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FALLS IN SENIOR CARE COMMUNITIES

This is part one of a four-part series on best practices to keep your residents safe and to protect your senior living community from the negative effects from claims and lawsuits as a result of resident falls.

Falls in senior living communities account for approximately 85% of claims reported to insurance carriers. Regardless of which state regulations you must comply with, as a licensed provider (i.e. Assisted Living, Personal Care, Adult Care Home, Memory Care or Residential Care Facility), 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 an elevated risk for litigation, regulatory citations, loss of reputation, and higher insurance premiums or non-renewal of liability insurance coverage.

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PART 1

Identifying which residents are at a high risk of falling

It's essential that administration and ownership know which residents are more prone to falling and take a proactive vs. reactive approach as part of their risk mitigation strategy. Proactive evaluation and intervention should start during the inquiry phase, prior to acceptance of admission. This can be done through a review of the H&P from the physician, as well as an interview with the resident and responsible parties.

Residents at a higher risk of falling:

- Residents with a history of prior falls: Experts report seniors with prior falls are 1½ to 7 times more likely to fall again.
- Residents with cognitive impairments: Residents who suffer from forms of dementia are more likely to fall based on cognitive reasoning related to daily activities and balance.
- Residents with diabetes: Those with diabetes may be predisposed to foot and leg injuries or may not have good balance as they compensate for other health conditions.
- Residents with history of cardiovascular and neurological diseases (ex. TIA, Stroke, Seizures and Parkinson) are more apt to fall than those without.
- Residents with incontinence issues: Resident may rush for a toilet without calling for help and slip and fall on the way.
- Residents utilizing a mobility aide: Residents using a cane, walker or wheelchair typically are using it to compensate for balance and stability and are more prone to falling.
- Resident prescribed medications: Certain medications cause drowsiness, dizziness, confusion, balance issues, etc.

Knowing which residents are the highest risk for falls is the first step in proactively managing residents and creating an effective fall prevention strategy. 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.

Stay tuned for Part 2: "The Importance of Fall Risk Assessments" of our four-part series on how to protect your senior living community from claims and lawsuits as a result of resident falls.



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