

WASHINGTON STATE DEPARTMENT OF HEALTH & DSHS/AL TSA
Fall Prevention Wall Bar Request
March – August 2024

Program Need:

Older adults used grab bars 59.4% of the time to regain balance, compared to 13.6% for younger adults. The vertical bar on the side wall was favored by both groups of participants during both bathtub entry and exit. To promote safety in the home, existing building codes must be revised to recommend minimally a vertical grab bar on the side wall. Use of different bath grab bar configurations following a balance perturbation [Paulette Guitard](#)¹, [Heidi Sveistrup](#), [Nancy Edwards](#), [Donna Lockett](#)

A fall history analysis indicated that falls occurred in the bathroom were significantly associated with hospitalization. The observational study revealed that the bathroom was the most common place for environmental hazards. Fall Hazards within Senior Independent Living: A case -Control Study: [Daejin Kim](#), [Margaret Portillo](#)

Among Medicare beneficiaries with ≥ 1 fall, 55.5% had bathroom modifications and 50.1% had repeated falls (≥ 2 falls). Approximately 40.2% of those with repeated falls had no bathroom modifications. In the adjusted model, non-Hispanic Blacks (odds ratio [OR] = 0.38; $p < 0.001$) and Hispanics (OR = 0.64; $p = 0.039$) had lower odds of having bathroom modifications than non-Hispanic Whites. Fear of falling and activities of daily living limitations had incremental impacts on having bathroom modifications. This study highlights the need to improve disparities in bathroom modifications for non-Hispanic Black and Hispanic Medicare beneficiaries, including those with repeated falls. Bathroom modifications among community-dwelling older adults who experience falls in the United States: A cross-sectional study [Boon Peng Ng](#)^{1 2}, [Jingping Lu](#)³, [Georgianne F Tiu](#)⁴, [Ladda Thiamwong](#)^{1 2}, [YunYing Zhong](#)^{2 5}

Wall Bar Opportunity Information:

Washington State Department of Health and DSHS/AL TSA are partnering to provide ADA approved 16" wall bars to fire/EMS agencies, hospitals, tribes, or community-based organizations that are partnering with fire/EMS or contractors who can install wall bars on this project. Wall bars are to be installed in the homes of low-income adults 60 years and older. The receiving agency is responsible for installation of the wall bars at no cost to the homeowner/renter to reduce their risk of falls. Receiving agencies are strongly encouraged to prioritize the following populations: rural communities, limited English proficiency, veterans and/or disabled.

Wall bars will be distributed on a first come, first served basis while supplies last. There is a limited number of wall bars available; no more than 100 wall bars per agency. Depending on how many agencies apply, some agencies may not get the full amount requested. Wall bars will be sent to the receiving agency via drop shipped from the manufacturer.

Receiving agencies will be required to submit quarterly reports with the following information: 1) number of wall bars installed 2) number of homes that received wall bars 3) demographic of recipients including age, rural communities, limited English proficiency, veterans and/or disabled.

Please provide the following information and submit to: findingourbalance@doh.wa.gov

Agency Name:

Contact Person/Title:

Shipping Address/City/Zip:

Email/ Phone:

Number of bars you would like to receive:

Plan for who will install:

Project Summary (no more than one page): Please include number of individuals who would be impacted by this program, community partners, how you will identify older adults at risk of falls, how the program would be implemented, anticipated outcome of this project, and how this project would be impacted if you do not receive the full amount of wall bars requested.

For more information contact Stephanie Kunold: Stephanie.Kunold@doh.wa.gov