LINDA LINGLE GOVERNOR OF HAWAII

CHIYOME L. FUKINO, M.D. DIRECTOR OF HEALTH



STATE OF HAWAII EXECUTIVE OFFICE ON AGING

NO. 1 CAPITOL DISTRICT 250 SOUTH HOTEL STREET, SUITE 406 HONOLULU, HAWAII 96813-2831 NOEMI PENDLETON DIRECTOR

> Telephone (808) 586-0100

Fax (808) 586-0185

House Committee on Human Services/Health

HR12 HCR15, Establishing a Hawaii State Fall Prevention Task Force to Develop a Statewide Approach to Reducing Falls Among Older Adults.

> Written Testimony of Noemi Pendleton Director of Executive Office on Aging Attached Agency to Department of Health

March 18, 2010

10:30 a.m., Conference Room 329

- 1 Department's Position: The Executive Office on Aging (EOA) is not able to support this bill
- 2 because of the state's changes and reductions in staff hours and resources; however at this time,
- 3 EOA is committed to helping reduce falls among older adults and appreciates the intent of this
- 4 bill.
- 5 **Fiscal Implications:** No appropriations; however, staff hours and resources are affected.
- 6 Purpose and Justification: The purpose of this Act is to develop a statewide approach to
- 7 reducing falls among older adults by investigating and examining the immediate and long-term
- 8 dangers of fall injuries on our senior population, examining the fiscal impact of senior falls on our
- 9 medical system and health care costs, and recommending appropriate interventions and prevention
- programs to reduce falls and health care costs associated with falls. Department of Health's Injury
- 11 Prevention Program and EOA continue to work within the community on senior fall prevention to
- develop resources and capacity at the community level. State and local partners together are

- 1 implementing evidence-based programs such as EnhanceFitness, Tai Chi for Health, and
- 2 Stanford's Chronic Disease Self-Management Program as the interventions that can be used as
- models statewide. Also, DOH is conducting a statewide needs assessment of senior fall
- 4 prevention programs and resources to better ascertain where strengths and/or gaps in service exist,
- 5 and to guide the development of future policies and programs. At this time, EOA regrets that it is
- 6 unable to support the establishment of a fall prevention task force due to the State's changes and
- 7 reductions in staff hours and resources.
- 8 Thank you for this opportunity to testify.

DEPARTMENT OF COMMUNITY SERVICES CITY AND COUNTY OF HONOLULU

715 SOUTH KING STREET, SUITE 311 ● HONOLULU, HAWAII 96813 ● AREA CODE 808 ● PHONE: 768-7762 ● FAX: 768-7792

MUFI HANNEMANN MAYOR



DEBORAH KIM MORIKAWA DIRECTOR

> ERNEST Y. MARTIN DEPUTY DIRECTOR

March 17, 2010

The Honorable John M. Mizuno, Chair and Members of the Committee on Human Services The Honorable Ryan I. Yamane, Chair and Members of the Committee on Health The House of Representatives State Capitol Honolulu, Hawaii 96813

Dear Chair Mizuno, Chair Yamane, and Members:

Subject: In Support of HR12 and HCR15

Establishing a Hawaii State Fall Prevention Task Force

The City and County of Honolulu's Elderly Affairs Division is Honolulu's designated Area Agency on Aging and operates in accordance with the Older Americans Act of 1965 to coordinate, advocate, and improve services to assist older persons in leading independent, meaningful, and dignified lives in their own homes and communities for as long as possible. We are in support of HR12 and HCR15, Establishing a Hawaii State Fall Prevention Task Force.

This resolution establishes a Hawaii State Fall Prevention Task Force to develop a statewide approach to reduce falls among older adults by investigating and examining the immediate and long-term dangers of fall injuries for our senior population. The Task Force should reveal the financial impact of falls by seniors on our health care system, and make recommendations on appropriate measures to address this issue.

We recognize the devastating impact that falls can create in the lives of senior citizens. We also recognize that falls are preventable, and are not an inevitable result of aging. There are many types of interventions, including balance screenings, medication reviews and vision examinations, that can help determine those seniors at risk of falling. We strongly support the passage of HR12 and HCR15 and the formation of the Task Force.

The Honorable John M. Mizuno, Chair and Members of the Committee on Human Services The Honorable Ryan I. Yamane, Chair and Members of the Committee on Health March 17, 2010 Page 2

Thank you for the opportunity to submit this testimony.

Sincerely,

Deborah Kim Morikawa

Director

Clzaletz Bether
Elizabeth Bethea

County Executive on Aging

Elderly Affairs Division

CY:ab hr12, hcr15 To:

The Honorable Representative John Mizuno, Chair The Honorable Representative Tom Brower, Vice Chair

Members for the Committee on Human Services

The Honorable Representative Ryan Yamane, Chair

The Honorable Representative Scott Y. Nishimoto, Vice Chair

Members of the Committee of Health

From:

Rose Nakamura, Administrator, Project Dana

Subject:

Testimony Supporting HR 12/ HCR 15 Establishing A Hawaii State

Fall Prevention Task Force to Develop A Statewide Approach To

Reducing Falls Among Older Adults.

I strongly support HR 12/HCR 15, Establishing a Hawaii State Falls Prevention Task Force to develop a statewide approach to reducing falls among older adults.

In Hawaii, it is important to note that 51% of deaths among elders are caused by falls occurring in the homes. One third of older adults age 65 and over fall each year. 30% - 40% of falls are preventable.

Project Dana, a volunteer caregiving program that provides assistance to homebound frail elderly, disabled persons and family caregivers addresses fall prevention and home safety. It has become a major concern.

The creation of a Task Force to increase the education and awareness of home safety and to create a safe home environment is imminent to enable older adults to continue to live independently at home and to enrich their lives as well as their families.

Thank you very much.



OCCUPATIONAL THERAPY ASSOCIATION OF HAWA!!

1360 S. Beretania St., Suite 301, Honolulu, Hawaii 96814

Written Only - Testimony by: Avis Sakata, OTR

HCR15/HR12, Establishing a Hawaii State Fall Prevention Task Force to Develop a Statewide Approach to Reducing Fall Among Older Adults.

House HLT Hearing – Thursday, March 18, 2010 Room 329 – 10:30 am

Position: Support

Chair Yamane, and Members of the House HLT Committee:

I am Avis Sakata, OTR and president of the Occupational Therapy Association of Hawaii, (OTAH), which represents 507 occupational therapists (OTs) licensed in Hawaii. OT's work in many settings throughout the State, including hospitals, schools, prisons, skilled nursing to private facilities and community-based programs.

Occupational Therapy is a science driven, evidenced-based profession that enables people of all ages, from infants to the elderly, to live life to its fullest by helping them promote health and prevent or live better with illness, injury or disability. Occupational Therapists are recognized members of the Healthcare Rehabilitation team which is comprised also of physicians, nurses, physical therapists, speech therapists, social workers and others. As a healthcare provider, OTs provide, but are not limited to: 1) assessment and evaluation of our patients/clients needs and development of an appropriate treatment plan, 2) interventions focused on daily living skills (including self-care), work readiness, play or educational performance skills, 3) and interventions that include sensorimotor, neuromuscular functioning, cognitive or psychosocial components.

OTAH supports this measure because OTs are part of the injury prevention and care team for older adults, their families and caregivers. As practioners, we provide valuable assessment, training and support to help older adults remain as independent as possible and injury-free. OT's are skilled in assessing and managing personal and environmental risk factors in all activities for older adults. We work with the client, family and/or caregivers to scan the home environment for hazards and to assess the individual for limitations that contribute to falls. Examples of potential hazards are stairs in need of repair, lack of handrails and grab bars, inadequate lighting, and rugs that are not affixed to the floor. Individual limitations can also include weakness, vision impairments and perceptual and cognitive disorders. When needed, we recommend home modifications, and or adaptive equipment that would decrease risk of falling.

We believe that an OTAH representative will contribute much to the proposed Task Force and offer our expertise on injury prevention for older adults. I can be reached at 522-4602 if further information is needed. Thank you for the opportunity to submit testimony.

Senate Committee on Human Services

HR12/HCR15 RELATING TO A FALL PREVENTION TASK FORCE

Testimony of Stan Michaels Semi-Retired

March 18, 2010 10:30 AM Conference Room 329

To the Honorable:

Human Services - Chair Rep. John Mizuno & Vice-Chair Rep. Tom Brower Health - Chair Rep. Ryan Yamane & Vice-Chair Rep. Scott Nishimoto

I wish to express my wholehearted support for the House Resolution 12 and House Concurrent Resolution 15 which calls for the formation of a high level Fall Prevention Task Force. Falls are the leading cause of deadly injuries of our Hawaii seniors. Plus, Hawaii leads the nation in longevity and as our seniors age the impact of fall injuries has begun to grow. Indeed, the Queen's Hospital Trauma department has reported that for the first time in their history, during the years 2008 and 2009, fall injuries has taken the lead as the number one cause for an emergency room visit, exceeding all other causes including automobile crash injuries and assaults.

The fact is we fall down all our lives. As a child, adolescent or adult...we often bounce. Our body is resilient...we are bruised but recover. We even break sometimes...but we mend when we are young and strong. But as a senior...the injury can be permanent. In fact, the leading cause of traumatic brain injury for seniors' is falls. An interesting fact found also at Queen's Emergency Trauma Department. They experience a spike in fall injuries during mango and lychee season. The direct result of seniors climbing the same trees they have been climbing for maybe 20 or 30 years but now when they fall they get severely injured.

The most heinous result of a senior fall injury is the loss of independence experienced by the majority of seniors that are injured in a fall. Once a senior has been injured in a fall, they grow to fear falling...so much so that they stop doing the things that they enjoyed, they stop going out...many won't even go shopping for groceries. They lose their independence, and even more important they lose their ability to socialize and stay viable. For many pneumonia is a direct result because of the lack of exercise or movement because of their fear of falling.

Page 2, March 18, 2010
Testimony of Stan Michaels, In support of HR12/HCR15

Many of our fellow citizens can tell the story of a friend that fell, was injured, stopped interacting, didn't go to McDonalds for morning coffee anymore, then passed away from pneumonia...but the death was caused by the fall.

However falls are preventable and are not inevitable due to aging. There are many types of interventions including balance screenings, medication reviews, and vision examinations that can help determine those seniors at risk of falling. Once risk is determined there are fall prevention programs that are qualified as best practice, like tai chi, especially when incorporated with other types of exercise.

HR12/HCR15 includes key recommendations for:

- investigating the most effective means to enhance public awareness that falls are preventable,
- reviewing the potential for increasing the availability of fall prevention programs statewide for caregivers and the elderly, and
- to investigate the best way to expand the roles of medical and health care professionals in screening, educating and referring the elderly to fall prevention programs.

I strongly support the formation of the task force and the passage of HR12/HCR15, and thank you for the opportunity to testify.

Sincerely,

Stan Michaels