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Preventing Falls in Older Hospitalized Adults: Six Steps to Lower Liability and Reduce Nonreimbursed Costs

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UP TO 1 AMA PRA CATEGORY 1 CREDIT™

This activity is designed for geriatric specialists, primary care physicians, emergency medicine physicians, hospitalists, and other hospital-based healthcare personnel.



Patient falls continue to remain the largest single category of reported incidents in hospitals, making fall prevention a vital National Patient Safety Goal from The Joint Commission. As many as 10% of older adults fall during an acute care inpatient stay. While the acute care environment itself contributes to falls in older persons, manifestations of acute illness, polypharmacy, and medication side effects are also risk factors in the acute care setting. The injuries as a result of falls in older people are a significant source of disability and death. Under Medicare's new payment policy to take effect in October 2008, hospitals will no longer be compensated for treating certain preventable conditions acquired during patients stays, including injuries from falls. In this video, Dr. Steven C. Castle outlines the necessary steps and recommendations for improving fall prevention in the acute care setting and for exceeding compliance requirements.

LEARNING OBJECTIVES

After taking part in this CME activity, participants should be better able to:

- Analyze where and how falls are likely to occur
- Identify older patients who are at high risk of falling
- Plan care through interdisciplinary communication and assessment
- Implement organization-wide steps that will help reduce the overall risk of falls and injuries
- Fulfill The Joint Commission training requirements

CME CREDIT DESIGNATIONS

ACCME The Network for Continuing Medical Education (NCME) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

AMA NCME designates this educational activity for a maximum of 1 *AMA PRA Category 1 Credit™*. Physicians should only claim credit commensurate with the extent of their participation in the activity.

AAFP This activity has been reviewed and is acceptable for up to 1 Prescribed credit by the American Academy of Family Physicians. AAFP accreditation begins May 27, 2008. Term of approval is for one year from this date, with option for yearly renewal.

AOA This activity is eligible for up to 1 hour of credit in Category 2-A of the American Osteopathic Association.

SUGGESTED RESOURCES

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