

Fall Reduction in Assisted Living

Cozad Community Health System, Cozad Nebraska



Background

- Cozad Community health system has an assisted living facility, Meadowlark Pointe (MLP). Currently 34 residents live in 3 settings, memory care, studio apartments and traditional assisted living.
- This aging population is known to be at high fall risk.

Definitions for fall risk:

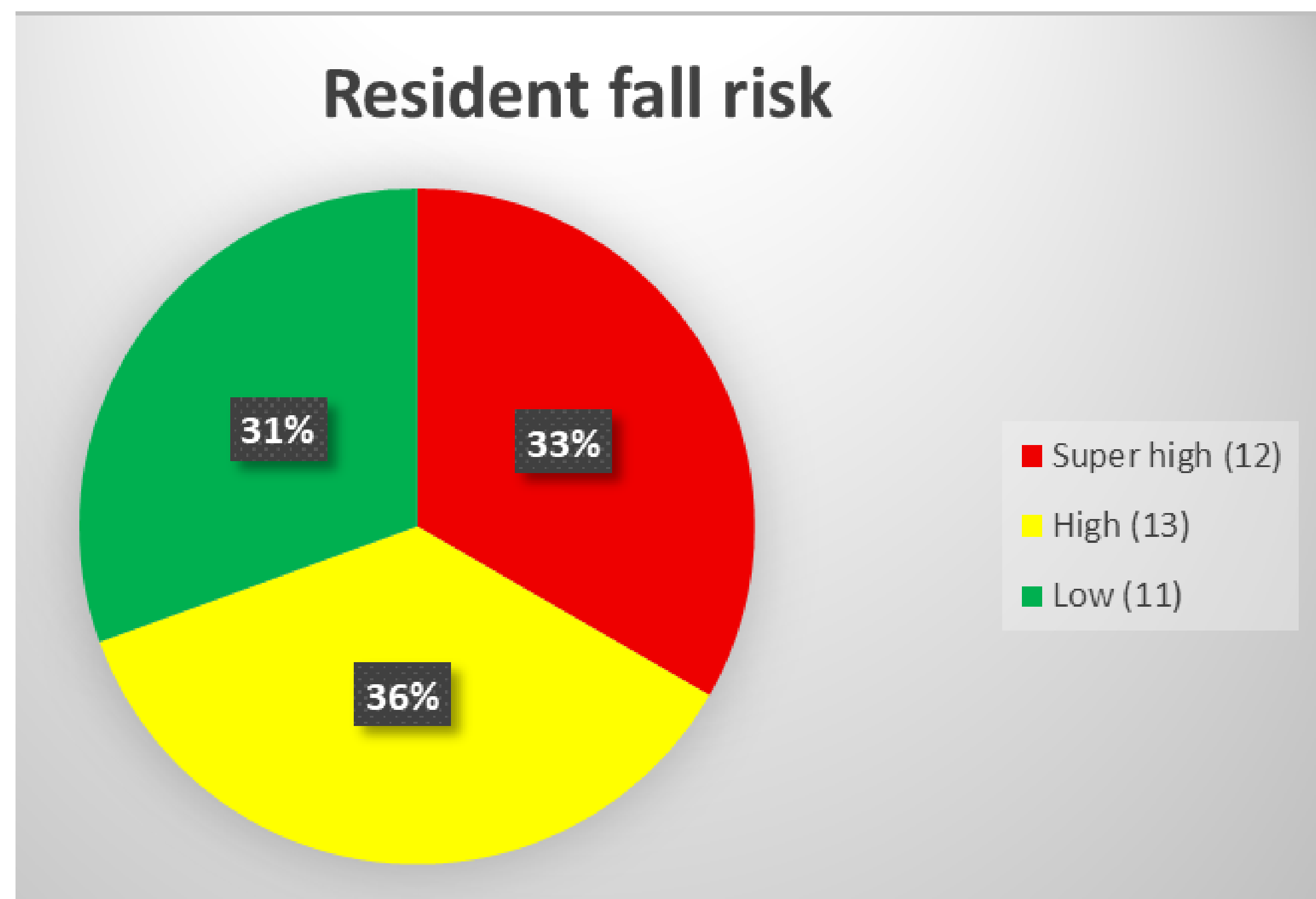
None—patient had no injuries

Minor—resulted in application of a dressing, ice, cleaning of a wound, limb elevation, topical medication, pain, bruise or abrasion.

Moderate—resulted in suturing, application of steri-strips, splinting, or muscle/joint strain.

Major—resulted in surgery or internal injury (rib fracture, small liver laceration)

Death—the patient died because of injuries sustained from the fall



Aims

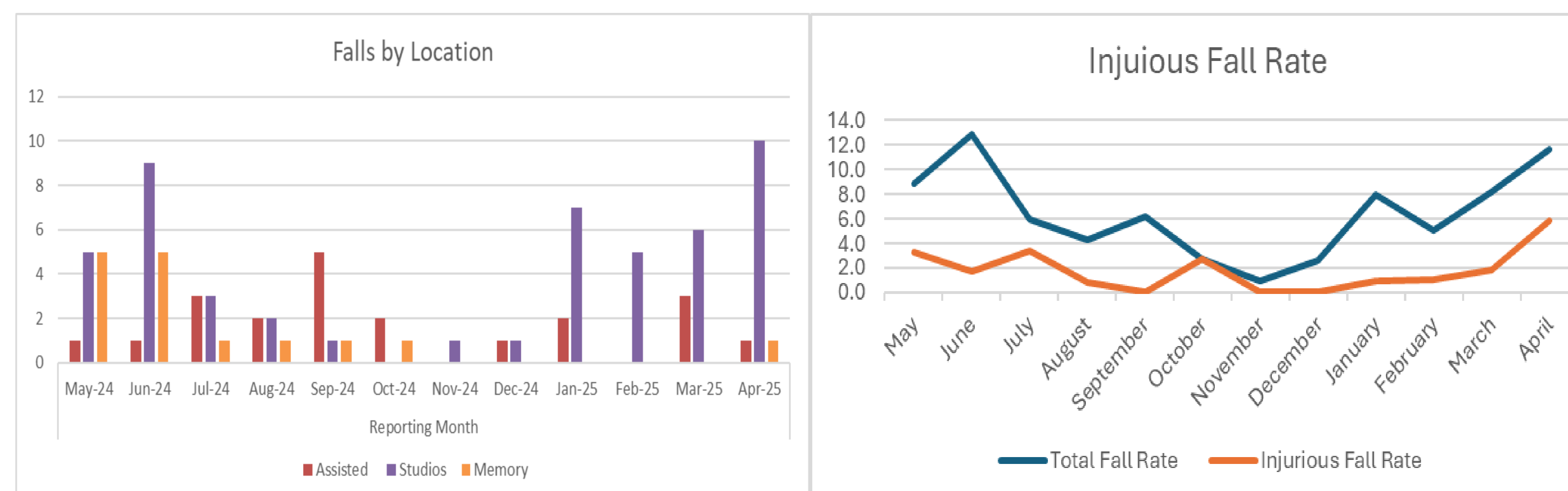
- Reduce injurious falls at MLP to less than 1.5/100 resident days by the end of the fiscal year.
- The fall rate for 2025 fiscal year was 6.45 with an injurious fall rate of 1.79

Plan

- The FRASS is completed on a biannual basis in March and September to determine residents fall risk.
- When a fall occurs, staff completes an incident report on SQSS, and data is gleaned from this to gather statistics.
- Individualized fall reduction measures are put in place for each resident.
- General interventions include:
 - Movement challenges for all residents and staff
 - Biannual staff education regarding resident fall risk
- Common interventions include:
 - Patient education
 - Staff education
 - Use of adaptive equipment such as bed cane or walker
 - Hourly rounding
 - Family education for higher level of care when resident needs more assist

Measure

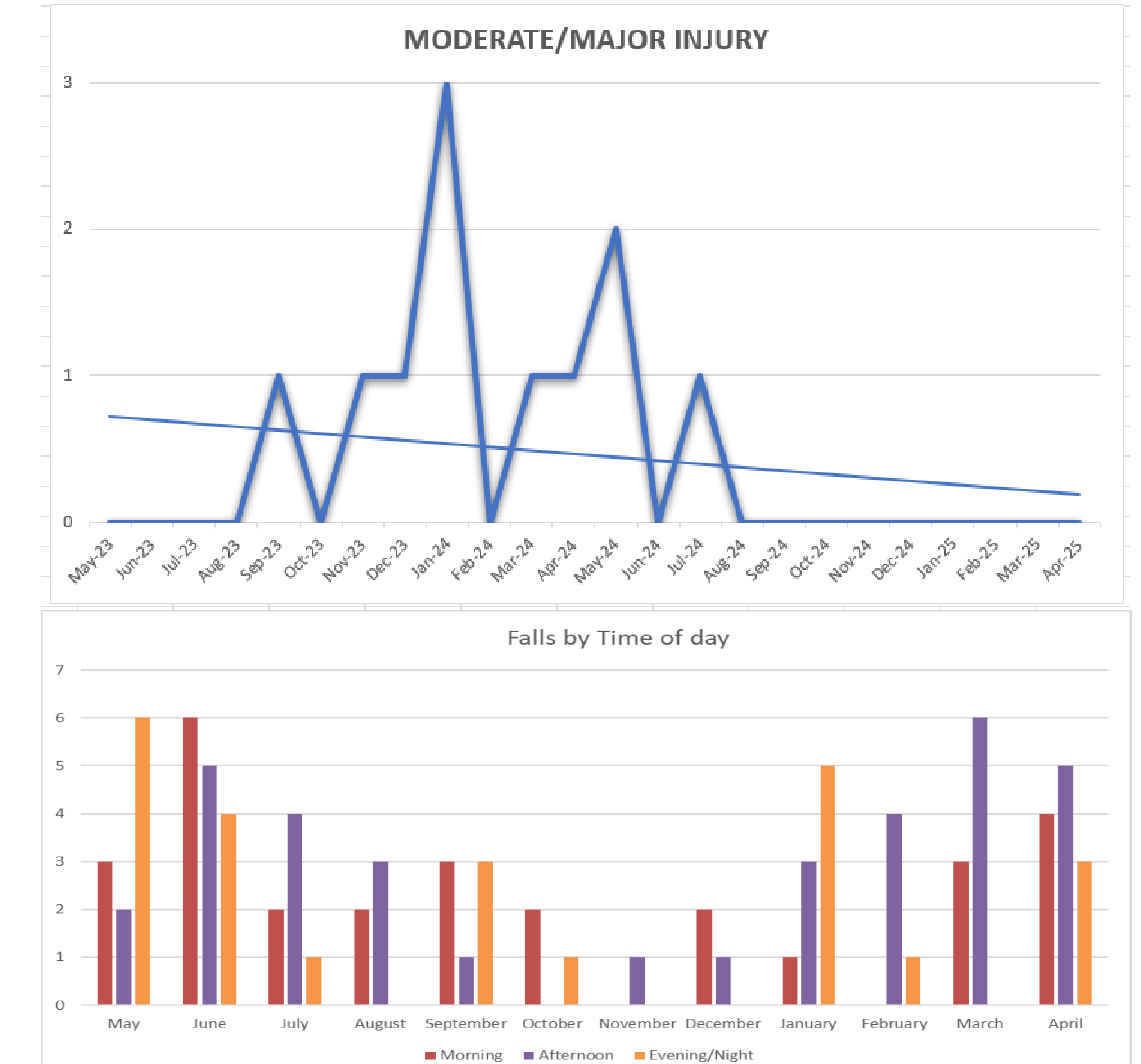
Data is gathered from the Incident Reporting System and tracked by the fall risk team.



Results

Several trends are noted in the data.

- Studio care has the most frequent number of falls.
- Afternoons are the most frequent time of fall
- Most falls are not injurious
- Injurious fall rates are tending down



Next Steps

- Continue to track data to identify trends.
- Continue bi-annual fall screening and staff education
- Continue movement challenges and individual fall interventions.

Team

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