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ARE YOU DOING ENOUGH?

Falls resulting in serious injury and sometimes death, account for about 85% of all Lawsuits/Claims for Senior Living Providers. Regardless of what specific state regulations you must follow, as a licensed provider, you are expected to provide a certain level of care to residents in your custody and control. When a provider falls short and a resident suffers injury or death from a fall, it places the senior living community at a high risk for litigation, loss of reputation, higher insurance premiums or non-renewal of liability insurance coverage.

It is estimated that up to 50% of Assisted Living residents experience one or more falls annually. Between 10-25% of these falls require medical attention due to fractures, injuries and head trauma. According to the Center for Disease Control (CDC), an older adult dies from a fall every 20 minutes in the United States. Knowing which residents are most at risk through

detailed Fall Assessments, evaluations and interviews are the first steps. In addition, regularly scheduled assessments, therapy evaluations, a comprehensive fall reduction program and your documentation and communication to responsible parties and physicians are critical to keeping residents safe and protecting your community from these types of incidents, as well as claims and lawsuits.

CONTACT INFORMATION

John Moore

Senior Consultant, Risk Engineering

T 919.462.0156 | John.Moore@cfins.com

What should an Assisted Living Community do?

Prior to Admission/Acceptance of resident

- Comprehensive Medical evaluation completed by Licensed Physician to include any history of falls.
- Interview of Resident/responsible parties that includes open discussion about hospitalizations, "near falls" and history of falls. During this time it is important to openly discuss realistic expectations and all risks associated with falls.
- Conduct comprehensive Fall Risk Evaluation (Sample available upon request) and if any risk for fall identified.
- Decide if resident can safely be managed in your community with known risks, history and interventions available in your community.
- Provide Resident/Responsible parties with "Important Facts about Falls", developed by the CDC. (Links available upon request)
- Identify and select preferred therapy provider. (Can be Outpatient Clinic using leased community gym or other space or Home Health Care)

Post admission of resident

- Obtain referral for Therapy evaluation.
- Documented orientation of safety features of community, interventions and walk through of resident apartment to insure safe walkways, etc. (with resident and responsible parties).
- Daily encouraging of residents to attend exercise classes to maintain muscle strength, balance, flexibility, balance, stamina and more. (Tai Chi is proven to be an excellent fall prevention program for seniors.)
- Hold regular resident, family member educational sessions on fall prevention
- Screening by Physician/Therapists for appropriate selection and use of any assistive device.
- Educate Staff of resident fall risk and any preventative steps and interventions in place to support positive outcomes.
- Conduct comprehensive Fall Risk Evaluation at 30 days post admission.
- Conduct comprehensive Fall Risk Evaluation (Sample available upon request) at least quarterly for all residents with a cognitive diagnosis (i.e. Alzheimer's, Dementia, Parkinson's, etc.) and at least every 6 months for all other Assisted Living Residents.

Post Fall Steps

- Conduct a "post fall" assessment to determine root cause of fall.
- Obtain Order for Therapy Evaluation, if resident isn't already on therapy.
- Post fall should consist of closer supervision, shift documentation, personal escorting to all meals, activities and documentation for next 72 hours
- Schedule resident/responsible party meeting, document conversation (include feedback from Physician)
- Update or add additional interventions (sample interventions available upon request). Monitor, evaluate and document effectiveness.
- Update care plan of resident, have resident/responsible party sign. Provide copy to physician.
- Formal communication to all staff involved. Communication can be done by color sticker, falling leaf, star or other symbol on chart, door, bedroom wall or simply through daily shift meetings, 24-hour reports.
- Regular "Falls" meetings should be held. Participants should include the multiple disciplinary team with any therapist already assigned to resident. Discussing effectiveness of interventions, identifying any trends, determine if resident's needs can be safely managed in your community.
- Implement (or update) Negotiated Risk Agreement.

Education

- It's Important to conduct regular education sessions for residents/responsible parties and staff.
- Partner with Physician and or Therapy providers to provide ongoing support, guidance and education to residents, family members and staff.
- Educate residents on importance of regular exercise and incorporate into activities programs, etc. (Tai Chi is the very effective to help with balance and strength.)
- Utilize **Free Customizable** educational materials available to you from the CDC. (Links are available upon request.)

Through increased education and knowledge, you can be a vital asset when it comes to resident safety and fall reduction. Are you doing enough? We are proud to partner and be a resource to you as you help keep your residents safe. Feel free to reach out to your Crum & Forster designated Senior Risk Consultant for a review of your efforts and any additional resources or training needs.



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