Chapter 29
Saskatchewan Health Authority (Prairie North)— Preventing Resident Falls in Long-Term Care Facilities

1.0 MAIN POINTS

By February 2018, the former Prairie North Regional Health Authority had improved its processes for preventing resident falls in its long-term care facilities. It fully addressed the 12 recommendations we initially made in our 2015 audit. Prairie North:

➤ Maintained a safe environment for its residents (e.g., placed chairs in hallways at regular intervals, maintained bed alarm systems, completed fall-prevention safety checks)

➤ Trained staff on the new falls-prevention program and updated key fall-prevention policies

➤ Completed regular fall risk re-assessments

➤ Consistently aligned individual care plans with identified fall risk factors

➤ Investigated significant resident falls in accordance with policy

➤ Collected, assessed, and reported additional information on fall-related injuries to monitor performance related to fall prevention

2.0 INTRODUCTION

This chapter describes our follow up of management's actions on the recommendations we made in 2015 about the former Prairie North Regional Health Authority's processes for preventing resident falls in its long-term care facilities. Our *2015 Report – Volume 2*, Chapter 36 concluded that Prairie North had, other than the areas identified in the 12 recommendations, effective processes for preventing resident falls in its long-term care facilities.

On December 4, 2017, the Government of Saskatchewan consolidated all 12 regional health authorities into one Saskatchewan Health Authority, including Prairie North. The Authority, under *The Provincial Health Authority Act*, is responsible for planning, organizing, delivering, and evaluating health services including long-term care. This includes establishing processes to prevent resident falls within its long-term care facilities.

To conduct this follow-up audit, we followed the standards for assurance engagements published in the *CPA Canada Handbook – Assurance* (including CSAE 3001). To evaluate Prairie North's progress towards meeting our recommendations, we used the relevant criteria from the original audit. Prairie North's management agreed with the criteria in the original audit.

To carry out our follow-up audit, we discussed actions taken with management. We reviewed policies and procedures, fall risk re-assessment forms, post-fall reviews, falls

data monitoring reports, and other relevant documents. We also visited four long-term care facilities in the former Prairie North health region to observe practices and test a sample of resident files at each facility.

3.0 STATUS OF RECOMMENDATIONS

This section sets out each recommendation including the status of the recommendation at February 28, 2018, and the actions of the former Prairie North Regional Health Authority and the Saskatchewan Health Authority up to that date. We found all 12 recommendations were implemented.

3.1 Chairs Placed In Hallways at Regular Intervals

We recommended that Prairie North Regional Health Authority place chairs in hallways at regular intervals within its long-term care facilities. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

In January 2016, the former Prairie North Regional Health Authority implemented procedures to support the safe placement of chairs in hallways for residents to use for a rest if needed. Prairie North placed chairs in the hallways at regular intervals for all of the facilities we visited.

3.2 Bed Alarms Systems Maintained

We recommended that Prairie North Regional Health Authority develop processes to maintain functionality of its bed alarms systems used in its long-term care facilities. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

In November 2015, the former Prairie North Regional Health Authority updated its bed alarm system and implemented a process to maintain its bed alarms. For example, Prairie North requires staff to replace batteries in the bed alarms every three weeks.

At each facility, Prairie North tracks maintenance of the bed alarms. Prairie North properly maintained the functionality of its bed alarms in all of the facilities we visited. For the sample of bed alarms we tested, all functioned properly.

3.3 Staff Trained on New Falls-Prevention Program

We recommended that Prairie North Regional Health Authority provide training to staff on the new fall-prevention program once implemented. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

We recommended Prairie North Regional Health Authority regularly update key fall-prevention policies. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

The former Prairie North Regional Health Authority trained staff on the new fall-prevention program and updated its key fall-prevention policies.

In the fall of 2015, Prairie North implemented its new fall-prevention program. It developed a resource guide for its staff and provided staff training. The guide describes fall risk assessments and fall-prevention checklists to be completed. It did the training through in-person presentations provided as part of regularly scheduled day-long workshops, orientations for new care staff, and through the use of online training quizzes.

In April 2016, Prairie North updated its key fall-prevention policies. Prairie North also implemented a policy in October 2016 requiring all policies to be reviewed and updated (if needed) every three years.

3.4   Fall Risk Re-assessments Completed

We recommended Prairie North Regional Health Authority give staff additional guidance to help them determine when they need to perform a fall risk re-assessment following a change in health status. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

We recommended that Prairie North Regional Health Authority follow its policy to perform fall risk re-assessments. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

The former Prairie North Regional Health Authority provided staff with additional guidance on what a change in a resident's health status means; and staff completed fall risk re-assessments of residents as required by policy.

Prairie North's policy requires a fall risk re-assessment if there is a change in the resident's health status. With the release of the new fall-prevention program, Prairie North provided staff with additional guidance in the resource guide to help them determine when to perform a fall risk re-assessment following a change in health status (e.g., a change in blood pressure).

For the resident files we tested, 92% of residents who had experienced a change in health status had a fall risk re-assessment performed.

Prairie North's policy also requires that fall risk re-assessments be completed quarterly and annually. For the resident files we tested, staff re-assessed 86% of residents as required.

In 2016, Prairie North began testing a sample of resident files in each facility each month to verify that all required forms and assessments are complete and on the resident file. If results showed that staff were not completing the required forms and assessments, management indicated they discussed the results with staff. They clarified the importance and reminded them how to complete the required assessments. Management also noted that they incorporated findings into future staff training.

For example, in one facility, Prairie North's audit results showed compliance improved from 61% in December 2016 to 80% in December 2017.

3.5   Fall Risks Linked to Care Plans

We recommended Prairie North Regional Health Authority consistently link residents' individual care plans to identified fall risk factors. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

The former Prairie North Regional Health Authority consistently linked residents' individual care plans to identified fall risk factors.

In May 2017, Prairie North developed a standardized form for care planning that aligns care plans with fall risk assessments. Based on the risk scores (i.e., low, high) from the fall risk assessments, the care plans prompt nursing staff to identify the appropriate intervention. For example, if staff assessed a resident as a high fall risk, high-risk interventions would be put in place and could include bed alarms, referral for assistive devices (e.g., walker), etc.

For the resident files we tested, all resident files had fall interventions identified in their care plans that corresponded to their fall risk level.

3.6   Resident Falls Investigated

We recommended Prairie North Regional Health Authority establish a process to investigate significant resident falls in accordance with policy. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

The former Prairie North Regional Health Authority investigated significant resident falls in accordance with policy.

Prairie North's policy includes procedures for addressing a fall after it occurred (i.e., requiring a post-fall review). Nursing staff are to complete the post-fall assessment checklist after a resident fall. See **Figure 1** for key content.

Figure 1—Key Content of Post-fall Assessment Checklist

> ➢ Resident activity at time of fall (e.g., getting in/out of bed, going to bathroom, transferring)
> ➢ Location of fall (e.g., resident's room, dining room, hall)
> ➢ Assistive devices (e.g., canes, walkers) in use and within reach
> ➢ Physical status of resident at time of fall (e.g., weakness/fatigue, poor balance, pain)
> ➢ Root cause of the fall
> ➢ Fall interventions put in place to reduce likelihood of another fall
> ➢ Who was notified (e.g., physician, family, nurse in-charge)

Source: Former Prairie North Regional Health Authority checklist.

For the resident files we tested, we found that nursing staff completed all the post-fall reviews on the same day the fall occurred.

3.7 Fall-Prevention Safety Checks Completed

> ***We recommended Prairie North Regional Health Authority require each long-term care facility to complete and document regular fall-prevention safety checks.*** (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

> **Status** – Implemented

Each long-term care facility in the former Prairie North Regional Health Authority completed and documented regular fall-prevention safety checks.

In April 2016, Prairie North revised its policy to require housekeeping staff complete and document fall-prevention safety checks using the fall-prevention checklist. For example, housekeeping staff are to check that:

➢ Light switches and light pull cords are accessible for residents (e.g., not too high)

➢ Bed brakes are on

➢ Room is returned to original lay-out after cleaning

➢ Room is free of clutter and debris

Housekeeping staff are to complete this checklist when the facility discharges a resident or transfers a resident to another room. In addition, they must complete it each month when doing a deep clean of a resident's room.

Prairie North completed the fall-prevention checklists as required for all of the facilities we visited.

3.8 Information on Fall-Related Injuries Collected, Assessed, and Reported

We recommended Prairie North Regional Health Authority collect information on fall-related injuries (e.g., percentage of falls causing injury, number of falls causing injury, severity of fall injuries). (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

We recommended Prairie North Regional Health Authority give senior management and the Board regular reports on fall-related injuries. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

We recommended Prairie North Regional Health Authority establish fall-related injury benchmarks, and once developed, take timely action to address issues identified. (2015 Report – Volume 2; Public Accounts Committee had not yet considered this recommendation as of April 25, 2018)

Status – Implemented

The former Prairie North Regional Health Authority routinely collected and reported information on fall-related injuries to senior management. It took timely action to address fall-related issues.

Prairie North set a goal to consistently reduce falls and fall injury rates. To monitor its progress, it tracks and reports the following:

➢ Each quarter, it tracks and reports by ward by facility by month the number of falls, fallers, and severity of any injury

➢ On a bi-weekly basis for each facility, it tracks and reports to senior management the number of incidents by ward, type (e.g., fall, medication error), severity, and date

➢ On an on-going basis, within each ward, Prairie North tracks detailed information about incidents including the date and time a resident experiences a fall and injury classification (i.e., no injury, minor injury, serious injury)

Prairie North uses this information to monitor trends and take action to reduce falls in the future. For example, management indicated they noticed an increase in falls at one facility at a certain time of day. They investigated the matter and found that staff breaks coincided with the start of a recreational program for its residents. Management worked with staff to stagger breaks at this time.

The former Prairie North Board received various reports on its fall-prevention program. At February 2018, management indicated that they have not established a process for reporting to the Saskatchewan Health Authority's Board. It expects to work with the Authority's management team to do so.