

REASON WHY?

Recent studies have evidenced that a reduction in caffeine consumption has led to reduced falls in a series of care homes by 30%



To reduce the number of falls on Ward 25 at Royal Shrewsbury Hospital By 15% by 31st March 2025

PLAN

The plan was to introduce a trial of decaffeinated coffee and tea onto ward 25 for a period of three months, as published research suggested that this would reduce the number of falls.

Falls data would be collected throughout the trial.

Discussions were held with our research colleagues to ensure that the test of change was done with in keeping with ethics and was not overstepping into research.

DO

Due to the increased cost of decaffeinated drinks (£67.59 per month for ward 25 so £202.77 for a three-month trial) support was gained from SaTH Charities to help with the funding for the trial.

Engagement from the staff team was sought via their involvement in a blind taste test. There were 6 coffee drinkers in total – 5 of which identified the decaffeinated as their preferred coffee and 5 tea drinkers in total – 3 of which identified the decaffeinated as their preferred tea.

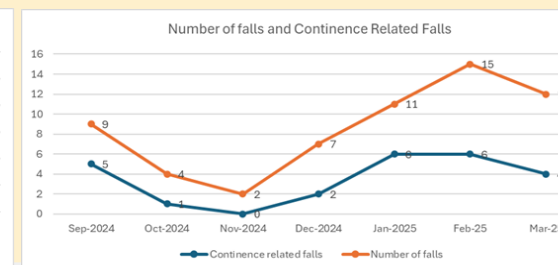
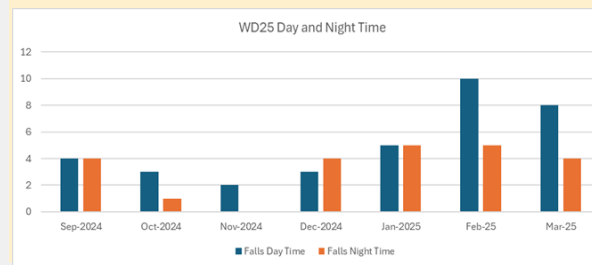
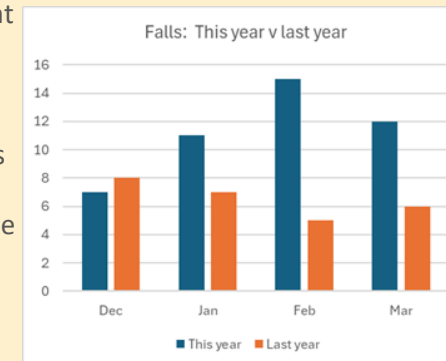
It was agreed that the trial would take place between January 2025 and March 2025 and be run on an opt out basis, (patients were told that drinks provided would be decaffeinated and that if they wanted caffeinated drinks, they needed to request them).

STUDY

Although patients report that they prefer the taste of the decaffeinated drinks the data does not support that it has led to a reduction in falls.

The data shows that: Falls decreased in March but higher than before the trial/this time last year. Proportion of falls when comparing day v night are less at night

Continence related falls has not gone up in line with the increase in falls, this is a positive. The last 2 months there have been a lot of repeat falls on WD25. This possibly means that ward 25, despite being an area with a high falls risk may not have been the best place for the trial.



ACT

There are queries about if the trial would have been more successful with a different cohort of patients, however both the quality matron and the reconditioning lead are leaving their posts in SaTH and therefore, given the cost involved, it has been decided to **ABANDON** a further trial at the current time.

Although there is no reason to believe that the decaffeinated drinks were the reason that falls increased, they certainly did not result in a reduction of falls.