



Community Grant Outcome Report

Name: Northeastern Wisconsin Falls Prevention Coalition

Grantee: Bay Area Agency on Aging, Inc.

Academic Partner: n/a

Program: Development

Grant Duration: 11/01/2004 to 10/31/2005 (12 months)

Expenditures: \$25,000 of \$25,000 (100% expended)

Use of Funds: Build capacity

► **Description:** Integrate prevention strategies and information to reduce the number of falls and consequent morbidity and mortality for older adults living in Brown, Door, Kewaunee and Oconto counties, and the Oneida Nation.

► **Results:** The goal of the planning grant was to develop an ongoing Falls Prevention Coalition (NEW Fall Prevention Coalition) within four pilot counties and one tribe, and have the Coalition develop a comprehensive action oriented plan to assess fall risk and target proven interventions for residents 65 and older in the target communities. The grantee successfully created a dynamic and growing coalition with membership from health care and social service providers within the represented communities that met monthly, and each county/tribe developed and conducted an initial implementation of a model for successful fall-risk reduction. The Coalition also partnered with public and private health care and human service providers for the development of fall risk screening and risk evaluation tools, and held a kickoff to encourage utilization of evidence based best practice guidelines for fall risk identification with primary care providers.

► **Met Objectives:** Yes

► **Baseline Progress on SHP Objectives:** Not measured

► **Academic Partner Role:** No academic partner

► **Matched Dollars (cash or in-kind):** \$28,200

► **Dissemination:** None

► **Sustained:** The Coalition continued beyond WPP funding. The interventions planned in this grant may be sustained through advocacy efforts to support adding a falls prevention rehabilitation program as a new Medicare benefit. Such a program would be eligible to beneficiaries who have fallen or who are at high risk for falling, and would encompass a multifactorial risk assessment with a supervised exercise program. These issues are currently being brought the attention of Congress through the introduction of S.1531 Keeping Seniors Safe from Falls Act of 2005 to the senate and addition by CMS of a new ICD-9 code, V15.88, History of Falls on the list of diagnostic codes.