A Matter of Balance: Analysis of Local Program Outcomes

Learning Objectives
In this session, participants will:
1. View and analyze data from Matter of Balance classes over the last 6 years from two different geographic areas.
2. Compare pre and post outcomes and evaluations with national averages.
3. Discuss why outcomes are not in-line with national averages and ways to improve them.

Statement of Purpose
For nearly a decade, the PA Department of Health has grant funded county and municipal health departments to perform Matter of Balance (MOB) classes, an evidenced-based program designed to reduce the fear of falling and increase activity levels among older adults, in their communities. These classes are led by local health department staff or community volunteers that have been trained by MOB master trainers. Pre and post survey data related to the participants concerns and confidence related to falls is collected at each class.

Methods
Since 2013, all Pennsylvania local health departments have been required to enter their class data into Project Enhance. Recently, Project Enhance has upgraded their reporting feature, allowing a deeper look at class results and demographics. Allentown Health Bureau and Chester County Health Department coordinated to look at their data in relation to national results and demographics. Through this data analysis, 81 classes with over 800 participants were looked at for changes in pre and post surveys and evaluations of classes compared to national averages.

Results
Improvement from pre to post surveys are shown throughout for both organizations. Questions related to getting up from a fall and protecting oneself while falling are exceeding the national average in improvements from pre to post-survey. However, in several questions – specifically related to findings ways to reduce falls and concerns about falls interfering with activities – were below the national averages. A more detailed look at classes and results between the two health department shows difference in class sizes, ages of participants and populations served – all of which may have effects on class outcomes reported on participant surveys. Discussions between the two health departments were held on ways to improve outcomes.

Conclusions
While all survey results still show improvements amongst participants, instruction of volunteer coaches by Master Trainers with emphasis on the importance of data collection could help improve post-survey results and bring them in line with national averages. More attention by coaches on areas of improvement in class discussion could also help improve results. Collaboration with neighboring counties offers resource sharing and opportunities to offer more comprehensive coach trainings and updates.

David Synnamon
David Synnamon has served as the Injury Prevention Manager at the Allentown Health Bureau for the last 5 years focusing on programming related to child passenger safety, elderly falls, prescription drug abuse, home safety and child abuse prevention. Before that he worked at the PA Chapter of the American Academy of Pediatrics focusing solely on child passenger safety initiatives throughout Pennsylvania.

He is a certified Master Trainer for “A Matter of Balance” and a Child Passenger Safety Lead Instructor. David is the chairperson of the Allentown-Bethlehem-Easton Safe Kids Coalition and has been a Safe States member since 2014. David graduated from Drexel University's Masters of Public Health Program in 2009.
Recognizing Trends in Older Adult Falls

Learning Objectives
Demonstrating demographics which are at higher risk for more severe falls
Identifying populations with a history of falls
How to tailor evidence-based programs to fit the needs of a community

Statement of Purpose
Indiana has seen an increase in fatal and nonfatal injuries due to unintentional falls in recent years. Older adults accounted for over 10,000 fall-related hospitalizations with a primary diagnosis of injury. An analysis was done to observe all fall-related hospitalizations versus all fall-related hospitalizations with a history of falls.

Methods
Hospitalizations of Indiana residents were collected through Indiana’s hospital discharge data for the calendar year 2017. Transfers were removed to avoid double-counting. Variables analyzed were: Time of admission, patient severity, sex, county of residence, and diagnoses codes 1 – 60. Patient severity is based on 3M All Patient Refined Diagnosis Related Groups. All fall-related hospitalizations were identified using the ICD-10-CM diagnoses codes for unintentional falls with a principal diagnosis of injury.

Results
Females were two times more likely to be hospitalized than males, but males had higher patient severity scores and longer mean length of stay (LOS) compared to females. Metropolitan counties had longer mean LOS when compared to rural counties. Of all fall-related hospitalizations with an underlying cause of injury, 14.2% of these patients had a history of falls. Patients with a history of falls had a longer mean LOS and higher patient severity score than all patients with fall-related hospitalizations.

Conclusions
Falls are the leading cause of injury in Indiana. Recognizing why falls are most prevalent in certain demographics is necessary for disseminating the proper injury prevention resources in the community and utilizing these resources to help those who are at risk of falling repeatedly. With more research, prevention resources like Stepping On can be tailored to meet the needs of Indiana’s older adults.

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Increasing Self-efficacy in Older Adults through Evidence-based Falls Prevention Programming in Montgomery County

Learning Objectives
- Describe the benefits gained through participation in A Matter of Balance class.
- Discuss the impact problem solving and assertiveness training can have on self-efficacy.
- Identify populations that could benefit from A Matter of Balance.

Statement of Purpose
Self-efficacy is defined as one’s belief in their ability to succeed in specific situations and overcome challenges. The Montgomery County Office of Public Health (MCOPH) utilizes the evidence-based A Matter of Balance (MOB) program to reduce the fear of falling and increase self-efficacy in older adults throughout the county. MOB participants attend eight, two-hour classes and learn to view falls as controllable, make environmental changes to reduce fall risk factors, and increase their physical strength and assertiveness.

Methods
Participants complete first and last session surveys to obtain demographic information and assess changes in attitudes. During the last session, additional feedback and personal successes are collected through a class evaluation form.

Results
Since 2011, 520 older adults participated in A Matter of Balance class offered by MCOPH. Through comparison of baseline and eight-week surveys, improvements were found in all categories including the perceived ability to get up after a fall, protect oneself if a fall occurs, fall reduction strategies, increase physical strength, and become more steady. Participants were less likely to let their fall concerns interfere with their social life and more likely to increase physical activity.

Conclusions
A Matter of Balance is designed for easy replication and implementation in community settings by trained lay leaders. Montgomery County’s results support the findings of this evidence-based program.

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