

The Hierarchy of Evidence



The Hierarchy of evidence is based on summaries from the National Health and Medical Research Council (2009), the Oxford Centre for Evidence-based Medicine Levels of Evidence (2011) and Melynyk and Fineout-Overholt (2011).

- I Evidence obtained from a systematic review of all relevant randomised control trials.
- II Evidence obtained from at least one well designed randomised control trial.
- III Evidence obtained from well-designed controlled trials without randomisation.
- IV Evidence obtained from well designed cohort studies, case control studies, interrupted time series with a control group, historically controlled studies, interrupted time series without a control group or with case- series
- V Evidence obtained from systematic reviews of descriptive and qualitative studies
- VI Evidence obtained from single descriptive and qualitative studies
- VII Expert opinion from clinicians, authorities and/or reports of expert committees or based on physiology

Melynyk, B. & Fineout-Overholt, E. (2011). Evidence-based practice in nursing & healthcare: A guide to best practice (2nd ed.). Philadelphia: Wolters Kluwer, Lippincott Williams & Wilkins.

National Health and Medical Research Council (2009). NHMRC levels of evidence and grades for recommendations for developers of guidelines (2009). Australian Government: NHMRC. http://www.nhmrc.gov.au/_files_nhmrc/file/guidelines/evidence_statement_form.pdf

OCEBM Levels of Evidence Working Group Oxford (2011).The Oxford 2011 Levels of Evidence. Oxford Centre for Evidence-Based Medicine. <http://www.cebm.net/index.aspx?o=1025>

Databases searched:	<input checked="" type="checkbox"/> CINAHL (Ebsco)	<input type="checkbox"/> Medline (Ebsco)	<input checked="" type="checkbox"/> Pubmed (NLM)	<input type="checkbox"/> Nursing (Ovid)	<input type="checkbox"/> Emcare (Ovid)	<input checked="" type="checkbox"/> Other List: _Cochrane Library
Keywords used:	Falls, falls in hospitals, falls risk assessment, falls prevention, falls management					
Search limits:	'all child', English, March 2010 - March 2022					
Other search comments:						

Reference (include title, author, journal title, year of publication, volume and issue, pages)	Evidence level (I-VII)	Key findings, outcomes or recommendations
<p>Australian Commission on Safety and Quality in Health Care (2017). National Safety and Quality Health Service Standards: Guide for Hospitals, (2nd ed). Sydney: ACSQHC.</p> <p>https://www.safetyandquality.gov.au/standards/nsqhs-standards/comprehensive-care-standard</p>	VII	<ul style="list-style-type: none"> • National Safety and Quality Health Service Standards (NSQHS) • Comprehensive Care standard 5 outlines actions that health service in Australia are required to do to identify, prevent and manage patients at risk of falls
<p>Austin, D. (2017) Predicting and Preventing Falls in the Hospital, <i>Science of Caring</i>, University of Science California San Francisco.</p>	VII	<ul style="list-style-type: none"> • Causes of paediatric falls in hospital • Use of Little schmidy falls risk assessment tool, originally an adult tool was adapted for use in children • Validity of the tool was tested and the tool then revised
<p>Clinical Excellence Commission. (2020), Paediatric Fall and Entrapment Prevention and Management Guideline, <i>Health, New South Wales Government</i>.</p>	VII	<ul style="list-style-type: none"> • Provides Paediatric specific fall and entrapment prevention and risk mitigation guidance • Developed by the Clinical Excellence Commission in response to recommendations from a coronial inquest where a child fall out of bed and became entrapped • Flow sheet developed “Paediatric Cot and Bed allocation guide – which helps to risk assess if a cot or bed is most appropriate for each child. It also informs of when or when not to use bed rails

<p>Franck, L.S., Gay, C. L., Cooper, B., Ezrre, S., Murphy, B., Chan, J. S-L., Buick, M., Meer, C.R. The Little Schimdy Pediatric Hospital Fall Risk Assessment Index: A diagnostic accuracy study. <i>International Journal of Nursing Studies</i>, March 2017. 68, pp 51 – 59.</p>	<p>VI</p>	<ul style="list-style-type: none"> • Retrospective case control and descriptive study • Evaluating the inpatient paediatric risk assessment tool ‘Little Schmidy’ • The dataset included 114 reported falls and 151678 falls risk scores documented in medical records during the 5 year study period • Concluded that this is an accurate tool to predict falls when done every day and night, although limitations is it identifies most patients as “at risk” reccomendations to how to improve the accuracy of this tool are included and it is noted that further research is needed in paedatric falls prevention
<p>Parker, C. Kellaway, J. Stockton, K. (2020) Analysis of falls within Paediatric Hospital and Community Healthcare Setting, <i>Journal of Pediatric Nursing</i>, January 2020. 50, pp31-36.</p>	<p>V</p>	<ul style="list-style-type: none"> • A retrospective analysis of falls occurring across inpatients, outpatients, emergency and community healthcare settings of children at Children’s health Queensland Hospital • Study provided a comprehensive review of the characteristics of falls • Summery of paediatric fall prevention
<p>Jamerson, J., Adlard, K., Akre, M., Barton, S J., Bennett, C., Brewer, M A., Bufe, G., Cooper, C L., Fields, H W., Graf, E., Kerby, R., Hill-Rodriguez, D.Paediatric falls: State of Science.Paediatric nursing July-August 2009. 35(4),227-231</p>	<p>V</p>	<ul style="list-style-type: none"> • Survey of paediatric hospitals in the US to determine fall related practices in pediatric hospitals • Found a variation in definition, classifications and measurement of falls • Also large variation in risk assessment tools used, and only 6 of the 29 were using a validated tool • Highlited the need for more research
<p>Benning, S. Webb, T. (2019) Taking the Fall for Kids: A Journey to Reducing Pediatric Falls. <i>Journal of Pediatric Nursing</i>, May 2019 46, pp100-108.</p>	<p>VII</p>	<ul style="list-style-type: none"> • A quality and improvement project developed at a paediatric hospital with intentions to reduce harm related to falls • Design and implementation of evidence based interventions, including selection of a risk assessment tool, implementation of a fall bundle and education to patients and families • The compliance of risk assessment completion increased significantly, and there was an overall reduction in rates of falls. • Identified a gap in reporting of falls and near misses of falls, stated more research needed here

<i>Falls prevention policy directive and toolkit. (2017), Health, South Australia Government.</i>	VII	<ul style="list-style-type: none">• A summary of when and how to do a falls risk screening, assessment and management• Details safe use of bedrails, importance of reporting falls into a incident system, and post falls management
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