On December 5-6, 2007, more than 140 invited stakeholders from various fields gathered in Long Beach, California to map out next steps on how California can better address the serious problem of falls in a rapidly growing older population. Organized by the Fall Prevention Center of Excellence (FPCE), the invitational 2007 California Fall Prevention Summit: Progress, Challenges & Next Steps was supported by the Archstone Foundation and The California Wellness Foundation. Participants included representatives of California’s Area Agencies on Aging (AAAs), health, housing and social service providers, local and state government agencies, universities, and foundations, as well as consumer advocacy organizations and the media. The 2007 Summit was a follow up meeting to the highly successful conference, The California Blueprint for Fall Prevention, held in Sacramento in 2003.

The Summit goals were to:

- increase knowledge about state of the art fall prevention efforts;
- develop strategies to sustain and replicate promising fall prevention programs; and
- generate recommendations to improve policies in the areas of Community Programs, Education and Training, Health Care, Healthy Lifestyles and Recreation, and Safe Housing and Communities.

The Summit’s Steering and Advisory Committees, comprising a diverse group of invited fall prevention experts, defined the Summit’s purpose as sharing the latest developments in the field and engaging participants in crafting policy recommendations and strategies to accelerate the development of a fall prevention infrastructure. The Committees helped select work group topics, identified guest speakers and invitees, and reviewed draft recommendations. Committee members (see appendices 3 and 4) participated enthusiastically in the Summit’s eight month planning phase that involved evaluation and revisions of specific Summit elements and ended with a final assessment of the agenda.

Several experts in the field presented at the Summit: Ileana Arias, PhD, (Centers for Disease Control and Prevention); Lynn Beattie, MPT, MHA, (National Council on Aging); the Honorable Lynn Daucher (California Department of Aging); Linda Hale, RN (Wisconsin Department of Health and Family Services); State Senator Alan Lowenthal, PhD; Vicky Scott, PhD (British Columbia Ministry of Health, Population Health and Wellness); and Fernando Torres-Gil, PhD (University of California, Los Angeles). They offered their perspectives on the problem of falls and recommendations about next steps for fall prevention and management.

The kick-off event of the Summit was a “fun and easy 3K walk” along the Long Beach Boardwalk led by Debra Rose, PhD, FPCE Co-Director and Co-Director of the Center for Successful Aging at California State University, Fullerton and her staff. She also provided informational materials and safety tips, one-on-one instruction on how to use walking poles, and a free pedometer. Another Summit highlight was an evening reception. A number of Summit participants presented posters about their programs, thereby offering additional opportunity for networking, and sharing of knowledge and information on fall prevention (Appendix 9).
The major work at the Summit took place in interactive groups in which participants developed policy recommendations in five essential areas related to falls. After rigorous effort and spirited discussions, 18 policy recommendations emerged, along with strategies and practical action steps for implementation. Selected policy recommendations include:

1. **Recommend that the California Department of Aging (CDA) and the Area Agencies on Aging (AAAs) incorporate fall prevention in their upcoming master state and local area plans.**

2. **Improve California's ability to gather accurate information on falls from multiple data sources by developing a standard definition and set of reporting methods for falls from all relevant sources at state and local levels.**

3. **Educate older consumers and their family caregivers about their crucial role in fall prevention and management through the statewide network of Caregiver Resource Centers and Public Authorities.**

4. **Develop, publicize and maintain a list/directory of well-rounded local community-based exercise programs and classes for older adults (from healthy to frail) that incorporate exercises to improve muscle strength and endurance, balance, mobility, and flexibility for fall prevention.**

5. **Train physicians, nurse practitioners, nurses, and physician assistants on evidence-based practice guidelines (e.g., American Geriatrics Society, Assessing Care of Vulnerable Elders (ACOVE)) for fall risk assessment and management to ensure their incorporation into all primary care settings serving older adults.**

6. **Include fall prevention guidelines in state and local planning documents related to overall development (e.g., city general plans), aging services, housing, parks/recreation, transportation, circulation, street/sidewalk repair and emergency/disaster.**

Major cross-cutting recommendations focused primarily on developing more effective public awareness campaigns, education and training, and disseminating fall prevention information:

- Institute a statewide Fall Prevention Awareness Week, with a Governor’s proclamation, press events and public awareness activities.

- Establish a permanent statewide fall prevention task force that includes the Departments of Aging, Public Health, Health Care Services, Housing and Transportation, to coordinate state-level programs and activities.

- Convene a statewide fall prevention Summit every three years.

- Develop and widely disseminate culturally appropriate fall prevention information to organizations serving older adults (e.g., hospitals, libraries, parks and recreation, religious entities, and senior/community centers).

The 18 Summit policy recommendations and 4 cross-cutting recommendations were presented to the California Commission on Aging (CCoA) during an informational hearing on December 7, 2007 (see Appendix 6). The Commissioners were enthusiastic about Summit goals and outcomes, and they agreed to support fall prevention as a key public health issue.