stella to when Carla is trying to get out of bed so the team can attend to her quickly to provide support.

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# Mary: Safe in isolation due to covid

As told by Felix Sebastian, Unit Manager



Mary<sup>1</sup> was transferred to an geriatric unit from the local general hospital following mental health problems triggered by medication. She is in her 80s and has physical health complications.

Shortly after admission, Mary tested positive for COVID-19.

“It’s important that she isolates herself to **reduce the transmission risk** of COVID-19, because all our patients are particularly **vulnerable** to becoming severely ill due to their age and physical health.

We check Mary is safe and take her pulse and respiration rate while avoiding **unnecessary contact**. We still provide in-person care when it’s needed.

Having Oxevision has been incredibly useful to monitor Mary’s health while **minimizing the team’s risk of exposure**. It is really **helping us manage care** on the unit in these challenging times.”

The Oxevision Vital Signs module allows Felix and his team to take spot-check vital sign observations without entering Mary’s room.

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# Adam: Preventing falls by identifying behavioral trends

As told by Jacky Nichols, Healthcare Support Worker

Adam<sup>1</sup> is in his late 70s and was admitted to a geriatric unit with a diagnosis of dementia with behavioral disturbance. Adam had mobility problems and often used a walker.



“We heard Adam’s fall but we didn’t witness it. **He wasn’t able to communicate** to us what had happened, so we decided to check Oxevision.

We saw that Adam had **used a wheeled table to support himself, instead of his walker**, which caused his fall.

With Oxevision, **we’ve noticed a trend** for patients with mobility problems to use the wheeled tables instead of their walker. Now that we know this, **we’ve removed wheeled tables** from specific patients’ rooms so that they can work on their mobility in the right way and **we can avoid future falls.”**

Jacky and her team used Oxevision’s Replay the Alert functionality, which allowed them to replay the fall footage (blurred and for a limited amount of time) and understand how the fall occurred.

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# Martin: Reviewing unwitnessed falls to prevent future harm

As told by Helen Bagnall, Nurse

Martin<sup>1</sup> is in his mid-80s and was admitted to a geriatric unit with a diagnosis of dementia with behavioral disturbances. Martin is frail and at risk of falls.



“We heard Martin fall in his room and quickly attended to him. **We didn’t witness his fall** and Martin lacked capacity to tell us how he’d fallen.

By replaying the footage to the doctor, we were **able to assess whether Martin had hit his head or not** and we saw that he’d fallen on his bottom. We also saw that he’d grabbed onto the curtain for stability which caused his fall, and we **had not considered it a hazard before then**.

This was very useful as it meant we didn’t have to conduct neurological observations which are intrusive and would regularly wake Martin up. Instead, we kept an eye on him using Oxevision and removed the curtain from his room to **prevent future falls**.”

Helen and her team decided to use Oxevision’s replay the alert functionality, which allowed them to replay the fall footage (blurred and for a limited period of time) and show it to the doctor on call.

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# Paula: Managing restless behavior

As told by Zoe Procter, Nurse



Paula<sup>1</sup> is in her mid-70s and was admitted to a geriatric unit. She has a diagnosis of dementia with behavioral disturbances and was exhibiting restless behaviors.

Paula was admitted during the COVID-19 pandemic and had to isolate from the rest of the unit until she completed a COVID-19 test.

“When the staff were with her, it was impossible to get Paula to rest so we withdrew staff and monitored her using Oxevision.

Without the stimulus from staff, it was easier to get Paula to sleep. The system is very useful on a night shift like this because we are able **to help Paula rest and manage her restless behavior appropriately.**”

Oxevision allows Zoe and her team to take spot-check vital sign measurements remotely. It also provides alerts when Paula gets out of bed or leaves her room.

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# Elena: Greater peace of mind for staff

As told by Tony, Healthcare Assistant



“Now that we have Oxevision it’s been **easier to manage Elena’s care.**

The system alerts us immediately when Elena is **on the edge of her bed**, allowing us to get to her and **assist her in getting up.**

We feel **so much more reassured that Elena is safe** and it’s given us more **peace of mind.**”

Elena<sup>1</sup> is frail and at risk of falls, and is often confused by her surroundings. She is checked on by staff every 15 minutes to ensure she is safe and well.

Tony and his team began using Oxevision to help manage patient safety. Oxevision alerts staff when patients are sitting on the edge of their bed, or have gotten out of bed.

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# Richard: Proactive caretaking

Patient's point of view

Richard<sup>1</sup> is in his late 60s and was admitted to a geriatric unit.

Richard is at risk of falls and was cared for in a room equipped with Oxevision. Staff members were able to monitor when he got out of bed and assist him if he needed help.



“It was about three o’clock in the morning when I woke up and, without thinking, **I rushed to the bathroom, hitting my shoulder and head against the wall.**

In [what felt like] less than a second, a staff member **came straight to my room to check on me.** Oxevision had alerted him that I had **gotten out of bed** and he came to check on me **in case I needed any assistance** because they know I tend to go to the toilet at night.

It felt **very reassuring** to know that they came to check on me so quickly. I could have hit my head and ended up on the floor for some time before they came back to check on me.”

Sam, a staff member caring for Richard, had received an alert from Oxevision notifying him that Richard had gotten out of bed.

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