

A Collaborative Approach to Reducing Falls in Wisconsin

Saving lives. Preserving independence. Reducing costs.

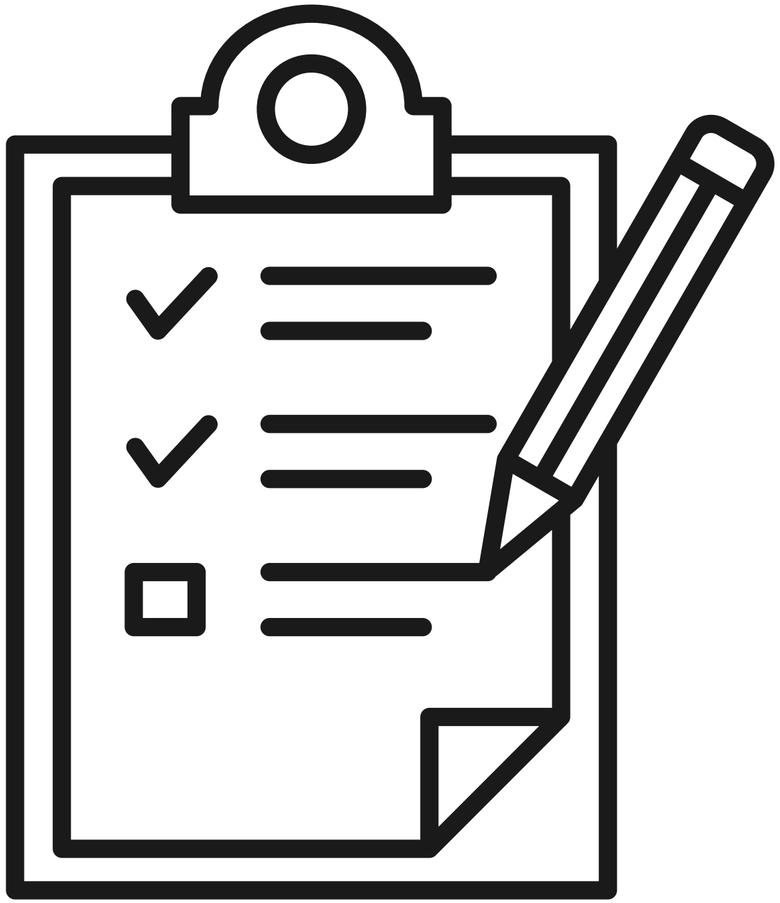
Presented by: Suzanne Morley | Wisconsin Institute for Healthy Aging (WIHA)

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Agenda

1. About WIHA
2. About the Falls Free Wisconsin Coalition
3. Identifying fall risks
4. Prevention strategies
5. Reframing fall prevention
6. Additional resources
7. Q&A



About WIHA

Mission: To improve the health and well-being of all people as we age by disseminating evidence-based programs and practices and by engaging in collaborative public health strategies in Wisconsin and beyond.

Evidence-Based Programs

Falls prevention programs: Stepping On & Pisando Fuerte

Other: Chronic disease self-management, incontinence, physical activity

Community Education & Coalitions

Age Well Series & newsletter

Falls Free Wisconsin Coalition & Wisconsin Coalition for Social Connection

Other

Reframing Aging & Disability

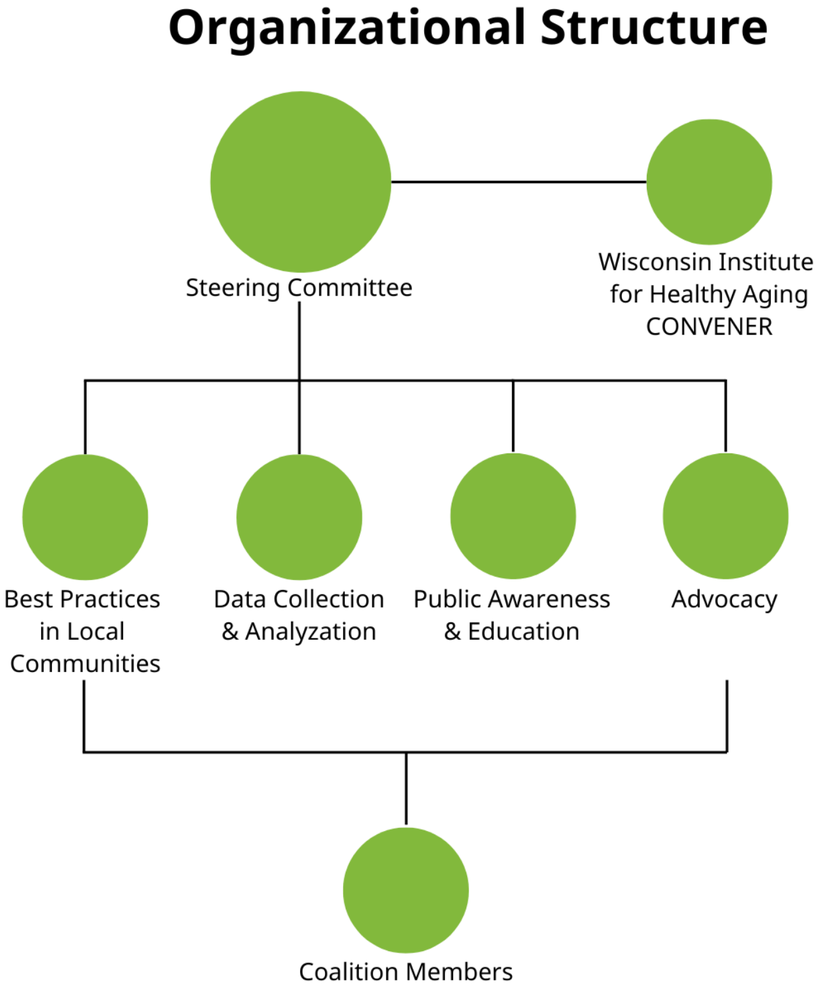
Brain health

Bi-annual Healthy Aging Summit

& more!

About the Falls Free Wisconsin Coalition

A collective impact approach to falls prevention



Membership includes representatives from aging services (such as Aging & Disability Resource Centers and Aging Offices) healthcare, public safety (EMS & fire), public health, CBOs, senior centers, and others.

The Coalition is focused on raising awareness, curating and sharing best practices in falls prevention, gathering and reporting falls data, and addressing policy and systems changes.

fallsfreewi.org/falls-free-wi-coalition/

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Steering Committee

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- Provide leadership for the statewide Coalition & engage in annual strategic planning
- Ensure Coalition represents a diverse membership
- Discuss and ensure sustainability of the Coalition through corporate sponsorship, grants & more
- Provide funding through LEAF mini-grants for targeted local initiatives
- Provide guidance for reframing aging/fall prevention

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Advocacy Workgroup

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Falls Prevention Grants

Preserving Independence. Reducing costs. Improving Quality of Life.

Aging is a lifelong process that connects us all. Today, one in four Wisconsinites is age 60 or older—and by 2040, it will be one in three. Now is the time to invest in systems that promote health, connection, and independence throughout our lives—strengthening the foundation for well-being in every community.

Falls Prevention Grants can do just that!
Research has demonstrated that no matter our age, we can learn and carry out effective strategies to increase resilience, therefore reducing our risk of falls and improving our quality of life. Preventing falls is one way we can collectively make a significant positive impact in our communities.

The Wisconsin Institute for Healthy Aging (WIHA) and its community partners support legislation to fund the researched and proven strategies that give older adults, families, and caregivers the tools to protect our health.

Preventing Older Adult Falls
Falls are the number one cause of injuries as we age and are a key driver of emergency department (ED) visits, hospitalizations, and nursing home admissions. One in four older adults has a fall each year and, sadly, Wisconsin has the highest rate of deadly falls in the nation.[1] Yet, there is no state investment in falls prevention.

- $1 billion is spent annually on falls-related health costs in Wisconsin which includes Medicare, Medicaid, and out-of-pocket expenses.[2]
- Falls have a major impact on emergency medical service (EMS) and health care providers. EMS providers responded to over 140,000 falls across the state making falls the top injury response in 2024, with over 10,000 more than in 2023. Over 20% of EMS responses were for older adult falls in 2024. The majority of these falls happened in the home.[3]
- More than 55,000 older people went to the emergency department due to a fall in 2024; over 12,900 were hospitalized.[4]

The **good news** is that while common, falls are not inevitable as we age. Many can be prevented with state investment in prevention efforts.



State investment in community falls prevention will:

Improve health and quality of life through evidence-based programs proven to reduce falls and increase quality of life for older adults.

31%

Reduction in falls for Stepping On program participants

$2M

average healthcare cost savings per year through Wisconsin's evidence-based health promotion programs

- Advocate for sustainable funding for the Coalition and statewide efforts
- Work with state decision makers to raise awareness of the importance of falls prevention
- Collaborate with local leaders

Find Your Legislator

Sample Templates

Communication Tips

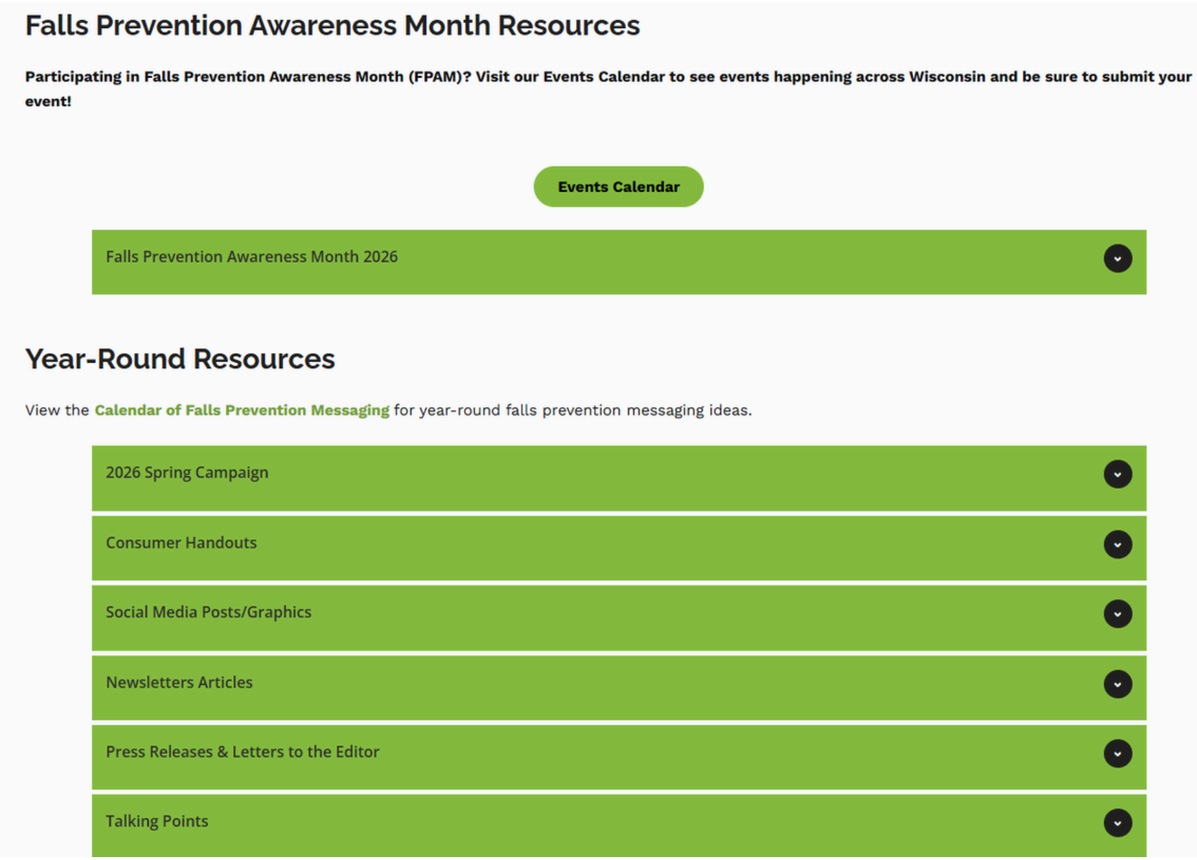
Additional Resources

fallsfreewi.org/advocacy/

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Public Awareness & Education Workgroup

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- Provide education and raise awareness on falls risk factors and prevention strategies for community members and professionals
- Lead Falls Prevention Awareness Month efforts
- Hold webinars for community members
- Develop materials for quarterly media campaigns
- Give presentations for professionals and community members
- Develop materials for recruiting & maintaining Coalition members

fallsfreewi.org/promotional-resources/

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Best Practices in Local Communities Workgroup

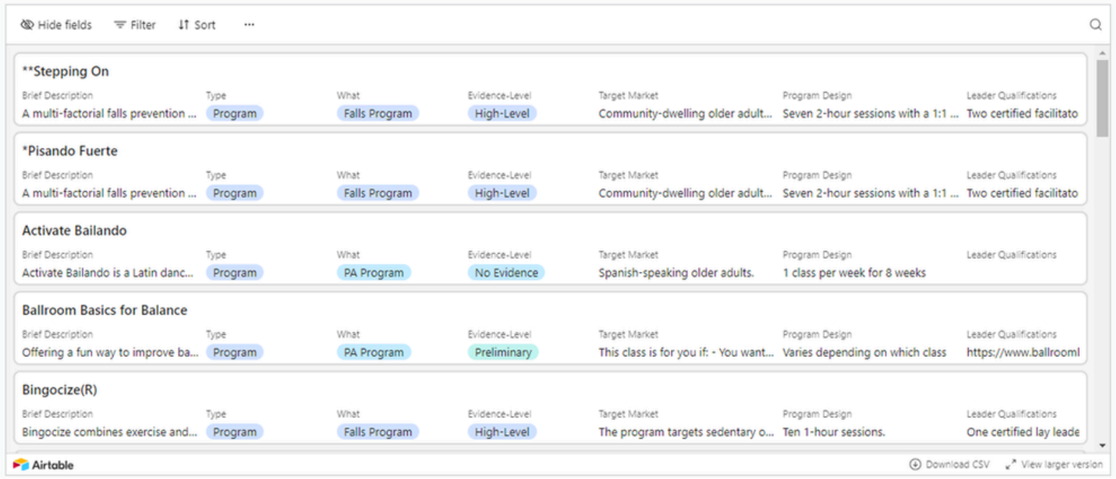
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- **Type**: A program, practice, initiative, or event
- **What**: A Falls Program or a Physical Activity (PA) Program
- **Evidence-Level**: Whether recognized as high-level evidence-based, preliminary evidence, or no evidence
- **Eligible for IIID**: For organizations that use Older American Act funds. For more information, contact **GWAAR**.

Click on the card to read more about the program or practice including:

- **Brief Description**
- **Target Market**
- **Program Design** (How many weeks/sessions)
- **Leader Qualifications**
- **Link for more information**
- **Link to find a workshop in Wisconsin** (if applicable)

Programs with * are WIHA-developed. **Learn More.**



- Developed a **Coalition Quick Guide** to help support local falls prevention coalitions
- Developed an **EMS-CBO Toolkit** to help guide relationship building and implementation of collaborative strategies to prevent falls
- Collect, curate, and share best practices, education & research
- Hold quarterly meetings for our Coalition members

fallsfreewi.org/evidence-based-best-practices/ fallsfreewi.org/education-research/ fallsfreewi.org/help/

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Data Collection & Analyzation

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Falls Data 101
Not sure where to start? Watch our Falls Data 101 webinar!

Data by County
View a detailed report of the above Wisconsin falls data by county.

2024 EMS & Falls Report
Data on the EMS response for falls in Wisconsin.

Alcohol & Falls
A 2026 report and webinar on the impact of alcohol-related falls.

TBI & Falls
Accidental falls are the leading cause of traumatic brain injury in Wisconsin.

Available Data Sources:

- Center for Disease Control and Prevention (CDC)
- WARDS (Wisconsin Ambulance Run Data System) Elite
- Wisconsin Hospital Association (WHA)
- WISH (Wisconsin Interactive Statistics on Health) Query System
- Wisconsin Trauma Registry
- National EMS Information System (NEMSIS)

Local Data
You may be able to get local data right from the source of your healthcare system or emergency services provider. Ask your local providers what falls data they collect. Consider requesting regular reports and monitoring for changes in trends over time.



- Collect and analyze state and local fall-related injury and mortality data
- Provide data customization for local communities
- Collect intervention effectiveness data
- Provide education and technical assistance on gathering local data

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Identifying Fall Risks

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Person (Intrinsic)

- Advanced age
- Fear of falling
- Muscle weakness
- Previous falls
- Gait & balance problems
- Poor vision
- Chronic conditions
- Postural hypotension

Environment (Extrinsic)

- Lack of handrails/grab bars
- Poor stair design
- Dim lighting or glare
- Obstacles/tripping hazards
- Slippery/uneven surfaces
- Psychoactive medications
- Improper use of assistive device

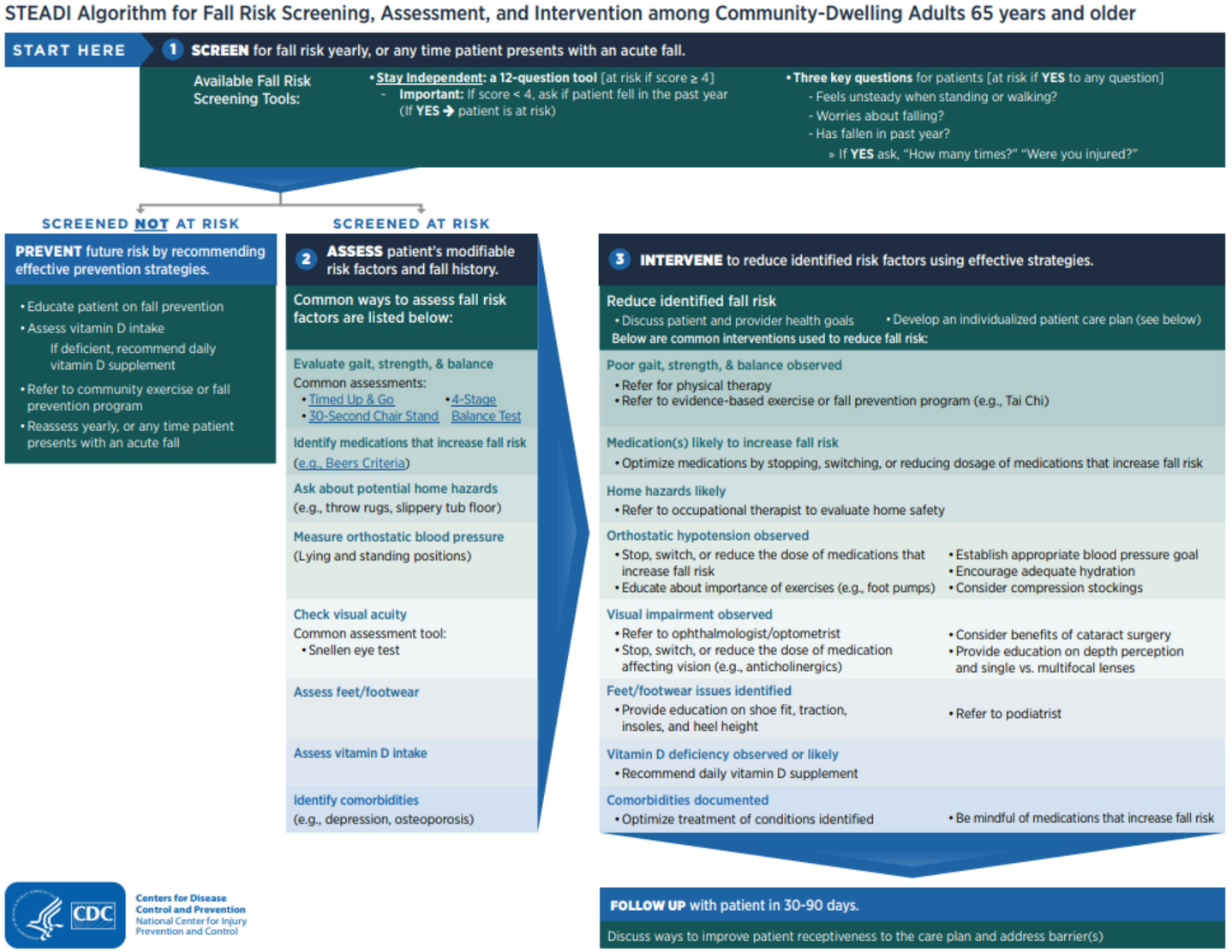
Behavior/Activity

- Risky behaviors
- Risky activities
- Inattention

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Screening for Falls Risk

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Screening for Falls Risk

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Check Your Risk for Falling

Circle "Yes" or "No" for each statement below			Why it matters
Yes (2)	No (0)	I have fallen in the past year.	People who have fallen once are likely to fall again.
Yes (2)	No (0)	I use or have been advised to use a cane or walker to get around safely.	People who have been advised to use a cane or walker may already be more likely to fall.
Yes (1)	No (0)	Sometimes I feel unsteady when I am walking.	Unsteadiness or needing support while walking are signs of poor balance.
Yes (1)	No (0)	I steady myself by holding onto furniture when walking at home.	This is also a sign of poor balance.
Yes (1)	No (0)	I am worried about falling.	People who are worried about falling are more likely to fall.
Yes (1)	No (0)	I need to push with my hands to stand up from a chair.	This is a sign of weak leg muscles, a major reason for falling.
Yes (1)	No (0)	I have some trouble stepping up onto a curb.	This is also a sign of weak leg muscles.
Yes (1)	No (0)	I often have to rush to the toilet.	Rushing to the bathroom, especially at night, increases your chance of falling.
Yes (1)	No (0)	I have lost some feeling in my feet.	Numbness in your feet can cause stumbles and lead to falls.
Yes (1)	No (0)	I take medicine that sometimes makes me feel light-headed or more tired than usual.	Side effects from medicines can sometimes increase your chance of falling.
Yes (1)	No (0)	I take medicine to help me sleep or improve my mood.	These medicines can sometimes increase your chance of falling.
Yes (1)	No (0)	I often feel sad or depressed.	Symptoms of depression, such as not feeling well or feeling slowed down, are linked to falls.
Total _____		Add up the number of points for each "yes" answer. If you scored 4 points or more, you may be at risk for falling. Discuss this brochure with your doctor.	

To check your risk online, visit: www.bit.ly/3o4RiW8

This checklist was developed by the Greater Los Angeles VA Geriatric Research Education Clinical Center and affiliates and is a validated fall risk self-assessment tool (Rubenstein et al. J Safety Res; 2011: 42(6)493-499). Adapted with permission of the authors.

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Screening for Falls Risk

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Common Assessments

- 30-Second Chair Stand
- 4-Stage Balance Test
- Timed Up & Go
- Stay Independent Self-Assessment
- Other Screenings to Consider

→ Vision screening – refer to optometrist

→ **Orthostatic Blood Pressure**

→ **Medication review**

→ **Alcohol Use Self-Assessment**

→ Hearing evaluation – refer to an audiologist

→ **Cognitive Screening and Assessment**

→ **Social Frailty Index** or **UCLA 3-Item Loneliness Scale** – social isolation and loneliness increases risk of falls (decreased participation, increased fear of falling, faster physical and cognitive decline)

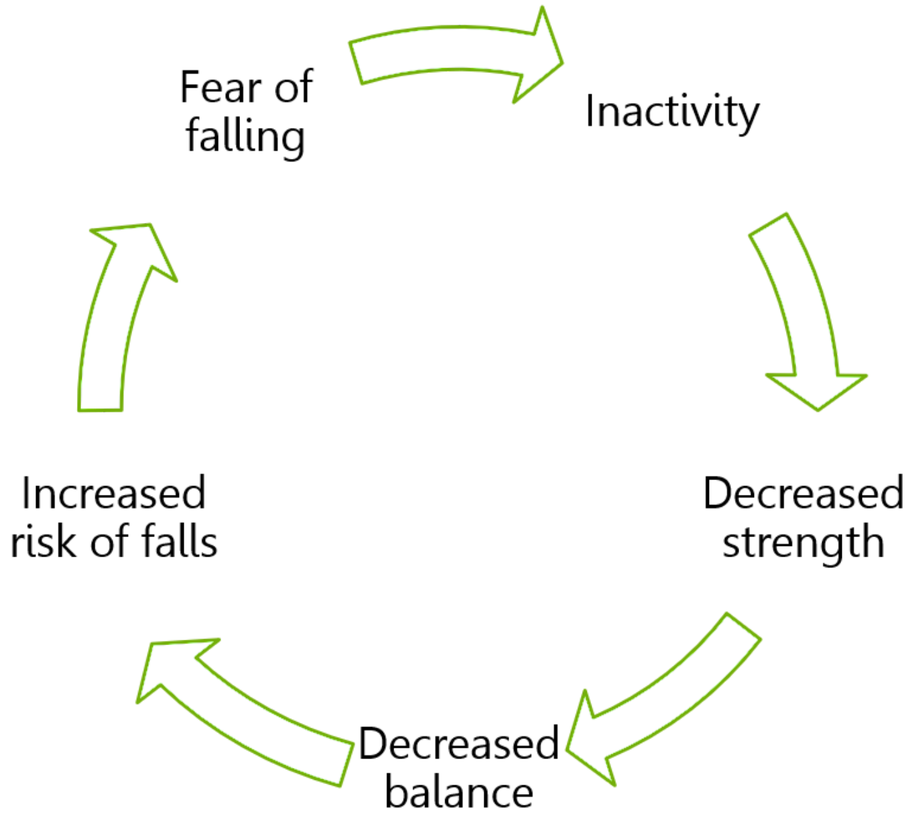
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Outcomes

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- Injury
  - Traumatic brain injury (TBI), broken bone(s) or hip fracture
  - Injury-related healthcare costs
- Fear of falling
- Social isolation
- Loss of independence
- Death



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Prevention Strategies

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- Evidence-based fall prevention programs
- Balance and strength exercises
- Assistive devices
- Home safety modifications
- Medication management
- Vision
- Hearing/ear health
- Safe footwear
- Social connection
- Nutrition



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Fall Prevention Programs

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What Program or Practice is the Best Fit?

Description of Problem	Possible Solutions		
I want to refer my client into a falls prevention program. My client uses a cane and has a fear of falling.	Stepping On	Bingocize	Tai Chi
I want to raise awareness of falls prevention in my community.	Hold a falls prevention awareness event	Falls Prevention Awareness Week/Month	Mugs for Rugs initiative
My community has a high population of Spanish-speaking older adults.	Pisando Fuerte	Activate Bailando	Hold a falls prevention awareness event
I am looking for a program that can help older adults make home safety modifications to prevent falls.	Home Hazards Removal Program	Stepping On	Falls Free® Wisconsin's Home Safety Challenge
I am working with an older adult that wants to improve their balance and strength to prevent falls.	Tai Chi	The Otago Exercise Program	Ballroom Basics for Balance
I want to help my patient who is more frail prevent falls.	Bingocize	The Otago Exercise Program	Stay Active and Independent for Life

Where to Start?

- Find a program and/or facilitator near you
- Become a facilitator of a falls prevention program
- Develop partnerships and marketing materials
- Partner with organizations that serve Spanish-speaking (or other languages) older adults

Questions? Contact falls@wihealthyaging.org for additional guidance on what program or practice might be the best fit your your population or community.

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fallsfreewi.org/evidence-based-best-practices/

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Fall Prevention Programs

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Search available programs & practices:

Programs with * are WIHA-developed. **Learn More**.

Hide fields | Filter | Sort | ···

**Stepping On

Brief Description	Type	What	Evidence-Level	Target Population	Frequency	Duration
A multi-factorial falls prevention ...	Program	Falls Program	High-Level	Community-dwelling older adult...	7 sessions with a 1:1 h...	2 hours per session

*Pisando Fuerte

Brief Description	Type	What	Evidence-Level	Target Population	Frequency	Duration
A multi-factorial falls prevention ...	Program	Falls Program	High-Level	Community-dwelling older adult...	8 sessions with a 1:1 h...	2 hours per session

A Matter of Balance

Brief Description	Type	What	Evidence-Level	Target Population	Frequency	Duration
A program to reduce the fear of ...	Program	Falls Program	High-Level	Community-dwelling, age 60+, a...	In-person: 8 sessions; ...	2 hours per session

Activate Bailando

Brief Description	Type	What	Evidence-Level	Target Population	Frequency	Duration
Activate Bailando is a Latin danc...	Program	PA Program	No Evidence	Spanish-speaking older adults.	8 sessions	

Ballroom Basics for Balance

Brief Description	Type	What	Evidence-Level	Target Population	Frequency	Duration
Offering a fun way to improve ba...	Program	PA Program	Preliminary	This class is for you if: - You want...	Varies: 6-12 sessions	60-90 minutes per session

Airtable | Download CSV | View larger version

fallsfreewi.org/evidence-based-best-practices/

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Fall Prevention Programs

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**Stepping On	
Brief Description	A multi-factorial falls prevention program. Watch the video: https://www.youtube.com/watch?v=AueCc28Y2mY
Type	Program
What	Falls Program
Evidence-Level	High-Level
Target Population	Community-dwelling older adults who do not use a walker indoors, do not need a wheelchair and are without a diagnosed cognitive impairement.
Frequency	7 sessions with a 1:1 home visit or follow-up phone call and 3-month booster session
Duration	2 hours per session

**Stepping On	
Leader Qualifications	Two certified facilitators, or one certified facilitator and 1 peer facilitator are required. The facilitators should be a fitness instructor, healthcare professional, aging network professional or health educator. The peer facilitator should be an older adult and typically is a past participant of the program
Evidence-Based for Falls?	Yes
Eligible for IIID*	Yes
Currently Available in WI?	✓
URL for More Program Info	https://wihealthyaging.org/for-professionals/become-a-facilitator/
URL to Find a Workshop (if available)	https://wihealthyaging.org/programs/find-a-workshop/

fallsfreewi.org/evidence-based-best-practices/

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Stepping On & Pisando Fuerte

Multifactorial fall prevention programs proven to reduce falls by 31%!



youtube.com/watch?v=G9Bi3j7HeVM/

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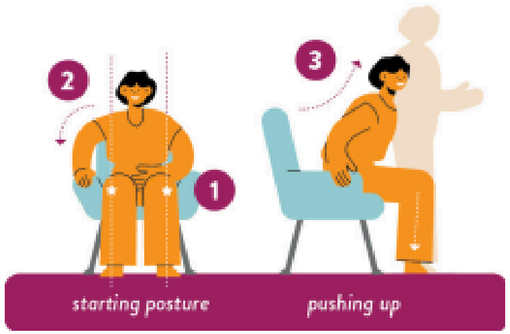
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Balance & Strength Exercises

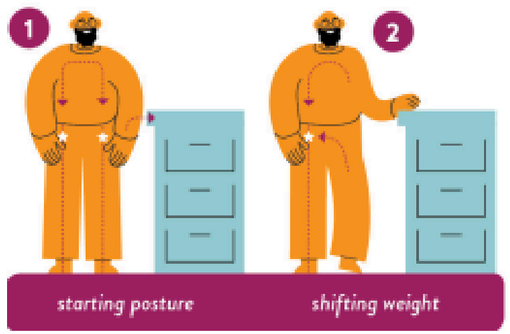
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Balance Exercises

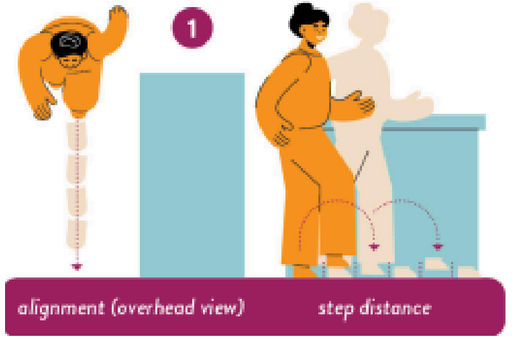
Sit-to-Stand p 2



Weight Shifts p 3

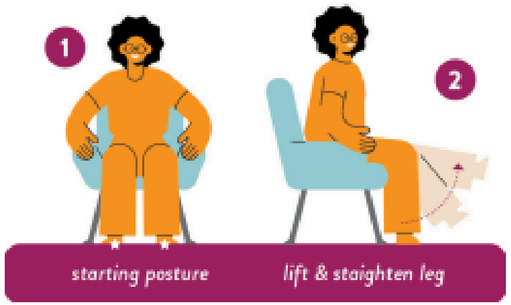


Tandem Walk p 4

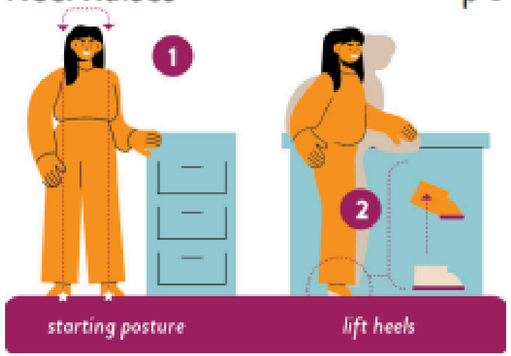


Strength Exercises

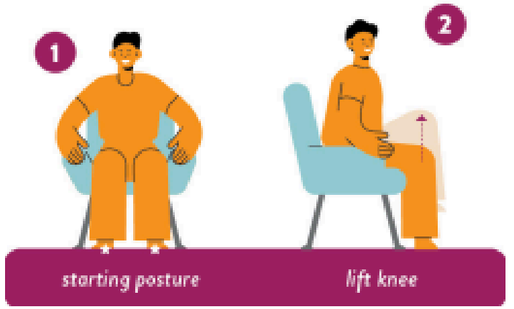
Leg Lifts p 5



Heel Raises p 6



Hip Marches p 7



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Assistive Devices

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Assistive devices are tools we can use or install to make everyday activities safer, reduce our risk of falls, and help us stay independent.

Click on the examples below to learn more:

- Grab bars
- Reachers
- Handrails
- Canes & Walkers
- Walking Poles
- Medical Alert Devices
- Smart Speakers

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Home Safety

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Interactive Home Safety Challenge

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Medication Management

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Personal Action Plan

- Ask your doctor or pharmacist the following questions about each of your medicines.
- Include prescription medicines, over-the-counter medicines, dietary supplements, and herbal products.
- Use this information to complete your **Personal Action Plan**.



Centers for Disease Control and Prevention
National Center for Injury Prevention and Control

Questions to ask	Answers	Action plan
What is this medicine used for?		
Does this medicine interact with others I am taking?		
Could this medicine have side effects that might change my ability to drive safely or increase my risk of falling?		
Is there another medicine or dose I should try?		
If I stop or change this medicine, what side effects should I expect?		

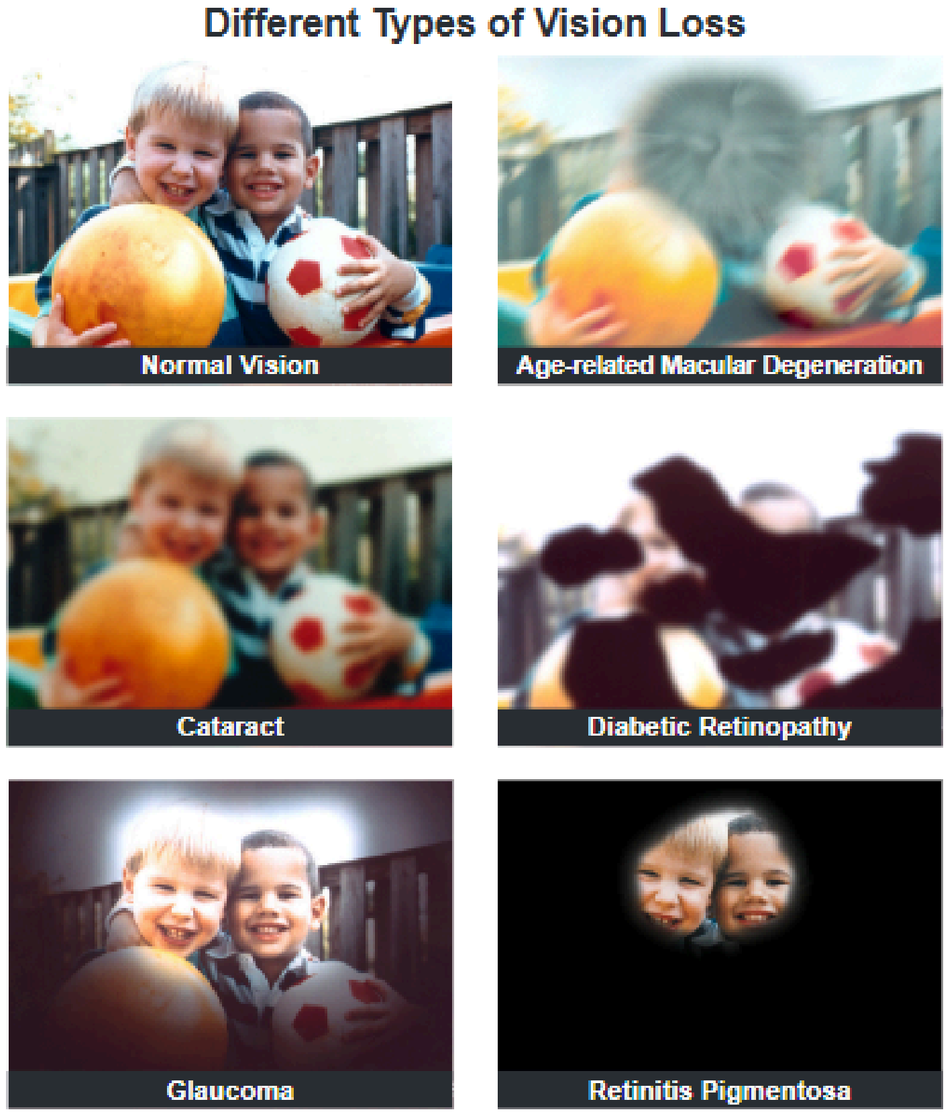
For more information: bit.ly/CDC-MedicinesRisk

fallsfreewi.org/medications/

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Vision

- Get an eye exam at least once a year
- Talk to your healthcare provider about chronic health conditions and how they might affect your vision
- Don’t push yourself or isolate yourself
- Use sunglasses and/or a hat for glare
- Keep your home well lit
- Scan ahead for hazards

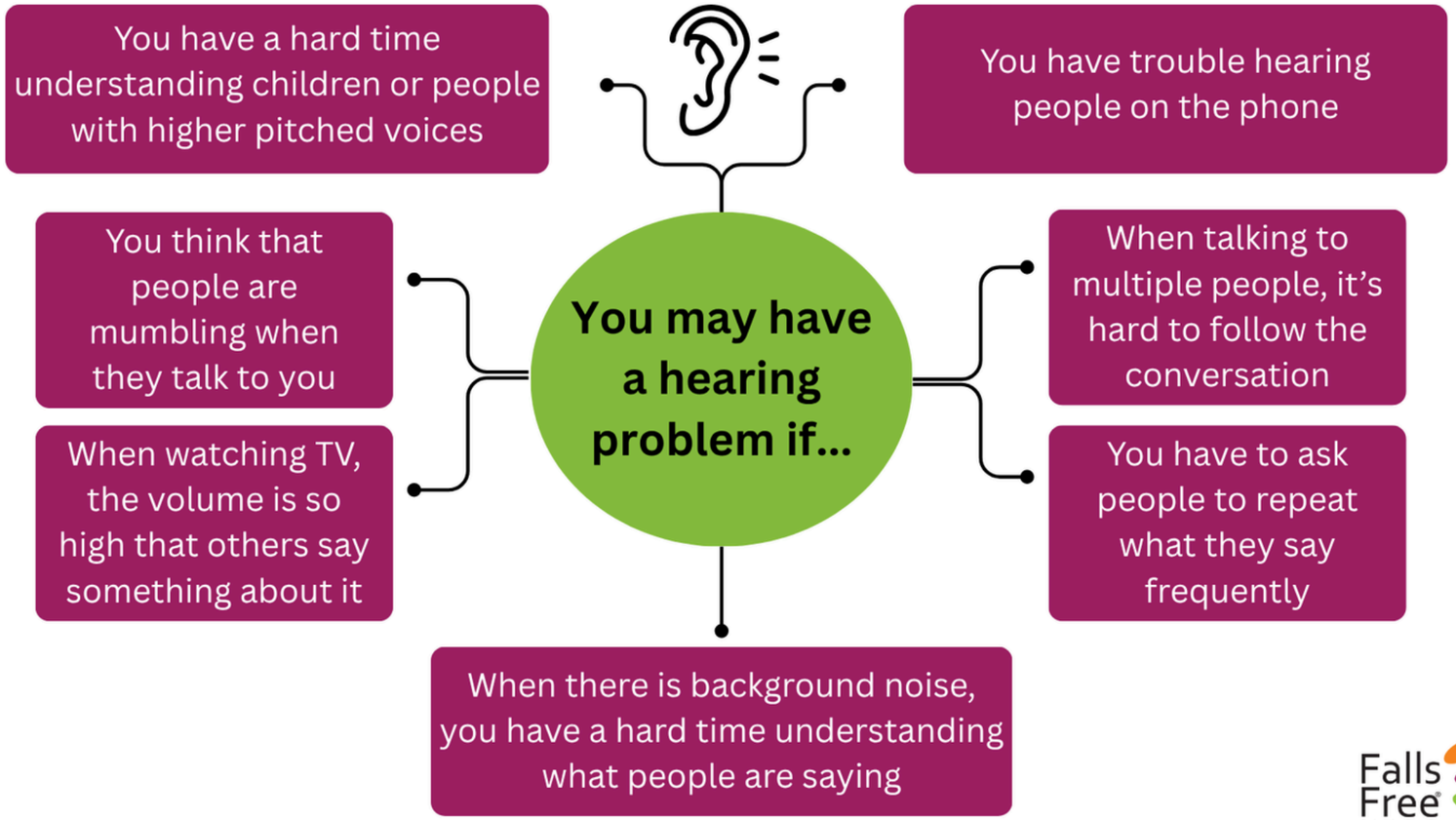


The State of Wisconsin Office for the Blind and Visually Impaired provides rehabilitation services to help individuals who are blind or visually impaired to achieve their own goals of independent living. Call 1-888-879-0017 for more information.

fallsfreewi.org/sight/

Hearing/Ear Health

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Safe Footwear

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Features of a Safe Shoe



A broad, flared heel to maximize contact with the ground

A firm heel collar to provide stability

Laces ensure the shoe 'hold' onto your foot when walking

A bevelled heel to prevent slipping

A thin, firm midsole so you can 'feel' the ground underneath

A textured sole to prevent slipping

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Features of an Unsafe Shoe



Lack of upper support makes your foot slide around in the shoe

Flat and thin soles can be slippery, particularly in wet weather

Lack of laces means your foot can slide out of your shoe

Flip flops, sandals, and slippers without arch support should be avoided as they make you less stable and can cause a trip or slip when walking.

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fallsfreewi.org/footwear/

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Social Connection

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Nutrition

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Reframing Falls Prevention

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Reframing Falls Prevention

Developed by:

The Falls Free Wisconsin Coalition



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fallsfreewi.org/reframing-falls-prevention-toolkit/

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Reframing 101



youtube.com/watch?v=X6rqcHytmtQ

Falls Language Quick Guide

Language to Consider Using	Why	Putting it Into Practice
Falls resiliency	We don't just want to *prevent* falls, but we want to remain resilient as we age! Merriam-Webster's definition of resilience is "An ability to recover from or adjust easily to misfortune or change".[3] If a fall does occur, we want to be able to recover and learn from that fall and make changes so it doesn't happen again.	While we're not going to stop saying "falls prevention", falls resiliency is the goal, i.e., preventing falls is a result of falls resiliency.
Reducing fall risk	Reducing our risk of falling as we age is a step in the journey to prevent falls and build resilience.	This can be framed in a number of ways - "Wear safe footwear to reduce your fall risk."; or "As we age, we can reduce our risk of falling by installing grab bars in our homes."
Moving from they/them to we/us	Research from the FrameWorks Institute has shown that small shifts in language can make a big difference - after all, we are all aging, and preventing falls benefits everyone.[4]	Instead of saying things like "as *they* age", try, "**We** can reduce our risk of falling as **we** age."; and "Ensuring access to funding for falls prevention programs will help all of **us** as **we** age."
Independence	The Falls Free Wisconsin Coalition conducted key informant interviews in the summer of 2025, and found that older people want to remain independent at home. Independence is important to older adults, and **linking independence to falls prevention can be helpful**.	An example of how to frame this might be: "Using a mobility device like a cane or walker can help us move safely and maintain our independence."

Language to Consider Using	Why	Putting it Into Practice
Mobility	As we age, we want to remain mobile to keep doing the things we love. In healthcare, one of the 4Ms Framework of an Age-Friendly Health System is Mobility (the other "Ms" are What Matters, Medication, and Mentation). This is important, as it relates to What Matters, and research indicates that what matters to older adults are social activities and connection.[5]	Instead of saying "Practice balance and strength exercises to prevent falls.", this can be framed as, "Practicing balance and strength exercises can help people of all abilities stay engaged in our communities and engage in social activities." While this doesn't explicitly call out preventing falls, remaining active and socially connected are protective factors to prevent falls, and may resonate more to the older person.
Confidence	Research shows that a fear of falling can actually increase the risk of falls.[6] Instilling confidence that there are ways to reduce our risk of falling as we age is important to avoid this cycle.	For example: "Practicing balance and strength exercises can help improve our confidence to get out and about as we age."
Falls are common, but they don't have to be a normal part of aging.	Many older adults believe that falls are inevitable and just something that we deal with as we get older.	By acknowledging that while falls are common, they can be prevented, empowers older people, families, and caregivers to invest in actions that can reduce falls risk and increase resiliency.

fallsfreewi.org/reframing-falls-prevention-toolkit/

Falls Language Quick Guide

Language to Consider Using	Why	Putting it Into Practice
There are simple things that we can do that make a huge difference in helping us reduce our risk of falls as we age. or **Simple steps can be taken to maintain our mobility as we age.**	Preventing falls can be daunting, but it doesn't have to mean an entire home remodel or super strict exercise regime.	Share simple messages like, "Talk to your healthcare provider about your medications at your next appointment."; or "Invest in safe footwear!" as examples of things we can do can help break falls prevention into tangible activities. Use the Falls Free Wisconsin Coalition's Annual Media Engagement Calendar for additional ideas on how to message and frame falls prevention around simple steps and everyday activities year-round.

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How We Talk About Data Matters

Wisconsin has the country's highest death rate due to falls

> *Winter falls can turn deadly fast. Why Wisconsin seniors face a higher risk*

Wisconsin ranks first in the nation for fall-related deaths among elderly

> *Wisconsin leads nation in deadly falls among elderly as experts say it could get worse*

fallsfreewi.org/reframing-falls-prevention-toolkit/

Reframe the Narrative

New vibration technology helps Fond du Lac seniors improve strength and balance

Older adults can cut fall risk by over 30% with this Portage County program

Four ways to reduce your fall risk from medications

Wausau falls prevention resource fair to connect older adults with safety resources

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Try This Instead...

wiha Wisconsin Institute for Healthy Aging

Falls Free® Wisconsin

We can prevent falls as we age! Ask your healthcare provider for a falls risk assessment.

More than 1 in 4 older adults fall each year and less than half tell their doctor.

Your doctor can refer you to Physical or Occupational Therapy and other resources that can help us remain independent as we age.

fallsfreewi.org/reframing-falls-prevention-toolkit/

Reframing Imagery

Before



After



Why: Research shows that many older adults think that falls are something that happens to "other people". Instead of using images of people falling that older people may not resonate with, choose images of older adults that are active and connected to their communities and families.

Before



After



Why: The image on the left shows a solemn-looking older person who may not be happy about using their walker. The images on the right show active older people out and about and portrays the walker use in a positive light.

fallsfreewi.org/reframing-falls-prevention-toolkit/

Reframing Imagery

Before



After



Why: Older adults prefer real pictures instead of graphics. Additionally, the cane is being used incorrectly in the graphic image and portrays the person as more frail. Instead, share images where the older person is using the cane correctly.
Bonus tip: Findings from our key informant interviews suggest that images with walking sticks resonate more with tribal elders.

Before



After



Why: The image on the left shows an older adult appearing confused or frustrated while using a phone. Many older adults use technology to access helpful resources and stay connected. Choose positive images like the one on the right that better reflects this.

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Notes & Lessons Learned



It doesn't have to be all or nothing! If you don't have the time or capacity to develop an entirely new presentation or social media campaign, think about changing the little things - like changing the language to we/us from they/them, or starting with the ways we can prevent falls, not the crisis data.



Artificial Intelligence (AI) tools like ChatGPT or Microsoft Copilot can be helpful when reframing messaging and using plain language, but **should be used with caution**. Always double-check any messages reframed using AI.



Think about your target audience and message that should be portrayed. If you're advocating for funding for falls prevention, for example, start by sharing about the evidence-based ways in which falls can be prevented and the return on investment data.



Tailor messaging to your community. Consider holding key informant interviews with different groups of older adults in your service area to see what language and messages resonate with them.

fallsfreewi.org/reframing-falls-prevention-toolkit/

Resources

- FallsFreeWI.org & the Falls Free Wisconsin Coalition

- CDC STEADI (Stopping Elderly Accidents, Deaths & Injuries)
  - LIFE Fall Prevention Planning Tool

- National Council on Aging (NCOA)

Thank You!

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