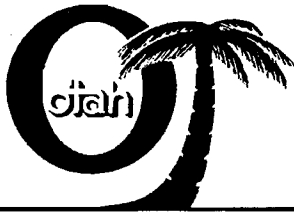


**SR 23**



**OCCUPATIONAL THERAPY ASSOCIATION OF HAWAII**

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

**Testimony by: Avis Sakata, OTR**

**SCR 32/SR 23, Establishing a Hawaii State Fall Prevention Task Force to Develop a Statewide Approach to Reducing Fall Among Older Adults.**

**Senate HMS Hearing – Tues. Feb. 16, 2010  
Room 016 – 1:15 pm**

**Position: Support**

Chair Chun Oakland, and Members of the Senate HMS 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**

**SCR 32/SR 23 RELATING TO A FALL PREVENTION TASK FORCE**

**Testimony of Stan Michaels  
Semi-Retired**

**February 16, 2010  
1:15 pm to 2:00 pm  
Conference Room 016**

To the Honorable:  
Senator Suzanne Chun Oakland, Chair  
Senator Les Ihara, Jr., Vice Chair

I wish to express my wholehearted support for the Senate Concurrent Resolution 32 which calls for the formation of a high level Fall Prevention Task Force. Falls is 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 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.

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.

SCR32 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 SCR32, and thank you for the opportunity to testify.

Sincerely,

Stan Michaels

TO: COMMITTEE ON HUMAN SERVICES  
Senator Suzanne Chun Oakland, Chair  
Senator Les Ihara, Jr., Vice Chair

FROM: Eudice R. Schick  
PABEA (Policy Advisory Board for Elder Affairs)

SUBJECT: SR 23 Hawaii State Fall Prevention Task Force

HEARING: Tuesday, February 16, 2010 1:15 p.m. room 016

POSITION: Support of SR 23

I am offering testimony on behalf of PABEA, the Policy Advisory Board for Elder Affairs, which is an appointed Board tasked with advising the Executive Office on Aging (EOA). My testimony does not represent the views of the EOA but of the Board.

The creation of a Hawaii State Fall Prevention Task Force that shall be tasked with the development of ideas and guidelines on preventing falls and, more important, possibly save lives speaks for itself. Anything that can be done to save someone, especially our seniors, from what could be a devastating fall and life threatening event is certainly worthwhile. The mandate of the make-up of the Task Force offers a great deal of experience and knowledge.

Your support of this resolution is a support for our entire community.

Eudice R. Schick, Chair PABEA