Course Abstract
This continuing education course provides occupational therapy practitioners, particularly those working with community-dwelling older adults, with pertinent information regarding falls and fear of falling. It addresses multi-faceted fall risk factors, clinical practice guidelines, and strategies for use in implementing evidence-based screenings, evaluations, and interventions for both fall risk and fear of falling. Throughout, it references the American Geriatrics Society/British Geriatrics Society Clinical Practice Guideline: Prevention of Falls in Older Persons (American Geriatrics Society and British Geriatrics Society, 2010), the Stopping Elderly Accidents, Deaths, and Injuries program (Centers for Disease Control, 2016a; 2016b; 2013), the Occupational Therapy Practice Framework, 3rd edition (American Occupational Therapy Association, 2014), and the goals of the Falls Free®: 2015 National Falls Prevention Action Plan.

Target audience: Occupational Therapists, Occupational Therapy Assistants (no prerequisites).

NOTE: Links provided within the course material are for informational purposes only. No endorsement of processes or products is intended or implied.

Learning Objectives
At the end of this course, learners will be able to:

• Recall statistics related to falls and fear of falling
• Identify intrinsic and extrinsic fall and fear of falling risk factors
• Recognize the applicability of key elements of the Stopping Elderly Accidents, Deaths, and Injuries (STEADI) toolkits to occupational therapy practice
• Differentiate between the intervention ratings recommended by the American Geriatrics Society/British Geriatrics Society Clinical Practice Guideline: Prevention of Falls in Older Persons
• Recognize the components of a multifactorial fall risk assessment and related interventions
Timed Topic Outline
I. Introduction (20 minutes)
II. Risk Factors (5 minutes)
III. Clinical Practice Guidelines (15 minutes)
IV. Multifactorial Fall Risk Assessment and Related Interventions (120 minutes)
V. Conclusion, Additional Resources, References, and Exam (20 minutes)

Delivery & Instructional Method
Distance Learning – Independent. Correspondence/internet text-based self-study, including a provider-graded multiple choice final exam.

To earn continuing education credit for this course, you must achieve a passing score of 80% on the final exam.

Registration & Cancellation
Visit www.pdhtherapy.com to register for online courses and/or request correspondence courses.

As PDH Academy offers self-study courses only, provider cancellations due to inclement weather, instructor no-shows, and/or insufficient enrollment are not concerns. In the unlikely event that a self-study course is temporarily unavailable, already-enrolled participants will be notified by email. A notification will also be posted on the relevant pages of our website.

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Accessibility and/or Special Needs Concerns?
Contact Customer Service by phone at (888)564-9098 or email at support@pdhacademy.com.

Course Author Bio & Disclosure
Dr. Jane Painter-Patton, EdD, OTR/L, FAOTA, has 40 years of experience working with older adults. Recently retired as a professor at East Carolina University’s Occupational Therapy Department, she is currently working at a local private practice serving older adults and those with developmental disabilities in the community. She serves on the North Carolina Falls Prevention Coalition and Eastern North Carolina Falls Coalition, and is a Board member of the North Carolina Injury and Violence Prevention Council.

Her interests, presentations, and publications focus on geriatric community-based therapy (fall prevention, fear of falling, and home safety). She is a certified Arthritis Foundation Tai Chi instructor, is a Master Trainer for both A Matter of Balance and the American Occupational Therapy Association’s Fieldwork Educator Certificate program, and has certification in the Interactive Metronome.

DISCLOSURES: Financial – Jane Painter-Patton received a stipend as the author of this course. Nonfinancial – No relevant nonfinancial relationship exists.