



FALLS PREVENTION, MANAGEMENT, AND THE IMPACT ON REIMBURSEMENT

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The statistics are sobering: One in three adults over the age of 65 and between 50% to 75% of nursing home residents fall each year and falls are the leading cause of death from injury in those 65 and older. The annual cost of falls is over \$50 billion. The “Cost” of falls impacts our patients, customers, and the overall economics of healthcare. Falls can lead to major injuries, which can cause pain, immobility, contractures, incontinence, increased dependence on caregivers, medical complications, decreased quality of life, depression, and sometimes loss of life.

Creating a culture of safety is imperative for SNFs to have a successful Falls Management Program. The IMPACT Act of 2014 requires the reporting of standardized patient assessment data through the Quality Reporting Program (QRP). QRP measures are compliance-based protocols designed to monitor and gather data associated with falls. However, this data may have a financial impact in the future as Medicare looks to tie quality to reimbursement. The QRP measure related to falls is the Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay).

With the Protecting Access Medicare Act 2 of 2014 (PAMA), Value-Based Purchasing (VBP) arrived providing a major role with the potential reduction in Med A reimbursement by 2% when a facility falls below the rehospitalization benchmarks as compared to the national standardized levels. This financial impact can be averted when long-term care facilities implement a thoroughly vetted Falls Management Program to prevent rehospitalization. Quality Measures are monitored for both long and short stay SNF residents. These measures include metrics for falls and falls associated with major injuries, as well as many other areas that could increase a resident’s risk for potential falls. The Quality Measures are reported through MDS National Data Repository. This data affects the overall star rating

for facilities. As our patients become more tech-savvy, a facility’s star rating is visible and accessible on Care Compare.

As part of the natural aging process, falls are more common with older adults. However, with various illnesses and diseases, falls can affect anyone. Let’s examine the hows and whys of SNF residents and falls. Typically, residents of an SNF are older, they tend to have chronic medical conditions, they are not stable in their balance, they have difficulty walking, memory issues, and struggle with ADLs.

FALLING: A SIGN OF POSSIBLE MEDICAL ISSUES

24% of falls that occur with nursing home residents are associated with muscle weakness and subsequent gait problems. Additional research reveals up to 27% of falls in nursing homes are due to environmental hazards.

Medications can increase the risk of falls and fall-related injuries. Studies show a significant increase of falls is elevated within three days following changes in medication.

Three major categories affected with a change in medication are.

1. The Brain: Psychotactives, antipsychotics, and antidepressants
2. Blood Pressure: Including medications to improve urination, i.e. Flomax
3. Blood Sugar: Approx. 25% of the population have diabetes taking medications that can affect blood sugar levels

Other important signs to watch for are:

- Poor foot care
- Poorly fitting shoes
- Improper or incorrect use of walking aids

STAFFING: UNDERSTANDING FALLS

When instituting a fall prevention and management program it is important to consider staffing. SNFs are witnessing unprecedented staffing shortages due to the COVID-19 pandemic and vaccine mandates. However, it is essential to have a united staff approach in preventing falls. By taking inventory of your current falls prevention program and making adjustments in certain areas, SNFs can formulate a foundation for success measures:

- Teamwork
- Educating staff on falls and falls prevention
- Training
- Evidence-based treatments
- Interdisciplinary communication measures
- Implement weekly meetings among various staff to formulate a structured program, policies, and a falls analysis review

Having a falls infrastructure in place that holds staff accountable for preventable falls is an important step in reducing falls.

UNDERSTANDING THE CASPER REPORT: “DOES MY FACILITY HAVE A FALLS PROBLEM?”

The CASPER Report is one of the first steps in reviewing assessment data for falls, and falls with major injuries, and compare to state and national averages. It is also important to review other measures that can impact fall risk such as UTI, medications, ability to move Independently worsened, help with activities of daily living has increased, and depression.

PREFERRED THERAPY SOLUTIONS “FALL PREVENTION PROGRAM” is a strategic approach of interdisciplinary tools, and solutions for falls prevention and management. Through a methodical review of current research and literature Preferred Therapy Solutions (PTS) has developed a comprehensive program for fall prevention. The program includes use of the CDC’s STEADI algorithm, PTS’s fall risk assessment tool, PTS’s fall report, evidence-based nursing fall risk assessments, PTS’s 24-hour checklist, purposeful rounding, extensive patient/caregiver educational materials, therapist resources, and outcome measures.

In 2012, the CDC developed and launched the Stopping Elderly Accidents, Deaths and Injuries (STEADI) program to help older adults and care providers reduce the risk of falls. When using the STEADI algorithm and PTS’s fall risk assessment tool PTS is able to identify and customize an individualized treatment plan to target a patient’s specific fall risk factors.

PTS developed a 24-hour checklist that is targeted at new admissions to help reduce the common reasons of new admissions falls within those first few days. Hospitalization is very stressful and disorienting for any patient, couple this with transitioning to another new environment such as a SNF compounds the process. The Fall Report assist in collecting information on the resident and their surrounding environment post fall. This information assists with determining the root cause and developing an effective care plan.

Purposeful (**hourly**) rounding has shown to improve many aspects of the patient experience in the post-acute setting. Purposeful rounding leads to decreased falls, increased patient satisfaction, and improvement with many other patient quality metrics such as pain and incontinence.

Educating patients and their caregivers on specific fall risks, diagnoses and how they can mitigate risk empowers the individual to take charge. Educational material is designed to target specific physical and cognitive deficits of the older population, as well as common medical diagnoses. These materials highlight impairments, how they increase fall risk, and what the individual can do to reduce their risk and what their medical team can do to help them. It’s a all hands on deck approach, educating everyone on how they can contribute is an essential part for patient care.

A key aspect of any successful falls prevention program is an interdepartmental fall committee that meets regularly to discuss all falls, fall risk assessment of each new admission, and review the effectiveness implemented by a fall intervention and management program. This team should be responsible to develop a Quality Assurance and Performance Improvement plan or QAPI in order to define goals and evaluate performance over time.

It takes a team based approach to reduce the risk of falls for our most vulnerable population. By addressing fall prevention proactively, we can enhance the lives of those we care for, improve outcomes, reduce hospitalizations, address quality measures and reduce the cost of health care.

SOURCES:

Special Committee on Aging United States Senate. (2019) Fall Prevention: National, State, and Local Solutions to Better Support Seniors Available at: https://www.aging.senate.gov/imo/media/doc/SCA_Falls_Report_2019.pdf

CDC Injury Center. (2019). Stopping Elderly Accidents, Deaths & Injuries. Available at: <https://www.cdc.gov/steadi/materials.html>

<https://www.aging.com/falls-fact-sheet/>

ABOUT PREFERRED THERAPY SOLUTIONS

Preferred Therapy Solutions is a full-service rehabilitation management organization dedicated to providing state-of-the-art clinical, management, billing, and information technology solutions to the post-acute and long-term care industry. Preferred Therapy Solutions is able to assist in developing a strategic road map designed to increase SNFs market share by identifying potential referral targets and providing useful information on competitor’s performance. Preferred Therapy Solutions abilities significantly enhance the quality, productivity, scope, and efficiency of any facility’s rehabilitation department while maintaining a focus on achieving high levels of patient satisfaction and providing excellent customer service.