



The Springs at Oldham Reserve, a Trilogy Health Services assisted living community. Photo courtesy of Trilogy Health Services.

Spotlight on Success

How Trilogy Health Services Achieved Systemwide Reduction of Resident Falls

Preventing falls is a persistent challenge for organizations that care for older adults. Falls can result in serious injuries, loss of independence, and a diminished quality of life for residents, making fall prevention a critical patient safety priority. Complicating these efforts in nursing care centers and assisted living communities is the widespread use of medications such as antidepressants, antipsychotics, and sedatives, which can increase fall risk by affecting balance, alertness, and coordination.

The link between medications and falls underscores the importance of monitoring psychotropic drug use. While the Centers for Medicare & Medicaid Services (CMS) requires skilled nursing facilities and certain other care settings to track and trend psychotropic medications, assisted living communities are not subject to the same requirement.

To bring greater consistency to medication oversight and fall prevention efforts across its large, multistate senior living organization, Trilogy Health Services used Joint Commission standards as a framework for building standardized processes, strengthening medication management, and reducing falls.

About the Organization

Trilogy Health Services is a leading provider of senior living services headquartered in Louisville, Kentucky. Across locations in Indiana, Kentucky, Michigan, Ohio, and Wisconsin, the organization operates more than 140 campuses and employs more than 20,000 team members who provide independent living, assisted living, memory care, skilled nursing, rehabilitation, and long-term care services. More than 80 of Trilogy's campuses are accredited under Joint Commission's Assisted Living Community program.



A Resident-Centered Approach to Care

Trilogy provides a full continuum of high-quality services while fostering a compassionate environment where residents can build meaningful relationships, maintain their dignity, and feel safe, respected, and at home. According to Rhonda Dempsey, RN, LNHA, MBA, senior vice president and chief nursing officer, Trilogy Health Services pursued enterprise-level accreditation with Joint Commission because its standards closely align with Trilogy's commitment to quality, safety, and excellence in resident care. "The accreditation process provides independent validation that the organization is meeting nationally recognized standards while continuously improving processes and outcomes," she says. For Trilogy, accreditation not only affirms the quality of care being provided but also supports ongoing improvement efforts to enhance resident outcomes and strengthen its resident-centered approach.

To prepare for accreditation, Trilogy strengthened quality systems, standardized clinical processes, conducted gap analyses and mock surveys, and enhanced staff education. The organization also established dedicated leadership oversight for accreditation readiness, including Tarra Burton, RN, RAC-CT, DNS-CT, QPC-CT, manager of clinical quality, to ensure that quality initiatives and compliance efforts were implemented consistently across communities.

Turning Opportunities for Improvement into Action

Dempsey notes that Trilogy Health Services relies on Joint Commission for nationally recognized benchmarks for quality and safety. Those benchmarks helped the organization identify fall prevention as a priority area and establish measurable goals for improvement.

"Falls are a huge concern when providing care for seniors, and the risk is compounded by the use of psychotropic medications," notes Dempsey. "Unlike skilled nursing facilities and other healthcare settings, assisted living communities do not have a CMS requirement to track and trend psychotropic use. Instead, we rely on Joint Commission."



Trilogy set ambitious goals to reduce falls and improve resident safety, including a systemwide fall rate below 17.0%, a falls-with-injury rate under 0.6%, and reduced use of psychotropic medications among residents. Today, the organization has achieved its fall-rate target across all locations, and psychotropic medication use has dropped to below 12.0% systemwide.

Standardizing Care Across a Large System

Achieving these results required a coordinated approach across Trilogy's extensive network of communities. One of the organization's primary strategies was ensuring that every location measured performance consistently and collected comparable data, such as fall history, medications, and levels of ADL assistance. To accomplish this, Trilogy implemented standardized assessments to evaluate resident fall risk at admission and weekly throughout each resident's stay.

The assessments involve not only clinical staff but also residents and multidisciplinary care teams. Factors such as resident nutrition, participation in activities, community integration, and overall health status are considered when evaluating fall risk and developing individualized care plans.

The Role of Medication Review

Medication management became a particularly important component of the organization's fall prevention efforts. Residents in senior living settings often receive care from multiple physicians and healthcare organizations, creating the potential for medication-related risks. As such, Trilogy's pharmacy team members review all medications residents are taking and flag the use of psychotropic medications. They also screen for black box warnings, potential interactions, and other factors that could increase a resident's fall risk. Information from these assessments helps care teams develop personalized fall-prevention strategies tailored to each resident's needs.

Dempsey notes that inappropriately prescribed medications are also an issue. Psychotropics in particular are sometimes prescribed to seniors for behavior management rather than to treat a diagnosed medical

condition. Trilogy's medication review process helps identify situations in which psychotropic medications may not be fully aligned with documented clinical needs. When concerns arise, pharmacists work with residents to review potential risks, benefits, and alternatives. Residents are then equipped with information that supports informed decision-making while preserving their autonomy and right to participate in care decisions.

Overcoming Challenges

Implementing standardized fall-prevention practices across more than 140 communities was not without challenges. Although Trilogy established a common assessment framework across the system, local communities retained flexibility to adapt assessments to their specific populations and circumstances. The organization also continuously refines assessment tools when trends emerge across multiple locations.

Another challenge involved balancing safety interventions with residents' rights to make their own healthcare decisions. Dempsey emphasizes that Trilogy's approach focuses on education and shared decision-making rather than directing resident choices. This philosophy supports independence and dignity while helping residents understand the potential risks associated with certain medications and care decisions.

Lessons for Other Organizations

Dempsey suggests that organizations seeking Joint Commission accreditation use the survey process as an opportunity to examine performance data more deliberately. "Start by focusing on the resident experience and outcomes rather than the accreditation requirements themselves," she says. "Engage frontline caregivers early, use data to identify opportunities for improvement, and build solutions that can be consistently implemented across the organization." Whether the focus is reducing falls, improving medication management, or addressing another quality measure, the process can help organizations move from compliance to sustained performance improvement.

She adds, "We would encourage other organizations to view accreditation not as an end point but as a powerful tool to strengthen organizational performance and enhance the experience and outcomes of those they serve. But most important, create a culture where quality improvement is part of everyday operations rather than a project tied to a survey. Sustainable improvement occurs when team members understand not only what needs to be done but why it matters to the residents they serve." 

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