1-22-25 Weekly Clinical Update

If you monitor survey trends at all, you know that F689 related to falls continues to be a top-cited deficiency in both standard surveys and complaint surveys, in both the state and nationally. In other words, it's a big issue and frequently providers say something like…"we've tried all the interventions possible and the resident still keeps falling". We also frequently hear, "they have a right to fall". The reality is that falls have both acute and long-term negative consequences for elders and residents and providers don't do what you do for regulatory compliance, but rather to provide excellent care to residents and meet the expectations of residents and family members, but everyone is very aware of the pressure of the survey system.

The first step in preventing falls is appropriate, thorough, timely and accurate risk assessment, then care planning interventions based on the identified risk factors and setting reasonable goals. Then of course, if/when a resident falls, performing an effective root-cause analysis to review current care plan interventions and implement new interventions based on the identified causal factors. Then of course, consider achieving past non-compliance for any identified deficient practice.

AHCA has provided members with vast resources, including resources to assist with survey tips for F689 and Past Non-compliance. https://www.ahcancal.org/Survey-Regulatory-Legal/MemberOnlyDocs/Survey%20Tips/Survey%20Tips-%20F689%20and%20Past%20Noncompliance.pdf Below the tips from that resource are provided to act as a "checklist" for facilities to use in reviewing and revising fall protocols:

We have listed below the components of the regulatory requirement for reporting of violations with tips on how to ensure compliance based on a review of the common reasons facilities received citations for F689- Supervision/Hazards/Accidents. Tips to avoid accidents, and keep your residents safe:

- ✓ Develop a culture of safety and commitment to implementing systems that address resident risk and environmental hazards.
- ✓ Ensure you have a process in place to communicate any interventions specific to residents. For example- ensure front-line staff are aware of interventions established for fall prevention so each established intervention is followed.
- ✓ If an elopement risk assessment shows a resident is at risk for wandering, there should be interventions established to ensure the resident is always appropriately supervised.

- ✓ Check wander guard bracelets, and door-mounted devices frequently (daily) to ensure the bracelet is in place and working properly, and all exit doors are locking properly.
- ✓ Audit all residents who require any devices attached to their bed for mobility purposes, to ensure the least restrictive method is used, and the resident is not restrained by the device.
- ✓ Complete walking rounds to check for environmental hazards throughout the facility. This responsibility can be shared amongst management staff to ensure multiple individuals are checking for hazards inside and outside the facility.
- ✓ Develop facility policies and procedures for allowing residents to sit outside of the facility. These procedures should include supervision by staff, sunscreen application, and protective eyewear/hats, as appropriate.
- ✓ Complete competency assessments routinely on mechanical lift transfers.
- ✓ Educate, and re-educate facility staff on how to access the residents' individual care plans. Ensure staff are aware that they must check the care plans daily, at the beginning of each shift, to ensure all new/updated interventions are followed.
- ✓ Complete a post fall evaluation, as soon as possible after a fall. Develop/update interventions, as appropriate to prevent future falls.

Tips to achieve Past Noncompliance if an adverse event occurs. The first step is to ensure the resident is safe and has been assessed as appropriate by nursing staff. Once the resident has been assessed and is in a safe position, we encourage you to follow these tips/steps

- ✓ When an adverse event occurs, including an elopement, pull together all appropriate staff to have an Ad Hoc Quality Assurance (QA) meeting.
- ✓ At this meeting, discuss what occurred, what you believe to be the Root Cause (may be an initial conclusion until you can complete a thorough investigation).
- ✓ Make sure all staff sign in at the meeting.
- ✓ Start a folder, or binder, for all documentation to support what you have completed.
- ✓ Complete any reports to the SSA, as appropriate.
- ✓ Begin to fill in your internal Plan of Correction.
- ✓ Do an initial audit- for elopement, this will normally be a count of all residents in the building to ensure everyone is present in the facility.

- ✓ Establish what the ongoing monitor will be, based on the Root Cause Analysis (RCA).
- ✓ Identify who will complete the ongoing monitor.
- ✓ Complete staff training with all appropriate staff and contract staff.
- ✓ Update any care plans, as appropriate, and ensure interventions are appropriate and communicated to all staff.
- ✓ Review interventions routinely to ensure they are still appropriate.
- ✓ Maintain your folder or binder in a safe place so it is accessible when surveyors enter the facility.