

Ohio Injury Prevention Partnership

OHIO OLDER ADULT FALLS PREVENTION COALITION

2017 TO 2021 STATE PLAN



*Reducing falls through
collaboration & partnership*



OHIO INJURY PREVENTION
PARTNERSHIP

Older Adult Falls Prevention Coalition

Ohio Department of Health (ODH) Violence and Injury Prevention Program (VIPP)

The VIPP at ODH has developed a comprehensive injury prevention program for the state of Ohio. The VIPP strives:

- To coordinate surveillance systems that collect injury data.
- To assess the burden of injuries and violence, and communicate information for the purpose of action.
- To promote evidence-based injury prevention interventions for at-risk populations.
- To coordinate and collaborate with partners in building program infrastructure.
- To encourage the adoption of policies and programs that lead to the prevention of injuries.
- To provide technical support and training as needed.



Ultimately, to make Ohio a safer place to live, work, and play by reducing death and disability associated with intentional and unintentional injury.

VIPP Initiatives

For more details on these activities, please visit our website at: <http://www.healthy.ohio.gov/vipp/injury.aspx>

- Ohio Injury Prevention Partnership and associated action groups including those focused on child injury, falls among older adults, and prescription drug abuse.
- Local Injury Prevention Grant Program
- Child Passenger Safety (CPS) Program
- Injury Prevention Policy and Systems Change
- Injury Surveillance Activities
 - General Injury Surveillance
 - Census of Fatal Occupational Injuries (CFOI)
 - Ohio Violent Death Reporting System (OH-VDRS)

CDC Core Violence and Injury Prevention Grant

ODH presently receives funding from the CDC for the Core Violence and Injury Prevention Grant. The goal of the program is to establish and sustain a solid infrastructure for injury prevention that includes statewide injury surveillance to inform and evaluate public policy, as well as comprehensive injury prevention and control programs. ODH has received funding from the CDC for core injury surveillance and prevention activities since 2000.

This funding is used to:

- Strengthen the infrastructure for injury prevention in Ohio.
- Improve injury surveillance.
- Influence and evaluate policy relative to the prevention of injuries.
- Increase collaboration in the field of injury prevention.

Ohio Department of Aging, STEADY U Campaign

STEADY U Ohio is a comprehensive falls prevention initiative led by Governor John Kasich and the Ohio Department of Aging and supported by Ohio government and state business partners. The goals of this statewide initiative are to strengthen existing falls prevention activities, identify opportunities for new initiatives and coordinate a statewide educational campaign to bring falls prevention to the forefront of planning so that every county, every community, and every individual knows what we can do to prevent falls. For more information about the STEADY U Ohio initiative, go to www.steady.ohio.gov



Key components of STEADY U Ohio include:

- Maintenance of a website for one-stop resource for falls prevention.
- Expansion of a “A Matter of Balance” and other falls prevention programs to all 88 Ohio counties.
- Support ODH and the Ohio Older Adult Falls Coalition in promoting the CDC’s STEADI Tool Kit in order that healthcare providers may have access to a tool kit to conduct falls risk assessments for older adult patients.
- Help stores, restaurants, and other businesses become “falls-free zones”.
- Assist nursing homes across the state with the evaluations of environmental hazards that could increase the risk of falls while also identifying funding opportunities to make modifications.
- Collaborate with organizations that work with at-risk populations, such as individuals with Alzheimer’s disease, developmental disabilities, and Parkinson’s disease.

Ohio Injury Prevention Partnership (OIPP)

The OIPP is a group of professionals representing a broad range of agencies and organizations concerned with building Ohio’s capacity to address the prevention of injury. Led by ODH’s Violence and Injury Prevention Program (VIIPP) with funds from the CDC, the OIPP improves statewide collaboration related to injury prevention, and assists ODH with establishing priorities and future directions for injury and violence prevention in Ohio. Current priority areas include child/youth injury, drug poisoning, and falls among older adults.



Mission: To prevent injuries in Ohio using data and collaborative partnerships.

Vision: Working together to create a safe and injury free Ohio.

Ohio Older Adult Falls Prevention Coalition

With support from the CDC's Preventive Health and Health Services Block Grant and the Core Injury Grant, and in close collaboration with ODH and the OIPP, the Ohio Older Adult Falls Prevention Coalition was formed in November 2009. The coalition is comprised of professionals from a wide range of multi-disciplinary agencies and organizations throughout Ohio. The function of the coalition is to identify and address statewide priorities related to the prevention of falls among older adults as outlined in their 2017-2021 state plan. As the coalition begins its eighth year, the strategic plan for 2017-2021 details specific process objectives to effect policy,

systems and environmental change in order to implement evidence-based fall prevention and incorporate policy and system changes in order to more effectively prevent falls among older adults in Ohio. The plan includes expansion of strength and mobility classes by increasing capacity for Tai Chi and A Matter of Balance, assisting with promotion of ODA's STEADY U, expanding implementation of the STEADI Tool Kit among Ohio health providers, increasing knowledge among our policy makers, and augmenting the ability of older adults to age safely in their homes.

The coalition is continually striving to build partnerships through a dynamic and diverse membership. The current membership list includes 189 partners that span the state of Ohio. In the Coalition's first five years, infrastructure was built and a plan was developed to address fall prevention through systems, environmental and policy strategies. In 2013, a mini-grant program was developed to support local efforts to implement evidence-based strategies. In the first year of the mini-grant program, four grantees were awarded \$1000 each to increase A Matter of Balance and Stepping On workshops across Ohio, increase awareness of the STEADI Tool Kit, and provide home safety evaluations and modifications for seniors in order to prevent falls. In 2014, the mini-grant program grew to fund seven organizations from around the state of Ohio to increase the number of people trained to teach Tai Chi (simplified form to reduce falls), increase both A Matter of Balance and Stepping On workshops and to promote the STEADI Tool Kit. A total of \$10,000 was awarded to these grantees. In 2015, the coalition continued expansion of the mini-grant program as well as hosting a statewide conference in partnership with The Ohio State University for healthcare providers, social workers and other key stakeholders involved in falls prevention. In 2016, the coalition initiated planning for another Falls Prevention conference to be held in 2017. Also in 2016, seven mini-grant projects were awarded a total of \$30,000 to implement home modifications, A Matter of Balance, Tai Chi, and medication reviews.



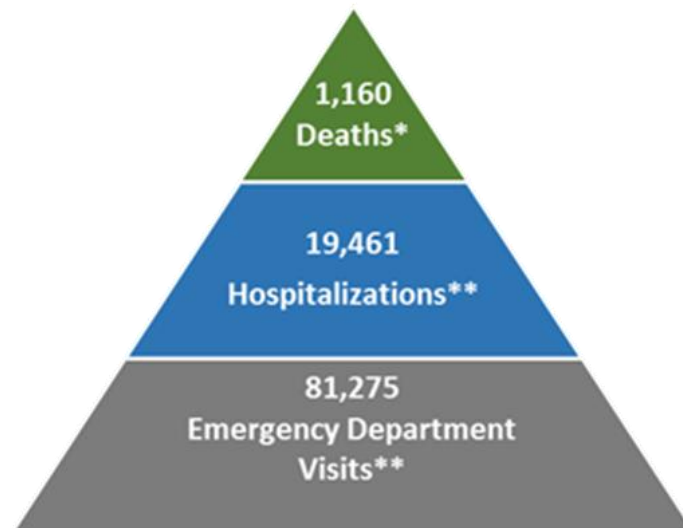
A GROWING CONCERN

Unintentional falls among older adults are a leading cause of fatal and nonfatal injury in the U.S. and Ohio. Hospital costs associated with injuries sustained by falls account for a substantial share of health care dollars spent on injury-related care.

In 2014, 1,160 Ohio residents ages 65 and older died and over 100,000 fall injuries were treated at hospitals and emergency departments (Figure 1).

This report provides recent data on unintentional fall injuries and deaths among Ohio residents ages 65 and older. It includes information about groups with the highest rates, associated costs, and current prevention strategies and activities in Ohio.

FIGURE 1. Burden of Fall Injuries among Residents Ages 65 and older—Ohio, 2014



*Source: ODH Vital Statistics **Source: Ohio Hospital Association

QUICK FACTS



Residents ages 65 and older account for **84% of all fall deaths** and 75% of nonfatal fall hospitalizations in Ohio.



Falls are the **leading cause of traumatic brain injury (TBI)** in Ohio residents ages 65 and older, accounting for 63% of TBI deaths and 67% of TBI hospitalizations.



Projected lifetime costs associated with fall injuries in 2014 among Ohio residents ages 65 and older are estimated to be **\$1.9 billion**.



Each week, there are 1,563 emergency department visits among residents ages 65 and older, 374 hospitalizations, **and 22 deaths due to fall injuries** in Ohio.



In 2014, 64% fall deaths among this age group **occurred in the home**, while 20% occurred in a residential facility such as a nursing home. The location wasn't known for 7% of fall deaths.

DEMOGRAPHIC DATA

TABLE 1. Number and Rate of Fall Deaths and Nonfatal Fall Hospitalizations and Emergency Department (ED) Visits, Ages 65 and older—Ohio, 2014

¹Rates are age-adjusted except for rates by age group. ²Non-Hispanic ³Pacific Islander ⁴American Indian/Alaskan Native

	Fall Deaths *		Nonfatal Fall Hospitalizations and Emergency Department (ED) Visits **			
	Number of Deaths	Death Rate per 100,000 ¹	Number of Hospitalizations	Nonfatal Hospitalization Rate per 100,000 ¹	Number of ED Visits	Nonfatal ED Visit Rate per 100,000 ¹
TOTAL	1,160	64.0	19,461	1,074.9	81,275	4,524.1
Sex						
Male	542	79.1	5,661	801.7	26,780	3,682.0
Female	618	54.2	13,800	1,253.3	54,495	5,148.9
Age Group						
Ages 65-69	69	11.8	1,961	335.2	14,987	2,561.8
Ages 70-74	93	22.1	2,258	536.5	13,328	3,166.9
Ages 75-80	163	52.2	2,815	901.7	13,507	4,326.3
Ages 80-84	247	107.4	3,740	1,626.0	13,902	6,044.0
Ages 85+	588	235.6	8,687	3,480.3	25,551	10,236.5
Race/Ethnicity						
White, NH ²	1,103	67.7	17,932	1,106.3	72,653	4,531.3
Black, NH ²	51	34.4	855	561.2	5,655	3,645.7
Hispanic	1	--	171	906.1	965	5,002.9
Asian/PI ³ , NH ²	4	--	74	457.1	266	1,574.6
AI/AN ⁴ , NH ²	0	--	13	419.5	31	984.7

- Males had a higher rate off fall deaths than females (79.1 per 100,000 and 54.2 per 100,000, respectively).
- Females had higher rates for nonfatal hospitalizations and ED visits than females.
- Persons ages 85 and older had the highest rates of fatal and nonfatal fall injuries. This age group had 20 times the rate of deaths than those aged 65-69.
- White/non-Hispanic older adults had a higher rate of fall deaths compared to Black, non-Hispanic older adults. Rates for other racial/ethnic groups could be calculated due to small numbers of deaths.
- White non-Hispanic older adults had the highest rate of fall hospitalizations and Hispanic older adults had the highest rate of fall ED visits. American Indian/Alaskan Native had the lowest rates for both fall related hospitalizations and ED visits.

PROJECTED LIFETIME COSTS

Lifetime costs associated with unintentional fall injuries in 2014 among Ohio residents ages 65 and older are estimated to be nearly 2 billion dollars. Most of these costs were associated with injuries requiring hospitalizations.

*Source: ODH Vital Statistics **Source: Ohio Hospital Association

	Number of Injuries	Medical Cost	Work Loss Cost	Combined Cost
Deaths*	1,160	\$29,861,000	\$132,340,000	\$162,201,000
Hospitalizations**	19,461	\$799,676,000	\$587,105,000	\$1,386,780,000
ED Visits**	81,275	\$26,4111,000	\$114,898,000	\$379,010,000
TOTAL	101,896	\$1,093,648,000	\$834,343,000	\$1,927,991,000



Ohio Older Adult Falls Prevention Coalition (OAAFPC) State Plan 2017-2021

Table of Contents

Goal 1: Awareness	9
Goal 2: Promotion	11
Goal 3: Infrastructure	13
Goal 4: Policy	15
Goal 5: Data	17
Evidence-Based Interventions and Resources	18

Goal 1: Awareness – To improve fall prevention awareness in Ohio.

Objective 1: By 12/31/21, inform Ohioans about the risk factors, prevalence, consequences, and cost associated with falls and fall-related injuries by maintaining an online presence, hosting a conference and promoting National Falls Prevention Awareness Day.

Steps	Implementing Organizations and Partners	Measure of Success	Implementation Timeline	
			Begin	End
Strategy 1.1.1. Maintain webpages on the Ohio Department of Aging (ODA) and Ohio Department of Health (ODH) websites.				
1. Post quarterly OOAFPC meeting minutes to ODH webpage.	ODH, ODH grantee	Number of updates to the webpage	1/1/17 (Quarterly)	12/31/21 (Quarterly)
2. Partner with ODA to provide information to the public through Steady U webpage.	ODA, Awareness Committee	Number of updates to the webpage, Number of webpage views	1/1/17 (As needed)	12/31/21 (As needed)
3. Create and maintain OOAFPC Leadership bios on the ODH webpage.	ODH, ODH grantee, Awareness Committee	Leadership bios	1/1/17 (As needed)	6/30/17 (As needed)
Strategy 1.1.2. Host a state conference every two years (2017, 2019, 2021).				
1. Conduct regular planning conference calls.	Awareness Committee Chair	Conference call minutes	1/1/17	5/31/17
2. Host conference.	Awareness Committee	Conference registrations	4/1/17	4/30/17
3. Review evaluations.	Awareness Committee	Conference evaluation report	4/8/17	6/30/17
4. Plan and host biennial conferences.	Awareness Committee	Conference call minutes, Conference registrations	7/1/17 (Biennially)	12/31/21 (Biennially)
Strategy 1.1.3. Promote National Falls Prevention Awareness Day annually.				
1. Develop and distribute promotional materials to OOAFPC members.	Awareness Committee, ODH grantee	Promotional materials	6/1/17 (Annually)	9/30/17 (Annually)
2. Create list of National Falls Prevention Awareness Day events organized by OOAFPC members or that are being held in members' communities.	Awareness Committee	List of events	6/1/17 (Annually)	9/30/17 (Annually)
3. Collect photos and summaries to highlight National Falls Prevention Awareness Day events through email and social media.	Awareness Committee, ODA, ODH grantee	Photos and event summaries	9/15/17 (Annually)	10/31/17 (Annually)

Strategy 1.1.4. Maintain a social media page.				
1. Post updates to OoAFPC Facebook page.	ODH grantee	Number of posts made	1/1/17 (Ongoing)	12/31/21 (Ongoing)
Strategy 1.1.5. Develop and implement a system to track member awareness activities.				
1. Research methods for tracking member activities.	Awareness Committee	List of methods	1/1/18	3/31/18
2. Develop tracking system.	Awareness Committee	Tracking system	4/1/18	6/30/18
3. Implement tracking system.	Awareness Committee	Number of awareness activities	7/1/18 (Ongoing)	12/31/21 (Ongoing)

Goal 2: Promotion – To promote evidence-based fall prevention programs in Ohio.

Objective 1: By 12/31/21, increase capacity for evidence-based programs in every Ohio county.

Steps	Implementing Organizations and Partners	Measure of Success	Implementation Timeline	
			Begin	End
Strategy 2.1.1. Assess the current status and capacity of evidence-based programs at the county level.				
1. Establish contacts and gain commitment for assistance with data collection from the Area Offices on Aging, ODH, and/or other partners.	Promotion Committee	List of contacts	1/1/17	3/31/17
2. Develop an ongoing data collection process with input from the Area Offices on Aging, ODH, and/or other partners.	Promotion Committee	Data collection tool	1/1/17	3/31/17
3. Collect data.	Promotion Committee	Data set	4/1/17 (Ongoing)	12/31/21 (Ongoing)
4. Produce a summary report.	Promotion Committee	Summary report	7/1/17 (Annually)	10/31/17 (Annually)
5. Identify gaps in evidence-based programming.	Promotion Committee	List of gaps	11/1/17 (Annually)	12/31/17 (Annually)
Strategy 2.1.2. Fund and implement annual pilot projects.				
1. Review and update the Pilot Project RFP.	Promotion Committee, ODH grantee	Pilot Project RFP	1/1/17 (Annually)	1/31/17 (Annually)
2. Disseminate the RFP.	Promotion Committee, ODH grantee	Emails	2/1/17 (Annually)	3/31/17 (Annually)
3. Collect and review submitted proposals.	Promotion Committee, ODH, ODH grantee	Submitted proposals	4/1/17 (Annually)	4/30/17 (Annually)
4. Announce funded Pilot Projects.	Promotion Committee, ODH grantee	Summary of funded projects	4/1/17 (Annually)	4/30/17 (Annually)
5. Hold conference calls with the funded Pilot Projects to review requirements and deadlines.	ODH grantee	Pilot Project checklist	5/1/17 (Annually)	5/31/17 (Annually)
6. Execute contracts and award funds.	ODH grantee	Contracts	6/1/17 (Annually)	7/31/17 (Annually)

7. Review and update the mid-year and final report templates.	Promotion Committee, ODH grantee	Mid-year and final report templates	7/1/17 (Annually)	8/31/17 (Annually)
8. Collect and review submitted reports.	Promotion Committee, ODH, ODH grantee	Submitted reports	1/1/18 (Annually)	8/31/18 (Annually)
9. Coordinate presentations by the funded Pilot Projects at ODAFPC meetings.	Promotion Committee	Meeting minutes	11/1/18 (Annually)	5/31/19 (Annually)
Strategy 2.1.3. Build capacity for evidence-based programs in counties as needed.				
1. Review identified gaps in evidence-based programming based on summary report.	Promotion Committee	List of gaps	1/1/18	2/28/18
2. Identify training and infrastructure needs.	Promotion Committee	List of needs	1/1/18	2/28/18
3. Develop a plan to address training and infrastructure needs.	Promotion Committee	Written plan	3/1/18	6/30/18
4. Implement plan.	Promotion Committee	Number of trainings held, Number of counties represented at trainings	7/1/18 (Ongoing)	12/31/21 (Ongoing)
Strategy 2.1.4. Complete report documenting the process for building capacity for evidence-based programming in Ohio.				
1. Document the process for assessing the capacity of evidence-based programs in Ohio.	Promotion Committee	Documented process	1/1/17 (Ongoing)	12/31/21 (Ongoing)
2. Produce a report.	Promotion Committee	Report	1/1/21	6/30/21
3. Create dissemination plan.	Promotion Committee	Written plan	3/1/21	6/30/21
4. Disseminate report.	Promotion Committee, ODH grantee	Emails, published reports, presentations, and/or abstracts	7/1/21	12/31/21

Goal 3: Infrastructure - To build and support a sustainable network of fall prevention advocates.				
Objective 1: By 12/31/21, increase membership of the OOAFPC by 10%.				
Steps	Implementing Organizations and Partners	Measure of Success	Implementation Timeline	
			Begin	End
Strategy 3.1.1. Assess gaps in membership.				
1. Review roster and identify gaps in organizations represented.	Infrastructure Committee	List of gaps	1/1/17 (Annually)	2/28/17 (Annually)
Strategy 3.1.2. Recruit members based on identified gaps.				
1. Develop plan for recruiting new members.	Infrastructure Committee	Written plan	3/1/17 (Annually)	4/30/17 (Annually)
2. Assign recruitment tasks to committee members.	Infrastructure Committee	List of assignments	5/1/17 (Annually)	5/31/17 (Annually)
3. Implement recruitment plan.	Infrastructure Committee	List of new members	6/1/17 (Annually)	12/31/17 (Annually)
Strategy 3.1.3. Create and implement an onboarding process for new members.				
1. Define activities and develop materials to be used to introduce new members to the OOAFPC.	Infrastructure Committee	Introduction packet and documented onboarding process	1/1/17	6/30/17
2. Use activities and materials to welcome new members.	Infrastructure Committee	Number of new members who complete onboarding process	7/1/17 (Ongoing)	12/31/21 (Ongoing)
Objective 2: By 12/31/21, retain at least 65% of the OOAFPC member representation.				
Steps	Implementing Organizations and Partners	Measure of Success	Implementation Timeline	
			Begin	End
Strategy 3.2.1. Monitor membership.				
1. Develop tracking system for member attendance at OOAFPC meetings.	Infrastructure Committee, ODH, ODH grantee	Tracking system	1/1/17	2/28/17
2. Implement tracking system.	Infrastructure Committee, ODH, ODH grantee	Number of members in attendance	3/1/17 (Ongoing)	12/31/21 (Ongoing)
Strategy 3.2.2. Update and share member roster.				
1. Update member roster.	ODH, ODH grantee	Member roster	1/1/17	12/31/21

			(Ongoing)	(Ongoing)
2. Share member roster at OOAFPC meetings.	ODH grantee	Member roster	1/1/17 (Quarterly)	12/31/21 (Quarterly)
3. Identify process for follow-up with non-attending members.	Infrastructure Committee	Written plan	1/1/18	6/30/18
4. Implement follow-up process.	Infrastructure Committee	Number of non-attending members contacted	7/1/18 (Annually)	12/31/21 (Annually)
Strategy 3.2.3. Promote fall prevention awareness through the OIPP Promising Practice and Champion Awards.				
1. Identify members of the OOAFPC as potential nominees for OIPP Promising Practice and Champion Awards.	Infrastructure Committee	List of nominees	5/1/17 (Annually)	7/31/17 (Annually)
2. Submit nominations.	Infrastructure Committee	Nominations	8/1/17 (Annually)	9/30/17 (Annually)

Goal 4: Policy – To provide information to organizational, local and state leaders resulting in policies that address fall prevention interventions.

Objective 1: By 12/31/21, develop documents that will aid organizations in adopting policies or practices that reduce falls and fall-related injuries.

Steps	Implementing Organizations and Partners	Measure of Success	Implementation Timeline	
			Begin	End
Strategy 4.1.1. Identify and disseminate model policies and practices in member and community organizations.				
1. Develop process for collecting information on model policies and practices.	Policy Committee	Documented process	1/1/17	3/31/17
2. Implement collection process.	Policy Committee	List of policies and practices	4/1/17	9/30/17
3. Disseminate listing.	Policy Committee	Emails, published reports, presentations, and/or abstracts	10/1/17	12/31/17

Objective 2: By 12/31/21, develop and implement a plan to support the adoption of one evidence-based falls prevention policy.

Steps	Implementing Organizations and Partners	Measure of Success	Implementation Timeline	
			Begin	End
Strategy 4.2.1. Identify one falls prevention policy and prepare educational documents.				
1. Research and identify one evidence-based falls prevention policy.	Policy Committee, OIPP Injury Prevention Policy Action Group (IPPAG)	Identified policy	1/1/18	2/28/18
2. Gather supporting falls data.	Policy Committee, OIPP IPPAG	Summary report	3/1/18	4/30/18
3. Prepare talking points.	Policy Committee, OIPP IPPAG	Talking points	5/1/18	6/30/18
4. Prepare fact sheets.	Policy Committee, OIPP IPPAG	Fact sheets	5/1/18	6/30/18
5. Educate OOAFPC members on the identified policy.	Policy Committee, OIPP IPPAG	Meeting minutes	7/1/18	8/31/18

Strategy 4.2.2. Recruit and partner with champion(s) to support policy adoption.

1. Identify falls prevention policy champion(s).	Policy Committee, OIPP IPPAG	Identified champion(s)	9/1/18	12/31/18
2. Meet with champion(s).	Policy Committee, OIPP IPPAG	Meeting minutes, Talking points, Fact sheets	1/1/19	3/31/19
3. Develop and implement plan with	Policy Committee, OIPP	Written plan	4/1/19	12/31/21

champion(s).	IPPAG		(Ongoing)	(Ongoing)
Objective 3: By 12/31/21, establish the feasibility of requiring Ohio insurers to cover balance and mobility training.				
Steps	Implementing Organizations and Partners	Measure of Success	Implementation Timeline	
			Begin	End
Strategy 4.3.1. Conduct feasibility and cost benefit analysis.				
1. Partner with policy champion(s) to secure the Legislative Budget Office report.	Policy Committee, OIPP IPPAG, Policy champion(s)	Legislative Budget Office report	1/1/21	6/30/21
Strategy 4.3.2. Develop a strategy based on the analysis.				
1. Develop strategy based on the feasibility and cost benefit analysis.	Policy Committee, OIPP IPPAG, Policy champion(s)	Written plan	7/1/21	12/31/21

Goal 5: Data – To capture and use quality fall-related data in order to monitor trends.

Objective 1: By 12/31/21, the current falls data infrastructure will be improved to meet the needs of the OOAFPC members.

Steps	Implementing Organizations and Partners	Measure of Success	Implementation Timeline	
			Begin	End
Strategy 5.1.1. Assess data needs of OOAFPC members.				
1. Request results of OIPP Data Action Group data needs survey.	OIPP Data Action Group (DAG), OOAFPC liaison	Data set	1/1/17 (Biennially)	2/28/17 (Biennially)
2. If needed, collect additional data to determine OOAFPC needs.	DAG, OOAFPC liaison	Data set	3/1/17 (Biennially)	6/30/17 (Biennially)
3. Create report.	DAG, OOAFPC liaison	Report	7/1/17 (Biennially)	9/30/17 (Biennially)
Strategy 5.1.2. Develop and implement a plan to address data needs.				
1. Develop plan to address data needs.	DAG, OOAFPC liaison	Written plan	10/1/17 (Biennially)	12/31/17 (Biennially)
2. Implement plan.	DAG, OOAFPC liaison	Webinars, Meeting minutes	1/1/18 (Ongoing)	12/31/21 (Ongoing)

Evidence-based Interventions and Resources

CDC Fall Prevention Activities

<http://www.cdc.gov/ncipc/duip/FallsPreventionActivity.htm>

<http://www.cdc.gov/ncipc/preventingfalls/>

www.cdc.gov/steady

Preventing Falls: What Works A CDC Compendium of Fall Interventions: What Works for Community-Dwelling Older Adults, 3rd Edition

This compendium, designed for public health practitioners, senior service providers, clinicians, and others who want to address older adult falls in their community.

www.cdc.gov/homeandrecreationalafety/Falls/compendium.html

National Council on Aging-Center for Healthy Aging-Fall Prevention

<https://www.ncoa.org/healthy-aging/falls-prevention/falls-prevention-programs-for-older-adults/>

Fall Prevention Center of Excellence

<http://www.stopfalls.org/>