



FALL PREVENTION INITIATIVE

EL PASO FIRE DEPARTMENT, BORDER REGIONAL
ADVISORY COUNCIL ON TRAMA AND PASO DEL
NORTE HEALTH INFORMATION EXCHANGE

DATA PERIOD: OCTOBER 2024 – JUNE 2025



EL Paso Fire Department Mission Statement

Provide exceptional services that support a safe, healthy, and resilient community.

Fall Prevention Initiative

- Advances EPFD's commitment to protecting vulnerable residents in their home environment.
- Reduces preventable injuries and improves community health outcomes.
- Strengthens regional safety through proactive, data-driven interventions.



The Impact of Falls

- Falls are the leading cause of fatal and non-fatal injury in adults 65+.
- Same-level falls are the top injury mechanism; nearly 1 in 5 cause serious harm.
- Over 3 million older adults visit U.S. Emergency Departments, ED each year for fall injuries.
- Rising fall-mortality rates highlight the need for community-based prevention.



Fall Prevention Initiative

EMS

Community members transported to Emergency Department by EMS for fall-related encounter.

Start

PHIX

PHIX assesses EMS hospital transports and identifies potential candidates for MIH Fall Prevention Program. Qualifying criteria includes:

- ED visit for same level fall.
- Patient age > or = 65 years old.
- Patient departed from Emergency Department and did NOT become inpatient.
- Patient did NOT live in a nursing home or rehab facility.

A secure report is sent to the City of El Paso Fire Department's Mobile Integrated Health (MIH) team.

**Mobile
Integrated
Health**

- 100% of patients eligible for services are contacted for potential enrollment in the MIH fall prevention program.
- MIH conducts a home visit to collect consent, assess patient needs, document vitals and patient specific factors that may be causing falls.
- Participants receive fall risk education and may receive interventions like grab bars, ramps, night lights, lock boxes, vials of life, and more to prevent new falls.

PHIX

- Analyzes rates of return-to Emergency Department for patients enrolled in the Senior Falls program.



Home Safety Findings & Immediate MIH Interventions

- Home evaluations consistently identify preventable hazards such as poor lighting, cluttered pathways, loose rugs, and unsafe bathroom transfer areas.
- MIH team often found fall risk from poor equipment placement, mobility limits, and equipment or clutter obstructing safe ambulation.
- Immediate interventions include installing grab bars, rails, and stability equipment, reorganizing pathways, and providing targeted fall-prevention education.
- Modifications identified improved client safety.



Client Status Categories

- MIH categorizes each referred client based on service completion, clinical progress, and repeat-fall outcomes.
- Serviced: received home visit assessment, safety review, education, and intervention as indicated.
- Graduate: demonstrated stability with no repeat falls or ED visits within 30 days following MIH intervention.
- Non-Graduate: experienced a repeat fall, ED visit, or unable to complete follow-up.
- These status categories allow MIH to track fall-prevention effectiveness and evaluate patient response.



Client Engagement & Service Outcomes

- MIH attempted contact within 72 hrs. with all referred fall-risk clients, resulting in strong engagement across the region.
- 242 clients received full MIH service, including assessment, education, and safety interventions.
- Engagement tracking helps identify outreach challenges and guides improvements in referral pathways and follow-up processes.



Data Results



Eligible-Unable/No Participation

Eligible Participants	
3,142	
% with Repeat ED Visits within 30 Days	% with Repeat ED Visits within 90 Days
3.28%	4.67%
% with Inpatient Visit within 30 Days	% with Inpatient Visit within 90 Days
5.58%	6.56%



Participants

Enrolled/Served Participants	
242	
% with Repeat ED Visits within 30 Days	% with Repeat ED Visits within 90 Days
1.65%	2.48%
% with Inpatient Visit within 30 Days	% with Inpatient Visit within 90 Days
3.72%	3.72%



System Value & Regional Impact

- Reduces preventable ED visits and 30-day readmissions through early home-based intervention.
- Improves safety, continuity of care, and post-discharge recovery with coordinated assessments and medication review.
- Strengthens regional collaboration through aligned referrals, shared data, and unified quality-improvement efforts.
- Lowers system-wide demand by decreasing trauma frequency, avoidable transports, and 911 calls.



El Paso Fire Department Mobile Integrated Health Team



References

- Centers for Disease Control and Prevention (CDC) – Falls & Injury Data
- National Council on Aging – Falls & Aging Statistics
- American Geriatrics Society – Fall-Risk Assessment Guidelines
- AHRQ – Evidence-Based Home Safety Interventions
- EPFD MIH Policies, Clinical Guidelines & Fall-Prevention Initiative Reports
- Pulsara & First Due – MIH Reporting and Care Coordination Platforms