Date:

Dear (Representative or Senator [LastName]),

I am a current member of (Insert EMS agency name). I am writing to express my concern for older adults who reside in my community falling into the cracks which exist in our current healthcare system. The geriatric population most likely to call 911 for falling. Ten thousand baby boomers are expected to turn 65 years old each day between the years 2017-2030 (Wick, 2017). Falls account for 40% of hospitalizations of adults 65 years and older and are the leading cause of injury in this age group (Quatman, Mondor, Halweg, & Switzer 2018). Currently, there is not a good system in place for fall prevention education or home safety. Patients can refuse medical care and transport if they are mentally competent. Documentation from EMS does not reach the patient's primary physician unless they are taken to the emergency room to be evaluated. This means your older adult constituents can fall multiple times, and unless they tell their physician, their physician would not know otherwise. Further, EMS continue to respond to the calls for emergency made by these individuals, often addressing the same issue – falls and unsafe home environments. These calls can take EMS providers away from other emergency situations which may arise in our communities.

At present, (Insert EMS agency name), we are in the process of implementing a new protocol where we provide handouts on fall prevention to every patient who is older than 60 years of age and has fallen. When our department is called to the same address for a second fall, we ask the patient to sign a release of information form that will permit us to contact our local Aging and Disabilities Resource Center (ADRC) on their behalf. The Aging and Disabilities Resource Center is a great resource and will help them obtain other resources to prevent future falls. (Insert EMS agency name) will be requesting the ADRC work to try and have each patient evaluated for home safety evaluation by an occupational therapist.

We believe these patients deserve better than what we are currently able to provide. Our documentation database should be linked to their primary physician so that if a doctor gets flagged that a patient has fallen more than once the physician can take appropriate action. A home evaluation conducted by an occupational therapist should be provided as a basic standard of care to each patient who falls more than once. Occupational therapists have a specific skill to assist with this issue, however people lack the ability to refer or the knowledge to seek out occupational therapy services. Home evaluations by an occupational therapist evaluate how a person interacts with their home environment and what safety hazards prevent them from being successful within the home environment. These assessments have the potential to assist individuals in remaining in their home and can provide cost savings by decreasing EMS calls and possibly hospitalizations.

First responders play an essential role in every community, but we can also play a huge role in fall prevention and at-home safety of our elderly patients. As the statistics show above, this problem will only grow as the baby boomer generation ages. I believe there should be legislation in place where doctors are flagged by first responder’s documentation and that every patient who falls more than once and is 60 years or older receives a home evaluation done by an occupational therapist.

If you would like to learn more about this topic and the research behind the need for further legislation, please visit the Stoddard Bergen Fire Departments' website and find the Fall Prevention Presentation. To find this presentation, click on the community resource tab and then fall prevention.

Sincerely,

(Insert Your Name)

Proud member of (insert your ems agency)