

July 17 2019

## **MEDIA RELEASE**

### **Falls put under the spotlights at the Royal Commission by National Ageing Research Institute**

Dr Frances Batchelor, Director of Clinical Gerontology at the National Ageing Research Institute, has told the Royal Commission into Aged Care Quality and Safety that there is an urgent need for more high-quality research to learn what can effectively prevent falls in residential care, especially for people living with dementia.

Dr Batchelor, said that while there is strong evidence exercise that includes strength and balance training for two hours a week over 25 weeks – for a total of 50 hours – is effective at reducing falls in the community, the same could not be said for residential aged care.

There is little evidence-backed data to support common preventive measures such as exercises, medication reviews, bed and chair alarms or a combination in residential aged care, and more research and clinical data is needed urgently, according to Dr Batchelor.

However, she said that until findings from new research become available, the sector needed to be proactive and come up with a comprehensive falls risk assessment and management plans. These include: increasing the number of staff involved in direct resident care, increasing falls prevention training for all staff including personal care workers, improving how data is collected, particularly in real-time, and implementing person-centred care.

According to Dr Batchelor, accidental falls are the tenth leading cause of death for people in residential aged care and the eighth leading cause for people receiving aged care packages. On average 50% of aged care residents will have one or more falls in any given year. This is higher in residents with dementia, with estimates of up to 90% of people with dementia associated with Parkinson's disease falling at least once in a year.

“We shouldn't just say that falls are an inevitable part of ageing and that they are all going to happen,” she said.

Dr Batchelor said that most residents are only assessed for their falls risk when they enter residential care and then on a three-monthly basis or when a fall occurs.



“But it’s not responding in a dynamic way to the changes that we might see in residents’ functional and health status, Falls aren’t in isolation, from other issues such as nutrition, even oral care. They’re all interrelated and if we can support staff to offer truly person-centred assessment and care, then I think that will go a long way to prevention of falls but also joining the dots for those other issues,” she added.

Dr Batchelor has over 30 years of experience as a Clinical Physiotherapist and also leads a program of research in falls prevention and physical activity. She is the research program lead of the Melbourne Ageing Research Collaboration (MARC).

**MEDIA INQUIRIES**

Penny Underwood on (03) 9818 8540 or [mediawise@mediawise.net.au](mailto:mediawise@mediawise.net.au)