



U-TURN



FRAIL Training Course on STEADI Fall Risk Screening and Prevention Methods



Developed by the FRAIL (Fall Risk & Adult Intervention Linkages) Team¹
at Iowa State University in collaboration with the Iowa Community HUB

Background:

Preventing falls in older adults is a critical public health priority. Approximately 1 in 4 older adults falls each year and the consequences of falling can be significant as many older adults are frail and more susceptible to fractures. Many older adults lose independence and quality of life after suffering a fall so major emphasis in public health is on identifying risk factors. The CDC has developed a formalized protocol called STEADI (Stopping Elderly Accidents, Deaths, and Injuries) that is an evidence-based strategy and approach for fall risk screening. The use of STEADI offers a standardized approach to falls prevention,¹ but barriers to utilization have limited impact.²⁻⁴ Updated recommendations have called for team-based approaches and a modified screening process to increase intervention referrals⁵

CDC has released materials and tools to facilitate use, but supplemental training and capacity-building support may be needed to facilitate adoption and maintenance of effective implementation strategies. Through a CDC-funded trial, we developed and tested an integrated training model called FRAIL© (Fall Risk & Adult Intervention Linkages) that facilitates effective STEADI screening and referral in clinic and community settings.

Overview of Online Course:

The online course is designed as a self-guided introductory exposure to the STEADI fall risk screening protocols as well as an overview of fall prevention programming. The course includes four integrated modules. Each lesson includes guided video-based presentations, links to videos and training resources and a knowledge test that evaluates learning. Collectively, the training provides a complete and integrated package that provides foundational training in fall risk screening and prevention. Details on the 4 modules are provided below:

- Module 1:
 - Provides a background on risk factors for falls and the importance of falls prevention methods
- Module 2:
 - Provides an overview of the STEADI protocol and general guidelines for implementation
- Module 3:
 - Provides training on the recommended assessments important for evaluating physical function
- Module 4:
 - Provides guidance on evidence-based interventions and strategies for effective referrals

¹ The development of the FRAIL screening and referral process was conceptualized and evaluated through a Cooperative Agreement with the Centers for Disease Control and Prevention (CDC) focused on community-based fall prevention programming (1U01CE003490-01: Process and Outcome Evaluation of the Walk with Ease program for Fall Prevention). The project was led by an interdisciplinary research team affiliated with the ISU Translational Research Network (U-TuRN) in collaboration with the Iowa Community HUB. The conceptualization of the training course was completed in collaboration with the program officers on the project from the National Center for Injury Prevention and Control and followed guidelines for appropriate use and dissemination of STEADI resources and methods. The training course was created to facilitate dissemination of best practices for screening and prevention of falls in older adults. Questions can be addressed through the project leader (Dr. Greg Welk – gwelk@iastate.edu)

Supplemental Components and Support Provided by the FRAIL Team

Continuing Medical Education (CME) Credits:

The online course has been approved for Continuing Medical Education (CME) credits by Des Moines University for 2 credits of CME but individuals need to specify interest in this option when registering. Supplemental fees (\$50) are required for selecting the CME option.

Supplemental 'Live Intensive' Training

The base (online) training course provides a sound foundation, but there are unique needs and challenges to operationalize fall risk screening in clinic and community settings. We have incorporated options for '*live intensive*' training based on previously developed training approaches used by our team in other courses. The supplemental training is designed to build the skills needed to effectively implement clinical or community-based fall risk screening. The supplemental training is developed specifically based on the needs for each group, coalition or clinic but the main goal is to provide hands-on training on the implementation strategies covered in the online course as well as specific guided instruction on conducting, scoring, and interpreting data on the recommended functional assessments.

The supplemental training (in-person or virtual) is led by a course instructor / team with field-based experience in STEADI screening methods, referral strategies, and experience with evidence-based falls prevention programming. The supplemental training is designed to help promote the adoption and utilization of best practices developed by the CDC for use of STEADI in clinical and community settings^{6,7} and specifically encourage the use of clinic-community partnerships as this integration has been documented to have major advantages for coordinated falls prevention efforts⁸.



Implementation and Integration with Statewide Programming and Partners

The FRAIL training course was developed in collaboration with the Iowa Community HUB, a community-care hub serving the state of Iowa. The screening methods and referral strategies have also been adopted by the Iowa Falls Prevention Coalition as a standardized practice. While the methods (and course) were developed to address specific goals for statewide coordination of evidence-based programming in Iowa, the training and strategies would provide generalizable value for other states interested in applying or replicating these methods. Details on the training course are available on our project website (see [link](#)).

The FRAIL team has developed an online registration process ([link](#)) to enable individuals or organizations to opt into the training and to select options for supplemental training and support as needed. The course is managed through a campus-based instructional platform available at Iowa State University called Workday Learning. Individuals that register for training would complete the course and receive a training certificate documenting their completion (Individuals would be billed for CME individually if requested or as a group – depending on the nature of the request. Supplemental (mentored) training (if requested) would be developed in collaboration with the group, coalition or clinic and be scheduled either in-person or virtually depending on the unique needs. Specific case studies and scenarios will be developed to ensure that the training meets the specific needs and guidelines and strategies will be provided to facilitate the adoption of best practices based on available evidence and experience with clinic / community partnerships. The total training costs are based on established fee-for-service procedures at Iowa State University and are billed through the campus.

References

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4. Moreland B, Kakara R, Henry A. Trends in nonfatal falls and fall-related injuries among adults aged \geq 65 years—United States, 2012–2018. *Morbidity and Mortality Weekly Report*. 2020;69(27):875.
5. Johnson TM, Vincenzo JL, De Lima B, et al. Updating STEADI for Primary Care: Recommendations From the American Geriatrics Society Workgroup. *Journal of the American Geriatrics Society*. 2025.
6. Eckstrom E, Parker EM, Shakya I, Lee R. Coordinated Care Plan to Prevent Older Adult Falls. Edition 1.1. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, 2021
7. Bergen G, Shakya I. CDC STEADI: Evaluation Guide for Older Adult Clinical Fall Prevention Programs. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, 2019.
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