

Example First Meeting

County Falls Prevention Kickoff Meeting

Date: **Time:** **Location:**

- 1. Welcome (11:00-11:25am):**
 - Introductions- Coalition Co-lead
 - Importance of this effort- Medical Director
 - Icebreaker- Steering Committee Member

- 2. Community Impact (11:25-11:35am):** Community Member

- 3. Formation of Falls Coalition/Overview of Journey (11:35-11:45am):** Coalition Co-lead

- 4. Review Foundational Documents (11:45am-12:10pm):**
 - Mission- Steering Committee Member
 - Vision- Steering Committee Member
 - Strategic plan- Steering Committee Members
 - Timeline of strategies and tactics- Coalition Co-lead

- 5. Networking Lunch (12:10- 12:40pm):**
 - Discussion topics (strategies/tactics/focus of our work)- Steering Committee Members

- 6. What to Expect (12:40-12:50pm):**
 - Feedback from lunch discussions- Coalition Co-leads
 - Define the role of coalition participants- Coalition Co-lead
 - Schedule of coalition meetings- Coalition Co-lead
 - Survey on strategies/tactics- Coalition Co-lead

- 7. Closing (12:50-1:00pm):**
 - Impact of falls on the community – Director, Department on Aging