

NH Falls Risk Reduction Task Force

Meeting Minutes

April 5, 2016

Present: Karen Conlon, Judy Cote, Linda Cook, Joan Barretto, Joanne Miles, Debra Samaha, Dawna Pidgeon, Anne Diefendorf, Rebecca Sky, Beth Slepian, Susan Turner, Lora Wise, Vicki Blanchard

1. Data Brief Suggestions from Data Meeting

- a. As part of block grant process in the state, the NH Falls Task Force is required to create and annual data brief. The state did not have updated ED/Hospitalizations data so we have not had an update since that. Joanne Miles did create the legislative data map. We are hoping ED/Hospitalization data will be updated to 2012 by end of the calendar year. Joanne reports not all hospitals have submitted necessary data. The hope is to have a contractor hired to pull the data. (current data 2009) At some point the report will go to CDC. It could be for Public Health Networks, legislators. The goal is to have this done for September-for Falls Conference.
- b. Chip's presentation: Joanne – will follow up with Chip Cooper re: statistics for falls and EMS calls for 65 and older adults- TEMSIS; Beth Slepian reported opioid higher-Vicki reported falls are the leading cause under trauma, opioid is medical. Joanne-also Time of Day for falls. Location of falls- home and possibly same level- Joanne gleaned from 2011 data. Deb will ask Chip most interesting thing
- c. Everyone can give feedback to Joanne as to most important part of presentations. Joanne will send an email out to presenters to see what they would like for key points in an issue brief
- d. Christine (level 1 trauma center)- ED Fall visit, recidivism rate, Best Practice Alert into medical record increased screening-important for staff to see- no specific slide- could say certain % increase with BPA.
- e. MOB/TJQMBB outcome data leading into Information re: # of programs and people in programs
- f. Anne-continue increase rate of injury for falls in inpatient setting-this year will be record high. Falls with injury that hospitals support (not adverse event report-this is severe injury)-will have data from 26 hospitals-mild to severe-will have cost data
- g. Joanne will pull out significant data from her presentation
- h. Concord VNA collaboration with Concord fire-basics of the program- Community story that could lead into Chip Cooper data

2. Discussed possibly changing data collection measures with TJQMBB. Current NH physical screens were put in place before ACL Grants: They were Timed Up & Go (TUG), 5 Times Sit to Stand Test (5xSTS) and Functional Reach Test (FRT). Additional data collected includes the Activities-specific Balance Confidence scale (ABC) and pre/post questions. With ACL Grant we combined ACL pre/post questions into one document and kept the ABC. The current ACL grant database includes the TUG but has now added the 30 second sit to stand test. Also, STEADI toolkit uses the TUG, 30 second sit to stand and 4-stage balance test (Romberg, modified tandem, tandem and single leg stance). Question-do we switch to STEADI/ACL screens and switch from current screens. All agreed, would be best benchmark against current national tests. Joanne reminded everyone, the same tests would have to be done within one person i.e. assessed under the “old” tests, should be reassessed that way.
 - a. Additional question- do we continue to do tests after the first 24 week period-to still discuss. Rebecca will ask Kathleen on ACL tech assistance call.
 - b. Joanne also noted there is no fidelity check data. Discussion- the program- evolved into Refreshers for fidelity for first 4 months we had resource for fidelity checks who is now out of state. Dawna is now an in-state resource-will need to decide what we want to do as a state. Fidelity checks after the first 4 month refreshers would be recommended.
 - c. We could also consider doing a video for training. Dawna will teach new sequence in May refresher and ongoing-TUG, 30 second sit to stand and 4 stage balance test.

3. Call with Falls Prevention Coalition at National Level-Deb reported highlights
 - a. CDC posted new grant opportunity- Research to advance primary care linkages to pharmacy in med review with regards to falls-
<http://www.grants.gov/web/grants/searchgrants.html?keywords=pharmacy%20linkages>
 - b. CDC working with vendors-Epic-Deb will send link with VT person who has been in communication with Epic about implementing. Go to
<http://www.epic.com/CareEverywhere/>
 - c. CDC will be providing updated BEERS criteria fact sheets- available in spring
 - d. NCOA launched an on-line map of programs and services on websites- state coalitions should all be listed
 - e. Video-6 steps to prevent a fall that people can embed in their website-NCOA website- Anne-nicely done- do we want to at this statewide?
 - f. VT reported in on call– Julie Desrochers- Falls Risk Screening and referrals-working to train EMS and paramedics to assess for fall risk. Embed STEADI prescreening questions into EMS database (SIREN is their DB). Piloting FallScape with 25 squads. They would like feedback on this-work with us-potentially expand program. She sent Deb what they put together for EMS- Google docs. Deb showed presentation- marketed as 1 hour presentation (but does not last 1 hour). Have template for EMS. When they go out on a call they screen and collect data whether transfer or not. Also motivational interview techniques. For more information contact Julie at Desrochers,
Julie.Desrochers@vermont.gov.

- i. Vicki will contact Julie
 - ii. ? Ask her to speak at Falls Conference or Quarterly
- g. Falls Awareness Month- Will be announcing theme soon
 - h. Health systems utilizing Epic- <http://www.epic.com/CareEverywhere/>

4. Vicki Blanchard

- a. Vicki is from the fire academy bureau of EMS and is on the fatalities review committee elderly and incapacitated adults. At the last review there was a death related to falls one gentleman used EMS due to falls x3. He died as a result of a hip fracture.
- b. The Review Committee makes recommendations and develops report that goes to the Governor. There was a recommendation for Vicki to come to Task Force to see how we can work on EMS collaboration for falls prevention
 - 1. They have an annual conference- would like to have someone to speak at that conference- third week in October. Will link with state trauma conference
- c. Concord, Derry and Lebanon Fire have done projects in the past. She would like to have a package together/program-tool kit to use.
 - i. Beth Slepian reported consent a big problem-Concord Fire-has patient sign consent immediately-send name to VNA. VNA determines homebound status.
 - 1. Rebecca-motivational interviewing important aspect- coaching
- d. MIHC- Frisbee, American Ambulance have started a program within last month. One service is doing Narcan (American). Lakes Region-working on something ? Respiratory – if not VNA eligible. Health systems need to apply-go to state to apply
 - i. Several criteria-need identified, work with VNA and many other criteria
 - ii. Hospital organization-population health
- e. Deb-what does EMS leave behind for materials? For example-information how to prevent future falls
- f. Deb-years ago Remembering When-Collaborated with NH Falls Task Force. Mary MacCaffrie is the NH contact at Fire Prevention. Susan reported Mary is presenting Friday in Portsmouth- Elderly Nutrition Conference. She will let us know when they are doing training. Deb-we have had Bureau of EMS with NH Task Force in the past-would like to have rep at meeting.
- g. Vicki reported EMS purchased trauma registry- to supplement TEMSIS data. Hospitals can report in-goal for all 26 hospitals.
- h. State Council on Aging meeting may also be interested in this. Susan will let Deb know who to contact at those meetings.

5. UNH and Provider Surveys

- a. Rebecca reports she funds to renew UNH phone survey. Deb will look up Granite State poll questions and when it was last budgeted/due to be renewed Rebecca reports they

are asking for an extension for ACL grant-would spend by December. Deb-need to be in queue for UNH- not sure of date. Was ~ \$2000 for two questions

- b. Provider survey-Lora reports she still has mechanism in place to do that. Offered incentive to get good results – Amazon card. Was a large survey-needs assessment. Deb-in the additional survey- could include awareness about STEADI. Also could ask who is doing screening? Evaluation group at Dartmouth did this. Had access to a few additional mailing lists. Survey was administered statewide. Some into VT/MA- service area. GEC will need another needs assessment. TDI paid though GEC funding. Lora-should time it with future grant writing needs. Lora will send current needs assessment to Rebecca.

6. Conference/Quarterly

- a. Annual Conference September 15th. Should we still have 9/6 meeting? All agreed we will not do quarterly but will meet to finalize things. Will keep meeting at FHC.
 - i. Confirmed speakers- Beth Slepian- DM speaker from Boston, Dawna-MS Society and D-H Pharmacy speakers confirmed; Dawna and Lora will meet to coordinate speaker information. Potential posters in queue- Judy/New London ED, Michelle Dow/Concord ED, Nichole McWhorter/DHMC ED.
 - 1. Other potential speakers: Public Health Network updates including Keliane-Concord VNA, Dawna can speak with Judy Smith-Plymouth; FallScape presentation-Julie Desrochers/VT, TJQMBB and MOB updates from NH.
 - ii. Anne brought up Partnership for Patients- they have funds for a conference for this year- should we do two conferences or combine-Partnership ends third week in September. She thought of Pat Quigley. Pharmacist- all settings. EMS. Patient experience. General thought combining, potentially with breakouts would be good.
 - 1. Lora will check if breakout rooms available
 - 2. If no break out- no more than 5 sessions
- b. Quarterlies booked at FHC-May and November

7. Updates from group

- a. Karen – ServiceLink to display at conference- no cost. Link to NH Falls Task Force is on their website. She will identify rep to come to meetings. Rebecca-? Link to NH Care Paths.
- b. Judy-standing orders to PCP for referral to PT with (+) Screen in ED. Presentation to PCPS. MIHC person at meetings.
- c. Susan- Portsmouth- 3 MOB classes- started this week- Working with John Wilcox at UNH.
- d. Deb-Legislative Health Fair coming up-John Wilcox will be there-Deb will check-need falls task force member there
- e. Rebecca-one program finished TJQMBB, another finishing shortly

- f. Dawna-training for TJQMBB Instructors May 16th and 17th. There are still some openings. More from Rockingham County and New London area would be good. North Country also difficult to find someone.
- 8. Next Meeting: May 3rd at the Foundation for Healthy Communities-125 Airport Road, Concord, 9:00-11:00. Quarterly-John Batsis, MD and Dawna Pidgeon, PT- Obesity and falls.