

RehabCare

# Comprehensive Fall Management

Delmar Foundations AQIN-DC

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# CDC Statistics 2015

- About 1800 older SNF residents die each year due to fall related injuries
- A typical SNF with 100 beds reports 100-200 falls per year. Many go unreported.
- Between 50-75% of SNF residents fall each year ... twice the rate of falls among community living adults.

# CDC Statistics 2015

- Patients often fall more than once. The average is 2.6 falls per person per year.
- About 35% of fall injuries occur among residents who cannot walk.

# Perfect Storm

- Falls result in disability, functional decline and reduced quality of life.
- Fear of falling can cause further loss of function, depression, feelings of helplessness and social isolation.

# Perfect Storm

- Muscle weakness and ambulation problems are the most common causes of SNF falls (24%)
- Environmental hazards (wet floors, poor lighting, incorrect bed height, improperly fitted or maintained wheelchairs) cause 16-27% of falls

# Perfect Storm

- Medications can also play a significant role. Drugs that affect the central nervous system, such as sedatives and anti-anxiety medications are of particular concern.
- Fall risk is significantly elevated during the three days following the change in these type of medications

# Perfect Storm

- Other causes include difficulty with transfers, poor foot care, poorly fitting foot wear and incorrect or improper use of ambulation devices

# Fall Risks

- Intrinsic

- Effects of aging on gait, balance and strength
- Acute medical conditions
- Chronic diseases
- De-conditioning from inactivity
- Behavior
- Medication Side Effects

- Extrinsic

- Environmental hazards
- Unsafe equipment
- Unsafe personal care items



# Tracking Falls

- MDS
- Incident Reports
- 24 Hour Reports
- Fall Quick Reference Tool
- Casper Report
- Five Star Rating
- CMS Nursing Home comparison
- State Surveys

# Fall Quick Reference Tool

- History of falls
- Cognition
- Impulsivity
- Vision
- Ambulation
- Familiarity with the environment
- Contenance
- High Risk Medications
- Assistive devices for ambulation
- Medical Equipment (catheter, IV, O<sup>2</sup>)

# Charting the Journey

## Steady Algorithm for Fall Risk Assessment & Interventions



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# Steady

- Steady Fall Risk Checklist

# All Hands on Deck Approach

- Culture of Safety
  - Strong Leadership
  - Effective Communication
  - New Policy Development
  - IDT Formation
  - Empowered Staff
    - “no blame, no shame” environment



# All Hands on Deck Approach

- Administrator
- Director of Nursing
- MDS Coordinator
- Rehab Manager
- Restorative Nursing
- Nurses
- CNAs
- Pharmacist
- Maintenance
- Housekeeping
- Dietary
- Volunteers
- Family
- Activities

# All Hands on Deck Approach

The most  
important team  
member is our  
**Resident!**  
Let's Talk!



# Administrator and Nursing Director Responsibilities

- Appoint Falls Nurse Coordinator
- Appoints Falls Nursing Assistant
- Appoints Falls Therapist
- Appoints Falls Engineer
- Set specific goals using key indicators
- Be involved in meetings as available
- Allow time for team to meet and problem solve
- Provide support for environment and equipment needs
- Monitor progress and guide data collection and analysis



# Falls Nurse Coordinator

- Responsible for full implementation of the program
- Serves as “Champion” for the program
- Coordinates screening
- Completes fall assessments
- Ensures education and training are completed
- Works with medical director

# Falls Nurse Assistant

- Responsible for inspection of the environment and equipment
- Acts as leader among front line staff



# Falls Therapist

- Physical or Occupational Therapist
- Strong vision
- Excellent problem solving skills
- Experience with cognitive deficits, low vision, wheelchair positioning, transfers and mobility

# Falls Engineer

- Inspects, repairs and modifies equipment and the environment.



# Other Team Member Options

- Activities
- Social Services
- Housekeeping
- Restorative Nursing
- Administration



# Fall Team Responsibility

- Development of effective problem solving skills so appropriate interventions for high risk residents are selected
- Provide guidance on dealing with dementia residents

# Fall Team Responsibility

- Assess patients after a fall to identify and address risk factors and treat the underlying medical conditions
- Educate staff about fall risk factors and prevention strategies
- Review prescribed medications to assess potential risks and benefits

# Speech Therapy

- Standardized Assessments
  - Cognition
  - Communication
  - Safety





# Occupational Therapy

- Standardized Assessments
  - Balance
  - ADLs
  - Low Vision
  - Cognition
  - Environment
  - Positioning
  - Contenance



# Physical Therapy

- Standardized Assessments
  - Balance
  - Gait
  - Transfers
  - Bed Mobility
  - Endurance



# Keys to New Resident Transition

- Therapy and Nursing Collaboration
- Status of Patient's Ability
  - Bed Mobility
  - Transfers
  - Ambulation
  - Assistive Devices
  - Continence

# Comprehensive Approach

- Skilled versus unskilled services
  - Therapy
  - Activities
  - Restorative
  - Unit CNAs
- Collaboration ... working together

# The Role of Standardized Testing

- Therapy Assessments
- Nursing Assessments
  - Timed Get Up and Go
  - 30 Second Chair Test
  - 4 Stage Balance Test
  - Orthostatic Blood Pressure

# Ambulation .. What's the Answer?

- Patient is able to ambulate
  - Restorative
  - Walk to dine
  - Family support
  - Activity programs
- Patient is unable to ambulate
  - Focus on wheelchair functional mobility
  - Promote toileting
  - Promote transfers
  - Promote bed mobility

# Encouraging Movement

- Range of motion during self care activities
- Balance during sitting activities
  - Static versus dynamic
  - Arm movement
  - Leg movement
  - Eyes open and closed

# Get Moving

- Movement
  - Toe tapping to music
  - Hand clapping to music
  - Head and neck range of motion
  - Sitting tall
  - Deep breathing
  - Wheelchair exercises



# Environment Triggers

- Lighting and contrast (tape!)
- Bed arrangement
- Wheelchair safety
- Clutter
- Use of signs with words or pictures on drawers and closets
- Call system which patient can use
- Velcro!

# Behavior Interventions

- Resources to use to promote purposeful activity
- Assess sensory stimulation: too much or not enough?
- Schedule activities during shift change

# It Takes A Village

