

Long-Term Care Survey Alert

RESIDENT SAFETY: Fall Rate Going Up? Go To The Source To Get The Lowdown

Staff may have the elusive answers.

Ask and you will often get answers that can explain and drive down an escalating fall rate.

Frontline staff may know why more residents have been falling than usual, says **Lisa Marcincavage, RNAC**, at **Little Flower Manor** in Wilkes-Barre, PA. "For example, the staff might say that one particular resident with new or escalating behavioral symptoms has been absorbing a lot of attention or causing a distraction," she says. And that means staff has had less time to assist and monitor other residents at high risk for falls.

Look for a Change in Case-Mix

Staff may also clue you into a change in case-mix that requires different care plan interventions to rein in the fall rate. For example, a high number of new admissions on a unit can translate into more falls because "residents' fall risk is greatest" during the period after admission, says Marcincavage. New admissions require more supervision until they get used to their environment.

A higher percentage of cognitively impaired residents can also drive up your number of falls, says **Diana Waugh**, a consultant in Waterville, OH.

Tip: When a facility uses a consistent-assignment model that "moves the decision-making closer to the bedside," the direct-caregivers have their finger on the pulse on how the case-mix is changing, says **Joanne Rader, MN, RN** of **Rader Consulting** in Silverton, OR.

More falls than usual on a unit may reflect a mismatch between residents' needs and staffing patterns or the staff's skill set. Or the care team may need some coaching to get their communication back on track.

How and when to communicate risks: To stay on top of fall risks, staff should communicate about residents' fall risks during shift changes, meetings, daily communication logs--and via nursing assessment sheets, advised **William Jacott, MD**, special advisor for professional relations for the **Joint Commission on Accreditation of Healthcare Facilities**. Jacott spoke at the March **American Medical Directors Association** annual meeting held this year in Dallas.