

PLEASE NOTE: Legislative Information **cannot** perform research, provide legal advice, or interpret Maine law. For legal assistance, please contact a qualified attorney.

Amend the resolve by striking out everything after the title and before the summary and inserting in its place the following:

**Sec. 1 Falls Prevention Coalition. Resolved:** That the Commissioner of Health and Human Services shall appoint a statewide coalition to be known as the Falls Prevention Coalition. The coalition must include the current membership of the Southern Maine Area Agency on Aging's Project Advisory Committee for the "A Matter of Balance" project with additional participation from the long-term care ombudsman associated with the Department of Health and Human Services, Bureau of Elder and Adult Services, Maine Medical Association, Maine Hospital Association, Northern New England Association of Homes and Services for the Aging, Maine Health Care Association and others as appropriate to develop a broad-based coalition with expertise to review and serve as a vetting panel for additional falls prevention initiatives.

The Falls Prevention Coalition under the direction of the Department of Health and Human Services, Office of Elder Services shall conduct a review of the effects of falls of older adults on health care costs, the potential for reducing the number of falls of older adults and the most effective strategies for reducing falls and health care costs associated with falls. The Falls Prevention Coalition shall:

1. Consider strategies to improve the identification of older adults who have a high risk of falling;
2. Consider strategies to improve data collection and analysis to identify fall risk, health care cost data and protective factors;
3. Consider strategies to maximize the dissemination of proven, effective fall prevention interventions and identify barriers to those interventions;
4. Assess the risk and measure the incidence of falls occurring in various settings;
5. Identify evidence-based community programs designed to prevent falls among older adults;
6. Review falls prevention initiatives for community-based settings, including: the Senior Fall Prevention Screening Kit, Minnesota; Slips, Trips and Falls - Avoid Them All - Designing and Implementing a Community Based Multifactorial Falls Reduction Intervention Program, New Hampshire; Health, Education, Research Outreach for Seniors - Reducing Falls and Serious Injuries, Temple University; and the Connecticut Collaboration for Fall Prevention, Yale School of Medicine; and
7. Examine the components and key elements of the above falls prevention initiatives, consider their applicability in Maine and develop strategies for pilot testing, implementation and evaluation; and be it further

**Sec. 2 Report effects of falls on older adults in Maine. Resolved:** That the Falls Prevention Coalition shall submit a report to the Commissioner of Health and Human Services and the Joint Standing Committee on Health and Human Services, no later than November 2, 2006 that includes findings under section 1, recommendations and suggested legislation. The report must include recommendations for:

1. A statewide demonstration project assessing the utility of targeted fall risk screening and referral programs;

2. Intervention approaches, including physical activity, medication assessment and reduction of medication when possible, vision enhancement and home-modification strategies;

3. Programs that are targeted to fall victims who are at a high risk for 2nd falls and that are designed to maximize independence and quality of life for older adults, particularly those older adults with functional limitations; and

4. Programs that encourage partnerships to prevent falls among older adults and prevent or reduce injuries when falls occur.

The joint standing committee of the Legislature having jurisdiction over health and human services matters may report out legislation related to the report to the First Regular Session of the 123rd Legislature.'

## **SUMMARY**

This amendment changes the resolve by directing the Commissioner of Health and Human Services to appoint a statewide Falls Prevention Coalition. The amendment gives the responsibility for conducting several activities to the coalition under the direction of Department of Health and Human Services, Office of Elder Services. The amendment eliminates the educational activities that the bill included. The amendment directs the coalition to: review health costs associated with falls, review strategies for reducing falls, review the potential for reducing falls and associated costs and consider 7 strategies delineated in the resolve. The amendment directs the coalition to submit a report to the commissioner and the Joint Standing Committee on Health and Human Services that includes findings and recommendations along with suggestions for legislation.