



# Quality Measure Tip Sheet: Falls With Major Injury—Long Stay

## Quality Measure Overview

- This measure is a **look-back scans** measure. If the resident had one or more falls with a major injury on one or more of the look-back scan assessments, it will trigger the measure.
- Measure triggers if the event/condition occurred any time during a **one-year period**.
- Fall history is obtained with a look-back of **up to six months prior to admission**.

### Exclusions:

- The occurrence of fall was not assessed.
- The assessment indicates that a fall occurred and that the number of falls with major injury was not assessed.



## 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 Medicare Prospective Payment System assessment)—whichever is more recent.
- Indicate major injuries for:
  - Bone fractures.
  - Joint dislocations.
  - Closed head injuries with altered consciousness.
  - 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, antiparkinson 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?

For guidance on quality measures, reach out to Health Services Advisory Group (HSAG).

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