

Falls & Related Injuries among Older Canadians:

Fall-related Hospitalizations & Prevention Initiatives



By: Vicky Scott, Lori Wagar & Sarah Elliott

Fall-related Hospitalizations & Prevention Initiatives

April 30th, 2010

Prepared for: Division of Aging and Seniors
Public Health Agency of Canada

Prepared by:

Vicky Scott, PhD RN

Lori Wagar, MSc

Sarah Elliott, BSc

Citation:

Scott, V., Wagar, L., & Elliott, S. (2010). Falls & Related Injuries among Older Canadians: Fall-related Hospitalizations & Intervention Initiatives. Prepared on behalf of the Public Health Agency of Canada, Division of Aging and Seniors. Victoria BC: Victoria Scott Consulting.

Acknowledgement:

The authors thank the Canadian Institute for Health Information for providing the data on fall-related hospitalizations for older Canadians and the Public Health Agency of Canada for the funding of this project.

Disclaimer:

Every effort has been made to provide accurate information in this report. Any unintentional errors are those of the authors and not the funding agency.

Parts of this material are based on data and information provided by the Canadian Institute for Health Information. However, the analyses, conclusions and statements expressed herein are those of the authors, and not necessarily those of the Canadian Institute for Health Information.

Falls & Related Injuries among Older Canadians:

Fall-related Hospitalizations & Prevention Initiatives

By: Vicky Scott, Lori Wagar & Sarah Elliott

Table of Contents

| | |
|--|----|
| 1. Introduction | 3 |
| 2. Fall-related Hospitalizations Among Canadian Seniors | 4 |
| 2.1. Methodology | 4 |
| 2.2. Findings | 4 |
| 3. Scan of Fall and Fall-related Injury Prevention Initiatives in Canada | 12 |
| 3.1. Methodology | 12 |
| 3.2. Findings | 14 |
| 4. Discussion..... | 18 |
| 5. References | 20 |
| 6. Appendix 1: Definition of Terms | 22 |
| 7. Appendix 2: Questionnaire - Canadian Fall and Fall-Related Injury Prevention Programs | 23 |
| 8. Appendix 3: Epidemiological Data | 24 |
| 9. Appendix 4: Fall Scan Data..... | 25 |
| 10. Appendix 5: Scan of Canadian Fall and Fall-Related Injury Prevention Programs | 26 |

1. Introduction

The fall of an older person can have an enduring and devastating impact, resulting in injury, chronic pain, a reduced quality of life and, in severe cases, death. Almost half of those who fall experience a minor injury and between 5 and 25 percent suffer from more serious injury, such as a fracture or a sprain (Herman, Gallagher & Scott, 2006). Falls are the leading cause of injury-related hospitalizations among seniors (Public Health Agency of Canada, 2005). Falls are the cause of most hip fractures among seniors and 20% die within a year of the fracture (Public Health Agency of Canada, 2005). In addition, the psychological impact of a fall may result in a post-fall syndrome that includes dependence on others for daily activities, loss of autonomy, confusion, immobilization and depression (World Health Organization, 2008).

It is estimated that one in three persons over the age of 65 is likely to fall at least once each year (World Health Organization, 2008; Scott, Peck & Kendall, 2004; Tinetti & Speechley, 1989; O'Loughlin et al., 1993). In Canada, this translated into approximately 1.4 million seniors who fell at least once in 2005. With the number of older persons in Canada projected to increase from 4.2 million to 9.8 million between 2005 and 2036 (Human Resources and Skills Development Canada, 2010), the estimated number of older persons who will fall at least once in 2036 will increase to 3.3 million.

In 2004, adults aged 65 years and older accounted for about 13% of our population and direct health care costs for fall-related injuries were \$2.0 billion (SmartRisk, 2010). By 2031, it is projected that older adults will make up 24% of Canada's entire population and approximately \$4.4 billion will be spent on direct health care costs for fall-related injuries among this age population (SmartRisk, 2010).

The impact of falls among older persons on Canadians and the Canadian health care system has been recognized at national, provincial, and territorial levels. As a result, concerted efforts to reduce falls among older Canadians are being made throughout Canada. While many evidence-based fall prevention initiatives are well underway, barriers still exist to maximizing fall prevention efforts through the integration of clinically relevant and scientifically proven efforts into routine practices. These barriers include gaps in knowledge on an optimal method for standardized reporting of falls and fall-related injuries, an incomplete understanding of the scope of fall-related hospitalizations within each province and territory, and a lack of awareness on the nature and impact of existing prevention activities.

The following is an analysis of the Canadian hospitalization data for fall-related injuries among persons aged 65 years and older using a methodology that addresses issues of standardization. This is followed by the results of a scan of fall prevention programs currently operating across Canada. The appendices to this document include a list of definitions of terms, the survey tool used in the scan of programs, and the Canadian Institute for Health Information (CIHI) epidemiological data.

2. Fall-related Hospitalizations Among Canadian Seniors

2.1 Methodology

Data for this report come from the Discharge Abstract Database (DAD)¹. The analyses use an episode-based methodology, where all discharges, including transfers related to a given injury are counted as a single case. This methodology differs from the methodology used in previous reports such as the Report on Seniors' Falls in Canada (Public Health Agency of Canada, 2005) and Economic Burden of Injury Report (SMARTRISK, 2009). In these reports, a separation-based methodology is used, where each discharge or transfer is treated as an individual case of hospital separation. This distinction is important as it can impact the reported number of cases, the length of stay, and the direct hospital costs associated with falls. Specifically, the rates associated with hospital separations tend to be higher than the rates associated with episodes of care. This can lead to an overestimate of the demand for care, and an underestimate of the resource utilization involved in treating falls in acute care hospitals (i.e., length of stay). Thus, shifting from separations to episodes of care provides a more comprehensive view of the extent of acute care involved in treating fall related hospitalizations.

The analyses presented here include fall-related hospitalization episodes and rates, length of hospital stay, injury type, place of occurrence of the fall, and differences by age group and gender for seniors aged 65 and over for the year 2008/09. Hospitalizations with unknown age, gender, and/or gender coded as other were excluded. Definitions of terms used for these analyses are provided in Appendix 1.

2.2 Findings

In the year 2008/09, 53,545 Canadians aged 65+ were hospitalized for a fall. This translates into an age-standardized rate of 15.5 per 1,000 seniors. Figure 1 shows the age-standardized rate of fall-related hospitalizations for seniors in 2008/09². The rate is highest in the Territories (Nunavut, North West Territories and the Yukon), where the fall-related hospitalization rate is 18.3 per 1,000 seniors. However, these findings should be interpreted with caution due to the small number of cases (0.25 percent of the total number of cases for Canada). The Territories cover the northern-most area of Canada, where fall prevention efforts are just getting started in isolated pockets. While more investigation of fall prevention efforts in each province is needed before these findings can be fully explained, it may not be a coincidence that well-established fall prevention programming is found in three of the provinces with rates that are significantly lower than the Canadian rate – Ontario, Nova Scotia and British Columbia³.

¹ Discharge Abstract Database (DAD): This database captures administrative, clinical and demographic information on inpatient events from acute care hospitals in Canada. Quebec does not report to the DAD.

² Confidence intervals are provided to aid interpretation. The width of the confidence interval illustrates the degree of variability associated with the rate. Rates are estimated to be accurate within the upper and lower confidence interval 19 times out of 20 (95% confidence interval).

³ The rates for each province and the territories can only be compared to the Canadian rate and not to each other. The confidence intervals reflect the variability for the individual province/territory and do not take into account the variability between the provinces/territories,

Figure 1: Age-standardized Rate of Fall-Related Hospitalizations, Age 65+, 2008/09

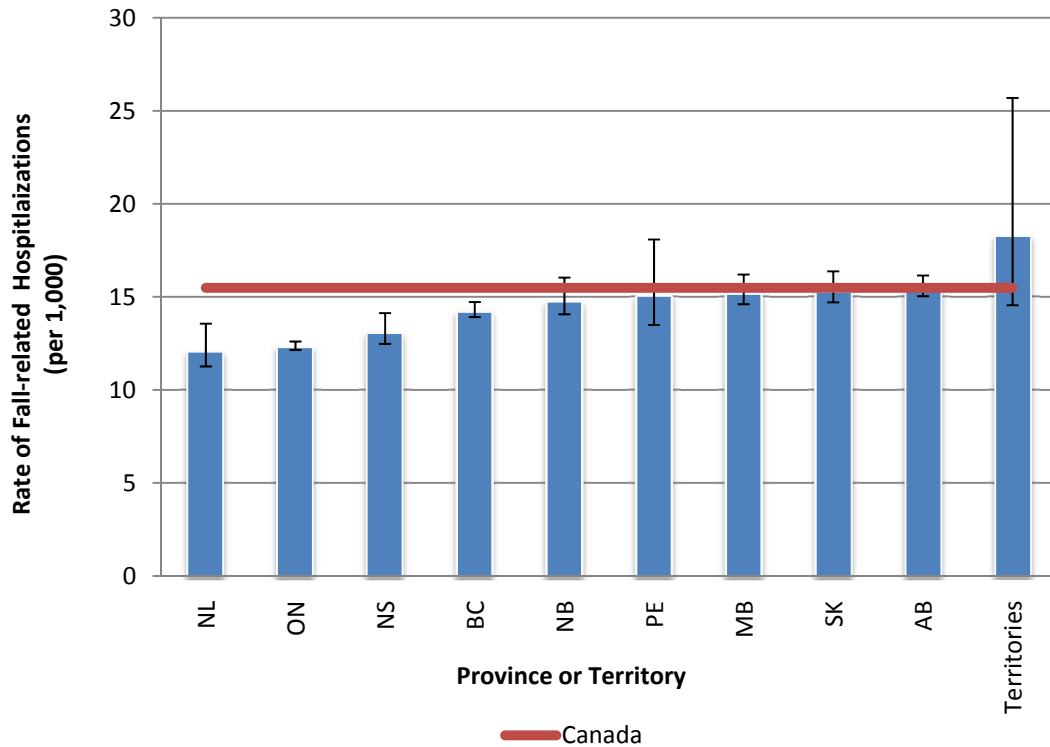


Figure 2 shows the crude rate by gender and age group for Canadians aged 65 and over for 2008/09. In 2008/09, the crude fall-hospitalization rate for women was 19.2 per 1,000 and the rate for men was 10.8 per 1,000. Canadian women aged 65-74 had rates of about 7.2 per 1,000 population, increasing to 52.7 per 1,000 in the 85 and over age group. Men had a similar rate to women in the 65-74 age group (5.2 per 1,000) but increased to only 35.0 per 1,000 in the 85 and over age group.

While both males and females have increasing rates of hospitalization by age, females were hospitalized for a fall at a higher rate than for males in comparable age groups. In addition, the rate of fall-related hospitalizations for females over 85 years of age is 7.2 times higher than that for females 65-74 years of age. The rate of fall-related hospitalizations for males over 85 years of age is 6.7 times higher than that for males 65-75 years of age.

Figure 2: Crude Rate of Fall-related Hospitalizations by Age and Gender, Canada, Age 65+, 2008/09

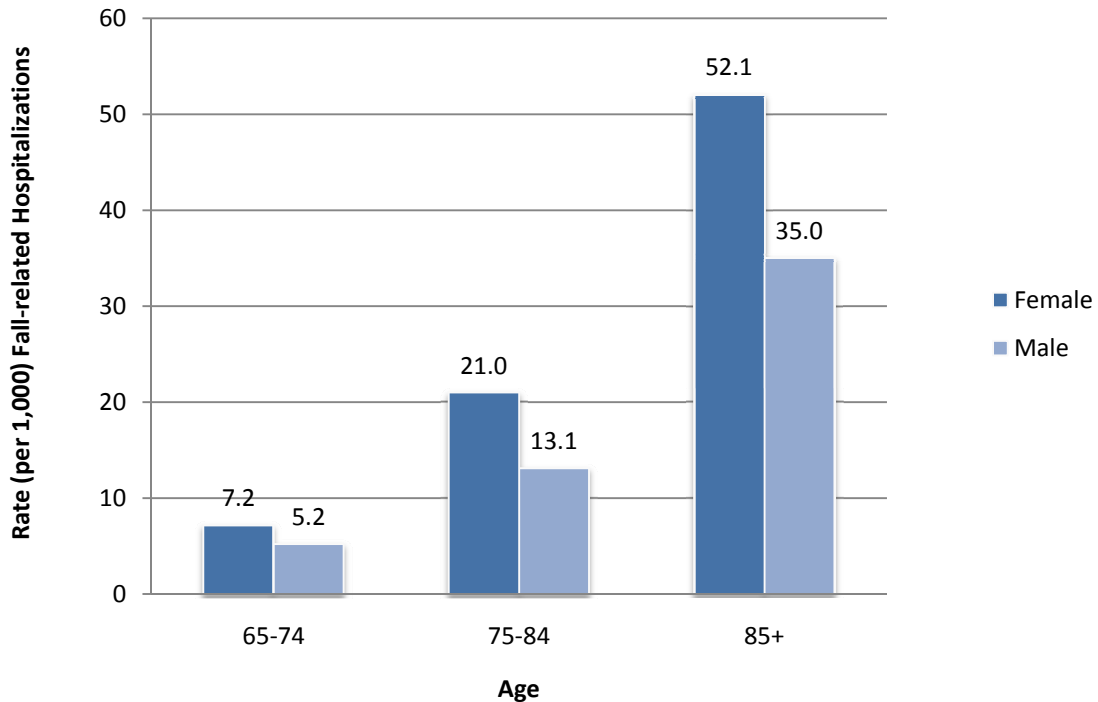


Figure 3 represents fall-related hospitalizations as a percentage of all injury-related hospitalizations among Canadian seniors. Fall-related injuries are the leading cause of injury hospitalization for seniors in all Canadian provinces and territories and comprise between 73% (Territories) and 88% (Nova Scotia) of all injury-related hospitalizations. Overall in Canada, fall-related hospitalizations (N=53,545) comprise 85% of all injury-related hospitalizations (N=62,945) among those aged 65 years and older.

When compared to all reasons for hospitalization among Canadian seniors, fall-related hospitalizations account for 7.3%, with Newfoundland having the lowest percentage (5.3%) and British Columbia having the highest (8.2%).

Figure 3: Percent of All Injury Hospitalizations for Seniors Related to a Fall, Age 65+, 2008/09

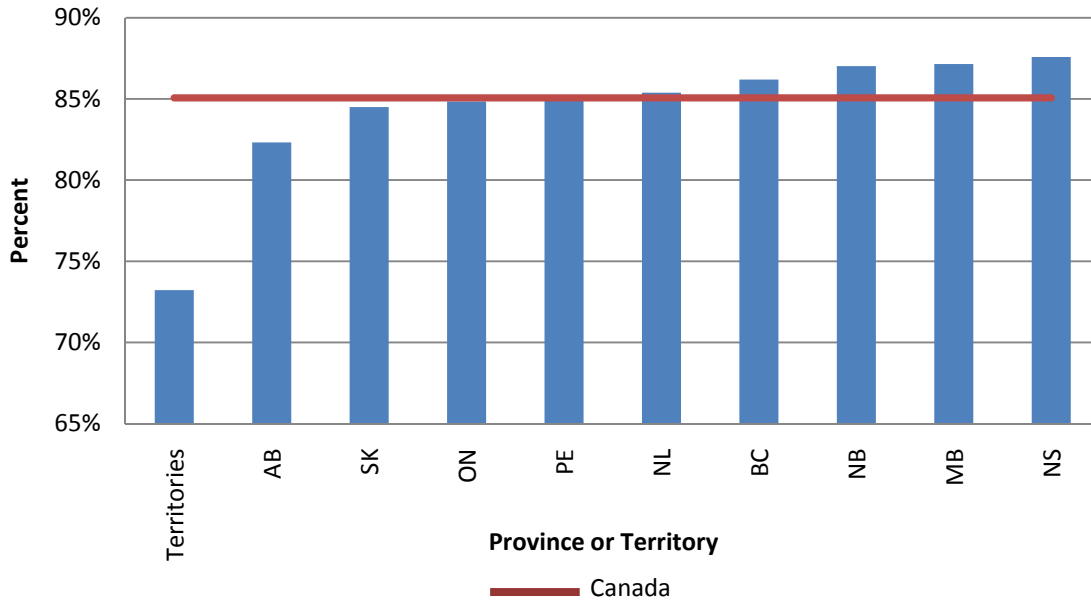


Figure 4 shows the place of occurrence of falls that led to a hospitalization for Canadians aged 65 and over for 2008/09⁴. Over half (51%) of falls resulting in hospitalization (N=27,306) occurred in or around the home. Falls in residential institutions accounted for 18% (N=9,462) of hospitalizations due to falls among those aged 65 and over.

⁴ Other includes: Street and highway, trade and service area, industrial and construction, farm, and other specified place

Figure 4: Place of Fall Occurrence, Age 65+, 2008/09

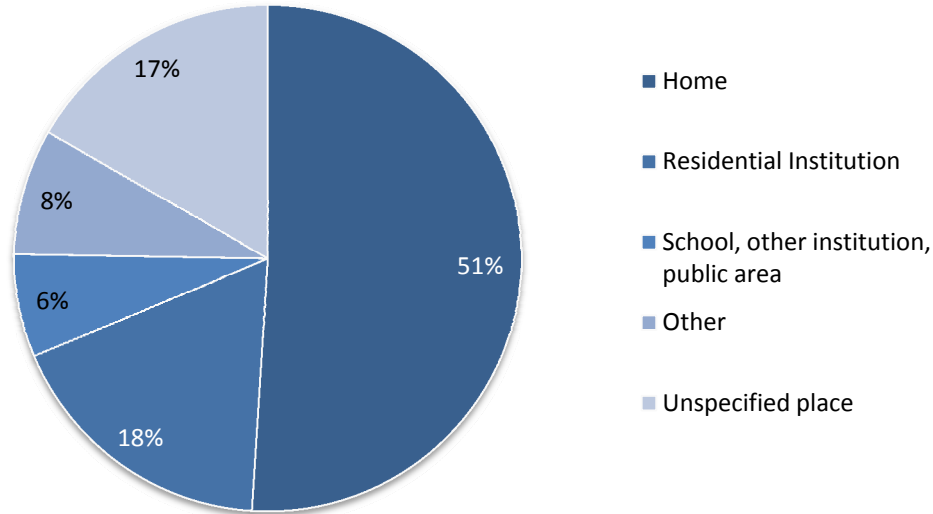
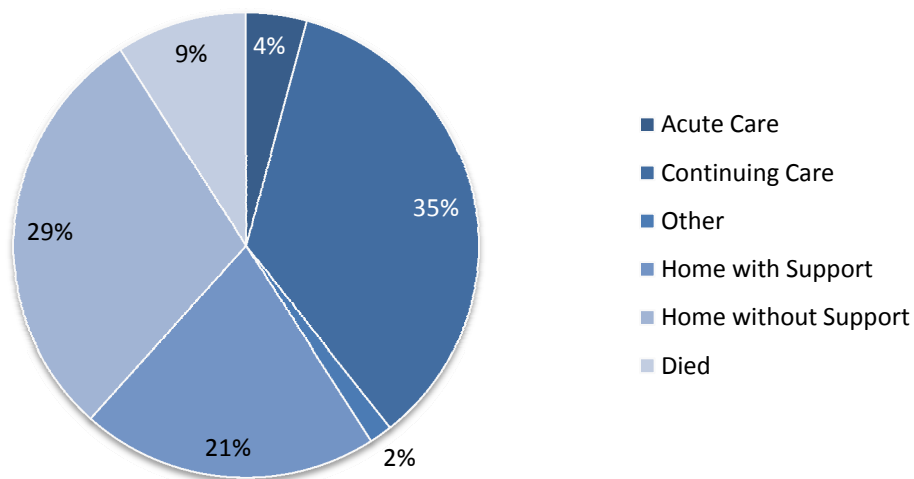


Figure 5 shows where Canadians over 65 years of age were discharged to after being hospitalized for a fall in 2008/09⁵. Thirty-five percent (N=18,800) of seniors discharged from a fall-related hospitalization were discharged to continuing care⁶ despite the fact that only 18% (N=9,462) of falls leading to hospitalization occurred in continuing care settings.

Figure 5: Fall-Related Hospital Discharge Disposition, Age 65+, 2008/09



⁵ Other includes other, signed out, and patients who do not return from a pass.

⁶ Residential care is also known as long-term care, nursing home or complex care.

Fall-related Hospitalizations & Prevention Initiatives

Figure 6 illustrates the type of fall-related injury grouped by hip fracture, other fracture, and other injury by province or territory. In Canada, 38% of all seniors who were hospitalized because of a fall sustained a hip fracture and 39% sustained other types of fractures. Of the discharges to continuing care, 68% were living outside of continuing care prior to their fall. Deaths for this figure represent in-hospital deaths only and may or may not be directly related to a fall injury.

Figure 6: Percent of Fall-Related Injury by Injury Type, Age 65+, 2008/09

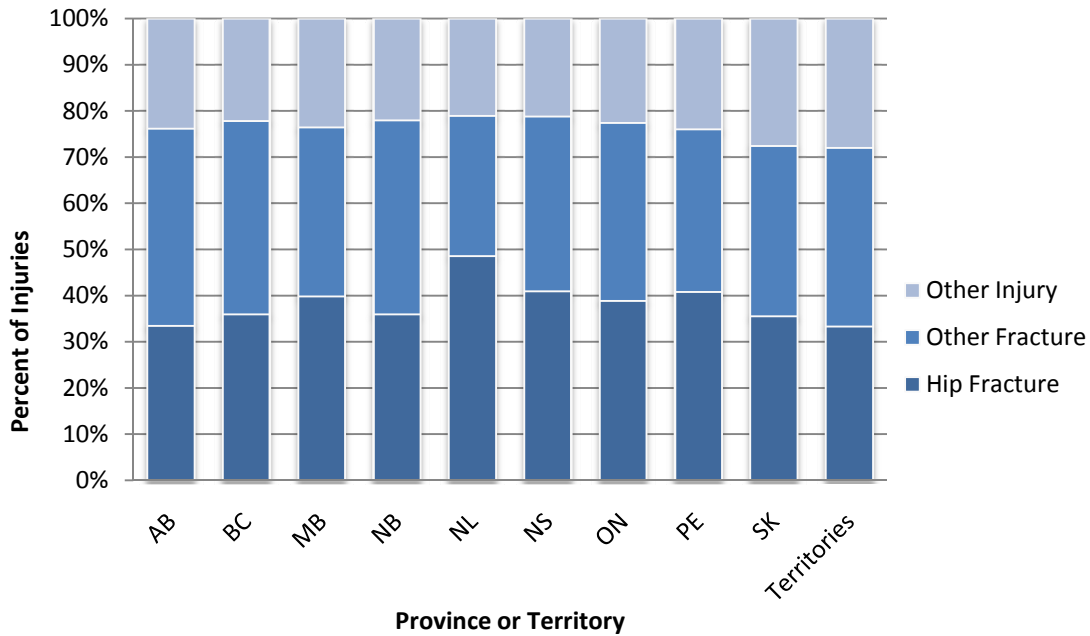


Figure 7 shows the percent of all hip fractures by province or territory that were related to a fall. Ninety-five percent (N=20,154) of all hip fractures in Canada (2008/09) were due to a fall. There is little variability between the provinces and territories.

Figure 7: Percent of Hip Fractures Related to a Fall

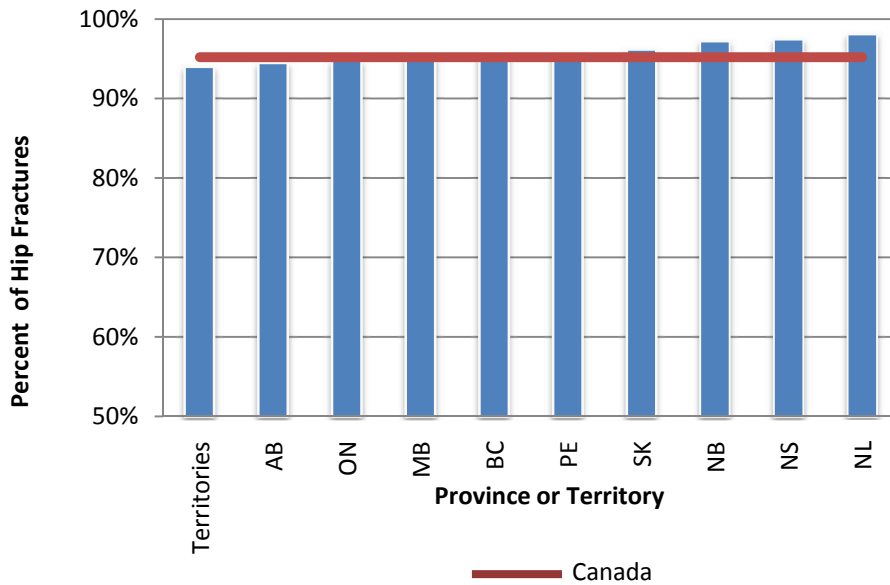


Figure 8 shows the average acute care length of stay for a fall-related injury and all other hospitalizations. The average acute length of stay for a fall-related injury was 70% longer (15.1 days) for Canada as a whole compared to the average length of stay for all other causes of hospitalization excluding falls (8.9 days) in 2008/09.

Figure 8: Mean Acute Length of Stay for Fall-Related Hospitalizations and All Other Hospitalizations, Age 65+, 2008/09

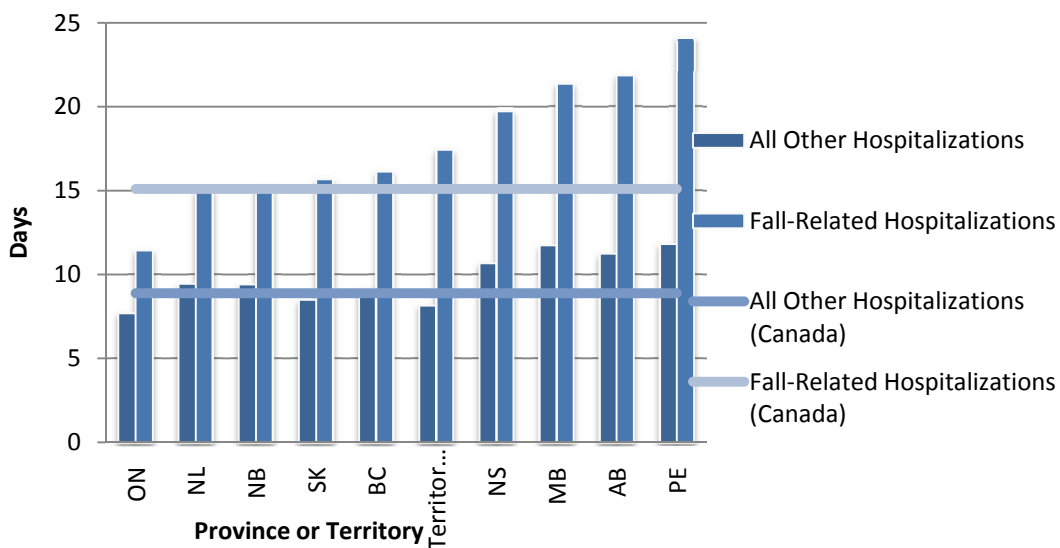
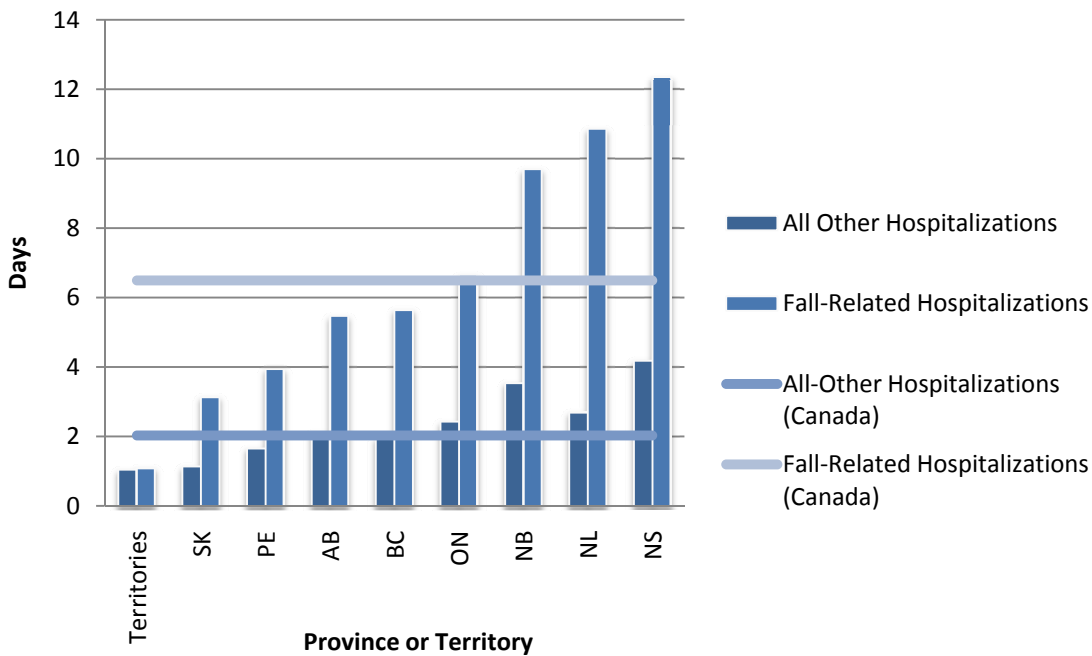


Figure 9 shows the mean alternate level of care (ALC) length of stay for fall-related hospitalizations and all other hospitalizations excluding falls⁷. The mean ALC length of stay for fall-related hospitalizations in Canada was over three times higher than the length of stay for all other hospitalizations in Canada (6.5 days versus 2 days). For all provinces and territories, the mean ALC length of stay is longer for fall-related hospitalizations than for all other hospitalizations. Across Canada, 67% of all fall-related ALC days were spent waiting for transfer into residential care in 2008/09.

Figure 9: Mean Alternative Level of Care Days, Falls and All Other Hospitalizations, Age 65+, 2008/09

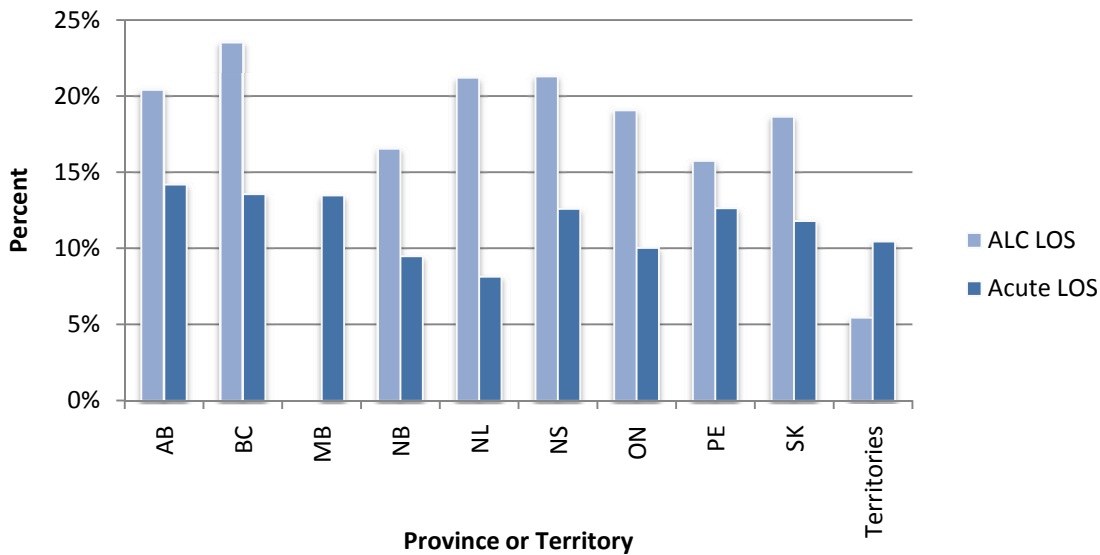


In 2008/09, fall-related hospitalizations accounted for 7.3% (N=53545) of the hospital cases for Canadians over 65 years of age. Fall-related hospitalizations accounted for 11.7% (808,671 days) of all acute hospitalization days and 19.9% (327,424) of all ALC hospitalization days. Figure 10 shows the percent of all acute and ALC hospitalization days accounted for by fall-related hospitalizations⁸.

⁷ For Manitoba, data on alternative level of care is not included.

⁸ For Manitoba, data on alternative level of care is not included.

Figure 10: Percent of All Acute and ALC days Accounted for by Fall-Related Hospitalizations, Age 65+, 2008/09



3. Scan of Fall and Fall-related Injury Prevention Initiatives in Canada

3.1 Methodology

The purpose of this scan is to identify the current status, location, overview and goals of fall prevention initiatives across Canada. It was determined that the most efficient way to contact a wide variety of stakeholders (researchers, clinicians, community programmers, university affiliates and policy makers) would be to utilize electronic media (ie- e-mail and internet searching).

Several electronic survey systems were reviewed, and the VOVICI EFM Continuum Survey System was selected. This survey system is customizable, easy to use and free to affiliates of the University of British Columbia. Additionally, the VOVICI System is an efficient tool for results analysis and has the flexibility for consolidating responses into several different report formats.

Stakeholder identification for the scan was conducted using the following methods:

- 1) Identifying existing relevant networks:
 - BC Fall and Injury Prevention Coalition
 - Canadian Fall Prevention Education Collaborative
 - Injury Prevention Centers, such as the BC Injury Research and Prevention Unit
 - Delegates from the Canadian Fall Prevention Conference

2) Hand searching of internet:

- Using the Google search engine, fall prevention initiatives were searched by Province/ Territory/ Region.
- Several search words were used, such as “British Columbia fall prevention”, “BC fall prevention”, “BC injury prevention”, “BC injury prevention for seniors”, “BC injury prevention for older adults”, “fall prevention older adults BC”, etc.
- Each Province/ Territory was subsequently searched with similar search engine key words.
- Search engine results were reviewed, and relevant programs added to an Excel spreadsheet database.

3) Snowball Sampling

- In the body of the e-mail, recipients were encouraged to forward the survey to all relevant networks and contacts.

This project was implemented by a Fall Prevention Scan research team comprised of fall prevention experts with knowledge of many national and provincial/territorial programs, and those familiar with on-line surveys. The content of the scan questionnaire was developed by the team based on a review of existing scans, including those by Scott and colleagues (2005) and the Public Health Agency of Canada (2001). Questions were designed to gather contact information, a project overview, and information specific to seniors’ fall prevention. A list of preliminary questions was entered into the VOVICI Survey System for review and testing by the research team. Following several modifications, the revised version was sent electronically to selected representatives of fall prevention stakeholders across Canada. Feedback from these colleagues was incorporated into the final version of the survey questionnaire.

Contact information for the first round of identified stakeholders was inputted into the VOVICI Survey System, and the following introductory e-mail message was sent:

“Hello! We are conducting a scan of all current fall and fall-related injury prevention programs in Canada. This project is funded by the Public Health Agency of Canada and lead by Dr. Vicky Scott, Senior Advisor on Fall and Fall-Related Injury Prevention with the BC Injury Research and Prevention Unit, BC Ministry of Healthy Living and Sport, and Centre of Excellence on Mobility, Fall Prevention and Injury in Aging (CEMFIA).

We have contacted you specifically because either a) we are familiar with your work and would like to ensure it is captured in the scan; b) an internet search showed that you are working on a topic related to fall and fall-related injury prevention for older adults and we would like to learn more; or c) colleagues have recommended you complete this survey by forwarding you the link. In all cases, we would appreciate your contribution to this scan by completing the survey.

This survey will take approximately 5-10 minutes to complete, per program/ initiative/ research study. We ask that you complete a separate survey for each initiative - for instance, if you run one program for older adults in the community, and another program targeting older adults in assisted living, please submit these as two separate surveys.

We ask that all responses be submitted by Friday, March 5th, 2010. If you have any questions, please contact Sarah Elliott at sarah.elliott@gov.bc.ca or (250) 952-2113. Results of this survey will be presented at the Canadian Fall Prevention Conference, March 22 & 23, 2010 in Vancouver, BC, and will be compiled into a report for the Public Health Agency of Canada.

Thank you!"

The following was also added in the body of the e-mail:

"We also request that you forward this survey link to any of your networks or colleagues who may have initiatives to contribute to the scan."

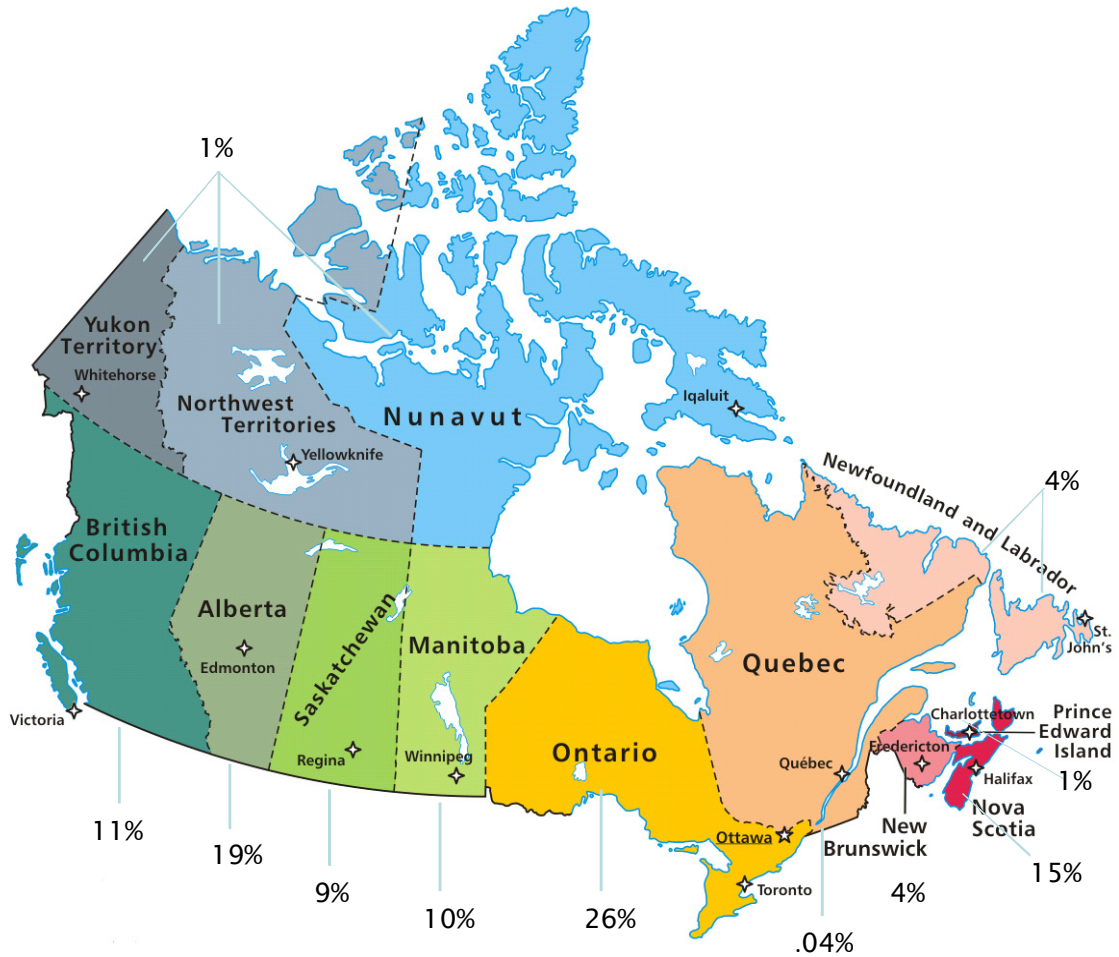
The survey link and above message was distributed to 796 e-mail addresses on Tuesday February 23, 2010 with a request to forward the e-mail to other relevant stakeholders. Recipients of the survey link were advised to submit their responses by Friday March 5, 2010. A number of stakeholders contacted the research team with difficulties accessing the survey system link from their work computers. To address this issue, these recipients were provided the Microsoft Word version of the questionnaire and asked to return this document via e-mail, by March 5, 2010.

A total of 208 completed scan questionnaires were received by the required date. Following this, the research team was advised by delegates of the Canadian Fall Prevention Conference (Vancouver BC, March 22-23, 2010) that some stakeholders in attendance had not received the survey questionnaire or had not had the opportunity to complete it before the requested deadline. In an effort to include every possible relevant Canadian fall prevention initiative, the survey was re-opened on Friday March 26th, 2010 for an additional two weeks. All distribution lists were notified of this additional opportunity to complete the survey. At the conclusion of the second distribution of the survey, a total of 282 completed survey responses were received. The data collected were analyzed and sorted by Province/ Territory and initiative type. Additional hand searching of the internet for specific programs was conducted to fill in any gaps for incomplete survey responses. A summary of the results are presented here, with in-depth findings presented in the appendices.

3.2 Findings

Response Sample: The distribution of the 282 replies received is illustrated in Figure 11 below for each province and the territories. The greatest number of responses came from Ontario, and the fewest were from Quebec. Only one response was received from Quebec and this is likely due to the lack of a French translation of the survey questionnaire.

Figure 11: Distribution of Fall Scan Responses by Province and Territories

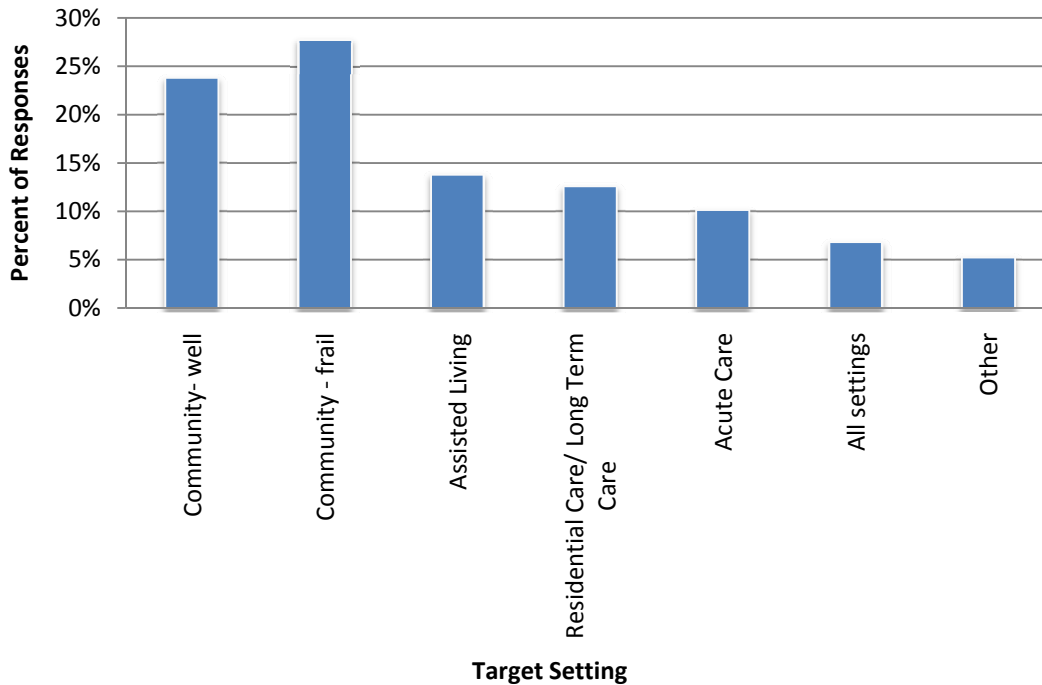


Of the responses received, 48% (N=122) identified themselves as a ‘Practitioner/ Health Care Provider’, 10% (N=25) as a ‘Community/Social Worker’, 4% (N=11) as a ‘Policy Analyst/Government Representative’, 3% (N=8) as a ‘Researcher’ and 35% (N=90) as ‘Other’. Examples of titles classified as “other” included Educators, Professors, and Managers.

Figure 12 illustrates how respondents identified the target setting of their program. Twenty-eight percent (N=159) of respondents identified that their initiative, program, or research study targeted ‘Community –frail’ and 24% (N=136) targeted ‘Community-well’ settings. In addition, 13% (N=72) identified ‘Residential Care or Long-term Care’ as the target setting, 10% (N=58) identified ‘Acute Care’,

7% (N=39) identified as 'All Settings'. Seven percent (N=30) identified the target setting of their initiative, program, or research study as 'Other'. Examples of 'Other' include rehabilitation, mental health and addictions services, emergency room setting and affordable housing programs for seniors

Figure 12: Target setting of Initiatives, Programs, or Research Studies Reported



Sixty-four percent (N=130) of respondents identified their initiative, program, or research study as a 'New, Evidence-based Part of Regular Practice', 34% (N=68) as a 'Stand-alone Project' and 2% (N=4) as 'Other'. Examples of 'Other' include programs where fall prevention was one component of the larger organization, a part of a research project, or a stand-alone phase of a project that is transitioning to regular practice based on evidence of effectiveness.

Sixty-four percent (N=176) of respondents identified that their initiative, program, or research study was delivered 'Locally', 12% (N=34) as delivered 'Nationally', 12% (N=33) as delivered 'Provincially or Territorially', and 12% (N=32) as 'Other'. Examples of Other include programs delivered regionally (at the health-authority wide level) and programs delivered only at one site.

Eighty-six percent (N=236) of respondents identified their initiative, program, or research study as serving 'More than 50 seniors', while 13% (N=35) served '11-50 seniors', and 1% (N=2) served '1-10 seniors'.

Figure 13 shows that of the respondents identified as involved in policy (N=118), 33% (N=39) described their initiative as involving 'Standardization' (such as data collection, reporting, risk factor screening, etc.), 21% (N=25) as involving 'Strategic Planning', 19% (N=23) as involving 'Guideline Implementation', 1% (N=1) as involving 'New Legislation', 0% (N=0) as involving 'Regional, Provincial, Federal Policy' and

25% (N=30) as 'Other'. Examples of 'Other' include organizational standardization, delivery of workshops/ facilitator of the information, individual assigned to monitor accreditation readiness and funding applicant.

Figure 13: Nature of Policy Initiatives Reported

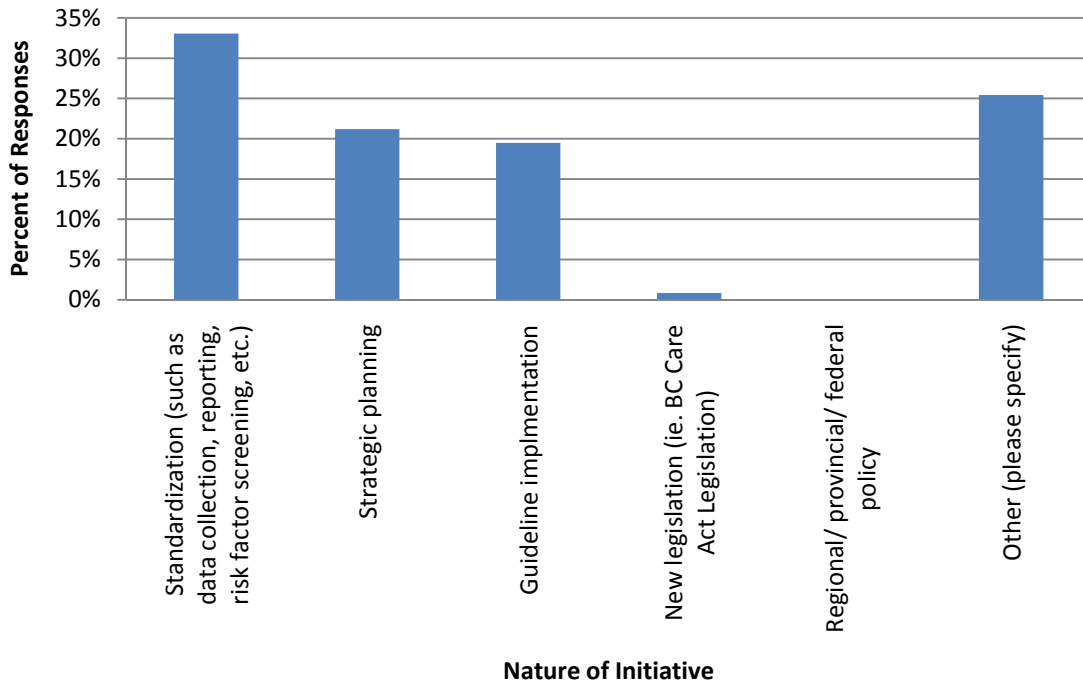
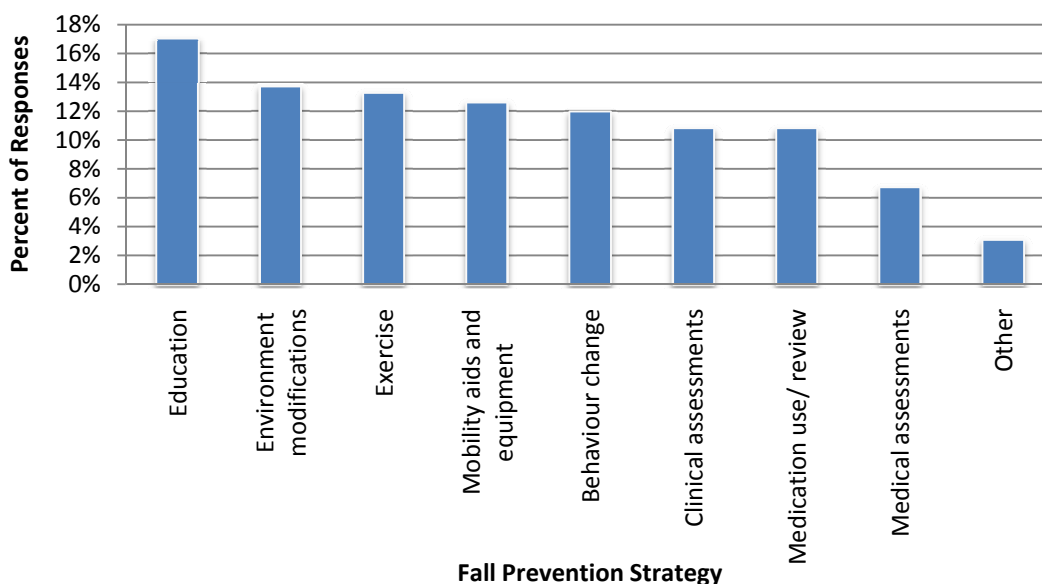


Figure 14 illustrates the type of fall or fall-related injury prevention strategies used in initiatives/ programs/ research studies. Seventeen percent (N=264) of respondents identified using 'Education', 14% (N=212) identified using 'Environmental Modifications', 13% (N=205) identified using 'Exercise', 13% (N=195) identified using 'Mobility Aids and Equipment', 12% (N=185) identified using 'Behaviour Change', 11% (N=167) identified using 'Clinical Assessments and/or Medication use or Review', 7% (N=104) identified using 'Medical Assessments'. Three percent (N=48) identified using 'Other' fall or fall-related strategies. Examples of the 'Other' strategies included fear of falling counseling, peer-to-peer support, mentoring and education, knowledge transfer and exchange, and research.

Figure 14: Fall or Fall-Related Injury Prevention Strategies Reported



Thirty-nine percent (N=97) of respondents reported having ‘Site-specific’ (in-house or in-kind) funding for their fall prevention initiatives/ programs/ research studies while 26% (N=64) had ‘Provincial or Territorial’ funding, 13% (N=33) had ‘Regional or Municipal’ funding, 5% (N=12) had ‘Federal Government’ funding and 0.4% (N=1) had ‘National Research’ funding. Seventeen percent (N=41) identified having ‘Other’ funding sources for their fall-prevention initiatives/ programs/ research studies. Examples of ‘Other’ funding sources included private grants, funding from provincial research organizations, and hospital district budgets.

4. Discussion

The findings of the data on hospitalizations show that fall-related injuries are a serious problem among our older population. With the number of Canadians aged 65 years and older projected to increase from 4.6 million in 2008 to 9.8 million in 2036, this could mean that the number of fall-related hospitalizations could more than double from 53,545 to 114,074 within this time. With an average length of stay of 15.1 days, this could translate to a need for the equivalent of thirteen additional 200-bed hospitals, where all of the beds would be filled with older adults with fall-related injuries every day of the year. However, the impact will not only be on acute care beds. Findings show that 35% of seniors hospitalized for a fall-related injury are discharged to continuing care settings, including 17% who were community-dwelling prior to their admission.

The findings also point to a wide range of differences in fall-related hospitalization rates across the provinces and territories compared to the Canadian rate. These findings need more investigation to

determine why these differences exist, with the potential to learn from the successes of provinces with the lower rates.

Disproportionate rates of fall-related hospitalizations are also found for women compared to men, particularly among the older age group of 85+. The rate among women aged 85 years and older is one third greater than for men of that age. This may be explained by the higher incidence of osteoporosis among women compared to men, but may also be due to muscle weakness and social indicators, such as living alone.

The burden on the health care system due to fall injuries is accentuated with the contribution of alternative level of care days for fall-related hospitalizations among older adults. In addition to the 15.1 days for the average length of stay, the alternative level of care days (after the acute care phase has ended) contributes an additional average of 6.5 days per person. None of the economic burden calculations take into account the cost of home care, rehabilitation, medications or family contributions after discharge.

The good news is that this scan of fall and fall-related injury prevention programs in Canada revealed a significant increase in the number of initiatives compared to earlier scans. Since the first scan in 2001 (Scott et al., 2001), there has been a 70% increase in the number of fall-related initiatives. Since the most recent scan in 2005 (Public Health Agency of Canada, 2005), the number of fall prevention initiatives has increased from 195 initiatives to the current 282. It is also encouraging to see that these increases are seen in most provinces. In addition, there is now more variety, with fall prevention programs now found in emergency departments, more found in acute care settings, and fall prevention programs now reported in mental health/ addictions services.

The findings also show a greater focus on peer-to-peer mentoring, such as educating seniors to educate their friends, advertising and marketing designed to reach older adults, and peer-led workshops and discussion groups. An encouraging finding is that 98 of the 282 programs (34.5%) commenced in the past 16 months (January 2009 – April 2010), despite ongoing economic challenges that impact most regions. The majority of programs are now reporting a multifactorial approach to fall prevention that reflect the elements taught in the Canadian Falls Prevention Curriculum known as the BEEACH model, which stands for: Behaviour Change; Educations; Equipment; Environment; Activity; Clothing and Footwear; and Health Management (Scott et al., 2007). Eighty-four percent of the programs reach over 50 participants and 22% are offered at a national or provincial/territorial level. Another important aspect of the current fall prevention initiatives is that almost half are reported as being part of regular practice.

In conclusion, the impact of fall related injuries among the older Canadian population is staggering. Not only in terms of the number of cases and the impact on the health system, but most importantly, the vast scope of preventable suffering, disability and even death. The growing number of initiatives is encouraging and the ultimate goal of integration into health care practice of evidence-based initiatives appears to be emerging. However, efforts will need to be doubled to keep pace with our rapidly aging population. This includes new research to validate existing strategies and test new ones. Increased

efforts are also needed to translate evidence into practical solutions to guide health care practice and policy. Vulnerable populations, such as aboriginal elders, those with dementia, those living in isolated regions or those living in poverty require more efforts to tailor evidence to meet their specific needs. Without these efforts, the impact of falls and fall-related injuries could overwhelm our health care system and significantly reduce the quality of life for our elderly citizens.

References

Division of Aging and Seniors. (2005). *Report on Seniors' falls in Canada*. Ottawa: Public Health Agency of Canada.

World Health Organization. (2008). *Global Report on Falls Prevention in Older Age*. Geneva: World Health Organization.

Herman, M., Gallagher, E., & Scott, V. (2006). *The evolution of seniors' falls prevention in British Columbia: BC Ministry of Health Services*.

Human Resources and Skills Development Canada. Retrieved April 28, 2010 from:
http://www.hrsdc.gc.ca/eng/publications_resources/research/categories/population_aging_e/madrid/page04.shtml.

O'Loughlin, J.L., Robitaille, Y., Boivin, J-F., & Suissa, S. (1993). Incidence of and risk factors for falls and injurious falls among the community-dwelling elderly. *American Journal of Epidemiology*, 137: 342-354.

Public Health Agency of Canada. (2003). *Listing of initiatives for falls prevention among seniors living in the community*. Ottawa: Division of Aging and Seniors, Health Canada.

Public Health Agency of Canada. (2005). *Inventory of Fall Prevention Initiatives in Canada – 2005*. Ottawa: Division of Aging and Seniors, Public Health Agency of Canada.

Scott, V., Dukeshire, S., Gallagher, E., & Scanlan, A. (2001). *An inventory of Canadian Programs for the Prevention of Falls among Seniors Living in the Community*. Prepared on behalf of the Federal/Provincial/Territorial Committee of Officials (Seniors) for the Ministers Responsible for Seniors. Ottawa: Public Works and Government Services Canada.

Tinetti, M.E., & Speechley, M. (1989). Prevention of falls among the elderly. *New England Journal of Medicine*, 320(16):1055-9.

Scott, V., S. Lockhart, et al. (2007). *Canadian Falls Prevention Curriculum*. Vancouver: BC Injury Research & Prevention Unit.

Fall-related Hospitalizations & Prevention Initiatives

Scott, V., Peck, S. & Kendall, P. (2004). *Prevention of Falls and Injuries Among the Elderly: A Special Report from the Office of the Provincial Health Officer*. Victoria BC: Provincial Health Office, BC Ministry of Health Services.

SmartRisk, April 26, 2010. Personal communication based on an extension of the study that provided data to *The Economic Burden of Injury in Canada*, (SmartRisk, 2009).

Appendix 1

Definition of Terms

Appendix 1:

Definition of Terms

Acute Care: Acute care includes the portion of a hospitalization's total length of stay in which active treatment is received.

Age: Age was calculated as patients' age, in years, at the time of admission.

Age-standardization: Age standardized rates were calculated using the direct standardization method. Statistics Canada's 1991 population was used as the standard population.

Alternative Level of Care: Alternative level of care (ALC) includes the portion of a hospitalization's total length of stay which is non-acute. These non-acute hospital days capture hospital beds that are being occupied by patients who no longer need acute services, using limited, expensive resources while they wait to be discharged to a more appropriate setting.

Discharge Disposition: Discharge Disposition was determined by the final abstract in the episode of care. Discharge Disposition is a component of DAD that denotes the place where the patient went after leaving the hospital. Discharge Disposition categories are as follows:

- Transferred to acute
- Transferred to long term care facility
- Transferred to other - palliative care
- Discharged to a home setting with support
- Discharged home
- Signed out
- Died

Crude rate: A crude rate is the unadjusted number of hospitalizations divided by the total population occurring in a specified population per year.

Fall Related Hospitalization: Hospitalizations from acute care hospitals in Canada involving an unintentional fall as defined by select ICD-10-CA Codes. The variable was derived by looking across all Diagnosis codes in the discharge records associated with a given episode of care. External Cause of Injury Codes used to identify Unintentional falls are as follows: ICD-10-CA codes W00-W19.

Hip Fracture: Hospitalizations from acute care hospitals in Canada involving a hip fracture as defined by select ICD-10-CA codes. The variable was derived by looking across all Diagnosis codes in the discharge records associated with a given episode of care. ICD-10-CA codes used to indicate a hip fracture are: S72.0, S72.1, S72.2.

Fall-related Hospitalizations & Prevention Initiatives

In-hospital Deaths: An admitted patient who dies during his/her hospital stay after admission but before discharge. Deaths that occur at the scene, during transport to hospital or in the Emergency Department before admission to hospital are not captured.

Injury Hospitalizations: Hospitalizations from acute care hospitals in Canada involving an injury as defined by select ICD-10-CA Codes. The variable was derived by looking across all Diagnosis codes in the discharge records associated with a given episode of care. External Cause of Injury Codes used to identify Injury Hospitalizations are as follows:

- V01-V99 Transport incidents
- W00-W19 Unintentional falls
- W20-W45, W49 Exposure to inanimate mechanical forces
- W50-W60, W64 Exposure to animate mechanical forces
- W65-W70, W73, W74 Unintentional drowning and submersion
- W75, W76, W77, W81, W83, W84 Other unintentional threats to breathing except due to inhalation of gastric contents, food, or other objects
- W85-W94, W99 Exposure to electric current, radiation and extreme ambient air temperature and pressure
- X00-X06, X08, X09 Exposure to smoke, fire and flames
- X10-X19 Contact with heat and hot substances
- X30-X39 Exposure to forces of nature
- X50 Overexertion and strenuous or repetitive movements
- X52 Prolonged stay in weightless environment
- X58-X59 Unintentional exposure to other and unspecified factors
- X70-X84 Intentional self-harm, excluding poisoning
 - X86, X91-X99, Y00-Y05, Y07-Y09 Assault, excluding poisoning
 - Y20-Y34 Event of undetermined intent, excluding poisonings
 - Y35-Y36 Legal intervention and operations of war

Injury Place: Injury Place was determined by the first abstract in the episode of care. Injury Place is a component of ICD coding system that denotes the place where the injury occurred. Injury Place categories are as follows:

- U98.0 – Home
- U98.1 – Residential institution

Fall-related Hospitalizations & Prevention Initiatives

- U98.2 – School other institution and public area
- U98.3 – Sports and athletics area
- U98.4 – Street and highway
- U98.5 – Trade and services
- U98.6 – Industrial and construction area
- U98.7 – Farm
- U98.8 – Other specified place of occurrence
- U98.9 - Unspecified place of occurrence

Population: The reference population used to calculate rates was forecast, assuming a linear increase, using Statistics Canada's census populations from 2001 and 2006.

Province: Province was determined by patients' health card issuing province.

Questionnaire - Canadian Fall and Fall-Related Injury Prevention Programs and Initiatives

Appendix 2:
Questionnaire for the Scan of Canadian Fall and Fall-Related Injury Prevention Programs

1) Name: _____

2) Organization: _____

3) E-Mail Address: _____

4) Phone Number (10 digits): - - - - - - - - - -

5) Mailing Address:

6) Website/ URL: http://

7) Select the title that best reflects your roll in fall prevention:

- Practitioner/ health care provider
- Researcher
- Policy Analyst or policy/ Government representative
- Community Worker/ Social Worker
- Other (please specify)

If you selected other, please specify: _____

8) Please tell us the title or name of your initiative/ program/ research study related to fall prevention: _____

9) What is the target setting of your initiative/ program/ research study? Choose all that apply:

- Community - well
- Community - frail
- Assisted Living
- Residential Care/ Long Term Care

Fall-related Hospitalizations & Prevention Initiatives

- Acute Care
- All settings
- Other (please specify)

If you selected other, please specify: _____

10) What was or is the start date of your initiative/ program/ study? YYYY-MM-DD

11) What was or is the projected end date of your fall prevention initiative/ program/ research study? If it is ongoing with no scheduled end date, please type "ongoing". YYYY-MM-DD

12) Is your initiative/ program/ research study:

- A stand-alone project
- A new, evidence-based part of regular practice
- Other (please specify)

If you selected other, please specify: _____

13) Briefly list the goals and objectives of your fall prevention initiative/ program/ research study:

14) Is your initiative/ program/ research study offered:

- Nationally (Canada-wide)
- Provincially/ Territorially
- Locally
- Other (please specify)

If you selected other, please specify: _____

15) If you are a manager, administrator, or another way involved at the policy level, please describe the nature of your initiative:

- New legislation (i.e. BC Care Act Legislation)
- Guideline implementation
- Standardization (such as data collection, reporting, risk factor screening, etc.)

Fall-related Hospitalizations & Prevention Initiatives

- Strategic planning
- Regional/ provincial/ federal policy
- Other (please specify)

If you selected other, please specify: _____

16) Approximate number of people served per year:

- 1 - 10
- 11 - 50
- Greater than 50

17) What fall or fall-related injury prevention strategies do you use in your initiative/ program/ research study?

- Education
- Exercise
- Behaviour change
- Environment modifications
- Clinical assessments
- Medical assessments
- Medication use/ review
- Mobility aids and equipment
- Other (please specify)

If you selected other, please specify: _____

18) How is your initiative/ program/ research study funded?

- Site-specific (in-house or in-kind funding)
- Regional/ municipal funding
- Provincial/ Territorial *
- CIHR
- NSERC
- SSHERC
- CHSRF
- Federal Government *
- Other (please specify)

If you selected other, please specify: _____

Fall-related Hospitalizations & Prevention Initiatives

19) In Question 18 (above), if you selected an answer marked with an asterisk (*), please tell us the name of the funding program:

20) Additional comments and future fall prevention plans:

21) Please check this box if you DO NOT want to be contacted for further information by the survey results analysts.

Please DO NOT contact me

Thank you for your contribution to our fall prevention scan. If you would like more information about the final scan results, in April please contact Sarah Elliott at sarah.elliott@gov.bc.ca

Appendix 3

Epidemiological Data

Appendix 3:
Epidemiological Data

Age-standardized Rate of Fall-Related Hospitalizations, Age 65+, 2008/09

| Province/Territory | Age-Standardized FRH Rate per 1,000 | Lower Confidence Interval | Upper Confidence Interval |
|---------------------------|--|----------------------------------|----------------------------------|
| NL | 12.03 | 11.27 | 12.80 |
| ON | 12.30 | 12.15 | 12.46 |
| NS | 13.03 | 12.48 | 13.58 |
| BC | 14.19 | 13.92 | 14.46 |
| NB | 14.73 | 14.07 | 15.39 |
| PE | 15.03 | 13.50 | 16.56 |
| MB | 15.14 | 14.61 | 15.68 |
| SK | 15.27 | 14.71 | 15.82 |
| AB | 15.41 | 15.04 | 15.79 |
| Territories | 18.27 | 14.56 | 21.98 |
| | | | |
| Canada | 15.49 | 15.36 | 15.62 |

Fall-related Hospitalizations & Prevention Initiatives

Crude Rate of Fall-related Hospitalizations by Age and Gender, Canada, 2008/09

| Falls | | | |
|--|--------|--------|--------|
| | 65-74 | 75-84 | 85+ |
| Female | 6786 | 14075 | 16134 |
| Male | 4541 | 6746 | 5263 |
| | 11327 | 20821 | 21397 |
| Population (FY 2008, estimated) | | | |
| | 65-74 | 75-84 | 85+ |
| Female | 944691 | 670914 | 309891 |
| Male | 866957 | 514542 | 150175 |
| | | | |
| Crude FRH Rate per 1,000 | | | |
| | 65-74 | 75-84 | 85+ |
| Female | 7.18 | 20.98 | 52.06 |
| Male | 5.24 | 13.11 | 35.05 |

Percent of All Injury Hospitalizations for Seniors Related to a Fall

| | FRH | Injuries | Hospitalizations |
|-------------|-------|----------|------------------|
| AB | 6597 | 8014 | 83976 |
| BC | 10670 | 12380 | 130383 |
| MB | 3105 | 3563 | 39402 |
| NB | 1930 | 2218 | 31852 |
| NL | 946 | 1108 | 17928 |
| NS | 2150 | 2455 | 29732 |
| ON | 24795 | 29226 | 355172 |
| PE | 370 | 435 | 5595 |
| SK | 2889 | 3419 | 42650 |
| Territories | 93 | 127 | 1792 |
| | | | |
| Canada | 53545 | 62945 | 738482 |

Fall-related Hospitalizations & Prevention Initiatives

Place of Fall Occurrence

| | Injury Place | FRH |
|--------|--|------------|
| Canada | Home | 27306 |
| Canada | Residential Institution | 9462 |
| Canada | School, other institution, public area | 3529 |
| Canada | Sports and athletic area | 232 |
| Canada | Street and highway | 1645 |
| Canada | Trade and service area | 1214 |
| Canada | Industrial and construction | 31 |
| Canada | Farm | 81 |
| Canada | Other specified place | 1108 |
| Canada | Unspecified place | 8930 |

Fall-Related Hospital Discharge Disposition

| | Discharge Disposition | FRH |
|--------|--|------------|
| Canada | Acute Care | 2273 |
| Canada | Continuing Care | 18800 |
| Canada | Other | 650 |
| Canada | Home with Support | 11065 |
| Canada | Home without Support | 15688 |
| Canada | Sign-out | 169 |
| Canada | Died | 4868 |
| Canada | Patients who do not return from a pass | 32 |

Fall-related Hospitalizations & Prevention Initiatives

Fall-Related Injury by Injury Type, 2008/09

| | Hip Fracture | Other Fracture | Other Injury | Total |
|-------------|--------------|----------------|--------------|-------|
| AB | 2208 | 2813 | 1576 | 6597 |
| BC | 3830 | 4479 | 2361 | 10670 |
| MB | 1237 | 1135 | 733 | 3105 |
| NB | 694 | 810 | 426 | 1930 |
| NL | 460 | 286 | 200 | 946 |
| NS | 879 | 815 | 456 | 2150 |
| ON | 9637 | 9541 | 5617 | 24795 |
| PE | 151 | 130 | 89 | 370 |
| SK | 1027 | 1065 | 797 | 2889 |
| Territories | 31 | 36 | 26 | 93 |
| | | | | |
| Canada | 20154 | 21110 | 12281 | 53545 |

Hip Fractures Related to a Fall

| Province/Territory | All Hip Fractures | FRH Hip Fractures |
|--------------------|-------------------|-------------------|
| AB | 2338 | 2208 |
| BC | 4016 | 3830 |
| MB | 1300 | 1237 |
| NB | 714 | 694 |
| NL | 469 | 460 |
| NS | 902 | 879 |
| ON | 10172 | 9637 |
| PE | 158 | 151 |
| SK | 1068 | 1027 |
| Territories | 33 | 31 |
| | | |
| Canada | 21170 | 20154 |

Fall-related Hospitalizations and Fall Prevention Initiatives

Mean Acute Length of Stay for Fall-Related Hospitalizations and All Other

| Total Acute LOS | All Hosp | Mean Acute Days | Total Acute Days |
|-----------------|----------|-----------------|------------------|
| ON | 355172 | 7.97 | 2830927 |
| NL | 17928 | 9.73 | 174422 |
| NB | 31852 | 9.75 | 310598 |
| SK | 42650 | 8.97 | 382607 |
| BC | 130383 | 9.73 | 1268353 |
| Territories | 1792 | 8.65 | 15497 |
| NS | 29732 | 11.33 | 336893 |
| MB | 39402 | 12.50 | 492445 |
| AB | 83976 | 12.08 | 1014084 |
| PE | 5595 | 12.64 | 70708 |
| Canada | 738482 | 9.34 | 6896534 |

| FRH Acute LOS | FRH | Mean Acute Days | Total Acute Days |
|---------------|-------|-----------------|------------------|
| ON | 24795 | 11.45 | 283993 |
| NL | 946 | 15.03 | 14222 |
| NB | 1930 | 15.26 | 29453 |
| SK | 2889 | 15.66 | 45236 |
| BC | 10670 | 16.14 | 172258 |
| Territories | 93 | 17.43 | 1621 |
| NS | 2150 | 19.73 | 42424 |
| MB | 3105 | 21.37 | 66361 |
| AB | 6597 | 21.85 | 144169 |
| PE | 370 | 24.15 | 8934 |
| Canada | 53545 | 15.10 | 808671 |

| Non-FRH Acute LOS | Non-FRH | Mean Acute Days | Total Acute Days |
|-------------------|---------|-----------------|------------------|
| ON | 330377 | 7.71 | 254693 |
| NL | 16982 | 9.43 | 16020 |
| NB | 29922 | 9.40 | 28114 |
| SK | 39761 | 8.48 | 33737 |
| BC | 119713 | 9.16 | 109609 |
| Territories | 1699 | 8.17 | 1387 |
| NS | 27582 | 10.68 | 29446 |
| MB | 36297 | 11.74 | 42608 |
| AB | 77379 | 11.24 | 86991 |
| PE | 5225 | 11.82 | 6177 |
| Canada | 684937 | 8.89 | 608786 |

Fall-related Hospitalizations and Fall Prevention Initiatives

Mean Alternative Level of Care Length of Stay for Fall-Related Hospitalizations and All- Other Hospitalizations

| Total ALC LOS | All Hosp | Mean ALC Days | Total ALC Days |
|---------------|----------|---------------|----------------|
| Territories | 1792 | 1.04 | 1871 |
| SK | 42650 | 1.14 | 48594 |
| PE | 5595 | 1.66 | 9282 |
| AB | 83976 | 2.10 | 176616 |
| BC | 130383 | 1.96 | 256059 |
| ON | 355172 | 2.43 | 863070 |
| NB | 31852 | 3.54 | 112882 |
| NL | 17928 | 2.70 | 48406 |
| NS | 29732 | 4.19 | 124484 |
| Canada | 699080 | 2.35 | 1641264 |

| FRH ALC LOS | FRH | Mean ALC Days | Total ALC Days |
|-------------|-------|---------------|----------------|
| Territories | 93 | 1.10 | 102 |
| SK | 2889 | 3.14 | 9075 |
| PE | 370 | 3.95 | 1461 |
| AB | 6597 | 5.47 | 36096 |
| BC | 10670 | 5.65 | 60300 |
| ON | 24795 | 6.65 | 164867 |
| NB | 1930 | 9.69 | 18705 |
| NL | 946 | 10.85 | 10266 |
| NS | 2150 | 12.35 | 26552 |
| Canada | 50440 | 6.49 | 327424 |

| Non-FRH ALC LOS | All other hosp | Mean ALC Days | Total ALC Days |
|-----------------|----------------|---------------|----------------|
| Territories | 1699 | 1.04 | 1769 |
| SK | 39761 | 0.99 | 39519 |
| PE | 5225 | 1.50 | 7821 |
| AB | 77379 | 1.82 | 140520 |
| BC | 119713 | 1.64 | 195759 |
| ON | 330377 | 2.11 | 698203 |
| NB | 29922 | 3.15 | 94177 |
| NL | 16982 | 2.25 | 38140 |
| NS | 27582 | 3.55 | 97932 |
| Canada | 648640 | 2.03 | 1313840 |

Appendix 4

Fall Scan Data

Appendix 4: Fall Scan Data

| Province/Territory | |
|--------------------|-----|
| AB | 54 |
| BC | 32 |
| MB | 28 |
| NB | 12 |
| NL | 10 |
| NS | 42 |
| ON | 74 |
| PEI | 2 |
| QC | 1 |
| SK | 24 |
| YT | 3 |
| Total | 282 |

| Select the title that best reflects your roll in fall prevention: | | | | |
|---|------------|---|---------------------------------------|-------|
| Practitioner/ health care provider | Researcher | Policy Analyst or policy/ Government representative | Community Worker/ Social Worker | Other |
| 122 | 8 | 11 | 25 | 90 |

| What is the target setting of your initiative/ program/ research study? Chose all that apply: | | | | | | |
|---|----------------------|--------------------|--|---------------|-----------------|-------|
| Community- well | Community - frail | Assisted Living | Residential Care/ Long Term Care | Acute Care | All settings | Other |
| 136 | 159 | 79 | 72 | 58 | 39 | 30 |

Fall-related Hospitalizations and Fall Prevention Initiatives

| Is your initiative/ program/ research study: | | |
|--|-----------------------|-------|
| Part of regular practice | A stand-alone project | Other |
| 130 | 68 | 4 |

| Is your initiative/ program/ research study offered: | | | |
|--|-----------------------------|---------|-------|
| Nationally (Canada-wide) | Provincially/ Territorially | Locally | Other |
| 33 | 34 | 176 | 32 |

| If you are a manager, administrator, or another way involved at the policy level, please describe the nature of your initiative: | | | | | |
|--|--------------------------|---|--------------------|--------------------------------------|------------------------|
| New legislation (i.e., BC Care Act Legislation) | Guideline implementation | Standardization (such as data collection, reporting, risk factor screening, etc.) | Strategic planning | Regional/ provincial/ federal policy | Other (please specify) |
| 1 | 23 | 39 | 25 | 0 | 30 |

| Approximate number of people served per year: | | |
|---|-------|-----------------|
| 1-10 | 11-50 | Greater than 50 |
| 2 | 35 | 236 |

Fall-related Hospitalizations and Fall Prevention Initiatives

| What fall or fall-related injury prevention strategies do you use in your initiative/ program/ research study? | | | | | | | | |
|--|----------|------------------|---------------------------|----------------------|---------------------|------------------------|-----------------------------|-------|
| Education | Exercise | Behaviour change | Environment modifications | Clinical assessments | Medical assessments | Medication use/ review | Mobility aids and equipment | Other |
| 264 | 205 | 185 | 212 | 167 | 104 | 167 | 195 | 48 |

| How is your initiative/ program/ research study funded? | | | | | | | | |
|---|-----------------------------|-------------------------|------|-------|-------|-------|--------------------|-------|
| Site-specific (in-house or in-kind funding) | Regional/ municipal funding | Provincial/ Territorial | CIHR | NSERC | SSHRC | CHSRF | Federal Government | Other |
| 97 | 33 | 64 | 1 | 0 | 0 | 0 | 12 | 41 |

Target Setting

CW = community-well

CF = community-frail

AL = assisted living

LTC = long term care

AC = acute care

ALL = all settings

Strategies

ED = education

EX = exercise

BE = behaviour change

EN = environment

CL = clinical assessment

MA = medical assessment

MR = medication review

EQ = equipment and mobility aids

ALL = all strategies

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|-----------------|---|---|---|------------------------------|
| | Active Independence (HSEP) Exercise Program | CF | Other: Canadian Centre for Activity and Aging | ED, EX, BE, EN, MR, EQ | Other | 1 |
| | AHS- Calgary Fall Prevention Program | ALL | Other: Facilitate program with stakeholders | ED, BE, EN, CL, MR, Other: Collaboration | Provincial/Territorial | 2 |
| | Balance Class | CW, CF, AL, LTC | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 3 |
| | Balance for Life | AL | A stand-alone project | ED, EX, BE, EN | Other | 4 |
| | Better Balance Program | CW, CF, AL | A new evidence-based part of regular practice | ED, EX, BE, CL, EQ | Site-specific (in-house or in-kind funding) | 5 |
| | Calgary Fall Prevention Clinic | CF | Other: Started with RCT, ongoing falls clinic | ALL, Other: Fear of Falling counselling | Provincial/Territorial | 6 |
| | Carewest Day Hospital | CF | Other: Falls prevention is one component | ALL | Provincial/Territorial | 7 |
| | Edmonton Zone Seniors Integrated Home Living - Falls Risk Management Strategies | CF | A new evidence-based part of regular practice | Other: Education about BBSE/BEEACH | Site-specific (in-house or in-kind funding) | 8 |
| | Fall Free | AL | A stand-alone project | ED, EX, BE, EN, CL, MR, EQ, Other: Footwear | Site-specific (in-house or in-kind funding) | 9 |
| | Fall Prevention and Injury prevention | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 10 |

t Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

egies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication assessment; MR = medication review

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|---------------------------|---|----------------------------|---|------------------------------|
| | Fall Prevention Program | AC | A new evidence-based part of regular practice | ED, EX, BE, CL, EQ | Site-specific (in-house or in-kind funding) | 11 |
| | Fall prevention program | CF, AL | Other: Regional initiative | ALL, Other: Footwear | Site-specific (in-house or in-kind funding) | 12 |
| | Fall Prevention Program | N/A | Other: A Safer Healthcare Now initiative | ED, EX, BE, EN, CL, MR, EQ | Regional/municipal funding | 13 |
| | Fall Prevention Program | AL | A stand-alone project | ED, BE, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 14 |
| | Fall Prevention Program | CW, CF | A new evidence-based part of regular practice | ED, EX, EN, CL, EQ | Other | 15 |
| | Fall Prevention Program AHS-Calgary zone | All | A new evidence-based part of regular practice | ALL | Regional/municipal funding | 16 |
| | FallProof Program | CW, CF | A new evidence-based part of regular practice | ED, EX, CL, EQ | Site-specific (in-house or in-kind funding) | 17 |
| | Falls management - Unit 35 and Unit 31 RDRHC | AC, Other: Rehabilitation | A new evidence-based part of regular practice | ED, BE, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 18 |
| | falls prevention | AC | A new evidence-based part of regular practice | ED, EX, EN, CL, MA, MR, EQ | Other | 19 |
| | Falls Prevention and Management | AC | A new evidence-based part of regular practice | ED, BE, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 20 |
| | Falls Prevention Coordinator for Canmore Hospital and Canmore and Banff Community | CW, CF, LTC, AC | A new evidence-based part of regular practice | ALL | Provincial/Territorial | 21 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; EQ = equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|-----------------------|--|---|---|------------------------------|
| | Falls Prevention Education | ALL | Other: Continuous community education | ALL | Site-specific (in-house or in-kind funding) | 22 |
| | Falls Prevention Initiative at the Glenrose Rehabilitation Hospital: A participatory approach | Other: Rehabilitation | A stand-alone project | ALL | | 23 |
| | Falls Prevention Pilot Project | CW | A stand-alone project | ED, EX, BE, EN, MR, EQ, Other: peer support | Federal Government | 24 |
| | Falls Prevention Strategy | CW, CF | A stand-alone project | ALL | Provincial/Territorial | 25 |
| | Falls Team - Tofield Long Term Care | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 26 |
| | Finding Balance Falls Prevention Network | | | ED, Other: Knowledge transfer and exchange | Provincial/Territorial | 27 |
| | Finding Balance Seniors' Falls Prevention Provincial Public Awareness Campaign | ALL | A new evidence-based part of regular practice; A stand-alone project | ED, EX, BE, EN, MR | Provincial/Territorial | 28 |
| | Home care Fall prevention Team | CW, CF, AL | A new evidence-based part of regular practice | ED, EX, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 29 |
| | Home Care Fall Prevention Team | CF, AL | | ED, EX, EN, CL, MR, EQ | | 30 |
| | Home Support Exercise Program | CW | A new evidence-based part of regular practice | ED, EX, BE, EN | Site-specific (in-house or in-kind funding) | 31 |
| | Independent living guide | CW, CF | A stand-alone project | ED, EX, BE, EN, MR, EQ | Site-specific (in-house or in-kind funding) | 32 |

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|-------------------------------------|---|----------------------------|---|------------------------------|
| | Injury Prevention | ALL | A new evidence-based part of regular practice | ALL | Provincial/Territorial | 33 |
| | Inpatient falls | LTC, AC | A new evidence-based part of regular practice | ED, EN, CL, MA, MR, EQ | Regional/municipal funding | 34 |
| | Integrated Facility Living Falls Management Standard | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 35 |
| | Integrated Home Living Falls Risk Management Strategy | CF, AL, Other: Community - all ages | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 36 |
| | Inter disciplinary falls prevention strategy for Town of High River | ALL | A stand-alone project | ALL | Other | 37 |
| | Legacy 4 Health (Indoor Walking) program | CW | A new evidence-based part of regular practice | ED, EX, BE, EN | Site-specific (in-house or in-kind funding) | 38 |
| | LifeMark Dizziness & Balance Programs | CW, CF | A stand-alone project | ED, EX, EN, CL, EQ | Other | 39 |
| | Living Well with a Chronic Condition | CW, CF, AL | A new evidence-based part of regular practice | ED, EX, BE, CL, EQ | Regional/municipal funding | 40 |
| | Mobility Rodeo | CF, AL | A new evidence-based part of regular practice | ALL | Provincial/Territorial | 41 |
| | Move 'n Mingle | CW, CF | A new evidence-based part of regular practice | ED, EX, BE | Regional/municipal funding | 42 |
| | Older Adult Health and Wellness Student Clinic | CW, CF | A stand-alone project | ED, EX, BC, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 43 |
| | Participate in falls prevention committee | AC | | ED, MR | Site-specific (in-house or in-kind funding) | 44 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; EQ = equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|----------------|---|---|---|------------------------------|
| | Please Help Me I'm Falling | CW | A stand-alone project | ED, BE, EN | Site-specific (in-house or in-kind funding) | 45 |
| | Rehabilitation Assessment for Independent Living | CW, CF, AL | A stand-alone project | ALL | Provincial/Territorial | 46 |
| | Seniors Conversation Cafe | CW, CF | A stand-alone project | ED, EX, EN | Site-specific (in-house or in-kind funding) | 47 |
| | Seniors South Home Care Falls Prevention Team | CW, CF, AL | A new evidence-based part of regular practice | ALL | Regional/municipal funding | 48 |
| | Seniors Wellness Coalition | CW, AL | A new evidence-based part of regular practice | ED, EX, BE, EN, MR, EQ | Provincial/Territorial | 49 |
| | Steady as you go (Saygo) | CW | A stand-alone project | ED, EX, EN | Provincial/Territorial | 50 |
| | Steady as you go (SAYGO) | CW, CF | A stand-alone project | ED, EX, BE, EN | Other | 51 |
| | Steady As You Go Clinic | CF | A stand-alone project | ED, EX, BE, EN, CL, MR, EQ, Other: Footwear | Site-specific (in-house or in-kind funding) | 52 |
| | The fall reduction committee | LTC | Other: 1:1 inter-d analysis of root causes | ED, EX, EN, CL, MA, MR, EQ | | 53 |
| | Wii Balance, Balance Workout, Agility Challenge, Locomotion and Balance | CW, CF | Other: Balance classes | ED, EX, BE | Provincial/Territorial | 54 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; EQ = equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|----------------|--|---|---|------------------------------|
| | AD Anti-Stigma Project | CW, CF | A stand-alone project | ED, BE, EN, CL, MR, EQ, Other: Peer to peer mentoring | Federal Government | 55 |
| | Age Friendly Community Planning | CW, CF, AL | Other: Knowledge Translation | Other: Input on policy planning | Other | 56 |
| | BC Fall and Injury Prevention Coalition | ALL | A new evidence-based part of regular practice; A stand-alone project | ALL | Site-specific (in-house or in-kind funding) | 57 |
| | Canadian Falls Prevention Curriculum | ALL | A new evidence-based part of regular practice | ED | Federal Government; Site-specific (in-house or in-kind funding) | 58 |
| | Continuing Care Falls prevention | CW, CF, AL | A new evidence-based part of regular practice | ALL | Provincial/Territorial | 59 |
| | Elder Assessment and Short Term Treatment Program | CW, CF, AL | A new evidence-based part of regular practice | ED, EX, BC, EN, CL, EQ | Regional/municipal funding | 60 |
| | Fall Prevention Awareness | CW, CF | Other: Ongoing | ED, BE | N/A | 61 |
| | Fall Prevention Initiative at Kelowna General Hospital | AC | A new evidence-based part of regular practice | ALL | Other | 62 |
| | Fall Prevention Program | LTC | A new evidence-based part of regular practice | ED, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 63 |
| | Fall Prevention Survey | AL | A new evidence-based part of regular practice | ED, EX, Other: PAL Guidelines | Other | 64 |
| | Falls Harm Reduction Project Complex Care Prince Rupert | LTC | A stand-alone project | ALL | Other | 65 |

: **Setting:** CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|---|---|----------------------------|---|------------------------------|
| | Falls injury Prevention & Management | AC | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 66 |
| | Falls Injury Prevention & Management Program | AC, Other: Rehabilitation services | Other: Part of Managing Unsettled Behaviour | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 67 |
| | Falls Prevention Program | CW | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, EQ | Other | 68 |
| | FH Falls Prevention Mobile Clinic | CF, AL | A stand-alone project | ALL | Regional/municipal funding | 69 |
| | Fraser Health Joint Venture on Falls and Injury Reduction in Long Term Care Facilities | LTC | A stand-alone project | ALL | Regional/municipal funding | 70 |
| | Illness and Accident Prevention Program | CW, CF, AL, LTC | A stand-alone project | ED, EX, BE, EN, MA, MR, EQ | Federal Government | 71 |
| | PAL program | AL | A new evidence-based part of regular practice | ED, EX, BE, EN, EQ | Site-specific (in-house or in-kind funding) | 72 |
| | Primary Health Care Strategy | CW, CF, AC | Other: Primary health care strategy | ED, EX, BE, EN, MA, MR, EQ | Provincial/Territorial | 73 |
| | Regional Standard: Scott Fall Risk Screen | LTC, Other: Mental health and addictions services | A new evidence-based part of regular practice | ED, BE, CL | Regional/municipal funding | 74 |
| | Regional strategies for fall prevention | CF, AL, LTC, AC | | None | | 75 |
| | SAIL Strategies and Actions for Independent Living | CF | A new evidence-based part of regular practice | ALL | Provincial/Territorial | 76 |
| | Scott Falls Risk Screen | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 77 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|----------------|--|----------------------------------|--|------------------------------|
| | Seniors Fall and Injury Prevention initiative | ALL | Other: Regional initiative | ALL | Regional/ municipal funding | 78 |
| | Seniors Fall Prevention Program | CW, CF | A stand-alone project | ED, EX, BE, EN, CL, MR, EQ | Regional/ municipal funding | 79 |
| | Seniors' Fall Prevention Week | All | Other: Province-wide initiative | ED | Site-specific (in- house or in-kind funding) | 80 |
| | STAT Centre | CW, CF, AL, AC | A stand-alone project | ALL | Provincial/ Territorial | 81 |
| | Stay in the Game - Falls Prevention for Seniors | ALL | Other: One of 18 health promotion workshops | ALL | Other | 82 |
| | Steady Feet | ALL | A new evidence-based part of regular practice | ED, EX, CL, MR, EQ | Site-specific (in- house or in-kind funding) | 83 |
| | Strategies and Actions for Independent Living | CF, AL | A new evidence-based part of regular practice | ALL, Other: Footwear | Site-specific (in- house or in-kind funding) | 84 |
| | Transformative Change Accord: First Nations Health Plan & Tripartite First Nations Health Plan | ALL | Other | Other | Other | 85 |
| | Universal Fall Precautions/3 Easy Questions | AC | A new evidence-based part of regular practice | ED, BE, EN | Regional/ municipal funding | 86 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; equipment and mobility aids; ALL = all strategies.

| Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|---|----------------|---|--|---|------------------------------|
| ABC+ Hourly Rounding Project | AC | A stand-alone project | CL, Other: Assessing hourly the patient's comfort and needs. | Site-specific (in-house or in-kind funding) | 87 |
| arthritis self management programs | CW, CF, AL | A new evidence-based part of regular practice | ED, EX, BE, EN, MR, EQ | Site-specific (in-house or in-kind funding) | 88 |
| CNS Geriatrics | AC | A new evidence-based part of regular practice | ED, EX, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 89 |
| Evaluating debilitating falls in the Manitoba ambulatory oncology patient | CW, CF, AL | A new evidence-based part of regular practice | Other: Creating assessment tool | Other | 90 |
| Fairview Falls | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 91 |
| Fall Alert Pilot Project | CW, CF | A stand-alone project | ED | | 92 |
| Fall prevention presentation | CW, CF | A stand-alone project | ED, EX, BE, EN, MR, EQ, Other: Nutrition | Other | 93 |
| Fall Prevention Program | AL, LTC, AC | A new evidence-based part of regular practice | ED, EX, EN, CL, MR, EQ | Other | 94 |
| Fall Prevention Program | CW, CF | A new evidence-based part of regular practice | ED, EN, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 95 |
| Fall Prevention Strategy for Long Term Care | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 96 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--------------------------------------|----------------|---|---|---|------------------------------|
| | Falls Management | LTC | A stand-alone project | ED, EX, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 97 |
| | Falls Management for Long Term Care | LTC | A new evidence-based part of regular practice | ALL, Other: Vision screening | Site-specific (in-house or in-kind funding) | 98 |
| | Falls Prevention Awareness | CW, CF | Other: Part of the mission of ALCOA | ED, EX, BE, EN, MR, EQ | Provincial/Territorial | 99 |
| | Falls Prevention program | ALL | A stand-alone project | ALL | Other | 100 |
| | Focus on Falls Prevention | ALL | A new evidence-based part of regular practice | ED, CL, Other: Vision screening | Provincial/Territorial | 101 |
| | Focus on falls prevention | CF, AL, LTC | A new evidence-based part of regular practice | ED, CL | CIHR | 102 |
| | Hendrich 2 Falls Prevention Model | AC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 103 |
| | Home Health & Safety Program | CW, CF, AL | A stand-alone project | ED, EN | Regional/municipal funding | 104 |
| | Manitoba Falls Prevention Strategy | ALL | Other: Government strategy | ED | Provincial/Territorial | 105 |
| | Mobile Falls Prevention Clinic | CF | Other: Pilot project | ED, EX, BE, EN, CL, MR, EQ, Other: Vision screening | Regional/municipal funding | 106 |
| | Prevention of Falls in Home Care | CF | A new evidence-based part of regular practice | ED, EN, CL, MR, EQ | Regional/municipal funding | 107 |
| | Regional Falls Prevention Leadership | ALL | Other: Facilitating coordination/integration | ALL | Regional/municipal funding | 108 |

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|----------------|---|---------------------------------------|---|------------------------------|
| | Required Organizational Practices - Falls Prevention | ALL | Other: Government accredited | ALL | Provincial/Territorial | 109 |
| | Rideau Park Falls | LTC | Other: National Collaborative | ALL | Site-specific (in-house or in-kind funding) | 110 |
| | SafetyAid - Home Safety and Falls Prevention | CW, CF | A stand-alone project | ED, EN, Other: Fall prevention audits | Provincial/Territorial | 111 |
| | Seniors Maintaining Active Roles Together (SMART) | CW | A stand-alone project | ED, EX, EN | Site-specific (in-house or in-kind funding) | 112 |
| | Staying on Your Feet | CW | A new evidence-based part of regular practice | ED, BE | Regional/municipal funding | 113 |

Target Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|-----------------|---|--------------------------------|---|------------------------------|
| | Better Balance | CF, AL | A stand-alone project | ED, EX, BE, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 114 |
| | Body N' Balance | CW, AL | A stand-alone project | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 115 |
| | draft name - On the Go Mobile fall risk assessment clinic | CW, CF | Other: Pilot project | ED, EX, EN, CL, EQ | Provincial/Territorial | 116 |
| | Fall Prevention at Wellness Fairs | All | Other: Ongoing community education | ED, EX, BE, EN, MR, EQ | Site-specific (in-house or in-kind funding) | 117 |
| | Falls Management Policy | AC | A new evidence-based part of regular practice | ED, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 118 |
| | Falls Prevention in Acute & Long Term Care and Community | ALL | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 119 |
| | Falls Prevention-On Your Feet | | A new evidence-based part of regular practice | ALL | Federal Government | 120 |
| | Implementation of Fall Prevention Strategy Saint John Zone, Horizon Health. NB | AC | Other: Part of an accreditation project | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 121 |
| | Indicators for Falls using Post Fall Data Collection | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 122 |
| | Looking at falls prevention strategies for in-patients and out-patient education | CF, AC | A new evidence-based part of regular practice | ED, EN, CL, EQ | | 123 |
| | Nurse Manager | AC | A new evidence-based part of regular practice | ED, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 124 |
| | Senior Wellness Week | CW, CF, AL, LTC | A stand-alone project | ED, EX, BE, EN, MR, EQ | Regional/municipal funding | 125 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

gies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|----------------|---|----------------------------|---|------------------------------|
| | Bruno & Alice Dinner Theatre: A love story about Seniors and Safety | CW | A stand-alone project | ED | Regional/municipal funding | 126 |
| | Community Support Fall Prevention Program | CW, CF, AL | A new evidence-based part of regular practice | ED, EN, CL, MR, EQ | Provincial/Territorial | 127 |
| | Community Support Falls Prevention Program | CW, CF | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 128 |
| | Community Supports Falls preventive program | CW, CF, AL | Other: An add-on to current assessments | ED, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 129 |
| | Fall prevention pilot project | LTC | A new evidence-based part of regular practice | ED, EN, CL, MR, MA, EQ | Site-specific (in-house or in-kind funding) | 130 |
| | Fall Prevention Program | CF | A new evidence-based part of regular practice | ED, EN, CL, MR | Site-specific (in-house or in-kind funding) | 131 |
| | Fall Risk Manaulicity Hospitals (Acute Care): Eastern Health | AC | A new evidence-based part of regular practice | ED, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 132 |
| | Falls Prevention Steering Committee | CF, LTC, AC | A new evidence-based part of regular practice | EN, EQ | Site-specific (in-house or in-kind funding) | 133 |
| | Ice Salt Initiative | CW | A stand-alone project | ED | Regional/municipal funding | 134 |
| | Walking and Exercise Program for Seniors | CW, CF | A new evidence-based part of regular practice | ED, EX, CL, EQ | Site-specific (in-house or in-kind funding) | 135 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

gies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|----------------|---|----------------------------|---|------------------------------|
| | Acadia Active Aging | CW | A stand-alone project | ED, EX, BE | | 136 |
| | Assistant Director of Nursing | LTC | A new evidence-based part of regular practice | ED, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 137 |
| | AVH Falls Prevention and Management Program | AC | A new evidence-based part of regular practice | ED, BE, EN | Other | 138 |
| | Canadian Falls Prevention Curriculum | ALL | Other: Education program | ALL, Other: Frailty | Site-specific (in-house or in-kind funding) | 139 |
| | Capital District health Authority Falls Prevention Initiative | AC | A new evidence-based part of regular practice | ED, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 140 |
| | collaborative practice -community OT/PT complete initial assessment together | CF | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Provincial/Territorial | 141 |
| | Community Fall Prevention | CW, CF | Other: Education for residents of the community | ALL | Provincial/Territorial | 142 |
| | Easy Movers Program / Hips and Knees Program | CW | A stand-alone project | ED, EX, CL | Site-specific (in-house or in-kind funding) | 143 |
| | Fall Prevention Initiative | LTC | A stand-alone project | ED, EX, EN, CL, MR, EQ | | 144 |
| | Fall Risk Prevention | LTC | A new evidence-based part of regular practice | ED, BE, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 145 |
| | Falls Prevention | LTC, AC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 146 |
| | Falls Prevention Coalition of HRM, Halifax NS | CW, CF | A stand-alone project | ED, EX, EN, MR, EQ | Other | 147 |
| | Falls Prevention committee | LTC, AC | Other: New in 2008 for the health authority | ALL | Other | 148 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

gies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|--|---|----------------------------|---|------------------------------|
| | Falls Prevention Coordinator | AC | Other: Initiative of the falls steering committee | ALL | Site-specific (in-house or in-kind funding) | 149 |
| | Falls Prevention Project | ALL | A stand-alone project | ED, BE, EN, MR, EQ | Provincial/Territorial | 150 |
| | Falls Prevention Strategy | AC | A new evidence-based part of regular practice | ED, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 151 |
| | Fit as a Fiddle | CW, CF | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Provincial/Territorial | 152 |
| | Gasha Fall Prevention Program | AC | A new evidence-based part of regular practice | ED, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 153 |
| | GDH Falls Clinic | CF | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 154 |
| | Geriatric Day Hospital & Falls Clinic | CF | A new evidence-based part of regular practice | ALL | Regional/municipal funding | 155 |
| | Grandparents International Storytellers | CW | A stand-alone project | ED | Site-specific (in-house or in-kind funding) | 156 |
| | Health equipment loan program | ALL | A new evidence-based part of regular practice | ED, EQ | Federal Government | 157 |
| | Healthy Living for Seniors Program | CW, CF, AL | A stand-alone project | ED, EX, BE, EN, MR | Other | 158 |
| | Housing Programs - home repair/adaptation programs; new public housing projects for seniors and individuals with disabilities; renewal of existing senior public housing. | Other: Affordable housing programs for seniors | Other | Other: Seniors housing | Other | 159 |

Target Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; EQ = equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|-----------------|-------------------------------------|---|---|----------------------------|---|-------------------------------------|
| | HSEP coordinator | CF | A stand-alone project | ED, EX, BE, CL, EQ | Site-specific (in-house or in-kind funding) | 160 |
| | IWK Fall Prevention Committee | AC | A new evidence-based part of regular practice | ED, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 161 |
| | IWK Fall Prevention Working Group | AC | A new evidence-based part of regular practice | ED, BE, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 162 |
| | Manager psycho geriatrics | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 163 |
| | Preventing Falls Together | CW, CF | Other: Community based regional coalitions | ED, EX, BE, EN | Provincial/Territorial | 164 |
| | Preventing Falls Together | CW, CF | A stand-alone project | ED, EX, BE, EN | Provincial/Territorial | 165 |
| | Preventing Falls Together Coalition | CW, CF | Other: One of a number of Provincial coalitions | ED, EX, BE, EN | Provincial/Territorial | 166 |
| | Preventing Falls Together Coalition | ALL | A new evidence-based part of regular practice | ALL | Provincial/Territorial | 167 |
| | RAT TEAM | Other: Persons age 65 and older in the emergency room | A new evidence-based part of regular practice | ED, EX, EN, CL, MR, EQ | Provincial/Territorial | 168 |
| | Reducing falls inside nursing home | LTC | Other: Only pertains to ARNH | ED, EX, EN, MR, EQ | Site-specific (in-house or in-kind funding) | 169 |
| | Seniors' Clinic | CW, CF, AL | A new evidence-based part of regular practice | ALL | Provincial/Territorial | 170 |
| | Seniors Rapid Assessment Service | CF, AC, Other: Emergency Room | A stand-alone project | ED, EX, VE, EN, CL, EQ | Provincial/Territorial | 171 |

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|---|---|---------------------------------------|---|------------------------------|
| | Seniors Rapid Assessment Service | CW, CF | A stand-alone project | ED, EX, BE, EN, EQ | Provincial/Territorial | 172 |
| | South West Health Falls Prevention Program | ALL | A new evidence-based part of regular practice | ALL, Other: Fall prevention for staff | Provincial/Territorial | 173 |
| | Strategic Planning | Other: Identifying how youth can be involved in fall prevention | | ED | N/A | 174 |
| | SWH Falls Prevention program | CW, CF, AL, AC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 175 |
| | Veteran's Falls management Programme | LTC | A new evidence-based part of regular practice | ALL | Federal Government | 176 |
| | Veterans' Falls Management Program | LTC | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Other | 177 |
| | West Hants/Cobequid Preventing Falls Together Coalition | ALL | Other: Community based seniors safety program | ED, EN | Other | 178 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|---|---|-------------------------------------|---|------------------------------|
| | A Step Ahead to Falls Prevention - Training Program for Health and Allied Health Care Providers | CW, CF, AL | A new evidence-based part of regular practice | ALL | Regional/municipal funding | 179 |
| | Accessibility Resource Centre | CF, AL | Other: Aging at Home project | Other: Policy | Provincial/Territorial | 180 |
| | Age-Friendly Communities | CW | Other: Community partnership | ED, EN | Federal Government | 181 |
| | Back Education and Falls Prevention | Other: Agencies that employ PSW's. | A stand-alone project | ED, EX, BE, EN, EQ | Site-specific (in-house or in-kind funding) | 182 |
| | Bathtub/shower grab bar building code proposal | Other: Building code review | Other: Building code proposal | Other: Bathtub/shower building code | Other | 183 |
| | CHNET-Works! Fireside Chats | Other: Support fall prevention stakeholders | Other: Network communications infrastructure | Other: Discussions on mobilization | Provincial/Territorial | 184 |
| | Coordinator VON SMART Program | CW, CF | A stand-alone project | ED, EX | Provincial/Territorial | 185 |
| | Don't Fall For It! | CW, CF, AL, AC | A new evidence-based part of regular practice | ED, EX, BE, EN | Provincial/Territorial | 186 |
| | Fall Prevention | | | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 187 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; EQ = equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|--|---|--------------------------------|---|------------------------------|
| | Fall Prevention Program | AC | A new evidence-based part of regular practice | ED, EN, BE, EN, CL, MA, MR, EQ | Other | 188 |
| | Fall Prevention Program | CW, CF, AL, Other: Senior's Day Programs | A new evidence-based part of regular practice | ED, EX, BE, EN, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 189 |
| | Falls Intervention Team (FIT) | CF, AL | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 190 |
| | Falls Prevention through exercise | CW, CF | A new evidence-based part of regular practice | ED, EX | Provincial/Territorial | 191 |
| | Falls Prevention | Other: Mental Health | A stand-alone project | ED, EX, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 192 |
| | Falls Prevention for seniors | CW | Other: Part of a falls prevention program | ED, EX, EN, MR | Regional/municipal funding | 193 |
| | Falls prevention program | LTC | | ALL | Site-specific (in-house or in-kind funding) | 194 |
| | Falls Prevention Program | LTC | Other: In conjunction with least restraint | ALL | Site-specific (in-house or in-kind funding) | 195 |
| | Falls Prevention Referral Program | CW, CF | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 196 |
| | Falls Risk Screen | CF, AL, LTC | A new evidence-based part of regular practice | ALL | Other | 197 |
| | Grey Bruce Falls Prevention & Intervention Program | ALL | A stand-alone project | ALL | Other | 198 |

t Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

egies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|---|--|----------------------------|---|------------------------------|
| | Healthy Aging Program | CF | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 199 |
| | High End Balance Program | LTC | A stand-alone project | ED, EX, CL, EQ | Site-specific (in-house or in-kind funding) | 200 |
| | Home At Last | CW, CF | A stand-alone project | ED, EN, MR, EQ | Provincial/Territorial | 201 |
| | Home Support Exercise Program | CF | A stand-alone project | ED, EX, EN | Provincial/Territorial | 202 |
| | Home Support Exercise Program | CF | Other: HNHB Aging at Home initiatives | ED, EX, BE, CL | Provincial/Territorial | 203 |
| | Home Support Exercise Program | CF, AL, LTC | A new evidence-based part of regular practice | ED, EX, BE, EN | Provincial/Territorial | 204 |
| | Home support Exercise Program | CW, CF, AL | A stand-alone project | ED, EX, BE, CL, EQ | Provincial/Territorial | 205 |
| | Home Visit to Older Adults at High Risk of Falling | CW, CF, AL | Other: One of a range of strategies in the community | ED, EX, BE, EN, CL, MR, EQ | | 206 |
| | HSEP | CF, AL, LTC | Other: Part of CCAC initiative to reduce falls | ED, EX, BE | Other | 207 |
| | Injury Prevention Forum | All | Other: An annual forum | ED, EX, BE, EN, MR, EQ | Provincial/Territorial | 208 |
| | Integrated Regional Falls Program | ALL | A new evidence-based part of regular practice | ALL | Federal Government | 209 |
| | La prevention des chutes chez les personnes aes francophones vivant en situation minoritaire au Canada | Other: Francophone seniors from the linguistic minority | A new evidence-based part of regular practice | ALL, Other: Research | Other | 210 |

t Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

ategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|-----------------------------------|---|--|---|------------------------------|
| | Mississauga Halton Falls Prevention Initiative | ALL | Other: Multisectoral projects | ED, EX, BE, CL, MA, Other: Knowledge translation | Provincial/Territorial | 211 |
| | No Falls Fashion Show | CW, CF, AL | A new evidence-based part of regular practice | ED, BE, EQ | Federal Government | 212 |
| | Ongoing risk assessment in client's home | CF | A new evidence-based part of regular practice | Other: Ongoing risk assessment | | 213 |
| | Physically Supportive Program | ALL | A new evidence-based part of regular practice | ED, EX, BE | Other | 214 |
| | Reducing the Risk For Falls: Review & Revise & Strategize | AC | A new evidence-based part of regular practice | ED, EX, EN, CL, MA, MR, EQ | Site-specific (in-house or in-kind funding) | 215 |
| | Sault Rising Stars Seniors Acting Troupe | Other: General community at large | Other: Complements other activities | ED, EX, BE, EN, MR | Other | 216 |
| | Senior Safekeeping | CW, CF | A stand-alone project | ED, EX, BE, EN, CL | Provincial/Territorial | 217 |
| | Seniors Choices | ALL | A stand-alone project | ED | Other | 218 |
| | Seniors Program | All | A new evidence-based part of regular practice | ED, EX, BE, EN, MR, EQ | Regional/municipal funding | 219 |
| | Senior's symposium | CW, CF | A stand-alone project | ED, EX, EQ | Site-specific (in-house or in-kind funding) | 220 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|-----------------|--|----------------------------|---|------------------------------|
| | Simply Safer is Simply Smarter | CW, CF | A stand-alone project | ED, BE, EN, EQ | Site-specific (in-house or in-kind funding) | 221 |
| | SMART | CF | A new evidence-based part of regular practice | EX, BE, EN, EQ | Site-specific (in-house or in-kind funding) | 222 |
| | SMART & collaborative with multi agency group | CF | A new evidence-based part of regular practice | ED, EX, BE, EN, CL | Provincial/Territorial | 223 |
| | SMART (Seniors Maintaining Active Roles Together) | CF | A new evidence-based part of regular practice | ED, EX, BE, EN | Regional/municipal funding | 224 |
| | SMART (Seniors Maintaining Active Roles Together) | CW, CF | Other: Program offered across VON Canada sites | EX | Provincial/Territorial | 225 |
| | SMART (Seniors Maintaining Active Roles Together) Exercise Program | CW, CF, AL | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Provincial/Territorial | 226 |
| | SMART Exercise | CW, CF | Other | ED, EX | Regional/municipal funding | 227 |
| | Smart Moves | ALL | A new evidence-based part of regular practice | ALL | Provincial/Territorial | 228 |
| | Smart Moves for Fall Prevention- education sessions for PSWs | AL, LTC | A stand-alone project | ED, EN, EQ | | 229 |
| | SMART program | ALL | Other | ED, EX | Provincial/Territorial | 230 |
| | SMART Seniors Maintaining Active Roles Together | CF | A new evidence-based part of regular practice | ED, EX, EN | Provincial/Territorial | 231 |
| | Stand Up - PIED (Montreal Public Health) | CW | Other: Implemented as developed in Montreal | ED, EX, BE, EN | Site-specific (in-house or in-kind funding) | 232 |
| | STand Up! Program | CW, CF, AL, LTC | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Federal Government | 233 |

t Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

egies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|----------------|---|--|---|------------------------------|
| | Stay at Home Strategy | CW, CF, AL | A new evidence-based part of regular practice | ALL | | 234 |
| | Stay on Your Feet | CW, CF | A stand-alone project | ED, EX, EN, CL, MA, MR, EQ | Provincial/Territorial | 235 |
| | STAY ON YOUR FEET | ALL | A new evidence-based part of regular practice | ED | Site-specific (in-house or in-kind funding) | 236 |
| | Stay On Your Feet Parry Sound | CW, CF | Other: Stay on Your Feet Australia | ED, EX, BE, EN, MR, EQ | Other | 237 |
| | Staying Independent | CW | Other: Part of a multidisciplinary program | ED, BE, EN, MR, EQ, Other: Policy development | Regional/municipal funding | 238 |
| | Strong and Steady Falls Prevention Program | CF | Other: Assessment/ exercise/ intervention | ED, EX, EN, CL, MA, MR, EQ, Other: Access to community resources | Regional/municipal funding | 239 |
| | Successfully Engaging Older Adults in Falls Preventing Activities | CW, CF | A new evidence-based part of regular practice | Other: Knowledge translation | Provincial/Territorial | 240 |
| | Use of dual-task tests to identify fall risk in the cognitively impaired (MCI and mild AD) without a recent history of falling | CW, CF | Other: Secondary analysis of cohort | CL | Other | 241 |
| | Volunteers for Seniors | CW, CF | A new evidence-based part of regular practice | ED, EX, BE | Other | 242 |
| | VON Canada SMART (Seniors Maintaining Active Roles Together) Program | CW, CF | A new evidence-based part of regular practice | ED, EX | Other | 243 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; EQ = equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|---|---|----------------------------|---|------------------------------|
| | VON Sakura House- Hospice | Other: Residential hospice | A new evidence-based part of regular practice | ED, EN, CL, MA, MR, EQ | Provincial/Territorial | 244 |
| | VON SMART | CW, CF | A stand-alone project | ED, EX, EQ | Site-specific (in-house or in-kind funding) | 245 |
| | VON SMART Exercises -(Seniors Maintaining Active Roles Together) | CW, CF | A new evidence-based part of regular practice | ED, EX | Provincial/Territorial | 246 |
| | VON SMART Program | CW, CF, LTC | A new evidence-based part of regular practice | ED, EX | Regional/municipal funding | 247 |
| | VON SMART Program - exercise for seniors | CW, CF, AL | A stand-alone project | ED, EX, BE, EN, CL, MR, EQ | Other | 248 |
| | VON SMART Seniors Exercise Program | CW, CF, AL | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Regional/municipal funding | 249 |
| | Wellness for Seniors | CW, CF | A new evidence-based part of regular practice | ED, EX, BE | Provincial/Territorial | 250 |
| | West End Integrated Falls Prevention Program | CW, CF, AL, Other: Residential (but not LTC) | A stand-alone project | ALL | Provincial/Territorial | 251 |
| | www.fallspreventioninfo.ca | CW, CF, Other: Health Care Providers and Families | Other: Part of a falls prevention strategy | ED | Other | 252 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|------------------|----------------|---|----------------|---|------------------------------|
| | Falls Management | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 253 |
| | Fall Prevention | AC | | ED, EN, CL, EQ | Provincial/Territorial | 254 |

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|--|----------------|---|------------------------|----------------------------|------------------------------|
| | Continuum de services en prévention des chutes chez les aînés vivant à domicile - three fold continuum in fall prevention in the elderly living in the community | CW, CF, AL | A new evidence-based part of regular practice | ED, EX, EN, CL, MA, MR | Regional/municipal funding | 255 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; EQ = equipment and mobility aids; ALL = all strategies.

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|-----------------------------------|--|----------------------------|---|------------------------------|
| | College of Nursing Community Practicum | AL, LTC | A new evidence-based part of regular practice; A stand-alone project | ED | N/A | 256 |
| | Cypress Health Region Falls Prevention | CW, CF, LTC, AC | A new evidence-based part of regular practice; A stand-alone project | ALL | N/A | 257 |
| | Falls Prevention Program | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 258 |
| | Five Hills Health Region Falls Prevention | ALL | A new evidence-based part of regular practice; A stand-alone project | ED, EX, BE, EN | N/A | 259 |
| | Forever...In Motion for Older Adults | CW, CF, AL | A new evidence-based part of regular practice; A stand-alone project | ED, EX, BE, EN | N/A | 260 |
| | Geriatric Services | CF | A new evidence-based part of regular practice; A stand-alone project | ALL | N/A | 261 |
| | Keewatin Yatthe Region Falls Prevention | CW, CF, LTC | A new evidence-based part of regular practice; A stand-alone project | ALL | N/A | 262 |
| | Kelsey Trail Health Region Fall Prevention | CW, CF, AL, LTC | A new evidence-based part of regular practice; A stand-alone project | ED, EX, BE, EN, EQ | N/A | 263 |
| | LiveWell With Chronic Conditions Coordinator | CW, CF | Other: Wellness education | ED, EX, MR | Provincial/Territorial | 264 |
| | Long term care falls prevention program | LTC | A new evidence-based part of regular practice | ED, EX, BE, EN, CL, MR, EQ | Site-specific (in-house or in-kind funding) | 265 |
| | Maintaining Independence: Wellness and Fall Prevention Clinic | CF | | ALL | Other | 266 |
| | Mamawetan Churchill River Fall Prevention | AL, LTC, AC, Other: Mental health | A new evidence-based part of regular practice; A stand-alone project | ALL | N/A | 267 |

| Province | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|-----------------|--|--------------------|---|------------------------------|
| | Meri Misfits | CW, CF, AL, LTC | A stand-alone project | ED, BE | N/A | 268 |
| | Older Adult Wellness | CW | A new evidence-based part of regular practice | ED, BE | Regional/municipal funding | 269 |
| | Osteoporosis Canada - Saskatoon Chapter | | A new evidence-based part of regular practice; A stand-alone project | ED | N/A | 270 |
| | PAPHR Steering Committee | | A new evidence-based part of regular practice; A stand-alone project | ED, EX, BE, EN, EQ | N/A | 271 |
| | Public Health Services - Older Adult Wellness | | A new evidence-based part of regular practice; A stand-alone project | ED | N/A | 272 |
| | Regional Falls Prevention Committee | | A new evidence-based part of regular practice; A stand-alone project | ALL | N/A | 273 |
| | River Heights Lodge Fall Prevention Program | LTC | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 274 |
| | Saskatoon Falls Consortium | | A new evidence-based part of regular practice; A stand-alone project | ALL | N/A | 275 |
| | School of Physical Therapy - Fall Prevention Research | | A stand-alone project | ALL | N/A | 276 |
| | Seniors on the Move | | A new evidence-based part of regular practice; A stand-alone project | ED, EX, BE, EN, EQ | N/A | 277 |
| | Staying on Your Feet | | A new evidence-based part of regular practice; A stand-alone project | ED, EX, BE, EN, EQ | N/A | 278 |
| | Your Next Step, Fall Prev LTC | | A new evidence-based part of regular practice | ALL | Site-specific (in-house or in-kind funding) | 279 |

Target Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review

| Category | Project Title | Target Setting | Type | Strategies | Funding | Number in Detailed Inventory |
|----------|---|----------------|---|--|------------------------|------------------------------|
| | Developing a Community-Based Falls Prevention Approach in Yukon, Canada: Working Together across Borders and Cultures | CW, CF | A stand-alone project | ED, EX, BE, EN, EQ | N/A | 280 |
| | Fall prevention pilot project | CW, CF | A new evidence-based part of regular practice | ED, EX, BE, EN, EQ, Other: Liase with physicians | Provincial/Territorial | 281 |
| | Senior Fit | CW, CF | A stand-alone project | ED, EX, BE, EN, EQ | Federal Government | 282 |

Setting: CW = community-well; CF = community-frail; AL = assisted living; LTC = long term care; AC = acute care; ALL = all settings.

Strategies: ED = education; EX = exercise; BE = behaviour change; EN = environment; CL = clinical assessment; MA = medical assessment; MR = medication review; equipment and mobility aids; ALL = all strategies.

ALBERTA

1

Project Title: **Active Independence (HSEP) Exercise Program**

Contact Information: Bev Wardell
Victorian Order of Nurses Edmonton
Beverly.wardell@von.ca
(780) 466-5151
VON Edmonton
100 – 4936 87th Street
Edmonton Alberta T6E 5W3
<http://www.von.ca>

Goals and Objectives: Promote daily activity as a part of healthy living. Promote safe environment for Day Program. Assess older adults for fitness program.

Duration: September 2008 - ongoing

2

Project Title: **AHS – Calgary Fall Prevention Program**

Contact Information: Margaret Low
Alberta Health Services
Margaret.low@albertahealthservices.ca
(403) 955-1552
Bridgeland Suite, 1070 McDougall Road, Calgary Alberta, T2E 7Z2
<http://www.calgaryhealthregion.ca/programs/seniorshealth/index.htm>

Goals and Objectives: Reduction of falls and injuries from falls in the over 65 age group within AHS- Calgary and with in the community with community partnerships.

Duration: July 2007 – present

3

Project Title: **Balance Class**

Contact Information: Doug Gorin
Alberta Health Services
Doug.gorin@albertahealthservices.ca
(403) 652-0115
High River Hospital
560 – 9th Avenue, High River Alberta T1V 1B3
<http://www.albertahealthservices.ca/facilities.asp?pid=facility&rid=1000953>

Goals and Objectives: Improve balance and walking safety.

Duration: February 2008 - present

4

Project Title: **Balance for Life**
Contact Information: Carrie Erickson
Origin Active Lifestyle Communities
recreation@whitehornvillage.com
(403) 271-2277
5200 44 Ave NW, Calgary Alberta T1Y 7L4

Goals and Objectives: To provide balance specific fitness and education to older adults in an assisted living setting.

Duration: February 2006 – ongoing

5

Project Title: **Better Balance Program**
Contact Information: Barb Casault
Misericordia Hospital
Barb.casault@covenanthealth.ca
(780) 735-2757
6940 – 87 Ave, Edmonton Alberta T5R 4H5

Goals and Objectives: To provide lower extremity strengthening, balance exercises and fall prevention strategies for patients at risk for falls.

Duration: September 2005 - ongoing

6

Project Title: **Calgary Fall Prevention Clinic**
Contact Information: Cathy Harbidge
Calgary Fall Prevention Clinic – AHS
Cathy.harbidge@albertahealthservices.ca
(403) 955-1518
1070 McDougall Road NE, Calgary Alberta T2E 7Z2
<http://www.calgaryhealthregion.ca/programs/seniorshealth/fall.htm>

Goals and Objectives: Assessment of fallers; providing individualized risks and recommendations to decrease fall. Balance training provided for appropriate clients. Consultation with OT for provision of equipment in home; cognition or functional assessment. Medication review by pharmacist. Consultation with Social Worker for fear of falling. Nutritional consultation as needed.

Duration: September 2001 - present

7

Project Title: **Carewest Day Hospital**
Contact Information: Janice Ebbert
CareWest
Janice.ebbert@albertahealthservices.ca
(403) 640-6481
CareWest Glenmore Park
6909-14 Street SW, Calgary Alberta T2V 1P8
<http://www.carewest.ca>

Goals and Objectives: The clients' personal well-being is optimized. Clients function at their highest preferred and possible level of independence. Clients perceive improved ability to cope with health-related concerns. Clients and/or family / informal caregivers have information and access to resources to support clients at home. Clients' use of acute care services is appropriate. Clients' risk of premature placement in long term care is minimized.

Duration: Ongoing

8

Project Title: **Edmonton Zone Seniors Integrated Home Living - Falls Risk Management Strategies**
Contact Information: Carol Robertsen
Seniors Integrated Home Living
Carol.robertsen@albertahealthservices.ca
(780) 342-4537
2 Brower Drive, Sherwood Park Alberta

Goals and Objectives: Identify those most at risk; track number of falls/interventions; provide Case Managers with education regarding risk factors, strategies and appropriate referrals.

Duration: January 2010 - present

9

Project Title: **Fall Free**
Contact Information: Connie Reichel
Bog County Primary Care Network
connie@bigcountrypen.com
(403) 442-3814
Box 160, Trochu Alberta T0M 2C0

Goals and Objectives: This is a nine week program done in a assisted living lodge setting consisting of ½- 1 hour presentations on topics that

would help identify potential risk factors and help reduce falls in older adults. It is based on Promoting Active Living: Best Practice guidelines for Fall Prevention in Assisted Living. Objectives - Increase knowledge of what a fall is and risk factors for both residents and staff. - Assessment of individual and room risk factor. - Change in behavior to reduce risk factors ie. proper footwear.

Duration: October 2009 – December 2009

10

Project Title: **Fall Prevention and Injury Prevention**

Contact Information: Evelyn Ding
Wing Kei Care Center
evelynding@wingkei.org
(403) 277-7433
1212 Center Street NE, Calgary Alberta T2E 2R4

Goals and Objectives: 1) Decrease fall incidents by 10%; 2) decrease injury incidents by 10%.

Duration: Ongoing

11

Project Title: **Fall Prevention Program**

Contact Information: Susan Ostrem
Pnoka Hospital & Care Centre
Sue.ostrem@albertahealthservices.ca
(403) 783-3341
Physiotherapy Department, Ponoka Hospital and Care Centre
5800-57th Avenue, Ponoka Alberta T4J 1P1

Goals and Objectives: Started a multi-disciplinary falls prevention committee in Acute Care to identify, coordinate and implement initiatives/strategies to reduce falls in acute care.

Duration: June 2006 - present

12

Project Title: **Fall Prevention Program**
Contact Information: Kathy Hilborn
Homecare
Kathy@backsunlimited.com
(780) 460-2085
Box 351, St Albert Alberta T8N 2Y4

Goals and Objectives: Identify clients at risk for a fall or those who have fallen. Implement customized prevention strategies to prevent further falls.

Duration: November 2009 - ongoing

13

Project Title: **Fall Prevention Program**
Contact Information: Sylvia Simmons
Alberta Health Services
Sylvia.simmons@albertahealthservices.ca
(403) 309-6186
#804 – 5010 43rd Street, Red Deer Alberta T4N 6R2

Goals and Objectives: Safer Healthcare Now Fall Prevention Collaborative in Long Term Care. Goals: reduce the incidence of falls; reduce the severity of falls; administer a falls assessment to all admissions; administer a post falls assessment for people who fell; falls interventions on charts for assessed fallers; reduce restraint use.

Duration: May 2008 – May 2009

14

Project Title: **Fall Prevention Program**
Contact Information: Margaret Usherwood
Carewest Colonel Belcher
Margaret.usherwood@albertahealthservices.ca
(403) 944-7854
1939 Veterans Way NW, Calgary Alberta T3B 5Y8
<http://www.carewest.ca>

Goals and Objectives: Provide relevant information and preventative measure to reduce falls.

Duration: October 2009 - present

15

Project Title: **Fall Prevention Program**
Contact Information: Sarah Symmes
CBI Health Centre
ssymmes@cbi.ca
(403) 221-0944
1070 7th Avenue SW, Suite 140
Calgary Alberta T2P 3G9
<http://www.cbi.ca>

Goals and Objectives: - to increase awareness of fall prevention among seniors groups in the community; - to inform physician clinics in the community regarding the role of physiotherapy and exercise in fall prevention.

Duration: November 2009 - present

16

Project Title: **Fall Prevention Program AHS – Calgary**
Contact Information: Belynda White
Alberta Health Services
belynda.white@albertahealthservices.ca
(403) 955-1551
1070 McDougall Road, Calgary Alberta T2E 7Z2
<http://www.albertahealthservices.ca>

Goals and Objectives: Rate of emergency department (ED) visits due to falls (65+ years); Rate of acute care admissions due to falls (65+ years); Rate of acute care admissions for hip fractures due to falls (65+ years).

Duration: January 2007 - present

17

Project Title: **FallProof Program**
Contact Information: Barbara Kresowaty
Pursuit Physiotherapy
(403) 356-9789
Alberta

Goals and Objectives: Assess and manage through active exercise in a group setting, multifactorial deficits of postural control in various environmental settings.

Duration: November 2009 - present

18

Project Title: Falls management - Unit 35 and Unit 31 RDRHC

Contact Information: Jason Zariwny
Alberta Health Services
Jason.zariwny@albertahealthservices.ca
(403) 357-5158
Unit 35, Red Deer Regional Hospital
PO Bag 5030, 3942 50A Avenue, Red Deer Alberta T4N 6R2

Goals and Objectives: Falls and their subsequent outcomes are serious health threats for older adults. Approximately one half of falls in the elderly can be attributed to accidents and extrinsic causes such as slippery floors, and the remainder from intrinsic causes such as lower extremity weakness, gait disorders, effects of medications or acute illness. Thus it is necessary to assess the client's behavior, including cognition and mobility levels in order to provide a safe environment. This will reduce the number of avoidable falls and reduce the severity of injuries that may occur as a result of an avoidable fall.

Duration: January 2009 – June 2009

19

Project Title: Falls Prevention Program

Contact Information: Karen Turner
Alberta Health Services
Karen.turner@albertahealthservices.ca
(403) 943-3548
Unit 48, Rockyview General Hospital
7007-14 Street NW, Calgary Alberta T2P 1V9

Goals and Objectives: To keep our patients safe while focusing on prevention of functional decline while in hospital.

Duration: September 2007 - present

20

Project Title: **Fall Prevention and Management**
Contact Information: Peggy Hearonemus
Alberta Health Services
Peggy.hearonemus@albertahealthservices.ca
(403) 742-7403
PO Bag 500, 5912-47 Ave, Stettler Alberta T0C 2L0

Goals and Objectives: Reduce length of stay in the hospital due to injuries suffered from a hospital related fall.

Duration: January 2010 - present

21

Project Title: **Falls Prevention Coordinator for Canmore Hospital and Canmore and Banff Community**
Contact Information: Connie Goodine
Canmore Community Care and Hospital
Connie.goodine@albertahealthservices.ca
(403) 678-7200
1100 Hospital Place, Canmore Alberta T1W 1N2

Goals and Objectives: To identify and assess clients in the community that have fallen in past 6 months using multidisciplinary team approach, to initiate and assist LTC and ACUTE care with an ongoing falls prevention program. Ongoing education in the community about falls prevention with educational sessions with frail and well seniors.

Duration: January 2006 - present

22

Project Title: **Fall Prevention Education**
Contact Information: Shelly Dallas-Smith
Alberta Health Services
Shelley.dallas-smith@albertahealthservices.ca
(403) 356-6355
Johnstone Crossing Community Health Centre
300 Jordan Parkway, Red Deer Alberta T4P 0G8

Goals and Objectives: To increase knowledge and behaviors in Central AB communities (Seniors and staff working with Seniors) through education from Finding Balance Campaign to reduce falls and improve overall health.

Duration: September 2009 - ongoing

23

Project Title: Falls Prevention Initiative at the Glenrose Rehabilitation Hospital: A Participatory Approach

Contact Information: Rosalie Freund-Heritage
Glenrose Rehabilitation Hospital
Rosalie.freund@albertahealthservices.ca
(780) 735-8812
GW 1258, 10230 111 Avenue
Edmonton Alberta T5G 0B7

Goals and Objectives: 1) Understand the context-specific issues contributing to falls 2) design an intervention aimed at reducing the rates of falls in geriatric rehabilitation. 3) construct a patient falls risk assessment tool with suggested strategies to prevent falls.

Duration: April 2009 – December 2010

24

Project Title: Fall Prevention Pilot Project

Contact Information: Heather Shupe
SAGE – Seniors Association of Greater Edmonton
hschupe@mysage.ca
(780) 701-9014
15 Sir Winston Churchill Square
Edmonton Alberta T5J 2E5

Goals and Objectives: Work collaboratively with other organizations to develop a pilot program that has peer-led education about falls prevention with seniors who are living independently in the community. Goals include: Determine and develop strategies for identifying and connecting with seniors in the community who have not fallen previously and who are not aware of the risks in their environment; Take falls prevention education to the seniors home where there is a strong opportunity for reducing risk; Learn about how receptive seniors are to making changes in their home to promote safety; Determine if, because of peer led safety audit, seniors in the community make changes in their home to decrease the number of risks in the environment that contribute to falls; Help determine what strategies work best to reduce some hazards of falls for seniors in community that have not previously thought about their personal risks. Give seniors involved more confidence that they will be safe in their home; Give seniors involved more

control over staying independent and living safely at home; Identify what additional supports are needed to enable seniors involved to make their home environment safer.

Duration: January 2010 – December 2010

25

Project Title:

Falls Prevention Strategy

Contact Information:

Kate Campbell
Calgary West Centre PCN
kcampbell@makinghealthhappen.com
(403) 258-2745
Suite 211, 1711 4th Street SW
Calgary Alberta T2S 1V8
<http://www.makinghealthhappen.com>

Goals and Objectives:

Educate and empower patients and caregivers in falls prevention and service access. Identify older people at risk before they fall and provide intervention through an interactive volunteer facilitated physical activity program. Provide appropriate assessment and intervention for those older people who have sustained a fall. Achieve a coordinated, multidisciplinary approach to falls prevention within Calgary West Central PCN with strong community involvement. Reduce the number of falls in older people in the community and home settings, as tracked in the PCN Falls Registry.

Duration: September 2010 - ongoing

26

Project Title:

Falls Team – Tofield Long Term Care

Contact Information:

Diane L. Anderson
Alberta Health Services
Diane.anderson2@albertahealthservices.ca
(780) 662-3263
Tofield Health Centre
Box 1200, 5543-44 Street, Tofield Alberta T0B 4J0

Goals and Objectives:

Initial goal was to complete Pilot project and then set up a falls team who could assess and intervene in falls management in LTC based on the outcomes from the pilot.

Duration: July 2007 - present

27

Project Title:

Finding Balance Falls Prevention Network

Contact Information:

Lynda McPhee
Alberta Centre for Injury Control & Research
lynda.mcphee@ualberta.ca
(780) 492-9768
ACICR, 4075 RTF, 8308-114 Street,
Edmonton Alberta T6G 2E1
<http://www.acicr.ualberta.ca>
<http://www.findingbalancealberta.ca>

Goals and Objectives:

To provide members working in the area of seniors' falls prevention with an opportunity for networking, collaboration, information sharing and education.

- 1) Increase accessibility to seniors' falls prevention information such as programming, best practice, recent research, data, educational opportunities etc. through an electronic distribution list and a webpage within the Finding Balance website
- 2) Coordinate quarterly teleconferences
- 3) Increase number of practitioners sharing and exchanging knowledge to improve practice

To provide members working in the area of seniors' falls prevention with an opportunity for networking, collaboration, information sharing and education.

- 1) Increase accessibility to seniors' falls prevention information such as programming, best practice, recent research, data, educational opportunities etc. through an electronic distribution list and a webpage within the Finding Balance website
- 2) Coordinate quarterly teleconferences
- 3) Increase number of practitioners sharing and exchanging knowledge to improve practice.

Duration: May 2007 - ongoing

28

Project Title: **Finding Balance Seniors' Falls Prevention Provincial Public Awareness Campaign**

Contact Information: Lynda McPhee
Alberta Centre for Injury Control & Research
lynda.mcphee@ualberta.ca
(780) 492-9768
ACICR, 4075 RTF, 8308-114 Street,
Edmonton Alberta T6G 2E1
<http://www.acicr.ualberta.ca>
<http://www.findingbalancealberta.ca>

Goals and Objectives: To generate a critical mass of awareness regarding the magnitude of the injury problem of seniors' falls in Alberta and to promote individual and community action to prevent falls.

Duration: November 2008 - ongoing

29

Project Title: **Home Care Fall Prevention Team**

Contact Information: Teresa Sulkin
Home Care, AHS Calgary
Teresa.sulkin@albertahealthservices.ca
(403) 943-9301
Alberta

Goals and Objectives: Prevent Falls and Acute care admissions in Seniors in Home care.

Duration: November 2007 - present

30

Project Title: **Home Care Fall Prevention Team**

Contact Information: Debbie Franchuk
AHS Home Care Fall Prevention Team
Debbie.franchuk@albertahealthservices.ca
(403) 943-9301
South Calgary Health Centre
31 Sunpark Plaza SE, Calgary Alberta T2X 3W5

Goals and Objectives: To complete a comprehensive, multidisciplinary falls assessment; identify risk factors; and provide intervention strategies to the client and their family.

Duration: December 2006 - ongoing

31

Project Title: **Home Support Exercise Program**
Contact Information: Kathryn Badry
Alberta Health Services
Kathryn.badry@albertahealthservices.ca
(780) 679-3156
5510-46th Avenue, Camrose Alberta T4V 4P8
<http://www.albertahealthservices.com>

Goals and Objectives: Home Support Exercise Program is a physical activity and healthy eating program led by trained health care aides under the supervision of a community care coordinator. Participants access this program through the Health Region's community care/home care services.

Duration: January 2008 – March 2009

32

Project Title: **Independent Living Guide**
Contact Information: Penny Gardner
We Care Home Health Services
pgardner@wecarecanada.com
(403) 529-2200
459-4th Street SE, Medicine Hat Alberta, T1A 0K5

Goals and Objectives: Education of clients and staff for safety in the home. Staff go through booklet with clients including bathroom, kitchen, basement, floors, stairs, entrances, outside driving and medication; fraud alerts.

Duration: January 2009 – January 2010

33

Project Title: **Injury Prevention**
Contact Information: Olivia Blum
Alberta Health Services
Olivia.blum@albertahealthservices.ca
(403) 507-8163
3901-57 Avenue, Olds Alberta T4H 1T4

Goals and Objectives: Decreasing falls and fall morbidity and mortality in all age groups.

Duration: November 2009 - present

34

Project Title: **In-Patient Falls Program**
Contact Information: Laurel Stretch
Alberta Health Services
Laurel.stretch@albertahealthservices.ca
(403) 528-5630
666-5th Street, Medicine Hat Alberta, T1A 3Y9

Goals and Objectives: Identify patients at risk for falling through use of fall risk assessment tool by team; prevent falls through the selection of appropriate, client focused intervention strategies by the team; conduct consistent thorough falls investigations.

Duration: June 2007 - present

35

Project Title: **Integrated Facility Living Falls Management Standard**
Contact Information: Alison Musseau
Seniors Health and Edmonton Integrated Facility Living – AHS
Alison.musseau@albertahealthservices.ca
(780) 735-3322
Suite 406, 10216-124 Street, Edmonton Alberta T5N 4A3

Goals and Objectives: To support continuing care facilities in reducing the frequency of resident falls and minimizing the severity of falls injuries while respecting a resident's individual rights, dignity and autonomy. It is an interdisciplinary approach to falls prevention with priority placed on resident safety and injury prevention.

Duration: January 2008 – December 2009

36

Project Title: **Integrated Home Living Falls Risk Management Strategy**
Contact Information: Deb Payne
Integrated Home Living, Seniors Health Edmonton
Deb.payne@albertahealthservices.ca
(780) 735-3354
Suite 402, 10216-124 Street, Edmonton Alberta T5N 4A3

Goals and Objectives: To implement a Falls Risk Management Strategy into Integrated Home Living, Seniors Health, Edmonton Zone by Dec 2010. Goals include: 1. Consistent reporting of fall events in Integrated Home Living. 2. Identification of Integrated Home Living Clients at risk for falls 3. Provide

staff education on a population health approach to falls risk management 4. Establish best practices in falls risk management for clients/caregivers in Integrated Home Living. 5. Raise awareness of falls risk management in integrated Home Living. The aim of the strategy is to have a evidence-informed, client-centered falls risk management program in place by December 2010.
January 2008 - present

Duration:

37

Project Title:

Interdisciplinary Falls Prevention Strategy for Town of High River

Contact Information:

R Hetherington
Rosalynn.hetherington@albertahealthservices.ca
(403) 601-1761
High River Annex, 702 6th Street SW
High River Alberta T1V 2B3

Goals and Objectives:

To work as an integrated team to recognise fall risk and to promote fall prevention to the community of High River. As the town is a small community with its own hospital/emerg we have a great opportunity to work closely to prevent falls and ultimately reduce the admissions to an already overloaded emerg and acute care
June 2009 – ongoing

Duration:

38

Project Title:

Legacy 4 Health (Indoor Walking) Program

Contact Information:

Loretta Krocker
Alberta Health Services
Loretta.krocker@albertahealthservices.ca
(780) 632-3331
Box 99, Vegreville Alberta T9C 1R1

Goals and Objectives:

Address falls in Seniors; work with social isolation; injury prevention in seniors.

Duration:

January 2007 - present

39

Project Title:

LifeMark Dizziness & Balance Programs

Contact Information:

Sheelah Woodhouse
LifeMark Health
Sheelah.woodhouse@lifemark.ca
(403) 390-3258

1607-7A Street NW, Calgary Alberta T2M 3K2
<http://www.lifemark.ca/vestibular>

Goals and Objectives: - Vestibular assessment; -balance assessment including fall risk measures; -providing vestibular rehabilitation; - providing balance retraining.
Duration: November 2005 – present

40

Project Title: **Living Well with a Chronic Condition**
Contact Information: Karen Marshall
Alberta Health Services
Karen.marshall@albertahealthservices.ca
(403) 519-6559
Sheldon M. Chumir Health Centre
1213 4th Street SW, Calgary Alberta T2R 0X7
<http://www.calgaryhealthregion.ca/cdm>

Goals and Objectives: Enable people with a chronic condition to better manage their condition and live the healthiest lives they can. Living Well does this through supervised exercise classes, education and self-management workshops.
Duration: September 2003 - ongoing

41

Project Title: **Mobility Rodeo**
Contact Information: Luella Wojcik
Calgary Rural PCN Seniors Health Clinic
Luella.wojcik@albertahealthservices.ca
(403) 601-6639
702-6th Street SW, High River Alberta T1V 2B3

Goals and Objectives: Goal: to provide a comprehensive interdisciplinary team assessment & intervention for persons identified as high risk for fall in the assisted living environment; Objectives: to reduce the number of injurious fall by 15% in the frail residents in the assisted living environments in the MD of Foothills. To identify frail assisted living residents at risk for fall using a falls risk screening tool targetting functional mobility; To implement care plans and strategic interventions unique to each assessed individual targetting the minimizing of their risk for fall.
Duration: October 2007 - ongoing

42

Project Title: **Move'n Mingle**
Contact Information: Rene Engel
Alberta Health Services
Rene.engel@albertahealthservices.ca
(403) 955-1537
Bridgeland Site, 1070 McDougal Road NE
Calgary Alberta T2E 7Z2
<http://www.calgaryhealthregion.ca/programs/aging/mingle.htm>

Goals and Objectives: Promoting fall prevention awareness and active living to help prevent or reduce falls and fall injuries in the community dwelling older adults. The program has three components: fall prevention exercise, education and socialization. Primarily targets seniors (65+) disadvantaged by culture, language or social isolation.

Duration: June 2006 - ongoing

43

Project Title: **Older Adult Health and Wellness Student Clinic**
Contact Information: Chris Zarski
Dept. of Physical Therapy – University of Alberta
Chris.zarski@ualberta.ca
(780) 492-5982
Faculty of Rehabilitation Medicine
3-20 Corbett Hall, Edmonton Alberta T6G 2G4

Goals and Objectives: This program is specifically designed to improve older adults balance, strength and stamina. This group is open to all abilities and conditions and will strive to improve all attendee's independence with special emphasis on preventing falls and improving function. The clinic strives to educate and expose physical therapy students in the areas of seniors health and fall prevention.

Duration: January 2010 - present

44

Project Title: **Falls Prevention Committee**
Contact Information: Monica Zolezzi
Alberta Health Services
Monica.zolezzi@albertahealthservices.ca
(780) 735-5176
Royal Alexandra Hospital
10240 Kingsway Avenue, Edmonton Alberta T5H 3V9

Goals and Objectives: Committee of staff with role in fall prevention.
Duration: May 2008 – present

45

Project Title: **Please Help Me I'm Falling**
Contact Information: Debbie McCoy
Alberta Health Services
Debbie.mccoy@albertahealthservices.ca
(780) 349-6079
Westlock Community Health Services
Suite 6, Westlock Provincial Building
10003 – 100 Street, Westlock Alberta T7P 2E8

Goals and Objectives: Increase awareness of strategies to prevent falls in the well community dwelling seniors.
Duration: May 2004 - present

46

Project Title: **Rehabilitation Assessment for Independent Living**
Contact Information: Diane Tatarnic
Alberta Health Services Red Deer
Diane.tatarnic@albertahealthservices.ca
(403) 343-4458
4736-30th Street, Red Deer Alberta T4N 5H8

Goals and Objectives: Looking at identifying specific risk factors in a team setting of PT, OT, and pharmacy and assessing if specific interventions reduced fall risk and falls efficacy.
Duration: May 2009 – September 2009

47

Project Title: **Seniors Conversation Cafe**
Contact Information: Deanna Butz
Stony Plain Family and Community Support Services
d.butz@stonyplain.com
(780) 963-8644
4905-51 Avenue, Stony Plain Alberta T7Z 1Y1
<http://www.stonyplain.com>

Goals and Objectives: Education and awareness for local seniors.
Duration: November 2009

48

Project Title: **Seniors South Home Care Falls Prevention Team**
Contact Information: Coleene Ireland
Integrated Home Care Program, Calgary Zone – AHS
Coleene.ireland@albertahealthservices.ca
(403) 943-9305

Goals and Objectives: To provide assessment, intervention and follow up for Home Care clients at risk for falls or who have fallen in the last 3 months.

Duration: September 2007 - ongoing

49

Project Title: **Seniors Wellness Coalition**
Contact Information: Ann Pudwell
Alberta Health Services – South East Zone
apudwell@albertahealthservices.ca
(403) 502-8302
2948 Dunmore Road SE, Medicine Hat Alberta T1A 8E3

Goals and Objectives: Presentations based on the finding balance program.

Duration: March 2009 - present

50

Project Title: **Steady As You Go (SAYGO)**
Contact Information: Diane Lyders-Reid
SAYGO Program
ddreid@shaw.ca
(403) 283-1664
402 16A St NW, Calgary Alberta T2N 2C8

Goals and Objectives: Assist seniors in identifying their personal risk factors for falls and assist them in determining how to deal with these risk factors.

Duration: February 1998 - present

51

Project Title: **Steady as you go (SAYGO)**
Contact Information: Rene Engel
SAYGO
Engel4@telus.net
(403) 827-5990
432 Oakside Circle SW
Calgary Alberta T2V 4T6

Goals and Objectives: Goals - educate participants as to the importance of fall prevention and what are their personal risk factors.
Objectives - Falls is a combination of factors and by the end of the workshops the seniors should know: What are their risk factors? What can they change? How important it is to take action to keep themselves safe?

Duration: January 1992 – May 2010

52

Project Title: **Steady As You Go Clinic**

Contact Information: Rosalie Freund-Heritage
Rosalie.freund@albertahealthservices.ca
(780) 735-8812
GW 1258, Glenrose Rehab Hospital
10230-111 Avenue, Edmonton Alberta T5G 0B7
<http://www.capitalhealth.ca/hospitalsandhealthfacilities/hospitals/glenroserehabilitationhospital/default.htm>

Goals and Objectives: Decrease falls risks and falls rates and injurious falls in community dwelling older adults who are already experiencing falls.

Duration: May 2008 - ongoing

53

Project Title: **The Fall Reduction Committee**

Contact Information: Ashleigh Middleton
Venta Care Centre
amiddleton@ventacarecentre.com
(780) 377-4414
Occupational Therapy Department
13525-102 Street, Edmonton Alberta T5E 4K3
<http://www.ventacarecentre.com>

Goals and Objectives: To reduce the risk of fall related injuries; to reduce the overall number of falls in our LTC; To research and implement current best practice in falls; to educate residents.

Duration: September 2009 - present

54

Project Title: **Wii Balance, Balance Workout, Agility Challenge, Locomotion and Balance**

Contact Information: Wendy Roger
Kerby Centre
wendyr@kerbycentre.com
(403) 705-3232
1133 7th Avenue SW, Calgary Alberta T2P 1B2
<http://www.kerbycentre.ca>

Goals and Objectives: Wii balance is to improve dynamic and static balance, strengthen muscles through the use of the Nintendo Wii. Classes are to target locomotion and balance issues through targeted exercises.

Duration: January 2008 - present

BRITISH COLUMBIA

55

Project Title: **AD Anti-Stigma Project**
Contact Information: Christine Flegal
BC Institute of Technology
Christine_flegal@bcit.ca
(604) 412-7723
783 – 555 Seymour Street
Vancouver British Columbia V6B 3H6
<http://www.bcit.ca>

Goals and Objectives: 1) Reduce the stigma associated with assistive device use; 2) increase the useage of assistive devices through education, humour, peer to peer mentoring; 3) leave a tangible anti-stigma program in rural communities across Canada.

Duration: September 2005 – March 2010

56

Project Title: **Age Friendly Community Planning**
Contact Information: Nial Helgason
Interior Health
Nial.helgason@interiorhealth.ca
(250) 980-5090
200 – 1835 Gordon Drive
Kelowna British Columbia V1Y 3H5
<http://www.interiorhealth.ca>

Goals and Objectives: Integrate health messaging as part of the planning process. Ensure the built environment meets the needs of vulnerable populations. Support aging in place.

Duration: January 2008 - ongoing

57

Project Title: **BC Fall and Injury Prevention Coalition**
Contact Information: Sarah Elliott
BCIRPU
sarah.elliott@gov.bc.ca
(250) 952-2113
1515 Blanshard Street, 4-2
Victoria British Columbia V8W 3C8
<http://www.injuryresearch.bc.ca>

Goals and Objectives: The BC Falls and Injury Prevention Coalition (BCFIPC) is a multi-sectoral collaboration of representatives from regional/provincial organizations, academic institutions, professional associations and community agencies who are concerned with the need to reduce the rate, frequency and severity of falls among older persons in British Columbia. The coalition is comprised of regional health representatives, policy makers, researchers, physicians, managers of provincial and regional falls and injury prevention initiatives, falls prevention project coordinators, geriatric care coordinators, physiotherapists, occupational therapists, nursing consultants and other organizations representing older persons in B.C. Through networking, education, research and the implementation of evidence-based practices, BCIFPC members seek to enhance policy and programming at local, regional and provincial levels to reduce fall and injury risk among older persons. Working as a cohesive network, BCIFPC has the opportunity to maximize the potential of existing programs, collaboratively develop new programs, and effectively allocate resources through reduced duplication of efforts and exchange resources and information.

Duration: 2006 - ongoing

58

Project Title:

Canadian Falls Prevention Curriculum (CFPC)

Contact Information:

Sarah Elliott

CFPC National Coordinator

Sarah.elliott@gov.bc.ca

(250) 952-2113

4-2, 1515 Blanshard Street

Victoria British Columbia V8W 3C8

<http://www.injuryresearch.bc.ca>

Goals and Objectives: The Canadian Fall Prevention Curriculum is designed to provide participants with the ability to design, implement and evaluate an effective fall prevention program in their work setting. This course is offered as a two-day facilitated workshop course and a four-week facilitated E-Learning course.

Duration: December 2007 - ongoing

59

Project Title: **Continuing Care Falls Prevention**
Contact Information: Heidi Drygas
VCH Coast Garibaldi
Heidi.drygas@vch.ca
(604) 892-2293
Box 220, 1140 Hunter Place
Squamish British Columbia V8B 0A2

Goals and Objectives: 1) Raise awareness of falls prevention strategies in the community at large. 2) Assess and implement fall prevention program with clients who are identified to be at risk by VCH home support, home care nursing. 3) Assess and identify risk factors and implement a rehab/ prevention program in home bound clients who have fallen.

Duration: September 2007 - ongoing

60

Project Title: **Elder Assessment and Short Term Treatment Program**
Contact Information: Jon Boyle
Interior Health
Jon.boyle@interiorhealth.ca
Gateby Residential Facility
3000 Gateby Place
Vernon British Columbia

Goals and Objectives: Improve balance, strength, mobility, home safety, quality of life and maintain independence of community dwelling elderly individuals. This is achieved by a 12 week course of balance/ strength training and falls education.

Duration: January 2002 - ongoing

61

Project Title: **Fall Prevention Awareness**
Contact Information: Henry Tak Pui Au
Centre on Aging, University of Victoria
autakpui@hotmail.com
(250) 893-6431
104 - 1230 Fort Street
Victoria, British Columbia V8V 6L2

Goals and Objectives: Improved awareness among older adults of hazards for falls, such as rushing across the crosswalk, slippery floors, dim lighting, getting up from bed too quickly.

Duration: Ongoing

62

Project Title: **Fall Prevention Initiative at Kelowna General Hospital**

Contact Information: Corina Teixeira
Acute Adult Psychiatry at Kelowna General Hospital
Corina.teixeira@interiorhealth.ca
(250) 862-4477
McNair Unit, 2268 Pandosy Street
Kelowna British Columbia V1Y 1T2

Goals and Objectives: To reduce the frequency and degree of injury of falls in acute psychiatry. Our fall prevention initiative is tightly linked to staff and patient safety in other domains such as lifting/ transferring and management of aggressive behaviours (ie. Restraint – mechanical and chemical – use).

Duration: February 2008 - ongoing

63

Project Title: **Fall Prevention Program**

Contact Information: Adrien Vaughan
Interior Health Authority
Adrien.r.vaughan@interiorhealth.ca
(250) 862-4300
Brookhaven Care Centre
1775 Shannon Lake Road
West Kelowna British Columbia V4T 2N7

Goals and Objectives: To reduce falls and injury from falls while eliminating physical restraints.

Duration: April 2008 - ongoing

64

Project Title: **Fall Prevention Survey**

Contact Information: Selene Lummin
Interior Health
Selene.lummin@interiorhealth.ca
(250) 980-5085
British Columbia

Goals and Objectives: Looking at the barriers to implementing the PAL Guidelines (Promoting Active Living – Best Practice Guidelines for Fall Prevention in Assisted Living); Investigating ways to increase exercise/ active aging in ALR's as a way to prevent falls.

Duration: March 2010 – ongoing

65

Project Title: **Falls Harm Reduction Project Complex Care Prince Rupert**

Contact Information: Karen Skarpnes
Prince Rupert Regional Hospital Northern Health
Karen.skarpnes@northernhealth.ca
(250) 622-6174
1305 Summit Avenue
Prince Rupert British Columbia V8J 2A6
<http://www.northernhealth.ca>

Goals and Objectives: To plan and implement an effective and sustainable falls harm reduction program at the complex care facility. To promote optimal health and reduce harm resulting from falls among residents of the Complex Care Facility.

Duration: June 2008 – March 2010

66

Project Title: **Falls Injury Prevention & Management**

Contact Information: Linda Schwartz
Providence Health Care
lschwartz@providencehealth.bc.ca
(604) 322-2606
1081 Burrard Street
Vancouver British Columbia V6Z 1Y6

Goals and Objectives: Prevent fall related injuries in the acute care setting in Providence Health.

Duration: January 2007 - ongoing

67

Project Title: **Falls Injury Prevention & Management Program**

Contact Information: Linda Schwartz
Providence Health Care
lschwartz@providencehealth.bc.ca
(604) 322-2606
1081 Burrard Street
Vancouver British Columbia V6Z 1Y6

Goals and Objectives: Goals: Reduce the number of injurious falls; Standardize care for patients who have fallen; Provide patient and family fall prevention education for discharge from hospital.

Duration: January 2007 - ongoing

68

Project Title: **Falls Prevention Program**
Contact Information: Chaco Chiswell
Chaco_well@yahoo.ca
(604) 710-2529
106-527 Commodore Road
Vancouver British Columbia V5Z 4G5
<http://www.chaco.ca>

Goals and Objectives: Falls Prevention. Chaco can assist you in creating a Falls Prevention Program. The program is one-on-one training. We recommend 5 sessions which include the following: Assessment; Screening assessments to determine client's individual risk factors for falls; Education; Information related to the risk of falling distributed through handouts, discussions, presentations and demonstrations; Program Targeted strength and balance exercises that improve coordination, agility and posture relevant to falls prevention.

Duration: January 2008 – ongoing

69

Project Title: **FH Falls Prevention Mobile Clinic**
Contact Information: Fabio Feldman
Fraser Health
Fabio.feldman@fraserhealth.ca
(604) 807-6308
Suite 102 – 15735 102A Avenue
Surrey British Columbia V3R 7K1
http://www.fraserhealth.ca/your_health/seniors/falls_and_injury_prevention/

Goals and Objectives: 1. Provide individualized information and intervention that have the potential to decrease the risk for falls and fall-related injuries. 2. Improve access to falls screening, assessment tools, and interventions for individuals in remote areas or areas without similar programs. 3. Provide a multi-disciplinary approach to the prevention of

falls and fall-related injuries. 4. Develop a database containing information about the participants risk for falls and interventions provided for future follow up. 5. Raise awareness related to falls prevention among health professionals serving the community.

Duration: September 2007 - ongoing

70

Project Title:
in Long Term Care Facilities

Fraser Health Joint Venture on Falls and Injury Reduction

Contact Information:

Fabio Feldman
Fraser Health
Fabio.feldman@fraserhealth.ca
(604) 807-6308
Suite 102 – 15735 102A Avenue
Surrey British Columbia V3R 7K1

Goals and Objectives:

The program goal was to support residential facilities in implementing the Fraser Health Falls Clinical Practice Guideline. The primary outcomes anticipated were: Teams involved in the Falls Joint Venture report having a better understanding of falls prevention and injury reduction (knowledge translation). Facilities participating in the Joint Venture report success in implementing the Falls CPG. Residents of facilities participating in the Falls Joint Venture experience a reduction in serious injury/fractures related to falls.

Duration: October 2008 – April 2010

71

Project Title:

Illness and Accident Prevention Program

Contact Information:

Sheila Pither
Council of Senior Citizens' Organizations of BC (COSCO)
Pither470@shaw.ca
(604) 684-9720
1908 – 1330 Harwood Street
Vancouver British Columbia V6E 1S8
<http://www.coscobc.ca>

Goals and Objectives:

Our goal is to reach senior groups with fall prevention advice and to encourage individuals to plan their own fall prevention initiatives.

Duration: April 2007 - ongoing

72

Project Title: **PAL Program**
Contact Information: Deanna
Village At Smith Creek
dbergevin@baptisthousing.org
(250) 768-0488
2425 Orlin Road
Westbank British Columbia V4T 3C7
<http://www.baptisthousing.org>

Goals and Objectives: To teach tenants the reasons for falls, give exercises to help prevent, and educate.

Duration: January 2010 - ongoing

73

Project Title: **Primary Health Care Strategy**
Contact Information: Marcia Leiva
Northern Health Authority
Marcia.leiva@northernhealth.ca
(250) 565-5626
Scotiabank Building, 510 1488 4th Avenue
Prince George British Columbia V2L 4Y2

Goals and Objectives: Primary Health Care Goals – improve patient provider experience; improve health outcomes; reduce acute care costs.

Duration: April 2008 - ongoing

74

Project Title: **Regional Standard – Scott Fall Risk Screen**
Contact Information: Kelly Wilson
Interior Health
Kelly.wilson@interiorhealth.ca
(250) 212-8478
220 – 1815 Kirschner Road
Kelowna British Columbia V1Y 4N7
<http://www.interiohealth.ca>

Goals and Objectives: To identify one regional standard fall risk screening tool for use in all IH facilities. To train Falls Champions in every IH facility to teach their staff how to complete the Scott Fall Risk Screen. To have every LPN, RN, OT and PT in IH facilities trained to complete a Scott Fall Risk Screen. For

every resident in an IH facility to have a Scott Fall Risk Screen completed and in their chart by March 31, 2010.
Duration: January 2010 – March 2010

75

Project Title: **Regional Strategies for Fall Prevention**
Contact Information: Kelly Wilson
Interior Health
Kelly.wilson@interiorhealth.ca
(250) 212-8478
220 – 1815 Kirschner Road
Kelowna British Columbia V1Y 4N7
<http://www.interiorhealth.ca>

Goals and Objectives: Regional strategic approach to fall prevention planning.

76

Project Title: **Strategies and Actions for Independent Living (SAIL)**
Contact Information: Tom MacLeod
Northern Health
Macleod.ent@shaw.ca
(250) 649-0583
3833 Dezell Drive
Prince George British Columbia V2M 1A1
<http://www.northernhealth.ca>

Goals and Objectives: Promote the safety and independence of older people in the community by using an integrated team model.

Duration: January 2008 - ongoing

77

Project Title: **Scott Falls Risk Screen**
Contact Information: Denise Slevin
Interior Health Residential Care
Denise.slevin@interiorhealth.ca
(250) 554-2323
Overlander Residential Care
953 Southill Street
Kamloops British Columbia V2B 7Z9

Goals and Objectives: Prevent/ reduce falls and fall-related injuries.

Duration: March 2009 - ongoing

78

Project Title: **Seniors Fall and Injury Prevention Initiative**

Contact Information: Cheryl Leia
Vancouver Coastal Health
Cheryl.leia@vch.ca
(604) 904-6639
Suite 601 – 604 West Broadway
Vancouver British Columbia V7N 2G7

Goals and Objectives: Build a network of partners and collaborators; effectively integrate sustainable fall prevention solutions into practice; effect behaviour change that results in a decrease in falls and fall related injury.

Duration: May 2006 - ongoing

79

Project Title: **Seniors Fall Prevention Program**

Contact Information: VCH – Richmond Public Health
Joyce.henry@vch.ca
(604) 233-3145
8100 Granville Avenue
Richmond British Columbia V6Y 3T6

Goals and Objectives: Short Term Goals: Enhance individual, family and community capacity to prevent unintentional injury due to falls occurring in Richmond's community dwelling older adult population 65 years and older. Long Term Goals: Reduce the incidence of premature death, chronic pain, disability, emergency services, hospitalization and admission to residential care due to preventable falls.

Duration: March 2004 - ongoing

80

Project Title: **Seniors' Fall Prevention Week**
Contact Information: Alison Sum
BC Ministry of Healthy Living and Sport
Alison.sum@gov.bc.ca
(250) 952-2574
4-2, 1515 Blanshard Street
Victoria British Columbia V8W 3C8

Goals and Objectives: To educate and raise awareness about fall prevention among seniors in BC. To encourage leadership and collaboration among health authorities.

Duration: November 2007 - ongoing

81

Project Title: **STAT Centre**
Contact Information: Su Eng Liaw
Vancouver General Hospital
Sueng_liaw@vch.ca
(604) 807-9368
1502-1088 Quebec Street
Vancouver British Columbia V6A 4H2

Goals and Objectives: Multidisciplinary team approach; patient specific, patient focused; community based geriatric assessment and treatment centre. Goals are to reduce or help manage falls risk.

Duration: Ongoing

82

Project Title: **Stay in the Game – Fall Prevention for Seniors**
Contact Information: Sheila Pither
Council of Senior Citizens' Organizations of BC (COSCO)
Pither470@shaw.ca
(604) 684-9720
1908 – 1330 Harwood Street
Vancouver British Columbia V6E 1S8
<http://www.coscobc.ca>

Goals and Objectives: To encourage seniors to make changes to their behaviour and environment so as to prevent falls. To promote active planning to achieve that goal.

Duration: April 2007 – ongoing

83

Project Title: **Steady Feet**
Contact Information: Monique Ledoyen
CVH Community
Monique.ledoyen@vch.ca
(604) 657-5368
241-2121 Marine Drive
Vancouver British Columbia V7V 4Y2

Goals and Objectives: Falls prevention.
Duration: January 2006 - ongoing

84

Project Title: **Strategies and Actions for Independent Living (SAIL)**
Contact Information: Lynnda Swan
Interior Health
Lynnda.swan@interiorhealth.ca
(250) 980-1567
118-1835 Gordon Drive
Kelowna British Columbia V1Y 3H4

Goals and Objectives: Track falls and injuries to community care clients throughout Interior Health. Prevent falls and injuries to community care clients throughout Interior Health. Provide education and resources to support care aides in preventing falls.
Duration: June 2008 - ongoing

85

Project Title: **Transformative Change Accord: First Nations Health Plan & Tripartite First Nations Health Plan**
Contact Information: Derina Peters
First Nations Health Council
dpeters@fnhc.ca
(604) 913-2080
1205-100 Park Royal South
West Vancouver British Columbia V7T 1A2
<http://www.fnhc.ca>

Goals and Objectives: Create fundamental change for the improvement of the health status of First Nations people in BC. Define a series of founding principles that will underpin the development and implementation of a new governance system for health services and guide systemic changes. Establishes

goals for the successful implementation of short and medium actions related to the implementation of this plan.

Duration: November 2006 - ongoing

86

Project Title:

Universal Fall Precautions/ 3 Easy Questions

Contact Information:

Kelly Wilson

Interior Health

Kelly.wilson@interiorhealth.ca

(250) 212-8478

220 – 1815 Kirschner Road

Kelowna British Columbia V1Y 4N7

<http://www.interiohealth.ca>

Goals and Objectives:

To raise awareness of the problem of patient falls in acute care settings, among staff, patients and visitors. To serve as the first step in a regional acute care fall prevention strategy.

Duration:

September 2009 - ongoing

MANITOBA

87

Project Title: ABC+ Hourly Rounding Project

Contact Information: Darlene Anderson
Victoria General Hospital
danderson3@vgh.mb.ca
(204) 261-1375
2340 Pembina Highway, Winnipeg, Manitoba R3T 2Eb

Goals and Objectives: The intention of the study is to implement an interdisciplinary standardized approach for patient rounding and see the impact standardized rounds has on falls and wounds. By implementing standardized hourly patient rounding our goal is to see a decrease in falls and pressure wounds.

Duration: January 2010 – March 2010

88

Project Title: Arthritis Self Management Programs

Contact Information: Cheryl Machula
The Arthritis Society MB – Nunavut Division
cmachula@hotmail.com
(204) 942-4892
105-386 Broadway, Winnipeg Manitoba R3C 3R6
<http://www.arthritis.ca>

Goals and Objectives: Awareness, self assessment/risk factors of falls related to arthritis; instilling confidence in individuals affected to initiate behavior changes.

Duration: January 2008 - ongoing

89

Project Title: CNS Geriatrics

Contact Information: Leslie Dryburgh
Grace Hospital
ldryburgh@ggh.mb.ca
300 Both Drive, Winnipeg Manitoba R3J 3M7

Goals and Objectives: Henrich Fall II Prevention Program

Duration: February 2010 – June 2010

90

Project Title: **Evaluating debilitating falls in the Manitoba ambulatory oncology department**

Contact Information: Alison Bertram Farough
CancerCare Manitoba
alison.bertramfarough@cancercare.mb.ca
(204) 787-2158
1200A-675 McDermot Ave, Winnipeg Manitoba R3E 0V9

Goals and Objectives: (1) rate of debilitating falls (i.e. falls that require hospitalization) in community dwelling cancer patients living in Manitoba and compare it to similarly matched individuals without cancer; (2) identify factors associated with debilitating falls in community dwelling cancer patients; and (3) investigate the impact that debilitating falls have on survival in community dwelling cancer patients. In order to complete these objectives we will evaluate all Manitoba cancer patients between 2003 and 2008 and then compare these patients to similar non-cancer patients using a variety of well known Manitoba databases. We will perform appropriate statistical tests on the extracted information to fulfill our 3 objectives

Duration: Ongoing

91

Project Title: **Fairview Falls**

Contact Information: Cindy Bauche
Brandon Regional Health Authority
bauchec@brandonrha.mb.ca
(204) 578-2157
N414 - 150 McTavish Avenue East
Brandon, Manitoba R7A 2B3
<http://www.brandonrha.mb.ca/en/>

Goals and Objectives: To reduce resident falls in the long term care facility.

Duration: October 2009 - ongoing

92

Project Title: **Fall Alert Pilot Project**

Contact Information: Wendy French
Safe Communities Winnipeg
Wfrench@hsc.mb.ca
(204) 787-1907
NA335 700 McDermot Ave., Winnipeg Manitoba R3R 0X3

Goals and Objectives: To inform the community dwelling seniors about weather-related hazardous sidewalk conditions so they can take extra safety precautions as required.

Duration: October 2009 – June 2011

93

Project Title: **Fall Prevention Presentation**

Contact Information: Susan Gordon
Victoria Lifeline
Sgordon2@vgh.mb.ca
(204) 956-6768
4-1875 Pembina Highway
Winnipeg Manitoba R3T 2G7
<http://www.victorialifeline.ca>

Goals and Objectives: To keep older adults in their own homes safely for as long as possible.

Duration: November 2008 - ongoing

94

Project Title: **Fall Prevention Program**

Contact Information: Karen Leifso
NOR-MAN Regional Health Authority
kleifso@normanrha.mb.ca
(204) 687-9320
Flin Flon General Hospital
PO Box 340, Flin Flon Manitoba R8A 1N2
<http://www.normanrha.mb.ca>

Goals and Objectives: 1) To create a safe environment that encourages independence, confidence and activity and mobility, all of which are essential to a patient's quality of life. 2) To identify the patients at risk for falling and initiate preventative measures. 3) To reduce the number and severity of falls.

Duration: August 2009 - ongoing

95

Project Title: **Falls Prevention Program**

Contact Information: Catherine Gfellner-Donald
Brandon RHA Home Care
donaldc@brandonrha.mb.ca
(204) 571-8419

B 150 7th Street, Brandon Manitoba R7A 7M2
<http://www.brandonrha.mb.ca>

Goals and Objectives: To develop an ongoing practice with clients & families of basic safety factors in the home. Checklist developed for direct service staff to review with clients.

Duration: September 2003 - ongoing

96

Project Title: **Fall Prevention Strategy for Long Term Care**
Contact Information: Charleen Barkman
South Eastman Health
cbarkman@sehealth.mb.ca
(204) 326-6411
316 Henry Street, Steinback Manitoba R5G 0P9

Goals and Objectives: To reduce the number of falls and fall-related injuries which occur in personal care homes.

Duration: April 2007 - ongoing

97

Project Title: **Falls Management**
Contact Information: Daryl Dyck
Deer Lodge Centre
Ddyck2@deerlodge.mb.ca
(204) 831-2143
2109 Portage Avenue, Winnipeg Manitoba R3J 0L3
<http://www.deerlodge.mb.ca>

Goals and Objectives: Reduce frequency of falls; reduce severity of injury; instill sensitivity amongst staff to fall risk factors for everyone on admission and quarterly.

Duration: September 2009 - ongoing

98

Project Title: **Falls Management for Long Term Care**
Contact Information: Eileen Coates
Misericordia Health Centre
ecoates@misericordia.mb.ca
(204) 788-8404
99 Cornish Avenue, Winnipeg Manitoba R3C 1A2
<http://www.misericordia.mb.ca>

Goals and Objectives: Decrease number of falls by 10%; decrease number of serious injuries by 10%.
Duration: June 2007 - ongoing

99

Project Title: **Fall Prevention Awareness**
Contact Information: Sue Mackenzie
Active Living Coalition for Older Adults – Manitoba
smack@granite.mb.ca
(204) 755-2919
ALCOA c/o Wellness Institute
1075 Leila Ave., Winnipeg Manitoba R2P 2W7
<http://www.alcoa.org>

Goals and Objectives: 1) Increase awareness; 2) carry out at least one behavior to reduce risk of falls.
Duration: November 2007 - ongoing

100

Project Title: **Falls Prevention Program**
Contact Information: Corinne Katazinski
Interlake Regional Health Authority
ckatazinski@irha.mb.ca
(204) 785-7754
338-825 Manitoba Avenue, Selkirk Manitoba R1A 2B5

Goals and Objectives: Implement falls assessment on targeted population - All patients > 65 years within 24 hours of admission. All patients who have a history of falls or who fall during admission and All patients whose change in mental status, mobility, or toileting needs warrant a review. All residents admitted to LTC and all home care clients.
Duration: April 2010 - ongoing

101

Project Title: **Focus on Falls Prevention**
Contact Information: Karen McCormac
Misericordia Health Centre
kmccormac@misericordia.mc.ca
(204) 788-8073
99 Cornish Avenue, Winnipeg Manitoba R3C 1A2
<http://www.misericordia.mb.ca>

Goals and Objectives: Purpose: To improve the Quality of Life and safety for seniors in the Province of Manitoba; To provide evidence to support improving vision in this population group and that it will impact positively on falls and fractures and overall health care budget and wait times. Goals: To provide on-site vision care services to seniors residing in long term care, community, and acute care settings in both urban and rural Manitoba; To identify the effects of vision care services on reducing falls and fractures as a patient safety initiative.

Duration: September 2006 - ongoing

102

Project Title: **Focus on Falls Prevention**

Contact Information: Sandy Bell & Pamela Hawrnik
Misericordia Health Centre and Athabasca Univeristy
Sbell1@misericordia.mb.ca
(204) 788-8003
Misericordia Health Centre
99 Cornish Avenue, Winnipeg Manitoba R3C 1A2
<http://www.misericordia.mb.ca/AboutUs/VisionScreening.html>

Goals and Objectives: To identify if there is a relationship between vision loss and falls and fractures. To evaluate the effectiveness of vision care services on the incidence of falls and fractures and quality of life for older adults.

Duration: January 2006 - ongoing

103

Project Title: **Hendrich 2 Falls Prevention Model**

Contact Information: Colleen Bytheway
Grace Hospital
cbythway@ggh.mb.ca
(204) 837-8155
300 Booth Drive, Winnipeg Manitoba R3J 3M7

Goals and Objectives: Increase staff awareness and ability to predict who is at risk to fall; intervene before a patient falls; decrease our falls incidents and injuries in our facility.

Duration: March 2010 - ongoing

104

Project Title: **Home Health and Safety Program**
Contact Information: Jonathan Lovegrove
Assiniboine Regional Health Authority
ericksoncqi@arha.ca
(204) 636-6804
PO Box 25, R0J 0P0

Goals and Objectives: Falls reduction; home safety; provide participants with relevant local health services information.

Duration: September 2004 - ongoing

105

Project Title: **Manitoba Falls Prevention Strategy**
Contact Information: Dawn Ridd
Manitoba Healthy Living
Dawn.ridd@gov.mb.ca
(204) 788-6667
2097-300 Carlton Street
Winnipeg Manitoba R3A 1S1
<http://www.gov.mb.ca/healthyliving/index.html>

Goals and Objectives: 1) To reduce the risk of falls. 2) To reduce societal costs of falls. 3) To change attitudes and behaviours by creating a culture of safety.

Duration: July 2007 - ongoing

106

Project Title: **Mobile Falls Prevention Clinic**
Contact Information: Wendy French
IMPACT – Injury Prevention Program
Winnipeg Regional Health Authority
wfrench@hsc.mb.ca
(204) 787-1907
NA335 700 McDermot Avenue
Winnipeg Manitoba R3E 0T2
<http://www.wrha.mb.ca>

Goals and Objectives: To screen at frail elderly community dwelling people who have had one or more falls in the past 6 months for individual risk factors and provide services and education to help each client reduce his/her risk of falling.

Duration: January 2010 – June 2010

107

Project Title: **Prevention of Falls in Home Care**
Contact Information: Lynne Anderson
WRHA Home Care
lranderson@wrha.mb.ca
(204) 475-4451
118-189 Evanson Street, Winnipeg Manitoba R3G 0N9
<http://www.wrha.mb.ca>

Goals and Objectives: To educate the client regarding prevention of falls. To educate all levels of staff in regards to prevention of falls. To educate staff of resources in the community to assist in the reduction and prevention of falls.

Duration: May 2008 - ongoing

108

Project Title: **Regional Falls Prevention Leadership**
Contact Information: Jacquie Habing
Winnipeg Regional Health Authority
Jhabing@hsc.mb.ca
(204) 787-1955
<http://www.wrha.mb.ca>

Goals and Objectives: Regional Falls Prevention Leadership Committee is responsible to facilitate sharing of best practices, ideas, tools and resources to ensure consistency in public messages and patient care approaches and to maximize efficiency and collaboration across all sectors in the Winnipeg Health region.

Duration: October 2008 - ongoing

109

Project Title: **Required Organizational Practices – Falls Prevention**
Contact Information: Brian Dolhun
Parkland Regional Health Authority
bdolhun@prha.mb.ca
(204) 622-6221
625 3rd Street SW
Dauphin Manitoba R7N 1R7

Goals and Objectives: To reduce the number of falls and the number of injuries resulting from falls in all Parkland Regional Health Authority institutions.

Duration: April 2008 - ongoing

110

Project Title: **Rideau Park Falls**
Contact Information: Cindy Bauche
Brandon Regional Health Authority
bauchec@brandonrha.mb.ca
(204) 578-2157
N414 - 150 McTavish Avenue East
Brandon, Manitoba R7A 2B3
<http://www.brandonrha.mb.ca/en/>
Goals and Objectives: Reduce falls of resident in long term care facility.
Duration: July 2008 - ongoing

111

Project Title: **SafetyAid – Home Safety and Fall Prevention**
Contact Information: Janet Morrison
Manitoba Healthy Living
Janet.morrison@gov.mb.ca
(204) 788-6645
2nd Floor, 300 Carlton Street
Winnipeg Manitoba R3B 3M9
<http://www.gov.mb.ca/healthyliving>
Goals and Objectives: SafetyAid is a combined crime prevention/home safety and falls prevention program, funded by MB Justice and MB Healthy Living, Youth and Seniors and delivered by Age & Opportunity Inc. The falls prevention component is designed to reduce the number of falls-related injuries in and around the home for community-based seniors by: providing information and educational sessions to seniors; Completing falls prevention and home safety audits with seniors in their home; Providing no-cost falls prevention items (ex: non-skid bath mats, flashlights) to eligible low-income seniors; Providing information on local health and safety resources; and Working in collaboration with seniors, health and law enforcement groups to promote program and make referrals.
Duration: November 2004 - ongoing

112

Project Title: **Seniors Maintaining Active Roles Together (SMART)**
Contact Information: Kathryn Desai
VON Canada
Kathryn.desai@von.ca
(204) 775-1693

425 St. Mary Avenue, Winnipeg Manitoba R3C 0N2
<http://www.von.ca>

Goals and Objectives: Improve quality of life; allow continued independent living; provide more energy; prevent aches and pains; prevent falls; provide better posture and balance; increase muscle strength; improve self-esteem.

Duration: September 2002 - ongoing

113

Project Title: **Staying on Your Feet**

Contact Information: Wendy French
IMPACT – Injury Prevention Program
Winnipeg Regional Health Authority
wfrench@hsc.mb.ca
(204) 787-1907
NA335 700 McDermot Avenue
Winnipeg Manitoba R3E 0T2
<http://www.wrha.mb.ca>

Goals and Objectives: Health professionals will help senior clients identify their own personal falls risk factors and make a plan and personal commitment to take action to reduce their risk.

Duration: April 2009 - ongoing

NEW BRUNSWICK

114

Program Title: **Better Balance**
Contact Information: Pamela Wallace
Horizon Health Network
Pamela.Wallace@HorizonNB.ca
(506) 632-5510
130 Bayard Drive St. Joseph's Hospital
Saint John New Brunswick E2L 3L6

Goals and Objectives: Improve balance with frail elderly community dwelling adults.

Duration: October 2006 - ongoing

115

Program Title: **Body N' Balance**
Contact Information: Pamela Wallace
Horizon Health Network
Pamela.Wallace@HorizonNB.ca
(506) 632-5510
130 Bayard Drive St. Joseph's Hospital
Saint John New Brunswick E2L 3L6

Goals and Objectives: To provide an exercise program to well elderly targeting, strength, balance and aerobic conditioning. The program also has 8 educational modules and a time for seniors to network and socialize.

Duration: December 2009 - ongoing

116

Program Title: **On the Go Mobile fall risk assessment clinic (draft name)**

Contact Information: Lynn Fletcher
St. Joseph's Community Health Centre
Lynn.Fletcher@HorizonNB.ca
(506) 632-5490
St. Joseph's Community Health Centre
116 Coburg Street
Saint John New Brunswick E2L 3K1

Goals and Objectives: Identify fall risk factors that can be modified and assist participants to link with services needed to reduce these risk factors; also education component about fall prevention.

Duration: February 2010 – ongoing

117

Program Title: **Fall Prevention at Wellness Fairs**

Contact Information: S Benjamin
Horizon Health Network
susan.benjamin@horizonnb.ca
(506) 649-2511
NB Trauma Program, Horizon Health Network
Saint John Regional Hospital
PO Box 2100 , 400 University Avenue
Saint John New Brunswick E2L 4L2

Goals and Objectives: To increase awareness of injury prevention to all age groups but to target Falls prevention with seniors at wellness fairs.

Duration: January 2000 - ongoing

118

Program Title: **Falls Management Policy**
Contact Information: Beth Harris
Horizon Health Network
beth.harris@horizonnb.ca
(506) 357-4736
Veterans Health Unit
680 Priestman Street
Fredericton New Brunswick E3B 3B7

Goals and Objectives: To prevent serious falls and track falls within the organization.

Duration: December 2008 - ongoing

119

Program Title: **Falls Prevention in Acute & Long Term Care and Community**
Contact Information: Heather Oakley
Horizon Health Network
heather.oakley@horizonnb.ca
(506) 648-7303
130 Bayard Dr.
Saint John New Brunswick E2L 3L6

Goals and Objectives: Decrease the number of severe fall related injuries in hospital and LTC; Decrease the number of falls in community dwelling seniors.

Duration: March 2000 - ongoing

120

Program Title: **Falls Prevention-On Your Feet**
Contact Information: Patty Black
Ridgewood Veteran's Wing, Horizon Health
Patricia.Black@HorizonNB.ca
(506) 635-2423
422 Bay Street
Saint John New Brunswick E2L 4L2

Goals and Objectives: To decrease falls by 20% in a 2 year period. To educate staff on the latest best practice initiatives. To make it a global initiative in our facility. (ie. include maintenance , kitchen , cleaning staff, admin staff, with clinical staff)

Duration: April 2009 – ongoing

121

Program Title: **Implementation of Fall Prevention Strategy Saint John Zone, Horizon Health, NB**

Contact Information: Denise Hollway
Saint John Zone, Horizon Health, NB
dhollway@nb.sympatico.ca
(506) 849-0245
3014 Rothesay Rd,
Rothesay New Brunswick E2E 5V4

Goals and Objectives: 100% of staff in the Saint John Zone of Horizon participate in their role in fall prevention

Duration: December 2009 – ongoing

122

Program Title: **Indicators for Falls using Post Fall Data Collection**

Contact Information: Sherry Gionet, RN
Horizon Health Network, Saint John, NB
Sherry.Gionet@HorizonNB.ca
(506) 632-5404
St. Joseph's Hospital- GEM Unit
130 Bayard Dr.
Saint John New Brunswick E2L 3L6

Goals and Objectives: To reduce injuries from falls by 40%

Duration: January 2008 - ongoing

123

Program Title: **Looking at falls prevention strategies for in-patients and out-patient education**

Contact Information: Cheryl Taylor
Horizon Health Network
Cheryl.Taylor2@HorizonNB.ca
(506) 432-3159
Sussex Health Centre
75 Leonard Drive &
Sussex New Brunswick E4E 2P7

Goals and Objectives: Prevention of falls in acute care hospital setting

124

Program Title: **Nurse Manager**
Contact Information: Lise Savoie
Horizon Health Network Zone 1 Moncton
Lise.Savoie@Horizonnb.ca
(506) 857-5216
135 Ave MacBeath Ave
Moncton New Brunswick E1C 6Z8

Goals and Objectives: We are in the process of establishing new goals and objectives.
Duration: November 2007 - ongoing

125

Program Title: **Senior Wellness Week**
Contact Information: Ann Hogan
NB Trauma Program
Ann.Hogan@HorizonNB.ca
(506) 648-6632

5D South, 400 University Ave, Box 2100
Saint John New Brunswick E2L 4L2

Goals and Objectives: To increase awareness about falls and falls prevention in persons 65 years and older; To increase awareness of the services available for seniors in the community; To increase awareness about the changes as we age
Duration: February 2000 - ongoing

NEWFOUNDLAND & LABRADOR

126

Project Title: **Bruno & Alice Dinner Theatre: A Love Story about Seniors and Safety**

Contact Information: Claudine Kean Dobbin
Labrador-Glenfell Health
claudine.keandobbin@lghealth.ca
(709) 944-9320
CWJM Hospital, 410 Booth Avenue
Labrador City Newfoundland A2V 2K1
<http://www.lghealth.ca>

Goals and Objectives: The development of a regional health promotion package to promote the falls prevention dinner theatre titled “The Love Story of Bruno and Alice”, which focuses on the prevention of falls in seniors. The health promotion package is for use among community volunteers, groups, agencies, health professionals and others involved in promoting health among seniors. The project was developed in two phases. The first phase of the project involved the development of the dinner theatre play and script based upon the Health Canada (1999) document “Bruno and Alice: A love story in twelve parts about seniors and safety”. The second phase of the project entailed the development of a regional health promotion package to promote the initiative and support the work of others in the region that is dedicated to preventing injuries. The purpose of this health promotion initiative is to raise awareness among seniors of the specific environmental hazards around homes that contribute to falls and to identify strategies on how to deal with these risks in the home. Participating seniors will increase their awareness of the risks for falls, and be encouraged to make changes in their behavior and environments to promote safety.

Duration: February 2008 – ongoing

127

Project Title: **Community Support Falls Prevention Program**

Contact Information: Gloria Rouzes
gloriarouzes@westernhealth.nl.ca
(709) 643-8713
149 Montana Drive, Stephenville Newfoundland A2N 2T4

Goals and Objectives: Identify persons at risk for falls; preventative goal to help reduce the risks of falls; identify risk factors for the client.
Duration: October 2009 – ongoing

128

Project Title: **Community Support Falls Prevention Program**
Contact Information: Scott Collins
Western Regional Integrated Health Authority
scottcollins@westernhealth.nl.ca
(709) 637-2429
Hammond Building, 169 West Valley Road
Corner Brook Newfoundland A2H 2Y3
<http://www.westernhealth.nl.ca>

Goals and Objectives: To reduce the risk of falls within the home environment of our clients who are either seniors, or folks who have a physical or intellectual disability
Duration: September 2009 - ongoing

129

Project Title: **Community Support Fall Prevention Program**
Contact Information: Sandy Porter
Western Health
sandyporter@westernhealth.ca
(709) 637-2750
Hammond Building, 169 West Valley Road
Corner Brook Newfoundland A2H 2Y3
[Http://www.westernhealth.nl.ca](http://www.westernhealth.nl.ca)

Goals and Objectives: To reduce the number of falls experienced by community support clients.
Duration: September 2006 - ongoing

130

Project Title: **Fall Prevention Pilot Project**
Contact Information: Christa Sutton Ralph
Eastern Health Long Term Care
Christa.suttonralph@easternhealth.ca
(709) 570-2783
146 Elizabeth Avenue
St. John's Newfoundland A1B 1S5
<http://www.easternhealth.ca>

Goals and Objectives: -identify risk factors associated with resident falls; - consistently apply definition of resident falls; - demonstrate an understanding of Fall prevention decision tree; -assess resident's risk for falls using the Morse scale.
Duration: February 2009 - ongoing

131

Project Title: **Fall Prevention Program**
Contact Information: Sean Hillier
Seanhillier@westernhealth.nl.ca
(709) 643-8717
149 Montana Drive, 2nd Floor
Stephenville Newfoundland A2N 2T4
<http://www.westernhealth.nl.ca>

Goals and Objectives: To reduce the risk of falls among the client population that is served by the community support program of Western Health. This would involve any clients that we would visit in a family home whom are in receipt of home support services, financial services, Behaviour management services, nursing services and Occupational Therapy services. This would be done through both an environmental assessment, screening tool indicator, and professional judgement that would help determine if there were any falls risk issues.
Duration: October 2009 - ongoing

132

Project Title: **Fall Risk Manualcity Hospitals (Acute Care)**
Contact Information: Joan Downey
Joan.downey@easternhealth.ca
(709) 777-7792
Southcott Hall Room 716
100 Forest Road, St. John's Newfoundland A1A 1E5
<http://www.easternhealth.ca>

Goals and Objectives: The objectives of this manual are to assist healthcare professionals to: identify risk factors associated with patient falls; consistently apply the definition of patient falls; demonstrate an understanding of the Fall Prevention Decision Tree; assess patients' risk for falls utilizing the Morse Fall Scale; implement effective fall prevention strategies; assess patients after a fall; consistently report and record patient falls.
Duration: March 2010 - ongoing

133

Project Title: **Falls Prevention Steering Committee**
Contact Information: Kathy Winsor
Kathy.winsor@centralhealth.nl.ca
(709) 256-5914
125 Trans Canada Highway
James Paton Memorial Regional Health Centre
Gander Newfoundland A1V 1P7
<http://www.centralhealth.nl.ca>

Goals and Objectives: To institute evidence based practices for falls prevention in acute care, long term care and then community. To standardize the assessment tools, programming and the interventions throughout the continuum of care to reduce the rate of falls and rate of injury.

Duration: November 2009 - ongoing

134

Project Title: **Ice Salt Initiative**
Contact Information: Janice Field
Janice.field@easterhealth.ca
(709) 752-4142
PO Box 13122, St. John's Newfoundland A1B 4A4
<http://www.easterhealth.ca>

Goals and Objectives: Community awareness of falls risk; increase knowledge of falls prevention.

Duration: January 2010 - ongoing

135

Project Title: **Walking and Exercise Program for Seniors**
Contact Information: Joan Cranston
Cottage Hospital Physiotherapy and Fitness
jcranston@nf.sympatico.ca
(709) 458-2120
Box 192, Norris Point Newfoundland A0K 3V0

Goals and Objectives: To provide seniors in the community with a safe indoor environment to walk and exercise under the supervision of a qualified professional.

Duration: March 2009 – May 2009

NOVA SCOTIA

136

Program Title:

Acadia Active Aging

Contact Information:

Janet Mooney
Acadia University
janet.mooney@acadiau.ca
(902) 542-0938
Box 439 Port Williams Nova Scotia B0P1T0

Goals and Objectives:

Provide the inactive older adult with a comprehensive, supervised twice weekly exercise class in order to maintain independence through endurance and strength

Duration:

September 2008 - ongoing

137

Program Title:

Assistant Director of Nursing

Contact Information:

Annette Howland
Evergreen Home for Special Care
a.howland@evergreenhome.ns.ca
(902) 678-7355
655 Park Street
Kentville Nova Scotia B4N 3V7

Goals and Objectives:

Assess all new admissions for risk of falls; re-evaluate after fall/new medication/change in status ; decrease number of falls ; inform all families of our falls program ; have logo to identify residents at risk for falls ; increase the awareness of falls/falls program ; have all staff/volunteers/families involved in program.

Duration:

April 2010 - ongoing

138

Program Title:

AVH Falls Prevention and Management Program

Contact Information:

Julie Sutherland-Jotcham
Annapolis Valley Health
jsutherland-jotcham@avdha.nshealth.ca
(902) 824-4973
PO BOX 730, Soldiers Memorial Hospital
462 Main Street Middleton Nova Scotia B0S 1P0

Goals and Objectives:

The goal is to reduce the risk of injuries resulting from patient/resident/client falls through: 1. The creation and

implementation of a falls prevention strategy for AVH 2.
The evaluation of the falls prevention strategy
Duration: December 2009 - ongoing

139

Program Title: **Canadian Falls Prevention Curriculum**
Contact Information: Dana McNamara Morse
Annapolis Valley Health
dmcnamaramose@avdha.nshealth.ca
(902) 825-1095
452 Main StBbox 1599
Middleton Nova Scotia B0S1P0

Goals and Objectives: To improve confidence and abilities of participants to institute, manage, and evaluate falls prevention programs in their community, organization or personal habits when dealing with falls.

Duration: January 2010 - ongoing

140

Program Title: **Capital District health Authority Falls Prevention Initiative**
Contact Information: Patricia Bilski
Capital District health Authority
patricia.bilski@cdha.nshealth.ca
(902) 473-8656
Room 4318, 4th floor, CHVMB,
5955 Veterans' Memorial Lane
Halifax Nova Scotia B3H 2E1

Goals and Objectives: To reduce risk of injuries resulting from patient/ client/ resident falls; To implement the Accreditation Canada ROP, "Implement and Evaluate a fall prevention strategy to minimize the impact of client falls".

Duration: March 2010 - ongoing

141

Program Title: **Collaborative practice -community OT/PT complete initial assessment together.**
Contact Information: Wendy Stevens
Cape Breton District Health Authority
stevensw@cbdha.nshealth.ca
(902) 567-7749
1482 George Street, Sydney Nova Scotia B1P 1P3

Goals and Objectives: All clients are assessed by OT/PT on initial visit. Outcomes used –TUG, SAFER home, Falls risk identified, recommendations made on site and education onsite with f/u as required. Goal is to allow clients who have been paneled and awaiting placement to be maintained and safe at home, while await placement, etc. -to try to avert an admission to ED., and support caregivers -potentially lessen burnout.

Duration: April 2008 – ongoing

142

Program Title: **Community Fall Prevention**
Contact Information: Krista Laing
VON Annapolis Valley
krista.laing@von.ca
(902) 690-2107
46 Chipman Drive
Kentville Nova Scotia B4N 3V7
<http://www.vonannapolisvalley.ca>

Goals and Objectives: To prevent falls while encouraging independent living at home.

Duration: January 1997 - ongoing

143

Program Title: **Easy Movers Program / Hips and Knees Program**
Contact Information: Margo Walsh-Leaman
VON Queens County Site
margo.walsh-leaman@von.ca
(902) 354-3297
PO Box 78, Liverpool Nova Scotia BOT 1K0
<http://www.von.ca>

Goals and Objectives: To reduce/ prevent incidences of falls though increased physical activity.

Duration: March 2003 - ongoing

144

Program Title: **Fall Prevention Initiative**
Contact Information: Heather MacQueen
Richmond Villa
heather.macqueen@richmondvilla.ca
(902) 535-3030
9361 Pepperell St, P.O. Box 250

St. Peter's Nova Scotia B0E 3B0

Goals and Objectives: To reduce number of near miss's & falls
Duration: Ongoing

145

Program Title: **Fall Risk Prevention**
Contact Information: Anne Trottier
South Cumberland Community Care Centre
anne.trottier@ns.sympatico.ca
(902) 254-5406
PO Box 489 Parrsboro Nova Scotia B0M 1S0

Goals and Objectives: Fall risk prevention.
Duration: January 2009 - ongoing

146

Program Title: **Falls Prevention**
Contact Information: Donna Arsenault
Annapolis Valley District Health Authority
darsenault@avdha.nshealth.ca
(902) 825-3411
Soldiers Memorial Hospital, Box 730
364 Main Street, Middleton Nova Scotia BOS 1P0

Goals and Objectives: "The goal of the AVH Falls Prevention and Management Program is to reduce the risk of injuries resulting from patient/resident/client falls through ;1.The creation and implementation of a falls prevention strategy for AVH ;2. The evaluation of the falls prevention strategy. The activities/strategies/deliverables include 1.Identification of our population at risk from falls in our service delivery areas 2.Identification of the specific needs and preventative strategies for the at risk population 3. Creation of policies to support the AVH Falls Prevention and Management Program 4. Creation and implementation of an education program for staff 5. Creation of information and education for patients and families. 6. Identification of tools and resources necessary to support a successful falls prevention program 7.Development and implementation of an evaluation framework, including identification, measurement and monitoring of program indicators"

Duration: November 2009 – ongoing

147

Program Title: **Falls Prevention Coalition of HRM, Halifax NS**

Contact Information: Hilda Gmyz
Canadian Red Cross
hilda.gmyz@redcross.ca
(902) 424-1474
133 Troop Avenue
Dartmouth Nova Scotia B3B 2A7
<http://www.redcross.ca>

Goals and Objectives: To educate as many individuals as possible who will benefit from the 10 Simple exercise of the Home Support Exercise Program. and to continue to train the Red Cross Home Support Workers in NS

Duration: March 2009 – ongoing

148

Program Title: **Falls Prevention committee**

Contact Information: Wilma Hahnen
Pictou County Health Authority
wilma.hahnen@pcha.nshealth.ca
(902) 485-2300
PO Box 1059 Pictou Nova Scotia BOK1SO

Goals and Objectives: To monitor reported falls and to trend contributory factors. To recommend best practice initiatives to reduce falls and minimize injury. To educate staff in current fall prevention practices. To evaluate the fall prevention program and implement required initiatives

Duration: October 2008 - ongoing

149

Program Title: **Falls Prevention Coordinator**

Contact Information: Lori Young
Colchester East Hants Health Authority
lori.young@cehha.nshealth.ca
(902) 893-5554
Colchester Regional Hospital Rehabilitation Services
207 Willow Street Truro Nova Scotia B2A 5A1

Goals and Objectives: Overall: to help implement the falls prevention strategy created by the Falls Prevention Steering committee. Specifically: goals are to increase the completion of a falls screen, decrease falls rates on medicine units, further

develop the falls strategy, network with other organizations, educate staff, family and patients on falls prevention strategy.

Duration: January 2010 – June 2010 (possibility of extension)

150

Program Title:

Falls Prevention Project

Contact Information:

Gloria Stewart
Canadian Red Cross
gloria.stewart@redcross.ca; ismael.aquino@redcross.ca
(902) 424-1425
133 Troop Avenue, Burnside Business Park
Dartmouth Nova Scotia B3B 2A7
<http://www.redcross.ca>

Goals and Objectives:

The goal of the Canadian Red Cross is to use a fridge magnet as a memory tool for clients who use our Health Equipment Loan Program. The magnet is designed with 4 tips on how to prevent falls from occur in the home. A pre survey and post survey is filled out by each client who has received the magnet. The results are to be completed with the tentative date of June 30/10.

Duration:

October 2009 – June 2010

151

Program Title:

Falls Prevention Strategy

Contact Information:

Michelle Blagdon
Capital District Health Authority
michelle.blagdon@cdha.nshealth.ca
(902) 473-8933
Office 7343 - Halifax Infirmary
1796 Summer St
Halifax Nova Scotia B3H 3A7

Goals and Objectives:

Decrease the number of falls and fall related injury

Duration:

March 2010 - ongoing

152

Program Title:

Fit as a Fiddle

Contact Information:

Wendy-Lee Hamilton
Annapolis Valley District Health Authority
wlhamilton@avdha.nshealth.ca
(902) 542-0939
23 Earncliffe Ave, Wolfville Nova Scotia B4P 1X4

<http://wdhaintranet.swndha.nshealth.ca/AVDHA/Pages/default.aspx>

Goals and Objectives: 8 week fitness & health education program for community dwelling seniors. Each week has two 1 hour fitness class and one 30min education component; Registration includes a TUG (6m), Fast self paced walk (80m), one legged balance, sit to stand test, and a Vitality Plus Scale which are all repeated at the end of the 8 weeks for evaluation purposes. Fitness Leaders are SFIC certified and education component follows the Get Fit for Active Living manual (CCAA)

Duration: October 1999 - ongoing

153

Program Title: **Gasha Fall Prevention Program (Guysborough Antigonish Strait Health Authority)**

Contact Information: Rose Richardson
Eastern Memorial Hospital
rrichardson@gasha.nshealth.ca
(902) 366-2794
PO Box 10, Canso Nova Scotia B0H 1H0

Goals and Objectives: To have every admitted and observation patients have a fall prevention assessment completed; To assess our program after 2 years of implementation; To education staff on a yearly basis; To review statistical data for trends, changes, and to determine needed care changes.

Duration: April 2008 – ongoing

154

Program Title: **GDH Falls Clinic**

Contact Information: Andrea Munroe
geriatric day hospital, QE II
MUNROEA@cdha.nshealth.ca
(902) 473-2494
GDH,VMB, 5955 Veteran's Memorial Lane
Halifax Nova Scotia B3Z 1A9

Goals and Objectives: Multidisciplinary approach for fall prevention with frail elderly community dwellers.

Duration: September 2005 – ongoing

155

Program Title: **Geriatric Day Hospital & Falls Clinic**

Contact Information: Ann Nelson
Capital Health
anelson@eastlink.ca
(902) 876-8741
15 Silver Birch Drive
Hubley Nova Scotia B3Z 1A9
<http://www.cdha.nshealth.ca/default.aspx?Page=SubPage&category.Categories.1=95¢erContent.Id.0=13665>

Goals and Objectives: To maintain seniors living safely at home; To rehabilitate balance & mobility after fall; To educate about the importance of fall prevention strategies.

Duration: January 2003 – ongoing

156

Program Title: **Grandparents International Storytellers**
Contact Information: Carol Anne Boudreau
Grandparents International Storytellers
carolamb@eastlink.ca
(902) 679-0626
22 Highbury School Rd
New Minas Nova Scotia B4N4K1

Goals and Objectives: 1/to give voice to elder adults(seniors; 2/that their life has meaning regardless of education, social/financial status; 3/that they are indeed supported by peers.

Duration: September 2002

157

Program Title: **Health equipment loan program**
Contact Information: Katheryn Pelly
Canadian Red Cross
katheryn.pelly@redcross.ca
(902) 863-1763
36 market St
Antigonish Nova Scotia B2G 3B4

Goals and Objectives: Health equipment loan program.

Duration: Ongoing

158

Program Title: **Healthy Living for Seniors Program**
Contact Information: Cheryl MacQuarrie
VON cape Breton Metro

cheryl.macquarrie@von.ca
(902) 564-0736
380 Kings Rd. suite 5 Moxham Court
Sydney Nova Scotia B1S 1A8
<http://www.von.ca>

Goals and Objectives: We use the falls prevention tool kit developed by preventing falls together to teach seniors how to avoid falls in the home

Duration: January 2010 – ongoing

159

Program Title: **Housing Programs - home repair/adaptation programs; new public housing projects for seniors and individuals with disabilities; renewal of existing senior public housing.**

Contact Information: Kim E. Stewart
NS - Dept of Community Services (Housing)
kstewart@gov.ns.ca
(902) 424-2511
NS-Dept. of Community Services, Housing Services
5675 Spring Garden Road, P.O. Box 696
Halifax Nova Scotia B3J 2T7
<http://www.gov.ns.ca/coms/>

Goals and Objectives: - all part of creating/preserving affordable housing in NS;- grants/loans for home repairs and adaptations (eg could include installing bathroom & Bedroom on ground floor; widening bathroom doors, exterior ramps); key universal design standards in

Duration: December 2009 – December 2010

160

Program Title: **HSEP Coordinator**

Contact Information: Anne McNeil
Capital District Health Authority
anne.mcneil@cdha.nshealth.ca
(902) 487-0625
3825 Joseph Howe Dr
Halifax Nova Scotia B3L 4R6

Goals and Objectives: To implement a home based exercise program to provide, through the services of Continuing Care, an opportunity to clients wishing to preserve or improve their level of

independence by reducing their risk of falls and of complications of chronic inactivity.
Duration: November 2009 – June 2010

161

Project Title: **IWK Fall Prevention Committee**

Contact Information: Nida DeChamp
IWK Health Centre
nida.dechamp@iwk.nshealth.ca
(902) 470-8401
5850/5980 University Avenue, PO Box 9700,
Halifax Nova Scotia B3K 6R9

Goals and Objectives: 1) To review current information, statistics, tools and strategies; 2) Identify the "at risk" population within the health centre; 3) Establish a clear definition of what constitutes a fall; 4) Develop and implement policies and tools for the assessment of a person's risk for falling; 5) Track quality indicators on falls and share information with staff for quality improvement initiatives; 6) Evaluate quality improvement initiatives.

Duration: March 2008 - ongoing

162

Program Title: **IWK Fall Prevention Working Group**

Contact Information: Linda Fleck
IWK Health Centre
linda.fleck@iwk.nshealth.ca
(902) 470-2720
5850/5980 University Avenue
PO Box 9700
Halifax Nova Scotia B3K 6R8

Goals and Objectives: 1. more accurate occurrence reporting of falls; 2. decreased number of falls/near misses in our health center.

Duration: April 2009 - ongoing

163

Program Title: **Manager psycho geriatrics**

Contact Information: Susan Hines-Kennedy
KRRC
skennedy@krcc.ns.ca
(902) 538-3108

Box 686 Hantsport Nova Scotia B0P 1P0

Goals and Objectives: Reduce fall rate
Duration: October 2007 - ongoing

164

Program Title: **Preventing Falls Together**
Contact Information: Susan King
Community Links/Preventing Falls Together
coordinator@preventingfallstogether.ca
(902) 539-6098
1 Oakland Drive, Sydney Nova Scotia B1L 1H1
<http://www.preventingfallstogether.ca>

Goals and Objectives: To use a population health approach to develop and support regional falls prevention coalitions that work to change the policies, programs and procedures of member organizations and whose members will work together to develop and implement projects in the community to ultimately reduce the number of falls and fall-related injuries among Nova Scotian seniors.
Duration: Ongoing to March 2011

165

Program Title: **Preventing Falls Together**
Contact Information: Carol Ward
VON Annapolis Valley
carol.ward@von.ca
(902) 665-4804
P.O. Box 97
Bridgetown Nova Scotia B0S1C0

Goals and Objectives: To educate the community on the prevention of falls and the impact it can have both physically and mentally on those who do fall.
Duration: September 2002 – ongoing

166

Program Title: **Preventing Falls Together Coalition**
Contact Information: Sheila Hoeg
VON Canada, Pictou County Site
sheila.hoeg@von.ca
(902) 755-4524

Goals and Objectives: Preventing Falls Together helps volunteers and organizations work with seniors to prevent falls at home and in the community
Duration: January 2003 – March 2011

167

Program Title: **Preventing Falls Together Coalition**
Contact Information: Anne Isherwood
VON Antigonish
anne.isherwood@von.ca
(902) 863-2547
VON Antigonish, 65 Beech Hill Road
Antigonish Nova Scotia B2G 2P9
<http://www.von.ca>

Goals and Objectives: To prevent falls by seniors by promotion of fall safe practices by both individuals, at home and elsewhere, and the community.
Duration: February 2006 - ongoing

168

Program Title: **RAT TEAM**
Contact Information: Angela Gouthro
Cape Breton District Health Authority
gouthroa@cbdha.nshealth.ca
(902) 567-7765
Rapid Assessment Team/Rehab Services
Cape Breton Regional Hospital
1482 George Street, Sydney Nova Scotia B1P 1P3

Goals and Objectives: -to prevent admission to acute care; -to discharge patients home from the Emergency with the safest discharge plan; -to follow up patient in the community for fall prevention and home safety assessment
Duration: October 2007 - ongoing

169

Program Title: **Reducing falls inside nursing home**
Contact Information: Anne Underhill
Annapolis Royal Nursing Home
anneu@macleodgroup.ca
(902) 532-2240
9745 highway 8, RR2
Annapolis Royal Nova Scotia B0S1A0

<http://macleodgroup.ca/>

Goals and Objectives: To reduce as many fall/near misses as possible
Duration: April 2008 - ongoing

170

Program Title: **Seniors' Clinic**
Contact Information: Beckey Langill
Seniors' Clinic
beckey.langille@cehha.nshealth.ca
(902) 896-2609
207 Willow St, Colchester Regional Hospital Annex
Truro Nova Scotia B2N 4Z9
<http://www.cehha.nshealth.ca>

Goals and Objectives: To keep community dwelling seniors safe in their own homes.
Duration: June 2007 - ongoing

171

Program Title: **Seniors Rapid Assessment Service**
Contact Information: Scott McCulloch
Annapolis Valley Health District
smcculloch@avdha.nshealth.ca
(902) 670-4071
Seniors Rapids Assessment Service
Valley Regional Hospital - Emerg. Dept
150 Exhibition Street, Kentville Nova Scotia B4N5E3
www.avhda.nshealth.ca

Goals and Objectives: To reduce falls risk in elderly patients seen in the emergency department. To enable community seniors to live in the place they call home.
Duration: May 2009 - ongoing

172

Program Title: **Seniors Rapid Assessment Service**
Contact Information: Carolyn Crawford
Annapolis Valley Health
ccrawford@avdha.nshealth.ca
(902) 698-2385
107 McKay Road, RR#3
Newport Hants County Nova Scotia B0N 2A0

Goals and Objectives: To provide coordinated health care to seniors presenting to the emergency department at Valley Regional Hospital who are perceived to benefit from strategies that would improve or maintain their functional abilities and enable them to remain in the place identified as home.

Duration: June 2010 – ongoing

173

Project Title: **South West Health Falls Prevention Program**

Contact Information: Tamra Farrow
South West Health District Authority, NS DHA 2
tfarrow@swndha.nshealth.ca
(902) 742-3542 ext. 628
60 Vancouver Street, Yarmouth Nova Scotia B5A 2P5
<http://www.swndha.nshealth.ca>

Goals and Objectives: The Falls Prevention Program, under the management of Rehabilitation Services, serves the acute care and community populations in NS DHA 2. In 2008, Accreditation Canada prioritized falls prevention as one of its patient/ client safety goals. In 2007, the Government of Nova Scotia created a province-wide Injury Prevention Strategy that outlines their commitment to prevent fall-related injuries among Nova Scotians. South West Health is demonstrating its commitment to fulfill the requirements of Accreditation Canada and support the efforts of the Government of Nova Scotia by initiating a falls prevention program in the district.

Duration: July 2007 – ongoing

174

Program Title: **Strategic Planning**

Contact Information: Morris Green
Nova Scotia Department of Health Promotion and Protection
morris.green@gov.ns.ca
(902) 424-6964
1601 Lower Water Street, 5th Floor
Halifax Nova Scotia B3J 2R7
<http://www.gov.ns.ca/hpp>

Goals and Objectives: Potential in the future to look at how to engage youth in falls prevention for the elderly in their community.

175

Program Title: **SWH Falls Prevention program**
Contact Information: Peggy Green
South West Health District
pgreen@swndha.nshealth.ca
(902) 724-3541
60 Vancouver Street
Yarmouth Nova Scotia B5A 2P1

Goals and Objectives: To make falls prevention a role of all care providers and staff of SWH. To meet the standards of Accreditation Canada and to meet the safety expectations of the populations we serve.

Duration: September 2008 - ongoing

176

Program Title: **Veteran's Falls management Programme**
Contact Information: Carolyn Williams
Capital district health authority
carolyn.williams@cdha.nshealth.ca
(902) 473-7190
Physiotherapy Dep't
Camp Hill Veterans Memorial Building
5595 Veterans Memorial Lane
Halifax.Nova Scotia B3H 2E1
<http://chdintra.cdha.nshealth.ca/index.cfm>

Goals and Objectives: To educate staff re risks for falls and interventions to assist; to assess risk for falls in our veteran population and to implement interventions to aid in falls prevention

Duration: January 2004 - ongoing

177

Program Title: **Veterans' Falls Management Program**
Contact Information: Patricia Bilski
Veterans' Services, Capital District health Authority,
Halifax, Nova Scotia
patricia.bilski@cdha.nshealth.ca
(902) 473-8656
Room 4318, 4th floor, VMB
5955 Veterans' Memorial Lane
Halifax, Nova Scotia B3H 2E1

Goals and Objectives: "Veterans Services Falls Management Program Goals: 1. To implement a sustainable Falls Management Program that includes Veterans, staff and family members 2. To encourage an environment that reinforces least restraint policy 3. To identify those Veterans who are at risk for falling. 4. To decrease the fall rate (number of repeat fallers) and severity of injuries associated with falls at our long term care facility. 5. To decrease the incidence of mortality related to a recent fall. Program Objectives: 1. To educate all Veterans, families and staff about the Falls Management Program 2. To educate all staff about the risks and multi-factor causes of falls in older adults 3. To initiate both protective and preventative fall intervention strategies 4. To flag which Veterans are at high risk of falling through the use of the Fall Risk Tool 5. To perform a comprehensive post fall assessment when necessary so that the interdisciplinary team is able to explore possible underlying causes of Veteran falls 6. To monitor the fall rate for Veterans Services and to evaluate the efficacy of the program under the leadership of the Falls Committee 7. To encourage each unit's interdisciplinary team to assume the responsibility for the safety and well being of their Veterans by actively participating in the Falls Management Program. "

Duration: September 2004 - ongoing

178

Program Title: **West Hants/Cobequid Preventing Falls Together Coalition**
Contact Information: Tracy Gregory
Seniors Safety Program of Hants County
seniorssafety@yahoo.ca
(902) 798-8380
Nova Scotia

Goals and Objectives: To bring awareness of the hazards of falls and how to make your home (inside and out) safer so as to prevent falls

Duration: June 1992 – ongoing

ONTARIO

179

Project Title: **A Step Ahead to Falls Prevention - Training Program for Health and Allied Health Care Providers**

Contact Information: Allison Bailey
York Region Community and Health Services Dept.
allison.bailey@york.ca
(905) 762-2090
50 High Tech Road 2nd Floor
Richmond Hill, Ontario L4B 4N7
<http://www.york.ca/injuryprevention>

Goals and Objectives: Goal: To increase knowledge, skills, and awareness about factors that impact the risk of falling in older adults.
Objectives: participants will understand: age related physical changes that may contribute to the risk of falling; how ageism, learned helplessness, and personal attitudes may affect older adults and the caregiver relationship; risk factors for falls; changing behaviour through supportive coaching.

Duration: June 2008 - ongoing

180

Project Title: **Accessibility Resource Centre**

Contact Information: Christy Skelly
Simcoe County Association for the Physically Disabled
cskelly@scapd.on.ca
(705) 737-3263
Simcoe County Association for the Physically Disabled
44 Cedar Point Dr. Unit 1102 Barrie, Ontario L4N 5R7
<http://www.scapd.on.ca>

Goals and Objectives: To offer information and guidance to seniors and those with physical disabilities when looking for assistive devices, home renovations and vehicle modifications.

Duration: July 2008 – ongoing

181

Project Title: **Age-Friendly Communities**

Contact Information: Angela Van Berlo
HKPR District Health Unit
avanberlo@haliburton.hkpr.on.ca
(705) 457-1391
P.O. Box 570 191 Highland Street, Unit 301

Haliburton, Ontario K0M 1S0

Goals and Objectives: Keep seniors healthy and well as they age -recognize strengths and barriers in the community based on the 8 key features identified by the WHO -create key priority areas for seniors -produce a practical tool for decision makers

Duration: March 2009 - ongoing

182

Project Title: **Back Education and Falls Prevention**

Contact Information: Carla Floriani
THC Inc
2cfloriani@sympatico.ca
(905) 333-0570

Goals and Objectives: To educate Personal Support Workers regarding their risks for falls and to identify same in their community clients. Provide intervention strategies.

Duration: January 2008 – ongoing

183

Project Title: **Bathtub/shower grab bar building code proposal**

Contact Information: Dot Bonnenfant
University of Ottawa
dbonnenf@uottawa.ca
(613) 562-5800 extension 8107
Rm 1118E University of Ottawa
451 Smyth Rd Ottawa, Ontario K1H 8M5
<http://www.chnet-works.ca>

Goals and Objectives: To support development and acceptance of an evidence based bathtub/shower building code for new dwellings in the national building code. To involve health care, injury prevention sectors as well as homeowner, consumer safety and other stakeholder sectors in support of the building code.

Duration: February 2006 - ongoing

184

Project Title: **CHNET-Works! Fireside Chats**

Contact Information: Dot Bonnenfant
Population Health Improvement Research Institute

dbonnenf@uottawa.ca
(613) 562-5800 extension 8107
Rm 1118E University of Ottawa
451 Smyth Rd Ottawa, Ontario K1H 8M5
<http://www.chnet-works.ca>

Goals and Objectives: To support a networking infrastructure for community health professionals, linking researchers, practitioners and decision makers - to share leading edge research and application and to support discussion and mobilization around pressing community health issues.

Duration: January 2005 - ongoing

185

Project Title:

Coordinator VON SMART Program

Contact Information:

Pam Buys

VON

pam.buys@von.ca

(519) 637-6408

175 S. Edgeware Road St. Thomas, Ontario N5P 4C4

<http://www.von.ca>

Goals and Objectives: The purpose of the VON exercise program is to improve strength, mobility, balance and flexibility for fall prevention and to assist with maintaining independence at home.

Duration: March 2003 - ongoing

186

Project Title:

Don't Fall For It!

Contact Information:

Tara Evershed

Fairview Centre for Community Health & Wellness

tevershed@fairviewmennonitehomes.com

(519) 653-5719

515 Langs Drive Cambridge Ontario N3H 5E4

Goals and Objectives: Increase strength, improve balance, educate how fitness can decrease falls

Duration: January 2010 – March 2010

187

Project Title:

Fall Prevention

Contact Information:

Bernadette Vanspall

Woolwich Community Health Centre

bvanspall@wchc.on.ca
(519) 578-6806
P.O.Box 370, 9 Parkside Drive St Jacobs, Ontario, N0B 2N0

Duration: Ongoing

188

Project Title: **Fall Prevention Program**
Contact Information: Brenda Lennon
North Bay General Hospital
Lennob@nbgh.on.ca
(705) 474-8600
McLaren Site. 750 Scollard Street. P.O. Box 2500.
North Bay Ontario P1B 5A4.

Goals and Objectives: Reduction in the severity and number of fall incidents by 15%, one year post implementation. Increased awareness of patient safety.

Duration: December 2009 – ongoing

189

Project Title: **Fall Prevention Program**
Contact Information: Sarah Blackwood
Community Care East York
sblackwood@ccey.org
(416) 422-2026
ON
#303-840 Coxwell Avenue, Toronto, Ontario, M4C5T2
<http://www.ccey.org>

Goals and Objectives: Interprofessional approach to fall prevention including promotion, education, exercise, nutrition programs, and identification and modification of risk factors.

Duration: September 2008 – ongoing

190

Project Title: **Falls Intervention Team (FIT)**
Contact Information: Anne Wenger
Toronto Public Health
awenger@toronto.ca
(416) 397-4783
East York Civic Centre 850 Coxwell Avenue
Toronto, Ontario M4C 5R1
<http://www.toronto.ca/health>

Goals and Objectives: Goal-to reduce the incidence and consequences of falls for frail, community-dwelling seniors 65 years and over. Objectives- decrease # and/or degree of modifiable risk factors for falls in participants as compared with pre-admission status, increase social participation, adhere to exercise program, reduce falls as compared with pre-admission status

Duration: March 2001 - ongoing

191

Project Title: **Falls Prevention through exercise**

Contact Information: Grace Bagnulo
Niagara Region/Seniors Community Programs
grace.bagnulo@niagararegion.ca
(905) 985-6900
2201 St. David's Road Thorold Ontario L2V 3Z3

Goals and Objectives: To save money for healthcare. To prevent falls in seniors by improving their strength, flexibility and balance through exercise. To improve ADL'S. To improve quality of life

Duration: January 2010 - ongoing

192

Project Title: **Falls Prevention**

Contact Information: Sandy Montreuil
Northeast mental health centre
smontreuil@nemhc.on.ca
(705) 474-1200
4700 Hwy 11 North P.O Box 3010
North Bay Ontario P1B8L1

Goals and Objectives: Reduce the incidence and severity of falls. Provide ongoing assessment to identify patients at risk of falls for the development of a falls prevention plan of care. Maintain environmental safety. Increase mobility and function. Promote patient independence utilizing least restraint. Heighten staff and patient/family awareness of the risks of falls and of the potential physical and/or psychological effects of falls Provide patients with tips to promote safety in Hospital and in their home environment to further ensure their safety and recovery.

Duration: December 2009 - ongoing

193

Project Title: **Falls Prevention for seniors**
Contact Information: Christine Daigneault-Hach
Porcupine Health Unit
christine.daigneault-hache@porcupinehu.on.ca
(705) 267-1181
169 Pine St South Postal Bag 2012
Timmins, Ontario P4N 8B7
<http://www.porcupinehu.on.ca>
Goals and Objectives: Decrease injuries/deaths related falls in the elderly population and increase independence.
Duration: January 2000 - ongoing

194

Project Title: **Falls prevention program**
Contact Information: Debbie Boreland
northeast mental health centre
dboreland@nemch.on.ca
(705) 474-1200
Northeast mental health centre 4700 Hwy 11
North bay, Ontario,P1B-8L1
Goals and Objectives: Patient safety, utilizing a falls assessment tool to be used on admission and reviewed if change in status, or after a fall to assess needs, so that patients are identified for their risk of falls, and interventions can be put in place such as high/low bed, better footwear, or medication changes and therefore have less falls in our hospital.
Duration: November 2009 - ongoing

195

Project Title: **Falls Prevention Program**
Contact Information: Cheryl Sheppard
Cassellholme
sheppardc@cassellholme.on.ca
(705) 474-4250
Manager of Clinical Standards Cassellholme
400 Olive Street North Bay ,Ontario P1B 6J4
Goals and Objectives: Reduce resident falls by 10% Staff awareness/education development of a "Champions" committee
Duration: January 2007 - ongoing

196

Project Title:

Falls Prevention Referral Program

Contact Information:

Angela Van Berlo
HKPR District Health Unit
avanberlo@haliburton.hkpr.on.ca
(705) 457-1391
P.O. Box 570 191 Highland Street, Unit 301
Haliburton, Ontario K0M 1S0

Goals and Objectives:

"Carol Browne, The Seniors Health Nurse at the Haliburton Highlands Family Health Team (HHFHT) will act as the Co-ordinator for this program. The steps involved with the program include:.. 1. Referral forms will be distributed throughout Haliburton County. With these forms, community members and health care workers will have the opportunity to assist a senior who has fallen or may be at risk of falling, by obtaining consent and completing a referral form.. 2. The referral form will be faxed or phoned in to the HHFHT.. 3. The co-ordinator will complete an assessment and referral form by telephone and will develop an action plan.. 4. Based on the assessment and with the client's consent, the nurse will fax the action plan to the appropriate service providers.. 5.An information package will be distributed by the OT/PT or will be sent directly to the client and/or caregiver.. 6.The service providers will report back to the co-ordinator at the HHFHT in order to update the client's file regarding all services provided.. 7.The co-ordinator will follow-up with the client as to satisfaction, needs and status.. 8.The co-ordinator will complete a summary form and fax it to the client's primary care practitioner.. 9.The co-ordinator will gather statistical information and share with community partners on a quarterly basis. "

Duration:

June 2008 - ongoing

197

Project Title:

Falls Risk Screen

Contact Information:

Grace Castro-Nolet, Phyllis Laframboise
Bruyere Continuing Care
gcastro@bruyere.org
(613) 562-6262
43 Bruyere St Ottawa, Ontario K1N-5C8
<http://www.bruyere.org>

Goals and Objectives: To identify falls risk factors (from a functional stand point) in community dwelling seniors. Provide education (targeted to specific risk factors in each client) re:falls prevention strategies. Determine percentage of clientele implementing strategies and percentage of strategies being implemented in clientele.

Duration: September 2009 - ongoing

198

Project Title: **Grey Bruce Falls Prevention & Intervention Program**

Contact Information: Lindsay Wonnacott
Grey Bruce Falls Prevention & Intervention Program (Grey Bruce Health Unit)
l.wonnacott@publichealthgreybruce.on.ca
(519) 376-9420
101 17th Street East Owen Sound, Ontario N4K 0A5

Goals and Objectives: The Grey Bruce Falls Prevention & Intervention Program is a comprehensive program consisting of five components and three risk levels. The purpose of the program is to address the needs of seniors who are at various risk levels of falling - low, to moderate and high risk through an integrated system of services within Grey Bruce based on a continuum of evidence based initiatives. The program is funding through the Aging at Home Strategy.

Duration: April 2008 - ongoing

199

Project Title: **Healthy Aging Program**

Contact Information: Debbie Junk-Lloyd
West Parry Sound Health Centre
djunklloyd@wpshc.com
(705) 746-4540
6 Albert St Parry Sound ON P2A 3A4
<http://www.wpshc.com>

Goals and Objectives: Through education and exercise in a group format the goal is to improve awareness of safety issues, improve strength and balance and prevent falls.

Duration: November 2008 - ongoing

200

Project Title: **High End Balance Program**
Contact Information: Anita Mennie
Muskoka Landing Long Term Care Centre
bruce_mennie@hotmail.com
(705) 788-7713
65 Rogers Cove Drive Huntsville, Ontario P1H 2L9

Goals and Objectives: Involve independently ambulating residents and those at mid-high risk of falls,-reduce falls incidence,-increase resident awareness of measures to prevent falls

Duration: January 2010 - ongoing

201

Project Title: **Home At Last**
Contact Information: Mary Camley
VON Simcoe County
mary.camley@von.ca
(705) 737-5044
35 Cedar Pointe Dr Unit 31 Barrie, Ontario L4N 5R7

Goals and Objectives: When we bring home the client from hospital, our PSW does a safety scan of the home. This includes a fall and medication safety review. This alerts program to any potential safety concerns.

Duration: July 2008 – ongoing

202

Project Title: **Home Support Exercise Program**
Contact Information: Joanne Baxby
Acclaim Health
jbaxby@acclaimhealth.ca
(905) 827-8800
2370 Speers Road Oakville Ontario L6L 5M2
www.Acclaim Health .com

Goals and Objectives: To prevent falls of the frail elderly. To decrease hospitalizations related to falls.

Duration: December 2009 – December 2010

203

Project Title: **Home Support Exercise Program**
Contact Information: Cheryl Colton
HNHB CCAC
cheryl.colton@hnhb.ccac-ont.ca
(905) 633-3861
440 Elizabeth Street Burlington, Ontario

Goals and Objectives: Decrease risk of falls in elderly clients at home in a community setting. Enhance quality of life and increase activity of seniors

Duration: November 2009 - ongoing

204

Project Title: **Home Support Exercise Program**
Contact Information: Robin Brock
Comcare Health Services
brockr@comcarehealth.ca
(905) 685-6501
4-3550 Schmon Pkwy Thorold, Ontario L2V 4Y6

Goals and Objectives: To prevent falls, returns to emerg, improve ambulation

Duration: October 2008 - ongoing

205

Project Title: **Home support Exercise Program**
Contact Information: Laurie Fraser
Sudbury & District Health Unit
fraserl@sdhu.com
(705) 522-9200
ON
Sudbury & District Health Unit 1300 Paris St.
Sudbury Ontario P3E 3A3
<http://www.sdhu.com>

Goals and Objectives: The exercise program is comprised of ten simple, yet progressive exercises, designed to enhance and maintain functional fitness, mobility and independence.

Duration: January 2010 - ongoing

206

Project Title: **Home Visit to Older Adults at High Risk of Falling**

Contact Information: Cathy Dykeman
Halton Region Health Department
cathy.dykeman@halton.ca
(905) 825-6000
1151 Bronte Road Oakville Ontario L6M 3L1
<http://www.halton.ca/health>

Goals and Objectives: Provide an accessible in-home option for community-dwelling seniors at high risk of falling to receive a multidimensional risk assessment, preventive health education and referral to community supports and resources

Duration: March 2003 - ongoing

207

Project Title: **HSEP**

Contact Information: Joanne Berrigan
Acclaim Health
jberrigan@acclaimhealth.ca
(905) 827-8800
2370 Speers Road Oakville, Ontario L6L 5M2
<http://www.acclaimhealth.ca>

Goals and Objectives: To assist the CCAC in reducing falls in sedentary elderly in Burlington by servicing our program participants by instruction/participation in the HSEP

Duration: December 2009 – March 2010

208

Project Title: **Injury Prevention Forum**

Contact Information: Jayne Morrish
Ontario Injury Prevention Resource Centre
jmorrish@smartrisk.ca
(905) 325-2963

Goals and Objectives: Provide opportunities for networking with colleagues. Provide current injury prevention information. Provide mobilization strategies on injury policy issues..

Duration: September 2009 – March 2010

209

Project Title: **Integrated Regional Falls Program**

Contact Information: Marsha Coombs: Program Manager

Integrated Regional Falls Program
mfcoombs@osmh.on.ca
(705) 325-2201
Orillia Soldiers Memorial Hospital 170 Colborne St West
Orillia, Ontario L3V 2Z3

Goals and Objectives: Community based program that provides screening and interventions to reduce falls and the risks of falls to the seniors population across the North Simcoe Muskoka LHIN. Program includes ER support nurses to follow-up on falls from the ER screening clinics in communities and specialized assessment clinics for more complexed patients.

Duration: March 2010 - ongoing

210

Project Title: **La prevention des chutes chez les personnes aes francophones vivant en situation minoritaire au Canada**

Contact Information: Jacques G. Michaud
Laurentian University
jmichaud@laurentienne.ca
(705) 560-5237
528 Seocnd Ave. South Sudbury Ontario P3B 3L5
<http://www.laurentienne.ca>

Goals and Objectives: Invoice, evaluate, adapt and promote programs that could better answer the needs of practitioners working with francophone seniors in minority linguistic situations

Duration: November 2009 - ongoing

211

Project Title: **Mississauga Halton Falls Prevention Initiative**

Contact Information: Monica Marquis
Mississauga Halton Falls Prevention Initiative
mmarquis@cvh.on.ca
(647) 290-0235
2200 Eglinton Ave W Mississauga, Ontario
<http://www.cvh.on.ca>

Goals and Objectives: Reduce falls and falls related injuries in older adults. Reduce the rate of emergency department visits, hospitalizations, and long term care admissions among seniors in the Mississauga Halton LHIN.

Duration: January 2007 - ongoing

212

Project Title: **No Falls Fashion Show**
Contact Information: Krista Skutovich
HKPR District Health Unit/Northumberland Fall Prevention Coalition
kskutovich@hkpr.on.ca
(905) 885-9100
HKPR District Health Unit 200 Rose Glen Road
Port Hope, Ontario L1A 3V6
<http://www.hkpr.on.ca>

Goals and Objectives: Increase awareness of 1) fall prevention strategies 2) safety aids 3) community programs and services. Increase use of 1) safety aids 2) community programs and services. Increased personal action to prevent falls

Duration: January 2007 – ongoing

213

Project Title: **Ongoing risk assessment in client's home**
Contact Information: Sheila Robinson
VON Oxford site
Sheila.Robinson@von.ca
(519) 539-1231
570 Ingersoll Ave. Woodstock, Ontario N4S4Y2
<http://www.von.ca>

Goals and Objectives: To prevent risk to clients and volunteers who visit them

Duration: Ongoing

214

Project Title: **Physically Supportive Program**
Contact Information: Amy MacFarlane
Recreational Respite
amy.macfarlane@recrespite.com
(877) 855-7070
5602 Tenth Line West Box #57034
Mississauga, Ontario L5M 0M5
<http://www.recrespite.com>

Goals and Objectives: reduce falls, increase independence through individualized strength and balance supportive therapeutic programs. Create a short term solution for those awaiting long term rehab solutions to prevent further deterioration and decline in abilities.

Duration: November 2009 – ongoing

215

Project Title: **Reducing the Risk For Falls: Review, Revise & Strategize**
Contact Information: Dianne Rossy
The Ottawa Hospital
drossy@toh.on.ca
(613) 761-4000
Ottawa Hospital Civic Campus 1053 Carling Ave.,
Ottawa Ontario K1Y 4E9
<http://www.bing.com/search?FORM=DNSAS&q=www.the+ottawahospital.on.ca>

Goals and Objectives: 1. Review and update the scholarly discussions of fall risk reduction and fall risk programs for use in acute care. Update literature composite review annually and as required. 2. Review and revise the current risk assessment tool, interventions and recommendations that support evidenced informed best practices as appropriate. 3. Support the Fall Risk Reduction Program at TOH. 4. Collaborate with Nursing Professional Practice, Nursing Quality and Best Practices Workgroup to: Develop appropriate TOH fall benchmarks for acute care and specialty populations (e.g., Rehabilitation and transitional care). Develop appropriate monitoring practices and prevalence studies. Review and disseminate results of prevalence studies and benchmarks. Support on-unit monitoring strategies. Support implementation of recommendations as a result of prevalence studies and research

Duration: January 1992 - ongoing

216

Project Title: **Sault Rising Stars Seniors Acting Troupe**
Contact Information: Raija Lappalainen
Algoma Public Health
rlappalainen@algotmapublichealth.com
(705) 541-7140
6th Floor Civic Centre 99 Foster Drive
Sault Ste. Marie Ontario P6A 5X6
<http://www.algotmapublichealth.com>

Goals and Objectives: To increase awareness of the risks of falls and how to prevent them through the delivery of light hearted vignettes by older adults.

Duration: December 2005 – ongoing

217

Project Title: **Senior Safekeeping**
Contact Information: Marian Beauregard
Community Support Services
mbeau@belvedereheights.com
(705) 746-5602
21 Belvedere Ave. Parry Sound Ontario P2A 2A2

Goals and Objectives: To help seniors stay in their homes, independently, for as long as possible with good quality of life.

Duration: June 2008 – ongoing

218

Project Title: **Seniors Choices**
Contact Information: Kathy Riley
OC Transpo Ottawa
kathy.riley@ottawa.ca
(613) 842-3636
1500 St. Laurent Blvd Ottawa, Ontario
<http://www.octranspo.com>

Goals and Objectives: Providing presentations and written material on Conventional and Para transportation services available in Ottawa. . To ensure seniors, families and caregivers are aware of all the available options and what to consider before choosing the most appropriate type of transportation. . Make tools such as Priority Seating Cards so that the person can sit at the front of the bus as well as the Attendant Card so that the customer can bring someone to assist them at no charge. Others tools are also available

Duration: September 2003 - ongoing

219

Project Title: **Seniors Program**
Contact Information: Susan Bonomo
York Region Public Health
susan.bonomo@york.ca
(905) 940-1787
The Regional Municipality of York 4261 Hwy. #7.,
Suites B6-9 Unionville, Ontario L3R 9W6

Goals and Objectives: Train the trainer; build awareness; reduce incidence of falls

Duration: Ongoing

220

Project Title: **Senior's symposium**
Contact Information: Aimee Campbell
Sudbury and District Health Unit
campbella@sdhu.com
(705) 222-9202
800 Centre Street, Unit 100
Espanola Ontario P5E 1J3

Goals and Objectives: A symposium was developed where seniors living in the community would attend and learn about all the resources, assistance, and organizations within the Espanola area. They had a chance to listen to seminars of seniors driving, and fire prevention. A exercise break was also included.

Duration: October 2009

221

Project Title: **Simply Safer is Simply Smarter**
Contact Information: Carol Goodall
Hastings Prince Edward Counties Health Unit
cgoodall@hpechu.on.ca
(613) 966-5513
179 North Park Street Belleville, Ontario K8P 4P1
<http://www.hpechu.on.ca>

Goals and Objectives: To promote the inclusion of upgraded/enhanced safety features in new home builds or renovations which will reduce the risk of falling and improve safety for all ages

Duration: March 2010 - ongoing

222

Project Title: **SMART**
Contact Information: Anita Pukila
Victorian Order of Nurses
Anita.Pukila@von.ca
(807) 346-3260
214 Red River Rd suite 200 Thunder Bay, Ontario P7B 1A6

Goals and Objectives: Build up the mobility and balance of frail elderly in their homes.

Duration: September 2008 - ongoing

223

Project Title: **SMART & collaborative with multi agency group**
Contact Information: Anita Pukila
Victorian Order of Nurses Thunder Bay branch
Anita.Pukila@von.ca
(807) 344-0012
214 Red River Rd., suite 200,
Thunder Bay, Ontario P7B 1A6

Goals and Objectives: To improve the strength and mobility of frail elderly in their homes and thus reduce their falls.

Duration: September 2008 – March 2010

224

Project Title: **SMART (Seniors Maintaining Active Roles Together)**
Contact Information: Jennifer McLellan
VON
jennifer.mclellan@von.ca
(705) 737-5044
31-35 Cedar Pointe Drive Barrie, ON L4N 5R7
<http://www.von.ca>

Goals and Objectives: SMART is geared toward frail seniors. Our program's goal is for seniors to become more active and participate in exercise to prevent falls. If this goal is achieved then seniors will become stronger, have better range of motion, flexibility, strength and endurance and they will be less likely to fall and less likely to get injured as a result of a fall.

Duration: August 2008 – ongoing

225

Project Title: **SMART (Seniors Maintaining Active Roles Together)**
Contact Information: Kelly Catherwood
VON Niagara
kelly.catherwood@von.ca
(905) 354-7764
5710 Kitchener St. Niagara Falls, Ontario L2G 1C1
<http://www.von.ca>

Goals and Objectives: Designed for community members 55+ to maintain/improve their strength, mobility, balance and flexibility regardless of their current ability level.

Duration: January 2010 - ongoing

226

Project Title: **SMART (Seniors Maintaining Active Roles Together) Exercise Program**

Contact Information: Ulla Rose
VON Simcoe County Branch
ulla.rose@von.ca
(705) 737-5044
35 Cedar Pointe Drive, #31 Barrie, Ontario L4N 5R7
<http://www.von.ca>

Goals and Objectives: The SMART Exercise Program is designed for community members 55+ who wish to improve their strength, balance and flexibility regardless of their current ability level. SMART programs are led by volunteers who receive specialized training (including CPR & First Aid) and ongoing education to deliver safe, appropriate physical activities designed for successful aging. The SMART In-Home and Group classes are for participants who may not benefit from traditional physical activity programs due to health issues, mobility restrictions, confidence, chronic disease or other reasons. There is no floor or mat work involved and all activities are tailored to the participant's ability level. Benefits to participations include: Improved physical health and energy; Increase and maintain strength, coordination, balance and flexibility; Improved lung and heart function; Decreased bone loss; Improved mobility and independence; Weight management; Falls prevention; Opportunities to meet new people and socialize. Increased physical activity can help prevent or manage: High blood pressure; Cholesterol; Respiratory Conditions; Heart Disease; Stroke; Diabetes; Arthritis; Osteoporosis; Cancer; Obesity; Stress.

Duration: July 2008 - ongoing

227

Project Title: **SMART Exercise**

Contact Information: Angela McMillan
VON Canada, Perth- Huron and Middlesex-Elgin sites
angela.mcmillan@von.ca
(519) 659-2273

Goals and Objectives: Improve balance and range of motion through regular exercise

228

Project Title: **Smart Moves**
Contact Information: Phil Groff
SMARTRISK
pgroff@smartrisk.ca
(416) 429-3831
36 Eglinton Avenue West, Suite 704
Toronto, Ontario M4R 1A1
<http://www.smartrisk.ca>

Goals and Objectives: A toolkit for seniors and their caregivers to provide in a single source the best evidence-based tools and information about preventing falls and injury under headings of bone health, exercise, home hazards, medication use, and first response to falls.

Duration: January 2004 – ongoing

229

Project Title: **Smart Moves for Fall Prevention- education sessions for PSWs**
Contact Information: Krista Skutovich
HKPR District Health Unit/Northumberland Fall Prevention Coalition
kskutovich@hkpr.on.ca
(905) 885-9100
HKPR District Health Unit 200 Rose Glen Road
Port Hope, Ontario L1A 3V6
<http://www.hkpr.on.ca>

Goals and Objectives: Increase Personal Support Workers' (PSWs) knowledge of clients' risk factors for falls. Increase awareness of PSW role in fall prevention for clients. Increase action taken by PSWs to prevent falls among clients

Duration: August 2009 – ongoing

230

Project Title: **SMART program**
Contact Information: Christine Vallis-Page
VON Canada- Ontario Region, Grey-Bruce
christine.vallis@von.ca
(519) 376-5895
1280 20th street East Owen Sound, Ontario N4k 6H6
<http://www.von.ca>

Goals and Objectives: Improving strength, balance, flexibility and endurance in seniors to ensure mobility is safer and independence is maintained.

Duration: January 2006 - ongoing

231

Project Title: **SMART Seniors Maintaining Active Roles Together**

Contact Information: Jill Dowling/Condice Follest
VON Hamilton
jill.dowling@von.ca
(905) 522-0053
414 Victoria Ave N Hamilton, Ontario L8L 5G8
<http://www.von.ca>

Goals and Objectives: Improve strength, balance and flexibility regardless of ability levels. Fall prevention. Maintain independence to remain at home.

Duration: February 2006 - ongoing

232

Project Title: **Stand Up - PIED (Montreal Public Health)**

Contact Information: Ginette Asselin
Ottawa Public Health
Ginette.Asselin@ottawa.ca
(613) 580-6744
100 Constellation Cr (26-43) Ottawa, Ontario K2G6J8

Goals and Objectives: To improve balance, leg strength, ankle mobility & stimulate lower limb proprioception.

Duration: January 2009 - ongoing

233

Project Title: **Stand Up! Program**

Contact Information: Laurie Fraser
Sudbury & District Health Unit
fraserl@sdhu.com
(705) 522-9299
Sudbury & District Health Unit 1300 Paris St.
Sudbury, Ontario P3E 3A3
<http://www.sdhu.com>

Goals and Objectives: The group exercise program consists of two sessions per week for 12 weeks, including one 30 minute education session per week and exercises to continue at home. All

exercises meet at least one of the following objectives- improve balance, increase leg strength, improve ankle mobility, stimulate lower limb proprioception, maintain bone density where there is risk of fractures, and improve the ability to get up from the ground.

Duration: February 2010 - ongoing

234

Project Title:

Stay at Home Strategy

Contact Information:

Teresa Chambers
Niagara Region
teresa.chambers@niagararegion.ca
(905) 988-6900
2201 St Davids Road PO Box 344 Thorold, Ontario L3C 3Z3
<http://www.niagararegion.ca>

Goals and Objectives:

To increase strength, balance and flexibility of local seniors to decrease amount of emergency room visits and fall related injuries that also contribute to nursing home admissions

Duration:

January 2010 - ongoing

235

Project Title:

Stay on Your Feet

Contact Information:

Alan Salmoni
ONF Prevention Committee
asalmoni@uwo.ca
(519) 661-3541
School of Kinesiology, UWO
London, Ontario N6A 3K7

Goals and Objectives:

The goal of SOYF is to promote a community-based falls prevention program involving a multidimensional strategy from awareness building to specific programming and policy development.

Duration:

236

Project Title:

STAY ON YOUR FEET

Contact Information:

PATRICIA CLICHE
OIPRC
PAT17@SYMPATICO.CA
(705) 472-8172
1270 HWY 17 NORTH BAY ONTARIO P1B 8G4

Goals and Objectives: The SOYF program is now being developed as a Practice evidence based with resources developed with a 5 year work plan developed by the Health Unit and an active coalition involved with an evaluation component - other components are being built into the initiative.

Duration: April 2007 - ongoing

237

Project Title: **Stay On Your Feet Parry Sound**

Contact Information: Joanne Shulist
North Bay Parry Sound District Health Unit
joanne.shulist@nbdhu.on.ca
(705) 746-5801
70 Joseph Street, Suite 302 Parry Sound, Ontario P2A 2G5
<http://www.healthunit.biz>

Goals and Objectives: To decrease the number of falls, to reduce the severity of injury and to prevent deaths related to falls in the Parry Sound area for older adults. To maintain and develop the Stay On Your Feet Parry Sound Working Group to provide a venue for all partners to meet and strategize towards the development of falls prevention programs unique to our area. To support a coordinated approach to falls prevention activities. To provide a mechanism for joint falls prevention initiatives and priority setting that integrates and strengthens existing programs and services in the Parry Sound area. To promote the work of the group and create community awareness about fall risks, prevention strategies and available programs and services. To coordinate the dissemination of new information and provide opportunities for professional development for members and community health professionals working with the target population. To seek out and secure funding sources as required.

Duration: April 2009 - ongoing

238

Project Title: **Staying Independent**

Contact Information: Carolyn Jones
Simcoe Muskoka District Health Unit
carolyn.jones@smdhu.org
Unit 12-575 West Street South, Orillia Ontario L3V6R3
<http://www.simcoemuskokahealth.org>

Goals and Objectives: It is program wide, not sure of all the research pieces that is focused in the Barrie region
Duration: January 2008 - ongoing

239

Project Title: **Strong and Steady, Falls Prevention Program**

Contact Information: Betty Vukusic
Credit Valley Hospital
bvukusic@cvh.on.ca
(905) 813-1571
Credit Valley Hospital 2200 Eglinton Ave W
Mississauga, Ontario L5M 2N1
<http://www.cvh.on.ca>

Goals and Objectives: Provide information re risk factors to increase safe environment Increase regular walking Increase safe mobility practices, strength and balance. Decrease number of falls in program participants Increase awareness of community options to be active Increase confidence and increase adherence to patient activity centred goals Increase knowledge of personal fall prevention strategies. Empower clients to self manage their personal risk for falls Decrease falls in the community, admissions to emergency department and Long term care.

Duration: June 2006 - ongoing

240

Project Title: **Successfully Engaging Older Adults in Falls Preventing Activities**

Contact Information: Joanne Alessi
Haldimand-Norfolk Health Unit
joanne.alessi@hnhu.org
(905) 318-5367
Haldimand-Norfolk Health Unit 282 Argyle St.
S. Caledonia, Ontario N3W 1K7

Goals and Objectives: 1) To translate best practice research for service providers delivering falls prevention services to community dwelling older adults. 2) to influence service providers to adopt the falls prevention recommendations put forth by the 'Prevention of Falls Network Europe' (ProFaNE), Lucy Yardley et al - endorsed by the WHO) in an effort to engage older adults in falls prevention interventions and to increase uptake of these programs . Namely these

recommendations include: 3) to raise awareness in the general population that undertaking specific physical activities has the potential to improve balance and prevent falls. 4) When offering or publicizing fall prevention interventions, promote immediate benefits that fit with a positive self-identity for seniors. 5) utilize a variety of forms of social encouragement to engage older people in interventions. 6) Ensure that the intervention is designed to meet the needs, preferences and capabilities of the individual. 8) Encourage confidence in self-management rather than dependence on professionals by giving older people an active role.. 9) Draw on validated methods for promoting and assessing the processes that maintain adherence, especially in the longer term

Duration: January 2000 - ongoing

241

Project Title: **Use of dual-task tests to identify fall risk in the cognitively impaired (MCI and mild AD) without a recent history of falling**

Contact Information: Dr. Susan Muir
University of Western Ontario
susan.muir@uwo.ca
(519) 435-1252
161 Thornton Avenue London Ontario N5Y 2Y7

Goals and Objectives: Despite fall prevention guidelines, recommendations for the best screening method of people with cognitive impairment or no recent fall history are limited. Gait impairment is a prominent falls risk factor and among people without a history of falls the assessment of gait may offer the highest yield for screening people at an elevated risk. Cognitive function plays a key role in the regulation of gait and the use of dual-tasks (walking while talking), may be a sensitive method to identify early gait impairments. The objective was to characterize the risk of falling among older adults with different cognitive states and no recent history of falls

Duration: December 2009 – August 2010

242

Project Title: **Volunteers for Seniors**

Contact Information: Bonnie Cronin
Amma Foundation of Canada

bcronin@cogeco.ca
(289) 344-0812
9158 Trafalgar Rd Georgetown Ontario L7G 4S5

Goals and Objectives: Goals: 1) To offer the Home Exercise Support Program to seniors in order to increase mobility, balance, strength and flexibility. 2) To increase independence, socialization, health and well-being of seniors. . Objectives: 1) To teach the Home Exercise Program to seniors in their homes and to follow up with 3 – 5 visits over 3 months, in order to monitor progress and to encourage the senior(s) to continue to do the exercises. 2) In each visit, to discuss benefits, promote and encourage seniors to continue doing the 10 simple exercises. 3) To further assess needs of seniors and to make appropriate referrals.

Duration: March 2010 - ongoing

243

Project Title: **VON Canada SMART (Seniors Maintaining Active Roles Together) Program**

Contact Information: Sheila Schuehlein
VON Canada
kom_on_sheila@yahoo.com
(519) 741-5467
c/o 144 Peter St. Kitchener Ontario N2G 3K5
<http://www.von.ca> 'special projects - seniors exercise'

Goals and Objectives: Through In-Home and Group functional fitness, VON SMART helps reduce falls through improving the balance, strength, coordination and flexibility of program participants and peer leaders

Duration: September 2002 - ongoing

244

Project Title: **VON Sakura House- Hospice**

Contact Information: Marlene Fewster
VON Oxford Sakura House
Marlene.fewster@von.ca
(519) 537-8515

Goals and Objectives: Prevention of all falls for patients, families, visitors and staff

Duration: September 2009 - ongoing

245

Project Title: **VON SMART**
Contact Information: Shirley Blanchette
VON
shirley.blanchette@von.ca
(613) 392-8852
VON 80 Division St. Trenton, Ontario K8V 5J5
<http://www.von.ca>
Goals and Objectives: Improve balance, coordination, endurance and strength.
Duration: October 2005 - ongoing

246

Project Title: **VON SMART Exercises -(Seniors Maintaining Active Roles Together)**
Contact Information: Pam Buys
Victorian Order of Nurses
pam.buys@von.ca
(519) 637-6408
175 S. Edgeware Rd St. Thomas, Ontario N5P 4C4
<http://www.von.ca>
Goals and Objectives: The goal is for seniors in the community to maintain their strength, flexibility, coordination and balance to prevent falls and maintain their independence.
Duration: March 2003 – ongoing

247

Project Title: **VON SMART Program**
Contact Information: SMART Program
VON Oxford
beth.munro@von.ca
(519) 539-1231
570 Ingersoll Ave. Woodstock Ontario N4S 4Y2
<http://www.vonoxford.com>
Goals and Objectives: VON goal is to promote regular exercise in a group or In-Home situation. All exercises are tailored to the group abilities. All exercises have been develop to maintain or increase strength, coordination, balance and flexibility. Group classes have a strong social component as well.
Duration: June 2001 - ongoing

248

Project Title: **VON SMART Program - exercise for seniors**

Contact Information: Fran Betts
VON Canada, Chatham-Kent Branch
fran.betts@von.ca
(519) 352-4462
103-405 Riverview Drive
Chatham, Ontario N7M 5J5
<http://www.von.ca>

Goals and Objectives: Provide a means(exercise) for 55+ members of our communities to live independently in their own homes or chosen environment (retirement home) for as long as possible. Exercises focus on fall prevention and flexibility and strength to perform ADLs

Duration: July 2006 – ongoing

249

Project Title: **VON SMART Seniors Exercise Program**

Contact Information: Fran Betts
VON Canada, Chatham-Kent Branch
fran.betts@von.ca
(519) 352-4462
103-405 Riverview Drive Chatham ON N7M 5J5

Goals and Objectives: Educate and hopefully improve/change attitude toward physical activity of 55+ population. Falls prevention. Extend period of independent living. Reduce ER visits. Decrease health dollars spent as the result of seniors and falls.

Duration: June 2006 - ongoing

250

Project Title: **Wellness for Seniors**

Contact Information: Andrea Martin
VON Canada, Perth-Huron site
andrea.martin@von.ca
(519) 271-7991
VON Perth-Huron 111-40 Long Drive
Stratford Ontario N5A 8A3
<http://www.von.ca>

Goals and Objectives: Get seniors active 1. Have community dwelling seniors participate in a variety of exercise programs that focus on

functional ability and are supportive to seniors abilities. 2. Provide education around chronic diseases and falls prevention through interactive education sessions and during participation in ongoing exercise programs3. Provide nutritional screening to community seniors
September 2008 - ongoing

Duration:

251

Project Title:

West End Integrated Falls Prevention Program

Contact Information:

Trish Brown

West End Integrated Falls Prevention Program

t.brown@pqchc.com

(613) 820-4922

Pinecrest Queensway Community Health Centre 1365

Richmond Road, 2nd floor

Ottawa, Ontario, K2B 6R7

<http://www.pqchc.com>

Goals and Objectives:

4-part program: 1/ Individual assessment and intervention for seniors who fall 2/ Best practice education for service providers 3/ Education and health promotion for seniors and caregivers 4/ Advocacy in the community on issues arising for this population as it relates to falls. Aims: to reduce the number of falls among those who receive service from the program. In the longer-term, to reduce the admissions to ED as a result of falls.

Duration:

January 2010 – March 2011

252

Project Title:

www.fallspreventioninfo.ca

Contact Information:

Sarah Orr-Shaw

Staying Independent Falls Prevention Coalition (SIFPC)

Sarah.Orr-Shaw@smdhu.org

(705) 721-7330

Simcoe Muskoka District Health Unit 15 Sperling Drive

Barrie, Ontario L4M 6K9

<http://www.simcoemuskokahealth.org>

Goals and Objectives:

To link health care providers and the public to local falls prevention services, programs and resources. Can be accessed by calling 211 or visiting the website. Health Care providers and family will know where to access falls prevention information.

Duration:

October 2009 - ongoing

PRINCE EDWARD ISLAND

253

Project Title:

Falls Management

Contact Information:

E. Bell

Summerset Manor

embell@ihis.org

(902) 888-8310

Summerset Manor

205 Lefurgey Avenue

Summerside Prince Edward Island C1N 2L9

Goals and Objectives:

Assess the risk of falls of each resident – then to put interventions into place to manage the risks. Overall goal is to reduce number of falls and the severity of injury from falls.

Duration:

October 2009 - present

254

Project Title:

Fall Prevention

Contact Information:

Jennie Daley

Queen Elizabeth Hospital

jadaley@ihis.org

(902) 894-2062

Dept. of Physical Medicine

PO Box 6600

Charlottetown Prince Edward Island C1A 8T5

Goals and Objectives:

OT services to people on the acute care units of the hospital, including fall prevention.

QUEBEC

255

Program Title:

**Continuum de services en prévention des chutes chez les
aînés vivant à domicile - three fold continuum in fall
prevention in the elderly living in the community**

Contact Information:

Diane Sergerie
Quebec National Institute of Public Health
d.sergerie@rrsss16.gouv.qc.ca
(450) 928-6777
1255 rue Beauregard, Longueuil Quebec J4K 2M3

Goals and Objectives:

The goal is to set evidence-based practices in fall prevention within the services to elderly in the community and among professionals in both clinical settings and health promotion interventions. The objectives is to implement a 3 level multifactorial intervention program involving community Resources, Medical resources and Home Care resources in order to modify risk factors and maintain autonomy.

Duration:

January 2006 - ongoing

SASKATCHEWAN

256

Project Title: **College of Nursing Community Practicum**

Contact Information: Colleen Vassos
U of S College of Nursing
colleen.vassos@usask.ca
Saskatchewan

Goals and Objectives: Collaboration between the NEPS program, Community practicum, College of Nursing, U of S, SHR - Community Therapies (OT, PT), Older Adult Wellness, Recreation Therapist, Forever...in motion, Nutritionist, ABI Education and Prevention Coordinator and senior's congregate housing 3 week NEPS community based practicum with a senior's housing facility. This includes a presentation by the Meri Misfits, in home falls risk assessment, individualized falls risk reduction plan, referrals made to appropriate resources, group education to participants by PT, OT, Nutrition, health fair, letter to physician.

Duration: Ongoing

257

Project Title: **Cypress Health Region Falls Prevention**

Contact Information: Jody Rice
Cypress Health Region
jody.rice@cypressrha.ca
(306) 741-3564
Saskatchewan

Goals and Objectives: Community falls prevention: group falls prevention education sessions; wellness clinics for home care clients; home care clients fall prevention education and assistance. Acute Care Falls Prevention: on admission, clients are screened for fall risk - those most at risk are housed in rooms closest to the nursing station and in beds with alarms. Fall prevention sessions are offered individually or in groups as appropriate. Outpatient Falls Prevention: clients who are deemed to be at risk of falling attend a group or individual education session. Long Term Care Falls Prevention: programs are being reviewed that would best meet the needs of LTC residents in the region.

Duration: Ongoing

258

Project Title: **Falls Prevention Program**
Contact Information: Marnell Cornish
Sun Country Health Region
mcornish@schr.sk.ca
(306) 842-8370
Tatagwa View, Box 2003
Weyburn Saskatchewan S4H 2K8

Goals and Objectives: Decrease the number of falls; decrease the number of fall related injuries. Fall risk assessments on all residents. Post-fall analysis.
Duration: May 2008 - ongoing

259

Project Title: **Five Hills Health Region Falls Prevention**
Contact Information: Dianne Ferguson
Five Hills Health Region
dfer@fhhr.ca
(306) 691-1561
Saskatchewan

Goals and Objectives: Five Hills Health Region initiated an interdisciplinary team approach to seniors falls prevention in April 2005 utilizing an action team continuum of healthy seniors, at-risk seniors and seniors residing in long-term care. The vision is for a coordinated and collaborative approach to falls prevention for seniors 65+ residing in the region.
Duration: April 2005 - ongoing

Goals and Objectives: In motion is a community based health promotion strategy with a focus on physical activity for health benefits. In motion is a comprehensive approach that utilizes a partnership between the City of Saskatoon, University of Saskatchewan, Participaction and the Saskatoon Health Region, public awareness, education and motivational strategies to encourage people to include regular physical activity in their daily lives. The older adult Forever...in motion initiative was established to focus on the issues that relate to older adults and physical activity. Developed in the Spring of 2002 as a pilot project, it now supports 56 Forever...in motion sites within the Saskatoon Health Region. These programs are located in senior's congregate housing, community and surrounding area. Most

Forever...in motion programs include endurance, strength and balance and flexibility components. Volunteer leaders are trained by a Sask Parks and Recreation Master trainer of Older Adult Fitness to lead safe physical activity programs for their participants. We plan to continue the program and have recently hired another Recreation Therapist to teach the leadership training and we plan to grow the program and incorporate specific balance exercises into existing programs in partnership with community physical therapy."

Duration: Ongoing

260

Project Title:

Forever...In Motion for Older Adults

Contact Information:

Janet Barnes
Saskatoon Health Region
janet.barnes@saskatoonhealthregion.ca
(306) 655-7874
Saskatchewan

261

Project Title:

Geriatric Services

Contact Information:

Julie Landeryou
Saskatoon Health Region
julie.landeryou@saskatoonhealthregion.ca
(306) 655-8946
Saskatchewan

Goals and Objectives:

The Geriatric Day Program admits patients with a history of falls and high risk of falls, if they meet other criteria for admission to the program. Within this program, contributing falls risk factors are identified and appropriate interventions are commenced. Intervention as appropriate to ameliorate risk for falls in high-risk patients (multiple disciplines available: PT, OT, RN, SW, RT and Medicine, Pharm.) 14 Program will re-start beginning of September 2009, and a proposal to incorporate a more complete Falls Prevention "stream" within the Day Hospital has been proposed. This would include more formalized education, goal-setting and individualized training as well as the Interdisciplinary approach. Patients admitted to this stream would be medically stable, so the medical intervention would not need to be as intensive.

Duration: Ongoing

262

Project Title: **Keewatin Yatthe Region Falls Prevention**
Contact Information: Joelle Birkham
Keewatin Yatthe Regional Health Authority
joelle.birkham@kyrha.ska.ca
(306) 833-3397
Saskatchewan

Goals and Objectives: Home Care Clients: All home care staff have been trained to perform the TUG test on all clients > 65years old, once per year or as status changes. Clients with a TUG score > 14 will be referred to the Therapy Department. A physical therapist/occupational therapist or physical therapy assistant, will complete a fall risk assessment profile in order to individualize a fall prevention program and help the client with goal setting. This is currently being initiated though out the region.

Fall Prevention Awareness: A seniors fall prevention booth to be set up at various community senior events, including wellness clinics. LPN's will complete a falls assessment profile, a home safety checklist and a TUG test on all willing participants. Appropriate referrals will be made, including to the fall prevention program in the Therapies department. This will be piloted in December 2009, and January 2010 in the communities of Beauval, Buffalo Narrows and Ile-a-la-Crosse.

Long Term Care:
We are in the process of developing a policy and procedure manual. Policies will include a physiotherapy assessment on all new admissions and a daily exercise program with all ambulatory residents. A daily exercise program focusing on balance and lower extremity strengthening will be offered to all ambulatory residents. This began in Ile-a-la-Crosse in November, 2009 and we would like to roll it out in La Loche LTC in January 2010.

Duration: Ongoing

263

Project Title: **Kelsey Trail Health Region Fall Prevention**
Contact Information: Colleen Naber
Kelsey Trail Health Region
cnaber@kthr.sk.ca
(306) 752-1751
Saskatchewan

Goals and Objectives: Regional Blitz of Falls Prevention Education - to Seniors who live in Senior Housing complexes in the spring of 2009. Using the National Falls Curriculum, we produced a presentation and delivered to over 200 Seniors in our health region. At the time of presentation, we asked if they had fallen in the past and then summer students called these Seniors back and asked if they found the education helpful and whether they had fallen since the presentation. We have the kits set up now for further education and we will provide the same education to other areas within our health region into the future. Offered hip protectors to ambulatory long term care residents. We plan to offer this starting this fall but have to determine the outcome measures to use. We will pilot in one long term care facility and offer to others as need arises.

Duration: Ongoing

264

Project Title: **Live Well with Chronic Conditions**
Contact Information: Sharon Babcock
Sharon.babcock@saskatoonhealthregion.ca
(306) 655-2655
Box 1, 103 Hospital Drive
Royal University Hospital
Saskatoon Saskatchewan S7N 0W8

Goals and Objectives: The self management program was developed at Stanford University. Six - 2 1/2 hr. classes teach various aspects of healthy lifestyle information & group sharing including among other topics; the benefits of exercise for flexibility; balance; strength & endurance which of course helps to prevent falls.

Duration: October 2008 - ongoing

265

Project Title: **Long Term Care Falls Prevention Program**
Contact Information: Bev Pacey
Sunrise Health Region
Bev.pacey@shr.sk.ca
(306) 786-0713
270 Bradbrooke Drive
Yorkton Saskatchewan S3N 2K6

Goals and Objectives: Ongoing education of facility staff regarding falls prevention.
Duration: September 2008 - ongoing

266

Project Title: **Maintaining Independence: Wellness and Fall Prevention Clinic**
Contact Information: Shelly McEwan
Regina Qu'Apelle Health Region
Shelly.mcewan@rqhealth.ca
(306) 766-6328
1080 Winnipeg Street, Regina Saskatchewan S4R 8P8

Goals and Objectives: Using a multifactorial, best-practice multidisciplinary team; provide assessment, education and intervention to older adult group regarding fall prevention and behaviour change.
Duration: May 2009 – January 2011

267

Project Title: **Mamawetan Churchill River Fall Prevention**
Contact Information: Jan Senik
Mamawetan Churchill River Health Region
jan.senik@mcrtha.sk.ca
(206) 425-4821
Saskatchewan

Goals and Objectives: Long Term Care: Ongoing assessment and post fall analysis; Acute Care: fall risk assessment tool, falls standard care plan, falls logos and green wrist bands for at-risk for falls. Mental Health: process for identifying their population at risk for falls and appropriate interventions. Home Care: all clients on admission have a falls evaluation completed; ongoing client education, home safety checklists.
Duration: Ongoing

268

Project Title: **Meri Misfits**
Contact Information: Don Drinkwater
Saskatoon Health Region
don.drinkwater@usask.ca
(306) 966-1066
Saskatchewan

Goals and Objectives: A Seniors Acting Group who present information on Falls Risks and Falls Injuries Prevention in the form of skits, monologues and songs to community-dwelling Seniors within the city of Saskatoon.

The Meri Misfits (the Saskatoon Senior Players) are a group of Seniors who like to act, sing, and clown around. Since February 2007 the Meri Misfits have done many performances around Saskatoon, performing to over 1200 Seniors mostly in Seniors' Residential Complexes. The Meri Misfits are currently promoting messages on Falls Risk Factors and Falls Injury Prevention. Since injuries from falls are a serious problem for Seniors, the group feels that Seniors will learn and remember more when the messages they present are done in a humorous and memorable way. The group creates much of their own material ... about Aging Gracefully ... writing new words to familiar songs, monologues and skits ... all based on their own life experiences with falling. The Meri Misfits will continue to present information on Falls Risks and Falls Injuries Prevention to community-dwelling Seniors primarily living in Seniors Residential complexes, within the city of Saskatoon.

Duration: Ongoing

269

Project Title: **Older Adult Wellness**

Contact Information: Sarah Nixon-Jackle
Public Health Services – Saskatoon Health Region
Sarah.nixonjackle@saskatoonhealthregion.ca
(306) 655-4288
West Winds Primary Health Centre
3311 Fairlight Drive, Saskatoon Saskatchewan S7M 3Y5
<http://www.saskatoonhealthregion.ca>

Goals and Objectives: The Older Adult Wellness Program provides health education and community consultation to community dwelling older adults. The program nurses (2) work together within a multi disciplinary consortium of falls injury prevention health care/research practitioners. Health promotion activities include community presentations to seniors groups, written articles in local newspapers, displays at health care conferences and events for seniors, partnerships with others in delivering

programs to seniors, consultants to community and health care committees. We are members of the Saskatchewan Falls Injury Prevention Strategy Steering committee which developed the provincial falls injury prevention strategy. One nurse is a trained facilitator for the Canadian Falls Prevention Curriculum providing training sessions twice yearly.

Duration: September 2001 - ongoing

270

Project Title:

Osteoporosis Canada - Saskatoon Chapter

Contact Information:

Carole Young
Saskatoon Health Region
saskatoon@osteoporosis.ca
(306) 931-2663
Saskatchewan

Goals and Objectives:

- o Osteoporosis Health Knowledge programs are available for delivery to community groups through our Speaker's Bureau.
- o Self-help Support Groups for individuals living with osteoporosis also use information from this health knowledge program. In addition, Support Groups hear presentations from doctors, pharmacists, nutritionists, physiotherapists, professionals from pain clinics, and others.
- o Support for physicians in Saskatchewan is available through a written document called "Clinical Practice Guidelines" (prepared by the Osteoporosis Canada's Scientific Advisory Council.)
- o A mall information resource office, of the Saskatoon Chapter, has opened in Market Mall in Saskatoon.
- o The Saskatoon Chapter is currently involved in advocacy for prevention, early identification, management and follow-up with Government and other provincial agencies.

Duration: Ongoing

271

Project Title:

PAPHR Steering Committee

Contact Information:

Linda Sims
Home Care, Prince Albert Parkland Health Region
lsims@paphr.sk.ca
(306) 765-2464
Saskatchewan

Goals and Objectives: PAPHR Steering Committee – The purpose of the Committee is to reduce falls among seniors in the Region. The steering committee recognized that there are four distinct areas within health care that need to be concerned with prevention of falls in seniors and therefore formed four falls prevention working groups under the PAPHR Seniors’ Falls Prevention Steering Committee:

- Acute Care; · Long term care; · Home Care; and · and Community Have identified the following steps to be taken in the development of a falls prevention program that spans the four identified areas:
- Development of a policy/ procedure for PAPHR that shows commitment to a falls prevention strategy in the health region; · Each area will develop policy/procedure to address falls prevention in their specific way; · Development of education tools for staff in each area to point out the need for a Falls Prevention program;
- Development of education tools for well seniors in their own homes/ communities to prevent falls; · Decide on assessment tools for those that are at risk of falling;
- Each area will develop interventions to reduce falls;
- A post fall follow up evaluation tool; and · Evaluation of the program. Each of the four areas are at different stages of development in the falls program, but each area recognizes the need for program development and for ongoing sustainability of the program.

Duration: Ongoing

272

Project Title: **Public Health Services - Older Adult Wellness**
Contact Information: Sarah Nixon-Jackle
Saskatoon Health Region
sarah.nixonjackle@saskatoonhealthregion.ca
(306) 655 4299
Saskatchewan

Goals and Objectives: Health Promotion presentations to community dwelling older adults which include Falls Injury Prevention, Osteoporosis and other health related topics. Displays at health fairs, newspaper article submissions to local Sunday Sun newspaper, participation in Saskatoon Falls Consortium and the Saskatchewan Falls Injury Prevention Strategy. The program is permanently funded.

Duration: Ongoing

273

Project Title: **Regional Falls Prevention Committee**
Contact Information: Lesley Stamatinos
Sunrise Health Region
lesley.stamatinos@shr.sk.ca
(306) 786-0184
Saskatchewan

Goals and Objectives: Fall prevention programs and strategies for home care, acute care, long term care and community-based fall prevention.

Duration: Ongoing

274

Project Title: **River Heights Lodge Fall Prevention Program**
Contact Information: Betsy Brown
Prairie North Health Regional Hospital
Betsy.brown@onrha.ca
(306) 446-6400
Primary Health Centre
11427 Railway Avenue
North Battleford Saskatchewan S9A 3G8

Goals and Objectives: Membership-Nursing, Dietary, Occupational Therapy, Housekeeping, Physiotherapy, Pharmacy, Administration, Resident (and family). Goal: to reduce/eliminate falling for the resident at highest risk of falling.

Duration: November 2007 - ongoing

275

Project Title: **Saskatoon Falls Consortium**
Contact Information: Janet Barnes
Saskatoon Health Region
janet.barnes@saskatoonhealthregion.ca
(306) 655-7874
Saskatchewan

Goals and Objectives: The Saskatoon Falls Prevention Consortium comprises a group of individuals representing about 25 public and private health-related agencies, within and outside of the City of Saskatoon, whose mission is to work together in a collaborative partnership to plan, implement, and evaluate a coordinated and comprehensive strategy to reduce fall-related injuries in Seniors. The Consortium meets 4-6

times per year providing a forum for discussion of issues of interest related to Falls, and the development and implementation of strategies to increase Falls Prevention Awareness and Falls Management Services within and outside of the City of Saskatoon. In conjunction with Consortium activities, individual members and member agencies have incorporated their own programs or projects into their professional practice, for example: by providing enhanced resource materials for clients (Community Therapies); referring clients to the Geriatric Assessment Program for access to the Falls Clinic (Home Care), using information to assist communities in other health regions; to develop falls prevention initiatives and programs (ABI Outreach Team, Education and Injury Prevention Coordinator). The Saskatoon Falls Prevention Consortium has met regularly since its inception in September 2002. It invites other agencies, both public and private, from other regions in the Province of Saskatchewan to participate in partnership with us in achieving our goal to reduce the incidence and severity of Fall Injuries among Saskatoon Seniors by 20% within the next decade.

Duration: Ongoing

276

Project Title: **School of Physical Therapy - Fall Prevention Research**
Contact Information: Cathy Arnold
University of Saskatchewan
cathy.arnold@usask.ca
(306) 966-6588
Saskatchewan

Goals and Objectives: Current funded projects include: the relationship of muscle strength and power to performance on the 30-second chair stand in older adults and the effect of core stability training on fall risk factors in older adults. Research interests include assessing outcome measures, effect of intervention programs and factors affecting fall risk. Research is ongoing.

Duration: Ongoing

277

Project Title:

Seniors on the Move

Contact Information:

Lori Duerksen
Heartland Health Region
lori.duerksen@hrha.sk.ca
(306) 882-6413 ext. 608
Saskatchewan

Goals and Objectives:

Seniors On the Move – Injury Prevention Clinic (A Multidisciplinary Health Fair format)

- Seniors were registered, filled in a pre-clinic questionnaire, were provided with a “Personal Plan” booklet, and then visited the different stations. After they were asked to fill in a post-clinic questionnaire, and had their names put in for a door prize. 4 – 6 weeks later, they were contacted by telephone for a follow up.
 - A number of mini-consultations were offered at the clinic:
 - o Assess your risk of falling by taking a “Timed Up and Go (TUGs)” test from a Therapy Aid.
 - o Have a nurse take your blood pressure, do a spot blood sugar or talk with you about general medical questions.
 - o Talk with Home Care representatives about available equipment, services available and home assessments.
 - o Conduct a review of your medications with a pharmacist.
 - o Find out about home assessments, adaptations and individualized aids from an Occupational Therapist.
 - o Talk with a Physical Therapist about exercise, mobility, strength and balance.
 - o Find out more about “Active Living” as a senior—e.g.: the Canada Physical Activity Guide.
 - o Discuss foot care and footwear with the podiatry team.
 - o Talk with a Nutritionist or Dietitian about the new Canada Food Guide, proper nutrition and effects of improper nutrition, like osteoporosis.
 - 2 Clinics were offered in Rosetown, and 1 in Biggar.
 - Focus on education, risk identification and minimization, and familiarizing seniors with available resources in their community.
- Community Therapy program plans to continue coordinating clinics such as this around the health region as able."

Duration:

Ongoing

278

Project Title: **Staying on Your Feet**
Contact Information: Janet Barnes
Saskatoon Health Region
janet.barnes@saskatoonhealthregion.ca
(306) 655-7874
Saskatchewan

Goals and Objectives: A collaboration between Forever...in motion and Community Physical Therapy - 4 month balance class and education program based on falls risk factors for community dwelling older adults living in congregate housing. We are hoping that the program continues as we have requested funding for a physical therapist position and are relatively hopeful that this will happen.

Duration: Ongoing

279

Project Title: **Your Next Step – Fall Prevention in Long Term Care**
Contact Information: Barb Naviaux
Sun Country Health Region
bnaviaux@schr.sk.ca
(306) 452-6377
Redvers Health Region Box 38
Redvers Saskatchewan S0C 2H0

Goals and Objectives: Goals of course are to decrease falls while maintaining highest level of function possible. In LTC this means no increase in restraints; Home Care: do testing with TUG test and use "Your Next Step" booklet by home health aides or nurses. Based on results referral to Health care provider and PT/OT. Environmental scan done by Case Manager on initial visit Exercise classes taped through cable TV but also given individually if seen by PT/OT. Long Term Care- TUG test on admission along with fall history and usual admission detail on Meds etc. Depending on results referral to PT/OT, dietician pharmacist etc. Booklet on Fall Prevention program given to family and resident. Exercise class 5 times per week with standing and sitting balancing and strengthening exercises at each LTC facility.

Duration: January 2010 - ongoing

280

Project Title:

Developing a Community-Based Falls Prevention Approach in Yukon, Canada: Working Together across Borders and Cultures

Contact Information:

Jody Butler-Walker
Arctic Health Research Network-Yukon
jody@butlerwalker.ca
(867) 668-3393
Yukon Territory

Goals and Objectives:

The Yukon Territory covers 483,610 km² (about the size of Spain) North of 60° latitude in north-western Canada. 34,000 people live in the Yukon, with the majority residing in the capital city of Whitehorse. There are 14 indigenous (Yukon First Nations (YFN)) communities with Home and Community Care (HCC) and/or Home Care programs, 13 of which are in small communities throughout the territory. The Arctic Health Research Network-Yukon (AHRN-YT) hosted an Injury Prevention Workshop in November, 2008 which brought Yukon First Nations' health workers, Yukon College health students, health practitioners and others, together with Dr. Børge Ytterstad (Trømso University, Norway) and Dr. Ian Pike (Director, BC Injury Research and Prevention Unit). During the course of the one-day workshop, there were opportunities to identify community-based injury prevention concerns in the Yukon, and to share related work underway in Norway and British Columbia, Canada. The importance of Falls Prevention was highlighted both during the workshop, and during a presentation to local physicians, where it was noted that there had been 11 hip fractures throughout the Yukon in the two previous weeks (late October-early November, 2008). The problem of falls and the high cost to individuals, their families, and the health care system emerged as a priority issue. In response, a Falls Prevention checklist was adapted to include content and cultural relevancy by and with Yukon First Nations communities together with a researcher. The checklist was then also included in the materials used by the Territorial government's Home Care Program for physiotherapists and occupational therapists' community visits, and now

facilitates a common approach to preventing falls with First Nations and territorial government agencies working together. From an AHRN-YT perspective, the purpose of this Falls Prevention initiative is twofold: to build capacity at the community level to predict and prevent falls; and to facilitate partnership development between service providers, community organizations and academics to optimize outcomes for clients and their families. By building coalitions between First Nations and Territorial governments, academic institutions, the regional health research centre and the Council of Yukon First Nations, Yukon First Nations residents, particularly elders, are now receiving a falls prevention intervention in their homes in a way that might otherwise not have been possible.

Duration: Ongoing

281

Project Title: **Fall Prevention Pilot Project**

Contact Information: Linda McConnell
Yukon Home Care Program
Linda.mcconnell@gov.yk.ca
(867) 456-6188

Goals and Objectives: 3168-3rd Avenue, Whitehorse Yukon Territory Y1A 1G3
In Whitehorse - target group is home care clients at high risk for falling. In Faro and Ross River - exercise program for seniors to improve balance, strength and knowledge with respect to fall prevention.

Duration: January 2010 – March 2010

282

Project Title: **Senior Fit**

Contact Information: Brittany Weber
Yukon Territorial Government Home Care
Brittany.weber@gov.yk.ca
(867) 332-1146

Box 39, Faro Yukon Territory Y0B 1K0

Goals and Objectives: To increase activity in community dwelling 55+ focusing on improving strength, balance and endurance. An exercise class held 2x/week for ~45min followed by a group discussion focused on specific fall prevention topics (ie. Medications, home safety, etc). We have followed the "Stand Up" program for the exercise regime.

Duration: January 2010 - ongoing