

Erie County

Falls Among Older Adults
Injury Prevention Plan

INJURY PREVENTION

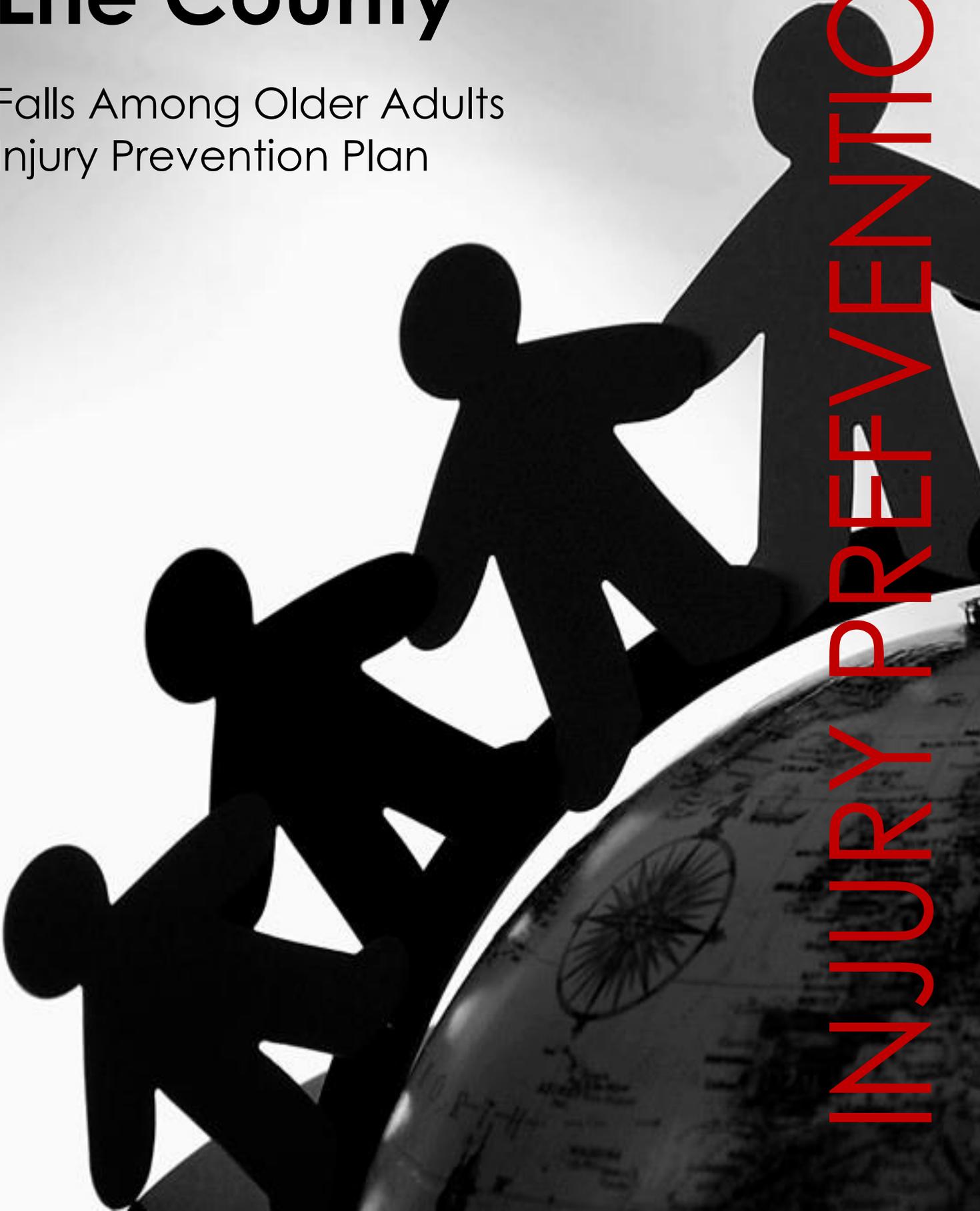


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Executive Summary

Since 2004, Erie County has conducted community health assessments for the purpose of measuring and addressing health status. Historically, the community has come together as one to measure health status. Injury prevention, including falls among the aging population, has been determined to be a priority in Erie County. Stakeholders have come together to create strategies to address injury prevention, requiring the commitment of every sector of the community to address these issues effectively. It is hoped that as a result of this plan, Erie County will rally around the issues identified and work together to implement best practices that will decrease the number of injuries in aging adults.

Strategies:

Aging Adult Injury Prevention
1. Engage the medical community
2. Promote falls prevention
3. Secure licensed individuals for older adult services
4. Enhance transportation for older adults

Action Steps:

To work toward **engaging the medical community**, the following actions steps are recommended:

1) Educate physician offices about the Medicare-reimbursed assessment for falls, 2) Explore feasibility of starting a Geriatric Treatment Center in Erie County, 3) Engage a physician to be the champion for injury prevention and assessments, 4) Utilize Northwest Ohio Medical Specialists (NOMS) patient navigators to complete assessments and make referrals, and 5) Engage pharmacists in the education process regarding medication side-effects and balance.

To work toward **promoting falls prevention**, the following action steps are recommended:

1) Implement Matter of Balance Program, 2) Implement media campaign, 3) Disseminate Resource Assessment to agencies that work with seniors and senior living communities, and 4) Present falls data and prevention strategies to groups throughout Erie County.

To work toward **securing licensed individuals for older adult services**, the following actions steps are recommended:

1) Collaborate with Erie County Home Builders Association, 2) Research affordable ways to become bonded and insured, and 3) Explore community partnerships willing to assist with funding for home modifications programs

To work toward **enhancing transportation for older adults**, the following action steps are recommended:

1) Increase the number of eligible drivers, and 2) Increase the number of busses and vans available to seniors, and 3) Participate in local transportation planning coalition.

Partners

The Erie County Health Department wishes to acknowledge the numerous contributions of the following partners and stakeholders.

Committee Members:

Troy Chaffin, Erie County Health Department
Tina Elmlinger, Serving Our Seniors
Stanley Harris, Community Resident
Chris Hemminger, Harborview Senior Housing
June Illig, Community Resident
Bill Illig, Community Resident
Carol Lloyd, Erie County Senior Center
Charlene Margetiak, Erie County Metroparks
Sharon Schaeffer, Erie County Health Department

This strategic planning process was facilitated by Britney Ward, Director of Community Health Improvement, from the Hospital Council of Northwest Ohio.

Strategic Planning Model

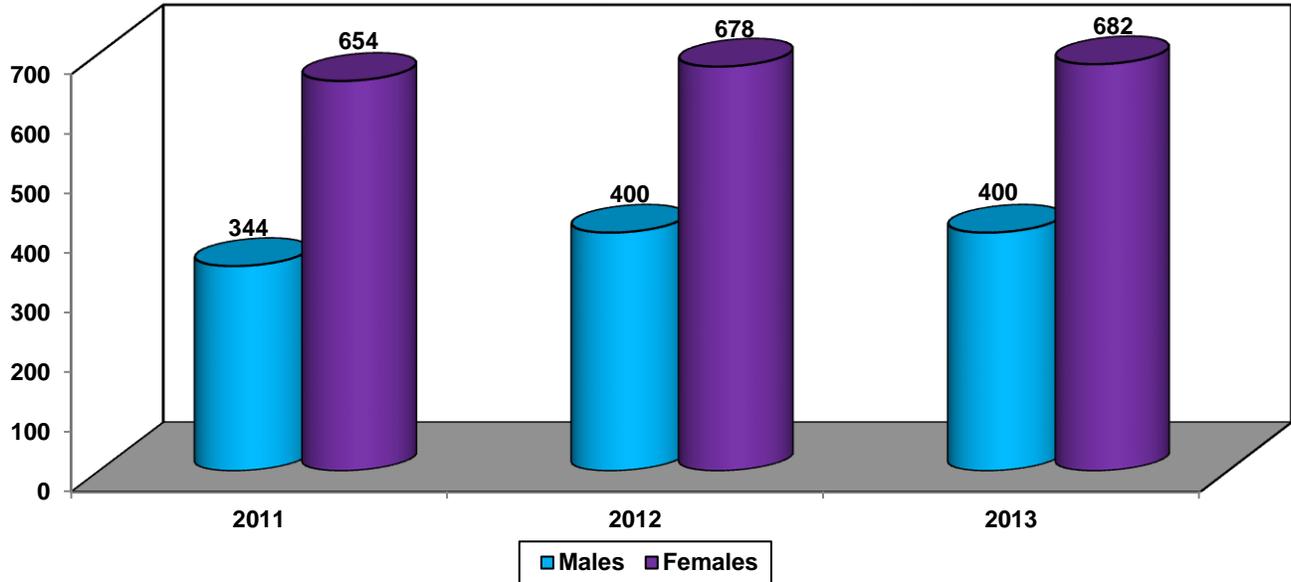
Beginning in May 2014, the Erie County Strategic Planning Committee met two (2) times and completed the following planning steps:

1. Resource Assessment- Determine existing programs, services, and activities in the community that address the priority target impact areas and look at the number of programs that address each outcome, geographic area served, prevention programs, and interventions
2. Gap Analysis- Determine existing discrepancies between community needs and viable community resources to address local priorities; Identify strengths, weaknesses, and evaluation strategies; and Strategic Action Identification
3. Best Practices- Review of best practices and proven strategies, Evidence Continuum, and Feasibility Continuum
4. Draft Plan- Review of all steps taken; Action step recommendations based on one or more the following: Enhancing existing efforts, Implementing new programs or services, Building infrastructure, Implementing evidence based practices, and Feasibility of implementation

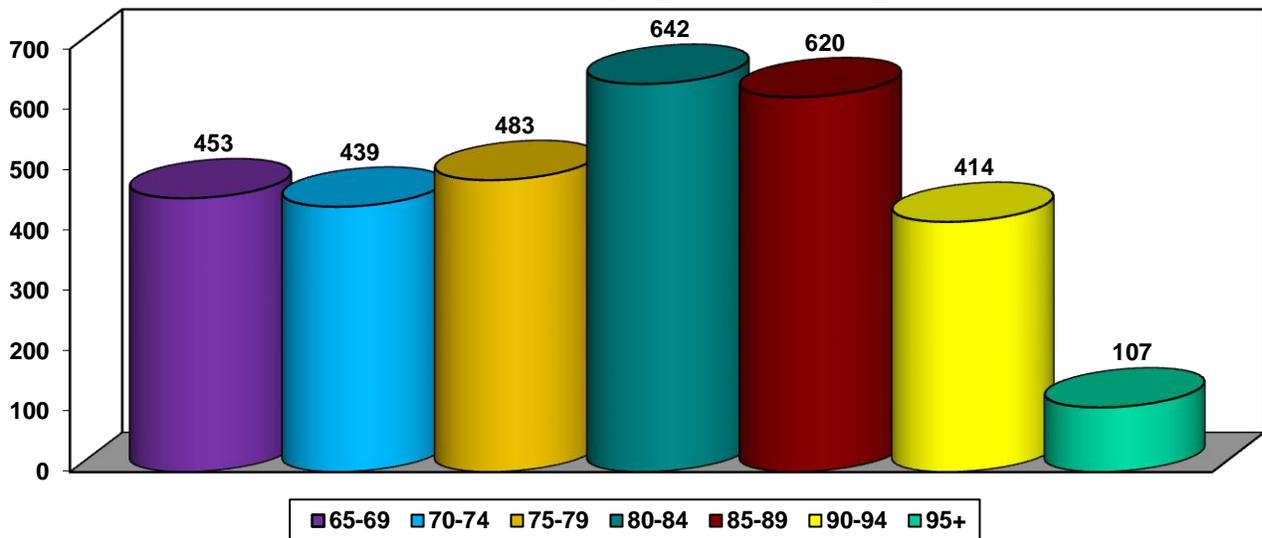
Erie County Aging Adult Injury Indicators

Erie County: The data presented is generated by software called “Epicenter.” This software provides licensed personnel at local health departments the ability to monitor admissions into local emergency departments (EDs). The data in this summary includes all persons aged 65 and over who were admitted into Erie County EDs due to an injury caused by a fall.

Number of Falls by Gender in Erie County, 2011-2013



Number of Falls by Age in Erie County, 2011-2013

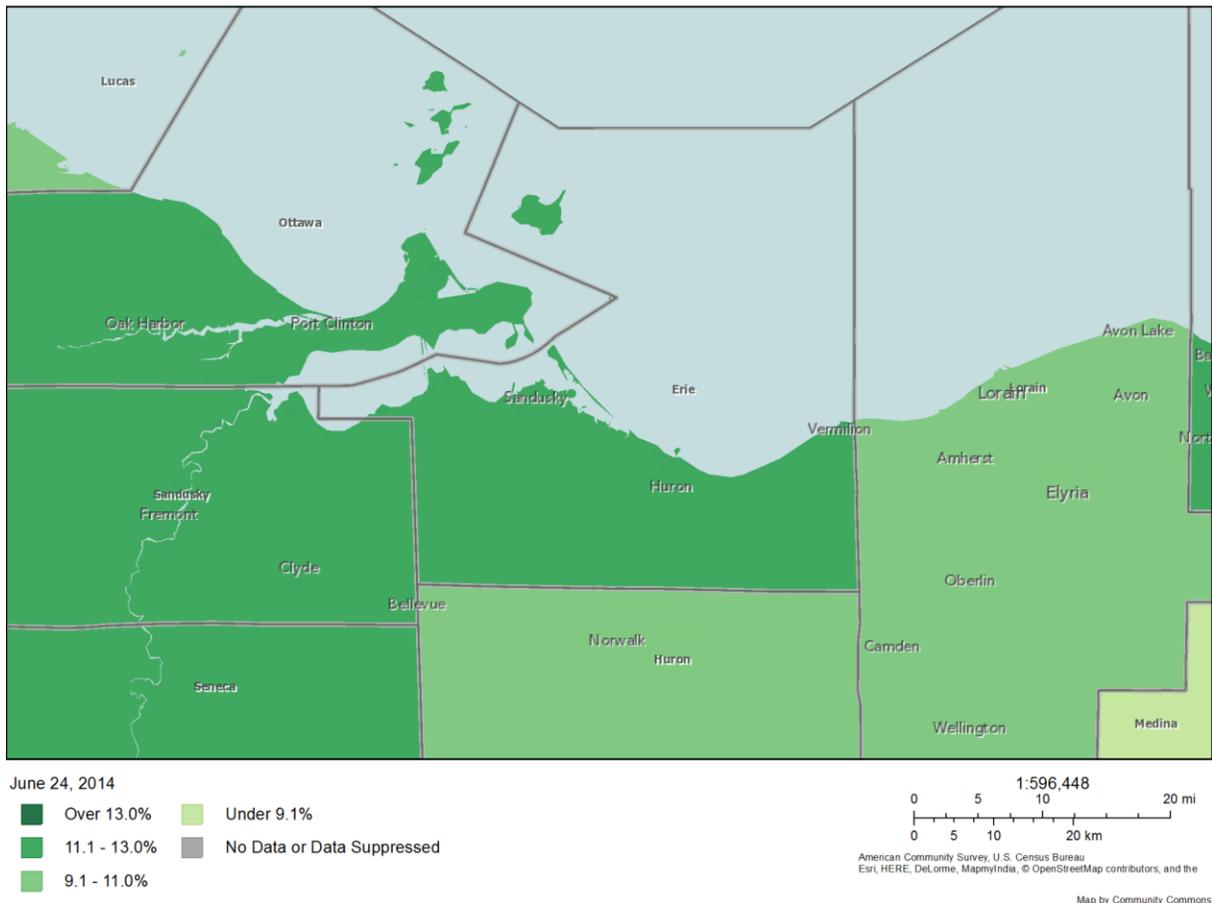


Erie County Aging Adult Injury Indicators, continued

Number of Falls by Zip Code in Erie County, 2011-2013

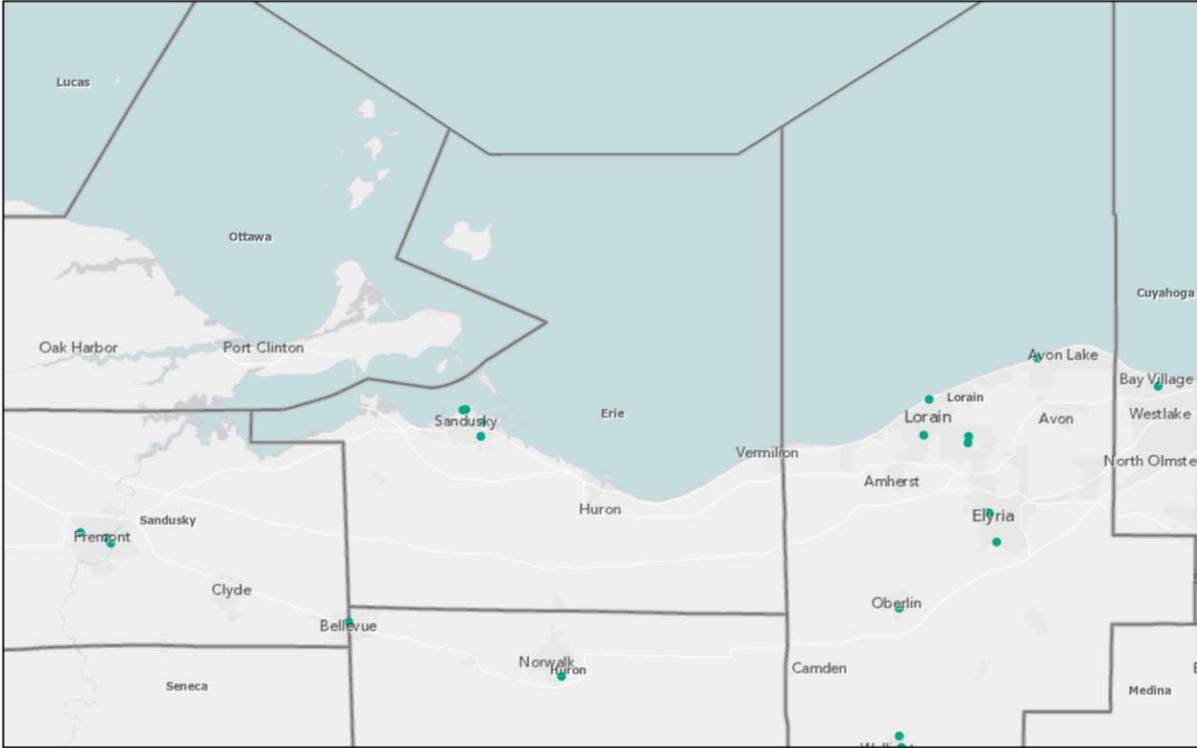
Zip Codes	2011	2012	2013	Total
43438 (Kelley's Island)	3	2	5	10
44089 (Vermilion)	99	113	113	325
44814+44816 (Berlin Heights/ Birmingham)	17	22	34	73
44824 (Castalia)	41	35	44	120
44839 (Huron)	154	174	161	489
44846 (Milan)	32	28	28	88
44870 (Sandusky)	652	704	697	2,053
TOTAL	998	1,078	1,082	3,158

Households with Seniors (Age 65+) Living Alone, Percent by County, ACS 2008-2012



Erie County Aging Adult Injury Indicators, continued

Multi-family Assisted Housing, Section 202 (Elderly) by Location, HUD 2013



June 24, 2014

● Section 202 Housing Locations (Elderly)



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Map by Community Commons

Erie Senior Living Resource Assessment

Program/Strategy/ Service	Responsible Agency	Population(s) Served	Continuum of Care (prevention, early intervention, or treatment)
Visual Assessment (handrails, rugs) *Referrals	Fire Department (Sandusky)	Anyone	Prevention
Out of Town Medical Transportation/ Sandusky Transit	Serving our Seniors	60+	Prevention, Intervention, & Treatment
Wrote Grant for Two More Busses	Serving our Seniors		
Rural (Meals on Wheels)	Serving our Seniors		Reassess every 6 months
Cardiac Rehab	Firelands	Any age	Treatment
Meals on Wheels (Appropriate survey)	Senior Center	60+	Early Intervention & Treatment (Reassess)
Passport Program (food, medical equipment)	Area office of aging	Home-Health Medicaid- Eligible Population	
Exercise and Programs	Senior Center	60+	Prevention
Daily Lunch Speakers	Senior Center	65+	
Walk with the Docs	Metro Parks	Anyone	Prevention
Senior Archery	Metro Parks	55+	Prevention
Exercise	Health Department	62+	Prevention
Screenings (Blood Pressure, Diabetes, Glucose)	Harborview/Viewpoint and Health Department	62+	Prevention
Gardening (Health Department)	Health Department	62+	Prevention
Enhanced Living (Nurse Aid 6 Hours a Day/ 7 Days a Week)	Harborview/Viewpoint/ Passport/Area Office of Again	Harbor View & 62+ View Point	
Nutrition Program (1 Time a Month)	Ohio State Extension	Harbor View	Prevention
Nature Program (At Parks or Come to You)	Metro Parks	Seniors 55+	Prevention
Space/Gathering Rooms Outdoor/Indoor	Metro Parks	Seniors 55+	
Golf Course	Metro Parks	Anyone	Prevention
Run/Walk Tuesday	Metro Parks	Anyone (any age)	Prevention
Transportation (for retired teachers)	Aetna	Retired teachers	

Erie Senior Living Resource Assessment

Program/Strategy/ Service	Responsible Agency	Population(s) Served	Continuum of Care (prevention, early intervention, or treatment)
Master's Challenge (Senior Fitness- Pro-Aging)	Serving Our Seniors	60+	Prevention
Be Your Own Health Advocate	Serving Our Seniors	60+	
Functional Capacity Surveying	Serving Our Seniors	60+	
Home Health (Survey- What Can They Do Themselves) Occupational Therapy	Serving Our Seniors/Firelands	60+	
Handyman Program (Ex: Handrails)	Serving Our Seniors	60+	
Emergency Home Repair	Serving Our Seniors	60+	
Ramp Program	Serving Our Seniors	60+ or Caregiver's Home	Prevention
Wellness/Exercise	Various- Private Fitness Agencies		Prevention
55+ Club (Trips, Lunch & Learn, Dining & Diabetes)	Firelands		
Cardiac Rehab (Extension of services to continue exercise)	Firelands	Anyone (mostly 50+)	Prevention
Transport (to procedures, mental health, and therapies)	Firelands	Anyone	Treatment
Silver Sneakers (Fitness Plan Offered Through Insurance Plans)	YMCA/Curves/ Northern Ohio Medical Specialists (NOMS)	55+	Prevention
Pools	Northern Ohio Medical Specialists (NOMS)/ YMCA/ Margaretta	Anyone	Prevention & Treatment
Physical/Occupational Therapy	Advanced Health	Anyone	Treatment
211 Program	United Way	Anyone	
Senior "ER"	FRMC	60+	Early intervention & Treatment
Elder College	Firelands BGSU	50+	Prevention
Home Health/ Home Services	Seniors Helping Seniors	60+	
Bicycle Path	Metro Parks	Anyone	Prevention

Erie County Aging Adult Injury Prevention Best Practices

The following best practices have been identified in preventing injuries and falls among the aging population:

1. A **Matter of Balance** emphasizes practical strategies to reduce fear of falling and increase activity levels. Participants learn to view falls and fear of falling as controllable, set realistic goals to increase activity, change their environment to reduce fall risk factors, and exercise to increase strength and balance. This program has been adapted from the original intervention to be more suitable for community-dwelling older adults by allowing small group sessions to be led by a trained facilitator. For additional information on training opportunities and cost go to http://www.mmc.org/mh_body.cfm?id=432. - See more at: <http://www.ncoa.org/improve-health/center-for-healthy-aging/a-matter-of-balance.html#sthash.CPNPwvZB.dpuf>
2. **Steady U Ohio** is a statewide collaborative falls prevention initiative, supported by Ohio government and state business partners to ensure that every county, every community and every Ohioan knows how they can prevent falls, one step at a time. This initiative includes free posters, brochures, power point presentations, tip sheets, and Falls Risk Assessment. For more information go to: <http://aging.ohio.gov/steadyu/resources/default.aspx>
3. The National Council on Aging provides a resource and handout, **“Debunking the Myths of Older Adult Falls”**. For more information go to: <http://www.ncoa.org/improve-health/falls-prevention/debunking-the-myths-of-older.html?print=t>
4. The Center for Disease Control and Prevention provides a resource and brochure **“What You Can Do to Prevent Falls”**. For more information or free downloadable brochures go to <http://www.cdc.gov/HomeandRecreationalSafety/Falls/WhatYouCanDoToPreventFalls.html>

Strategy #1: Engage Medical Community

Gaps	Potential Strategies
Lack of falls prevention strategies in medical community	<ul style="list-style-type: none"> • Educate medical community about the Medicare-reimbursed assessment for falls • Engage local pharmacists to assist with educating the community on potential medication actions which could increase risk of falls • Using navigators that currently do home visits as a referral system • Referral system with EMS/fire/police
Resistance to Geriatricians in the community so having to travel outside of county	<ul style="list-style-type: none"> • Feasibility of bringing a Geriatrician into the community • Feasibility of a Geriatric Treatment Center

Action Step Recommendations

To work toward engaging the medical community, the following action steps are recommended:

1. Engage a physician to be the champion for injury prevention and assessments
2. Educate physician offices about the Medicare-reimbursed assessment for falls
3. Utilize existing patient navigators (Accountable Care Organizations/Patient Centered Medical Home) to complete assessments and make referrals
4. Explore feasibility of starting a Geriatric Treatment Center in Erie County
5. Engage pharmacists in the education process regarding medication side-effects and balance

Engage Medical Community

Action Step	Timeline
Engage a physician to be the champion for injury prevention and assessments	
Year One: Recruit at least one physician to be the champion for the falls prevention assessment toolkits	December, 2014
Year Two: Champion physician recruits 3 additional practices to implement toolkit	December, 2015
Year Three: Champion physician recruits 3 additional practices to implement toolkit	December, 2016
Educate physician offices about the Medicare-reimbursed assessment for falls	
Year One: Determine which physician groups need to be educated about the assessment (primary care, family practice, orthopedic, chiropractic, etc.) Determine who the largest physician groups are in the county to start the education with Determine a physician(s) who would help champion the cause and ask them to sit your committee as well as help with the education Create a packet with a cover letter, fact sheet, and the assessment tool to hand out to physicians	December, 2014
Year Two: Educate at least 50% of targeted physicians	December, 2015
Year Three: Educate at least 90% of targeted physicians	December, 2016
Utilize existing patient navigators to complete assessments and make referrals	
Year One: Meet with NOMS patient navigators to educate them on the falls data and assessment tool. Request that they be willing to make referrals for the falls assessment	December, 2014
Year Two: Double the number of falls assessment referrals made from year 1	December, 2015
Year Three: Increase the number of falls assessment referrals made from year 2	December, 2016

Engage Medical Community

Action Step	Timeline
Explore feasibility of starting a Geriatric Treatment Center in Erie County	
Year One: Conduct a feasibility study Talk with communities similar in size who have a Geriatric Treatment Center	December, 2014
Year Two: Move forward based off of feasibility study and other data sources	December, 2015
Year Three: Move forward based off of feasibility study and other data sources	December, 2016
Engage pharmacists in the community education process regarding medication side-effects and balance	
Year One: Educate pharmacists on the need for additional instructions for those medications that could cause balance issues. Provide pharmacists with educational handouts to give to clients	December, 2014
Year Two: 50% of the pharmacists are giving additional instructions and distributing the handout.	December, 2015
Year Three: 100% of the pharmacists are giving additional instructions and distributing the handout.	December, 2016

Strategy #2: Promote Falls Prevention

Gaps	Potential Strategies
Falls prevention is not a priority (due to media attention surrounding Medicare, fraud, elder abuse, etc.)	<ul style="list-style-type: none"> • Educate community on falls data and prevention strategies • Implement media campaign • Disseminate Falls Prevention Resource Assessment
Many Seniors think it is okay to fall every once in a while and think it just comes with age	<ul style="list-style-type: none"> • Implement Matter of Balance Program • Education with Seniors

Action Step Recommendations

To work toward promoting falls prevention, the following action steps are recommended:

1. Implement Matter of Balance Program
2. Implement media campaign
3. Disseminate Resource Assessment to agencies that work with seniors and senior living communities
4. Present falls data and prevention strategies to groups throughout Erie County

Promote Falls Prevention	
Action Step	Timeline
Implement Matter of Balance Program	
Year One: Implement Matter of Balance program at 3 locations.	December, 2014
Year Two: Train 2 additional coaches to facilitate the program	December, 2015
Year Three: Continue to coordinate the implementation of Matter of Balance throughout Erie County	December, 2016
Implement media campaign	
Year One: Research Steady U Ohio initiative/campaign. Use free tools to start education with community	December, 2014
Year Two: Expand media campaign with greater outreach	December, 2015
Year Three: Continue efforts from years 1 and 2	December, 2016
Disseminate Resource Assessment to agencies that work with seniors and senior living communities	
Year One: Place Falls Resource Assessment on numerous websites in the county. Share Resource Assessment with 211	December, 2014
Year Two: Update Resource Assessment annually	December, 2015
Year Three: Update Resource Assessment annually	December, 2016
Present falls data and prevention strategies to Senior groups throughout Erie County	
Year One: Disseminate “Debunking the Myths Of Older Adult Falls”, “What You Can Do to Prevent Falls”, and Steady U Ohio resources to Seniors as well as their family and caregivers	December, 2014
Year Two: Continue efforts from year 1	December, 2015
Year Three: Continue efforts from years 1 and 2	December, 2016

Strategy #3: Secure Licensed Individuals for Older Adult Services

Gaps	Potential Strategies
Handy man needs to be insured and bonded. Many are retired and not willing to pay for the insurance and bonding.	<ul style="list-style-type: none"> • Work with Erie County Home Builders to research the feasibility of using them as an umbrella company for insurance • Research what it costs to be insured and bonded • Work with local insurers for discounts
There are not enough nurse aids to reach the rural communities for the following reasons: <ul style="list-style-type: none"> • It is not financially beneficial to travel to the rural areas for a one hour increment. • They are not currently reimbursed for travel. • They are not paid well and have been unreliable 	<ul style="list-style-type: none"> • Work with employers to offer travel reimbursement or look for outside funding to do so • Work with NOMS navigators to coordinate through their home visits • Work to schedule numerous clients on certain days in certain communities so it would be worthwhile to travel

Action Step Recommendations

To work toward securing licensed individuals for needed Senior Services, the following action steps are recommended:

1. Collaborate with Erie County Home Builders Association
2. Research affordable ways to become bonded and insured
3. Explore community partnerships willing to assist with funding for home modification programs

Secure Licensed Individuals for Needed Older Adult Services

Action Step	Timeline
Collaborate with Erie County Home Builders Association	
Year One: Reach out to Erie County Home Builder's Association and other local contractors. Inquire about the feasibility of them being able to complete home modifications for older adults. Use personnel of local non-profits to complete simple home modifications such as installing non-skid strips in tubs or shower benches.	December, 2014
Year Two: Continue with efforts from year 1	December, 2015
Year Three: Continue efforts from years 1 and 2	December, 2016
Research affordable ways to become bonded and insured	
Year One: Contact local insurance companies to discuss possible discounts available through Serving Our Seniors or another organization Look for local funding to help subsidize or pay for the insurance	December, 2014
Year Two: Continue efforts from year 1	December, 2015
Year Three: Continue efforts from years 1 and 2	December, 2016
Explore community partnerships willing to assist with funding for home modification programs	
Year One: Educate local partners regarding gaps in home modification programs and identify ways they can assist in improving the program	December, 2014
Year Two: Establish support of local partners for long term success of the program	December, 2015
Year Three: Continue efforts from year 1 and 2	December, 2016

Strategy #4: Enhance Transportation for Older Adults

Gaps	Potential Strategies
Older adults who do not drive have reported it is difficult to access transportation to medical appointments, daily exercise, and meetings	<ul style="list-style-type: none"> Present this gap to local service organizations Incentivize becoming a volunteer driver for senior services
Do not have bussing specifically for Seniors	<ul style="list-style-type: none"> Look into feasibility of Senior bussing Education with Seniors about safety on public bussing Educate Seniors about options for family to ride with you on bussing and vans Some churches in area have health ministry and church vans

Action Step Recommendations

To work toward enhancing transportation, the following action steps are recommended:

1. Increase the number of eligible drivers
2. Increase the number of busses and vans available to Seniors
3. Participate in local transportation planning coalition

Enhance Transportation for Seniors	
Action Step	Timeline
Increase the Number of Eligible Drivers	
Year One: Present information about driver's requirements to organizations in order to help recruit drivers Research the feasibility of including incentives to take the Geriatric Driving Assessment	December, 2014
Year Two: Enroll at least 2 more drivers	December, 2015
Year Three: Enroll at least 3 more drivers	December, 2016
Increase the Number of Busses and Vans Available to Seniors	
Year One: Conduct a feasibility study for Senior bussing Meet with Firelands transportation leadership to discuss transport for additional medical issues or appointments Educate Seniors on safety of public bussing as well as options for having family ride along on busses and vans Research which churches have health ministries and church vans. Work closely with the ministerial associations	December, 2014
Year Two: Share feasibility study results with community. If appropriate, research local funding or grant opportunities to implement Senior bussing Continue education with Seniors Continue work with ministerial associations and health ministries	December, 2015
Year Three: If appropriate, secure funding and implement Senior bussing Continue education with Seniors Continue work with ministerial associations and health ministries	December, 2016
Participate in local transportation planning coalition	
Year One: Participate in local public transportation coalition and advocate for older adult transportation services	December, 2014
Year Two: Continue efforts from year 1	December 2015
Year Three: Continue efforts from years 1 and 2	December 2016

Progress and Measuring Outcomes

The progress of meeting the local priorities will be monitored with measurable indicators identified by the Erie County Planning Committee. The individuals that are working on action steps will meet on an as needed basis. . Action steps, responsible person/agency and timelines will be reviewed at the end of each year by the committee. Edits and revisions will be made accordingly.

Contact Us

For more information about any of the agencies, programs, and services described in this report, please contact:

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