

28 November 2024

Australian Commission on Safety and Quality in Health Care
GPO Box 5480
Sydney NSW 2001

Via email: agedcarestandards@safetyandquality.gov.au

Dear Australian Commission on Safety and Quality in Health Care,

Re: Public consultation on the Best Practice Guidelines for Preventing Falls and Harm from Falls in Older People (Falls Guidelines)

The Royal Australian College of General Practitioners (RACGP) welcomes the opportunity to provide feedback on the updated Best Practice Guidelines for Preventing Falls and Harm from Falls in Older People (Falls Guidelines). The [RACGP Aged care clinical guide \(Silver Book\) falls chapter](#), the recently updated [RACGP Guidelines for preventive activities in general practice \(Red Book\) falls chapter](#), the [RACGP Osteoporosis management and fracture prevention in post-menopausal women and men > 50 years of age](#) and the [RACGP Guideline for the management of knee and hip osteoarthritis](#) includes guidance on falls and falls prevention. The RACGP recommends the Falls guidelines align with these resources to ensure advice to general practice is consistent and evidence based.

Our response to the consultation questions focusses on the guidelines for Residential Aged Care Services and for Community Care.

How can the person-centred language in the Falls Guidelines be improved?

- The target audience for the guidelines needs to be more clearly articulated.
- It would be beneficial to develop a separate guide for consumers or include links to existing resources, like the [Healthy Bones Australia webpage](#).

How can the format be improved?

- Key resources referred to in the draft guidelines should be hyperlinked.
- The strength of evidence and recommendations in the draft guidelines would be clearer if readers did not have to refer to a key. Instead, we recommend using the wording as provided in the key, for example, 'Level 1B – Strong recommendation, intermediate evidence'. A colour coded traffic light system could be helpful where green is used for implementing the recommendation, orange for considering the recommendation and red for not implementing the recommendation.

Additional comments:

- There is a recommendation for co-prescribing calcium and vitamin D with osteoporosis medication in the community care guideline on page 24. This needs to be reviewed as it contradicts the advice in the [RACGP's Osteoporosis prevention, diagnosis and management in postmenopausal women and men over 50 years of age guideline](#), which recommends patients have adequate levels of dietary calcium and vitamin D.



- For falls prevention in the community, the guideline should consider including online falls and balance programs tailored for individuals in rural and remote areas who may lack access to professional support. An example of this is [Neuroscience Research Australia's programs](#).
- The definition of osteoporosis should be added in the draft guidelines.
- There is considerable overlap and duplication across the three current publications. A concise fact sheet would be a helpful addition to provide GPs with quick, accessible information.
- It is unclear if the evidence and recommendations in this guideline was updated based solely on the WHO guidelines or if additional evidence reviews were considered. The quality of the guideline should be appraised against the [AGREE II Instrument](#) to assess the methodological rigour and transparency in the development. This will ensure information about evidence-to-decision methodology, management of conflict of interests and spread of disciplines represented in guideline leadership groups is appropriately tabled.

Thank you again for the opportunity to provide feedback on the updated Falls Guidelines. For any enquiries regarding this letter, please contact Stephan Groombridge, National Manager, Practice management, Standards and Quality Care on 03 8699 0544 or stephan.groombridge@racgp.org.au.

Yours sincerely

Dr Michael Wright
President