provider resources to link clinical practice with three community programmes: *Tai chi: Moving for Better Balance*, *Stepping On*, and the *Otago Exercise Programme*.

Significance/Contribution to the Field People aged ≥ 65 years are the fastest growing segment of the US population and are particularly vulnerable to falls and fall injuries. To reduce falls, we need a comprehensive approach that incorporates fall prevention into routine clinical practice and links health care practice to community-based fall prevention programmes.

Concurrent D: Older Adult Falls

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CURRENT FALL PREVENTION ACTIVITIES AT THE US CENTERS FOR DISEASE CONTROL AND PREVENTION

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J Stevens*. *Centers for Disease Control and Prevention, Atlanta, Georgia, USA*

Background Falls are the leading cause of both fatal and nonfatal injuries among adults aged ≥ 65 years. In the US in 2009, older adult falls resulted in 20 422 deaths and 2.2 million emergency department visits. Fortunately, research has identified a number of effective falls interventions.

Aims/Objectives/Purpose To better understand how to encourage widespread adoption of evidence-based fall prevention programmes.

Method The National Center for Injury Prevention and Control (NCIPC) at the US Centers for Disease Control and Prevention (CDC) is addressing falls using a four-step public health model. Current work focuses on step four, translating effective interventions into community-based programmes for widespread adoption. To clarify this process, a pilot project was conducted in which four state health departments implemented two evidence-based effective programmes: *Tai chi: Moving for Better Balance* and *Stepping On*.

Results/Outcomes The pilot project revealed that older adults with differing functional levels need a choice of community programmes, and that community programmes must be linked to clinical practice. CDC is incorporating these lessons into our current activities, which include disseminating newly developed healthcare