

# Evidence-Based Clinical Programs in Skilled Nursing Facilities Result in Improved Patient Outcomes



ACP's evidence-based clinical programs have been implemented in skilled nursing facilities to help optimize patient outcomes and quality of life while also reducing facility costs. ACP's evidence-based clinical programs combine innovative rehab technologies & outcomes-focused clinical services to address the most prevalent conditions and needs of individuals receiving care in skilled nursing facilities. These non-invasive, comprehensive programs are designed to target post-acute and chronic diagnoses by providing the technology, support, and education therapists need to implement effective and efficient treatment interventions.

# ACP's Evidence-Based Clinical Programs Results



## Orthopedic Program Results

ACP introduced the orthopedic clinical pathway to therapy teams at eight facilities in Chicago to help 49 post-op Total Knee Arthroplasty (TKA) patients improve knee strength and range of motion, reduce pain and fall risk, and shorten length of stay (LOS). The pathway included comprehensive assessment, strength training, aerobic conditioning, therapeutic activities, and the use of biophysical agents to address common post-op impairments, including pain, sarcopenia, edema, and decreased range of motion.



LOS **decreased by 7.2 days**,  
from 17.7 to 10.5 days



Timed Up and Go Test  
**decreased by 28.9 seconds**,  
from 49.8 to 20.9 seconds



Pain ratings **reduced by 3.9 points**, from 6.4 to 2.5  
on a 10-point scale



Tinetti Test **increased by 59%**,  
from 14.4 to 22.9 points  
on a 28-point scale

Berg Balance Scale **increased by 67%**, from 26.9 to 45 points  
on a 56-point scale

Comparison of TKA patients pre- and post-pathway implementation

ACP's clinical pathways were also utilized to help 36 patients recovering from Total Hip Arthroplasty (THA) to significantly reduce pain and fall risk, increase function, and decrease LOS.



LOS **reduced by 2.7 days**,  
from 20.1 to 17.4 days



Timed Up and Go Test  
**decreased by 36.0 seconds**,  
from 60.1 to 24.1 seconds



Pain ratings **reduced by 3.8 points**, from 5.9 to 2.1  
on a 10-point scale



Tinetti Test **increased by 94%**,  
from 11.8 to 22.9 points  
on a 28-point scale

Berg Balance Scale **increased by 78.5%**, from 19.1 to 34.1 points  
on a 56-point scale

Comparison of THA patients pre- and post-pathway implementation



## Cardiopulmonary Program Results

At a single skilled nursing facility, ACP consulted with a therapy team to identify 18 patients diagnosed with coronary artery bypass graft, heart attack, chronic heart failure, pneumonia, and syncope. The facility utilized ACP's cardiopulmonary program to increase referrals for short stay and post-acute rehab patients. By implementing the ACP pathway, patients were able to increase leg strength, balance, and endurance within a reduced length of stay (LOS).



Average LOS **decreased by 19.5 days**, from 33.2 days to 13.7 days over a year



30-Second Sit to Stand performance **increased by 7.1 repetitions**, from 0.8 to 7.9 repetitions



Six-Minute Walk Test distance **increased by 663 feet**, from 175 to 838 feet, indicating improved functional endurance

Comparison of cardiopulmonary patients pre- and post-pathway implementation



## Continence Improvement Program Results

A skilled nursing facility had five patients with urinary incontinence who were averaging 35 incontinent episodes per day, combined. The facility wanted to reduce the number of incontinent episodes to improve patient quality of life and reduce costs for incontinence care products, which was totaling \$12,775 per year. After implementing the continence improvement pathway, one patient became fully continent and the remaining four patients' episodes were reduced to six per day, combined. ACP's continence improvement program not only significantly improved patient outcomes but also saved the facility over \$10,000 on adult products in one year.



Number of incontinence episodes were **reduced from 35 to 6 per day**



Cost of adult products **decreased to \$6 per day\***, from \$35 per day

\*Total cost of products was estimated at \$1 per episode



Cost of adult products **reduced by \$10,585 per year**, from \$12,775 to \$2,190 per year

Comparison of urinary incontinence patients pre- and post-pathway implementation



## Fall Prevention Program Results

ACP's Fall Prevention clinical pathway was utilized to help patients reduce fall risk by increasing leg strength and endurance. The pathway helped patients increase their strength during objective mobility testing.



Number of falls per month **decreased by 70%**, from 30 to 9



Timed Up and Go Test **decreased from 73 to 35 seconds**



Tinetti Test **increased by 23%**, from 17.7 to 21.7 points on a 28-point scale



30-second Sit to Stand performance **increased by 62.5%**, from 4 to 6.5 repetitions

Comparison of patients pre- and post-pathway implementation



## Pain Management Program Results

A facility in Arizona was losing patients to other facilities in the area and their Quality Measures for pain management were higher than the state and national averages. ACP worked with this facility to implement a pain management program to help decrease patient pain ratings, reduce the number of missed therapy sessions, and improve facility quality measures.



Pain rating was **reduced by 4.8 points** on a 10-point scale, compared to a reduction of 2.1 points without the program



Missed therapy sessions **decreased by 82%**

Comparison of patients pre- and post-pathway implementation



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