AHRQ’s Safety Program for Nursing Homes: On-Time Falls Prevention
Facilitator Training

Implementation of the Falls Prevention Reports

Note: This part of the training consists of interactive exercises and does not have any slides. If you are not part of a formal training, please read all these materials, print the tools and scripts, read all the scripts, and answer the discussion questions.

Introduction

SAY:

Yesterday you were introduced to the components of On-Time Falls Prevention, including the electronic reports and implementation materials. Today we will focus on the role of the Facilitator in implementing the program using these materials. You will participate in two scripted exercises to help illustrate how the Change Team and Facilitator would interact during the implementation of the falls prevention program. After each exercise, we will debrief regarding what was learned.

In these exercises you will play the parts of the Facilitator and Change Team members. You will simulate the interaction of the Facilitator and the team as they assess their facility’s current falls prevention program and choose the On-Time Falls Prevention reports to use in daily practice. In these exercises you will choose the meetings and huddles into which the team will incorporate the reports. Finally, you will decide how to begin to pilot the reports on at least one unit.

Although these exercises compress a number of decisions that the nursing home Change Team will make, the exercises should stimulate discussion about implementation issues that may arise in actual practice that are specific to On-Time and the Facilitator’s role. We understand that to be in this training you already have experience with quality improvement programs in nursing homes and are familiar with nursing home operations and practices. So the goal is to help you understand how your skills can be applied to helping implement On-Time Falls Prevention.
Review of the Nursing Home’s Falls Prevention Program

SAY:

One of the critical pieces of implementing On-Time Falls Prevention that you will assist a facility team with is completing the On-Time Falls Prevention Self-Assessment Worksheet. It is through the process of assessing their current practices related to falls prevention that the facility team will recognize, with your help, opportunities for enhancement of their current practices with On-Time.

We have a scripted exercise in which each of you will be assigned roles including the Facilitator and members of the interdisciplinary team. After the scripted exercise, we’ll have some discussion about the facility’s self-assessment process and the Facilitator’s role.

DO:

Ensure that each participant has the following materials available:

- A blank copy of the Self-Assessment
- The scripted exercise “Change Team Meeting for Self-Assessment”

Assign a role to each participant including:

- Facilitator [Jim]
- Program Champion [Mary]
- Director of Nursing (DON) [Joanie]
- Nurse Manager A [Miranda]
- Nurse Manager B [Sally]
- The Rehab Director [Anne]
- Nursing Assistant A [Allison]
- Nursing Assistant B [Jolene]
**Note to Trainer:**

If there are fewer participants than available roles, assign participants to more than one role. If there are more participants than roles, assign “doubles” who will share a given role.

**SAY:**

In our first scripted exercise, roles are assigned and each person reads his or her lines. The focus is on assessing the facility’s current falls prevention program.

The goals of this exercise are to enable participants to:

- Discuss the purpose of including the Self-Assessment in the On-Time Falls Prevention implementation process,
- Discuss the Facilitator’s role in helping the Change Team review their prevention practices and identify opportunities to improve practices by using On-Time reports.
- Explain the value of gaining multiple perspectives when doing the Self-Assessment.

**ASK:**

Are there any questions before we begin the exercise?

**SAY:**

*I’ll provide a little background about our Change Team Meeting Setting to get us started.* Before the Change Team meeting, the Facilitator and Program Champion requested that the nurse managers work with the staff on their units to complete the Self-Assessment. They also asked Anne, the Rehab Director, to work with the therapy staff to do the same.
The two nurse managers and Anne were told that they could decide how they worked with the staff to complete the Self-Assessment but were asked to be sure that they obtained input from all levels of staff on their unit or, in Anne’s case, the Rehab Department. In addition, the nurse managers were asked to be sure to obtain input from all shifts.

In attendance at the Change Team meeting are:

- Facilitator [Jim],
- Program Champion [Mary],
- Director of Nursing (DON) [Joanie],
- Nurse Manager from each unit [Miranda, Nurse Manager A, and Sally, Nurse Manager B],
- Rehab Director [Anne], and
- Two nursing assistants [Allison, Nursing Assistant A who works during the day shift, and Jolene, Nursing Assistant B who works during the night shift].

Clay, a nursing assistant on the evening shift, is part of the Change Team but could not attend today’s meeting. He let Mary [the Program Champion] know that he did have input on the Self-Assessment completed by Miranda [Nurse Manager A]; he also told Mary that he is really excited that this program may help to prevent resident falls.

I’ll turn it over to you all now to show us how things go during the Change Team meeting.

**Note to Trainer:**

Role names may be changed to better fit a participant’s gender if he or she would feel more comfortable using a different name.

**DO:**

Instruct the “actors” to begin.
When participants have finished reading the scripted exercise:

**SAY:**

Great job! Thanks for participating in the role play. Let’s talk a bit about how the meeting went and how a Facilitator can help to ensure that the Self-Assessment process is a valuable one.

**DEBRIEF:**

When the role play exercise is over, choose from the following questions to engage the group in a debrief session. Potential responses are included below as points for discussion. Clearly, these are not all the possible answers.

- **Why do you think it is important to include a Self-Assessment in the On-Time Falls Prevention implementation process?**
  - Self-Assessment allows the team to document their current practices and identify opportunities for enhancement, including inefficiencies in their processes that On-Time can help resolve.
  - Self-Assessment helps the team to foster internal goals and motivation to change their processes as they are driven by how they see their processes, not how someone else sees them.

- **What did you see as the Facilitator’s role in the Self-Assessment process?**
  - The Facilitator was actively involved in the Change Team meeting but the meeting was run by the Program Champion. He asked questions about their processes that may help identify areas where improvements may be needed.
  - The Facilitator provided insights about On-Time reports when appropriate to help Change Team members see how using On-Time reports and enhancing the Postfall Assessment can help them improve their ability to prevent falls.
o He encouraged the team by praising them for their work including praising them for gaining multiple perspectives prior to the meeting and for a job well done during the meeting.

- **The Change Team completed the Self-Assessment with input from all units and shifts and from Rehab, involving most staff, including nursing assistants. What value do you think this added to the process as compared with one or two people completing the Self-Assessment?**

  o Gaining multiple perspectives ensures that it is not only one person’s perception of what the prevention processes are. It helps to better capture different perspectives. What one person thinks about how prevention practices are carried out may be different from someone else’s perception.
  
  o Having more staff provide input potentially leads to more team buy-in for making changes and helps clarify how each can contribute to improving falls prevention.

**Note to Trainer:** Additional question that may be asked to participants:

Do you think the Facilitator missed some opportunities or made some mistakes interacting with the team? If yes, provide some examples.
Review of the Change Team’s Process for Choosing On-Time Reports, Incorporating Them into Meetings, and Piloting Those Meetings

SAY:

We have a role-playing exercise similar to the exercise we used for the Self-Assessment to illustrate the role of the Facilitator and Change Team in determining which On-Time reports and meetings the Change Team will decide to pilot. The handouts we will use include a filled in Menu of Implementation Strategies, and a Meeting Descriptions document.

Since nursing home staff may call meetings by different names, the Meeting Descriptions document was created to help clarify the content of meetings and huddles listed in the Menu. It also includes suggested attendees and On-Time prevention reports that may be useful in those meetings. These handouts are intended to help the Change Team make their implementation decisions. As before, we will have a debriefing after the exercise.

The intent of this meeting is to provide the Change Team with the opportunity to decide which electronic reports provided by On-Time Falls Prevention they will use and at which clinical team meetings they will use these reports. Once they decide, the team determines if they have existing meetings that meet their needs or if a new meeting is needed.

The Change Team then decides how to pilot the use of the reports. They may opt to trial one or more of the reports on one unit and then gradually roll the use of the reports out to the entire facility, as is commonly done, or implement across the facility at one time.

The Program Champion leads the meeting. The Facilitator is there to provide clarification about the On-Time reports and their potential value to improving falls prevention. The Facilitator should also help move the discussion forward if it bogs down and ask questions when it could help them identify and discuss ways to use the reports.
In reality, a Change Team may make these decisions over a number of Change Team meetings. But for purposes of familiarizing the Facilitator with his or her role, the exercise treats this as one session.

An important part of the Facilitator’s role is to help the Change Team maintain their momentum toward change when it seems they may be slowing in the implementation process. If multiple meetings are occurring without progress by the team toward making decisions about implementing the reports, the Facilitator should offer strategies to hasten the decision-making process (e.g., assist the team to set timeline goals for decisions, attempt to determine what barriers may be impeding progress toward implementation).

Before we begin the scripted exercise, let’s spend 10 minutes reviewing the filled-in materials provided as handouts.

**DO:**

Ensure that each participant has the following materials available:

- [Completed Menu of Implementation Strategies Worksheet](#)
- [Meeting Descriptions Document](#)
- [Role Play Script](#)
Implementation Scripted Exercise

SAY:

In our previous exercise the Facilitator helped the team conduct the Self-Assessment and they decided on opportunities for enhancement of their processes related to falls prevention. After working with the team to conduct the Self-Assessment, the Facilitator will assist the team in selecting reports they want to use and determining how and in which meetings or other venues they will use them.

In addition to making these decisions, considerations for the Change Team at this point of the implementation process include whether the reports will be trialed on all units or certain units and, if trialed on certain units, how and when they will be rolled out to others.

For this scripted exercise, you’ll play the same parts as in the Self-Assessment exercise and, as before, after the scripted exercise, we’ll have some questions for discussion.

The goals of this exercise are to:

- Simulate the team discussion that would go on to determine how to use the reports and how to add them to meetings and huddles to enhance discussions of falls prevention.
- Simulate how the Champion and Facilitator can work together to manage the discussion.
- Show how the Facilitator can influence the discussion and fulfill the Facilitator role.

ASK:

Are there any questions before we begin the scripted exercise?
DO:

Instruct the “actors” to begin reading their parts. At the end of Scene One, read aloud the “setting” for Scene Two. Both Scenes One and Two will be read before debriefing.

When participants are finished reading the script:

SAY:

That was another super job with the role play – thank you all for participating. Let’s examine this part of implementation a bit more through a few questions.

Debrief:

When the role play exercise is over, choose from the following questions to engage the group in a debrief session. We include appropriate responses below in case these points are not made. Clearly, these are not all the possible answers.

- **How did the Facilitator fulfill his role when the team was trying to decide what reports they were going to pilot and were identifying the meetings in which these reports would be discussed?**
  
  o He encouraged a strategy to implement on one unit with a small number of reports and meetings before expanding to more units and more reports.
  o He asked a question to better understand how they picked the unit they would start with. This helped explain the reasoning behind their decisions.
  o He reviewed the Menu of Implementation Strategies.
  o He reviewed each report to help the team think about how they could use the report to improve falls prevention processes.
  o He complimented the team on how they were thinking about the reports. He was not critical of what they do. The team needs to own their decisions and feel good about what they are doing.
  o He suggested possible uses of additional reports.
After the team came back to review their implementation experience, did the Facilitator change his approach, and if yes, why do you think he did?

- Yes, the facilitator is more aggressively asking questions about the team’s experiences. He is taking a more active role. His role is to help the team have successful experiences introducing the reports in existing and new meetings. He can help them re-engineer their processes to be more efficient during the meetings so the meeting is not overwhelmed by the addition of this new activity.
- When they were choosing the reports and meetings his role was more as an expert on the tools and the reports with some role at helping them think about how to use the reports given their specific way of providing care. Most of the focus was on their choices and helping them understand how implementing the reports could help them. It was the Program Champion who needed to lead the meeting. But now the Facilitator is acting as a quality improvement expert and therefore can take a more directive approach.

**Note to Trainer:** Additional questions that may be asked to participants:

Do you think the Facilitator missed some opportunities or made some mistakes interacting with the team? If yes, provide some examples.

The scripts did not depict much resistance to implementing the reports in this nursing home. Can you describe what type of resistance a Facilitator might face and why and discuss ways to handle these potential obstacles?