

Steady.

Set.

Go!

A Matter of Balance (MOB): Managing Concerns about Falls

**Connecting your community to an evidence-based
falls prevention and intervention program.**



This document is an overview of the A Matter of Balance (AMOB) Falls Prevention and Intervention Program. It is intended to provide Area Agencies on Aging (AAA) and other organizations with information needed to build connections with traditional and non-traditional community partners and request in-kind and financial support needed for AMOB program implementation and sustainability.

For more information, please visit www.ncfallsprevention.org.

Why should the community care about preventing falls?

Falls can lead to injury and death. Falls can cause moderate to severe injuries, such as hip fractures and head injuries, and can increase the risk of early death. In fact, falls are the leading cause of injury death for the older adult population, as well as the most common cause of nonfatal injuries and hospital admissions for trauma (CDC, Falls Overview). From 2003-2012, the NC fall-related death rate increased by 59%. In 2012, 908 people in NC died from injuries related to unintentional falls. In NC, falls were the number one cause of unintentional injury for those 65 and older for each year from 2003 to 2012. In 2011, falls in NC resulted in more than 193,000 ED visits and 25,000 hospital admissions (NC Injury and Prevention Branch, 2013).

Falls are prevalent. There is a high likelihood that you or someone you know has fallen. Each year, one in every three community-dwelling adults age 65 and older falls. Those who fall once are two to three times more likely to have a subsequent fall (CDC, 2010).

The number of older adults is growing. Our population of older adults is growing. In 2009, there were 39.6 million people 65 and older, comprising almost 13% of the population in the U.S. It is expected that by 2030, 19% of the population – approximately 72 million people - will be 65 and older (AOA). In NC, it is expected that the population 65 and older will grow from 1.3 million in 2012 (13.8% of the population) to 2.4 million in 2032 (20% of the population) (NC Division of Aging and Adult Services).

Fear of falling can decrease quality of life and increase risk of falls. For many seniors, the real risk and potential complications of falls creates an overwhelming fear of falling. Up to 50% of Americans over the age of 65 who live independently experience a fear of falling. Falls, with or without injury, carry a heavy impact on quality of life. Those who experience a fall are likely to self-isolate out of fear of falling again, often limiting activities and social engagements. Resulting limitations can result in further physical decline, depression, social isolation, and feelings of helplessness. Research shows that the fear of falling is a significant predictor of future falls (Hamilton County MOB).

Falls are costly to our healthcare system. In NC in 2011, the average cost of treating an individual who has experienced a fall was \$32,000, costing NC more than \$806 million in hospital charges (NC Injury and Prevention Branch, 2013). In 2012, the cost of treating Medicaid- or Medicare- eligible persons in NC with fall and hip fracture diagnoses was \$26.4 million. Among community-dwelling older adults, fall-related injury is one of the 20 most expensive medical conditions. By 2020, the annual direct and indirect cost of fall injuries is expected to reach \$54.9 billion in the U.S. (CDC, Costs of falls).

Falls are preventable. Falls are the result of a convergence of multiple factors. Risk factors for falls include: lack of physical activity, isolation, limiting activity to avoid falling, some medications and combinations of medications, and vision loss. Older adults can remain independent and reduce their chances of falling through (WA State DSHS):

- Regular exercise to improve strength and balance
- Medication management
- Vision Screenings
- Improving home safety (e.g., reducing tripping hazards, improving lighting)
- Reducing the fear of falling

Why A Matter of Balance?

Evidence-based. AMOB is proven to significantly reduce risk factors for falls, including fear of falling. AMOB is identified as an evidence-based program by the National Council of Aging and The Administration for Community Living (formerly the Administration on Aging). AMOB has more than a decade of research identifying positive outcomes associated with program implementation, including improvements in participant self-efficacy in falls prevention, falls control, and falls management. North Carolina outcomes (AMOB, unpublished data, 2013) include:

- 96% of participants feel more comfortable talking with others about fear of falling
- 96% feel more comfortable increasing activity
- 91% made changes to their environment

A recent evaluation by The Centers for Medicare & Medicaid Services (2013) found that AMOB participation was associated with positive outcomes including an increase in physician office visits, increased use of physical and occupational therapy, and a lower mortality rate among AMOB participants compared with matched controls in the outcome period.

A prevention and intervention program. Research has found that, among people age 60+ years who restricted their activities due to a fear of falling, AMOB participation is associated with significant increases in falls efficacy, management, and control, as well as improved social function and range in mobility (NCOA).

Low cost. AMOB is led primarily by volunteer “coaches,” reducing the cost of the intervention. AMOB is a community-based program led by trained, non-professional, lay leaders (“coaches”), most whom are volunteers and many of whom are program graduates. Utilizing trained “coaches” reduces the cost of the intervention, which means the program can be offered more frequently and in a wider variety of settings, thereby reaching a significantly higher number of adults.

Potentially large return on investment in medical cost savings. A recent study from the Centers for Medicare and Medicaid Services (2013) found that “AMOB participation was associated with a \$938 decrease in total medical costs per year (CI: \$1,498-\$379)... driven by a \$517 reduction in unplanned hospitalization costs, a \$234 reduction in skilled nursing facility costs, and an \$81 reduction in home health costs.” Overall, AMOB NC has a goal of enrolling 750 adults, with a potential return on investment of \$705,5000 in decreased total medical costs per year. If 100 classes (1,500 participants) are offered annually statewide (average of one per county), the potential return on investment is \$1,407,000 in decreased total medical costs per year.

Easy-to-follow. North Carolina stakeholders agree that the trainings and manuals provided provide a clear method that is easy to follow and allows for strong fidelity of implementation.

AMOB Program Background and Key Components

The information (i.e., “talking points”) below can be shared with current or prospective community partners. Please copy or adapt as needed depending on your audience.

Program basics

AMOB is a community-based, evidence-based program designed to increase the activity levels of older adults and reduce their fear of falling. AMOB classes offer a safe, inviting, and fun social environment for older adults. Specifics include:

- Eight 2-hour sessions, meeting weekly or twice weekly
- 8-14 participants
- Well-prepared volunteer lay leaders (“coaches”) lead the meetings in teams of two.
- Coaches are trained and supported by AMOB Master Trainers
- Activities include group discussion, problem-solving, skill building, assertiveness training, exercise training, sharing practical solutions, and cognitive restructuring (learning to shift from negative to positive thinking patterns or think about something in a different way)

Participants

AMOB was designed to benefit community-dwelling adults who embody one or more of the following characteristics:

- Are concerned about falls
- Have sustained a fall in the past
- Restrict activities because of concerns about falling
- Are interested in improving flexibility, balance, and strength
- Are age 60+, ambulatory, and able to solve problems

AMOB Goals

The AMOB program acknowledges that the risk of falling is a legitimate cause for concern, but emphasizes practical coping strategies to reduce the risks and alleviate anxiety. During the class, participants learn to:

- View falls and fear of falling as controllable
- Set realistic goals for increasing activity
- Change their environment to reduce fall risk factors
- Exercise to increase strength and balance

Who are potential partners and how can they contribute to AMOB?

Program need	Specifics	Who to ask
Financial support/ sponsorships	The cost of implementing one class with 12 participants is approximately: \$1,640 (\$137 per participant), which includes coach stipend and/or mileage and coordinator staff time. Coach training is \$314 per coach (which includes training and materials). Sponsorships may include giveaways for participants or ability to present to participants	Financial institutions, granting agencies, local foundations, family foundations, churches, large and small businesses
Workshop locations	Workshops should be held in ADA-accessible room with space for 8-14 participants to exercise and move around comfortably, as well as space to set up light refreshments. Chairs and tables should be set up in a U-shape.	Recreation and Parks Departments, conference facilities, local fitness centers, YMCA, YWCA, restaurants, faith centers
Marketing, outreach support	Word of mouth is one of the most powerful marketing tools for promoting AMOB. We have created NC-specific flyers for marketing AMOB to potential participants.	Newspapers, radio stations, any news outlets (many will run PSAs at no cost), local businesses with window space or marquees, faith community bulletins and announcements
Referrals	AMOB was designed to benefit community-dwelling adults who: 1) are concerned about falls, 2) have sustained a fall in the past, 3) restrict activities because of concerns about falling, 4) are interested in improving flexibility, balance, and strength, 5) are age 60+, ambulatory, and able to solve problems	Primary care physicians, physical/occupational therapists, managed care specialists, emergency service staff (EMT, dispatchers, etc.), hospital discharge staff
Printing	Print needs include marketing materials (e.g., flyers). Program materials include participant books.	Printing companies, companies who outsource printing and may want to help in your printing needs
Identification of volunteer coaches	Two AMOB coaches are needed for each workshop. Coaches do not need to have a background in health care or education. They should have strong leadership and communication skills, experience facilitating groups, enthusiasm, dependability, and the ability to demonstrate exercises. Coaches must complete an 8-hour training program.	Local service groups (e.g., Rotary, the Lions); nonprofits with missions that include health, community, education or older adults; retirement communities; graduates of previous AMOB programs
Refreshments	Light refreshments will be served at each class	Community restaurants, grocery stores with catering/deli services, catering companies, local chefs

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APPENDIX A

EXAMPLE LETTER REQUESTING SUPPORT FROM COMMUNITY PARTNERS

STEADY, SET, GO! A Matter of Balance (AMOB): Managing Concerns about Falls

Dear (Community Partner),

We are writing to ask for your partnership and support to implement an evidence-based, nationally recognized falls prevention and intervention program -- “**A Matter of Balance (AMOB): Managing Concerns about Falls.**” Specifically, we are seeking (*include specific ask here, i.e., a space for 10-12 participants for eight 2-hour sessions to be held on the following dates ____; your help in identifying volunteer coaches to teach AMOB classes; a tax-deductible donation of xxx to support Coach training, which costs ____*).

AMOB is a community-based, evidence-based program designed to increase the activity levels and confidence of older adults and reduce the fear of falling. More than a decade of research has identified positive outcomes associated with AMOB program implementation, including improvements in participant self-efficacy in falls prevention, falls control, and falls management.

One AMOB participant said: “*I am more aware of my surroundings and have made changes within my home. Enjoyed every session. Thank you for offering this class!*”

Falls prevention is important because:

- Fear of falling can decrease quality of life and increase risk of falls.
- Falls can lead to injury and death.
- The number of older adults is growing.
- Falls are costly to our healthcare system.
- Falls are preventable.

Specifically, there is a substantial need for AMOB in XXXXX County. Approximately XXXXX people over the age of 60+ reside here and XX% have been identified as having sustained a fall in 20XX. In NC, the median hospitalization cost for unintentional fall injuries in adults aged 65 and older was \$20,139 in 2008, a 41% increase from 2004.

Please let me know when we can set up a phone call or in-person meeting to discuss your potential participation in this important community effort. Thank you.

Sincerely,