

Union Calendar No. 351

110TH CONGRESS
2^D SESSION

H. R. 3701

[Report No. 110-569]

To amend the Public Health Service Act to direct the Secretary of Health and Human Services to intensify programs with respect to research and related activities concerning falls among older adults.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 27, 2007

Mr. PALLONE (for himself and Mr. HALL of Texas) introduced the following bill; which was referred to the Committee on Energy and Commerce

APRIL 8, 2008

Reported with an amendment, committed to the Committee of the Whole House on the State of the Union, and ordered to be printed

[Strike out all after the enacting clause and insert the part printed in italics]

[For text of introduced bill, see copy of bill as introduced on September 27, 2007]

A BILL

To amend the Public Health Service Act to direct the Secretary of Health and Human Services to intensify programs with respect to research and related activities concerning falls among older adults.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 *This Act may be cited as the “Safety of Seniors Act*
3 *of 2008”.*

4 **SEC. 2. AMENDMENTS TO THE PUBLIC HEALTH SERVICE**
5 **ACT.**

6 *Part J of title III of the Public Health Service Act*
7 *(42 U.S.C. 280b et seq.) is amended—*

8 *(1) by redesignating section 393B (as added by*
9 *section 1401 of Public Law 106–386) as section 393C*
10 *and transferring such section so that it appears after*
11 *section 393B (as added by section 1301 of Public Law*
12 *106–310); and*

13 *(2) by inserting after section 393C (as redesign-*
14 *ated by paragraph (1)) the following:*

15 **“SEC. 393D. PREVENTION OF FALLS AMONG OLDER ADULTS.**

16 **“(a) PUBLIC EDUCATION.—The Secretary may—**

17 *“(1) oversee and support a national education*
18 *campaign to be carried out by a nonprofit organiza-*
19 *tion with experience in designing and implementing*
20 *national injury prevention programs, that is directed*
21 *principally to older adults, their families, and health*
22 *care providers, and that focuses on reducing falls*
23 *among older adults and preventing repeat falls; and*

24 *“(2) award grants, contracts, or cooperative*
25 *agreements to qualified organizations, institutions, or*
26 *consortia of qualified organizations and institutions,*

1 *specializing, or demonstrating expertise, in falls or*
2 *fall prevention, for the purpose of organizing State-*
3 *level coalitions of appropriate State and local agen-*
4 *cies, safety, health, senior citizen, and other organiza-*
5 *tions to design and carry out local education cam-*
6 *paigns, focusing on reducing falls among older adults*
7 *and preventing repeat falls.*

8 “(b) *RESEARCH.*—

9 “(1) *IN GENERAL.*—*The Secretary may—*

10 “(A) *conduct and support research to—*

11 “(i) *improve the identification of older*
12 *adults who have a high risk of falling;*

13 “(ii) *improve data collection and anal-*
14 *ysis to identify fall risk and protective fac-*
15 *tors;*

16 “(iii) *design, implement, and evaluate*
17 *the most effective fall prevention interven-*
18 *tions;*

19 “(iv) *improve strategies that are prov-*
20 *en to be effective in reducing falls by tai-*
21 *loring these strategies to specific popu-*
22 *lations of older adults;*

23 “(v) *conduct research in order to maxi-*
24 *mize the dissemination of proven, effective*
25 *fall prevention interventions;*

1 “(vi) intensify proven interventions to
2 prevent falls among older adults;

3 “(vii) improve the diagnosis, treat-
4 ment, and rehabilitation of elderly fall vic-
5 tims and older adults at high risk for falls;
6 and

7 “(viii) assess the risk of falls occurring
8 in various settings;

9 “(B) conduct research concerning barriers
10 to the adoption of proven interventions with re-
11 spect to the prevention of falls among older
12 adults;

13 “(C) conduct research to develop, imple-
14 ment, and evaluate the most effective approaches
15 to reducing falls among high-risk older adults
16 living in communities and long-term care and
17 assisted living facilities; and

18 “(D) evaluate the effectiveness of community
19 programs designed to prevent falls among older
20 adults.

21 “(2) *EDUCATIONAL SUPPORT.*—*The Secretary,*
22 *either directly or through awarding grants, contracts,*
23 *or cooperative agreements to qualified organizations,*
24 *institutions, or consortia of qualified organizations*
25 *and institutions, specializing, or demonstrating ex-*

1 *expertise, in falls or fall prevention, may provide pro-*
2 *fessional education for physicians and allied health*
3 *professionals, and aging service providers in fall pre-*
4 *vention, evaluation, and management.*

5 *“(c) DEMONSTRATION PROJECTS.—The Secretary may*
6 *carry out the following:*

7 *“(1) Oversee and support demonstration and re-*
8 *search projects to be carried out by qualified organi-*
9 *zations, institutions, or consortia of qualified organi-*
10 *zations and institutions, specializing, or dem-*
11 *onstrating expertise, in falls or fall prevention, in the*
12 *following areas:*

13 *“(A) A multistate demonstration project as-*
14 *sessing the utility of targeted fall risk screening*
15 *and referral programs.*

16 *“(B) Programs designed for community-*
17 *dwelling older adults that utilize multicompo-*
18 *nent fall intervention approaches, including*
19 *physical activity, medication assessment and re-*
20 *duction when possible, vision enhancement, and*
21 *home modification strategies.*

22 *“(C) Programs that are targeted to new fall*
23 *victims who are at a high risk for second falls*
24 *and which are designed to maximize independ-*
25 *ence and quality of life for older adults, particu-*

1 *larly those older adults with functional limita-*
2 *tions.*

3 “(D) *Private sector and public-private part-*
4 *nerships to develop technologies to prevent falls*
5 *among older adults and prevent or reduce inju-*
6 *ries if falls occur.*

7 “(2)(A) *Award grants, contracts, or cooperative*
8 *agreements to qualified organizations, institutions, or*
9 *consortia of qualified organizations and institutions,*
10 *specializing, or demonstrating expertise, in falls or*
11 *fall prevention, to design, implement, and evaluate*
12 *fall prevention programs using proven intervention*
13 *strategies in residential and institutional settings.*

14 “(B) *Award 1 or more grants, contracts, or coop-*
15 *erative agreements to 1 or more qualified organiza-*
16 *tions, institutions, or consortia of qualified organiza-*
17 *tions and institutions, specializing, or demonstrating*
18 *expertise, in falls or fall prevention, in order to carry*
19 *out a multistate demonstration project to implement*
20 *and evaluate fall prevention programs using proven*
21 *intervention strategies designed for single and multi-*
22 *family residential settings with high concentrations of*
23 *older adults, including—*

24 “(i) *identifying high-risk populations;*

25 “(ii) *evaluating residential facilities;*

1 “(iii) conducting screening to identify high-
2 risk individuals;

3 “(iv) providing fall assessment and risk re-
4 duction interventions and counseling;

5 “(v) coordinating services with health care
6 and social service providers; and

7 “(vi) coordinating post-fall treatment and
8 rehabilitation.

9 “(3) Award 1 or more grants, contracts, or coop-
10 erative agreements to qualified organizations, institu-
11 tions, or consortia of qualified organizations and in-
12 stitutions, specializing, or demonstrating expertise, in
13 falls or fall prevention, to conduct evaluations of the
14 effectiveness of the demonstration projects described in
15 this subsection.

16 “(d) *PRIORITY*.—In awarding grants, contracts, or co-
17 operative agreements under this section, the Secretary may
18 give priority to entities that explore the use of cost-sharing
19 with respect to activities funded under the grant, contract,
20 or agreement to ensure the institutional commitment of the
21 recipients of such assistance to the projects funded under
22 the grant, contract, or agreement. Such non-Federal cost
23 sharing contributions may be provided directly or through
24 donations from public or private entities and may be in

1 *cash or in-kind, fairly evaluated, including plant, equip-*
2 *ment, or services.*

3 “(e) *STUDY OF EFFECTS OF FALLS ON HEALTH CARE*
4 *COSTS.—*

5 “(1) *IN GENERAL.—The Secretary may conduct*
6 *a review of the effects of falls on health care costs, the*
7 *potential for reducing falls, and the most effective*
8 *strategies for reducing health care costs associated*
9 *with falls.*

10 “(2) *REPORT.—If the Secretary conducts the re-*
11 *view under paragraph (1), the Secretary shall, not*
12 *later than 36 months after the date of enactment of*
13 *the Safety of Seniors Act of 2008, submit to Congress*
14 *a report describing the findings of the Secretary in*
15 *conducting such review.”.*

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