

CMS HAC: Falls and Trauma

NQF#: Not NQF Endorsed

Developer: Centers for Medicare and Medicaid Services (CMS)

Data Source: [CMS Hospital Compare](#)

Description: Patient death or serious disability associated with a fall while being cared for in a healthcare facility. All documented patient falls with an injury level of minor (2) or greater.

Numerator: Number of occurrences of the following diagnosis codes as a secondary diagnosis (diagnoses 2-9 on a claim) with a POA code of 'N' or 'U' and designated as a 2010 Complication or Comorbidity (CC) or Major Complication or Comorbidity (MCC):

- Fracture 800-829 (CC/MCC)
- Dislocation 830-839 (CC/MCC)
- Intracranial injury 850-854 (CC/MCC)
- Crushing injury 925-929 (CC/MCC)
- Burn 940-949 (CC/MCC)
- Electric shock 991-994 (CC/MCC)

Lists of 2010 CCs and MCCs can be found in Tables 6G-6K at the following website:

<http://www.cms.gov/AcuteInpatientPPS/10FR/itemdetail.asp?filterType=none&filterByDID=-99&sortByDID=1&sortOrder=ascending&itemID=CMS1227455&intNumPerPage=10>

Denominator: Number of acute inpatient FFS discharges during time period

Impact:

- Affects large numbers.
- The most common HAC reported is injury from a fall or some other type of trauma. Over 70 percent of hospitals reporting to CMS reported at least one fall or trauma during the reporting period.

Opportunity:

- Opportunity for improvement exists, as demonstrated by the coefficient of variation for the measure.

Evidence:

- A literature search of clinical trial, meta-analyses, systematic reviews, or regulatory statements and other professional order sets and protocols was performed and the quality and strength of evidence was weighted according to a given rating scheme.
- Evidence ratings vary from Class A to Class R, with the vast majority rated from class C to R.
 - Class A: Randomized, controlled trial
 - Class B: Cohort study
 - Class C: Non-randomized trial with concurrent or historical controls, case-control study, study of sensitivity and specificity of a diagnostic test, population-based descriptive study
 - Class D: Cross-sectional study, case series, case report
 - Class M: Meta-analysis, systematic review, decision analysis, cost-effectiveness analysis
 - Class R: Consensus statement, consensus report, narrative review

Citations for Evidence:

- Institute for Clinical Systems Improvement (ICSI). Prevention of falls (acute care). Health Care Protocol Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2010 Apr.

Leapfrog Measure Scores

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|---------------------------|--|
| Evidence Score: | 2, based on rating from expert panel on patient safety |
| Opportunity Score: | 1.839, based on the coefficient of variation for the measure |
| Impact Score: | 3, based on the number of patients affected and severity of harm |
| Overall Weight: | 5.9% |

http://www.icsi.org/falls_acute_care__prevention_of__protocol_/falls_acute_care__prevention_of__protocol__24255.html

<http://www.guideline.gov/content.aspx?id=16005>

<http://news.wolterskluwerlb.com/health-care/new-hac-link-from-cms%E2%80%99-hospital-compare-website-launched/>