

Discussion board post response

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Response to Discussion Responses to Discussion Response to Doris Sheets

Doris, I agree with your insinuation that patient falls increase length of hospital stays for patients and also decrease the quality of life. Measures ought to be implemented to prevent any falls that may occur within the health care organization. In this regard, I agree that patient falls can be prevented through the use of positive deviance. I concur with the examples of strategies that could be used including innovative programs such as video monitoring. As noted by Seidman and McCauley (2009), positive deviance involves making out what ought to be avoided in order to achieve the intended positive results. In this viewpoint, video monitoring could be used to detect areas within the health care organization where falls are prevalent and consequently advise patients to avoid using those areas. For instance, staircases could be areas prone to patient falls and hence could be avoided.

Response to Rhea Ann Hazen

Rhea Ann, your elucidation of how positive deviance could be used to prevent patients from wandering off is spot-on. Placing bracelets on the patients known to wander around is an ingenious technique that could be referred to as an example of positive deviance. Positive deviance is the use of innovative strategies that makes some individuals achieve elevated levels of success than others (Bradley et-al, 2009). Positive deviants according to Seidman and McCauley (2009) are more successful because they are able to identify risks and subsequently implement positive strategies to achieve change. Identifying the fact that wandering around could lead to falls is in itself risk identification, and placing bracelets on the patients is implementation of a positive strategy aimed at achieving positive outcomes.

References

Bradley, E. H., Curry, L. A., Ramanadhan, S., Rowe, L., Nembhard, I. M., & Krumholz, H. M. (2009). Research in action: Using positive deviance to improve quality of health care. *Implementation Science*, 4(25), 1-11.

Seidman, W., & McCauley, M. (2009). A scientific model for grassroots O. D. *Organization Development Journal*, 27(2), 27-37.