



Quality Positioning System (QPS) Measure Description Display Information

Quality Measure

Description:

Measure Title: Falls with injury

NQF Measure Number: 0202

Measure Steward: American Nurses Association

Measure Description: All documented patient falls with an injury level of minor or greater on eligible unit types in a calendar quarter. Reported as Injury falls per 1000 Patient Days.

(Total number of injury falls / Patient days) X 1000

Measure focus is safety.

Target population is adult acute care inpatient and adult rehabilitation patients.

Numerator Statement: Total number of patient falls of injury level minor or greater (whether or not assisted by a staff member) by eligible hospital unit during the calendar month X 1000.

Included Populations:

- Falls with Fall Injury Level of "minor" or greater, including assisted and repeat falls with an Injury level of minor or greater
- Patient injury falls occurring while on an eligible reporting unit

Target population is adult acute care inpatient and adult rehabilitation patients. Eligible unit types include adult critical care, step-down, medical, surgical, medical-surgical combined, critical access, adult rehabilitation in-patient.

Denominator Statement: Denominator Statement: Patient days by Type of Unit during the calendar month.

Included Populations:

- Inpatients, short stay patients, observation patients, and same day surgery patients who receive care on eligible inpatient units for all or part of a day.
- Adult critical care, step-down, medical, surgical, medical-surgical combined, critical access and adult rehabilitation inpatient units.
- Patients of any age on an eligible reporting unit are included in the patient day count.

Exclusions: Excluded Populations: Other unit types (e.g., pediatric, psychiatric, obstetrical, etc.)

Risk Adjustment: Yes

eMeasure Available: No

Measure Status:

Endorsement Type: Endorsed

Last Updated Date: Jan 15, 2013

Measure(s) Considered in Harmonization Request:

Classification:

National Quality Strategy Priorities: Patient Safety

Use in Federal Program:

Actual/Planned Use: Payment Program, Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations), Regulatory and Accreditation Programs

Care Setting: Hospital/Acute Care Facility, Post Acute/Long Term Care Facility: Inpatient Rehabilitation Facility

Condition:

Cross-Cutting Area: Health and Functional Status: Functional Status

Data Source: Electronic Clinical Data, Other, Paper Medical Records

Level of Analysis: Clinician: Team

Measure Type: Outcome

Target Population: Senior Care

Measure Steward Contact Information:

Organization Name: American Nurses Association

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Website URL:

Measure Disclaimer:

Measure Steward Copyright:

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Measure History:

Date	Action	Notes
Aug 05, 2009	Initial Endorsement	
Jul 30, 2012	Public and Member Commenting Period Opened	
Oct 18, 2012	Member Voting Period Opened	
Dec 19, 2012	Member Voting Period Opened	
Jan 15, 2013	Maintenance Complete - Endorsement Renewed	<p>Details: As a result of input from NDNQI site coordinators and our work with the injury fall measure, we have changed the definitions of injury levels. These new definitions should lead to a more standardized rating of fall injury by NDNQI participating hospitals. The definitions for fall injury levels have changed: Old definitions: When the initial fall report is written by the nursing staff, the extent of injury may not yet be known. A method to follow up on the patient's condition 24 hours after the fall should be established as level of injury is a required data element. If the patient is discharged from the hospital within 24 hours of the fall, determine injury level at the time of discharge. Injury level guidelines: • None—patient had no injuries (no signs or symptoms) resulting from the fall; if an x-ray, CT scan or other post fall evaluation results in a finding of no injury • Minor—resulted in application of a dressing, ice, cleaning of a wound, limb elevation, topical medication, pain, bruise or abrasion • Moderate—resulted in suturing, application of steri-strips/skin glue, splinting, or muscle/joint strain • Major—resulted in surgery, casting, traction, required consultation for neurological (basilar skull fracture, small subdural hematoma) or internal injury (rib fracture, small liver laceration) or patients with coagulopathy who receive blood products as a result of a fall • Death—the patient died as a result of injuries sustained from the fall (not from physiologic events causing</p>

Date	Action	Notes
		<p>the fall) New definitions: When the initial fall report is written by the nursing staff, the extent of injury may not yet be known. Hospitals have 24 hours to determine the injury level, e.g., when you are awaiting diagnostic test results or consultation reports. •</p> <p>None—patient had no injuries (no signs or symptoms) resulting from the fall; if an x-ray, CT scan or other post fall evaluation results in a finding of no injury • Minor—resulted in application of a dressing, ice, cleaning of a wound, limb elevation, topical medication, pain, bruise or abrasion • Moderate—resulted in suturing, application of steri-strips/skin glue, splinting, or muscle/joint strain • Major—resulted in surgery, casting, traction, required consultation for neurological (basilar skull fracture, small subdural hematoma) or internal injury (rib fracture, small liver laceration) or patients with coagulopathy who receive blood products as a result of a fall • Death—the patient died as a result of injuries sustained from the fall (not from physiologic events causing the fall)</p>

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