



Assisted Living Consult can be a tool to help enhance quality and improve outcomes in your facility. Each issue presents learning opportunities for providers and the related care team. Copy this section and have your staff read the articles and test their knowledge by answering the questions below. Please note that each article topic appears in color, with specific related questions below.

Designing Strategies to Prevent Falls

1. The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) 2007 National Patient Safety Goals include all of the following except:
 - a. Reduce the risk of resident harm from falls.
 - b. Restrictions on residents' ability to operate automobiles.
 - c. Implement a fall reduction program including an evaluation of the effectiveness of the program.
 - d. None of the above as they are all included in the 2007 National Patient Safety Goals.
2. Fall prevention is more a factor of facility design than staff adherence to a clinical process of care.
 - a. True
 - b. False
3. The clinical process for fall prevention within the AL facility involves all of the following steps except:
 - a. Assessing fall risk for each resident
 - b. Obtaining an evaluation limited to the physical therapy staff
 - c. Developing a care plan
 - d. Monitoring the residents at risk for falls.
4. All of the following are fall risks except which factor:
 - a. A history of recent falls
 - b. Wearing corrective eyewear
 - c. Use of cane/walker
5. The key challenges facing safety improvement concentrate mainly on:
 - a. Clear understanding of the regulations
 - b. Improvement in contracting
 - c. Staffing issues
 - d. Gaining proper legal representation
6. System failures in safety are most problematic when identified in:
 - a. Malpractice claims
 - b. Computerized surveillance
 - c. Employee surveys
 - d. Resident surveys
7. A "safety culture" is one that provides:

- a. An expectation of collaboration across ranks to seek solutions to vulnerabilities
- b. An environment that identifies employees failing in the area of safety and terminates them.
- c. Willingness on the part of the organization to direct resources to address safety concerns
- d. Acknowledgement of the high risk, error-prone nature of the organization's activities

8. A fall is defined as coming to rest on the ground, floor, or other lower level as the result of syncope or overwhelming external force.

- a. True
- b. False

Psychosocial Impact of Monitoring Technology in AL

9. Health monitoring in home environments can be accomplished by:
 - a. Ambulatory monitors that utilize wearable sensors and devices to record physiological signals
 - b. Sensors embedded in the home environment and furnishings to collect behavioral and physiological data unobtrusively
 - c. Both of the above.
10. Typical bed sensors can detect all of the following except:
 - a. Presence in bed
 - b. Pulse
 - c. Blood pressure
 - d. Movement in bed
11. Despite the benefit of in-home monitoring technologies, many place a burden on professional caregivers in reviewing the health status assessment reports and alert notifications.
 - a. True
 - b. False

Complex Medication Regimes Call for Help with Medication Management

12. The loss of which activities of daily living (ADL) is most associated with AL admissions?
 - a. Bathing
 - b. Toileting
 - c. Self administration of medications
 - d. Ambulating
13. Medication use is higher for AL residents over nursing facility residents.
 - a. True
 - b. False
14. A medication management program (MMP) is im-

portant for all of the following reasons except:

- a. To provide assistance for the number of medications residents are taking.
- b. Potential for adverse drug reactions.
- c. Requirement for MMP that is similar to the requirements for these services in skilled nursing facilities.

Automatic External Defibrillators: Should Your Facility Have One?

15. Automatic external defibrillators (AEDs) have been associated with increasing the survival rate from cardiac arrest from 14% to about:

- a. 25%
- b. 40%
- c. 60%
- d. 75%

16. AEDs are only successful when used by trained professionals.

- a. True
- b. False

17. Some states, such as New Jersey, are requiring that AL facilities have AEDs available for their residents.

- a. True
- b. False

Residents, Facilities and Providers Benefit from Change in Reimbursements for AL Visits

18. Prior to 2006, specific billing codes for AL facility visits did not exist.

- a. True
- b. False

19. The benefit of having a clinic within an AL facility includes all of the following except:

- a. Ready access to AL resident and staff
- b. Efficient use of office space and staff
- c. Significantly higher reimbursement over visiting residents within their homes.
- d. All of the above are benefits of having a clinic within an AL facility.

20. Despite the importance of clinician involvement in AL, there are no current federal requirements governing their involvement—unlike skilled nursing facilities.

- a. True
- b. False

Coping with Depression and the Holidays

21. Some major factors contributing to holiday depres-

sion in the elderly include all of the following except:

- a. Financial limitations
- b. Loss of independence
- c. Being alone or separated from loved ones
- d. All of the above

22. Depression is a natural part of aging and should be managed independent of pharmaceutical intervention.

- a. True
- b. False

23. If left untreated, depression can lead to:

- a. Loss of independence
- b. Aggravation of symptoms of other illness
- c. Premature death
- d. Suicide
- e. All of the above

24. Depression is treatable as there are currently available effective behavioral and pharmacological interventions that can dramatically outcomes.

- a. True
- b. False

How and Why Quality Improvement Programs Are Developing at a Growing Rate

25. The process of reviewing clinical care in AL has been in place for years as a state requirement?

- a. True
- b. False

26. Identifying the goal of a quality improvement program should first consider the objective of the:

- a. Staff
- b. Resident
- c. State regulators
- d. Providers

27. What is involved in making a quality improvement program successful?

- a. Identify the goal.
- b. Summarize the data on a monthly basis
- c. Identify areas where improvement is desired and create a plan for improvement
- d. Continue to monitor the data to evaluate the effectiveness of the plan and make adjustments as needed
- e. All the above

The Role of the Psychiatrist

28. Psychiatrists are helpful in the management of AL residents with dementia, which is estimated to affect what percentage of seniors over the age of 85:

- a. 10%
- b. 25%
- c. 50%
- d. 75%

29. The important roles of a psychiatrist include all of the following except:

- a. Prescribing medications to be used as chemical restraints
- b. Educating caregivers on the appropriate management of residents with psychiatric illnesses
- c. Providing in-service training on the signs and symptoms of psychiatric disorders

30. Adherence is a major problem when it comes to the treatment of psychiatric illnesses, with fewer than 40% refilling their prescriptions after the first month and fewer than 20% completing a 6-month course of antidepressant treatment.

- a. True
- b. False

31. Types of therapy provided by a psychiatrist can include all of the following except:

- a. Psychotherapy
- b. Problem-solving therapy
- c. Restraint management
- d. Interpersonal psychotherapy
- e. Cognitive behavior therapy
- f. Family therapy

ALC

Please see Answer Key below.

29. a	30. a	31. c
22. b	23. e	24. a
15. a	16. b	17. a
8. b	9. c	10. c
1. b	2. b	3. b
		4. b
		5. c
		6. a
		7. a
		11. b
		12. c
		13. a
		14. c
		20. a
		21. d
		25. b
		26. b
		27. e
		28. c

Answer Key

Suggested Resources



- **A Tool Kit to Prevent Senior Falls**

www.cdc.gov/ncipc/pub-res/toolkit/toolkit.htm

Designed for fall prevention programs, A Tool Kit to Prevent Senior Falls, from the National Center for Injury Prevention and Control, includes fact sheets, graphs, and brochures about falls and fall prevention.

- **Physical Activity and Older Americans**

www.ahrq.gov/ppip/activity.htm

There is good news when it comes to physical activity and aging. First, it is never too late to become physically active. Second, even a small amount of activity can result in better health. This report describes the importance of physical activity, the prevalence and costs of inactivity, and the health benefits of regular activity and recommends appropriate levels of physical activity in older adults.

- **The Assisted Living Federation of America (ALFA) Disaster Planning Guide and Tool Kit**

www.alfa.org/i4a/forms/form.cfm?id=26&pageid=3301&showTitle=1#disaster

The Assisted Living Federation of America (ALFA)

has published a Disaster Planning Guide and Tool Kit, specifically designed to help senior living operators manage resident safety and evacuation planning during a disaster. The kit contains innovative checklists, templates, and other interactive tools to help make disaster planning easier and more effective. The ALFA Disaster Planning Guide & Tool Kit is available online, for ALFA members. The PDF Guide is available to nonmembers for \$99 from the ALFA Store.

- **Beat the Winter Bugs**

www.fda.gov/fdac/features/2001/601_flu.html

Along with making millions of us feel lousy every year, colds and flu can cause serious problems and can even be deadly. Each year flu complications cause an average of 114,000 hospitalizations and 36,000 deaths, according to the Centers for Disease Control and Prevention (CDC). Death rates are highest for people aged 65 and up and for those with medical conditions that put them at increased risk for flu complications. Here are tips to ward off colds and flu and to ease the misery if they strike: ALC