Proceedings of

THE 2007 CALIFORNIA FALL PREVENTION SUMMIT:
Progress, Challenges & Next Steps
Copies of this report are available from:

The Fall Prevention Center of Excellence  
Program Office  
University of Southern California  
Leonard Davis School of Gerontology, Room 228  
3715 McClintock Ave.  
Los Angeles, CA 90089-0191  
Tel: (213) 740-1364

Or online at www.stopfalls.org
# Table of Contents

I. Executive Summary  
II. The New California Fall Prevention Infrastructure  
   Background  
   a) The Need for Fall Prevention  
   b) Progress in Fall Prevention in California  
   c) The “2007 California Fall Prevention Summit: Progress, Challenges & Next Steps”  
   d) The Fall Prevention Center of Excellence (FPCE)  
III. Vision for the Future  
    The “2007 California Fall Prevention Summit” – Planning, Process, and Outcome  
IV. Statewide Strategy for Action  
   The Interactive Work Groups  
   a) Community Programs A  
   b) Community Programs B  
   c) Education and Training  
   d) Health Care  
   e) Healthy Lifestyles & Recreation  
   f) Safe Housing & Communities  
V. Opportunities and Challenges  
VI. Next Steps  
VII. Appendices  

Appendix 1: Participants of the “2007 California Fall Prevention Summit”  
Appendix 2: Guest Speakers  
Appendix 3: The Steering Committee  
Appendix 4: The Advisory Committee  
Appendix 5: Summit Agenda  
Appendix 6: Summit Policy Recommendations  
Appendix 7: Resource Directory  
Appendix 8: Poster Presentations  
Appendix 9: Acknowledgments  
Appendix 10: References
On December 5-6, 2007, more than 140 invited stakeholders from various fields gathered in Long Beach, CA to map out next steps on how California can better address the serious problem of falls in a rapidly growing older population. Organized by the Fall Prevention Center of Excellence (FPCE), the invitational “2007 California Fall Prevention Summit: Progress, Challenges & Next Steps” was supported by the Archstone Foundation and The California Wellness Foundation. Participants included representatives of California's Area Agencies on Aging (AAAs), health, housing and social service providers, local and state government agencies, universities, and foundations, as well as consumer advocacy organizations and the media. The 2007 Summit was a follow up meeting to the highly successful conference, *The California Blueprint for Fall Prevention*, held in Sacramento in 2003.

The Summit goals were to:

- increase knowledge about “state of the art” fall prevention efforts;
- develop strategies to sustain and replicate promising fall prevention programs, and;
- generate recommendations to improve policies in the areas of Community Programs, Education and Training, Health Care, Healthy Lifestyles and Recreation, and Safe Housing and Communities.

The Summit’s Steering and Advisory Committees, comprising a diverse group of invited fall prevention experts, defined the Summit’s purpose as sharing the latest developments in the field and engaging participants in crafting policy recommendations and strategies to accelerate the development of a fall prevention infrastructure. The Committees helped select work group topics, identified guest speakers and invitees, and reviewed draft recommendations. Committee members (see appendices 3 and 4) participated enthusiastically in the Summit’s eight month planning phase that involved evaluation and revisions of specific Summit elements and ended with a final assessment of the agenda.

Several experts in the field presented at the Summit: Ileana Arias, PhD, (Centers for Disease Control and Prevention); Lynn Beattie, MPT, MHA, (National Council on Aging); the Honorable Lynn Daucher (California Department of Aging); Linda Hale, RN (Wisconsin Department of Health and Family Services); State Senator Alan Lowenthal, PhD; Vicky Scott, PhD (British Columbia Ministry of Health, Population Health and Wellness); and Fernando Torres-Gil, PhD (University of California, Los Angeles). They offered their perspectives on the problem of falls and recommendations about next steps for fall prevention and management.

The kick-off event of the Summit was a “fun and easy 3K walk” along the Long Beach Boardwalk led by Debra Rose, PhD, FPCE Co-Director and Co-Director of the Center for Successful Aging at California State University, Fullerton and her staff. She also provided informational materials and safety tips, one-on-one instruction on how to use walking poles, and a free pedometer. Another Summit highlight was an evening reception. A number of Summit participants presented posters about their programs, thereby offering additional opportunity for networking, and sharing of knowledge and information on fall prevention (appendix 9).
The major work at the Summit took place in interactive groups in which participants developed policy recommendations in five essential areas related to falls. After rigorous effort and spirited discussions, 18 policy recommendations emerged, along with strategies and practical action steps for implementation. Selected policy recommendations include:

1. Recommend that the California Department of Aging (CDA) and the Area Agencies on Aging (AAAs) incorporate fall prevention in their upcoming master state and local area plans.

2. Improve California’s ability to gather accurate information on falls from multiple data sources by developing a standard definition and set of reporting methods for falls from all relevant sources at state and local levels.

3. Educate older consumers and their family caregivers about their crucial role in fall prevention and management through the statewide network of Caregiver Resource Centers and Public Authorities.

4. Develop, publicize and maintain a list/directory of well-rounded local community-based exercise programs and classes for older adults (from healthy to frail) that incorporate exercises to improve muscle strength and endurance, balance, mobility, and flexibility for fall prevention.

5. Train physicians, nurse practitioners, nurses, and physician assistants on evidence-based practice guidelines (e.g., American Geriatrics Society, Assessing Care of Vulnerable Elders (ACOVE)) for fall risk assessment and management to ensure their incorporation into all primary care settings serving older adults.

6. Include fall prevention guidelines in state and local planning documents related to overall development (e.g., city general plans), aging services, housing, parks/recreation, transportation, circulation, street/sidewalk repair and emergency/disaster.

Major cross-cutting recommendations focused primarily on in developing more effective public awareness campaigns, education and training, and disseminating fall prevention information:

- Institute a statewide Fall Prevention Awareness Week, with a Governor’s proclamation, press events and public awareness activities.
- Establish a permanent statewide fall prevention task force that includes the Departments of Aging, Public Health, Health Care Services, Housing and Transportation, to coordinate state-level programs and activities.
- Convene a statewide fall prevention Summit every three years.
- Develop and widely disseminate culturally appropriate fall prevention information to organizations serving older adults (e.g., hospitals, libraries, parks and recreation, religious entities, and senior/community centers).

The 18 Summit policy recommendations and 4 cross-cutting recommendations were presented to the California Commission on Aging (CCoA) during an informational hearing on December 7, 2007 (see Appendix 6). The Commissioners were enthusiastic about Summit goals and outcomes, and they agreed to support fall prevention as a key public health issue.
The Need for Fall Prevention

Falls are increasingly recognized as a serious public health issue. In California alone, fall-related injuries in 2004 led to almost 80,000 hospitalizations (EPICenter, 2007) with a mean cost of over $40,000 per hospitalization due to falls among Californians age 60 and older. In recent years, improved understanding of the risks associated with falls has led to a number of improved preventive measures and interventions, but older adults still suffer from too many falls and fall-related injuries.

Falls are a serious problem for older adults. Persons are at varying levels of risk for falling depending on identified intrinsic and extrinsic risk factors. These include a history of falling (and fall-related injuries), mobility impairment, problems with balance, low physical activity, and hazardous living environments.

Interventions including risk and medication assessment, physical activity including balance and strengthening exercises, and environmental modifications in the home and the community including use of assistive devices can greatly reduce falls. Although the risk for falls increases dramatically with age, falls are not an inevitable part of aging.

The need for fall prevention is overwhelming:

- Among Californians age 85 and older, the risk of a fall injury is 57 times greater than for people age 20 to 55 years (Trent & Ellis, 2000).
- California’s non-fatal fall injuries cost approximately $2.4 billion annually in direct medical costs (Choi et al., 2007); by 2020 the total cost of fall injuries for people age 65 and older in the United States may reach nearly $44 billion (Stevens, 2005).

Falls impose an enormous burden on our health care system. Negative health outcomes for older adults who fall and experience an injury include long-term disability and dramatically reduced quality of life, consequences impacting individuals as well as their families.

Progress in Fall Prevention in California

Recognition of the importance of falls led to the 2003 conference in which over 130 leaders assembled in Sacramento to develop the California Blueprint for Fall Prevention. This meeting created both a sense of urgency about falls as a public health problem and a commitment to a series of strategies to create a fall prevention infrastructure in California.
Since 2003 and in response to the recommendations of the Blueprint, numerous fall prevention activities have been initiated to raise awareness about fall prevention, increase the skills of professionals working in the field, and develop new evidence-based multi-factorial programs to reduce falls. The following are several highlights of recent efforts:

- **The Archstone Foundation’s Fall Prevention Initiative** that, in 2005, funded the Fall Prevention Center of Excellence (FPCE), a consortium of the USC Leonard Davis School of Gerontology, the Veterans Administration Greater Los Angeles Healthcare System Geriatric Research, Education, and Clinical Center (GRECC), California State University (CSU) Fullerton’s Center for Successful Aging, and the California Department of Public Health (CDPH) State and Local Injury Control, University of California, Los Angeles School of Medicine; FPCE’s website - www.stopfalls.org - is accessed by thousands of health and social services providers, consumers, researchers and policymakers worldwide;

- Archstone Foundation also supported development of 10 fall prevention coalitions and 6 program expansion projects that provide the basis for a strengthened fall prevention infrastructure in local communities and a variety of new activities throughout California.

- California’s Department of Public Health developed “Filling the Gaps: Strategic Directions for a Safe California”, a three-year plan to target under-addressed injury areas including senior falls.

- The FPCE convened a state wide StopFalls Network, a 143-member organization that includes AAAs, fall prevention and senior injury programs, adult day health centers, and other community service providers.

- Fall prevention programs such as FallProofTM, created and disseminated by the Center for Successful Aging at CSU Fullerton, California, and the InSTEP (Increasing Stability Through Evaluation and Practice) model program that incorporates the three central elements of fall prevention – medical risk assessment and recommendations, physical activity, and home risk assessment and modification - at senior centers in Los Angeles and Orange Counties.

- Replication of A Matter of Balance under the auspices of the California Department of Aging in collaboration with Partners in Care Foundation. A Matter of Balance is an AoA funded group behavior change program, designed to reduce fear of falling and increase physical activity. The program operates in venues such as multipurpose senior service centers as well as senior and community centers.

- The continuation of exemplary fall prevention programs such as San Francisco’s Department of Public Health Community and Home Injury Prevention Project for Seniors (CHIPPS) program, Alameda County’s senior injury prevention programs (SIPP), Stanford University’s Farewell to Falls, Sequoia Hospital’s Mature & Secure from Falls, and Santa Monica’s Center for Healthy Aging’s Staying Mobile program.
The “2007 California Fall Prevention Summit: Progress, Challenges & Next Steps”

Nearly five years of progress in fall prevention preceded the “2007 California Fall Prevention Summit: Progress, Challenges & Next Steps”. Held in Long Beach, on December 5-6, 2007, it convened over 140 leaders from a variety of fields and organizations involved in and who had a stake in fall prevention, including Area Agencies on Aging (AAAs), community-based service organizations, health plans, service providers, local and state governments, consumer advocacy organizations, foundations and universities as well as senior housing, and assisted living facilities.

The Summit’s Steering and Advisory Committees defined its purpose as sharing the latest developments in the field and engaging participants in crafting policy recommendations and strategies to accelerate the development of a fall prevention infrastructure. The agenda included presentations on fall prevention model programs, coalitions and partnerships for community change. The Summit also included presentations by experts and national leaders such as Ileana Arias, PhD, (Centers for Disease Control and Prevention); Lynn Beattie, MPT, MHA, (National Council on Aging); the Honorable Lynn Daucher (California Department of Aging); Linda Hale, RN (Wisconsin Department of Health and Family Services); State Senator Alan Lowenthal, PhD; Vicky Scott, PhD (British Columbia Ministry of Health, Population Health and Wellness); and Fernando Torres-Gil, PhD (University of California, Los Angeles). They described current trends, promising practices and strategies in fall prevention and provided the basis for dialog in the five work group areas.

The invitational “2007 California Fall Prevention Summit: Progress, Challenges & Next Steps” was made possible by generous support from the Archstone Foundation and The California Wellness Foundation.

The Fall Prevention Center of Excellence (FPCE)

The “2007 California Fall Prevention Summit: Challenges, Progress & Next Steps” was planned, organized and coordinated by the FPCE in collaboration with the California Geriatric Education Center at UCLA’s David Geffen School of Medicine. The FPCE was formally established in 2005 as part of the “Fall Prevention Initiative” funded by the Archstone Foundation.

A consortium known as The Fall Prevention Center of Excellence is led by Co-Directors Jon Pynoos, PhD (University of Southern California’s Andrus Gerontology Center), Debra Rose, PhD (The Center for Successful Aging (CSA) at California State University, Fullerton), and Laurence Rubenstein, MD, MPH (Geriatric Research, Education and Clinical Center (GRECC), VA Greater Los Angeles Healthcare System, UCLA School of Medicine). A major partner is the California Department of Public Health, State and Local Injury Control Section (SLIC) represented by Barb Alberson. Since its launch, the FPCE has evolved into...
an information source and coordinator of fall prevention activities, one of the goals of the 2003 California Blueprint for Fall Prevention. Additionally, the FPCE provides technical assistance to agencies and other entities interested in developing fall prevention programs.

The FPCE’s mission is to provide leadership, create new knowledge, improve practice, and develop sustainable fall prevention programs for California, widely considered the “model state for fall prevention”. It is currently developing and testing the effectiveness of the multifactorial InSTEP (Increasing Stability Through Evaluation and Practice) fall prevention program within senior centers in Orange and Los Angeles counties.

In 2005, the FPCE launched www.stopfalls.org, an online clearinghouse for fall prevention information accessed by thousands of social service providers, consumers, researchers and policy makers worldwide. In 2006, it convened the StopFalls Network, a statewide organization that today includes 143 members representing AAAs, fall prevention and senior injury programs, adult day health centers, and other service providers. The FPCE also provides technical assistance to new Archstone Foundation funded fall prevention programs coalitions and collaborates with organizations such as the California Commission on Aging (CCoA) with the aim of establishing fall prevention as a key public health priority in California.

The FPCE conducts training and education for current and future professionals via teleconferences, coursework and online training. For example, the University of Southern California, home of FPCE’s Program Office, offers an online “Executive Certificate in Home Modification”, and CSU Fullerton offers a balance and mobility instructor specialist certification.

In advance of the Summit, the FPCE developed background information packets for the participants including:

- “California Fall Prevention Efforts” chart;
- “Tracking Falls in California: Better Data Needed” brief;
- “Multifactorial and Physical Activity Programs for Fall Prevention” brief;
- “Opportunities and Challenges in Fall Prevention since 2003 – A Progress Report”
- 43 draft policy recommendations that Summit participants reviewed and revised in their groups

Materials prepared for the Fall Prevention Summit, as well as Summit policy recommendations, are now available at www.stopfalls.org.
Vision for the Future

The “2007 California Fall Prevention Summit: Progress, Challenges & Next Steps” - Planning, Process, and Outcome

The Steering Committee developed the Summit program focusing on three objectives: a) creating a vision that ensures the independence, safety, and well being of older persons through fall prevention, b) identifying the best practices in fall prevention and helping communities offer fall prevention programs for older adults at risk of falling, and c) benefiting California’s older adults, many of whom fall each year. Steering Committee teleconferences facilitated by the Summit consultant, Janet Frank, DrPH, resulted in a program design and process geared toward developing policy recommendations for dissemination to public policymakers and legislators at local, county, state and national levels.

The objectives of the Steering and Advisory Committees were for the Summit participants to decide on concrete policy recommendations that would: a) expand multi-factorial fall prevention programs across the state, b) improve data collection, c) infuse fall prevention into the planning of Area Agencies on Aging, transportation, housing, and health care programs, and d) raise awareness about fall prevention as a public health problem. Towards this end, the Committees developed draft recommendations for the work groups in five key areas:

- Community Programs;
- Education and Training;
- Health Care;
- Healthy Lifestyles and Recreation;
- Safe Housing and Communities.

Supported by expert facilitators and recorders, work group participants were charged with revising and improving draft recommendations in their topic area and arriving at consensus concerning the top three recommendations in two 1½ hour sessions. Participants were instructed to identify key barriers to implementation for each recommendation, identify potential collaborating organizations and agencies, utilize existing and discover new resources to implement the recommendation, and develop strategies and action steps in support of each recommendation.

Outcomes: Using a voting process in each work group, participants developed a total of 18 high priority recommendations, as well as four additional cross-cutting recommendations to raise public awareness. Recommendations included suggested

Fall prevention was little understood in 2003. Today it is clear that if we don’t make fall prevention an issue of public discourse, we will not be prepared for the inevitable falls of 75 million baby boomers who are marching toward their inevitable destiny.

-- Fernando Torres-Gil, PhD
action steps and a feasible time period necessary (i.e. within 6, 12, or 18 months) to accomplish the action steps. Not all action steps refer to a time frame.

Recommendations were presented to the California Commission on Aging on December 7, 2007 at a public hearing that addressed how California can better address the serious problem of falls in its growing elderly population. Commissioners agreed to support fall prevention as a key public health issue in 2008.

Since 2003, the year of the first statewide Blueprint for Fall Prevention conference in Sacramento, substantial progress has been made toward increasing visibility of fall prevention as a major public health issue. More sustainable fall prevention programs have been developed; policy makers are more aware of fall prevention efforts in their communities and are taking fall prevention initiatives seriously; practitioners, researchers and consumers are joining forces to create a strong fall prevention infrastructure in California that will benefit all older adults at risk of falling. This chart and other helpful graphics illustrating California's efforts since 2003 are available on www.stopfalls.org
The Interactive Work Groups

Six interactive work groups were composed of an average of 20 Summit participants to allow for maximum dialogue and debate. The groups met on each Summit day to revise and develop draft policy recommendations.

The five key areas were:

1. Community Programs (the largest topic area divided into groups “A” and “B” to permit maximum participation);
2. Education and Training;
3. Healthy Lifestyles and Recreation;
4. Health Care;
5. Safe Housing and Communities.

Initially, work groups both revised recommendations and selected their top three priorities before focusing on developing feasible action steps, determining realistic time lines as well as identifying potential collaborating organizations and agencies.

Work groups were facilitated by experts familiar with each topic area. “Discussion recorders” kept detailed group meeting minutes while “recommendation recorders” noted changes to draft recommendations. Revised recommendations were shown on screens via computer and projector technology in each session. This setup provided an environment conducive to “brainstorming” and strategizing.

In the following section each work group’s efforts are highlighted along with the final recommendations. The policy recommendations receiving the most votes in each work group are listed in order as “Recommendation 1” through “Recommendation 3”. Throughout this document they are described as the “top three” recommendations; they are reported using the exact language as created at the Summit.

Following each recommendation is a list of proposed action steps. Each action step identifies (in parentheses) potential collaborating organizations and agencies that are – or could be – key for implementation. When provided in the Summit source document (i.e. the reports of discussion and recommendation recorders), we also include the suggested timeframe for completion of a particular action step. A list of acronyms included in recommendations can be found in the Appendix section under “Resources”.
Community Programs

The Older American Act (OAA), reauthorized and amended numerous times since it was signed into law more than 40 years ago, provides the legislative foundation for programs, services, and benefits supporting older adults, many of which could address fall prevention.

OAA Title III, Part D (Disease Prevention and Health Promotion Services), is the most relevant section related to community programs. This part of the OAA includes such services as health risk assessments, health promotion and physical fitness programs, home injury control services as well as medication management screening and education. In California, the Department of Aging (CDA) contracts with the network of AAAs who manage various federal and state-funded services for older adults. Specifically, AAAs contract with agencies that operate the Multipurpose Senior Services Program (MSSP) and authorize services that promote healthy aging and help individuals live as independently as possible in their community.

Additionally, the California Department of Public Health (CDPH), and educational institutions as well as public, private, and community-based organizations at the local, state, and national level play crucial roles in delivering services that promote healthy lifestyles and prevent disease and disability among the older population. The common goal is to develop and implement public health interventions and best practices - such as fall prevention - supporting individual and community health. Thus, Summit participants in the Community Programs work groups deliberated ways in which available Title III-D and other funds could further statewide fall prevention efforts through evidence-based fall prevention programs implemented at senior centers, nursing homes, hospitals, and other community settings.

Due to the interest and large number of participants in this topic area, Community Programs was divided into two smaller work groups (A and B) to provide best possible opportunity for discussion and engagement among group members. The major difference among recommendations developed by the two groups was the intensity of language used, such as “strongly recommend” in Recommendation A-1 versus “encourage” in Recommendation B-1.

Listed here are the work groups’ high priority policy recommendations, associated action steps, and (in parentheses) possible collaborating organizations and agencies:

“[Quote]

-- Senator Alan Lowenthal, PhD

We should be looking at fall prevention because it is the wisest way to use the limited resources we have.”
RECOMMENDATION 1

Strongly recommend that local Departments of Public Health and Area Agencies on Aging assign a staff member as the point person for senior injury prevention. Engage that point person in collaboration in fall prevention activities, services and advocacy efforts.

Action Steps

1. Identify existing active senior injury prevention contacts at local public health departments and AAAs as point persons for fall prevention efforts (StopFalls Network membership roster, Archstone Foundation fall prevention coalitions, AAAs, Department of Public Health (DPH)).

2. For those agencies without an existing senior injury prevention contact, identify point people through survey research (EPIC survey, AAA survey, California Department of Public Health (CPH), Fall Prevention Center of Excellence (FPCE), California Department of Aging (CDA)).

3. Seek support from California Association of Area Agencies on Aging (C4A) and California Conference of Local Health Officers (CCLHO) to ensure that a point person is identified in each agency (CPH, CDA, DPH, C4A, CCLHO, StopFalls Network, FPCE, community advisory councils).

4. Compile a senior injury prevention roster to facilitate contact with and discussion among DPH and AAA contacts (DPH, AAAs, and FPCE).

RECOMMENDATION 2

Encourage local public health and aging agencies, in partnership with other community organizations, to develop an inventory of local fall prevention programs and resources as a foundation for information and referral networks.

Action Steps

1. Develop template/examples of what constitutes fall prevention resources (Veterans Administration-VA).

2. Utilize fall prevention resource list currently being developed by “Information and Assistance” programs (AAA, CDA).


4. Have “Information and Assistance” include fall prevention resources and keep them up to date (C4A, AAA, CDA, FPCE).

5. Inventories of local programs need to be developed and serve as a foundation for further actions (AAA, FPCE, C4A, CDA).
STATEWIDE STRATEGY FOR ACTION

RECOMMENDATION 3

Recommend that the California Department of Aging and Area Agencies on Aging incorporate fall prevention in their upcoming master state and local area plans.

Action Steps

1. Encourage all Title III-D funded programs to include fall prevention as part of their activities (CDA, C4A, local AAA steering committees, and organizations that contract with AAAs such as senior centers, service providers, and transport agencies, fire departments, senior advocates such as Senior Legislature, United Seniors of Alameda County; healthy aging initiative (e.g., Napa Healthy Aging Planning Initiative - HAPI) and collaborations).

2. Suggest model language developed by Area 4 Area Agency on Aging for use in other Service Provision Area (SPA) needs assessments.

Community Programs “B”

RECOMMENDATION 1

Encourage California’s 33 Area Agencies on Aging (AAAs) to A) adopt fall prevention as part of their mission, B) incorporate fall prevention in their upcoming needs assessments and area plans, and C) encourage and support Title III contractors to include evidence-based fall prevention programs as part of their activities.

Action Steps

1. Request that the Department of Aging (CDA) send a letter to all 33 AAAs asking them to consider this recommendation.

2. FPCE sponsor/present a fall prevention seminar for AAAs at C4A annual meeting.

3. FPCE sponsor/present at the Triple-A Council of California (TACC) statewide monthly meeting.

4. Each AAA Advisory Group should attend/participate in a presentation concerning fall prevention.

5. Discuss/meet with Directors/Planners of 33 AAAs to discuss ways to implement this recommendation.
RECOMMENDATION 2

Encourage educational institutions such as community college districts and professional and paraprofessional caregiver training programs to incorporate into their curriculum evidence-based fall prevention programs for older adults.

Action Steps

1. Convene a meeting with community college districts that teach professional, paraprofessional, and lay persons to explore how they can include fall prevention as part of required curriculum (Community College Districts).

2. Convene a meeting with state licensing bodies and professional organizations that represent these professions to encourage/require fall prevention education as part of certification requirement (Community College and School Districts, CA Statewide Nutrition Network, Certified Nurses Aides (CNAs), Home Health Aides Certification Training Requirements).

3. Convene a meeting with community college districts to identify ways to offer evidence-based fall prevention programs to older adults (Community College and School Districts, CA Statewide Nutrition Network, CNAs, Home Health Aides Certification Training Requirements).

RECOMMENDATION 3

Ensure that local Departments of Public Health take a leadership role by appointing a staff member as the point person for senior injury prevention and coordinating county-level fall prevention activities, services, and advocacy efforts.

Action Steps

1. Consult with the California Department of Public Health (CDPH) to discuss ways to implement this recommendation in local county health departments (DPH, local public health departments).

2. Consult with the FPCE to present information on implementing recommendation #3 to the Conferences of Local Health Officers and Local Directors of Health Education (CCLHO), California Conference of Local Directors of Health Education (CCLDHE), CDA, AAAs.

3. Urge attendees of the Summit to go back to their local health departments to encourage implementation of this recommendation (#3) and report back to the FPCE concerning process.

4. Urge Summit attendees to identify and join local task forces for fall prevention (fall prevention coalitions).
Education and Training

This work group stressed the significance of culturally appropriate curricula on fall prevention for universities and community colleges, as well as institutions offering continuing and adult education. Participants emphasized that future education and training about fall prevention had to reach and educate the entire health care community. Group consensus was that since medication management is an identified risk factor for falling, this message has to be broadcast to primary care physicians and psychiatrists who may lack awareness of falls as a public health issue.

Work group participants included professionals working in universities, community based organizations and health care and service provider organizations as well as AAAs, and consumer advocacy associations. They viewed fall prevention efforts as the information link between the individuals who suffer a fall, the physicians who treat them, the families who care for them, the community social network that fallers interact with, and the businesses who serve the individuals who suffer a fall.

Participants identified difficulties with transportation and insufficient respite care for caregivers that would allow time for continuing education as key barriers to better education about fall prevention for older adults and their caregivers. They agreed that a Fall Prevention Summit held every three years will support education and training efforts and further strengthen California's fall prevention infrastructure.

**RECOMMENDATION 1**

Educate older consumers and their family caregivers about their crucial role in fall prevention and management through the statewide network of Caregiver Resource Centers and Public Authorities.

**Action Steps**

1. Partner with organizations that have been identified and get buy-in (CAPA, IHSS, senior centers, adult day care centers, health care organizations, AARP, adult education centers and community colleges).

2. Link with partnered organizations’ website and maintain reciprocal links (AAAs, AARP, Alzheimer’s Association (AA), American Society on Aging (ASA), California Welfare Directors Association (CWDA).

3. Get advice from partners such as the Translational Medicine Partnership Forum (TMPF).

4. Partner with the media (public radio stations, public TV stations).

*Timeframe for completion: 12-18 months*
STATEWIDE STRATEGY FOR ACTION

RECOMMENDATION 2
Train physicians, nurse practitioners, and physician assistants on evidence-based practice guidelines (e.g., American Geriatrics Society, ACOVE) for fall risk assessment and management to ensure their incorporation into all primary care settings serving older adults.

Action Steps

1. Link with leadership in medical associations (American Physical Therapy Association (APTA), Community Emergency Response Team (CERT), California Medical Association (CMA), Emergency Nurses Association (ENA), National Conference of Gerontological Nurse Practitioners (NCGNP), HMOs, hospitals, Neighborhood Emergency Response Team (NERTs).

2. Fold falls prevention into American Academy of Family Physicians (AAFP) Continued Medical Education (CME) requirements; research pain and end of life mandates for CMEs as a possible model for future inclusion of fall prevention in CMEs (CMA, VA, academic institutions such as UC Davis, UCLA, UCSF, Stanford Medical Center, California State University, community colleges, Medical Board, ACCME).
   Timeframe for completion: 2 years

3. Define the curriculum and the delivery vehicles (academic institutions, CMA, VA, statewide community health clinics, long-term care (LTC) facilities, Aging Services of California (ASC)).
   Timeframe for completion: long-term and ongoing

4. Conduct evaluation efforts to target groups reached, inclusion of fall prevention material, and increased knowledge of participants.

RECOMMENDATION 3
Empower state-level advocacy and professional organizations (e.g., AARP, Older Women’s League, State Independent Living Council, Aging Services of California) to educate their members about their stake in fall risk, prevention, and management.

Action Steps

1. Convene a statewide summit to get commitments from all partner agencies and organizations to make fall prevention a priority (California Council of the Blind (CCB), California Welfare Directors Association (CWDA), C4A, National PACE Association, California Council on Gerontology and Geriatrics (CCGG)).
2. Links with lobbyists and representatives of these organizations (CCB, CWDA, C4A, National PACE Association, CCGG).

3. Disseminate tools and incorporate tools into organizational efforts (CCB, CWDA, C4A, National PACE Association, and CCGG).

4. Reciprocal website links as a cross-cutting strategy (CWDA, C4A, PACE, CCGG).

_Timeframe for completion: 18 to 36 months_
Health Care

Our fragmented health care system is not exclusively “medical”; rather, it consists of “health care organizations” such as HMOs, clinics and hospitals, as well as assisted living, skilled nursing and adult day health care facilities. This fragmentation presents challenges because education on fall prevention is not the sole responsibility of traditional education systems but includes places where health and allied health care professionals work. Many health care providers still know too little about fall prevention or underestimate their role in such efforts.

This group called for more preventive measures including improved medical, medication, and physical activity assessments and intake procedures that incorporate fall history questions. Additionally, data collection about falls often emanates from health care sites but participants pointed out that falls data surveillance is far from being sufficient and satisfactory. The group identified in-home risk assessments as a shared (but unmet) challenge for home builders, contractors/remodelers and health care providers. Group participants suggested that future changes could include case managers as “point of entry” persons who perform initial home assessments.

RECOMMENDATION 1
Encourage health care organizations to include standardized fall history/risk screening questions in initial and periodic (i.e., change in condition or annual) follow-up visits to facilitate and initiate in depth assessment, risk management and interventions.

Action Steps

1. Establish a committee to oversee and identify resources to carry out action steps (HMOs, clinics, hospitals, home health agencies, emergency room departments, adult day health care, assisted living facilities, skilled nursing facilities).

2. Identify or establish a standardized quick fall history/risk screening instrument that can be used by health care organizations (academic institutions, HMOs, hospitals, emergency room departments).

3. Identify or establish a system for more in depth assessment of those persons identified with high fall risk (academic institutions, HMOs, hospitals).
STATEWIDE STRATEGY FOR ACTION

4. Assist health care organizations in designing and implementing tailored intervention plans based on the assessment, such as developing written physical activity prescription templates for patients reporting little or no physical activity (academic institutions, HMOs, hospitals, home health agencies).

5. Establish priority issues and those responsible for enacting them, such as pharmacists responsible for medication monitoring (chain and community pharmacies, physician group practices).

6. Identify or establish standardized program evaluation criteria. Mobilize healthcare/social service provider organizations, such as California Hospital Association (CHA), ASC, California Association for Adult Day Services (CAADS), and California Chapter of the American Geriatrics Society (AGS) to adopt the recommendation; identify champions.

   *Timeframe for completion: 1 year*

---

**RECOMMENDATION 2**

Improve California’s ability to gather accurate information on falls from multiple data sets by developing a standard definition and set of reporting methods for falls from relevant sources at state and local levels.

---

**Action Steps**

1. Identify and review existing data sets and definitions, defining strengths and weaknesses (academic institutions, DPH).

2. Establish a standard core definition of a fall (government, academic institutions, state and local human service agencies, CDA).

3. Identify and review current linkages between data sets (academic institutions).

4. Develop methodology for linking data sets (academic institutions).

5. Develop a system to disseminate findings in a timely manner to those working in prevention (academic institutions, state and local human service agencies).


   *Timeframe for completion: Data inventory – 1 year, Continuation – long term*
STATEWIDE STRATEGY FOR ACTION

RECOMMENDATION 3
Encourage professional associations that interface with seniors to establish fall prevention education and intervention programs for their members. Identify champions.

Action Steps

1. Develop an inventory of relevant professional associations and their current activities in fall prevention and education; identify champion (CMA, Board of Registered Nurses (BRN), California Association of Nurses (CAN), California Pharmacy Association (CPA), CPTA, California Chapter of AGS).

2. Identify a list of needed fall prevention education programs (AGS, CMA).

3. Assist organizations to disseminate education materials, such as professional and consumer materials (AARP, CMA, BRN, CAN).

4. Mobilize professional organizations, such as California Chapter of AGS, California Pharmacy Associations, California Nurses Association and California Physical Therapy to infuse fall prevention education among members through continuing education and/or exportable education material.

Timeframe for completion: 2 years
Healthly Lifestyles & Recreation

Media and health professionals have always recommended regular exercise for young and middle-aged people, but a growing body of evidence now indicates that physical activity programs can prevent loss of independence, reduce disability and improve overall quality of life for older persons. This understanding informed the efforts of the “Healthy Lifestyles & Recreation” work group. Participants suggested that we have not reached the objective, i.e. community programs that encourage older adults to lead physically active lifestyles that prevent or minimize the impact of acute and chronic disease on function.

Work group participants discussed interventions as simple as identifying walking trails in the community and as comprehensive as multifactorial fall prevention programs implemented throughout California. They realized that it may take significant culture shifts or more widespread “redesign” of our communities to help older adults improve their health and quality of life by emphasizing the benefits of an active lifestyle.

To this end, participants identified possible partnerships and advocacy to promote fall prevention in industry, organizations and disciplines. Possible collaborating agencies included commercial fitness companies incorporating physical activity programs for older adults; special advocacy groups emphasizing diet and physical activity; parks and recreation departments, and senior centers throughout California sponsoring fall prevention programs.

Participants emphasize that one size does not fit all in fall prevention programming, meaning that not all older adults have the same level of fall risk. As such, programs need to be developed that address the continuum of fall risk (e.g., low, moderate, and high). Additionally, more cooperation is needed between health care and other service providers to effectively promote preventive and post-fall measures including dietary and medication recommendations.

Community-based programs incorporating exercises to improve muscle strength and endurance, balance, mobility, and flexibility were identified as the most critical agents towards achieving healthier lifestyles and recreation. Maintaining current and accurate information about such programs and the need to create awareness of impact of existing and new physical activity programs were named key barriers.
**STATEWIDE STRATEGY FOR ACTION**

### RECOMMENDATION 1

**Develop and publicize a list/directory of well-rounded local community-based exercise programs and classes for older adults (from healthy to frail) that incorporate exercises to improve muscle strength and endurance, balance, mobility, and flexibility for fall prevention.**

**Action Steps**

1. Develop updated web-based database (CDPH - co-lead agency, CDA – co-lead agency, California Parks and Recreation Society (CPRS), AAAs, California Caregiver Coalition, International Council on Active Aging (ICAA), Independent Living Centers, ASC, hospitals and medical services providers, faith-based organizations).

2. Set guidelines for what should be incorporated (CDPH - co-lead agency, CDA – co-lead agency, CPRS, AAAs, California Caregiver Coalition, ICAA, Independent Living Centers, ASC, hospitals and medical services providers, faith-based organizations).

### RECOMMENDATION 2

**Expand the number of Active Living By Design™ community partnerships in California that promote healthy lifestyles of older adults by addressing community issues (e.g., trails, parks) to increase physical activity levels.**

**Action Steps**

1. Motivate Active Living By Design™ cities to target older adults (city planning departments, local chambers of commerce, California Parks and Recreation Society, faith-based organizations, social “interest” groups (see San Diego model, League of Cities and Counties, cities currently implementing the Active Living By Design™).

2. Encourage other cities to adopt Active Living by Design™ (City Planning departments, local chambers of commerce, California Parks and Recreation Society, faith-based organizations, social “interest” groups (see San Diego model, League of Cities and Counties, cities currently implementing the Active Living By Design™).

3. Expand the Active Living Everyday (Robert Wood Johnson Foundation) initiative.

4. State should encourage “housing” element in city/county general plans that define the cities’ policies, programs, and priorities related to housing (city planning departments).
Action Steps

1. Develop speakers bureau targeting service/social clubs and chambers of commerce (DPH, CDA, FPCE, CDC, university communications, AARP).

2. “De-stigmatize” fall prevention; emphasize positive messages (media, speakers bureau, FPCE, pro bono public relations group, state chapter of New America Media, AARP).

3. Create connections with professionals conducting wellness programs (FPCE, hospitals, managed care organizations, CDC).

4. Engage PBS or sponsors (e.g., philanthropic organizations that fund programs) to support fall prevention efforts in the community.
Safe Housing & Communities

The “Safe Housing and Communities” work group addressed physical design and policy issues related to the built environment and falls. In order to improve the design and maintenance of housing and neighborhoods, the group identified changes needed in local, state, and federal policies, plans, and funding to reduce hazards and add supportive elements to the environment.

Participants in the Safe Housing and Communities group included professionals working in housing, rehabilitation, state government, philanthropy, the media, and local programming. The work group originally developed six recommendations and of those selected the top three priority recommendations. Work group participants declared “transportation problem”, “lack of public awareness regarding Mixed Use District (MUD)”, “affordable housing”, and “cost to consumer” as the key barriers to implementing action steps.

Action Steps

1. Create an inventory of jurisdictions that have fall prevention-related policies in their current plans. Use best practices examples. (FPCE, CDPH, SLIC).
   *Timeframe for completion: 12 months*

2. Encourage AAAs to participate in planning fall prevention with other local agencies. (CDA, CCoA).

3. Develop planning recommendation language that cities and counties can incorporate into their general plans, housing elements, and other planning documents. Create a guidebook with suggested language that jurisdictions and other stakeholders can use to incorporate fall prevention policies into their specific and general plans. (FPCE, OPR).
   *Timeframe for completion: 12 – 18 months*

4. Develop public understanding and media campaigns to raise awareness of issues and advocate for change with public and policy makers. (ASC).
   *Timeframe for completion: 12 months and ongoing*

5. Advocate for C4A and N4A to place fall prevention on the agenda of annual meetings and develop online training sessions for C4A planners. (C4A, N4A, ASC, AARP Livable Communities Initiative).
   *Timeframe for completion: 12 months*
RECOMMENDATION 2

Provide incentives for local communities and developers to adopt California’s voluntary Model Universal Design Ordinance that includes fall prevention features, such as a “zero step” entrance and an accessible bathroom on the first floor in new and remodeled single family housing.

Action Steps

1. Create fact sheets for professionals and consumers that include Universal Design (UD) minimum standards, listing of possible incentives, best practices, and links to resources for advocating for UD. (FPCE, AIA, APA, California Foundation for Independent Living Centers (CFILC), DOR, Habitat for Humanity, Rebuilding Together, C4A, HCD).
   Time frame for completion: 12 months

2. Advocate for housing developers and local planning departments to include UD in building affordable and senior housing. (CCAPA, HUD, CRA, city planners and managers, city council, Community Development Block Grant Programs (CDBGs).
   Timeframe for completion: 36 months

3. Create recognition system such as awards for those localities that are providing UD incentives in housing rehabilitation and development. (50+ Housing Council, CDPR, Community Redevelopment Agency (CRA), city planners and managers, CDBGs, Redevelopment Agencies).
   Timeframe for completion: ongoing and annually
RECOMMENDATION 3

Develop new and more reliable sources of funding for home assessments by professionals (e.g., occupational and physical therapists) and for home modifications.

**Action Steps**

1. Analyze costs of fall injuries at county levels. (EPICenter).

2. Advocate for expansion of existing resources from such sources as the Department of Rehabilitation (DOR), MSSP, OAA programs, Linkages, CDBG-funded housing rehabilitation programs, and other public/private resources. (California Senior Legislature (CSL), CCoA, DOR, MSSP).

3. Encourage Rebuilding Together and Habitat for Humanity to expand efforts in home modifications, universal design and fall prevention. (CSL, the FPCE’s StopFalls Network, Rebuilding Together, Habitat for Humanity).

4. Develop and/or publicize resource databases for home modification agencies, providers, programs, and consumers (Rebuilding Together, FPCE).

5. Raise awareness about features in homes that can help people age in place. (CSL, AARP, PACE, AOTA, APTA, OTAC, CPTA).

*Timeframe for completion of recommendation 3: ongoing*
Cross-Cutting Recommendations

Some issues relating to fall prevention cut across multiple subject areas and/or all work groups. Summit participants addressed such issues explicitly and generated several separate cross-cutting recommendations rather than assigning them to any individual work group topic.

The cross-cutting recommendations listed here demonstrate the complexity of fall prevention as a joint and coordinated effort by a multitude of organizations, agencies, fields, and disciplines. These recommendations underscore that a commitment to long-term planning, sharing of resources, and dissemination of information on fall prevention is necessary to avoid duplication of efforts, overlap in programs, and a confounded stream of information about fall prevention. Enhancing cooperation and coordination will help providers respond to the needs of older adults at risk of falling, thus making fall prevention a key public health priority.

Action Steps

1. Develop fall-prevention media outreach campaign (e.g., radio, television, internet, Public Service Announcements, and other programming) promoting healthy lifestyle issues (e.g., physical activity, nutrition, and vision issues) appropriate for ethnically, educationally, and geographically diverse older adults.

2. Educate older consumers and their family caregivers about their crucial role in fall prevention and management through the statewide network of Caregiver Resource Centers and Public Authorities.

3. Encourage professional associations that interface with seniors to establish fall prevention education and intervention programs for their members.

RECOMMENDATION 1

Institute a statewide Fall Prevention Awareness Week, with a Governor’s proclamation, press events and public awareness activities.

RECOMMENDATION 2

Establish a permanent statewide fall prevention task force that includes Departments of Aging, Public Health, Health Care Services, Housing and Transportation, to coordinate state-level programs and activities.

Action Steps

1. Encourage the Departments on Aging and Public Health to raise fall prevention to a level of priority for the state and to work collaboratively in achieving a reduction in falls and fall related injuries.
2. Empower state-level advocacy and professional organizations (e.g., AARP, Older Women’s League, State Independent Living Council, Aging Services of California) to educate their members about their stake in fall risk, prevention, and management.

**RECOMMENDATION 3**

Convene a statewide fall prevention Summit every 3 years.

**Action Steps**

1. Encourage members of professional associations that interface with seniors to establish fall prevention education and intervention programs for their members.

2. In advance, assess progress since the prior Summit.

3. Secure funds from foundations, government and other sources for Summit-related activities.

**RECOMMENDATION 4**

Develop and widely disseminate culturally appropriate fall prevention information to all community organizations serving older adults (e.g., hospitals, senior and community centers, libraries, recreation and parks, bookstores, religious entities).

**Action Steps**

1. Encourage local public health and aging agencies in partnership with other community organizations to develop an inventory of local fall prevention programs and resources as a foundation for information and referral networks.

2. Identify and disseminate best practice interventions linking health care and aging organizations.

3. Encourage educational institutions such as community college districts and professional and paraprofessional caregiver training programs to incorporate into their curriculum evidence-based fall prevention programs for older adults.

4. Work with ethnic and cultural groups to develop materials appropriate to a diverse aging population and their caregivers.
Opportunities and Challenges

While considerable progress has been made since the 2003 fall prevention conference, many more challenges and tasks lie ahead. Much has been learned from research about the importance of multifactorial interventions in fall prevention, how to engage older persons in fall prevention, and the role of professionals, community organizations, and policy makers in reducing falls. Participants in the 2007 California Fall Prevention Summit generated fall policy recommendations and action steps suggesting change that will make fall prevention a key public health priority in California.

Several themes emerged after two days of demanding work:

- Good fall prevention data are needed to develop sustainable, evidence-based fall prevention programs and activities at local, county, and state levels.
- Leaders in fall prevention are called upon to make the case for the cost effectiveness of fall prevention. Falls and fall-related injuries affect us all and place an enormous burden on the nation’s health care system; a “fall prevention business plan” is useful in convincing policy makers and health providers about the importance of investing in fall prevention.
- Budget cuts at local, state and national levels invite creative, not pessimistic, thinking about new fall prevention efforts. “How can we ensure that limited, but available funding is directed toward fall prevention?” was the question. We are challenged to find creative solutions to limited resources.
- Many good and effective fall prevention programs have been developed. Rather than “reinventing the wheel”, future fall prevention efforts should build on or adapt and upgrade existing programs to make them as effective as possible, thus requiring fewer resources for measureable improvement.
- Fall prevention programs don’t carry the label “one size fits all”. Instead, fall prevention efforts have to adequately address the needs of older adults at risk for falls and have to promote the understanding that falls are preventable, not inevitable. Whether or not fall prevention efforts are effective depends largely on older adults’ acceptance of and compliance with interventions, their awareness of their own risk of falling, and their motivation to work towards change.
- “It takes a village to prevent a fall” was the message at the 2007 Fall Prevention Summit. Advocacy groups, organizations and agencies who have not collaborated in the past will have to join forces to engage in effective fall prevention activities that address individual risk factors for falls, physical activity levels, changes in medical practices and medication management,

“As the population ages, falls will become a very serious problem for which we are not prepared. The Summit shows us that there is a lot we can do about it now.”

-- Ileana Arias, PhD
modifications in the home and the environment as well as behavior change required of the older adult at risk of falling.

- It is necessary to develop a consistent message about fall prevention that is sensitive to and culturally appropriate for California’s diverse population.

- Professionals and practitioners need education and training so they can play a more effective role in fall prevention.

- The fall prevention community must take responsibility for the policy recommendations generated at the 2007 California Fall Prevention Summit and to implement fall prevention in our homes, our work and our communities.

“I thank you for the most worthwhile conference and congratulate you! We are talking about fall prevention ever since, especially at the community level. The Orange County Supervisor will sponsor a senior forum which includes fall prevention.”

-- Brenda Ross
Next Steps

Efforts of the Fall Prevention Center of Excellence to reduce the number of falls and the risk for falling among older adults culminated in the “2007 California Fall Prevention Summit: Progress, Challenges & Next Steps”. It was, by all accounts, a highly successful event that greatly raised the awareness of falls as a significant threat to older adults’ well being and independence. The California Commission on Aging (CCoA) welcomed the policy recommendations crafted by Summit participants and promised to support fall prevention as a public health priority.

On February 8, 2008, California Senator Alan Lowenthal authored (co-author Assemblywomen Patty Berg) and introduced Senate Concurrent Resolution No. 77. This measure would declare the first week of autumn each year as “Fall Prevention Awareness Week” and urge the California Department of Aging and the AAAs to incorporate fall prevention in their upcoming state and local area master plans, an idea that Lynn Daucher, Director of the California Department of Aging endorsed at the Summit. The resolution also recommends that the California Health and Human Services Agency (CHHS) develop standardized definitions and reporting methods that will improve available information on falls, and the incorporation of fall prevention guidelines in state and local planning documents that affect housing, transportation, parks, recreational facilities, and other public facilities.

While older adults are at higher risk for falling, younger and able individuals are not immune to falling and experiencing negative consequences. “All of us can trip and fall”, noted Dr. Fernando Torres-Gil in his closing remarks and added that, “education about fall prevention has to start in our schools. Even teenagers have to learn to realize their strengths and recognize their limitations so that, later on, they can acknowledge and accept disability and the need for help. What we need most is a change in attitude that will benefit those who have fallen and those we can protect from falling.”
Appendices

Appendix 1: Participants of the “2007 California Fall Prevention Summit”

Appendix 2: Guest Speakers

Appendix 3: The Steering Committee

Appendix 4: The Advisory Committee

Appendix 5: Summit Agenda

Appendix 6: Summit Policy Recommendations

Appendix 7: Resource Directory

Appendix 8: Poster Presentations

Appendix 9: Acknowledgments

Appendix 10: References
Appendix 1

Participants at the “2007 Fall Prevention Summit: Progress, Challenges, & Next Steps”

Pauline Abbott, EdD
Director of Cal State Fullerton’s Institute of Gerontology
California State University, Fullerton
Gerontology Department
800 N. State College Blvd., RGC-8
Fullerton, CA 92834
(714) 278-4686
pabbott@fullerton.edu

Barbara Alberson, MPH
Chief, State and Local Injury Control
California Department of Health Services
611 N. 7th Street, Suite C
Sacramento, CA 95814-0208
(916) 323-3486
balberson@dhs.ca.gov

Susan Alesi, MA
Adult and Aging Program Planner
Sonoma County Area Agency on Aging
P.O. Box 4059
Santa Rosa, CA 95403
(707) 565-5984
salesi@schsd.org

Gretchen E Alkema, PhD
Research Scientist
Fall Prevention Center of Excellence
USC Leonard Davis School of Gerontology
3715 McClintock Avenue
Los Angeles, CA 90086
(213) 740-1364
alkema@usc.edu

Ileana Arias, PhD
Director
National Center for Injury Prevention and Control, Center for Disease Control and Prevention
4770 Buford Hwy., NE MS K-02
Atlanta, GA 30341
(404) 639-331
iaa4@CDC.GOV

Jeanne Bader, PhD
California State University, Long Beach
Gerontology Department
1250 Bellflower Blvd.
Long Beach, CA 90840
(562) 987-9631
baderje@csulb.edu

Cynthia Banks
Director
Los Angeles County Dept. of Community and Senior Services
3175 West 6th St.
Los Angeles, CA 90020
(213) 637-0798
cbanks@css.lacounty.gov

Emily Basner
Research Assistant
Fall Prevention Center of Excellence
USC Leonard Davis School of Gerontology
3715 McClintock Ave.
Los Angeles, CA 90086
(213) 740-1364
basner@usc.edu

Bonita Lynn Beattie, MPT, MHA, PT
Vice President, Injury Prevention
National Council on Aging
Center for Healthy Aging
1901 L St. NW, 4th floor
Washington, DC 20036
(202) 479-1200
bonita.beattie@ncoa.org

Athan Bezaitis, MA
Communications Director
USC Leonard Davis School of Gerontology
3715 McClintock Ave.
Los Angeles, CA 90089
(213) 740-0821
bezaitis@usc.edu

Adrienne Bouard, MA
Data Coordinator
VA Greater Los Angeles Healthcare System Geriatric Research, Education & Clinical Center
16111 Plummer St. (11E)
Sepulveda, CA 91343
(818) 891-7711
albouard@hotmail.com

Thomas Brewer, MBA, MPH, MSW
Director of Programs
Archstone Foundation
401 East Ocean Blvd., Suite 1000
Long Beach, CA 90802
(562) 590-8655
tbrewer@archstone.org

Holly Brown-Williams
UC Berkeley School of Public Health
Health Research for Action
2140 Shattuck Ave. 10th floor
Berkeley, CA 94704
(510) 643-4543
hollybw@berkeley.edu

Gabriele Burkard, MSW
Program Officer
California Community Foundation
445 S. Figueroa St
Suite 3400
Los Angeles, CA 90071-1638
(213) 413-4130
gburkard@ccf-la.org

Colleen M. Campbell
Senior Injury Prevention Project Coordinator
Alameda County Social Services
6955 Foothill Blvd
Oakland, CA 94605
(510) 577-3535
ccampbel2@acgov.org
APPENDIX 1

Rachel A. Caraviello  
*Research Assistant*  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Los Angeles, CA 90089  
(213) 740-1364  
caravel@usc.edu  

Steve Carpenter  
*Executive Director*  
Rebuilding Together  
21691 Jornada  
Mission Viejo, CA 92692  
(949) 400-8066  
scarpenter@rebuildingtogetheroc.org  

Brian M. Carroll  
*Executive Director*  
Adult and Aging Network/Santa Barbara County  
1410 South Broadway  
Suite L  
Santa Maria, CA 93454  
(805) 714-3499  
b.carroll@sbssocialserv.org  

Steven C. Castle, MD  
*Clinical Director*  
David Geffen School of Medicine at UCLA, Veterans Affairs GRECC  
11301 Wilshire Blvd. - GRECC (11G)  
Los Angeles, CA 90073  
(310) 268-4671  
steven.castle@va.gov  

Donna Cazares  
Royal Oaks Manor  
1763 Royal Oaks Dr. North  
Bradbury, CA 91010  
(626) 305-2311  
donnacazares@scphs.com  

In Hee Choi, PhD  
*Research Assistant*  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Rm 228  
Los Angeles, CA 90089  
(213) 740-1364  
inchoi@usc.edu  

Caroline Cicero, MSW, MPL  
*Research Assistant*  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Rm 228  
Los Angeles, CA 90089  
(213) 740-1364  
cicero@usc.edu  

Jodi Cohn, DrPH  
*Director - Geriatric Practice Innovation Research*  
SCAN Health Plan  
P.O. Box 22616  
Long Beach, CA 90801-5516  
(562) 989-4442  
jcohn@scanhealthplan.com  

Mariann Cosby, MPA, MSN, RN, PHN  
*Chief, Preventative Health Care for Adults*  
California Department of Public Health  
P.O. Box 997377  
MS 7210  
Sacramento, CA 95899  
(916) 552-9892  
mcosby@cdph.ca.gov  

Patti Culross, MD, MPH  
Los Angeles County Public Health  
3530 Wilshire Blvd. Ste 800  
Los Angeles, CA 90027  
(213) 351-7888  
pculross@ph.lacounty.gov  

Lynn Daucher  
*Director*  
California Department of Aging  
1300 National Dr.  
Sacramento, CA 95834  
(916) 928-7500  
ldaucher@aging.ca.gov  

Jim Davis  
*Vice Chair*  
California Commission on Aging  
1604 Henderson St  
Eureka, CA 95501  
(707) 442-6255  
jimtrain34@aol.com  

Cordula Dick-Muehlke, PhD  
*Executive Director*  
Alzheimer’s Family Services Center  
9451 Indianapolis Ave.  
Huntington Beach, CA 92646  
(714) 593-9630  
cdickmuelke@afscenter.org
APPENDIX 1

Denise D. Diener, PT, MSG, GCS  
Rancho Los Amigos  
National Rehabilitation Center  
Rancho Adult Day Services  
7601 E. Imperial Hwy, Bldg. 800 W. Annex  
Downey, CA 90242  
(562) 401-7402  
ddienerpt@aol.com

Celia J Esquivel  
Chair  
California Commission on Aging  
4737 Papaya Dr  
Fair Oaks, CA 95628  
(916) 556-3022  
cesquivel@aarp.org

Connie Gil, MA  
Riverside County Office on Aging  
6296 Rivercrest Drive  
Suite K  
Riverside, CA 92507  
(951) 867-3800  
cgil@co.riverside.ca.us

James Don  
Assistant General Manager  
Los Angeles Department of Aging  
3580 Wilshire Blvd, Suite 300  
Los Angeles, CA 90010  
(213) 252-4035  
james.don@lacity.org

Jolene Fassbinder, MSG, MACM  
Executive Director  
California Council on Gerontology and Geriatrics  
10945 Le Conte Ave., Suite 2339  
Los Angeles, CA 90095-1687  
(310) 312-0531  
jfassbinder@mednet.ucla.edu

Laura Giles, MSG  
Program Officer  
Archstone Foundation  
401 East Ocean Blvd., Suite 1000  
Long Beach, CA 90802  
(562) 590-8655  
lgiles@archstone.org

Susan M. Enguidanos, MPH, PhD  
Assistant Professor  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Room 228 B  
Los Angeles, CA 90089  
(213) 740-9822  
sengui@aol.com

Jill R. Erickson, RD  
Program Operations, PSA 30  
Stanislaus County Department of Aging and Veterans Services  
121 Downey Ave., Suite 102  
Modesto, CA 95354  
(209) 558-7825  
ericksj@mail.co.stanislaus.ca.us

Sandra K. Fitzpatrick, MA  
Executive Director  
California Commission on Aging  
1300 National Dr.  
Suite 173  
Sacramento, CA 95834  
(916) 419-7591  
sfitzpatrick@ccoa.ca.gov

Regina Gongoll, MSG*  
Program Manager  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Room 228 C  
Los Angeles, CA 90089  
(213) 821-6703  
gongoll@usc.edu

Jolene Fassbinder, MSG, MACM  
Executive Director  
California Council on Gerontology and Geriatrics  
10945 Le Conte Ave., Suite 2339  
Los Angeles, CA 90095-1687  
(310) 312-0531  
jfassbinder@mednet.ucla.edu

Stuart Greenbaum, MS  
Director Communications and Outreach  
Aging Services of California  
1315 I Street  
Suite 100  
Sacramento, CA 95814  
(916) 432-1268  
sgreenbaum@aging.org

Regina Gongoll, MSG*  
Program Manager  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Room 228 C  
Los Angeles, CA 90089  
(213) 821-6703  
gongoll@usc.edu

Hacer Gole  
Silver Age Yoga  
7968 Arjons Dr. #213  
San Diego, CA 92126  
(858) 693-3110  
silverageyoga@yahoo.com

Regina Gongoll, MSG*  
Program Manager  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Room 228 C  
Los Angeles, CA 90089  
(213) 821-6703  
gongoll@usc.edu

Susan Era  
Deputy Director  
Area Agency on Aging Lake and Mendocino Counties  
747 S. State St.  
Ukiah, CA 95482  
(707) 463-7902  
eras@mcдss.org

Janet Frank, DPH*  
Assistant Director for Academic Programs  
UCLA Multicampus Program in Geriatric Medicine & Gerontology, The David Geffen School of Medicine at UCLA  
10945 Le Conte Avenue, Suite 2339  
Los Angeles, CA 90095-1687  
(310)312-0531  
jcfrank@mednet.ucla.edu

Stuart Greenbaum, MS  
Director Communications and Outreach  
Aging Services of California  
1315 I Street  
Suite 100  
Sacramento, CA 95814  
(916) 432-1268  
sgreenbaum@aging.org
Carrie Greer  
*Program Coordinator*
Fall Prevention Center of Excellence
USC Leonard Davis School of Gerontology
3715 McClintock Ave.
Room 228
Los Angeles, CA 90089
(213) 740-1364
carrieg@usc.edu

Carol Hahn, MSN, RN  
*Associate Director of Professional Training*
Alzheimer’s Association of Los Angeles
5900 Wilshire Blvd, Suite 1100
Los Angeles, CA 90036
(323) 930-6253
carol.hahn@alz.org

Linda Hale, RN  
*Chief, Family Health Section*
Wisconsin Department of Health and Family Services
1 W. Wilson St. Rm. 351
P.O. Box 2659
Madison, WI 53701
(608) 267-7174
halelj@dhfs.state.wi.us

Barbara Hanna, RN, PHN, CCM  
*President*
Home Health Care Management, Inc.
1398 Ridgewood Dr.
Chico, CA 95973
(530) 899-3873
hhcmchpplus@aol.com

Shirley Harlan  
Older Women’s League of California
P.O. Box 2276
San Bernardino, CA 92406
(909) 882-4057
VLDY@aol.com

Mary Harvey, BSN  
2525 Grand Ave
Long Beach, CA 90815
(562) 570-3555
Mary-Harvey@longbeach.gov

Maria Henke, MA  
*Assistant Dean*
USC Leonard Davis School of Gerontology
3715 McClintock Ave
Los Angeles, CA 90089
(213) 740-1363
mhenke@usc.edu

Marc Herrera, MSG  
*Vice President, Skilled Nursing and Risk Management*
Southern California Presbyterian Homes
516 Burchett St.
Glendale, CA 91203
(818) 247-0420
marcherrera@scphs.com

Patti Y. Horsley, MPH  
*Program Coordinator*
California Department of Public Health
PO Box 997377
MS 7214
Sacramento, CA 95899-7377
(916) 552-9832
phorsley@cdph.ca.gov

Tina Hummel, MA  
*Program Coordinator*
Fall Prevention Center of Excellence
USC Leonard Davis School of Gerontology
3715 McClintock Ave.
Room 228
Los Angeles, CA 90089
(213) 740-1364
chummel@usc.edu

Frank Iszak  
Silver Age Yoga
7968 Arjons Dr. #213
San Diego, CA 92126
(858) 693-3110
silverageyoga@yahoo.com

Karen L. Josephson, MD  
911 E. San Antonio Dr.
Suite 4
Long Beach, CA 90808
(323) 309-0961
karen@drkarenj.com

Victoria Jump  
*Executive Director*
Ventura County Area Agency on Aging
646 County Square Drive, Suite 100
Ventura, CA 93003
805-447-7300
victoria.jump@ventura.org

Diane C. Katz, MA, MPH  
UCLA Division of Geriatrics
10945 Le Conte Ave., Suite 2339
Los Angeles, CA 90095-1687
(310) 823-8253
dkatz@mednet.ucla.edu

Jeffrey Kim, JD  
*Program Director*
The California Wellness Foundation
6320 Canoga Ave., Suite 1700
Woodland Hills, CA 91367
(818) 702-1900
jkim@tcwf.org

Paul Kleyman  
*Editor*
Aging Today
833 Market Street, Suite 511
San Francisco, CA 94103
(415) 974-9619
paul@asaging.org
APPENDIX 1

B. Josea Kramer, PhD  
GRECC Associate Director for Education/Evaluation  
VA Greater Los Angeles Healthcare System  
16111 Plummer St. (11E)  
Sepulveda, CA 91343  
(818) 895-9311  
josea.kramer@med.va.gov

Susan Kruse, RN  
Silverado Senior Living  
27121 Calle Arroyo Suite 2220  
San Juan Capistrano, CA 92675  
(714) 225-2397  
skruse@silveradosenior.com

Mary Ellen Kullman, MPH  
Vice President  
Archstone Foundation  
401 East Ocean Blvd., Suite 1000  
Long Beach, CA 90802-4933  
(562) 590-8655  
mekullman@archstone.org

Tony Kuo, MD, MSHS  
Los Angeles Department of Public Health  
3530 Wilshire Blvd.  
Ste. 800  
Los Angeles, CA 90010  
(213) 531-7341  
tkuo@ph.lacounty.gov

Susan K Kwan  
UCLA Division of Geriatrics  
10945 Le Conte Avenue, Suite 2339  
Los Angeles, CA 90095  
(310) 312-0531  
skwan@mednet.ucla.edu

Julie L. Lehmann, RN, PHN  
Home Health Care Management  
1398 Ridgewood Dr.  
Chico, CA 95973  
(530) 343-0727  
JLehmann@chpplushomehealth.com

Phoebe S. Liebig, PhD  
Research Associate  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Los Angeles, CA 90089  
(213) 740-1364  
liebig@usc.edu

Jennifer Lillibrige, PhD  
Associate Professor of Nursing  
California State University, Chico  
1121 Nelson St  
Chico, CA 95928  
(530) 342-1265  
jlillibrige@csuchico.edu

Alan Lowenthal, PhD  
Senator  
California State Senate, 27th District  
115 Pine Ave.  
Suite 430  
Long Beach, CA 90802  
(562) 495-4766  
senator.lowenthal@sen.ca.gov

Nhang Luong  
Contra Costa County Area Agency on Aging  
2530 Arnold Dr # 300  
Martinez, CA 94553  
(925) 335-8783  
nluong@ehsd.cccounty.us

Susan Mack, OTR/L, CAPS  
Director  
Homes for Easy Living Universal Design Consultants  
25060 Hancock Ave  
Suite 103-186  
Murrieta, CA 92562  
(760) 409-7565  
smack@homesforeasyliving.com

Ahnileen Martinez, MSG  
AARP California  
200 South Robles Ave. Ste. 400  
Pasadena, CA 91101  
(626) 585-2622  
aemartinez@aarp.org

Loren Matsumura, MA  
Veteran’s Administration  
11919 Avon Way #9  
Los Angeles, CA 90066  
(310) 397-9397  
loren.matsumura@med.va.gov

Theresa McPeek, RN, BSG  
Eskaton, The Senior Connection  
5105 Manzanita Ave.  
Carmichael, CA 95608  
(916) 334-1072  
terrym@eskaton.org

Patricia McVicar, MA  
Assistant Director  
Area 4 Agency on Aging  
2260 Park Towne Circle, Suite 100  
Sacramento, CA 95825  
(916) 486-1876  
pmac@a4aa.com

Tanisha Metoyer  
Program Assistant  
Archstone Foundation  
401 East Ocean Blvd., Suite 1000  
Long Beach, CA 90802  
(562) 590-8655  
tmetoyer@archstone.org

Greg Misiaszek, MS Ed.  
Educational Technologist  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Los Angeles, CA 90089  
(213) 740-1710  
gmisiaszek@yahoo.com
APPENDIX 1

Olfat Mohamed, PhD, PT
Professor, Department of Physical Therapy
California State University, Long Beach
1250 Bellflower Blvd
Long Beach, CA 90840
(562) 985-7139
osm@csulb.edu

Brittany Montes
Archstone Foundation
401 East Ocean Blvd., Suite 1000
Long Beach, CA 90802
(562) 590-8655
bmontes@archstone.org

Emeline Moya, MPA
Recreation Supervisor
City of Alamitos
8288 Galaxy Way
Buena Park, CA 90620
(714) 307-6120
emelinemoya@yahoo.com

Trevor L. Nelson
Webmaster
Fall Prevention Center of Excellence
USC Leonard Davis School of Gerontology
3715 McClintock Ave
Room 234
Los Angeles, CA 90089
(213) 740-1632
tnelson@usc.edu

Anna Quyen D. Nguyen, MA, OTD
Research Scientist
Fall Prevention Center of Excellence
USC Leonard Davis School of Gerontology
3715 McClintock Ave
Room 228
Los Angeles, CA 90089-0191
(213) 821-5577
anna.q.nguyen@gmail.com

Dianna Olsen
Executive Director
Healthy Aging Association
121 Downey Ave. Ste. 102
Modesto, CA 95354
(209) 523-2800
dolsen8333@aol.com

Julie H. Overton, MSG/MHA
Training and Development Resource Specialist
Fall Prevention Center of Excellence
USC Leonard Davis School of Gerontology
7855 Sitio Coco
Carlsbad, CA 92009
(760) 436-2390
overtonusc@aol.com

Kali Peterson, MSG, MPA
Project Manager
VA Greater Los Angeles Healthcare System Geriatric Research, Education & Clinical Center
16111 Plummer St. , 11 E
Sepulveda, CA 91343
(818) 891-7711
carlene.phillips@johnmuirhealth.com

Arlene E Phillips, MA
John Muir Senior Services
1981 N Broadway
Suite 202
Walnut Creek, CA 94596
(925) 952-2759
arlene.phillips@johnmuirhealth.com

Joseph F. Prevratil, JD
President and CEO
Archstone Foundation
401 East Ocean Blvd., Suite 1000
Long Beach, CA 90802
(562) 590-8655
jprevratil@archstone.org

Rachel M. Price, MSG*
Program Coordinator
California Geriatric Education Center, David Geffen School of Medicine at UCLA
10945 Le Conte Ave., Suite 2339
Los Angeles, CA 90095-1687
(310) 825-8253
rprice@mednet.ucla.edu

Jon Pynoos, PhD
Professor/Co-Director
Fall Prevention Center of Excellence
USC Leonard Davis School of Gerontology
3715 McClintock Ave.
Los Angeles, CA 90089-0191
(213) 740-1364
jypoos@aol.com

Michael L. Radetsky, MA, MPH
Senior Health Educator
San Francisco Department of Public Health
30 Van Ness Ave., Suite 2300
San Francisco, CA 94102
(415) 581-2418
michael.l.radetsky@sfdph.org

Terri Restelli-Deits, MSW
Planner
Area Agency on Aging Napa and Sonoma
Napa Valley Fall Prevention Coalition
601 Sacramento St. Suite 400
P.O. Box 3069
Vallejo, CA 94590
(707) 644-6612
terrid@aaans.org

Amina Richards, MS, CHES
Area Agency on Aging
P.O. Box 3069
Vallejo, CA 94590
(707) 319-4637
aminar@aaans.org
Betty K. Robinson  
City of Riverside Office on Aging  
73750 Catalina Way  
Palm Desert, CA 92260  
(760) 341-0401  
brobinson@co.riverside.ca.us

Debra J. Rose, PhD  
Professor/Co-Director  
Fall Prevention Center of Excellence  
Co-Director Center for Successful Aging  
California State University, Fullerton  
800 N. State College Blvd., RGC-8  
Fullerton, CA 92844  
(714) 278-5846  
drose@fullerton.edu

Brenda Ross, EdD  
24055 Paseo Del Lago # 1163  
Laguna Woods, CA 92637  
(949) 651-7555  
brendaross@fca.net

Laurence Z. Rubenstein, MD, MPH, FACP  
Co-Director  
Fall Prevention Center of Excellence  
Senior Physician  
Geriatric Research Education and Clinical Center (GRECC), VA  
Greater Los Angeles Healthcare System, Professor of Medicine, UCLA  
School of Medicine  
16111 Plummer Street (11E)  
Sepulveda, CA 91343  
(818) 895-9311  
lzrubens@ucla.edu

Allison Ruff, MSG  
Principal Consultant  
California State Assembly Committee on Aging & Long Term Care  
1020 N. Street, Suite 360  
PO Box 942849  
Sacramento, CA 95814  
(916) 319-3990  
allison.ruff@asm.ca.gov

Elyse Salend, MSW  
Program Officer  
Archstone Foundation  
401 East Ocean Blvd., Suite 1000  
Long Beach, CA 90802  
(562) 590-8655  
esalend@archstone.org

Cynthia Schuetz, PhD  
Coordinator  
Fall Prevention Coalition of Nevada County  
19000 Covui Court  
Grass Valley, CA 95949  
(530) 268-0960  
cynthia43@gmail.com

Vicky Scott, PhD, RN  
Senior Advisor on Falls and Injury Prevention  
Ministry of Health, Population & Wellness  
British Columbia Injury Research & Prevention Unit  
1515 Blanshard 4-2  
Victoria, BC V8W 3C8  
(604) 875-3776  
vicky.scott@gov.bc.ca

Debra J. Sheets, RN, PhD  
Associate Professor  
California State University Northridge  
Department of Health Sciences  
P.O. Box S  
Frazier Park, CA 93222  
(818) 677-2344  
debra.sheets@csun.edu

Suzanne Shiff, MA  
Falls Prevention Coordinator  
Napa and Solano Area on Aging  
P.O. Box 10031  
Napa, CA 94581  
(707) 738-7958  
cactusvine@aol.com

W. June Simmons, MSW  
President & CEO  
Partners in Care Foundation  
732 Mott St.  
San Fernando, CA 91340  
(818) 526-1780  
jsimmons@picf.org

Kristen Smith, MPH  
Health Promotions Coordinator  
Aging & Independence Services  
San Diego County  
P.O. Box 2327  
San Diego, CA 92123  
(858) 495-5061  
kristen.smith@sdcounty.ca.gov

John Sobhani  
Research Assistant  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Los Angeles, CA 90089  
(213) 740-1364  
jsobhani@usc.edu

Bernard Steinman, MS  
Research Associate  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Los Angeles, CA 90089  
(213) 740-7306  
bsteinma@usc.edu

Judy Stevens, PhD  
Epidemiologist, Division of Unintentional Injury Prevention  
National Center for Injury Prevention & Control  
4770 Buford Hwy N.E., MS K 63  
Atlanta, GA 30341-3724  
(770) 488-4649  
jas2@cdc.gov
APPENDIX 1

Mike Stifel BS, RTC
Jewish Family Services
330 N. Fairfax Ave.
Los Angeles, CA 90036
(323) 933-0791
mstifel@jfsla.org

Janet Tedesco, MA
Grants Specialist
California Department of Aging
1300 National Dr.
Sacramento, CA 95834
(916) 928-4641
jtedesco@aging.ca.gov

Lynette Tidwell, RN
Vice President, Community Relations
Eskaton, The Senior Connection
5105 Manzanita Avenue
Carmichael, CA 95608
(888) 334-3490
lynettet@eskaton.com

Carlos E. Torres, MA
System Change Advocate
Independent Living Resources
5016 Apache Ct
Antioch, CA 94531
(925) 518-4259
cctorresb@yahoo.com

Nicole Torres, BSN
Associate Manager of Nursing Services
On Lok Lifeways
225 30th St.
First Floor
San Francisco, CA 94131
(415) 286-0916
nicole@onlok.org

Fernando Torres-Gil, PhD
Acting Dean
UCLA School of Public Affairs
BOX 951656, 3250
Public Affairs Bldg.
Los Angeles, CA 90095
(310) 206-1994
torres@spa.ucla.edu

Roger Trent, PhD
Chief
California Department of Health Services
Epidemiology and Prevention for Injury Control (EPIC)
MS 7214 P.O. Box 997377
Sacramento, CA 95814
(916) 522-9858
roger.trent@cdph.ca.gov

Peggy Trueblood, PhD, PT
Professor/Chair
Department of Physical Therapy
California State University, Fresno
5072 E. Copper
Clovis, CA 93611
(559) 297-8769
peggyt@csufresno.edu

Joan Twiss, MA
Executive Director
Center for Civic Partnership
1851 Heritage Ln.
Ste. 250
Sacramento, CA 95815
(916) 646-8680
jtwiss@civicpartnerships.org

Erin Ulibarri, MPH
Health Educator
County of Orange
Office of Aging
1300 S. Grand Ave.
Bldg. B
Santa Ana, CA 92705
(714) 648-0116
erin.ulibarri@hcs.ocgov.com

Miguel A. Vásquez
Program Coordinator
Fall Prevention Center of Excellence
USC Leonard Davis School of Gerontology
3715 McClintock Ave #228
Los Angeles, CA 90089
(213) 740-1364
mvasquez@usc.edu

Rebecca Vivrette, MA
VA Greater Los Angeles Healthcare System
16111 Plumer St., 11E
North Hills, CA 91343
(818) 891-7711
rebecca.vevrette@va.gov

Steven P. Wallace, PhD
Associate Director, Center for Health Policy Research
UCLA School of Public Health
Center for Health Policy Research
10911 Weyburn, #300
Los Angeles, CA 90024
(310) 794-0910
swallace@ucla.edu

Bill Watanabe, MSW
Executive Director
Little Tokyo Service Center
231 E. 3rd St.
# G 104
Los Angeles, CA 90013
(213) 473-1607
bw@ltsc.org

Omay Water-Schmeder, BA, MPT
Kaiser Permanente
5489 Kay Drive
Windsor, CA 95492
(707) 843-9524
omay.water-schmeder@kp.org

Monika White, PhD
President and CEO
WISE & Center for Healthy Aging
1527 4th St.
2nd Floor
Santa Monica, CA 90401
(310) 394-9871
mwhite@wiseandhealthyaging.org
Jennifer Wieckowski, MS  
*Project Manager*  
Partners In Care Foundation  
732 Mott St.  
Ste. 150  
San Fernando, CA 91340  
(818) 837-3775  
jwieckowski@picf.org

Cheryl L. Wieland, RN, BSN, CCM  
*Case Manager/Health Wellness Coordinator*  
South County Senior Services  
FSM Senior Center  
23721 Moulton Parkway  
Laguna Hills, CA 92653  
(949) 380-0155  
cwieland@fmscc.ooccmail.com

Brad Williams, PharmD  
*Professor of Clinical Pharmacy*  
USC School of Pharmacy  
1985 Lonal Avenue  
Los Angeles, CA 90033  
(323) 442-1559  
bradwill@usc.edu

Will Wu, PhD  
*California State University, Fullerton*  
800 North State College Blvd.  
Fullerton, CA 92834  
(714) 278-2963  
wwu@exchange.fullerton.edu

Jessie Yan, PhD Candidate  
*Research Assistant*  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
1606 W. Larch St. A  
Alhambra, CA 91801  
(626) 943-1645  
tingjiay@usc.edu

Rachel Zerbo, MPH  
*Project Manager*  
California Department of Public Health Epidemiology and Prevention for Injury Control (EPIC)  
1616 Capitol Ave. Suite 74.660  
MS 7204, PO Box 997377  
Sacramento, CA 95899  
(916) 552-9854  
rachel.zerbo@cdph.ca.gov

* Summit Coordinator*
Appendix 2

Guest Speakers

Barbara Alberson, MPH  
*Chief, State and Local Injury Control*
California Department of Public Health

Ileana Arias, PhD  
*Director*
National Center for Injury Prevention and Control Center for Disease Prevention

Bonita Lynn Beattie, MPT, MHA, PT  
*Vice President*
National Council on Aging
Injury Prevention Center for Healthy Aging

Lynn Daucher  
*Director*
California Department of Aging

Linda Hale, RN  
*Chief, Family Health Section*
Wisconsin Department of Health and Family Services

B. Josea Kramer, PhD  
*GRECC Associate Director for Education/Evaluation*
VA Greater Los Angeles Healthcare System

Mary Ellen Kullman, MPH  
*Vice President*
Archstone Foundation

Alan Lowenthal, PhD  
*Senator*
California State Senate, 27th District

Kali Peterson MSG, MPA  
*Project Manager*
VA Greater Los Angeles Healthcare System Geriatric Research, Education & Clinical Center

Jon Pynoos, PhD  
*Professor/Co-Director FPCE*
USC Leonard Davis School of Gerontology

Terri Restelli-Deits, MSW  
*Planner*
Area Agency on Aging Serving Napa and Sonoma
Napa Valley Fall Prevention Coalition

Debra J. Rose, PhD  
*Professor/Co-Director FPCE*
*Co-Director Center for Successful Aging*
California State University, Fullerton

Laurence Z. Rubenstein MD, MPH, FACP  
*Co-Director FPCE*
*Senior Physician*
Geriatric Research Education and Clinical Center (GRECC), VA Greater Los Angeles Healthcare System,
*Professor of Medicine*
UCLA School of Medicine

Vicky Scott PhD, RN  
*Senior Advisor on Falls and Injury Prevention*
Ministry of Health, Population & Wellness
British Columbia Injury Research & Prevention Unit

W. June Simmons, MSW  
*President & CEO*
Partners in Care Foundation

Fernando Torres-Gil, PhD  
*Acting Dean*
UCLA School of Public Affairs

Roger Trent, PhD  
*Chief*
California Department of Health Services
Epidemiology and Prevention for Injury Control (EPIC)

Steven P. Wallace, PhD  
*Associate Director, Center for Health Policy Research*
UCLA School of Public Health
Center for Health Policy Research

Rachel Zerbo, MPH  
*Project Manager*
California Department of Public Health
Epidemiology and Prevention for Injury Control (EPIC)
The Steering Committee

Barbara Alberson, MPH
*Chief, State and Local Injury Control*
California Department of Public Health
611 N. 7th Street, Suite C
Sacramento, CA 95814-0208
(916) 323-3486
balberson@dhs.ca.gov

Bonita Lynn Beattie, MPT, MHA, PT
*Vice President, Injury Prevention*
National Council on Aging
Center for Healthy Aging
1901 L St. NW, 4th floor
Washington, DC 20036
(202) 479-1200
bonita.beattie@ncoa.org

Brian M. Carroll
*Executive Director*
Adult and Aging Network/Santa Barbara County
1410 South Broadway
Suite L
Santa Maria, CA 93454
(805) 714-3499
b.carroll@sbcsocialserv.org

Jodi Cohn, DrPH
*Director - Geriatric Practice Innovation Research*
SCAN Health Plan
P.O. Box 22616
Long Beach, CA 90801-5516
(562) 989-4442
jcohn@scanhealthplan.com

Lora Connolly, MSG
*Chief Deputy Director*
California Department of Aging
1300 National Drive, Suite 200
Sacramento, CA 95834-1992
(916) 419-7500

Jolene Fassbinder, MSG, MACM
*Executive Director*
California Council on Gerontology and Geriatrics
10945 Le Conte Ave., Suite 2339
Los Angeles, CA 90095-1687
(310) 312-0531
jfassbinder@mednet.ucla.edu

Sandra K. Fitzpatrick, MA
*Executive Director*
California Commission on Aging
1300 National Dr.
Suite 173
Sacramento, CA 95834
(916) 419-7591
sfitzpatrick@ccoa.ca.gov

Janet Frank, DPH
*Assistant Director for Academic Programs*
UCLA Multicampus Program in Geriatric Medicine & Gerontology, The David Geffen School of Medicine at UCLA
10945 Le Conte Avenue, Suite 2339
Los Angeles, CA 90095-1687
(310) 312-0531
jcfrank@mednet.ucla.edu

Barbara Hanna, RN, PHN, CCM
*President*
Home Health Care Management, Inc.
1398 Ridgewood Dr.
Chico, CA 95973
(530) 899-3873
hhcmchpplus@aol.com

B. Josea Kramer, PhD
*GRECC Associate Director for Education/Evaluation*
VA Greater Los Angeles Healthcare System
16111 Plummer St. (11E)
Sepulveda, CA 91343
(818) 895-9311
josea.kramer@med.va.gov
Mary Ellen Kullman, MPH  
*Vice President*  
Archstone Foundation  
401 East Ocean Blvd., Suite 1000  
Long Beach, CA 90802-4933  
(562) 590-8655  
mekullman@archstone.org

Jon Pynoos, PhD  
*Professor/Co-Director FPCE*  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Los Angeles, CA 90089-0191  
(213) 740-1364  
jpynoos@aol.com

Debra J. Rose, PhD  
*Professor/Co-Director FPCE*  
*Co-Director Center for Successful Aging*  
California State University, Fullerton  
800 N. State College Blvd., RGC-8  
Fullerton, CA 92884  
(714) 278-5846  
drose@fullerton.edu

W. June Simmons, MSW  
*President & CEO*  
Partners in Care Foundation  
732 Mott St.  
San Fernando, CA 91340  
(818) 526-1780  
jsimmons@picf.org

Jennifer Wieckowski, MSG  
*Project Manager*  
Partners In Care Foundation  
732 Mott St.  
Ste. 150  
San Fernando, CA 91340  
(818) 837-3775  
jwieckowski@picf.org

Rachel Zerbo, MPH  
*Project Manager*  
California Department of Public Health  
Epidemiology and Prevention for Injury Control (EPIC)  
1616 Capitol Ave. Suite 74.660  
MS 7214, PO Box 997377  
Sacramento, CA 95899  
(916) 552-9854  
rachel.zerbo@cdph.ca.gov
The Advisory Committee

Cynthia Banks  
**Director**  
Los Angeles County Community & Senior Services  
3175 West Sixth Street, 4th Floor  
Los Angeles 90020  
(213) 637-0798  
(213) 380-8275

Anne Burns-Johnson  
**President and CEO**  
Aging Services of California  
1315 I Street, Suite 100  
Sacramento, CA  95814-2912  
(916) 392-5111  
(916) 428-4250

Colleen M. Campbell  
**Senior Injury Prevention Project Coordinator**  
Alameda County Social Services  
6955 Foothill Blvd  
Oakland, CA 94605  
(510) 577-3535  
ccampbel2@acgov.org

Steve Carpenter  
**Executive Director**  
Rebuilding Together  
21691 Jornada  
Mission Viejo, CA 92692  
(949) 400-8066  
scarperter@rebuildingtogetheroc.org

Steven C. Castle, MD  
**Clinical Director**  
David Geffen School of Medicine at UCLA  
Veterans Affairs GRECC  
11301 Wilshire Blvd. - GRECC (11G)  
Los Angeles, CA 90073  
(310) 268-4671  
steven.castle@va.gov

Ellen Corman, MRA  
**Injury Prevention and Special Projects Coordinator**  
Stanford University Medical Center  
300 Pasteur Dr.  
MC 5105  
Stanford, CA 94305  
(650) 724-9369  
eorman@stanfordmed.org

Patti Y. Horsley, MPH  
**Program Coordinator**  
California Department of Public Health  
PO Box 997377  
MS 7214  
Sacramento, CA 95899-7377  
(916) 552-9832  
phorsley@cdph.ca.gov

Jorge Lambrinos, MS  
**Director**  
USC Edward R. Roybal Institute for Applied Gerontology  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Los Angeles, CA 90089  
(213) 740-1887  
jlambrin@usc.edu

Phoebe S. Liebig, PhD  
**Research Associate**  
Fall Prevention Center of Excellence  
USC Leonard Davis School of Gerontology  
3715 McClintock Ave.  
Los Angeles, CA 90089  
(213) 740-1364  
liebig@usc.edu

Jennifer Lillibridge, PhD  
**Associate Professor of Nursing**  
California State University, Chico  
1121 Nelson St  
Chico, CA 95928  
(530) 342-1265  
jlillibridge@csuchico.edu

Susan Mack, OTR/L, CAPS  
**Director**  
Homes for Easy Living Universal Design Consultants  
25060 Hancock Ave  
Suite 103-186  
Murrieta, CA 92562  
(760) 409-7565  
smack@homesforeasyliving.com

Emeline Moya, MPA  
**Recreation Supervisor**  
City of Alamitos  
8288 Galaxy Way  
Buena Park, CA 90620  
(714) 307-6120  
emelinemoya@yahoo.com

Lydia Missaelides  
**Executive Director**  
California Association for Adult Day Services  
921 11th Street, Suite 1100  
Sacramento, CA 95814  
(916) 552-7400  
caads@caads.org

Cheryl Phillips, MD  
**Chief Medical Officer**  
On Lok, Inc.  
1333 Bush St.  
San Francisco, CA 94109  
(415) 292-8701  
cphillips@onlok.org
Michael L. Radetsky, MA, MPH  
*Senior Health Educator*  
San Francisco Department of Public Health  
30 Van Ness Ave., Suite 2300  
San Francisco, CA 94102  
(415) 581-2418  
michael.l.radetsky@sfdph.org

Peggy Trueblood, PhD, PT  
*Professor/Chair*  
*Department of Physical Therapy*  
California State University, Fresno  
5072 E. Copper  
Clovis, CA 93611  
(559) 297-8769  
peggyt@csufresno.edu

Allison Ruff, MSG  
*Principal Consultant*  
California State Assembly  
Committee on Aging & Long Term Care  
1020 N. Street, Suite 360  
PO Box 942849  
Sacramento, CA 95814  
(916) 319-3990  
allison.ruff@asm.ca.gov

Steven P. Wallace, PhD  
*Associate Director*  
Center for Health Policy Research  
UCLA School of Public Health  
Center for Health Policy Research  
10911 Weyburn, #300  
Los Angeles, CA 90024  
(310) 794-0910  
swallace@ucla.edu

Judy Stevens, PhD  
*Epidemiologist, Division of Unintentional Injury Prevention*  
National Center for Injury Prevention & Control  
4770 Buford Hwy N.E., MS K 63  
Atlanta, GA 30341-3724  
(770) 488-4649  
jas2@cdc.gov

Laura Trejo, MSG  
*General Manager*  
Department of Aging  
3580 Wilshire Blvd., Suite 300  
Los Angeles, CA 90010  
(213) 252-4035  
Laura.trejo@lacity.org

Roger Trent, PhD  
*Chief*  
California Department of Health Services  
Epidemiology and Prevention for Injury Control (EPIC)  
MS 7214 P.O. Box 997377  
Sacramento, CA 95814  
(916) 522-9858  
roger.trent@cdph.ca.gov

APPENDIX 4
Appendix 5

Summit Agenda

Wednesday, December 5

11:00 AM  Welcome and Introduction
Jon Pynoos, PhD
Mary Ellen Kullman, MPH
California Senator Alan Lowenthal, PhD

11:15 AM  State of the Art: Promising Program Models
Moderated by Mary Ellen Kullman, MPH
Laurence Z. Rubenstein, MD, MPH, FACP
W. June Simmons, LCSW, MSW
Debra J. Rose, PhD

12:15 – 1:45 PM  Lunch and Presentation
National Perspective on Fall Prevention
Ileana Arias, PhD

2:00 PM  State of the Art: Promising Coalitions and Partnerships for Community Change
Moderated by B. Josea Kramer, PhD
Rachel Zerbo, MPH
StopFalls Network California
Barbara Alberson, MPH
Safe California Plan
Jon Pynoos, PhD
Safe Housing and Communities
Terri Restelli-Deits, MSW
Napa Valley Fall Prevention Coalition

3:00 PM  Introduction to Interactive Workgroup Session I
Kali Peterson, MSG, MPA
Roger Trent, PhD
Steven P. Wallace, PhD

3:30 PM  Welcome to the Fall Prevention Summit
by Alan Lowenthal, PhD
4:00 PM  Interactive Workgroup Session I  
What’s Missing from Current Recommendations?

6:00 – 7:30 PM  Poster Reception

Thursday, December 6

7:00 – 7:45  Balance Before Breakfast:  
Fall Prevention Exercises & Assessment Protocols  
Debra J. Rose, PhD  
Laurence Z. Rubenstein, MD, MPH, FACP

8:45 AM  Progress and Programs Outside California  
_Moderated by Bonita (Lynn) Beattie, MPT, MHA, PT_  
Linda Hale, RN, BSN, EMT (Wisconsin)  
Vicky Scott, PhD, RN (Canada)

10:30 AM  Reports from Interactive Workgroup Session I  
_Moderated by Barbara Alberson, MPH_

11:30 AM  Introduction to Interactive Workgroup Session II  
Kali Peterson, MSG, MPA

12:00 – 1:15 PM  Lunch and Presentation  
Progress Means Partnerships  
The Honorable Lynn Daucher

1:30 PM  Interactive Workgroup Session II  
Taking Action on Recommendations

3:15 PM  Summary and Closing Session  
_Moderated by Mary Ellen Kullman, MPH_  
Jon Pynoos, PhD  
Debra J. Rose, PhD  
Fernando-Torres-Gil, PhD
Appendix 6

Policy Recommendations of the 2007 Fall Prevention Summit: 
Progress, Challenges & Next Steps

Community Programs – A

1. Strongly recommend that local Departments of Public Health and AAAs assign a staff member as the point person for senior injury prevention and collaborate in fall prevention activities, services, and advocacy efforts.

2. Encourage local public health and aging agencies in partnership with other community organizations to develop an inventory of local fall prevention programs and resources as a foundation for information and referral networks.

3. Recommend CDA and AAAs to incorporate fall prevention in their upcoming master state and local area plans.

Community Programs – B

1. Encourage California’s 33 Area Agencies on Aging (AAAs) to a) adopt fall prevention as part of their mission, b) incorporate fall prevention in their upcoming needs assessments and area plans, and c) encourage and support Title III contractors to include evidence-based fall prevention programs as part of their activities.

2. Encourage educational institutions such as community college districts and professional and paraprofessional caregiver training programs to incorporate into their curriculum evidence-based fall prevention programs for older adults.

3. Ensure that local Departments of Public Health take a leadership role by appointing a staff member as the point person for senior injury prevention and coordinating county-level fall prevention activities, services, and advocacy efforts.

Education & Training

1. Educate older consumers and their family caregivers about their crucial role in fall prevention and management through the statewide network of Caregiver Resource Centers and Public Authorities.

2. Empower state-level advocacy and professional organizations (e.g., AARP, Older Women’s League, State Independent Living Council, Aging Services of California) to educate their members about their stake in fall risk, prevention, and management.

3. Train physicians, NPs, nurses, and physician assistants on evidence-based practice guidelines (e.g., American Geriatrics Society, ACOVE) for fall risk assessment and management to ensure their incorporation into all primary care settings serving older adults.
Health Care

1. Encourage health care organizations to include standardized fall history screening questions in initial and periodic (i.e., change in condition or annual) follow-up visits to facilitate and initiate in-depth assessment, risk management and interventions.

2. Improve California’s ability to gather accurate information on falls from multiple data sets by developing a standard definition and set of reporting methods for falls from all relevant sources at state and local levels.

3. Encourage professional associations that interface with seniors to establish fall prevention education and intervention programs for their members.

Healthy Lifestyles & Recreation

1. Develop, publicize and maintain a list/directory of well-rounded local community-based exercise programs and classes for older adults (from healthy to frail) that incorporate exercises to improve muscle strength and endurance, balance, mobility, and flexibility for fall prevention.

2. Develop fall-prevention media outreach campaign (e.g., radio, television, internet, public service announcements, and other programming) promoting healthy lifestyle issues (e.g., physical activity, nutrition, and vision issues) appropriate for ethnically, educationally, and geographically diverse older adults.

3. Expand the number of Active Living By Design™ community partnerships in California that promote healthy lifestyles and increase physical activity levels of older adults by addressing community built-environment issues (e.g., sidewalks, trails, parks).

Safe Housing & Communities

1. Include fall prevention guidelines in state and local planning documents related to overall development (e.g., city general plans), aging services, housing, parks/recreation, transportation, circulation, street/sidewalk repair, and emergency/disaster.

2. Encourage state and local jurisdictions to use planning tools, such as “Condition of Approval”, to provide incentives for local developers to incorporate the principles of universal design and home modifications.

3. Develop new and more reliable sources of funding for home assessments by appropriately trained professionals (e.g., occupational and physical therapists) and for home modifications.
Cross Cutting Recommendations

1. Institute a statewide “Fall Prevention Awareness Week”, with a governor’s proclamation, press events and public awareness activities.

2. Establish a permanent statewide fall prevention task force that include the Departments of Aging, Public Health, Health Care Services, Housing and Transportation, to coordinate state-level programs and activities.

3. Convene a statewide fall prevention summit every 3 years.

4. Develop and widely disseminate culturally appropriate fall prevention information to all community organizations serving older adults (e.g., hospitals, senior and community centers, libraries, recreation and parks, bookstores, religious entities).
Appendix 7

Resource Directory

50+ Housing Council
23726 Biratcher Drive
Lake Forest, CA 92630
Tel: (949) 465-2442
www.50PlusHC.com

AA - Alzheimer’s Association
5900 Wilshire Blvd # 1100
Los Angeles, CA 90036
Tel: (323) 938-3379
http://www.alz.org

AAFP - American Academy of Family Physicians
P.O. Box 11210
Shawnee Mission, KS 66207-1210
Tel: (913) 906-6000 or (800) 274-2237
Fax: (913) 906-6075
http://www.aafp.org

AARP - State Office
1415 L Street, Suite 960
Sacramento, CA 95814
Tel: (888) 687-2277
http://www.aarp.org/states/ca/

ACCMCE – Accreditation Council for Continuing Medical Education
515 N. State Street
Suite 2150
Chicago, IL 60610
Tel: (312) 755-7401
Fax: (312) 755-7496
http://www.accme.org

ACOVE – Assessing Care of Vulnerable Elders
RAND Health
1776 Main Street
Santa Monica, CA 90407
Tel: (310) 393-0411

AGS - American Geriatrics Society
350 Fifth Avenue, Suite 801
New York, NY 10118
Tel: (212) 308-1414
Fax: (212) 832-8646
http://www.americangeriatrics.org

AIA - The American Institute of Architects
1735 New York Ave., NW
Washington, DC 20006-5292
Tel: (202) 626-7300 or (800) 242-3837
Fax: (202) 626-7547
To find your local chapter, please visit http://www.aia.org

AIA Los Angeles
3780 Wilshire Blvd. Suite 800
Los Angeles, CA 90010
Tel: (213) 639-0777
Fax: (213) 639-0767
Web: www.aialosangeles.org

AOTA - The American Occupational Therapy Association, Inc.
(Also see “OTAC” below)
4720 Montgomery Lane
PO Box 31220
Bethesda, MD 20824-1220
Tel: (301) 652-2682
Fax: (301) 652-7711
To find your local chapter, please visit http://www.aota.org

APA - American Planning Association
1776 Massachusetts Ave., NW
Suite 400
Washington, DC 20036-1904
Tel: (202) 872-0611
Fax: (202) 872-0643
http://www.planning.org
To find your local chapter, please visit http://www.calapa.org

APS - Adult Protective Services
3333 Wilshire Blvd., Suite 400
Los Angeles, CA 90010
Tel: (213) 351-5401
Tel: (877) 477-3646 (LA County Only)
Fax: (213) 738-6485
http://dpss.lacounty.gov/new_portal/dpss_elder_services.cfm

APTA - American Physical Therapy Association
1111 North Fairfax Street
Alexandria, VA 22314-1488
Tel: (703) 684-2782
Fax: (703) 684-7343
Find your chapter at: http://www.apta.org

ASA – American Society on Aging
833 Market Street
Suite 511
San Francisco, CA 94103
Tel: (415) 974-9600 or (800) 537-9728
Fax: (415) 974-0300

ASC - Aging Services of California
1315 I Street, Suite 100
Sacramento, CA 95814
Tel: (916) 392-5111
http://www.aging.org

BRN - Board of Registered Nursing
1625 North Market Boulevard, Suite N217
Sacramento, CA 95834
Tel: (916) 322-3350
Tel: (800) 838-6828
http://www.rn.ca.gov
C4A – The California Association of Area Agencies on Aging
980 Ninth Street, Suite 2200
Sacramento, CA 95814
Tel: (916) 443-2800
Fax: (916) 554-0111
http://www.c4a.info

CAADS - California Association for Adult Day Services
921 11th Street Suite 1100
Sacramento, CA 95814
Tel: (916) 552-7400
Fax: (916) 552-7404
http://www.caads.org/index.html

CALTCM - California Association of Long-Term Care Medicine
10945 Le Conte Ave., #2339
Los Angeles, CA 90095
Tel: (800) 488-2196
Fax: (310) 312-0546
http://www.caltcm.org

CAN - California Association of Nonprofits (CAN)
520 South Grand Ave.
Suite 695
Los Angeles, CA 90071
Tel: (213) 347-2070
Fax (213) 347-2080
http://www.CANonprofits.org

CAPA - California Association of Public Authorities
4730 Woodman Ave., Suite 405
Sherman Oaks, CA 91423
Tel: (877) 565-4477
Fax: (818) 206-8000
http://www.pascla.org
(Los Angeles County)
http://www.capaihss.org/
(Statewide for IHSS)

CCAPA – California Chapter of the American Planning Association
c/o Stefan George Associates
1333 36th Street
Sacramento CA 95816-5401
Tel: (916) 736-2434
Fax: (916) 456-1283

CCB - California Council of the Blind
1510 J. Street. Suite 125
Sacramento, CA 95814
Tel: (916) 441-2100
In CA: (800) 221-6359
Fax: (916) 441-2188

CCLDEH - California Conference of Local Directors of Health Education
c/o Public Health Foundation
13200 Crossroads Parkway North,
Suite 135
City of Industry, CA 91715-0786
Tel: (562) 699-7320
http://www.ccldeh.org

CCLHO - California Conference of Local Health Officers
P.O. Box 997377, MS 7003
Sacramento, CA 95899
Tel: (916) 440-7594
Fax: (916) 440-7595
http://www.dhs.ca.gov/cclho

CCGG – California Council on Gerontology and Geriatrics
10945 Le Conte Ave. #2339
Los Angeles, CA 90095
Tel: (310) 312-0531
Fax: (310) 312-0546
http://www.ccgg.org

CCoA – California Commission on Aging
1300 National Drive Suite 173
Sacramento, CA 95834
Tel: (916) 419-7591
Fax: (916) 419-7596

CDA - California Department of Aging
1300 National Drive, Suite 200
Sacramento, CA 95834
Tel: (916) 419-7500
Tel: (800) 735-2929
Fax: (916) 928-2268
http://www.aging.ca.gov/default.asp

CDBG – Community Development Block Grant Programs
US Department of Housing and Urban Development (HUD)
451 7th Street S.W.
Washington DC 20410
Tel: (202) 708-1112
http://www.hud.gov

CDC - Centers for Disease Control and Prevention
1600 Clifton Road, N.E.
Atlanta, GA 30333
Tel: (404) 639-3311
http://www.cdc.gov

CDPH - California Department of Public Health
1616 Capitol Avenue
Sacramento, CA 95899-7377
Tel: (916) 558-1784
http://www.cdph.ca.gov/Pages/default.aspx

CDPR - California Department of Parks and Recreation
1416 9th Street
Sacramento, CA 95814
Tel: (800) 777-0369
http://www.parks.ca.gov

CERT – Community Emergency Response Team
1275 N. Eastern Ave.
Los Angeles, CA 90063
Tel: (323) 980-2260
http://www.eprepared.org

CCAPA – California Chapter of the American Planning Association
c/o Stefan George Associates
1333 36th Street
Sacramento CA 95816-5401
Tel: (916) 736-2434
Fax: (916) 456-1283

CCLDEH - California Conference of Local Directors of Health Education
c/o Public Health Foundation
13200 Crossroads Parkway North,
Suite 135
City of Industry, CA 91715-0786
Tel: (562) 699-7320
http://www.ccldeh.org

CCGG – California Council on Gerontology and Geriatrics
10945 Le Conte Ave. #2339
Los Angeles, CA 90095
Tel: (310) 312-0531
Fax: (310) 312-0546
http://www.ccgg.org

CCoA – California Commission on Aging
1300 National Drive Suite 173
Sacramento, CA 95834
Tel: (916) 419-7591
Fax: (916) 419-7596

CDA - California Department of Aging
1300 National Drive, Suite 200
Sacramento, CA 95834
Tel: (916) 419-7500
Tel: (800) 735-2929
Fax: (916) 928-2268
http://www.aging.ca.gov/default.asp

CDBG – Community Development Block Grant Programs
US Department of Housing and Urban Development (HUD)
451 7th Street S.W.
Washington DC 20410
Tel: (202) 708-1112
http://www.hud.gov

CDC - Centers for Disease Control and Prevention
1600 Clifton Road, N.E.
Atlanta, GA 30333
Tel: (404) 639-3311
http://www.cdc.gov

CDPH - California Department of Public Health
1616 Capitol Avenue
Sacramento, CA 95899-7377
Tel: (916) 558-1784
http://www.cdph.ca.gov/Pages/default.aspx

CDPR - California Department of Parks and Recreation
1416 9th Street
Sacramento, CA 95814
Tel: (800) 777-0369
http://www.parks.ca.gov

CERT – Community Emergency Response Team
1275 N. Eastern Ave.
Los Angeles, CA 90063
Tel: (323) 980-2260
http://www.eprepared.org
ICAA – International Council on Active Aging  
3307 Trutch Street  
Vancouver, BC V6L-2T3  
Tel: (866) 335-9777  
http://www.icaa.cc/Index.asp

MSSP – Multipurpose Senior Services Program  
California Department of Aging  
1300 National Drive Suite 200  
Sacramento, CA 95834-1992  
Tel: (916) 419-7500  
Fax: (916) 928-2268

N4A – National Association of Area Agencies on Aging  
1730 Rhode Island Ave., NW, Suite 1200  
Washington, DC 20036  
Tel: (202) 872-0888  
Fax: (202) 872-0057  
www.n4a.org

OAA – Older Americans Act  
Administration on Aging (AoA)  
Washington, DC 20201  
Tel: (202) 619-0724  
Office of the Assistant Secretary for Aging:  
Tel: (202) 401-4634  
Fax: (202) 357-3555  
AoA Regional Office:  
90 - 7th Street, T-8100  
San Francisco, CA 94103  
Phone: (415) 437-8780  
Fax: (415) 437-8782

OPR – The Governor’s Office of Planning and Research  
PO Box 3044  
Sacramento, CA 95812-3044  
Tel: (916) 322-2318  
http://www.opr.ca.gov

OTAC – Occupational Therapy Association of California  
PO Box 276567  
Sacramento, CA 95827-6567  
Tel: (916) 567-7000  
Fax: (916) 567-7001  
Find your Region at: http://www.otaconline.org

PACE – Programs of All-inclusive Care for the Elderly  
On Lok Administrative Offices  
1333 Bush Street  
San Francisco, CA 94109  
Tel: (415) 292-8888  
Fax: (415) 292-8745  
http://www.onlok.org

Rebuilding Together  
National Office:  
2233 Wisconsin Ave., NW, Suite 308  
Washington, DC 20007  
Tel: (202) 965-2824  
Find an affiliate program in your area:  
www.rebuildingtogether.org

StopFalls Network  
For more information on the StopFalls Network California, please contact Rachel Zerbo at (916) 552-9854 or rzerbo@dhs.ca.gov

TACC – Triple-A Council of California  
1300 National Drive, Suite 173  
Sacramento, CA 95834  
Tel: (916) 419-7591  
Fax: (916) 419-7596

TMPF – Translational Medicine Partnership Forum  
4041 Forest Park Avenue  
St. Louis, MO 63108  
Tel: (314) 615-6900  
www.transmedpartnership.org

VA – United States Department of Veterans Affairs  
Find a local veterans health administration office at: http://www1.va.gov/directory/guide/state.asp?State=CA&dnum=ALL

New America Media  
Northern California  
275 9th Street  
San Francisco, CA 94103  
Tel: (415) 503-4170  
Fax: (415) 503-0970  
Southern California:  
One California Plaza  
300 S. Grand Ave.  
Suite 3950  
Los Angeles, CA 90071  
Tel: (213) 437-4412  
Fax: (213) 978-0394

StopFalls Network  
For more information on the StopFalls Network California, please contact Rachel Zerbo at (916) 552-9854 or rzerbo@dhs.ca.gov

TACC – Triple-A Council of California  
1300 National Drive, Suite 173  
Sacramento, CA 95834  
Tel: (916) 419-7591  
Fax: (916) 419-7596

TMPF – Translational Medicine Partnership Forum  
4041 Forest Park Avenue  
St. Louis, MO 63108  
Tel: (314) 615-6900  
www.transmedpartnership.org

VA – United States Department of Veterans Affairs  
Find a local veterans health administration office at: http://www1.va.gov/directory/guide/state.asp?State=CA&dnum=ALL

PACE – Programs of All-inclusive Care for the Elderly  
On Lok Administrative Offices  
1333 Bush Street  
San Francisco, CA 94109  
Tel: (415) 292-8888  
Fax: (415) 292-8745  
http://www.onlok.org

Sponsored by Archstone Foundation & The California Wellness Foundation | 55
Appendix 8

**Poster Presentations**

Posters were presented by:

**Steve Carpenter**  
*Executive Director*  
Rebuilding Together

**Brian Carroll**  
*Executive Director*  
Adult and Aging Network/Santa Barbara County

**Steven Castle**  
*Clinical Director*  
David Geffen School of Medicine at UCLA

**Jodi Cohn**  
*Director*  
Geriatric Practice Innovation Research  
SCAN Health Plan

**Mary Ellen Kullman**  
*Vice President*  
Archstone Foundation

**Susan Mack**  
*Director*  
Homes for Easy Living Universal Design Consultants

**Victoria Muravlenko**  
UCLA Multi-Campus Program in Gerontology and Geriatrics

**Cynthia Schuetz**  
*Coordinator*  
Fall Prevention Coalition of Nevada County

**Kristen Smith**  
*Health Promotions Coordinator*  
Aging & Independence Services San Diego County

**Erin Ulibarri**  
*Health Educator*  
County of Orange Office of Aging

**Jennifer Wieckowski**  
*Project Manager*  
Partners in Care Foundation

**Rachel Zerbo**  
*Project Manager*  
California Department of Public Health  
Epidemiology and Prevention for Injury Control (EPIC)
Acknowledgements

This Summit Proceedings document is based on the presentations by speakers, and the input of participants in the six individual work groups. The 18 final policy recommendations and four cross-cutting recommendations they generated - along with strategies and action steps for implementation – are intended to guide future efforts and further strengthen California’s fall prevention infrastructure. We are hopeful that attendees of the 2007 Summit and others who read this document will embrace this report and other Summit documents as the base for further dialogue about fall prevention. By sharing their ideas and knowledge, participants demonstrated their commitment to reducing the risk of falling for older Californians. We wish to thank them for their enthusiasm, dedication and interest in sharing the results of the 2007 California Fall Prevention Summit. The Summit will have achieved its goal when its recommended strategies and supporting action steps for fall prevention benefit older Californians at risk of falling.

We also thank the Steering and Advisory Committees whose members generously offered their time and expertise and actively participated in the challenging process of developing the policy recommendations for dissemination at local, state, and national levels. Thank you also to the researchers and academicians including Judy Stevens, PhD, In Hee Choi, PhD, Josea Kramer, PhD, Christy Nishita, PhD, Jon Pynoos, PhD, Debra Rose, PhD, Larry Rubenstein, MD, Roger Trent, PhD, and Steven Wallace, PhD, whose continued support and research in fall prevention work set the stage for the 2007 Fall Prevention Summit and informed the individual work groups’ agenda.

Guest speakers at the Summit, among them Ileana Arias,,PhD, Lynn Beattie, MPT, MHA, PT, Lynn Daucher, Linda Hale, RN, Alan Lowenthal, PhD, Vicky Scott, PhD, June Simmons, MSW, Fernando Torres-Gil, PhD, Roger Trent, PhD, and Steven Wallace, PhD deserve our sincere gratitude for the time they invested in the Summit and the knowledge they shared.

We truly appreciate all participants’, facilitators’, and recorders’ able input during the work group sessions and their sensitivity to the issue of fall prevention. Special thanks go to Gretchen Alkema, PhD, Brian Carroll, Jodi Cohn, PhD, Jolene Fassbinder, MSG, Barbara Hanna, RN, Marc Herrera, MSG, Josea Kramer, PhD, Phoebe Liebig, PhD, W. June Simmons, MSW, and Monika White, PhD, for their special facilitating skills. We also wish to thank the recorders who met difficult challenges in the work groups: Emily Basner, Adrienne Bouard, Rachel Caraviello, Caroline Cicero, Carrie Greer, Tina Hummel, Diane Katz, Susan Kwan, Greg Misiaszeck and Trevor Nelson (video), Victoria Muravlenko, Anna Nguyen, Bernard Steinman, Becki Vivrette, and Miguel Vasquez. We are grateful to Gretchen Alkema, PhD, Anna Quyen Do Nguyen, OTD, OTR/L, Phoebe Liebig, PhD, and Kali Peterson, MSG. They freely offered clear thought, motivation, and inspiration during the development and implementation of work group processes and outcomes.

We express a sincere “thank you” to our partners at the California Geriatric Education Center, in particular Janet Frank, DrPH, and Rachel Price, MSG, who joined as Summit coordinators and whose expertise in event planning and design was invaluable and who helped assemble and disseminate advance information and relevant background materials for participants.

Thank you to Jeff Kim at The California Wellness Foundation and Mary Ellen Kullman and Tanisha Metoyer at the Archstone Foundation for their continued support and funding that made this Summit possible.

Added thanks go to Regina Gongoll, MSG, Program Manager at The Fall Prevention Center of Excellence, Summit coordinator, and editor of the 2007 Fall Prevention Summit Proceedings.
References


Our Mission is to provide leadership, create new knowledge, improve practices, and develop sustainable fall prevention programs.
The “2007 Fall Prevention Summit: Challenges, Progress & Next Steps” was sponsored by The California Wellness Foundation and the Archstone Foundation. We thank Jeff Kim, Program Director, The California Wellness Foundation, Joe Prevratil, JD, President & CEO, Archstone Foundation and Mary Ellen Kullman, MPH, Vice President, Archstone Foundation, for their time and enthusiastic support; their vision and efforts set the stage for a highly successful event.