

State Coalitions on Fall Prevention: Working Collaboratively to Make a Difference



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State Coalitions on Fall Prevention Workgroup

In December 2004, the National Council on Aging (NCOA) hosted a National Summit on Fall Prevention. Fifty-eight organizations, professional associations and federal agencies spent two days working in facilitated teams to develop evidence-based strategies and to build consensus around a blueprint for reducing falls and fall related injuries in older adults. The resulting ***National Action Plan*** contained 36 strategies, which reflected evidence-based interventions related to physical mobility, medications management, home safety, and environmental safety, and cross-cutting topics such as media awareness, legislation, and Web site development.

When the ***National Action Plan*** was released in March 2005, there was insufficient funding to mount a national effort to implement the Plan. In response to the participants' enthusiasm for the summit process and the plan itself, and in an effort to promote those strategies, the *National Falls Free™ Coalition* was created. This loose-knit collaborative of summit organizations was charged with working toward the progress of one or more of the strategies that resonated with their organizational missions. In 2006, several states began to coalesce around the issue using the ***National Action Plan*** as their organizing framework. States began to petition NCOA to join the *National Falls Free™ Coalition*.

In late 2006, it became apparent that state coalitions were struggling with similar challenges yet making remarkable strides in addressing fall prevention. Each state approached coalition-building in its own unique manner. Collaborative leadership came from a variety of disciplines including the state aging departments, public health, and health care; some states initiated their efforts regionally while others began at the state level. Nonetheless, they all practiced basic elements of coalition building. NCOA recognized the value of this growing network of committed and talented state coalitions and subsequently created the *State Coalitions on Fall Prevention Workgroup* to enhance cross-state learning opportunities and to facilitate collaboration among states. NCOA began offering technical assistance to existing and emerging state coalitions, liberally linking newly-forming state coalitions with existing ones; recognizing the value of technical support offered through peer leaders.

In February 2007, with support from the Home Safety Council and the Archstone Foundation, NCOA hosted a meeting of the *State Coalitions on Fall Prevention Workgroup* in Washington, DC. Ten states were represented. In addition to promoting effective coalitions, a goal of the meeting included collecting tools, resources, strategies and lessons learned from these state leads which NCOA enfolded into an online tool to assist coalition-building efforts. That tool was completed in late 2007 and was converted to an html format in 2008. It was subsequently launched (www.coalitions.fallsfree.org) to assist all states in coalition building efforts.

In late 2007, the National Center for Injury Prevention and Control (NCIPC), the US Administration on Aging (AoA) and the Archstone Foundation joined NCOA in a partnership to promote the effectiveness of the functioning state coalitions and to promote new state coalition efforts. Throughout the year, NCOA has been reaching out to states

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Arizona's Falls Prevention Coalition

History of Arizona's Falls Prevention Coalition:

In May of this year, a grant was provided by the Virginia G. Piper Charitable Trust to support the development of the Arizona's Falls Prevention Coalition; this initial funding will help support the development of the coalition's structure and vision and will help to fund work on the coalition's established goals and objectives.

Organizations that played a key role in the formulation of Arizona's Falls Prevention Coalition:

The Virginia G. Piper Charitable Trust participated in the National Summit and remains active in the National Falls Free Coalition; not surprisingly the Trust has been helping to fund the fall prevention activities and infrastructure development within the Trust's community of service: Phoenix. As the local Phoenix collaborative effort evolved it reached out to the Governor's Office on Aging to expand fall prevention to the state of where a growing retiree population is at risk of falls. A.T. Still University subsequently joined the efforts of the Trust and the Governor's Office on Aging as a strong partner in the early work to develop Arizona's state wide coalition.

Goals and objectives of Arizona's Falls Prevention Coalition:

Within the state effort to reduce falls and fall related injuries in older adults several support objectives have been established which will be monitored and addressed through coalition efforts. Objectives include:

- improving older adult access to falls prevention programming;
- coordinating evidence-based falls prevention programs and services in Maricopa County;
- providing technical assistance to falls prevention program providers, including web-based services, mentoring, and a Speaker's Bureau;
- creating a continuum of falls prevention opportunities and efforts by identifying and promoting prioritized components of evidence-based falls prevention activities for organizations unable to offer the entire program; and
- ensuring a connection between individual falls prevention programs and the broader statewide collaboration between the aging network and the public health community to promote chronic disease self-management

Funding Arizona's Falls Prevention Coalition:

In this early development work the Virginia G. Piper Charitable Trust and A.T. Still University are keys to sustaining the effort in collaboration with the lead agency, the Governor's Office on Aging. Additional sustainability strategies will be considered by the steering committee as the process unfolds.

Organizations that took the lead in developing Arizona's Falls Prevention Coalition:

In addition to the organizing triad -- the Virginia G. Piper Charitable Trust, A.T. Still University, and the Governor's Office on Aging -- the Arizona Department of Health Services recently joined the Coalition building effort bringing another key partner to Arizona's fall prevention activity.

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Structure and function of the steering committee:

The four key organizations are serving as the Steering Committee with plans to meet monthly for the first 3 or 4 months, then perhaps on a bimonthly basis as the Maricopa County and eventually statewide coalition is formed and launched.

2-3 challenges encountered:

In this early development organizing challenges were encountered, including identifying the Steering Committee members and Coalition agendas for the 1st meeting.

2-3 successes to share:

An important success in this early development stage is garnering A.T. Still University's support as well as the participation of the Arizona Department of Health Services. A second success was obtaining the Virginia G. Piper Charitable Trust sponsorship to attend the *National State Coalitions on Fall Prevention Workgroup* meeting and accessing the technical assistance offered by the Workgroup and its sponsoring agency the National Council on Aging.

Outcomes being monitored:

In this early stage of development outcomes are being discussed but not yet identified.

The Arizona's Falls Prevention Coalition does not yet have a stand alone web site or inclusion of coalition information on a central web site. For additional information and an opportunity to join this exciting work in Arizona contact:

Valerie Fifield
Special Projects Director
Governor's Office on Aging
1700 W. Washington St., Suite 240
Phoenix, AZ 85007
Phone: (602) 542-4752
vfifield@az.gov

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California StopFalls Network

History of the California StopFalls Network:

The initiative to build the StopFalls Network was an outgrowth of the 2003 California Blueprint on Fall Prevention Conference, which engaged over 125 participants from all over the state in developing a plan and creating strategies to build an infrastructure of fall prevention programs in the state; their work also served to raise the awareness about fall prevention as a public health priority. Growing constituency to influence systems change is a key element of the Fall Prevention Center of Excellence (FPCE), a five-year initiative funded by the Archstone Foundation.

The California Department of Health Services (CDHS), State and Local Injury Control (SLIC) Section was the FPCE partner given the lead to build the statewide Network. We created fact sheets and a brief online application and distributed these at meetings and conferences. We also e-mailed them to potential members, using attendance rosters from previous conferences, as well as lists from organizing key partners including but not limited to the Department of Aging (for AAAs), Emergency Medical Services Authority, and Andrus Gerontology Center.

StopFalls was launched conjunction with a popular annual senior injury conference, setting the tone for future efforts. We developed a mission statement and established work groups. Each of the groups in turn developed action plans with short, medium, and long-range goals to address issues in common. The work groups included: 1) continuing education, 2) policy, advocacy, and sustainability, 3) shared resources, 4) media & communications, and 5) frail/high-risk elders. Each of the work groups now holds periodic teleconferences to discuss progress on implementing their action plan items.

Organizations that took the lead in developing the California StopFalls Network:

CDHS' State & Local Injury Control Section was the FPCE partner given the lead to build the StopFalls Network. Additional support was provided by the Archstone Foundation and the Steering Committee for the 2003 Blueprint Conference.

Goals and objectives of California StopFalls Network:

Growing constituency to influence systems change is a key element of this work with several support objectives identified:

- Make fall prevention an integral, well-funded part of a *coordinated* system of programs and services.
- Create a statewide structure to interconnect fall prevention programs/coalitions to each other and to state experts and resources.
- Identify and engage influential champions to help create system change.
- Develop and implement a policy agenda for the state.
- Assure quality continuing education for health and service providers.
- Share best/promising practices.
- Raise awareness that falls are preventable.

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Funding the California StopFalls Network:

California is in the unique position of enjoying the Archstone Foundation support which provides the key funding sources; the CDHS contributes many in kind resources (e.g., staff time, the teleconferencing bridge line).

Organizations that are playing a key role in the Network:

There are over 120 organizations and key stakeholders in the StopFalls Network so it is difficult to single out individuals. Each work group has three to four members who are excellent “catalysts” who help move the agenda forward. In addition to the many organizations and stakeholders involved in the Network, many supplemental organizations, such as the Archstone Foundation funded coalition development grantees at the county/regional level, university programs, and social, health service, and injury prevention programs have joined the state effort.

Structure and function of the steering committee:

There is no steering committee. However, the entire Network meets at least annually, alternating between the South and North of the State. Communication with the Network member organizations is often via-list serve and through our Web site. Most of the work for each objective focus area is carried out by Committees on such topics as Policy, Advocacy, and Sustainability; Media and Communications; Shared Resources; Continuing Education; and the High Risk/Frail Older Adults focused workgroup.

2-3 challenges encountered:

It can be difficult to get our very busy members to volunteer their time to carry out work group “to do” lists. It is often same small group of tireless colleagues who do most of the work. In addition, California is a very large state, making it difficult to convene the entire Network of organizations.

2-3 successes to share:

There have been many successes over its four year history, but those that stand out include:

- Growth of the Network to over 120 members and organizations
- Creation of a statewide list of continuing education opportunities re: fall prevention for health care providers and care and social service professionals
- Creation of a consensus-driven policy agenda
- Creation of the StopFalls website to facilitate communications
- Development and posting of summaries of Network member activities
- Activities undertaken by regional/community level coalitions where groups are conducting community needs assessments, inventories of resources, strategic planning, and community awareness/education activities.

Outcomes being monitored:

- All of the work group action plan elements
- Member satisfaction with process and content
- Activities of members through a list summarizing what key members are currently doing in fall prevention.

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- Activities and outcomes of regional/county coalitions in different areas of the California.

For additional information go to the exciting web site (www.stopfalls.org) where the viewer will find a myriad of tools, resources and information posted. To learn how to become involved with the Network contact:

Barb Alberson, MPH

Chief, State & Local Injury Control Section

California Department of Public Health

MS 7214 - PO Box 997377

Sacramento, CA 95899-7377

Phone: (916) 552-9859

barbara.alberson@cdph.ca.gov

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Connecticut Falls Prevention Coalition

The Connecticut Falls Prevention Coalition is in its developmental stages. Through a CDC CORE Injury Grant funding Connecticut established an Injury Community Planning Group (ICPG). After reviewing data, the ICPG identified falls as one of its injury priorities. A fall injury workgroup was established; members include the CT Collaboration for Fall Prevention (CCFP)/Yale School of Medicine, CT Dept of Social Services (DSS, the state aging services agency), Brain Injury Association of CT, Western CT Area Agency on Aging, CT Poison Control Center, Consumer Protection, and the Dept of Public Health (DPH). The fall injury workgroup (one of several appointed ICPG workgroups) provided input to the fall section of the state injury plan and continued to meet to work on implementation.

Efforts at the state are focused on working to transition to a state-wide fall coalition, engage other key partners, and identify how we can support and disseminate the CT Collaboration for Fall Prevention's extensive work.

Organizations that took the lead in developing the Connecticut Falls Prevention Coalition:

The Coalition is still in development but the key organizing organizations include: CT Department of Public Health (DPH), Injury Prevention Program; the CT Department of Social Services (DSS), Aging Services Division; and the CT Injury Community Planning Group (ICPG)

Goals and objectives of the Connecticut Falls Prevention Coalition:

Several objectives are under discussion while the coalition is being formulated, which include:

- increasing awareness of fall risk factors and effective prevention strategies;
- increasing capacity of providers and organizations serving older adults to conduct fall prevention; and
- increasing resources devoted to fall prevention

Funding the Connecticut Falls Prevention Coalition:

- CT Injury Community Planning Group (ICPG) is funded by the CDC CORE Injury Grant.
- The DSS, DPH and CCFP are collaborating on an AoA Evidence-based Grant to implement the CCFP model in two regions of the state, which provides from infrastructure funding to the project.

Organizations playing a key role in the Connecticut Falls Prevention Coalition:

As noted in the history, the CT Collaboration for Fall Prevention (CCFP)/Yale School of Medicine, the CT Dept of Social Services (DSS, the state aging services agency), Brain Injury Association of CT, Area Agency on Aging, the CT Poison Control Center, Consumer Protection, and the Dept of Public Health (DPH) are all playing a key role in the development of the state coalition. The members CT Injury Community Planning

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Group are also instrumental in the development of the coalition. As the coalition is developing, other organizations key to the success of the coalition are being considered.

Structure and function of the steering committee:

The Injury Community Planning Group (ICPG) meets quarterly, with part of the agenda devoted to workgroups meetings, one of which is fall prevention. The fall prevention workgroup also meets as needed and remains in communication between ICPG meetings.

2-3 challenges encountered:

As with most coalition building efforts securing sufficient resources has been a challenge. So too has securing commitment on the part of agency administrations amid competing state priorities. Finally, it has been a struggle to bring awareness of falls as a major issue in the midst of other better known injuries and diseases.

2-3 successes to share:

- Collaboration between DSS, DPH and Yale CCFP on successful application for US Administration on Aging evidence-based program grant provided reinforcement and funding for this valuable collaborative activity
- Designation of falls as a priority in the Injury Community Planning Group's comprehensive state injury plan

Outcomes being monitored:

In this early development phase there are several outcomes being considered including: increased number of providers and organizations involved in fall prevention, increased partnerships, changes in practices and policies embracing fall prevention. Under the CDC CORE Injury Grant, the DPH Injury surveillance system is now monitoring fall related hospitalizations and ED visits. (Previously were only able to track deaths).

The Connecticut Falls Prevention Coalition does not have a website; additional information about the earlier clinical work may be found on the Connecticut Collaboration for Fall Prevention website: <http://www.fallprevention.org/>. The information and materials presented on the site were developed by researchers at Yale University, collaborating with clinicians in the greater Hartford, Connecticut area to develop methods for incorporating fall risk assessment and treatment into the care of older adults.

For additional information about the Connecticut Falls Prevention Coalition and how you can be involved in this exciting work, contact:

Marian Storch
CT Department of Public Health
Injury Prevention Program
410 Capitol Ave
Hartford, CT 06134-0308
860-509-7791
marian.storch@ct.gov

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Florida Falls Prevention Coalition

History of Florida's Falls Prevention Coalition:

In recognition of the growing problem of falls and fall related injuries in older adults and the growing number of older adults in Florida, the Office of Injury Prevention (OIP) within the Department of Health (DOH) partnered with the Communities for a Lifetime Bureau, within the Department of Elder Affairs (DOEA), to host the initial *Falls Prevention for Florida's Seniors* meeting held on June 24, 2008. The meeting had approximately 85 attendees and served as the first step in establishing a statewide coalition.

Key agencies and providers were invited to hear Kyla Shelton (OIP staff) presented Florida's senior falls data. Lynn Beattie (National Council on Aging) shared a national perspective on senior falls prevention and statewide coalitions and Linda Scarpetta (Michigan Department of Community Health) shared the Centers for Disease Control and Prevention (CDC) grant funded initiatives and activities in Michigan. Peggy Haynes (A Matter of Balance) shared information on the program from a national perspective and Martha Pelaez (Healthy Aging Collaborative of South Florida) shared the Matter of Balance program from a state perspective and new initiatives being developed through the Health Foundation of South Florida that serves Broward, Miami-Dade, and Monroe Counties. John Hemphill (CDC) discussed preventing falls through environmental changes in residential housing. Don Hughes (City of Satellite Beach Fire Department) and Mark Brimer, City of Satellite Beach Mayor) presented a community-based multi-faceted strategy for falls prevention. The strategy included collaborative awareness messages, the fire department's multi-step "fall" problem project, and a business environmental survey. The attendees were energized to see this community's creative approach to falls prevention.

Capitalizing on that energy and interest, attendees were invited to discuss the next steps resulting in a consensus that Florida needed to work towards a statewide coalition to address this important issue.

Organizations that took the lead in developing the Florida Falls Prevention Coalition:

The Office of Injury Prevention (OIP) within the Department of Health (DOH) partnered with the Communities for a Lifetime Bureau, within the Department of Elder Affairs (DOEA) to explore key partner interest and commitment.

Goals and objectives of the Florida Falls Prevention Coalition:

The draft 2009-2013 Florida Injury Prevention Strategic Plan facilitated by the Office of Injury Prevention and the Florida Injury Prevention Advisory Council (FIPAC) includes the following fall prevention goal: *Establish a collaborative effort to provide statewide direction and focus for senior falls prevention efforts.* The goal team responsible for this state plan goal will draft the goal strategies across five subheadings: Leadership; Funding; Advocacy; Interventions; and Data.

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Funding the Florida Falls Prevention Coalition:

The Florida Injury Prevention Advisory Council and goal teams' activities are funded by the 2005-2010 CDC Injury Surveillance and Prevention grant. There is a funding section under the state plan's senior falls prevention goal that will be used to explore additional funding and sustainability.

Organizations playing a key role in the Florida Falls Prevention Coalition:

The Office of Injury Prevention will be partnering with Department of Elder Affairs to recruit organizations to serve on the state plan's senior falls prevention goal team.

Structure and function of the steering committee:

The Florida Injury Prevention Advisory Council and goal teams once appointed will meet twice a year in an "in person" meeting and are planning to meet quarterly through conference calls.

2-3 challenges encountered:

The greatest challenge is that the Office of Injury Prevention is new to the area of senior falls prevention and needs to strengthen its connectivity to the stakeholder community, especially aging. To make substantial progress an inventory of current senior falls prevention activities/initiatives will need to be completed.

2-3 successes to share:

The data and the success of the June meeting are driving forces behind Florida's taking steps towards establishing a statewide coalition.

Outcomes being monitored:

In this early stage of development outcomes are not yet established.

There is no web site currently available to learn more but the Office of Injury Prevention plans to add a section within their web pages to highlight senior falls prevention; it will include progress towards the establishment of a statewide coalition. It is envisioned that the Department of Elder Affairs will carry the same information on their web site and that both sites will link to each other.

Jane E. Parker

Office of Injury Prevention
Florida Department of Health
4025 Esplanade Way - 3rd Floor
Tallahassee, FL 32311-7929
Phone: (850) 245-4144 ext. 2774
Jane_Parker@doh.state.fl.us

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Hawaii State Fall Prevention Consortium

History of the Hawaii State Fall Prevention Consortium:

The Hawaii Fall Prevention Consortium was founded in 2003 with support and leadership from the Injury Prevention and Control Program (IPCP) of the Hawaii Department of Health. From the outset the focus was to involve as many agencies, professional associations, non-profits, HMO's hospitals, care-facilities and senior organizations as possible. Hawaii is not unique in that inter-agency networking is vital to growth and success.

Provider education and infrastructure building are key elements of the consortium's initiative. Therefore, a subcommittee of the Falls Consortium was created -- the Conference Planning Committee—and given the responsibility of the planning and coordinating 3 statewide conferences on fall prevention, subsequently held in 2003, 2005, and 2007. National keynotes have always been integral; in 2007 308 professionals attended presentations by Katherine Berg, PhD, Chair of the Department of Physical Therapy and Professor from the University of Toronto and creator of the Berg Scale; as well as Debra Rose, PhD, Professor of Kinesiology at Cal State Fullerton, and Co-Director of the Center for Successful Aging and author of FALLPROOF.

Organizations that took the lead in developing the the Hawaii State Fall Prevention Consortium:

Three key organizations have developed this collaborative initiative including the Hawaii Department of Health (DOH) Injury Prevention and Control Program (IPCP) and the Neurotrauma Support Services, and the Honolulu County Office on Aging and Elderly Affairs

Goals and objectives of the Hawaii State Fall Prevention Consortium:

The goals of the consortium are to provide organizations, professionals, caregivers, advocates and interested individuals the opportunity to network, share information and collaborate on interventions and projects. The supporting objectives include the design and implementation of educational events and evidence-based interventions that reduce the incidence and severity of fall injuries among older adults in Hawaii.

Funding for the Hawaii State Fall Prevention Consortium:

Hawaii is using in kind support and small grants to fund its efforts including primary staff support from the DOH Injury Prevention and Control Program as well as the Neurotrauma Supports. Grants for the educational conferences have come from Neurotrauma Supports and block grant initiatives

Organizations that are playing a key role in the Hawaii State Fall Prevention Consortium:

In addition to the DOH Injury Prevention and Control Program some professional associations and health care agencies are playing key roles, including: the Hawaii Physical Therapy Association; the Hawaii Pharmacist Association; and Queen's Medical Center.

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Structure and function of the steering committee:

There is no steering committee. The Consortium meets quarterly while the Conference Planning Committee meets more often as needed to plan to the educational activities.

2-3 challenges encountered:

First and foremost the lack of dedicated funding sources has limited the growth of the fall prevention effort. In spite of continued discussions, fact sheets, fiscal impact studies, lobbying and successful conferences, we have been unable to obtain a funded state level position, committee or task force to address this issue which makes it hard to convince others of the importance of dedicating resources towards the problem.

Unfortunately, like many states the next fiscal appears even worse as latest predictions from State revenue office indicate a shortfall due to loss of airlines and increased gas prices which has drastically affected tourism as the number one source of state income.

2-3 successes to share:

- 3 successful statewide educational conferences have been conducted enhancing provider education and awareness;
- A state wide Awareness Campaign has been launched
- Bringing awareness and educational resources to the provider population has expanded the vibrant member base.

Outcomes being monitored:

- State senior population's awareness of fall risk with aging with some early results showing an increased awareness of both risk and some solutions
- Increase capacity in home care and hospital based fall prevention programs
- Reduction in home care and hospital admissions for falls after interventions
- Conference participant feedback on the breadth and quality of presentations – early results show 89% of conference participants were very satisfied with presenters and topics.

The State Injury Prevention web site has some fall prevention information at www.nogethurt.hawaii.gov. The Consortium is also working to develop a web presence on a central state web site, for additional information contact:

Stan Michaels

Injury Prevention and Control Program

Hawaii Department of Health

Leahi Hospital/Trotter Lower Level

Honolulu, HI 96816

(808) 733-9202

stanley.j.michaels@doh.hawaii.gov

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Maine Falls Prevention Coalition

History of the Maine Falls Prevention Coalition:

Maine Falls Prevention Coalition was spawned as an extension of the Matter of Balance Project Advisory Committee (PAC) that was formed initially to guide a three year AOA-funded Evidenced-Based Prevention Programs for the Elderly grant. While working with the NCOA Center for Healthy Aging, the PAC learned of proposed U.S. Senate Legislation, the *Keeping Seniors Safe from Falls Act* of 2005 (S 1531) to fund a national education, research, and demonstrations related to falls prevention and took the initiative to share the legislation with a Maine state legislator who was a member of Southern Maine Agency on Aging's Advisory Council; he accepted the request to sponsor a similar fall prevention bill in Maine. Following lengthy negotiations with the Governor and state Commissioner of the Department of Health and Human Services (primarily over the cost of proposed demonstrations), a stripped down Resolve was enacted creating the Maine Falls Prevention Coalition (which included all members of the Matter of Balance PAC as well as other key stakeholders). The Coalition was charged with developing a report for the next legislative session with recommendations and strategies for intervention approaches, demonstration projects, and suggested policy and legislative activities.

Organizations that took the lead in developing the Maine Falls Prevention Coalition:

Three organizations in leadership roles within the Matter of Balance Project Advisory Committee (PAC) took the lead in the development of the broader fall prevention coalition. Members included Southern Maine Agency on Aging, Maine Health's Partnership for Healthy Aging, and the Maine Office of Elder Services.

Goals and objectives of the Maine Falls Prevention Coalition:

In keeping with the requirements of the funding resolve, the coalition's goal was to develop a report for the Maine Legislature recommending falls prevention interventions and demonstrations. Objectives included building greater public policy attention/support for the issue of falls among elders and procuring increased funding for falls prevention interventions.

Funding for the Maine Falls Prevention Coalition:

Following the expenditure of the initial resolve funding the coalition has been unable to obtain additional monies and operates primarily through in kind efforts of the lead organizations.

Organizations that are playing a key role in the Maine Falls Prevention Coalition:

Maine Department of Public Health has joined the effort to promote fall prevention, joining Maine Health's Partnership for Healthy Aging, and the Maine Office of Elder Services in the coalition work.

Structure and function of the steering committee:

The Coalition membership has now been combined into a larger committee providing oversight to Maine's US Administration on Aging "Choices for Independence" grant. The

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Committee meets quarterly. This has diminished the success of the falls coalition work which will be revisited when the full Choices PAC meets in September.

2-3 challenges encountered:

A key challenge is gaining financial support from state executive branch officials and legislature; in the absence of dedicated funding another challenge is relying on donated staff time to coordinate coalition activities. Concurrently, maintaining ephemeral public policy focus on the importance of falls prevention in the face of competing health care and budget issues both for state and member organizations remains a significant challenge.

2-3 successes to share:

- Maine legislation to create the Coalition was enacted and has been the subject of other states' initiatives – Maine remains the only state with fall prevention legislation.
- State Fall Prevention Plan was prepared and submitted to the Legislature in 2007
- Maine Injury Prevention Program now includes falls prevention as one of initiatives under the Strategic Plan for 2007 – 2010
- The Governor is supporting a Proclamation of Fall Prevention Week 2008
- The development of the MaineHealth Fall Prevention Toolkit

Outcomes being monitored:

- The dissemination Matter of Balance is being monitored as part of the "Choices for Independence" grant.
- Incorporation of fall prevention into strategic plan for Maine CDC Healthy Maine Partnership activities
- The number of endorsements in the distribution of the MaineHealth Fall Prevention Toolkit; dissemination will be tracked.

The Coalition does not have a web site but additional information on Matter of Balance can be found at www.mainehealth.org/mh_body.cfm?id=432. For additional information on the exciting fall prevention activities in Maine contact:

Peggy Haynes, MPA

Director, MaineHealth's Partnership for Healthy Aging

465 Congress St., Suite 701

Portland, ME 04101

Phone: (207) 775-1095

haynem@mmc.org

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Massachusetts Falls Prevention Coalition

History of the Massachusetts Falls Prevention Coalition:

A Massachusetts Department of Public Health Falls Prevention Coalition was formed in January 2007 as a satellite committee of the Massachusetts Injury Community Planning Group (now known as the *Prevent Injuries Now! Network*). Concurrently, similar falls prevention groups were being formed by the Home Care Alliance of Massachusetts (the trade group for home care agencies) and the Massachusetts Extended Care Federation (the trade group for long term care and assisted living facilities). The lead organizers met, and determined that having one umbrella coalition would be valuable; the Massachusetts Falls Prevention Coalition was born.

Membership has expanded significantly to over 50 organizations and individuals, including hospital and nursing home administrators, vision specialists, pharmacists, rehabilitation professionals, physicians, insurers, advocates, seniors and others. Two symposia were hosted in May and November 2007, devoted to community-based interventions. The First Statewide Falls Prevention Symposium was held in May 2008, attended by more than 800 providers, legislators, seniors and interested public health professionals from across New England.

We remain committed to broadening our reach to seniors and to raising our own visibility as providers of sound advice and practical, working programs to older adults and to the healthcare community in our state.

Organizations that took the lead in developing the Massachusetts Falls Prevention Coalition:

The Massachusetts Department of Public Health, the Massachusetts Extended Care Federation and the Home Care Alliance of Massachusetts took the lead in the integration of their separate fall prevention initiatives which resulted in the state coalition.

Goals and objectives of the Massachusetts Falls Prevention Coalition:

The formally established mission is: to promote healthy lifestyles, behaviors and strategies to prevent falls and fall-related injuries and maintain independence and autonomy; to reduce the incidence and severity of falls and fall-related injuries across the lifespan in Massachusetts; and to promote collaboration, communication and training among the subgroups (individual task forces), so that information and best practices can be shared across settings for individuals transitioning from one setting to another. To achieve the mission the Coalition objectives that have been established include:

- helping older adults learn effective methods of remaining independent;
- conducting an environmental scan of existing programs/resources; and
- examining gaps in existing data to identify what do we want to collect and measure and how can we do it

Funding for the Massachusetts Falls Prevention Coalition:

A variety of funding opportunities have been located included support from the

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Massachusetts Extended Care Federation; private insurers, especially those serving seniors; The Boston Foundation; and the Division of Health Care Quality, Massachusetts Department of Public Health

Organizations that are playing a key role in the Massachusetts Falls Prevention Coalition:

Among the 40 partnering organizations that are playing key roles include:

- Executive Office of Elder Affairs
- Home Care Alliance of Massachusetts
- Massachusetts Extended Care Federation and Massachusetts Long Term Care Foundation
- Massachusetts Department of Public Health (several divisions)
- assisted living, senior housing
- Massachusetts Hospital Association
- Massachusetts Association of Health Plans and other insurers
- State legislators
- Professional associations such as the Massachusetts Medical Society and others

Structure and function of the steering committee:

The steering committee meets quarterly with its many subcommittees and regional committees meeting more often as needed.

2-3 challenges encountered:

Among the many challenges obtaining sufficient funding for evidence-based interventions marketing of our prevention messages stands out. Advocacy efforts to obtain legislative support in the House of Representatives have been challenging as well. Finally, fostering a shared vision among all partners with such diverse backgrounds and interest has been challenging to the coalition.

2-3 successes to share:

- Developed and launched “Keys to Independence,” social marketing campaign that included a 1-800 information line for older adults.
- Instituted *Matter of Balance* training for Massachusetts seniors with the program coordinated by the Massachusetts Department of Health; trained 30 health care providers in Matter of Balance
- Hosted a state-wide Symposium that attracted 800 attendees across New England.
- Implemented a voluntary reporting system for falls by all Massachusetts hospitals that is housed on a public website.
- Developed a new falls risk assessment tool for long term care that is being made available through several Massachusetts websites.
- Expanded the coalition to include Western Massachusetts Regional Falls Prevention Coalition to meet the needs of seniors and health care providers in that rural/remote region.
- Disseminated Standards and Best Practices for falls prevention in home-based care, including risk assessment tools and benchmarking resources.

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Outcomes being monitored:

Although early in its development the coalition has established outcomes of interest that include:

- resource sustainability for the coalition activities;
- rates of falls, fatal falls, falls with serious injury by town/zip code; and
- the number of community and institution-based falls prevention programs, and the number of individuals/organizations who attend one or more programs

Massachusetts has been able to attract additional “seed” funding from private companies and from the Department of Health office of health care quality, but as yet have no permanent mechanism in place to fund the coalition beyond August 2010. It is believed public awareness has increased somewhat thanks to paid and earned media efforts, and the release of 2006 death data showing 78 percent jump in fatal falls statewide. The coalition has completed a survey of hospital, home care, long term care and community programs across the state and has educated/trained well over 600 long term care staff, held a webinar for several hundred hospital staff, and trained over 35 home care and related staff in the Matter of Balance program. Additional Matter of Balance master trainers are currently being trained. However there is a recognized need improve the evaluation/outcome measures, and this will be a focus for the coalition over the next year.

For additional information go to the Injury Prevention Coalition website, at www.masspinn.org or contact Coalition Leads:

Alice Bonner, RN, GNP
Director of Clinical Quality
Massachusetts Extended Care
Federation
2310 Washington Street, Suite 300
Newton Lower Falls, MA 02462
Phone: (617) 558-0202, ext. 237
abonner@mecf.org

Lewis Howe
Injury Prevention Coordinator
Division of Injury Prevention
Massachusetts Department of Health
250 Washington Street, 4th fl
Boston, MA 02108
Phone: (617) 624-5460
Lewis.Howe@state.ma.us

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Michigan Fall Prevention Partnership

History of the Michigan Fall Prevention Partnership:

While numerous efforts were underway at state and national levels in Michigan to promote healthy aging through fall prevention, there was no partnership in Michigan to support the state wide diffusion of proven practices prior to 2005. Three cornerstones formed the foundation for such a partnership in Michigan:

1. Statewide Fall Prevention Workgroup

The appointment of a Statewide Fall Prevention Workgroup brought together experts from public health, the aging services network, health care, and academia around the issues of fall prevention and aging. These key people and systems were interested in making existing fall prevention interventions more widely known, readily available, and easily used.

2. Hospital-Based Fall Prevention Clinic Demonstration

In October 2002, the Michigan Department of Community Health (MDCH) received a three-year grant from the Centers for Disease Control and Prevention (CDC) to develop, implement, and evaluate two hospital-based fall prevention clinics. These clinics utilized several of the proven interventions for fall prevention. Results of the evaluation showed that participants in the fall-prevention clinics had 33 percent fewer falls than those in the control group. The grant also supported the development of a step-by-step manual for implementing hospital-based fall prevention clinics based on experience with the model. In addition, health care provider training courses were developed to build the knowledge and skills of providers around fall prevention, risk assessment, and evidence-based interventions.

3. National Action Plan

The availability of the National Action Plan which outlines four primary risk areas for falls among seniors: physical mobility, medications management, home safety, and environmental safety in the community helped to provide structure to the state wide effort. The plan identified a comprehensive list of strategies that states can adopt to prevent falls among older adults within each of these risk areas by bringing existing, evidence- based interventions to the forefront.

From April 2005 through June 2006, the Injury and Violence Prevention Program at the Michigan Department of Community Health (MDCH) contracted with Public Sector Consultants (PSC), a health policy research firm in Lansing, MI, to engage high level stakeholders to promote integration of comprehensive and effective fall prevention strategies in clinical and community settings throughout Michigan. PSC worked with MDCH staff and some members of the Michigan Fall Prevention Workgroup to identify key stakeholders and arrange meetings with Central Michigan University's College for Health Professions, the Michigan Pharmacists Association, and the Michigan State Medical Society. Each of these organizations agreed to become a founding member of Michigan's Fall Prevention Partnership (MFPP). It was anticipated that this new partnership would elevate the efforts of the Fall Prevention Workgroup to a new level of

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visibility and activity in the state, bringing fall prevention efforts into the mainstream of patient safety improvement endeavors and the design of communities to maximize health and independence for older adults.

Organizations that took the lead in developing the Michigan Fall Prevention

Partnership:

As noted above the Michigan Department of Community Health, Injury & Violence Prevention Program in collaboration with Public Sector Consultants (Consulting Firm) led the initial organizing effort.

Goals and objectives of the Michigan Fall Prevention Partnership:

A number of objectives were established for the statewide partnership:

- Educate health professionals about fall prevention, focusing on fall risk assessment and risk reduction through evidence-based interventions, and tailor education to specific groups, e.g., physicians, physical therapists, nurses, pharmacists, etc.
- Raise awareness and disseminate information about fall prevention to older adults and their caregivers, including home safety practices, medication review, and mobility. Develop a social marketing campaign to increase the demand for senior-friendly communities.
- Increase the availability of appropriate physical therapy and exercise programs and services for older adults.
- Maximize the opportunity to address medication review and management by nurses and pharmacists as part of the prescription benefit component of the Medicare Modernization Act, effective January 2006.
- Develop a database of best practices in fall prevention, beginning with home modifications and effective home safety measures for reducing fall risks at home.

Funding sources for the Michigan Fall Prevention Partnership:

The initial organizing funds came from a CDC fall prevention grant (for MDCH Project Coordinator and consulting firm) which was combined with a small amount of state funding for furthering the work of the consulting firm

Organizations that are playing a key role in the Michigan Fall Prevention

Partnership:

The current focus of the partnership is now primarily under health care with three organizations continuing to promote the partnership goals and objectives, including the Michigan State Medical Society; the Michigan Pharmacists Association; and the Central Michigan University's College of Health Professions

Structure and function of the steering committee:

The Steering Committee met quarterly from the fall 2005 to 2006; whereupon it was unable to procure sustainable financing. Efforts are ongoing but not in a statewide facilitated manner; the Steering Committee has not formally convened since June 2006 due to the funding and infrastructure limitations.

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2-3 challenges encountered:

When the CDC fall prevention grant ended in June 2006 the state was unable to continue its full time Coordinator position, which brought most of the state fall prevention activities to closure. That has remained the key challenge with outreach made to several foundations and organizations - partnership members just do not have resources to dedicate to fall prevention.

2-3 successes to share:

A key success was the identification of fall prevention priorities and the subsequent development of a Call to Action document. The widespread interest and promotion of fall prevention by individual Partnership members was viewed as another indication of the growing momentum; such activities included numerous presentations at organizations, conferences, attendance at trainings, professional education, grant writing, and implementation of fall prevention interventions.

Outcomes being monitored:

At the state level the Injury and Violence Prevention Section of the Michigan Department of Community Health is continuing to monitor fall injuries and deaths in Michigan.

The Partnership does not have a web site. For additional information contact:

Linda Scarpetta, MPH

Manager, Injury and Violence Prevention Section
Michigan Department of Community Health
109 Michigan Avenue
Lansing, MI 48913
Phone: (517) 335-8397
scarpettal@michigan.gov

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Minnesota Falls Prevention Initiative

History of the Minnesota Falls Prevention Initiative:

In October 2005, the Minnesota Board on Aging received a three-year planning grant from the U.S. Administration on Aging to develop and implement a statewide coordinated evidence-based falls prevention initiative. The State Partners Group includes statewide associations/networks of health care and social service organizations and professionals that have a significant role in falls prevention. Minnesota has focused its efforts on: 1) consumer awareness/education, 2) professional training, and 3) local coalition development. A key element of the effort is the fall prevention website: www.mnfallsprevention.org.

Organizations that took the lead in developing the Minnesota Falls Prevention Initiative:

Three state level organizations came together in partnership to address this issue, including the Minnesota Board on Aging, the Minnesota Department of Health, and the Minnesota Department of Human Services.

Goals and objectives of the Minnesota Falls Prevention Initiative:

The vision for Minnesota Falls Prevention Initiative is: Older Minnesotans will have fewer falls and fall- related injuries, maximizing their independence and quality of life (adapted from the Falls Free: National Action Plan). Several supporting objectives include: increase awareness of prevalence and risk factors for falls (multifactor approach); increase assessment of fall risk; increase availability of evidence-based interventions statewide; increase access to these interventions; and enhance quality assurance efforts related to falls prevention.

Funding sources for the Minnesota Falls Prevention Initiative:

A key funding source is the U.S. Administration on Aging grant with additional funds accessed through the Older Americans' Act Title IIIID health promotion funds. The Department of Human Services, Community Services Development grant funds helped to provide support for the initial fall prevention pilots, website development, local coalition development. In addition, there are many in-kind resources being dedicated to this initiative including expanding access to statewide and regional professional and consumer training venues and educational publications.

Organizations that play a key role in the Minnesota Falls Prevention Initiative:

In addition to the original three state government members other state and local organizations are actively participating in the initiative including, at the State level: Stratis Health (Medicare QIO), MN Chapter of the American Physical Therapy Association, MN Occupational Therapy Association, MN Home Care Association, MN Health and Housing Alliance, MN Council of Health Plans, University of Minnesota, and the Mayo Clinic. Regional and local level organizations include: Area Agencies on Aging, local public health offices, local members of associations listed above

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Structure and function of the steering committee:

The state partner group meets on a quarterly basis; more frequently if needed depending on the work that needs to get done.

2-3 challenges encountered:

Putting the systems change strategies into operation is key challenge. The Initiative is seeking to utilize existing training and funding venues to shift providers towards evidence-based fall prevention activities. A new challenge is connecting in a meaningful way with the health plans, which recently became the major provider of health and long-term care for Minnesota Medicaid and Medicare dual eligible populations. Obviously, they have a significant role to play in supporting prevention of falls among beneficiaries in the community.

2-3 successes to share:

- Increased awareness among older adults, family caregivers and professionals of prevalence and risk factors for falls through development and promotion of MN Falls Prevention website www.mnfallsprevention.org.
- Development and management of a growing listserv (250+ members) and creation, translation and dissemination of consumer handouts.
- Activated eight community-based organizations to address falls in their local communities of interest through coalitions.
- Activated statewide networks and organizations around the state to address falls prevention. The Initiative is now receiving regular requests for speakers and technical assistance from a variety of organizations/associations; recently expanding the audience to include the MN Home Care Association and the Primary Care Conference in Duluth.

Outcomes being monitored:

The Initiative is measuring the reach of consumer and professional outreach activities, unique visits to the website, and the development of a growing number of local coalitions as well as their operating status.

For additional information go to the exciting Minnesota web site; viewers will find a myriad of tools, resources and information posted. (www.mnfallsprevention.org.) To learn how to become involved with the Minnesota Falls Prevention Initiative contact:

Kari Benson
MN Board on Aging
P.O. Box 64976
St. Paul, MN 55164-0976
651-431-2566
651-431-7415 (fax)
kari.benson@state.mn.us

Pam Van Zyl York
Div of Health Promotion & Chronic
Disease
85 East Seventh Place, Suite 220
St. Paul, MN 55101
Phone: (651) 201-3616
Email: pam.york@health.state.mn.us

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Show Me Falls Free Missouri

History of the Show Me Falls Free Missouri:

The Missouri AARP and state Department of Health and Senior Services jointly called a broad-based group of state-level stakeholders together beginning in late 2007 to embark upon a multi-month strategic planning process designed to decrease falls, fall-related injuries and associated costs amongst community dwelling seniors in Missouri.

This collaborative work resulted in a draft state plan entitled “Show Me Falls Free Missouri” that is currently being discussed and presented in various venues around the state; inviting feedback and buy-in from stakeholders, which have an interest in reducing falls and fall related injuries and deaths among community dwelling seniors. There is a clear recognition within this effort of the need to complement and align with existing falls prevention work in Missouri based facilities such as hospitals, long-term care facilities and others. The state plan’s emphasis upon primary prevention in the community was identified as a gap within our state.

The strategic planning group made a decision to consider their group as a state coalition and to seek alignment with the National Falls Free Coalition and the State Coalitions on Fall Prevention Workgroup. As the state plan is discussed across the state, the planning group anticipates and welcomes additional individuals and organizations to join the state coalition work.

Organizations that took the lead in developing Show Me Falls Free Missouri:

The initial impetus was provided by the Missouri AARP and state Department of Health and Senior Services.

Goals and objectives of Show Me Falls Free Missouri:

Goals and objectives will evolve from the state plan, state data and the concerns of new member organizations. Funding strategies will also be considered as the state and other entities coalesce in support of Show Me Falls Free Missouri.

Organizations that played a key role in Show Me Falls Free Missouri:

Upon adoption of the state plan, implementation will be guided by six state-level entities: the Missouri Department of Health and Senior Services; Missouri AARP; Missouri Pharmacy Association; Missouri Physical Therapy Association; Missouri Association of Area Agencies on Aging; and OASIS.

2-3 challenges encountered:

Early challenges include agreeing on a vision and structure.

Show Me Falls Free Missouri does not have a stand alone web site or inclusion of coalition information on a central web site. For additional information and an opportunity to join this exciting work in Missouri contact:

Paula F. Nickelson

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Prevention Services Coordinator
Office of the Director
Missouri Department of Health and Senior Services
912 Wildwood Drive
Jefferson City, MO 65109
Phone: (573) 751-6459
Paula.Nickelson@dhss.mo.gov

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Nebraska Falls Prevention Coalition

History of the Nebraska Falls Prevention Coalition:

Nebraska is in the very early stages of developing a coalition. The Injury Prevention Program brought together a group of stakeholders to begin planning how we can deal with the issue of falls and fall prevention as a state. The initial meeting served as a springboard toward eventually developing a coalition.

Organizations that are playing a key role in the Nebraska Falls Prevention Coalition:

The early stakeholders include members of the initial planning group including: the Nebraska Health and Human Services, Injury Prevention Program; the Nebraska Health and Human Services, Unit on Aging; and the Nebraska Safety Council.

Goals and objectives will evolve from as the coalition takes shape. Funding strategies will also be considered as the state and other entities coalesce in support of the initiative.

The Nebraska Fall Prevention Coalition does not have a stand alone web site or inclusion of coalition information on a central web site. For additional information and an opportunity to join this exciting work in Nebraska contact:

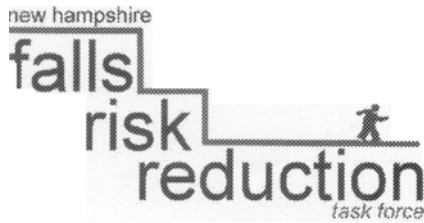
Peg Prusa-Ogea
Nebraska Department of Health
and Human Services
Injury Prevention Program
(402) 471-3490
peg.prusaogea@dhhs.ne.gov

Laurie Klosterboer
Executive Director
Nebraska Safety Council Inc.
4600 Valley Road, Suite 300
Lincoln, NE 68510
Phone: (402) 483-2581, ext. 105
kloster@nesafetycouncil.org

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New Hampshire Falls Risk Reduction Task Force (The Task Force)



History of the New Hampshire Falls Risk Reduction Task Force:

In 1999, a New Hampshire injury surveillance report was released, indicating that the rate of falls deaths, hospitalizations, and emergency department visits in the elderly (65 and older) population, unlike other injury causes, had either stayed the same over time or gone up. The New Hampshire Falls Risk Reduction Task Force (Task Force) was organized soon after that to address the report's concerns. Originally facilitated by the state's Osteoporosis Prevention Program, the leadership soon changed hands to the state's Injury Prevention Program. With an electronic membership of over 300 professionals statewide, the Task Force is made up a variety of disciplines, all working with the elderly, and all sharing a commitment to reducing the risk and numbers of falls among New Hampshire's oldest citizens. Meeting on a monthly basis (approximately 10-20 "regulars" attend), the Task Force has accomplished a lot in its nine- year history. From an early review of the literature and development of "Slips, Trips, and Falls, Prevent Them All", an educational program for seniors to its latest endeavor, advocating routine falls screening in primary care practices, the work of the Task Force has covered the gamut of falls risk reduction work. The Task Force joined the National Falls Free Coalition early in the Coalition's existence and has supported many of the recommendations in "Falls Free: Promoting a National Falls Prevention Action Plan, National Action Plan" (National Council on Aging, et al; 2005). Highlighted in the document "Making A Difference" (The Association of State and Territorial Health Officials and the State and Territorial Injury Prevention Directors' Association, 2006) and "The State of Aging and Health in America, 2007" (Centers for Disease Control and Prevention and the Merck Company, 2007), the Task Force's work has been recognized locally, statewide, nationally, and internationally. Recently the Task Force presented at the joint Centers for Disease Control and Prevention/State and Territorial Injury Prevention Directors' Association Oklahoma City conference in April of 2008.

Organizations that took the lead in developing the New Hampshire Falls Risk Reduction Task Force:

Three key organizations are key to the ongoing success of the Task Force: the Department of Health and Human Services' Injury Prevention Program (Co- Chair of the Task Force); the Injury Prevention Program at Dartmouth (Co-Chair of the Task Force); and the Department of Health and Human Services' Osteoporosis Prevention Program

Goals and objectives of New Hampshire Falls Risk Reduction Task Force:

The goals of the Task Force were established to include:

- Reduce the rate of death and disability in the elderly due to falls.

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- Reduce the risk of falling in the elderly population.
- Educate and train professionals working with the elderly.

Funding sources for the New Hampshire Falls Risk Reduction Task Force:

The Task Force has no direct funding sources. Members' sponsoring organizations donate their time and other in-kind contributions. Members seek out grants for specific activities and interventions (based on data, need, etc.). The Task Force and its member partners have received funding from the following sources including, but not limited to:

- a. Centers for Disease Control and Prevention
- c. Endowment for Health (NH based organization)
- d. New Hampshire Charitable Foundation
- e. New Hampshire Council on the Arts
- f. National Safety Council
- g. Consumer Product Safety Commission

Organizations that are playing a key role in the New Hampshire Falls Risk Reduction Task Force:

Many organizations are active in the Task Force with several playing key roles, including: the Department of Health and Human Services' Injury Prevention Program Injury Prevention Center at Dartmouth; the Department of Health and Human Services' Bureau of Elderly and Adult Services; as well as many of the state's hospitals and long term care facilities, which give their staff the time to attend Task Force meetings and to facilitate projects

Structure and function of the steering committee:

The Task Force meets on the first Tuesday morning of every month in Concord at the Department of Health and Human Services.

2-3 challenges encountered:

The Task Force is always seeking funding for its activities, which takes up quite a bit of staff time. Although the Task Force's membership has stabilized, finding new (and active) members is an ongoing activity. Active participation in the Task Force involves a commitment of time, which can be difficult for its members, many of whom are practicing clinicians.

2-3 recent successes to share:

- Integration of falls screening in thirteen community health centers, funded through the state's primary care system.
- Completion of a yearlong evaluation of coalition infrastructure and functioning; now beginning to implement some recommended changes.
- Finished draft final report of the 2005-2006: Best Practice, Falls Risk Reduction Project with 20 teams across the state. These teams were initially trained in March of 2005 and completed a yearlong project in June of 2006 -- with mentoring from the Task Force Teams -- on facilitating a falls risk reduction project in their respective settings. Teams broadly represented community based, long term care, and acute care settings.

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Outcomes being monitored:

The Task Force evaluates all of its projects, which includes process and outcome measures. Evaluation strategies can include number of falls, scores on the *Timed Up and Go*, or other measures. Some of the more global measures include, but are not limited to:

- Deaths, hospitalizations, and emergency department visits due to falls.
- 911 calls due to falls.
- EMS runs due to falls.

A web site is currently under development. For additional information on how to join the exciting work of the New Hampshire Falls Risk Reduction Task Force contact:

Rhonda Siegel

Injury Prevention Program

New Hampshire Dept of Health & Human Services

29 Hazen Drive

Concord, NH 03301

Phone: (603) 271-4700

RSiegel@dhhs.state.nh.us

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New Mexico Adult Fall Prevention Coalition

History of the New Mexico Adult Fall Prevention Coalition:

In May of 2002 the Office of Injury Prevention (OIP) convened its first meeting to bring together state agencies, nonprofit organizations and other agencies who work with the older adult population to address injuries among this population. There was a consensus among the group that in New Mexico falls was an injury area that needed to be addressed at a statewide level, that few coordinated efforts were underway, and that there would be merit in networking and linking efforts.

Partners from the Department of Health, OIP, AARP, Aging and Long Term Services Department, Indian Area Agency on Aging, Indian Health Services, and the UNM Geriatric Education Center, St. Vincent's Hospital as well as many other community partners formed the New Mexico Adult Falls Prevention Coalition. From 2002 to 2004 the Coalition was actively engaged in coalition work but due to staff changes within the Office of Injury Prevention after 2004 through 2007 very little activity was occurring through the coalition. During the fall of 2007 the Department of Health/Office of Injury Prevention, previous coalition members and the UNM Prevention Research Center actively engaged in a recruitment process to invite partners to a working meeting to address the issue of falls in the elderly. In 2007, the reinvigorated group adopted the Falls Free National Action Plan to address falls using the strategies from the five goal areas. The Coalition has identified work groups from each of the goal areas to address strategies identified in the plan.

Organizations that took the lead in developing the New Mexico Adult Fall Prevention Coalition:

Partners from the Department of Health, OIP, AARP, Aging and Long Term Services Department, Indian Area Agency on Aging, Indian Health Services, and the UNM Geriatric Education Center, St. Vincent's Hospital as well as many other community partners initially formed the New Mexico Adult Falls Prevention Coalition

Goals and objectives of New Mexico Adult Fall Prevention Coalition:

The goal of the coalition is to develop and implement evidenced-based prevention strategies based on the Falls Free National Action Plan. The Coalition is now looking to enfold the following opportunities being provided through member organizations:

The NMDOH/Epidemiology and Response Division has identified Senior Falls Prevention as a priority injury outcome over the next 5 years.

The Department of Health in partnership with the Aging and Long Term Services Department has supported the development of statewide Healthy Aging Collaborative to lay the foundation for collaborative capacity and structure, maximize statewide resources, and establish statewide, needs-based strategic priorities and direction.

Funding sources for the New Mexico Adult Fall Prevention Coalition:

At this time support is provided by the member organizations through select resources and in-kind donations.

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Organizations that are playing a key role in the New Mexico Adult Fall Prevention Coalition:

In addition to the early organizing members: New Mexico Department of Health; Aging and Long Term Services Department; the Governor's Commission on Disability; and the UNM Prevention Research Center, many new organizations are taking an active role in the coalitions. The expanded members include: Webster University; Central Northern New Mexico University; Indian Health Services; Santa Fe Pueblo; Jemez Pueblo; Isleta Pueblo; City of Santa Fe; City of Albuquerque; New Mexico Senior Olympics; Red Cross; AARP; Gentiva; Presbyterian Hospital; St. Joseph's Hospital; the Betty Earhart Senior Center; ARCA; Jewish Family Services; and the state Occupational Therapy Association

Structure and function of the steering committee:

The Coalition does not operate a steering committee but holds quarterly meetings of the full Coalition.

2-3 challenges encountered:

A key challenge is procuring dedicated funding to support the coalition and its state wide efforts. In the absence of funding another challenge is relying on donated member time to coordinate coalition activities while trying to increase the membership/representation to address each of the goal areas. Another related challenge is keeping up the momentum within the coalition

2-3 successes of your coalition:

- Achieving member consensus to adopt the framework of the National Action Plan
- Ongoing development within workgroups for each of the goal areas.
- The NM DOH/OIP recently engaged in a group study of falls in the elderly and evidence –based prevention strategies.
- The Office of Injury Prevention provided funding for training in the Fear of Falling: A Matter of Balance curriculum, providing infrastructure building through community training activities in 6 communities throughout the state reaching approximately 90 persons

Outcomes monitored:

At this stage of development outcomes are being discussed to measure progress across the elements of the National Action Plan.

The New Mexico Adult Fall Prevention Coalition does not have a stand alone web site or inclusion of coalition information on a central web site. For additional information and an opportunity to join this exciting work in New Mexico, contact:

Frieda Gonzales, Health Educator
Adult Injury Prevention, Office of Injury Prevention
1190 St. Francis Dr., PO Box 26110
Santa Fe, NM 87502
Bernfrieda.Brady@state.nm.us

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Fall Prevention for Older Adults Workgroup: New York

History of the Fall Prevention for Older Adults Workgroup:

Staff from the New York State Department of Health (NYSDOH) and the University at Albany, State University of New York, School of Public Health (SUNYA SPH) met several times in the spring of 2007 to discuss injury prevention in New York. These meetings led to the first fall prevention workgroup meeting in May, 2007; follow-up meetings were delayed for a year due to funding issues. Since May 2008 two planning meetings have been held with the next one is planned for November 2008. The statewide workgroup has been growing with each meeting; there are now 50 partners from across the state representing both governmental and private organizations. In July four subcommittees were developed and began their work. These subcommittees are public awareness and education, data and research, community-based programs, and programs in healthcare settings. Evidence-based strategies and promising prevention strategies are guiding the efforts of these subcommittees.

Organizations that took the lead in developing the Fall Prevention for Older Adults Workgroup:

The initial organizing partners included the New York State Department of Health (NYSDOH) and the University at Albany, State University of New York, School of Public Health (SUNYA SPH)

Goals and objectives of the Fall Prevention for Older Adults Workgroup:

Three objectives have been agreed upon by the growing membership, including:

- Keep New York State older adults free from falls and fall injuries.
- Create an integrated infrastructure in New York State around the issue of fall prevention in older adults.
- Promote independent and collaborative work across the four subcommittees to develop a report that will be used to educate policy makers and the public about the issues surrounding falls in older adults.

Funding sources for the Fall Prevention for Older Adults Workgroup:

Primary funding is provided by the CDC's Integrated CORE Injury Prevention and Control Program with staffing support and in-kind resources provided by New York State Department of Health (NYSDOH) and the University at Albany, State University of New York, School of Public Health (SUNYA SPH)

Organizations that are playing a key role in the Fall Prevention for Older Adults Workgroup:

Although the workgroup is growing the lead organizations include New York State Department of Health, Bureau of Injury Prevention & Office of Long Term Care; the UAlbany, School of Public Health; and the New York City Department of Health and Mental Hygiene

Structure and function of the steering committee:

The lead organizations meet on a monthly basis.

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2-3 challenges encountered:

Challenges in this early stage of development include broadening the representation to across the state; facilitating consensus and collaboration among a diverse group of members to appreciate all the problems surrounding this multi-faceted issue. Of course the lack of dedicated funding remains a central challenge.

2-3 successes to share:

- Creating a diverse and passionate workgroup around the issue of fall prevention for older adults.
- The development of the four subcommittees including public awareness and education, data and research, community-based programs, and programs in healthcare settings.
- The creation of two radio Public Service Announcements that will air in the coming months.

Outcomes being monitored:

- Ongoing data surveillance including deaths, hospitalizations, and emergency department visits.
- Formative – ongoing assessment of needs.
- Process – workgroup functioning; committee goals, objectives, and activities.
- Impact – to be determined.

At this time, the Fall Prevention for Older Adults Workgroup does not have a stand alone web site or inclusion of coalition information on a central web site. For additional information and an opportunity to join this exciting work in New York, contact:

Michael J. Bauer

Research Scientist, Bureau of
Injury Prev
NYS DOH, Riverview Center
150 Broadway, 3rd Floor
West Albany, NY 12204-0677
Phone: (518) 473-1143
mjb13@health.state.ny.us

Susan Hardman

Director, Bureau of Injury Prevention
NYS DOH, Riverview Center
150 Broadway, 3rd Floor
West Albany, NY 12204-0677
Phone: (518) 473-1143
sbh01@health.state.ny.us

Mary P. Gallant, PhD, MPH

Assoc Prof and Chair, Social Behavior
& Community Health, Dept. of Health Policy, Management & Behavior
School of Public Health, Univ at Albany
One University Place
Rensselaer, NY 12144-3455
Phone: (518) 402-0333
mgallant@albany.edu

North Carolina Falls Prevention Coalition

History of the North Carolina Falls Prevention Coalition:

In February 2007, in conjunction with a number of aging and chronic disease related grants that the NC Division of Aging and Adult Services and the NC Division of Public Health were partnering on, the two Divisions entered into a written memorandum of agreement, formalizing their respective commitments to each other and the intent to partner on future projects. Both Divisions were also working on a grant with the Institute on Aging at UNC-Chapel Hill. As a result of ensuing dialogue between all three agencies, they quickly recognized shared concerns over the high morbidity and mortality associated with falls in the older adult population that would, without significant intervention, increase substantially as baby boomers aged. All three agencies were also aware of interest being generated on the national level around falls prevention.

While establishing a Falls Prevention Coalition by any one of these organizations might have proven a daunting task, this group, enhanced by the addition of the Carolina Geriatric Education Center, provided a strong core of agencies with diverse strengths that combined into a successful partnership.

The first NC Falls Prevention Coalition meeting was held in April 2008. Interest was very high, with numerous key leaders and stakeholders present from a multitude of organizations. The need was agreed upon and coalition objectives were identified. At the second coalition meeting in July, Coalition members began to address strategies to meet the goals and objectives. The core group will continue in its facilitative role while also seeking funding.

Organizations that took the lead in developing the North Carolina Falls Prevention Coalition:

The initial organizing partners included: the NC Division of Public Health; the NC Division of Aging and Adult Services; The Institute on Aging, UNC-Chapel Hill; and the Carolina Geriatric Education Center.

Goals and objectives of the North Carolina Falls Prevention Coalition:

- Establish and maintain a statewide Falls Prevention Coalition of key state, regional, and community stakeholders to systematically identify needs, resources and successes and to build capacity for falls prevention throughout the state.
- Develop and apply effective social marketing materials and practices to engage and better inform the public and constituencies about falls risks and proven strategies to reduce falls.
- Identify, develop and implement training programs at state, regional, and community levels for both clinical and community providers to raise falls prevention awareness and enable them to plan, deliver and evaluate effective evidence-based falls prevention programs and practices/interventions.
- Create and implement plans to identify and establish necessary complements of risk assessment and intervention strategies at the state, regional and community levels to address the varying and diverse needs of those at risk for falls.

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- Monitor the growth and outcomes of falls prevention initiatives. Evaluate and disseminate findings and lessons learned from the process and outcomes of the initiative on at least an annual basis. Use information and conclusions to set new goals and strategies for upcoming year and seek resources to continue falls prevention activities.
- Assess, advocate, and facilitate the development of policies, environments, and resources that advance falls prevention.

Funding sources for the North Carolina Falls Prevention Coalition:

No dedicated funding has been acquired to date. Support for meetings has come from lead organizations and other partners.

Organizations that are playing a key role in the North Carolina Falls Prevention Coalition:

Ongoing leads in the coalition include the NC Division of Public Health; the NC Division of Aging and Adult Services; The Institute on Aging, UNC-Chapel Hill; and the Carolina Geriatric Education Center.

Structure and function of the steering committee:

The organizational leads serve as the steering committee role, meeting monthly.

2-3 challenges encountered:

The key challenge remains the identification of a dedicated funding source. The Steering Committee is now discussing the appropriate amount of “ask” from state budget and how to prioritize specific aspects of Falls Prevention Coalition work that should be funded. Other challenges include identifying where to best focus initial efforts for significant impact; how to measure outcomes.

2-3 recent successes to share:

The North Carolina Falls Prevention Coalition is formed and operational; has identified and achieved consensus on its goals/objectives; and has been successful in generating momentum around the falls issue and the need for a coalition, which has allowed the Coalition to attract key leaders to the coalition’s membership.

At this time, the North Carolina Falls Prevention Coalition does not have a stand alone web site or inclusion of coalition information on a central web site, but is planning to develop a web site. For additional information and an opportunity to join this exciting work in North Carolina, contact:

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Sharon Rhyne, MHA, MBA

Health Promotion Manager
Chronic Disease and Injury Section
NC Dept of Health and Human
Services
Division of Public Health
5505 Six Forks Road
1915 Mail Service Center
Raleigh, NC 27699-1915
Phone: (919) 707-
5205 Sharon.Rhyne@ncmail.net

Ellen Schneider

Assistant Director for Communications
and Program Relations
UNC, Institute on Aging
720 Martin Luther King Jr. Blvd. CB
#1030, UNC-CH
Chapel Hill, NC 27599-1030
Phone: (919) 843-8528
eschneider@schsr.unc.edu

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Hamilton County Fall Prevention Task (Ohio)

History of the Hamilton County Fall Prevention Task Force:

The Hamilton County Fall Prevention Task Force (FPTF) is the first countywide collaborative to address fall injuries in older adults. The FPTF was created by the Hamilton County Public Health in 2000 in response to data from the Hamilton County Injury Surveillance System which illustrated that falls were the leading cause of injury-related deaths, hospitalizations, and emergency room visits in Hamilton County. The mission of the FPTF is to reduce falls and related injuries in older adults through community collaboration. Members of the Fall Prevention Task Force are dedicated to providing the nation with a model of excellence in fall reduction strategies.

The FTF is composed of 25 individuals representing government agencies, not-for-profit organizations, businesses and academic institutions in Hamilton County. The task force utilizes workgroups to work toward the group's mission. Current focus includes the implementation of a fall prevention awareness and campaign. The collection and sharing of local and national fall data with health care professionals, residents of Hamilton County and the nation and encourages research and effective fall prevention interventions.

The FPTF has implemented a successful Speaker's Bureau to educate senior adults and health care providers about fall prevention since 2001. To date, FPTF speakers have given over 150 presentations at senior centers, churches, nursing homes and other sites throughout Hamilton County, as well as to healthcare professionals.

The FPTF has two workgroups, Public Relations and Research and Evaluation. Each workgroup is lead by a member who serves as chairman and ensures that the goals and objectives of the group are met. Past work groups have developed strength-training programs specifically designed for older adults to help older adults increase their strength, balance and agility. The FPTF has also created a brochure that outlines common medications and their side effects that may increase the risk of falling; it also provides tips for managing medications to prevent future falls. Additionally the FPTF developed a wallet size medication log to help senior adults keep track of which medications they are taking and share with their healthcare providers. The group also developed educational materials used to reach healthcare providers and facilitated these programs throughout the county. The FPTF partners with the Council on Aging of Southwestern Ohio to offer this service in Hamilton County. The FPTF has reached thousands of individuals with the literature it has produced over the years. The FPTF is currently working on training A Mater of Balance (MOB) coaches training and on implementing the MOB classes through out the county. A program designed to reduce the fear of falling and increase activity levels among older adults using a Lay Leader Model.

The FPTF encourages the use of validated assessment tools that senior adults, their families and healthcare providers can use to learn which risk factors for falls are present in the home (indoors and outdoors) and what they can do to mitigate the risk of falling.

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The Fall Prevention Task Force is a group of highly devoted individuals that continue to promote public awareness and provide effective interventions to help reduce the incidence of falls in Hamilton County. In 2002 the FTF was recognized for its efforts with an award for Outstanding Project Achievement in the Field of Aging from the Association for Professionals in the Field of Aging.

Organizations that took the lead in developing the Hamilton County Fall Prevention Task Force:

Hamilton County Public Health took the lead with help from the Hamilton County Commissioners and the Council on Aging.

Goals and objectives of the Hamilton County Fall Prevention Task Force:

The goal of the Task Force is to reduce falls and fall-related injuries in older adults through community collaboration, awareness, education and effective interventions. Objectives established to support the goal include:

- Reduce the number of fall related injuries resulting in an emergency department visit or hospitalization by 5% as indicated by the Hamilton County Injury Surveillance Report among residents of Hamilton County age 65 and older.
- Increase the awareness of the residents of Hamilton County about the risk factors and prevention strategies associated with falling measured by identification of the top three fall related causes and the top three prevention strategies as reported by responses given in the Greater Cincinnati Survey.
- Increase by 10% the number of physicians providing fall prevention counseling to adults age 65 and older as indicated by a follow up physician needs assessment survey.

Funding sources for the Hamilton County Fall Prevention Task Force:

The Ohio Department of Health's Injury Prevention Grant serves as the primary funding source for the work of the Hamilton County Fall Prevention Task Force

Organizations that are playing a key role in the Hamilton County Fall Prevention Task Force:

Many county and community organizations have actively joined the Task Force including the Brookwood Retirement Community; the Cincinnati Health Department; the City of Sharonville Health Department; the City of Springdale Health Department; the Council on Aging of Southwestern Ohio; and the Destination Home Inc.

Structure and function of the steering committee:

The Task Force and the workgroups meet quarterly and so does the board. Workgroups also meet as needed.

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2-3 challenges encountered:

A key challenge is broadening participation from the majority of the membership, not just the same core group. Although grant funding is available programmatic efforts are limited by the funding levels. An ongoing challenge continues to be effective outreach to the medical community

2-3 successes of your coalition:

- Implementation of a successful media campaign
- The development of the Hamilton County Fall Prevention Website <http://www.fallpreventiontaskforce.org>
- Eight successful years of operation

Outcomes being monitored:

- The increase or decrease of injury related deaths, hospitalizations, emergency room visits and injuries. Monitored through the Hamilton County Injury Surveillance System at both the county level and within each specific community.
- Increase in intention to implement newly acquired knowledge & skills from training provided. Monitored through training evaluations.
- Increase rate of recognition of the top risk factors for falls

Outcomes of note:

A reduction of falls among 65+ Hamilton County Residents since 1999; a self reported increase use of newly acquired knowledge & skills from training by participants; and outcome for recognition of the top risk factors for falls will be reported after the completion of the Greater Cincinnati Survey.

The Hamilton County Fall Prevention Task Force has a dedicated web site where the viewer will find tools, resources and additional information on the activities of the Task Force: www.fallpreventiontaskforce.org or www.fallpreventiontaskforce.com. For additional information on how to join this exciting effort in Ohio contact:

Ana C. Rojas, CHES
Health Educator
Hamilton County Public Health
250 William Howard Taft Road, 2nd FL
Cincinnati, Ohio 45219
ph. 513.946.7807
ana.rojas@hamilton-co.org

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Pennsylvania State Fall Prevention Coalition

History of the Pennsylvania State Fall Prevention Effort:

The Pennsylvania Violence and Injury Prevention Program (VIPP) held a Fall Prevention Summit in April 2008. The goals established for the Summit included:

1. Provide in-depth state-specific data with regards to the burden of falls.
2. Provide programmatic information on current fall prevention strategies.
3. Build consensus on the development and evaluation of interventions to reduce fall-related injuries across the lifespan.
4. Formulate a plan to update the 2006-2010 *Pennsylvania Injury Prevention and Control Plan*.

The 2008 Falls Prevention Summit drew 73 attendees from 49 different public health, state, community, health care, private, and civic organizations. The VIPP has just finalized the summit report and is in the process of forming a falls prevention coalition as a sub-group of the Injury Community Planning Group (ICPG). Coalition membership is open to current ICPG members as well as ad hoc members.

Organizations that took the lead in developing the Pennsylvania State Fall Prevention Coalition:

The Pennsylvania Department of Health in partnership with the Pennsylvania Injury Community Planning Group took the lead in bringing attention to the issue and formulation summit as a prelude to coalition building.

Goals and objectives of the Pennsylvania State Fall Prevention Coalition:

Goals and objectives are being finalized to support the Coalition and currently include:

- Identify advocates who will champion falls prevention education and interventions across the lifespan.
- Develop targeted messages that are positive, simple, doable, repeatable, culturally appropriate and sustainable.
- Identify community resources to participate in planning, education, and intervention.

Funding sources for the Pennsylvania State Fall Prevention Coalition:

Initial funding is being provided through a Preventive Health and Health Services Block Grant and the CDC Public Health Injury Surveillance and Prevention Program.

Organizations that are playing a key role in the Pennsylvania State Fall Prevention Coalition:

Lead organizations in the development of the coalition include the Pennsylvania Department of Aging, the Pennsylvania Academy of Family Physicians and the state Trauma Centers' Injury Prevention Coordinators

Structure and function of the steering committee:

The structure and function of the Steering Committee is still under discussion.

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2-3 challenges encountered:

The major challenge is a lack of a major funding source for interventions that may be considered. Another challenge is that stakeholders are spread thin due to competing priorities and there is a lack of recognition by leadership that falls are the leading cause of injury hospitalizations.

2-3 successes to share:

- Momentum is increasing in collaborating to address fall-related injuries
- Have increased recognition of VIPP as a leader in falls prevention among stakeholders.

Outcomes will be considered by the Steering Committee:

Pennsylvania does not have a dedicated web site but does include information on the coalition building efforts on the central state health department web site where the viewer can learn

more: <http://www.dsf.health.state.pa.us/health/cwp/browse.asp?a=174&bc=0&c=35475>.

For additional information on how to join this exciting effort in Pennsylvania contact:

Carol E. Thornton, MPA |
Section Chief
Violence and Injury Prevention Program
PA Department of Health
7th & Forster Streets
Harrisburg, PA 17120
Phone: (717) 787-5900
cathornton@state.pa.us

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Texas Falls Prevention Coalition (TFPC)

History of the Texas Falls Prevention Coalition (TFPC):

The Texas Falls Prevention Coalition was started with a grant to the Texas Association of Area Agencies on Aging (T4A) in the fall of 2007. With a \$200,000 grant from the Texas Department of Aging and Disabilities Services, 17 of the state's 28 AAAs formed the new coalition, offering the A Matter of Balance/Volunteer Lay Leader Model. Since October 2007, TFPC has certified 77 master trainers, more than any state. These master trainers have trained more than 55 coaches. Collectively, these trainers and coaches have conducted 96 courses, reaching more than 1,100 older participants across Texas in the first year.

The TFPC contract with the Texas Department of Aging and Disability Services was extended in September 2008 with an additional \$200,000, and the coalition grew to 25 of 28 Texas AAAs, or 220 of 254 counties in Texas. In the second year, the TFPC will train an additional 1000 seniors through August 2009. The grant also includes a TFPC half-time Falls Coalition Coordinator to bring other stakeholders into the falls coalition. In September 2008, Humana, a Medicare insurance plan, became the statewide sponsor the Texas Falls Prevention Coalition, providing for an additional \$100,000. Humana is going to partner with the TFPC to recruit coaches and participants through their programs, to publicize classes, and to assist in providing health care professionals required for the MOB/VLL program.

Organizations that took the lead in developing the Texas Falls Prevention Coalition:

The Texas Association of Area Agencies on Aging in partnership with the Texas Department of Aging and Disability Services created the vision for the Coalition development.

Goals and objectives of the Texas Falls Prevention Coalition:

Organizing goals and objectives have been identified to support the Coalition and currently include:

- Implementing a statewide Matter of Balance/Volunteer Led Leader Program
- Building coalition infrastructure and establish TFPC mission, goals and activities
- Supporting policy development and changes that promote evidence-based falls prevention.

Funding sources for the Texas Falls Prevention Coalition:

Initial funding came from a State grant (state general revenue) with additional funding sources to include private funding from Medicare HMO and the use of Older Americans Act Title IIID Health Promotion Funds to support programmatic efforts.

Organizations that are playing a key role in the Texas Falls Prevention Coalition:

In addition to the Texas Association of Area Agencies on Aging and Texas Department of Aging and Disability Services, Humana is now a key sponsor and partner in this effort.

Structure and function of the steering committee:

The three lead agencies meet several times per month via conference call

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2-3 challenges encountered:

- Loss of master trainers in some regions
- Lack of dedicated coalition staff person
- Sheer size of the state that includes many rural areas which creates difficulty in taking program to many areas, to identify enough seniors to be coaches and participants living in an accessible region.

2-3 successes to share:

Obtaining private sponsorship in collaboration with Humana is a key success to moving forward as is receiving the second year of state funding. The second year grant includes funding for a part-time coalition coordinator, which will address one key challenge.

Outcomes being monitored:

The Texas A&M Health Science Center School of Rural Public Health tracks many outcomes for the grant with the Texas Department of Aging and Disability Services. Here is a sample of those measures being tracked:

- Number of participants completing program
- Health status before, after, and 6 months after class
- Participation in physical activity
- Confidence in protecting themselves against falls

Outcomes to report:

- The proportion of participants reporting they engage in regular physical activity increased.
- The average number of days in the previous month that participants' reported poor physical health was decreased.
- The proportion of participants reporting that their ability to participate in their normal social activities was not affected by their health significantly increased.
- The proportion of participants reporting that their ability to accomplish routine errands and shopping was not impacted by their health significantly increased.
- Participants showed significant increases in their confidence that they could successfully find a way to reduce their risk of falling, can protect themselves if they were to fall, can increase their physical strength, and can become more steady on their feet.

The Texas Falls Prevention Coalition in collaboration with the Texas A&M Health Science Center School of Rural Public Health has a standalone web site for grant tracking, training and evaluation activities <http://srph.tamhsc.edu/research/texashealthylifestyles/texas-falls-prevention-coalition.html>. For additional information on how to join this exciting effort in Washington contact:

Carol Zernial

Director, Bexar Area Agency on Aging
8700 Tesoro Drive, Suite 700
San Antonio, TX 78217-6228
Phone: (210) 362-5268
czernial@aacog.com

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Washington State Senior Fall Prevention Coalition

History of the Washington State Senior Fall Prevention Coalition:

Awareness of the magnitude of the senior falls issue resulted from presentations and contacts made during the 4-year CDC grant to pilot and evaluate a community-based senior fall prevention program (2002-2006).

The first state coalition meeting was held in November 2007, the second meeting in May 2008. The first meeting focused on senior falls data, the development of the state program, best practices, local projects underway, with breakout sessions where special topic areas had focused discussions addressed from the perspective of 'What are you doing? What's working for you? What are your challenges? What are potential activities for new programs and networking?' There was also a visioning exercise for the state coalition, with discussion of purpose and features of the coalition, challenges we face, potential activities the coalition would provide and support and recommended membership.

The second meeting (May 2008) included an update on activities related to state legislation and a presentation to the Governor on senior fall prevention; interactive feedback and brainstorming on potential approaches for statewide uptake; coalition structure, including identifying subcommittees; member interest forms for participating on specific committees, and special topic presentations that responded to the interests expressed at the first meeting. At this meeting, coalition members agreed that 2-4 meetings per year were about right for them.

In the interim, the coalition members have been provided via emails, updates regarding legislation, fall prevention awareness day activities, and resources, such as the falls prevention video developed in WA. Members were instrumental as a means of disseminating the request for proposals for the community projects funded under the state legislation.

Organizations that took the lead in developing the Washington State Senior Fall Prevention Coalition:

The Washington State Department of Health, the NorthWest Orthopaedic Institute, and the Washington State Department of Social & Health Services took the lead in developing the State Coalition.

Goals and objectives of the Washington State Senior Fall Prevention Coalition:

The purpose of the *Washington State Senior Falls Prevention Coalition* is to reduce falls among seniors in Washington State through:

- Professional Development
- Public Education
- Advocacy
- Networking
- Resource Development

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- Referral

Funding sources for the Washington State Senior Fall Prevention Coalition:

Organizing funds are provided by the Washington State Department of Social & Health Services in collaboration with the Washington State Department of Health

Organizations that are playing a key role in the Washington State Senior Fall Prevention Coalition:

Lead organizations in the development of the coalition include the Retired & Senior Volunteer Program Directors Association, the NorthWest Orthopaedic Institute, and the Department of Social & Health Services

Structure and function of the steering committee:

The Steering Committee is just getting organized

2-3 challenges encountered:

A key challenge is the lack of dedicated staff time to devote to coalition development and infrastructure. An emerging challenge is related to the state deficits and funding restrictions that may limit options for facilitation and external support contracts

2-3 successes to share:

- Widespread participation by members in fall prevention awareness day activities
- Widespread dissemination of tools, programs, information, resources
- New county coalitions formed by state coalition members

Outcomes being monitored:

- Fall prevention awareness day activities
- New coalition start-ups
- Dissemination and uptake of the tools and programs disseminated by the Washington Department of Health and NorthWest Orthopaedic Institute

Outcomes of note:

There has been an increased statewide uptake of fall prevention activities and building of local coalitions

Washington does not have a dedicated web site but does include information on the coalition building efforts on two websites: www.fallsfreewashington.org and www.adsdshs.wa.gov/pubinfo/falls/ where the viewer can learn more. For additional information on how to join this exciting effort in Washington contact:

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Ilene F. Silver, MPH

Program Development Specialist
Injury & Violence Prevention Program
Washington State Department of
Health, PO Box 47832
Olympia, WA 98504-7832
Phone: (360) 236-2836
ilene.silver@doh.wa.gov

Sally York MN, RNC

Trauma Program Manager, Trauma
Services
MultiCare Health System
315 Martin Luther King Jr. Way
PO Box 5299 MS 315-J1-TRM
Tacoma, WA 98415-0299
Phone: (253) 403-7758
Sally.York@multicare.org

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Wisconsin Falls Prevention Initiative

History of the Wisconsin Falls Prevention Initiative:

In 1999 Age Advantage (an agency who worked with county aging units in Southern WI) contacted WI DHFS' Injury Prevention Section Chief to talk about the magnitude of elderly falls in Wisconsin. After this meeting, additional stakeholders were identified and invited to meet to talk about this problem, to identify activities and resources already in place and to share any other pertinent information. Data was reviewed showing Wisconsin having the second highest rate of deaths from falls in the country at that time. It was at this time that in an effort to reverse the trend as reported in CDC data, the Wisconsin Falls Prevention Initiative began. A large interdisciplinary statewide coalition has evolved to address falls, fall prevention and fear of falling in a more systematic manner.

Organizations that took the lead in developing the Wisconsin Falls Prevention Initiative:

Wisconsin's Injury Prevention Section located within Division of Public Health in the Dept. of Health and Family Services (DHFS), the State's Division of Disability and Elder Services also located within DHFS, and Age Advantage (comprised of County Aging Units in southern and western Wisconsin).

Initially other key stakeholders were identified and invited to the table to discuss the problem of falls in Wisconsin's aging population:

- University of Wisconsin School of Medicine (MDs)
- UW Hospital and Clinics (PT staff)
- Local Aging and Disability Resource Centers
- Local Health Departments
- Dane County Safe Community Coalition

The Wisconsin Falls Prevention Initiative has continued to grow and includes academia and researchers, health care providers, Physical Therapists, Occupational Therapists, and other allied health care providers, community organizations, acute care providers, assisted living, long term care.

Goals and objectives Wisconsin Falls Prevention Initiative:

- Promote healthy lifestyles among older adults as a way of reducing falls and limiting their negative consequences
- Develop relationships with public service agencies to foster the prevention of injurious falls in local communities
- Develop community based programs that complement medical approaches, i.e., exercise programs to develop strength and balance, volunteer handyman projects to make homes safer, distribution of self-assessment tools to adults at risk, in-home assessments and interventions
- Encourage medical and social service providers to assess older adults annually for risk factors that contribute to falls, i.e., environmental factors, lifestyle factors, physical factors, etc.
- Assist local communities in establishing local coalitions to address this initiative

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- Promote research on preventing falls and the benefits of treatment and prevention
- prepare for future grant writing and other funding opportunities
- develop and pilot an In-Home Fall Assessment and Intervention Tool
- develop and pilot a screening tool to identify persons at risk of falling
- provide technical assistance and disseminate best practice models to stakeholders

Funding sources for the Wisconsin Falls Prevention Initiative:

Fall prevention has been integrated into the State's Injury Prevention programming. Quarterly conference calls with Initiative members are covered by injury prevention federal grant dollars. Multiple grants have been applied for and received such as a CDC Multifactorial Falls Intervention for Community Dwelling Older - Adults Research and Cooperative Agreement; Prevention grants thru DHFS; Blue Cross/Blue Shield conversion funding; the US Administration on Aging evidence-based program dissemination grant; and community foundation grants.

Nonetheless, much of the support and facilitation for the Initiative has been done through in-kind dollars and integrated into related activities. Partners are engaged and resources (both manpower and monies) are leveraged from multiple sources that tie in or meet the need of the activities attempting to be accomplished, i.e. conferences, summits, meetings, quarterly conference calls, grant writing.

Organizations that are playing a key role in the Wisconsin Falls Prevention Initiative:

Many organizations across the state are playing active roles including the County Aging Units, Aging and Disability Resource Centers; professional organizations, such as the Physical Therapists, Occupational Therapists; academia; aging and public health at the State Level; hospital collaboratives; the assisted living association; long term care facilities; community organizations; nutrition centers/sites; elderly community living centers; and faith-based organizations including the parish nurses.

Structure and function of the steering committee:

The initiative does not have a "steering committee" per se. The initiative has quarterly conference calls that are facilitated by representatives from both the State's Injury Prevention Program and the Aging Program within the DHFS.

2-3 challenges encountered:

The lack of dedicated resources limits the work of the initiative. Funding issues remain as well as the need for dedicated staff support to manage this growing and active initiative.

2-3 successes to share:

- Heightened awareness regarding the magnitude of the problem across the state as well as within a broad set of organizational entities—from community based organizations to acute care, assisted living, and long term care;

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- The building and promotion of the integrated community/medical model and the importance of the collaboration in the success of falls prevention within a community.

Outcomes being monitored:

- Partnerships and collaborations
- Counties engaged in falls related evidence-based activities
- Numbers of fall deaths, hospitalizations, emergency dept. visits

Wisconsin does not have a dedicated web site, for additional information about the exciting Wisconsin Falls Prevention Initiative contact:

Linda Hale, RN, BSN, EMT
Chief, Family Health Section
Bureau of Community Health
Promotion
Division of Public Health
WI Department of Health &
Family Services
1 W. Wilson St., Rm. 351
Madison, WI 53701-2659
Phone: 608-267-
7174 halelj@dhfs.state.wi.us

Jill Ballard, MPH, CHES
Statewide Coordinator
Evidence-Based Prevention Programs
AgeAdvantAge
2850 Dairy Drive, Suite 200
Madison, WI 53718
Phone: (608) 224-6307
Fax: (608) 224-6306
ballardj@mailbag.com

CENTER FOR HEALTHY AGING

www.healthyagingprograms.org

ACKNOWLEDGMENTS

The State Coalitions on Fall Prevention Workgroup is a dynamic, peer-learning network that shares ideas and resources to address the growing public health issue of falls and fall-related injuries among older adults. These coalitions, led by energetic and devoted leaders in public health, aging, and health care are making a real difference in the lives of older adults. We salute them for their foresight and dedication.

NATIONAL COUNCIL ON AGING

1901 L Street, NW, 4th Floor
Washington, DC 20036
(202) 479-1200
www.ncoa.org