

Risks in Senior Care and Strategies to Mitigate Them



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Speaker bio


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Susan possesses a diverse background in healthcare, which includes extensive experience in patient safety and risk management. During her early career, she was a medical laboratory technician. After working in clinical and research laboratories, Susan pursued her career in nursing.

Most recently, Susan has worked in the medical malpractice insurance industry for over a decade in the capacity of risk management and patient safety. Her skills include onsite risk assessments, educational training, and resource development for insured clients in hospitals, physician practices, senior care settings, and other medical facilities. Susan works closely with insured clients to tailor education and resource offerings to meet their specific needs.

Susan earned her bachelor's degree in nursing and master's degree in nursing education from Robert Morris University in Pittsburgh, PA. In addition, she earned an associate's degree in medical laboratory technology and a bachelor's degree in health science. Susan also is certified in Lean Healthcare, and she is a TeamSTEPS® advanced master trainer.



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Top allegations in senior care

- Falls
- Pressure injuries
- Behaviors (assaults and death)
- Elopements (with injury and/or death)
- Lack of
 - Monitoring
 - Notifications
 - Staffing
 - Staff training
 - Leadership oversight
 - Environmental safety measures/enforcement
 - Communication
- Admitting and retaining residents beyond the services scope for safe and effective care



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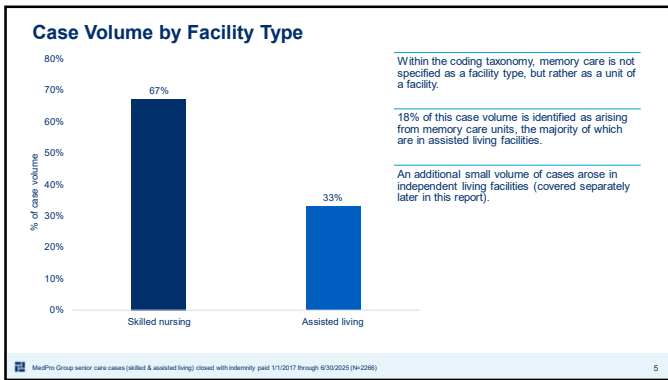


MedPro Claims Data

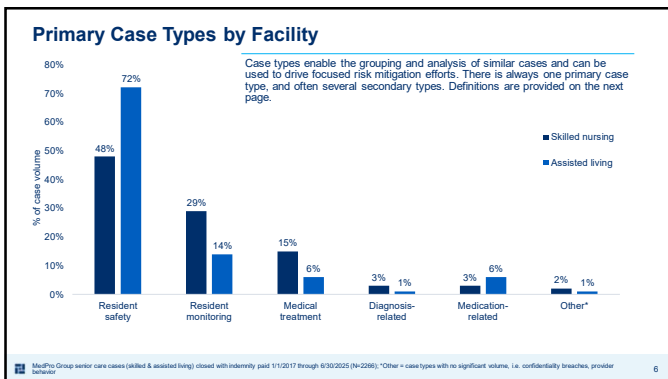
Senior Care and Senior Living
January 2017 to June 2025

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Primary Case Types Defined

Resident safety: Includes failure to mitigate the risk of falls, assaults (including sexual abuse), and a variety of other safety-related events, such as injuries during transport.

Resident monitoring: Encompasses inadequate monitoring of residents' physiologic status, including failures to mitigate the risk of pressure ulcers, infections, and progression of underlying conditions. Elopements, while not frequently noted, are also included in this category.

Medical treatment: Reflective of lapses in the general day-to-day care of residents; scenarios often involve infections progressing to sepsis, dehydration, and treatment of ulcers.

Diagnosis-related: Commonly includes delays in recognizing infections, strokes, and fractures.

Medication-related: Covers mismanagement of medication regimens, and ordering, dispensing and administration errors.

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Focus on Resident Safety & Monitoring Cases

	Resident falls	Inadequate monitoring of physiological status	Pressure ulcers	Other safety issues	Failure to protect from assaults	Failure to prevent elopement	% of cases volume
Skilled nursing	40%	27%	22%	8%	1%	0%	
Assisted living	54%	12%	7%	11%	6%	2%	

Many of the resident safety cases in both facility types are associated with suboptimal staffing levels, inadequately trained and supervised staff, and nighttime shifts.

The higher proportion of resident safety cases in assisted living facilities is also associated with situations in which a resident might be better suited for care in a skilled nursing facility. Although regulations differ from state to state, assisted living facilities are typically staffed with fewer nurses and certified care givers.

Pressure ulcer-involved cases are captured with an injury code, not as a case type. They are primarily associated with inadequate monitoring and improper management of medical treatment case types.

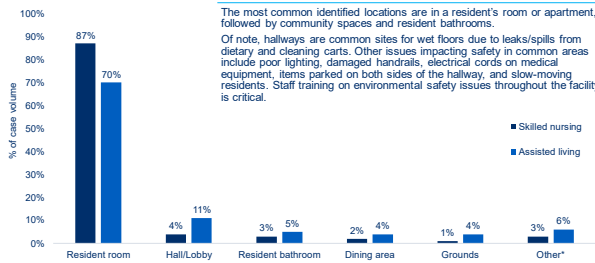
Other safety issues noted in these cases are varied, including:
 Injuries sustained during resident transfers with lift devices
 Injuries sustained during vehicle and wheelchair transportation
 Hyperthermia or hypothermia suffered when residents are outdoors and unobserved
 Choking

MedPro Group senior care cases (skilled & assisted living) closed with indemnity paid 1/1/2017 through 6/30/2025 (N=256)

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Locations



The most common identified locations are in a resident's room or apartment, followed by community spaces and resident bathrooms.

Of note, hallways are common sites for wet floors due to leaks/spills from dietary and cleaning carts. Other issues impacting safety in common areas include poor lighting, damaged handrails, electrical cords on medical equipment, items parked on both sides of the hallway, and slow-moving residents. Staff training on environmental safety issues throughout the facility is critical.

MedPro Group senior care cases (skilled & assisted living) closed with indemnity paid 1/1/2017 through 6/30/2025 (N=256). *Other = locations with no significant volume, i.e., stairwells, therapy rooms

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Realities of Senior Care & Senior Living

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Definition of insanity....

THE
SAME
OLD
THINKING

↻

THE
SAME
OLD
RESULTS

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Protecting your business


-  Resident's home
-  Resident's rights versus facility responsibility
-  State and federal regulations
-  Evidence-based best practices
-  Risk management

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Staffing challenges

- Adequate ratio
- Call-offs/no shows
- Experience
- Tenure
- Agency
- Training
- Staff skills to resident needs




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Resident vetting

- Admission/discharge criteria
- Pre-admission assessment/screening
- Criminal and sexual background
- Behavioral health diagnoses
- Medical and cognitive needs
- Physical limitations/needs
- Co-morbidities



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Communication

- Teamwork among all staff
 - Clinical and non-clinical
 - Venting frustrations
 - Casual encounters outside the workplace
- Pre- accident/incident (relationship building)
 - Residents
 - Family
 - Management
 - Providers
- Disclosure
 - Known facts ONLY
 - Who, what, when, and where
 - Investigation/review (why and how occurred)
 - Follow up after investigation



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Evidence preservation

Securing involved devices and equipment

- Chain of custody
- Independent third-party evaluation
- Report of device or equipment failure




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Documentation pitfalls

LEGAL DOCUMENT	Charting by exception
Falsified information	Incomplete data
Gaps in entries	Care plans
Task completion	Timely recording
Re-assessment	Copy and paste
Notifications	Audit trail/Metadata
Hand-offs	CURES Act



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Policies and procedures

Why do we need them?	What are they based on?	Periodic review	Clear instructions
Tested	Accessibility	Compliance/Adherence	Disclaimer


"Decisions to adopt these guidelines are made by the practitioner based on available resources and by circumstances presented by individual patients/residents. The recommendations in the guideline may not be appropriate for use in all circumstances."

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Provider orders

- Up-to-date
- Clear instructions
- Timely implementation
- Available medications and/or supplies
- Available staff (ambulation/transfer)
- Notifications as ordered




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Resident safety

- Assault (Resident-on-resident)
- Courtyard
- Elopement
- Falls
- Environment of care (EOC)
- Building maintenance tools and chemicals
- Emergency alert pendants




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Food safety

- Chewing and swallowing difficulties
 - Peanut butter sandwich
 - Brussel sprouts
 - Hot dogs/sausage links
 - Chewy textures
- Impulsive behaviors
- Family education



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Medication safety

- Medication reconciliation
- Procurement
 - Services
 - Timeliness
 - Staff in-services
- Storage
- Stock rotation
 - Short supply
 - Outdates
 - Appearance
- Labeling of multi-use medications
- Communication with pharmacist
 - Facility staff
 - All providers prescribing medications
 - Recommendations
 - GDRs and Antibiotic stewardship
 - Anti-psychotic medications



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Environmental safety

Fire

- Smoking
- Drills
- Construction areas and restrictions
- Temporarily suspended utilities

Outside access

- Vendors, contractors, delivery staff
- Previously removed individuals
- Domestic violence involving staff
- Active shooter

Egress points

- Locked/unlocked
- Uncoluted, clearly marked

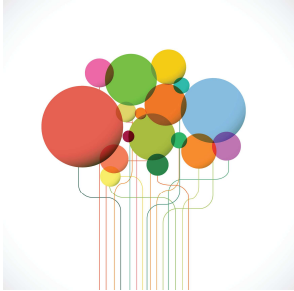


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Other risks to consider...

- Granny/nanny cams
- Hand-off reports
- Cell phones
- Social media
- Social outings
- Transportation safety
- Therapy safety



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Resident and Family Engagement

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Admission...the early days

Moving in	Welcome home
Meeting the staff and residents	Participation in activities
Close monitoring and frequent check-ins	Family involvement



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Activities

- Investment in Activity staff and resources
- Meet all resident needs
- Throughout the day and evening
- Weekdays and weekends
- Holidays
- Physical, cognitive, therapeutic
- Building core strength
- Decrease in mishaps
- Decrease in isolation, boredom, depression

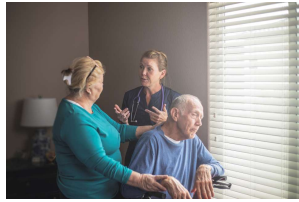


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Communication opportunities

- Care plan meetings
- Changes in condition
- Resident and family agreements
- Resident and family education
 - Organizational policy compliance
 - Resident safety awareness
- Aging process
- Hospice
- In-person, virtual, or both
- Resident and/or family testimonies



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Staff Engagement

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Inspire staff engagement

How do you do this?



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Positive and consistent leadership

- Goals for the facility
- Plan of execution and direction
- Individual and team participation
- Leadership beyond title
- Accountability
- Recognition




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'Walk the walk'

- Frontline experiences
- Challenges
 - Co-workers
 - Residents
 - Families
 - Management
 - Equipment
- Modeling behavior



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We have what we have...

- Resources available at your facility
- Consider:
 - Staff
 - Residents
 - Environment
 - Equipment
- Accountability
 - Management
 - Staff
 - Residents
 - Families



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TeamSTEPPS®

- Teamwork
- Communication
- Leadership
- Mutual support
- Situational awareness



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Just Culture

- Human error
 - Console
- At-risk behavior
 - Coach
- Reckless behavior
 - Suspend/terminate
- Second victim syndrome



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Leadership Development

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Assist with....

- Policy and procedure
 - Development
 - Revisions
- Process improvement
 - Group projects/initiatives
 - FMEA
- Team building
 - Mentoring
 - Coaching
 - Celebrations
 - Residents
 - Family
 - Staff



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Group discussions


- Constructive
- Identify worksite problem
- Request staff input
- Recognize functioning versus non-functioning aspects
- Propose changes
- Test plan
- Implement plan
- Collect data
- Make adjustments
- Continuous monitoring



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Town Hall Meeting


- Organizational goals
 - Culture change
 - Improve survey results
 - New initiatives
 - Renovation/new construction
- Staff input
 - Positive focus
 - Constructive
 - Family education



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Have questions? Email or call....

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