



CONNECTICUT

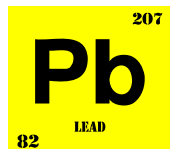
The **Preventive Health and Health Services (PHHS) Block Grant** provides funding for health problems in Connecticut that range from childhood lead poisoning prevention to youth violence and suicide prevention. PHHS Block Grant dollars fund eight different Connecticut health programs.

PHHS Block Grant funds allow Connecticut to use dollars **where** we need them, **when** we need them to protect the public's health. Connecticut focuses the majority of its PHHS Block Grant funds on education and community programs, heart disease and stroke, emergency medical services, and injury prevention. Programs that serve our state's unique health needs through the PHHS Block Grant include the following:



Coronary Heart Disease—Cardiovascular Disease Prevention

PHHS Block Grant funds are used to conduct screening and education programs aimed at reducing the death rate due to coronary heart disease per 100,000 to 166 by 2009. By 2002, the death rate due to coronary heart disease per 100,000 was 153. This death rate is already better than the 2009 target rate.



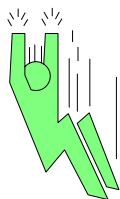
Blood Lead—Childhood Lead Poisoning Prevention

PHHS Block Grant funds are used to support programs in six local health departments aimed at reducing the prevalence of lead poisoning through screening, education and risk reduction, case management and follow-up. In 2004, 2.17% of children under the age of six that were tested had blood lead levels greater than or equal to 10 $\mu\text{g}/\text{dL}$, the level that triggers family education to reduce the likelihood that levels will continue to increase. Children with blood lead levels greater than or equal to the toxic level of 20 $\mu\text{g}/\text{dL}$ made up 0.43% of children under the age of six.



Youth Violence/Suicide Prevention Programs

In two Connecticut regions, PHHS Block Grant funds are used to sponsor education, awareness, and skill-building violence prevention programs in predominantly urban communities, as well as suicide prevention programs among adult and elder populations. The rate of arrests for aggravated assault among Connecticut youth ages 10–18 years has decreased from 2.41 per 1,000 youth in 2001 to 1.99 per 1,000 in 2003. In Connecticut, deaths from suicide outnumber homicide deaths with the highest rates from 2000–2004 among adults ages 40–64. During this period, the overall suicide rate was 8.1 per 100,000 with 1,395 deaths. Elders over the age of 85 have a rate of 11.1 per 100,000 with 40 deaths during that same period.



Community Health Promotion Programs—Older Adult Fall-Related Injuries

PHHS Block Grant funds are used to allow local health departments to conduct home safety assessments and provide safety supplies, fall prevention seminars, medication safety reviews, and fall prevention exercise classes for older adults. Pre- and post-evaluations found that 50% of program participants reported falls during the year preceding the visit, while only 3% reported falls at the time of follow-up. Of the participants in fall prevention exercise programs, 89% reported continuing to exercise after the program ended.

Connecticut Department of Public Health

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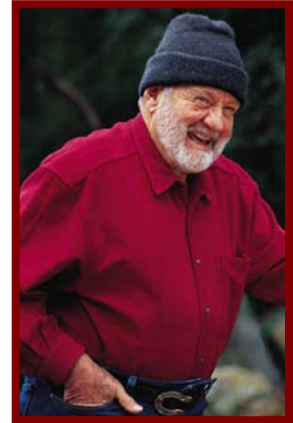
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Connecticut Seniors Standing Tall: How PHHS Block Grant Funds are Preventing Falls

Issue:

More than any other preventable cause, falls cause more older adults in Connecticut to lose their independence and be placed in nursing homes. Falls can also lead to hospitalization and possibly death, costing the state millions of dollars. In Connecticut—

- Falls are responsible for approximately 11,000 hospitalizations each year (2002 Connecticut Registration Report).
- Average direct medical cost per hospitalization is \$12,000.
- 70% of fall-related hospitalizations are among persons aged 65 years and older.
- Older adults have a death rate due to falls that is six times that of the state's average death rate.
- At least 30% of community-dwelling adults aged 65 years and older will fall each year.



Intervention:

The Connecticut Department of Public Health's Injury Prevention Program works with local health departments to implement community fall prevention programs for older adults. Local health departments receive an annual allocation from the Preventive Health and Health Services (PHHS) Block Grant to address community health needs, including fall prevention. Each year, three to six local health departments conduct fall prevention programs. Fall prevention activities funded under the PHHS Block Grant focus on decreasing home hazards, improving strength and balance through exercise programs, reducing medication interactions, and increasing awareness of fall risks and prevention among older adults and their families.

- Local health departments, usually in collaboration with home health care agencies, conduct home safety visits to identify fall hazards, such as slipping and tripping hazards, inadequate lighting, and lack of grab bars or railings.
- Home visitors provide safety supplies, such as non-slip mats, night lights, tub chairs and rubber cane tips to older adult participants.
- Home visitors also provide education on how to prevent falls and work with older adults and family members to correct hazards.
- Fall prevention presentations and medication safety reviews, which check prescription and over-the-counter medicines for possible interactions that could lead to falls, are provided in senior centers, housing complexes and other settings.
- Exercise classes for older adults focus on improving strength, balance and flexibility are offered in 4- to 6-week sessions at senior centers and housing sites.

Impact:

PHHS Block Grant funding enables the Department of Public Health and local health agencies to provide critical fall prevention services to older adults in their communities. The PHHS Block Grant is the only funding source to many local health agencies to provide these services, which can prevent nursing home admissions, reduce health care costs, and help Connecticut's older residents remain active and independent members of society. Results from the past four years include the following:

- More than 550 home safety visits were conducted for older adults, and at least 77% of identified fall hazards were corrected on visits.
- 50% of the home safety visit recipients reported falling during the year prior to the visit, while only 3% reported falling at the four-month follow-up after the visit.
- At least 370 older adults participated in exercise classes, with 89% reporting that they continue to exercise at end of program.
- Approximately 900 persons participated in fall prevention seminars or medication safety review programs. Approximately 87% were able to identify fall risk factors and 79% reported taking action to reduce their fall risks as a result of the programs.

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