

# Gateshead Older People's Assembly

## Staying Steady

### Impact and Evaluation Report

Completed March 2018 (Course 4)



### About Gateshead Older People's Assembly

As a charitable organisation, Gateshead Older People's Assembly exists to support older people (50+) across Gateshead and does this in a number of ways. The projects undertaken by the Assembly and the services it provides are guided by the organisation's Strategic Delivery Plan, which was driven by the charity's trustees, themselves older people from Gateshead.

The Strategic Delivery Plan is underpinned by nine strategic objectives:

1. Increase older people's knowledge of issues affecting them
2. Be the voice of older people in Gateshead
3. Reduce loneliness and isolation for older people in Gateshead
4. Increase opportunities for older people to live fuller lives
5. Improve the health and wellbeing of older people in Gateshead
6. Reduce the number of falls suffered by older people across Gateshead
7. Build stronger networks to support older people across Gateshead
8. Increase opportunities for older people to participate in wider society
9. Increase community safety and awareness of safeguarding issues

These objectives are not mutually exclusive and the Assembly's management aims to meet at least three of the objectives with every project it undertakes.

### About Staying Steady

Gateshead Older People's Assembly received funding from Gateshead Council's Public Health Department to run eight, 20-week Postural Stability Instructor led exercise courses over a year across Gateshead. The project aims to reduce the number of falls in the area and increase the exercise opportunities available to older people in Gateshead who are at risk of falls.

Staying Steady is the name of our Level 4 Postural Stability Instructor led strength and balance course. The course includes a series of evidence based exercises to improve strength and balance and is recognised to reduce falls.

Each class had a maximum of 15 participants and in order to enrol onto the course, participants were required to meet our inclusion criteria which was set by the Postural Stability Instructor along with Gateshead Council's Falls Coordinator using the Later Life Training guidance. Participants were required to:

- Be in control of any long-term health conditions they may have.

- Be able to either mobilise independently, with a stick or with two sticks.
- Be able to carry out standing exercises for a minimum of 5 minutes.
- Be able to make their own way to the classes.

Prior to the fourth course starting, Gateshead Older People's Assembly had a Social Return on Investment Report carried out by Riseborough Research and Consultancy associates to see what impact their work was having. They look at all aspects of work carried out including the Staying Steady programme.

They took the data from the Department of Health reference costs and Public Health England costs cited in care and repair/BRE (2016) and estimated an overall saving of £968,736 to the public purse.

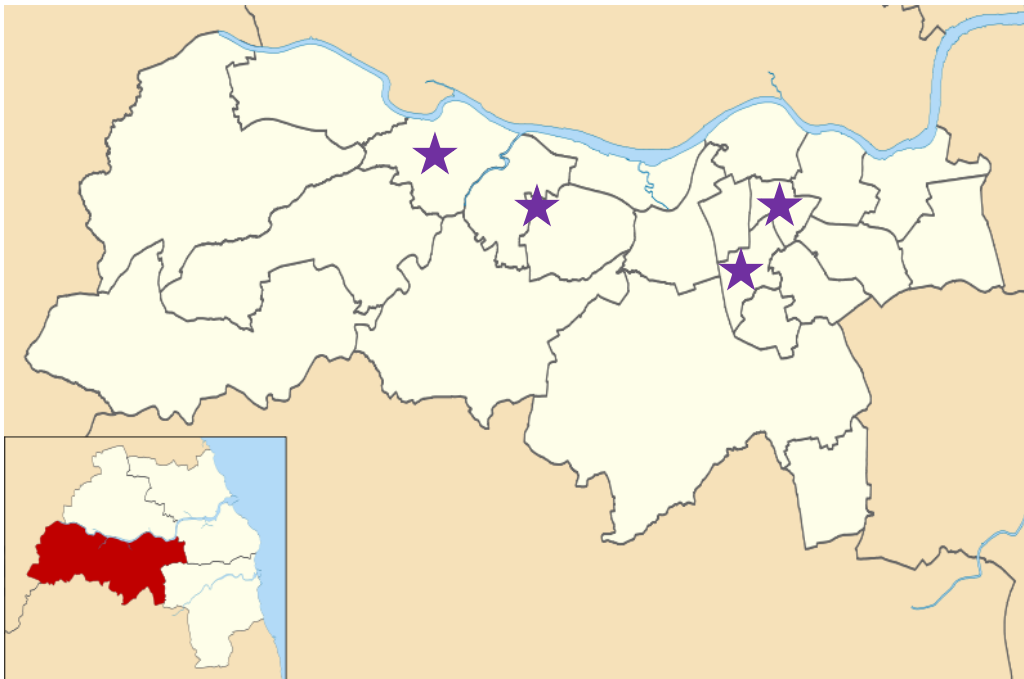
With the programme investment of £19,146 per annum from Public Health it showed that for every £1 invested in the Staying Steady programme it has the potential to save the public purse £50.59.

The full report can be found at [www.gatesheadopa.org.uk/sroi](http://www.gatesheadopa.org.uk/sroi)

#### **Course 4**

After completing course 3 in September 2017, planning commenced for the fourth round of courses, which began in October 2017 at the following locations:

- St Helens Church Hall, Low Fell (South)
- Whickham Community Centre (Inner West)
- St Joseph's Church Hall, Blaydon (West)
- Deckham Village Hall (Central)



Course 4 was delivered in a very similar manner to course 3, formalising the educational element of the course, this time with the second half of the education element, (week 10 onwards), being

more interactive and encouraging participants to discuss their personal experiences with regards to the weekly theme. We also continued to get a short feedback survey post course.

Over the 20-week course, participants completed an hour of exercise which became progressively more dynamic and challenging as the weeks went by, adding tasks such as walking and turning, bending and reaching as well as progressing strength and balance exercises. The exercise class was always followed by an educational talk lasting up to an hour, but usually around 30 minutes. This allowed for the participants to receive some valuable information about topics relating to falls, and about local services. They were also able to ask questions, share their stories and to socialise with other group members.

In addition to the weekly session, participants were also asked to complete enough exercise outside of the class to meet the NICE guidelines of 150 minutes per week. In order to achieve this, participants were provided with a home exercise booklet and a theraband. The group also discussed practical tips on how to meet these guidelines, such as carrying out 'kitchen bench exercises' whilst cooking, or carrying out exercises during advert breaks when watching TV.

### **Evaluating Staying Steady**

Participants were sent a registration pack which contained an enrolment form, a pre-exercise readiness questionnaire (PAR-Q) and an informed consent form, as well as a set of evaluation forms chosen to measure the impact that the project had on mental wellbeing, confidence, fear of falling and perception of general health. These surveys included the following:

- Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS)
- Short FES-I Questionnaire (Fear of Falling Scale)
- ConFBal (Confidence in Maintaining Balance Questionnaire)

The Postural Stability Instructor also carried out individual functional tests with each participant using the Functional Grid tool, which included the following tests:

- Seated shoulder external rotation flexibility
- Seated shoulder internal rotation flexibility
- Seated hamstring flexibility
- 180-degree turn
- Functional reach
- 6m timed up and go

Surveys and functional assessments were completed on week 1 of the course and the outcomes were not only used as baseline data for the participants, but also used to help participants set their goals and to determine which exercises to focus on at home as part of their weekly programme. The same surveys and functional assessments were completed on the final week of the course in order to measure changes in mental wellbeing, fear of falling, confidence in balance and functional capacity.

52 participants originally enrolled onto the Staying Steady course and 39 people completed the course (75% completion rate). Out of the 39 people who completed the course, 36 participants were available on the assessment dates to carry out the functional assessments and complete follow up surveys. Therefore, the below statistics are based on 92% of the participants who completed the course.

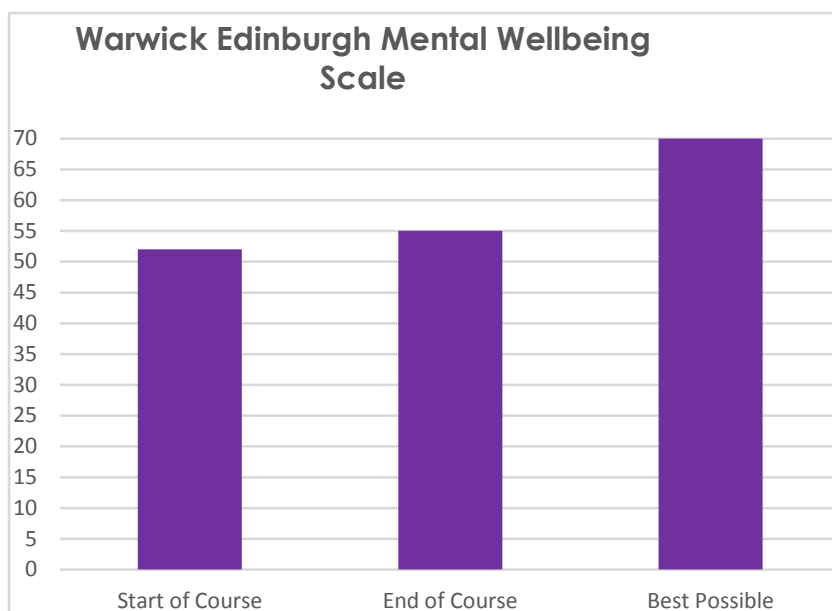
During the course we did find that the adverse weather conditions (snow on 3 different occasions) did cause a few people to lose a little bit confidence which could have possibly impacted on our final evaluation.

## **Results**

### **Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS):**

This scale is designed to monitor the mental wellbeing of the participants and includes a 14 statement scale with 5 response categories. The scores from each statement are summed up to provide a single score ranging from 14-70 (the higher the score, the better).

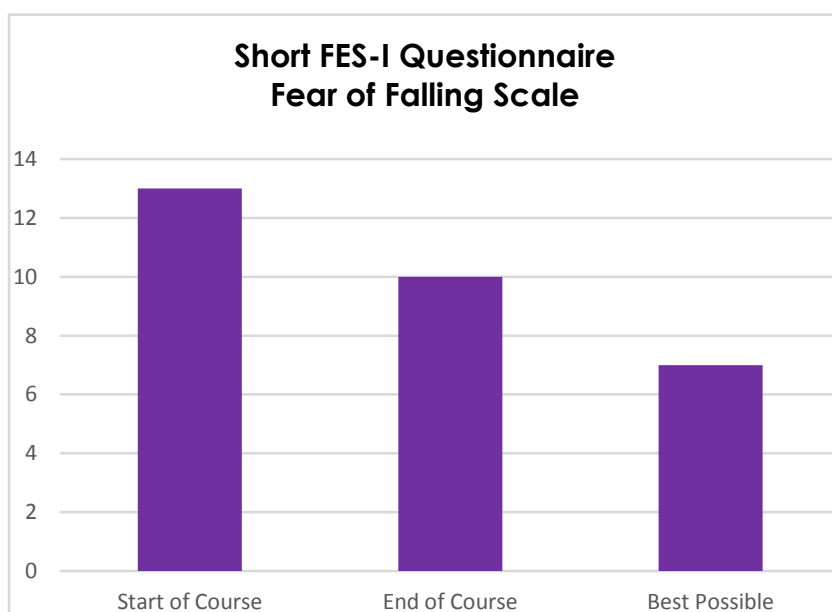
This chart shows the average scores of the 36 participants who completes at the beginning of the course (52) compared to the end (55) alongside the best (70) possible score.



### **Short FES-I Questionnaire:**

The FES-I survey is designed to measure fear of falling in older people and includes 7 'scenarios' in which the participant is asked to rate their level of concern when carrying out the task. The levels of concern are scored between 1-4 and the scores from each scenario are totalled to provide a single score ranging from 7-28 (the lower the score, the better).

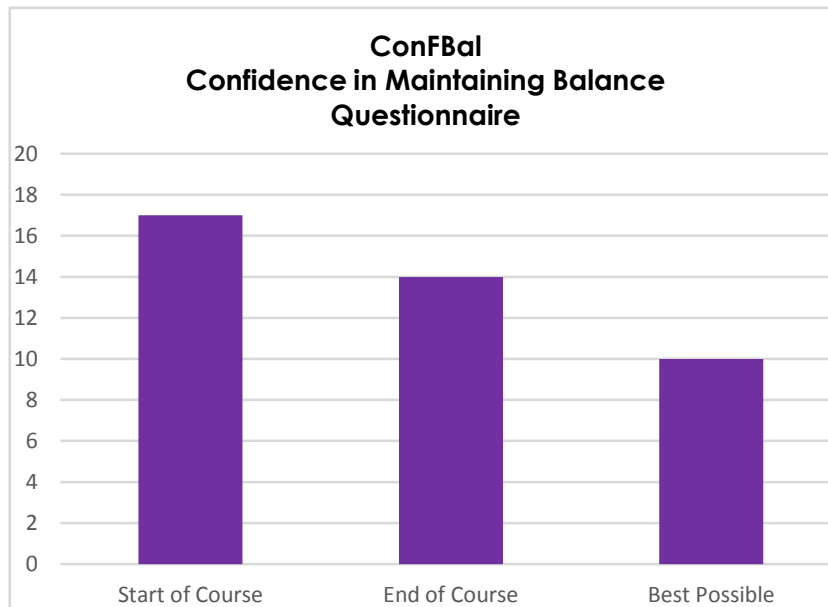
This chart shows the average scores of the participants at the beginning of the course (13) compared to the end (10) alongside the best (7) possible score.



## ConFBal:

The ConFBal is a tool designed to measure confidence in balance in older people. It includes 10 questions relating to levels of confidence in different scenarios, for example; "How confident are you that you can pick up something from the floor without losing your balance?". The participant chooses from 3 answers; 'not confident' (3), 'slightly confident' (2), or 'confident' (1). The numbers from each response are totaled to provide a single score ranging from 10-30 (the lower the score, the better).

This chart shows the average scores of the participants at the beginning of the course (17) compared to the end (14) alongside the best possible score (10).

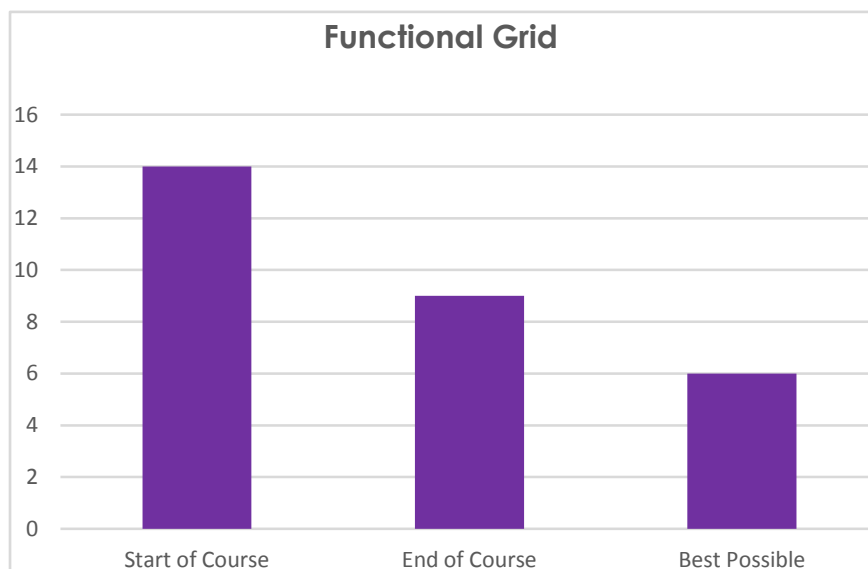


## Functional Grid:

There are 6 functional assessments scored on a system ranging from 1-6. Participants scoring 1 will have no limitation and participants scoring 6 will have a severe limitation or will be unable to complete the task. This grid is used to assess participants to determine whether or not they are suitable for the programme, as well as prescribing home exercises to address current weaknesses and areas for improvement. For the purpose of this evaluation, the scores from each of the 6 tasks have been totaled to give an overall score ranging from 6-36 (the lower the score, the better). Tasks included; seated shoulder external rotation flexibility, seated shoulder internal rotation flexibility, seated hamstring flexibility, 180 degree turn, functional reach, 6m timed up and go.

This chart shows the initial average score of 14 compared to the average score of 9 at the end of the 20-week programme. The best possible score for the Functional Grid is 6, therefore on average participants have improved in functional capacity by 5 points.

One client improved their score from 28 to 12 and reported feeling much better day to day and doesn't use his sticks in the house (see client case study).



## Learning

Once again just like previous courses, we found that the adherence to the home exercise was a bit of a struggle and decided to encourage people to attend a community exercise programme also. We also discussed how participants can build the exercises into their daily routines, for example, best exercises to carry out at the kitchen sink whilst boiling the kettle, whilst watching TV, or whilst standing at the bus stop.

Moving onto the next course we are going to do some home exercise videos that people will be able to access through Gateshead Older People's Assembly website as comments have been made that this would improve adherence.

We will also look to progress participants to community exercise groups earlier in the course, as evidence suggests that adherence to exercise is often more successful when carried out in a group.

## **Added Value**

All the exercise sessions were followed with an education element where we cover a range of topics that link closely with falls prevention. These education sessions provide participants with some valuable information and discussion points, and often lead to a referral to a local support service. For example, during the 'home safety' talk, we provide participants with the telephone number for the Tyne and Wear Fire and Rescue Service who carry out free home safety checks.

It is also an opportunity for participants to not only share concerns, advice and recommendations, but also to form closer friendships with fellow participants. Education topics include:

- About Staying Steady
- Dealing with a fall
- Fitter feet & footwear
- Home safety
- Medication & side effects
- Nutrition, hydration & alcohol
- Bone health
- Eyesight and hearing
- Staying safe when out and about
- Keeping active
- What's next?

We also offer additional support to participants by providing them with a Later Life Training Postural Stability exercise guide along with their own theraband so that they can complete their home exercises effectively.

We recommend that each participant carries out home exercises at least twice a week in addition to the Staying Steady class in order to meet the recommendations set out within the NICE guidelines. During the initial assessment, all participants will also be advised on additional exercises that they should do regularly at home in order to meet their goals and to improve their functional ability in relation to their functional grid scores.

On enrolment, participants are also provided with a Nexus Bridge Card; a card that people can use when using public transport to inform the driver that they need some additional support. Those who used walking aids were also shown how to check that their aids were set at the right height and were encouraged to regularly check their ferrules and where appropriate, the instructor would help to change the ferrule for the participants.



## **Progression**

In order to encourage participants to continue to exercise after completion of the Staying Steady course, we focus the final 5 weeks of the course on progression to community exercise. The final 5 weeks of the course will take the shape of community exercise classes available locally, for example in a circuit format, in a gym environment, or will incorporate longer tai chi sections. This method allows participants to access community classes with more confidence and with a more accurate idea of what to expect within the classes.

## **Summary**

Overall, the Staying Steady course has demonstrated that it has been beneficial to the health and wellbeing of its participants. On average, class members have improved in all areas (mental wellbeing, fear of falling, confidence in balance and functional capacity).

The greatest improvements were in the functional grid. Achievements that participants have reported include; moving easier, dressing with less pain or without support, fastening bras, accessing public transport, being able to do their own food shopping and accessing community fitness classes with confidence. We have also received some excellent feedback regarding how useful participants found the educational element of the course.

At the beginning of the course, 52 people enrolled across the four sites, with 39 of these individuals completing the course (75%). Reasons for dropout were mainly due to illness or having to care for a family member who had become ill during the course. From the 39 participants who completed the course, at least 37 (95%) have progressed onto community exercise, which they now undertake regularly. These sessions include circuits, tai chi, yoga and dancercise.

We will continue to educate clients around maintaining their exercise, as evidence suggests that continued physical activity is imperative in order to maintain the physical benefits gained during the course.

## **Appendix 1**

### **Client comments at the end of the programme**

'After doing this course, which I have enjoyed, (it) has given me motivation to join exercise classes in the future'

'Enjoyed the programme'

'I would like to continue this course as it has been beneficial socially as well as physically'

'I have found the class very helpful at helping my confidence improve'

'I enjoyed the Staying Steady course and would like to do more. Richie was very good'

'I will miss coming, given me confidence in going out and about.  
Have enjoyed every minute of the programme'

'Although I feel I have improved in some exercised, I still feel my balance is poor, due to possibly the neuritis in my feet. I feel I would have benefitted from more classes'

'I have had a poor gait since my second hip replacement in 2013. Since doing the course, a lot of the time I feel I can walk more normally and confidently. It's a good beginning but I know I will need to continue if I am to make further gains'

'Very helpful. First time done anything like this. Must remember to do at home maybe a rota would help. Put times and dates in my diary. Working on this'

'Thank you Richie because I do feel a great deal better, a lot more confident and my balance is great. Had a lot of fun. Thankyou'

'Excellent tuition. Richie has really encouraged me throughout the programme. Lots of useful information. My confidence and strength have improved and I feel encouraged to continue with my exercise sessions'

'Very beneficial, improved mobility and confidence'

'Unfortunately my arthritic hip has deteriorated during the course of the programme, resulting in an appointment with the orthopedic surgeon for a joint replacement. Advice on falls and balance exercises have been particularly useful. Will use exercise routine in future.'

'Have never enjoyed exercise but have thoroughly enjoyed my classes. Richard manages to make them fun. Have recommended him to friends'

'My confidence has improved 100% since attending class, plus my mobility'

## **Appendix 2**

### **Case Study: John Smith**

**Age: 75**

John was referred to the programme from the falls clinic having previously had 3 falls. He also had a Myocardial infarction in 1999 and a Heart Bypass.

John came to the first session with 2 walking sticks and was very apprehensive about participating in the course. During his initial assessment John struggled with a lot of the assessments especially when having to rise from the chair. His main goal was to improve his balance and be more active.



In the first few weeks of the programme we emphasised the correct way to get up from the chair and incorporated a lot of strengthening exercise to improve his strength in quadriceps, hamstrings and glute muscles.

Half way through the course John was able to get up from the chair unaided and reported he was doing this on a daily basis. John was very regimented in following his home exercise plan and completed it most days which is testament to his character and willingness to improve.

His final assessment highlighted a massive improvement in all but one of his functional assessment grid scores, his total improved from 28 to 12.

John has joined a community exercise programme, which he attends regularly, as well as continuing to follow his home workout routine.