

FACT SHEET
for aged care providers &
health professionals

Preventing falls in residential aged care services

Australian Fall Prevention Guidelines

The *Preventing Falls and Harm from Falls in Older People: Best Practice Guidelines for Australian Residential Aged Care Services (Falls Guidelines)* has been updated to incorporate current best practice and the importance of implementing fall prevention interventions tailored to the older person.

Preventing falls and harm from falls is a focus of the strengthened [Aged Care Quality Standards](#).

Why is fall prevention important?

Falls are a significant cause of harm to older people. Successful fall prevention involves using a combination of interventions tailored to the person's needs and based on an individual falls risk. Partnering with older people in their own health care is central to safe, high-quality and person-centred care. Involving older people in fall prevention supports them to stay independent for longer.

Recommendations in the Falls Guidelines

1. Multifaceted Interventions: Provide multifaceted fall prevention strategies as part of routine care for all older people. This should include:

- a. regularly assessing both individual and RACS level fall risk factors, including assessment for environmental interventions and medication review
- b. developing a tailored fall prevention plan based on the findings of the older person's fall risk assessment
- c. providing education and engaging the workforce about preventing falls and harm from falls in older people. (Level 1A)

2. Tailored exercise: Provide tailored supervised exercise to all older people who choose to participate. Ensure health professionals (e.g. physiotherapists or exercise physiologists) or appropriately trained instructors design and deliver the exercise programs. (Level 1B)

3. Continued exercise: Provide continued exercise for fall prevention as the effect of structured exercise programs diminishes over time after the program has ended. (Level 1A)

4. Hip protectors: Consider the use of hip protectors for older people to reduce the risk of fall-related hip fractures. (Level 2A)

5. Dairy food provision: Ensure menus have at least 3.5 servings of dairy foods (milk, yoghurt, cheese) daily to meet protein and calcium requirements. Engage dietitians to assist with menu design that reflects dietary requirements and older people's needs and preferences. (Level 1B)

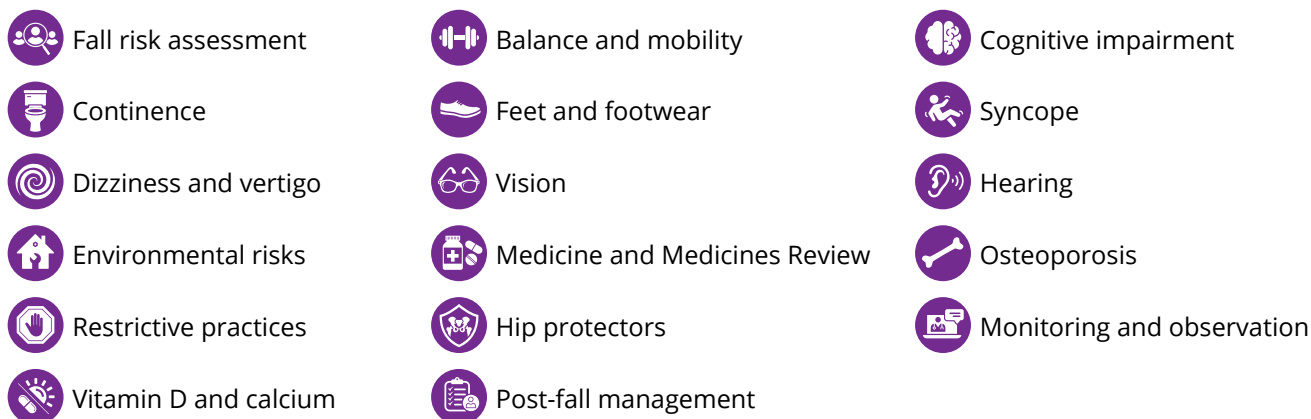
6. Vitamin D supplements: Administer recommended doses of daily or weekly vitamin D supplements to all older people unless contraindicated. (Level 1A) Avoid monthly or once yearly mega doses of vitamin D as they can increase the risk of falls. (Level 1A)

7. Osteoporosis medicines: Administer prescribed osteoporosis medicine for older people with diagnosed osteoporosis or a history of minimal trauma fractures, unless contraindicated. (Level 1A)

Areas of focus for best practice in fall prevention

The Falls Guidelines provides recommendations and good practice points to address personal and environmental risk factors for falls.

A tailored, multifaceted approach to preventing falls and harm will consider the following risk factors:



What has changed?

The key differences in the 2025 Falls Guidelines for RACS include:

- emphasis on the importance of implementing appropriate fall prevention interventions to address falls risks, rather than assessing fall risk
- advice that **all** people in RACS should be considered at risk of falling
- stronger evidence for the ongoing delivery of exercise for fall prevention
- a new recommendation to involve a dietitian in RACS menu design to ensure that menus meet the daily nutrition requirements for protein and calcium and reflect older people's preferences
- expanded good practice points to guide all aspects of fall prevention in RACS.

How were these guidelines developed?

The 2025 Falls Guidelines builds on the previous Falls Guidelines published in 2009 and is informed by evidence from a systematic review. The strength of evidence for each recommendation is indicated through use of the modified GRADE approach used by the 2022 World Falls Guidelines.

References

1. Cameron ID, Dyer SM, Panagoda CE, et al. Interventions for preventing falls in older people in care facilities and hospitals. Cochrane Database of Systematic Reviews. 2018(9).
1. Montero-Odasso M, van der Velde N, Martin FC, et al. World guidelines for falls prevention and management for older adults: a global initiative. Age Ageing. 2022;51(9).

Questions?

For more information about the Falls Guidelines, please visit safetyandquality.gov.au.

Further information about the strengthened *Aged Care Quality Standards* is available from the Aged Care Quality and Safety Commission: www.agedcarequality.gov.au

