Acknowledgements

“We are forced to try to educate the CNAs and other nursing home staff in the traditional way of didactic instruction, marginally effective at best. Materials are currently being used only for our dementia unit staff, but residents throughout other units demonstrate varying degrees of dementia, which increases the risk of falling. We are desperate for materials that can be used in multiple settings, in multiple ways, and are easily adapted to different learning styles”

- Kathy Nyquist, Administrator, Beechwood Homes

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**Beechwood Homes** (lead agency)
http://www.beechwoodcare.org/

**Grace Manor Health Care Facility**
http://www.gmhcf.org/

**Jewish Home of Rochester**
http://www.jewishhomeroch.org/

**Rosa Coplan Jewish Home and Infirmary**
http://www.weinbergcampus.org/

**St. Ann’s Community**
http://www.stannscommunity.com/

**St. John’s Homes**
http://www.stjohnshome.com/

**The Friendly Home**
http://www.friendlyhome.org

Consultants
**The Alzheimer’s Association of WNY** (AAWNY) who’s *Behavior Management in Dementia Care* DVD was the inspiration for content and format of this project. They provide oversight and guidance for developing content, and direction of patient actors.
http://www.alz.org/wny/

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http://www.fullcirclestudios.com/

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www.chitime.info/

**Disclaimer**

The authors and producers of this program have made every effort to ensure that all of the information and instructions given in the DVDs and corresponding training manuals are accurate and safe. They cannot be held responsible for any resulting injury, damage or loss to either person or property, whether direct or consequential and however it occurs.

This program was based on experience of the authors and personal interviews. Names and situations presented in case studies are fictionalized. Necessary releases were obtained from all persons featured in the DVDs.

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I. Intervention
Based on the need for better staff training in fall prevention and the challenges of a growing dementia population, a consortium of nursing homes in Buffalo and Rochester New York, with the expert help of WNY consultants, has developed a multi-media based training program to reduce the incidences of falls in long term care facilities.

The program is a fall reduction program consisting of thorough staff training with emphasis on teamwork and physical exercise to maintain or improve a resident’s functional status. It is easy to use, cost effective and appealing. As we brainstormed, researched and interviewed staff members, a program evolved to train not only all staff (direct and indirect care) in fall prevention but volunteers and family as well. The result is the 2 interactive training DVDs and corresponding manuals included in this package.

II. Goals and Benefits
Objectives of the Intervention
• For the resident: Reduction of falls through calming physical exercise (Tai Chi) and improved quality of life.
• For the staff: Education related to the special challenges of preventing falls in residents with dementia, improved interactions with residents and improved job satisfaction.

III. Program Structure
Fall Prevention; A Team Approach in Dementia Care
Duration: The program is on-going and can be used for new staff members or as a refresher program. Refresher program is recommended to be applicable to CNA recertification requirements.

Participants in the Program: All Staff, (direct care and indirect care), volunteers and family members.

Group Size: 10-15 people/group to allow adequate discussion. Program is also designed to be completed individually.

All staff, volunteers and family members are encouraged to participate. Participant should have an understanding of material as evidenced by quizzes and case studies.

Program Content: The fall prevention DVD is an interactive training/informational program for all staff, volunteers and family. Content consists of a general introduction, a section addressed to administration and then it is divided into tracks specific to individuals viewing the program. Each section has similar topics such as “Understanding Dementia” or “Strategies for Fall Prevention” but the topics are tailored to the audience. For example, content in risk assessment and care planning under direct care staff is more involved and detailed than content provided to indirect care staff.

Physical Environment: Training can take place wherever there is a DVD player and television. Groups may take place in a class room, but an individual may view the DVD on the unit.

Equipment Needed: DVD player and television

Staff Requirements: Staff education for in-services.
Forms to Assist in Care Planning: A comprehensive Risk Assessment Tool, Post Fall Tool, Environmental Assessment, Interdisciplinary Care Plan guidelines and Quality Assurance measures are included.

IV. In-service
For Staff/Volunteers
Learning Objectives: In order to reduce the incidence of falls in nursing facilities this program hopes to provide information to staff, volunteers and families related to the following topics:
1. Understanding of residents with Alzheimer’s and other dementias.
2. Understand the elements associated with falls risks and how to minimize risk.
3. Understand the elements of effective problem solving with emphasis on root cause analysis and developing creative solutions.

Duration of in-service: Initial staff training can take place in 2-4 sessions depending on length of each session. It is recommended to view DVD in sections and allow time for discussion.
Preparation: Obtain television and DVD player, schedule training sessions, make handouts.
Instructions: A pretest may be given prior to beginning program. View DVD with hand outs, pause for discussion as indicated, review quizzes and case studies, have participants evaluate program.

V. How to run the program from start to finish
1. Instructor, administration and senior staff members should review program in its entirety.
2. Schedule in-services with staff and volunteers. Direct care and indirect care staff should be scheduled separately and view their individual sections. Include volunteers with indirect care staff.
3. Invite families to participate.
4. Trial tools included in program and evaluate for their usefulness in your facility.
5. Evaluate program effectiveness through feedback surveys, quality assurance monitors and fall data.

VI. Troubleshooting
Problems and Solutions
Scheduling of in-services to train current staff may be time intensive initially. Training of indirect care staff first may be helpful as the training describes how they may offset staffing problems and be useful during the training of direct care staff. After initial staff training has been completed, new staff will receive training in their orientation period and subsequent review of material may be done on an individual basis.

VII. Outcomes
For the residents: Reduce the incidences of falls through exercise and staff training, thereby, improving quality of life.

For the staff: Improved job satisfaction, increased retention, improved staff-resident interactions, and improved family-resident interactions.

VIII. References

IX. Forms:
Fall Risk Tool, Post Fall Tool. (Environmental assessment, Interdisciplinary and QA monitors).
How to Use the DVD
The authors of this program have used the features of DVD technology to make it flexible and easy to use. The program is divided into several modules, which you can go to directly by using menus.

Example:
1. After putting this disc in a DVD player, you see the opening title sequence and then the Main Menu. Right now, you're viewing the module called “Introduction”. When you've finished viewing this module, you'll return to the Main Menu, where you would most likely choose “Strategies for Reducing Falls.”

2. This will take you to a sub-menu listing four tracks – “Administrators”
3. “Direct Care Staff” (which includes all resident care staff) “Indirect Care Staff” (which includes housekeeping, food service, maintenance, and clerical staff, as well as volunteers)
4. “Families”

Select the track that's right for you. For example, if you are a CNA, choose “Direct Care Staff”.

After you select the appropriate track, you'll see a list of several topics. At this point, you can choose any topic.
Each topic in this program is short. We encourage you to view and discuss this program over several sessions for the greatest impact.

Breaking this program into several short presentations also makes it easier for you to review specific topics. Whenever you need to go back and revisit a topic for any reason, you can go directly to that presentation without having to sit through an entire program, as you would if this were on videotape.

Several of the modules have questions that give you a chance to show what you’ve learned. These are included in the presentations as well as in self-scoring quizzes. We encourage you to take the quizzes, either individually or in a group, as a way to check your understanding of the material.

The appendices of this training manual will have several additional resources such as references to web pages for the Alzheimer’s Association, American Medical Directors Association Clinical Practice Guideline, National Center for Injury Prevention and Control, relevant journals articles, additional case studies and quizzes.
As administrators of a long-term care facility, you know the satisfaction you feel every time you see a resident enjoying an activity or simply acknowledging with a smile the caring touch or special attention given by a member of your staff. Each day, you and your team, work hard to provide a safe, friendly and comfortable environment for people who have chosen to make your facility their home.

However, there are many challenges you face daily in protecting your residents from injury, particularly those resulting from accidental falls. And, as the number of residents with Alzheimer’s Disease and other forms of dementia continues to grow, we all have the added challenge of managing the manifestations of dementia that may increase the risk of falls.

We know how important it is to train all of our staff to recognize the risks for falls and respond immediately to reduce the chances of falls and other accidents, but most of us have a hard time freeing up staff and the resources necessary to provide adequate training to everyone who needs it. That is why the New York State Department of Health has funded the development of this program.

In this section for Administrators, we'll provide a very brief overview of the program, offer some suggestions for using the program – stressing the importance of a facility-wide approach, and discuss the benefits you might expect from using this program.

We know every long-term care facility has policies and procedures for managing falls. Our goal with this program is to stimulate ideas among your direct-care and indirect-care staff, volunteers, and family members about additional things that can be done to improve upon existing approaches at your facility. We believe this, ultimately, will save time and money, improve customer satisfaction, reduce stress among your employees and improve the quality of life for your residents.
The authors of the program conducted research in many long-term facilities, including focus groups with staff members of these facilities, to find the most common challenges and the most successful strategies for reducing falls, particularly among residents having dementia. We then created separate tracks for three groups: those that provide direct, hands-on care; those that provide important support services like housekeeping, food service, maintenance and volunteer services; and family members.

We developed this state-of-the-art training program to take advantage of the power of DVD technology to present engaging interactive instruction, random access to specific topics, and self-scoring tests.

Some of the benefits you should expect from using this training program are:
- First and foremost, it will raise awareness among everyone working at your facility about their role in reducing the incidents of falls, thereby contributing to improving the quality of life for your residents.
- It should reduce the frequency of falling incidents, resident injuries and the resulting consequences, including the involvement of external regulatory agencies.
- It will encourage a systematic approach to fall risk assessment and the use of constructive problem-solving in response to accidents that do occur.
- It should provide staff members with some more effective approaches for managing the risk of falls among residents with dementia, hopefully resulting in fewer resident and staff incidents and injuries.

In turn, this can lead to:
- Lower worker compensation rates.
- Less staff turnover and better CNA efficiency with resident care.
- Increased staff and resident satisfaction through the better management of risks for falls can result in increased family satisfaction and a reduced number of complaints.

The authors of this program believe this program will help your staff members work “smarter, not harder” in reducing the incidence of falls. And, we believe this interactive DVD format will give your facility the flexibility to conduct this training in a very cost-effective manner.

To use this program, we suggest that you first introduce it to your senior staff in order to get them acquainted with its content and features and to get their thoughts on how the program might be “rolled out” in your facility. Showing them the “Introduction” and this presentation for administrators will give them a good overview of the goals and structure of the program. Following that, you may want to have them view a sampling of the modules in “Strategies for Reducing Falls.”

Although a cursory look at various tracks reveals similarities, the topics in each track have been adapted to meet the specific role and knowledge base of each target audience. Eventually, your senior staff should view all of the modules in this program so that they can support its use throughout your organization. A successful strategy for reducing falls requires participation from everyone at the facility, including administrators, resident care staff, support staff, volunteers and visiting family members.

As mentioned in the Introduction, we recommend the modules in this program be viewed and discussed over a series of small group sessions. The modular nature of the program will make it easy to spread the training out over several short sessions, allowing employees to digest and apply newly acquired knowledge and skills in small doses.
You can adapt the training to fit the needs of your facility. The program is designed for both small-group and individualized learning.

As mentioned previously, there are quizzes included with this program. These can be taken individually or in small groups. These quizzes will help reinforce important concepts in the program.

We’ve also included some case studies in the sections for Direct-care and Indirect-care staff. These case studies will give your staff an opportunity to apply what they’ve learned in the program.