

Reducing Healthcare Acquired Conditions

OFMQ has consulted with Long Term Care (LTC) facilities in Oklahoma since 2002 and is a trusted resource, providing industry leading experts trained in helping to improve the quality of care for LTC residents. OFMQ is currently working with up to 60 LTC facilities on a project funded through a grant from the Oklahoma State Department of Health (OSDH) to reduce healthcare-acquired conditions. These conditions include: improvement in Falls with Major Injury, improvement in Self-Reported Pain and reduction of Pressure Ulcers and Urinary Tract Infections.

This project began in November of 2014 and is projected to run through June of 2017. Through a Quality Assurance/Process Improvement (QAPI) approach, OFMQ helps nursing home staff identify opportunities for improvement in order to achieve positive outcomes through direct, onsite technical assistance. Using data to drive change, OFMQ meets with and mentors QAPI teams to develop improvement plans and implement proven interventions. OFMQ also provides onsite as well as regional education, an online resource center, and information on tools and resources as part of this project.

This SMarTT Falls Prevention Protocol was developed as a part of this grant to help LTC facilities with their Falls Prevention programs.

To find out more about LTC-related events happening in Oklahoma, visit OFMQ's website at: <http://www.ofmq.com/event-month>



OFMQ Falls Prevention Protocol

OFMQ is here to help ...

If you would like to know more about OFMQ's Nursing Home projects, please contact us!

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Falls Prevention – A SMarTT thing to do!

According to the CDC, about 1,800 elders residing in nursing homes die each year from fall-related injuries, and those who survive falls frequently experience injuries that result in permanent disability and reduced quality of life.¹ According to the Nursing Home Compare web site, 5.2% of Long-Stay residents in Oklahoma nursing homes experience a fall with major injury which is higher than the 3.2% national rate.² One third of falls among nursing home residents results in an injury.³ OFMQ is helping nursing homes throughout the state to improve their outcomes for this measure.

¹ [CDC web site](#)

² [NH Compare web site](#)

³ [NH Compare web site](#)

SMarTT At-a-Glance:

Sleep: Increase undisturbed, restorative sleep

Mar: Improve MAR processes

Transfer: Improve transfer processes

Therapy: Use therapies that strengthen and positively impact balance

SMarTT Interventions

While there are multiple interventions that nursing homes can do to address falls, focusing interventions on these four areas will go a long way to improving outcomes. These can be done in addition to all the other great interventions that are currently in place.

Sleep

We are learning that quality nighttime sleep coupled with daytime alertness (also referred to as “sleep hygiene”) may be one of the more important interventions for preventing resident falls. Often the nursing home environment hinders residents’ ability to experience undisturbed, restorative sleep at night. This can manifest itself in residents who are less active during the daytime, who nap frequently, appear confused or even agitated, and, consequently, fall. It is possible residents are being medicated for psycho-social behavior that can be

attributed to poor sleep hygiene! Some of these medications, in turn, can compound the susceptibility of residents falling.

Following the Restorative Sleep and Vitality Program (RSVP) interventions recommended by Sue Ann Guildermand, Director of Education at Empira,⁴ and helping your residents to experience undisturbed, restorative sleep, would be a good start to addressing resident falls in your home.

⁴ [Empira web site](#)



MAR (Medication Administration Record)

Some medications can increase the risk of falls and fall-related injuries. Drugs that affect the central nervous system, such as sedatives and anti-anxiety drugs, are of particular concern. Many of your residents may be on a multitude of medications. Continual review/monitoring of the residents’ MAR by a care team (physician, pharmacist, and nursing) is essential for safety. Using technology, such as a medication module in an electronic health record, is highly recommended.

Transfers

While there will always be residents who need assistance with transfer, safety should be your top priority. Because of the potential for physical injury to the caregiver, OSHA recommends that manual lifting of residents be minimized as much as possible and eliminated when feasible.⁵ Implementing a Safe Resident Transfer Program is an important part of your Falls Prevention efforts. Be sure to include your PT/PTA staff when setting up or re-evaluating any Resident Transfer Program to ensure you are protecting not only your residents but your workers as well. Create a work environment that is supportive, such as an “I’ve Got Your Back” campaign where co-workers help each other with transfers.

⁵ [OSHA web site](#)

Therapy

Consider providing therapy classes with licensed therapy staff (PT/OT) with a focus on strengthening and positively impacting balance. Include assessments of balance and coordination, strength, reaction time, and aerobic capacity. Begin the class with five to ten minutes of warm-ups that includes stretching of the major lower limb muscle groups, and end with a ten minute cool-down period that includes gentle stretching, relaxation, and controlled-breathing practice. To make each class even more fun, include music chosen by the residents.

In multiple studies, consistently-practiced modified Tai Chi forms have shown promise as an intervention for falls prevention. Some nursing homes in Oklahoma have started Tai Chi with their residents. For more information contact Avy Redus at the Injury Prevention Service, Oklahoma State Department of Health at 405.271.3430, or 1-800-522-0204, or email her at AvyD@health.ok.gov.