## **AHRQ's Safety Program for Nursing Homes: On-Time Falls Prevention**

## Menu of Implementation Strategies

The On-Time Falls Prevention Menu of Implementation Strategies for using reports is a list of potential ways facility teams may choose to integrate the falls risk reports into clinical practice. In addition, the menu helps the team consider other possible uses of the reports. The menu allows the facility team to consider which implementation strategies best fit within their workflow and meet the unique needs of their facility, avoiding the "one size fits all" approach to using the reports.

Implementation strategies are developed to include multiple disciplines, not only nursing, to promote the most effective use of reports among disciplines and improve communication across disciplines. Teams are encouraged to identify implementation strategies that may not be included on the list but are suited to integrate seamlessly into workflow at their facility.

The Falls Prevention Menu of Implementation Strategies table below summarizes potential uses for each report, as described in each report section. See Tables 3, 6, 8, and 10.

## Falls Prevention Menu of Implementation Strategies

		Existing	New
Falls High Risk Report			
1.	Care plan meetings		
2.	Nursing Assistant Shift Change Report		
3.	Nurse Shift Change Report		
4.	Root Cause Analysis for New Falls		
5.	Weekly Falls Risk Huddle		
6.	Weekly Behavior Review Meeting		
7.	Pharmacy Consultant Monthly Medication Review		
8.	Weekly Falls Risk or Safety Meetings		
Quarterly Summary of Falls Risk Factors by Unit or Facility			
1.	Quality Improvement Review		
2.	Rehab Department Internal Review		
3.	Root Cause Analysis for New Falls		
4.	Weekly Falls Risk or Safety Meetings		
Monthly Contextual Factors by Unit or Facility			
1.	Quality Improvement Review		
2.	Root Cause Analysis for New Falls		
3.	Pharmacy Consultant Monthly Medication Review		
4.	Rehab Department Internal Review		
Postfall Assessment Summary by Resident			
1.	Care Plan Meetings		
2.	Rehab Department Internal Review		
3.	Root Cause Analysis for New Falls		
4.	Weekly Falls Risk Huddle		
5.	Pharmacy Consultant Monthly Medication Review		
6.	Weekly Falls Risk or Safety Meetings		