

STATE OF OKLAHOMA
**PREVENTING FALLS
AMONG OLDER ADULTS
IN OKLAHOMA**

A STATE PLAN



**OKLAHOMA STATE
DEPARTMENT OF HEALTH**

Falls among persons aged 65 and older are a growing public health problem both nationally and in Oklahoma.



HEALTHY AGING: LIVING LONGER BETTER COLLABORATORS

COLLABORATORS INCLUDE REPRESENTATIVES FROM THESE ORGANIZATIONS AND AGENCIES:

AARP Oklahoma
Achievis Senior Living Assisted Living
Anne & Henry Zarrow School of Social Work
Area Agencies on Aging
Baptist Village Communities
Beadles Nursing Home
Blue Cross/Blue Shield of Oklahoma
Choctaw Nation Health System
Comanche County Memorial Hospital -
Heart & Vascular Center
Community Food Bank of Eastern Oklahoma
Companion Health Services
Concordia Senior Living Center
Daily Living Centers
Department of Veterans Affairs
Drive by Fruiting
Eastern Oklahoma State College
Elmbrook Management
Epworth Villa
Home Care and Hospice Association
Humana
Indian Health Service
INTEGRIS Mental Health
Inverness Village
Latino Community Development Agency
Leading Age Oklahoma
National Alliance for the Mentally Ill
New View Oklahoma
Oklahoma Assisted Living Association
Oklahoma Association of Healthcare Providers
Oklahoma Association of Nutrition Project Directors
Oklahoma City Area Tribal Epidemiology Center
Oklahoma City County Health Department
Oklahoma City Indian Clinic
Oklahoma Department of Human Services
Oklahoma Department of Mental Health &
Substance Abuse Services

Oklahoma Developmental Disabilities Council
Oklahoma Foundation for Medical Quality
Oklahoma Health Care Authority
Oklahoma Healthy Aging Initiative
Oklahoma Medical Board
Oklahoma Mental Health and Aging Coalition
Oklahoma Methodist Manor
Oklahoma Organization of Nurse Executives
Oklahoma Primary Care Association
Oklahoma State Department of Health
Oklahoma State University
Oriental Healing Arts Institute
Phoenix Health Care
Pontotoc Technology Center
Radio Host - Aging Advocate
Saint Simeon's Episcopal Home
Shawnee Senior Center
Southwest Healthcare
Spanish Cove Retirement Village
State Council on Aging
Sunbeam Family Services
TMF Health Quality Institute
Tulsa City County Health Department
Tulsa Jewish Retirement and Health Center
University of Central Oklahoma
University of Central Oklahoma College of Nursing
University of Oklahoma
University of Oklahoma College of Nursing
University of Oklahoma College of Pharmacy
University of Oklahoma Medical Center Trauma Services
University of Oklahoma Physicians
United Way - Norman
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BACKGROUND OF THE PLAN

In 2015, the President of the Association of State and Territorial Health Officials (ASTHO) challenged states to implement evidence-based strategies to increase the number of older adults who are living well in communities across the nation. The ASTHO 2015 President's Challenge "aims to galvanize support for state health officials, their public health teams, [and] state and local experts in aging and a broad network of partners." The Oklahoma State Department of Health accepted the challenge to promote the health of older adults in Oklahoma by collaborating across sectors. To spread the word about the challenge and to engage partners, the Oklahoma State Department of Health, the Oklahoma Healthy Aging Initiative, and the Oklahoma Department of Human Services hosted the Governor's Healthy Aging Summit in December 2014. While the inaugural 2014 Summit was a call to collaborate, the April 2016 Summit concluded with the beginnings of action plans for four focus areas: prevent falls; increase physical activity; reduce depression; and improve nutrition among older adults.

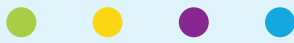
In November 2016, a Falls Prevention Workgroup was established to develop a state strategic plan to prevent falls among Oklahomans 65 years and older. The workgroup identified a central goal of reducing unintentional fall-related deaths among persons 65 years and older in Oklahoma by 13% by 2019. Additionally, the workgroup set a goal to reduce the number of nursing home residents falling with major injury by 44% by 2019. The workgroup met four times over 12 months and worked extensively on creating solutions to this problem. The recommended focus areas in this document are organized by the following areas of action:

- Tracking and Monitoring
- Policies and Procedures
- Public Education
- Provider/Prescriber Education

Falls are a major threat to the health and independence of aging Oklahomans. The consequences of a fall can be devastating, resulting in serious injury or death, in addition to high medical costs. Successful implementation of the state plan will have a positive impact on the health and safety of older adults, and give them the ability to age in the community environment of their choice.



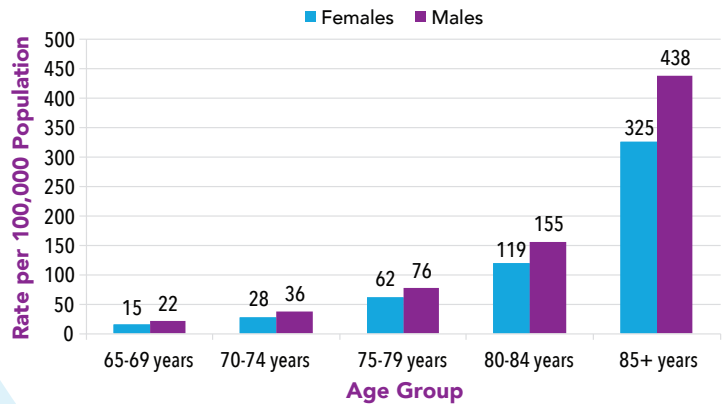
SCOPE OF THE PROBLEM



Nationally, falls are the leading cause of fatal and non-fatal injuries among adults 65 years and older. Every 20 minutes an older adult dies from a fall in the United States.¹ From 2011 to 2015, the rate of fall-related deaths among older adults in Oklahoma increased 30% to 92.3 per 100,000 in 2015 (55% higher than the U.S. rate).² According to the Oklahoma Hospital Discharge Database and Oklahoma Vital Statistics death data, falls result in the hospitalization of approximately 7,000 older adults and the death of more than 450 older adults each year.^{3,4} Acute care hospital charges alone total more than \$250 million. Older adults account for nearly three-fourths of all fall-related hospitalizations. Hospitalization rates increase with age; from 2012-2014 adults aged 85 years and older had hospitalization rates more than twice those of adults aged 75 to 84 years (3,818 and 1,458 hospitalizations per 100,000 population, respectively). Hospitalization rates are higher for females, while males have higher mortality rates.³

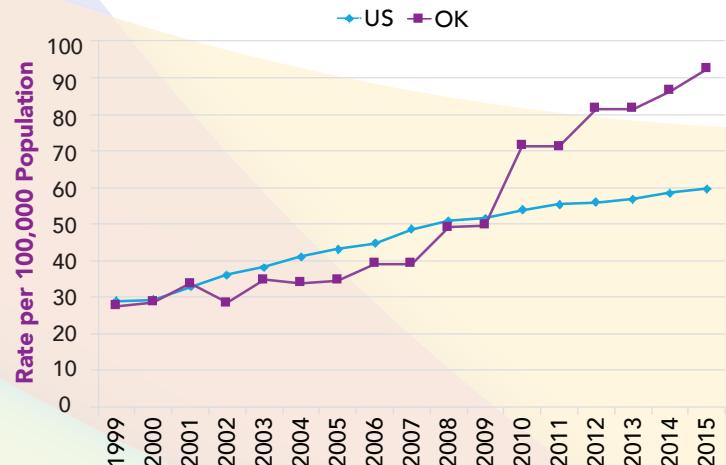
As older adults grow proportionally, so will the burden of fall-related injuries (e.g., hip fractures and traumatic brain injuries). These injuries take a toll on the health and independence of Oklahoma's older adults, the healthcare system, state resources, and other services.

Unintentional Fall-related Death Rates Among Persons 65 Years and Older by Age Group and Gender, Oklahoma, 2013-2015



Source: Oklahoma Vital Statistics, 2015

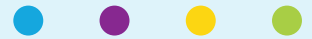
Unintentional Fall-related Mortality Rates Among Persons 65 Years and Older, United States and Oklahoma, 1999-2015



Source: CDC WISQARS

“Nationally, falls are the leading cause of fatal and non-fatal injuries among adults 65 years and older.”

COMMITMENTS TO ACTION



TRACKING AND MONITORING

Tracking and monitoring fall-related data are essential to understanding the scope of the problem, identifying high risk populations and high burden communities, and devising prevention strategies. In addition, assessments and/or evaluation tools help enhance the scope of knowledge on effective interventions to guide future plans.

STATE ACTION ITEMS

1. Develop by 2017 and disseminate by 2018 a standardized fall risk assessment and post fall evaluation form to be used within healthcare facilities. (Responsible: Oklahoma State Department of Health; Oklahoma Long-Term Care Ombudsman; Associations; quality improvement organizations)
2. Establish a statewide hospital emergency department discharge database, including fall-related injuries among older adults, by 2018. (Responsible: Oklahoma State Department of Health; Oklahoma Hospital Association)

POLICIES AND PROCEDURES

Leadership, partnership, and education are essential for organizational implementation of effective policies and/or procedures to reduce the risk of falls. Without a concerted effort among policy makers, researchers, health care providers, community and state organizations, the economic and societal burdens of falls will increase.

STATE ACTION ITEMS

1. Create a policy encouraging healthcare facilities to adopt a standardized fall risk assessment and post fall evaluation form by 2020. (Responsible: Oklahoma State Department of Health; Regulatory Boards)
2. Establish and maintain a web-based portal of fall prevention resources for Oklahoma's older adults, caregivers, families, and professionals by 2017. (Responsible: Oklahoma State Department of Health; Department of Human Services; Blue Ribbon Executive Council)

COMMUNITY ACTION ITEMS

1. Support implementation of the state policy and offer training to staff, residents, and family through 2020. (Responsible: Healthy Aging: Living Longer Better Collaborative)



“Leadership, partnership, and education are essential for reducing the risk of falls for Oklahomans.”

PUBLIC EDUCATION

Most falls happen in predictable, preventable ways. The first step in addressing the problem of falls is to raise public awareness of the problem; share prevention strategies; and build community support for solutions. Although there have been efforts to raise awareness, the rate of falls in Oklahoma is 55% higher than the national rate.



STATE ACTION ITEMS

1. Encourage the advisory committees for the Oklahoma Certified Healthy Programs to address falls among older adults in their application criteria by 2017. (Responsible: Oklahoma State Department of Health)
2. Distribute the Stopping Elderly Accidents, Deaths, and Injuries (STEADI) toolkit materials among Oklahoma older adults through libraries, county health departments, community centers, AAAs, municipal offices, and other stakeholders through 2020. (Responsible: Oklahoma State Department of Health; Associations; Regulatory Boards; Oklahoma Healthy Aging Initiative; Healthy Aging: Living Longer Better Collaborative; Oklahoma City County Health Department; Municipalities)
3. Create and deliver a comprehensive presentation on the prevalence of falls among older adults and fall prevention strategies, which may be modified as needed to educate various community groups through 2020. (Responsible: Oklahoma State Department of Health)
4. Develop and implement a statewide campaign to prevent older adult falls in Oklahoma through 2020. (Responsible: Oklahoma State Department of Health; Healthy Aging: Living Longer Better Collaborative)
5. Increase the number of communities offering evidence-based fall prevention programs, such as Tai Chi: Moving for Better Balance, through 2020. (Responsible: Oklahoma State Department of Health; Oklahoma Healthy Aging Initiative)

PROVIDER/PREScriBER EDUCATION

Falls are not an inevitable part of aging. Prescribers and dispensers play an important role in reducing falls among older adults. There are specific actions that health care providers can take to reduce the chances of a fall, and that are an integral part of the clinical practice.

- 1) Increase the number of healthcare providers utilizing the Stopping Elderly Accidents, Deaths, and Injuries (STEADI) fall risk assessment through 2020. (Responsible: Healthy Aging: Living Longer Better Collaborative; medical associations; Oklahoma State Department of Health)
- 2) Develop training curriculum to educate healthcare providers on fall prevention topics through 2020. (Responsible: Oklahoma State Department of Health; Healthy Aging: Living Longer Better Collaborative; Oklahoma Healthy Aging Initiative; University of Oklahoma College of Nursing; University of Oklahoma College of Pharmacy)



TRAINING SHALL INCLUDE THE FOLLOWING STANDARDIZED MODULES:

- a. Fall risk assessment tools
 - b. Reporting requirements
 - c. Medication review (prescriptions, over-the-counter medications, and supplements)
 - d. Physiological risk factors for falls
 - e. Clinical and community resources
 - f. FRAX application
 - g. Home hazards and modifications
 - h. Role of the pharmacist
- 3) Promote the Stopping Elderly Accidents, Deaths, and Injuries (STEADI) toolkit for pharmacists through 2020. (Responsible: Healthy Aging: Living Longer Better Collaborative; Oklahoma State Department of Health; medical associations)
 - 4) Increase the number of healthcare providers with a policy requiring staff to conduct post fall analysis to identify root cause through 2020. (Responsible: Healthy Aging: Living Longer Better Collaborative; Oklahoma State Department of Health; Medical Associations; Regulatory Boards)



CALL TO ACTION

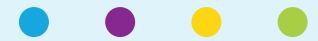
Falls are a threat to the health, safety, and quality of life of Oklahoma's older adults. As a state, we must take action to ensure collaborative efforts are being made to build state and community-level capacity to improve health outcomes. In order to meet the goals of this plan, a comprehensive multi-faceted approach is imperative to reducing fall-related deaths and injuries among adults aged 65 years and older. Join the Healthy Aging: Living Longer Better Collaborative in taking up the challenge to work together toward improving the quality of health and life for Oklahoma's older adults who deserve to be living longer better.

REFERENCES

- 1) Centers for Disease Control and Prevention (2017). Important Facts about Falls. Retrieved from <https://www.cdc.gov/homeandrecreationalafety/falls/adultfalls.html>. Accessed July 31, 2017.
- 2) Centers for Disease Control and Prevention (2017). National Center for Injury Prevention and Control: Web-based Injury Statistics Query and Reporting System (WISQARS). Retrieved from <https://www.cdc.gov/injury/wisqars/index.html>. Accessed July 31, 2017.
- 3) Oklahoma State Department of Health, Center for Health Statistics, Health Care Information Division, Oklahoma Hospital Discharge Database data, 2014.
- 4) Oklahoma State Department of Health, Center for Health Statistics, Health Care Information Division, Oklahoma Vital Statistics data, 2015.



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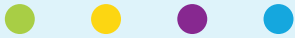
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