Comagine Health
Formerly Qualis Health and HealthInsight

Quality Measure Tip Sheet:

Falls with Major Injury — Long Stay

Quality Measure Overview

This measure reports the percent of long-stay residents who have experienced one or more falls with major injury reported in the target period or look-back period.

Numerator: Long-stay residents with one or more look-back scan assessments that indicate one or more falls that resulted in major injury IJ1900C = [1,2])

Denominator: All long-stay nursing home residents with one or more look-back scan assessments except those with exclusions.

Exclusions:

- Resident is excluded if the following is true for *all* look-back scan assessments:
  - The number of falls with major injury was not coded (J1900C = [-])

MDS Coding Requirements

In the Minimum Data Set (MDS):

- Include fall history on admission/entry or re-entry.
- Include number of falls since admission/entry, re-entry, or prior assessment (Omnibus Reconciliation Act (OBRA or scheduled Prospective Payment System assessment) whichever is more recent.]
- Major injury includes: Bone fractures, Joint dislocations, Closed head injuries with altered consciousness, or Subdural hematoma.

Ask These Questions

- Was the MDS coded as per the Resident Assessment Instrument requirements?
- Was a fall risk assessment completed on admission, quarterly, and with changes to identify appropriate risk?
- Was a process in place (based on fall score) to initiate preventive devices?
- Were preventive devices communicated to direct- care staff members?
- Are interventions monitored for placement and function?
- Are gait belts accessible for transfers?
- Do the nurses demonstrate competence for assessing fall risk?
- Are the direct-care staff members proficient in transfers and mobility functions
- Are fall precautions taken if the resident is on anticoagulants, antidepressants, antiepileptics, antihypertensives, anti-Parkinson agents, benzodiazepines, diuretics, nonsteroidal anti- inflammatory agents, psychotropics, vasodilators, laxatives, glycemic medications, tranquilizers, or hypnotics/sedatives?
- Are vision issues addressed?
- Is appropriate footwear used?
- Is the resident appropriately positioned?
- Are pain and comfort issues addressed?
- Are rest periods provided?
- Are activity programs individualized for the resident to meet his or her needs/preferences?
- Is continence managed?

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