

Predicting falls in rehabilitation: A comparison of three instruments including Hester Davis

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A study published in the journal *Rehabilitation Nursing* evaluated the ability of the Hester Davis Scale (HDS), Section GG, and facility fall risk assessment scores to predict patients who fall during inpatient rehabilitation.

This study was an observational quality improvement project.

Nurses administered the HDS in parallel to the facility's current fall risk [assessment](#) and Section GG of the Centers for Medicare & Medicaid Services Inpatient Rehabilitation Facility Patient Assessment Instrument. Receiver operating characteristic curves were compared in 1,645 patients. Relationships of individual scale items to falls were also assessed.

The HDS (area under the curve [AUC] = .680, 95% CI [.626, .734]), facility fall risk assessment (AUC = .688, 95% CI [.637, .740]), and Section GG scores (AUC = .687, 95% CI [.638, .735]) adequately identified patients who fell. AUCs did not significantly differ between assessments. HDS scores of ≥ 13 , facility scores of ≥ 14 , and Section GG scores of ≤ 51 resulted in the highest sensitivity/specificity balance.

HDS, facility fall risk assessment, and Section GG scores adequately and similarly identified patients of mixed [diagnoses](#) at risk of falling in inpatient [rehabilitation](#).

Rehabilitation [nurses](#) have several options including the HDS and Section GG to identify patients at greatest risk of falling.

More information: Erin Y. Harmon et al, Predicting Falls in Rehabilitation: A Comparison of Three Instruments Including Hester Davis, *Rehabilitation Nursing* (2023). [DOI: 10.1097/RNJ.0000000000000421](#)

Provided by Association of Rehabilitation Nurses

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