

## Preventing Falls

### Preventing falls is important in Gippsland

Gippsland had the **highest rate of accidental falls causing death** in 2019–23 among Australian PHNs (age-standardised rate of 16.7 per 100,000 people compared to 10.5 across Australia)



Gippsland has a high proportion of **residents aged 65+** (24.8%), compared to Victoria (16.8%) and Australia (16.2%), with an expected increase from 74,552 people in 2021 to **88,573 people by 2030**



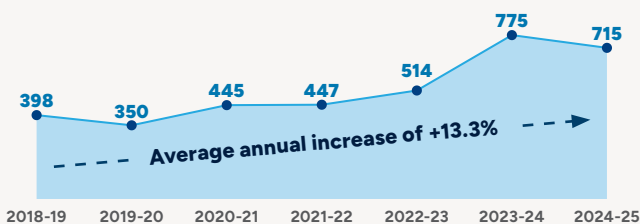
#### General practice data

Among general practice patients with a new diagnosis of a fall (2018-19 to 2024-25):

**85+** **32%** were aged 85+

**65+** **67%** were aged 65+

Number of Gippsland residents aged 65+ with a new diagnosis of a fall noted in their GP data by financial year

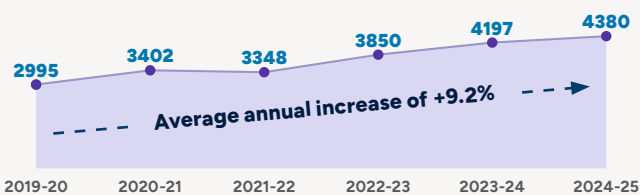


#### Emergency Department (ED) data

**65+** **39%** of all ED presentations with a fall were among people aged 65+ (2024-25)

**11%** of all ED presentations for people aged 65+ involved a fall (2024-25)

An increasing number of Gippsland residents aged 65+ with an ED presentation due to a fall (2019-20 to 2024-25)



Among ED presentations involving a fall for people aged 65+ between 2019-20 and 2024-25:

**95%** of falls were less than 1 metre (or no height information)

**59%** were females

**19%** were lower urgency care

**50%** were after-hours

**55%** arrived via ambulance service

**13%** had an aged care home as their usual accommodation

**53%** were admitted (to same or alternative hospital)

**18%** lived alone

“ We've had local cases where inadequate lighting and uneven footpaths in public places have led to falls  
- Community member ”

### Why are falls a serious issue?

Falls are a leading cause of injury-related hospitalisations and deaths in Australia, accounting for 43% of all injury hospitalisations (2023-24) and 43% of all injury deaths (2022-23)

In 2023–24, fall injuries are estimated to have cost the health system over \$5 billion

#### Older people are most impacted



1 in 3 people aged 65 and over fall each year



50% of residents living in residential aged care homes fall each year, with even higher rates for residents living with dementia



The risk of serious fall-related injury is higher the first month after discharge from hospital



Falls can cause hip fractures and other serious injuries that may need longer hospital care and have long-term effects



Even falls that do not cause injury often trigger a loss of confidence which can lead to a less active lifestyle, loss of independence and/or increased social isolation

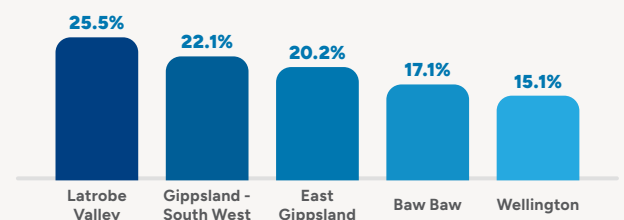


Aboriginal and/or Torres Strait Islander peoples have an increased risk of falling when aged >50 years

#### Risk factors

- Reduced strength and balance
- Cognitive impairment, including delirium and dementia
- Chronic conditions, especially multiple
- Medical problems including dizziness, vertigo, fainting
- Functional decline and frailty
- Malnutrition, dehydration
- Side effects of polypharmacy (five or more medications)
- History of falls or fear of falling
- Environmental hazards such as poor lighting and uneven surfaces

Percent of Gippsland residents aged 65+ with an ED presentation due to a fall by Statistical Area 3 (2024-25)



Top nature of injury among people aged 65+ presenting with an injury due to a fall (2019-20 to 2024-25):



**33%** fractures



**18%** superficial (abrasion/blister/contusion)



**11%** open wound



**11%** injury of unspecified nature



**8%** sprain or strain



**4%** intracranial injury (including concussion)

## Community, consumer and carer perspective

### Insights from Gippsland PHN community engagement during 2025 and 2026 noted:

- Early intervention programs for older people have strong engagement
- Access to aged care services can be delayed, impacting safety of patients
- Older people worry about the ageing process and loss of independence
- There is a desire to remain in the home for as long as possible
- Family and carers are under pressure when access to services and supports is limited

“ I feel much more balanced and in control now  
- Falls prevention program participant ”

## Professional perspective

### Gippsland PHN stakeholder consultations during 2025 and 2026 have noted:

- There are gaps in functional needs assessments and community-based services to support older people at home, resulting in wait lists which can leave clients vulnerable
- There are great services, but they often lack capacity to help everyone
- The aged care sector faces challenges in recruiting sufficient workforce to meet growing needs in the community
- Hospitals are under pressure due to gaps in aged care services

“ Waiting list for falls prevention and for OTs [occupational therapists] may be a contributing factor to falls in the community  
- Health professional ”

## Gippsland PHN services and supports

- Aged care programs** are delivered in the community and residential aged care homes
- Care Finder** services for people who need intensive support to access aged care
- Early intervention** services, offering falls and balance programs in some locations
- Dementia and cognitive decline** services and supports
- Gippsland Pathways** for primary care health professionals to access local referral options and resources
- Digital information and resources** for connected care
- General Practice in Aged Care Incentive** for older people living in residential aged care
- Support for the **Aged Care On-site Pharmacist** initiative

## Services and supports

- Contact **My Aged Care** on 1800 200 422 for home support programs
- Contact your **general practitioner** for safe use of medications and for referrals, including to a Falls and Balance Clinic
- Victorian Department of Health, Falls prevention** includes falls prevention evidence, tools and resources

## What can we do to improve?

**Falls are common but they can be prevented.** Many risk factors for falls can be managed and when falls occur, the severity of injuries can be reduced.

 The Australian Commission on Safety and Quality in Health Care **Falls Guidance 2025** provides best practice

 **Ageing Well in Victoria Action Plan 2022-2026** outlines the Victorian Government's commitments

### Strategies relevant for primary care include:

- Opportune screening of older patients for risk of falls and as part of the **Health Assessment for Older Adults (≥75 Years)**
- Use of **falls risk assessment** tools to identify individual risk factors
- Develop a **tailored management plan** for the individual based on their risk factors and personal needs identified by involving the older person, carers and family
- Multidisciplinary approaches** involving GP, physiotherapist, occupational therapist, podiatrist and pharmacist
- Consider **physical activity** to improve strength and balance for everyone
- Consider **medication management** reviews to identify over-prescribing and limit side effects
- Management of chronic conditions**, including dizziness and incontinence
- Address any **vision, audiology or podiatry** needs
- Consider a **home safety assessment** which might identify:
  - Trip hazards
  - A need for grab rails, non-slip mats and improved lighting
  - Recommendation of a personal alert system; **Personal Alert Victoria (PAV)**
- Post-fall follow-up** to prevent recurrence

### Strategies for the broader health and wellbeing system:

- Support staff and management to reduce falls risks in hospitals and residential aged care homes
- Active ageing initiatives can help raise awareness of falls prevention
- Building healthy ageing into Municipal Public Health and Wellbeing Plans**
- Targeted interventions for high-risk populations
- Integration of healthcare and community services

Breaking the fall cycle by building and maintaining strength and balance:



Access more Gippsland PHN publications here

