Fall Prevention and Reduction in Assisted Living and Personal Care

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Learning Objectives

- Participants will learn the impact of fall prevention and reduction programs on risk management and quality improvement strategies.

- Participants will learn techniques to reduce falls in AL/PC/Memory Care.

- Participants will learn how to improve assessment practices to reduce potential for resident falls.
Statistically Speaking

- As people age their risk for falls increases.

- According to the CDC:
  - Nearly one in three older Americans fall each year.
  - One in five falls causes serious harm, such as broken bones or a head injury.
  - At least 250,000 older persons are hospitalized every year from hip fractures, with 95% of these caused by falling.
  - Falling injuries result in $34 billion in direct costs every year.

Who’s Paying Attention

- Health insurers
- Third party insurers like CNA, AIG etc. The people who write the General and Professional Liability policies.
- Managed Care Organizations–Accountable Care Organizations.
- National Center for Assisted Living
- Centers for Disease Control
- Hospitals and Hospital Providers
- Skilled Nursing Facilities
Risk Factors For Falling

- Risk factors do not have to be singular. Any combinations increases risk further.
- Biological or Internal Risk Factors:
  - Muscle weakness
  - Bone loss
  - Vision changes
  - Balance problems
  - Loss of sensation in feet
  - Chronic health conditions—stroke, diabetes, heart problems, arthritis
  - Medications

Risk Factors for Falling

- Situational—new environment, acute illness
- Behavioral
  - Fear
  - Inactivity
  - Risky behaviors
  - Alcohol use
  - Depression
- Environmental
  - Clutter and tripping hazards—throw rugs, oxygen tubing
  - Poor lighting
  - Slippery floors
Strategies To Prevent Falls

- First and foremost manage resident and family expectations.
  - New resident and family orientation
  - Address concerns and complaints timely.
  - Hold resident and family council meetings.
  - Do not sell butler service.
  - Ask resident and families what has worked in the past
  - Explain to resident what is going to happen.
  - Create a culture of safety from the time of move in

Strategies To Prevent Falls—Medical

- Disease management
  - Schedule routine chronic care visits with PCP as allowed by Medicare
- Medication management
  - Work with PCP to reduce or eliminate medications that are commonly associated with falls
  - Pharmacist review and recommendation is very important
- Injury prevention
  - Test for osteoporosis
  - Treatments that help reduce medical issues.
Strategies To Prevent Falls—Wellness/Nursing

- Proper fall risk assessment
  - Thorough assessment—fall history, balance, gait, medical history, assistive devices.
  - On move in and at routine times
  - Address needs on Service Plan
- Providing schedules and routines
  - Toileting schedules, shower routines
- Anticipate needs—thirst, hunger, toileting
- Equipment—hearing aides, glasses in place.
- Medications—new med follow up, side effects
- Observation—medical/mental changes
- Mobility devices—must be in good condition

Strategies To Prevent Falls—Rehab

- Exercise programs
  - Daily workouts—50 hours of exercise over 6 months proven to reduce falls per studies.
- Daily ambulation
  - Walk to dine, walking as part of service plan
- Resident specific exercises
  - Post therapy continuation—restorative program. In PC and AL it’s a chargeable service.
- Mobility device assessment—proper device, fitting
- Wheelchair fitting—proper size, height etc
- Education, education, education
Strategies To Prevent Falls—Environmental

- **Lighting**
  - Night light
  - Bed facing the bathroom where possible.
  - Adequate apartment and hall lighting

- **Floors**
  - Clean up spills immediately
  - Pick up small dropped items immediately.

- **Rugs**
  - No throw rugs policy
  - Watch for tears or loose strings in carpets.

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Strategies To Prevent Falls—Environmental

- **Bathrooms**
  - Do they need high toilet seat?
  - Train on using handrails
  - Non-skid strips

- **Common space**
  - Arrange furniture to allow for wide spaces

- **Beds**
  - High low beds
  - Facing bathroom
  - Mobility device on bed?
  - Fall mats on floor?
Strategies To Prevent Falls—Environmental

- Footwear
  - Everyone has something skid resistant on their feet
  - Avoid thick heavy soles
  - Low heels for the ladies
  - No bare feet, stockings or socks

- Outdoor areas
  - Keep free of debris
  - Fix areas that are uneven
  - Keep ahead of snow and ice

Strategies To Prevent Falls—Equipment

- Alarms
  - Use of bed or chair alarms

- Bed Mobility Devices
  - Bed canes, bed sticks, half rails, Floor to ceiling poles

- Bedside commodes
  - To use or not to use?

- High low beds

- Fall mats
  - To use or not to use?

- Hip protectors
**Reduction Programs**

Daily review of falls—Post Fall Huddle
- Resident report of what happened
- Staff report of what happened
- Ambulatory status at time of fall—device? Alone?
- Location and time
- Last time toileted?
- Last time medicated?
- Environmental assessment
- What risk factors in place at the time of fall?
- patterns
- Root cause analysis

Referral to therapy and/or PCP

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**Risk Management/Quality**

- Proper prevention, reduction and investigation of falls helps your risk management program
- Updating service plans as issues arise
- Proper documentation of falls and post falls assessments
- Informed refusal or Negotiated Risk Agreements
- Competency programs for staff on fall management
Fall Management Competencies

- Staff participate in training—regularly
- Staff can identify major fall risk factors and take steps to minimize
- Staff can access fall related policies/procedures and refer to them
- Staff implement fall precautions
- Staff provide input on fall issues
- Staff monitor residents for changes
- Staff carefully document all assessments
- Staff regularly reassess residents
- Staff select proper assistive device
- Staff conduct post fall huddles
- Staff revise care/service plans
- Staff report all falls

Fall Prevention Test

1. A resident fall with injury usually results in a lawsuit?
2. Approximately 25% of fall related liability claims focus on the quality of the documentation within the resident record?
3. Charting all care at the end of the shift is an acceptable practice?
4. Incomplete information in the resident record can be difficult to defend?
Fall Prevention Test (cont)

5. If a resident falls, document in the resident healthcare record that an incident report was completed?
6. If a late entry regarding resident fall is to be made in the record, it should be labeled as such.
7. Resident fall assessments are completed only upon admission and on quarterly basis?
8. Proactive bowel and bladder training is a critical fall prevention strategy?

Fall Prevention Test (cont)

9. Use of assistive lifting devices can contribute to falls?
10. Contaminants, cleaning products, general wear and tear, and use of chemical coatings and sealants can all affect the slipperiness of the floor?
11. It is appropriate to place quotation marks around residents’ comments in healthcare information and incident reports.
Fall Prevention Test Answers

1. False
2. False
3. False
4. True
5. False
6. True
7. False
8. True
9. True
10. True
11. True

Next Steps For Your Program

- Gather a team to discuss falls and prevalence in your community
- Evaluate current assessment tools and practices
- Identify your current residents who are fall risks—what are you currently doing to prevent falls?
- What are your prevalent diagnoses in your community? Who are those residents?
Next Steps (cont)

- Begin your post fall huddles—do root cause analysis
- Implement identified changes into the resident service plan
- Develop a Staff Competency Program
- Evaluate your documentation training and re-train as needed.
- Incorporate documentation training in new employee orientation.

Last Steps

- Define your goals
- Determine your strategies for each of the goals
- Determine how you will evaluate the effectiveness of your strategies.
  - Does the fall rate vary over time?
  - Is there a trend up or down in resident falls?
  - Do the changes relate to any of the policies that have been implemented?
Resources

- Center for Disease Control
  - A CDC Compendium of Effective Fall Interventions
  - Preventing Falls: A Guide to Implementing Effective Community-Based Fall Prevention Programs
- NCAL/ALFA
- CNA
- National Council on Aging
  - Fall Prevention Awareness Day—first day of fall.
- AHRQ—Agency for Healthcare Research and Quality
  - The Falls Management Program: A Quality Improvement Initiative for Nursing Facilities

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QUESTIONS?