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**Background:** Falls are a common reason that persons with cognitive impairment or dementia (PwCID) cannot remain at home. FallsTalk is a one-month evidence-based falls prevention program that focuses attention on the individual causes of losses of balance or falls. FallsTalk encourages new falls prevention behaviors, which have been shown to decrease falls. We adapted FallsTalk for family Caregiver (FCG) administration to a PwCID with a recent history of falls to determine if FallsTalk-Caregiver could influence the number of new falls prevention behaviors reported by the FCG or the number of falls.

**Method:** Thirty-four Dyads (FCG+PwCID) were trained to conduct brief daily falls prevention discussions together. Dyads were randomly assigned to receive either standardized paper (FallsTalk, n=14) or computer-tailored (FallsTalk-Caregiver, n=20) discussion suggestions based on prior concerns expressed by the FCG. All Dyads had FallsTalk training, had daily discussions together and received weekly check-in calls. The FCGs reported weekly on the number of falls and new falls prevention behaviors (#newFPBs); as well as any changes in the PwCID's health, care or living arrangements during the intervention period. FCGs continued to enter the number of falls and status changes weekly into a secure web-site using a subject ID, until medical (significant health status change) or residential (no longer living at home permanently) endpoint was reached, or 52 weeks were completed. Poisson regression models compared the number of new falls prevention behaviors and weekly fall rate between groups. Fall rates were annualized for comparison with published residential care fall rates.

**Result:** Dyads receiving FallsTalk-Caregiver reported **significantly more #newFPBs** (MeanPaper=5.34 (SEM=0.68, CI=3.48-5.93), MeanComputer=8.46 (SEM=0.76, CI=7.48-10.40); **p=.004**) during the intervention month. FallsTalk-Caregiver PwCIDs experienced a **significantly lower fall rate** (MeanPaper=0.073/week (SEM=.015, CI=0.049-0.109), MeanComputer=0.040/week (SEM=.008, CI=0.027-0.060); **p=.047**). Annualized fall rates (Falls/year for Dyads with >=12 weeks) were (MeanPaper=3.64/year, n=13; MeanComputer=2.08/year, n=19).

**Conclusion:** FallsTalk-Caregiver provides an effective means to encourage new falls prevention behaviors to prevent losses of balance and falls. Despite the diversity of the Dyad's home environment and varied PwCID diagnoses, FCGs matched or bettered the annual fall rates achieved by professional caregivers in skilled nursing facilities (Resident Falls/year=2.33 (Residents without a PwCID diagnosis); 4.05 (Residents with a PwCID diagnosis)).