

## Staying Steady Strength and Balance Programme

### Impact and Evaluation Report

#### Course 5: April – September 2018



### About Gateshead Older People's Assembly

As a registered charity (Charity Registration Number: 1155832), 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 activities it provides are guided by the organisation's Strategic Delivery Plan, which was created 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 aims to meet at least three of the objectives with every activity and project it delivers.

### About Staying Steady

Staying Steady is a 20-week strength and balance programme specifically designed to reduce the number of incidents of falls suffered by people aged over 50 in Gateshead. The course is delivered by a Level 4 qualified Postural Stability Instructor. Staying Steady comprises a series of evidence based exercises to improve strength and balance and is recognised as a falls prevention activity by the National Institute for Health and Care Excellence (NICE).

Each class has a maximum of 15 participants and in order to enrol onto the course, participants are required to meet our inclusion criteria which was set using guidance from Later Life Training.

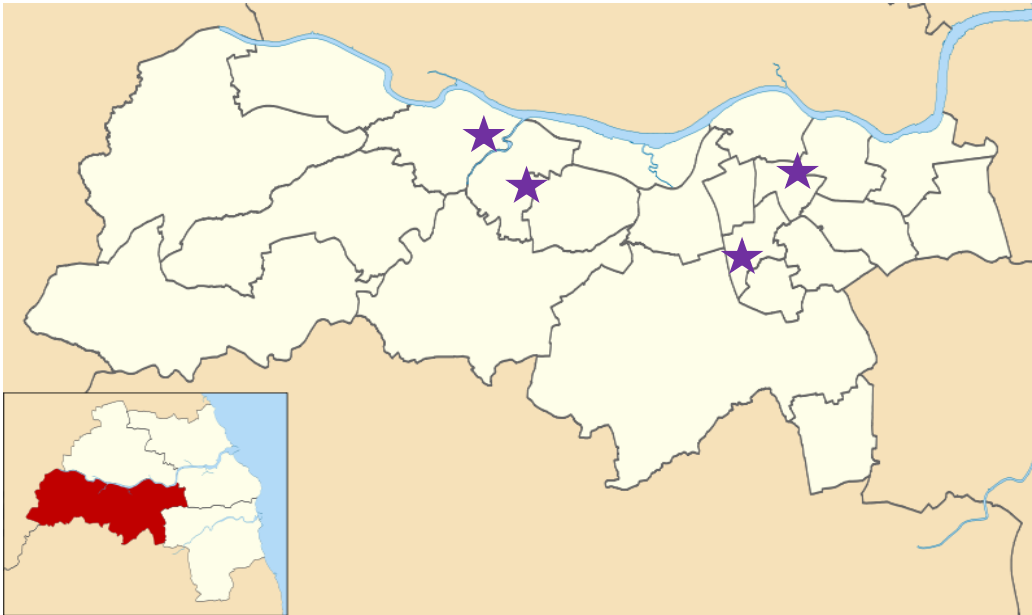
Participants are required to:

- **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.**

## **Course 5**

From week six of the previous course (Course 4), a waiting list is built up and the delivery locations are chosen. These are selected to be in locations close to as many of the beneficiaries as possible so to be as inclusive and reduce overall travelling time. The locations chosen for Course 5 are as follows:

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



In Course 5, we continued to formalise the educational element of the course as has become the case within the Staying Steady programme in recent cohorts. The second half of the education element, from week 10 onwards, was deliberately more interactive and gave opportunities for participants to discuss their personal experiences with regards to the weekly theme. This provides an informal support network and also creates recognition among the participants that "it's not just me who is experiencing this."

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 would discuss 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. Some

participants choose to take part in other community exercise sessions run by The LIFE Programme CIC to help them achieve the required amount each week. They found this to be more accountable than the home exercise sessions.

### **Evaluating Staying Steady**

Upon enrolment, 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 to set personalised 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.

37 participants originally enrolled onto the Staying Steady course and 25 people completed the course (68% completion rate) and all the appropriate assessments.

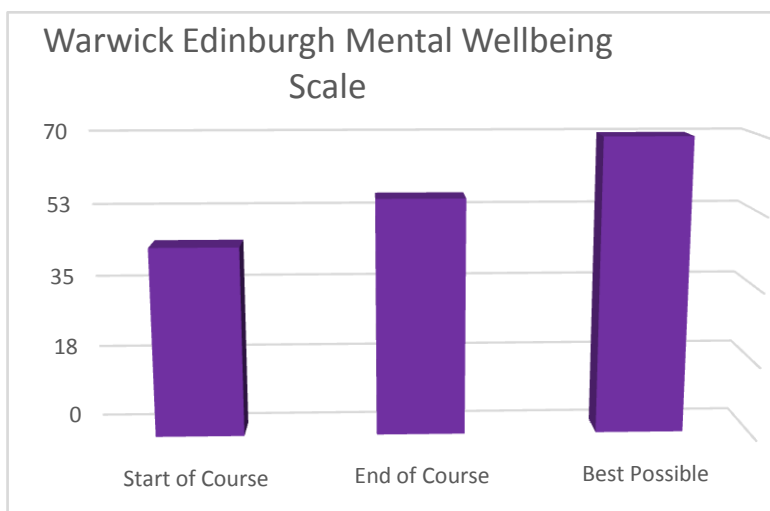
The numbers for this cohort were significantly lower than in previous cohorts. After talking about why this may be with a range of referral partners such as OTs, physiotherapists and the falls team, we found that a lot of people believed that funding for the programme had stopped so they stopped referring clients. It's not quite clear what the source of this misinformation was but it goes a long way to demonstrating the fragility of the referral routes.

## 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).

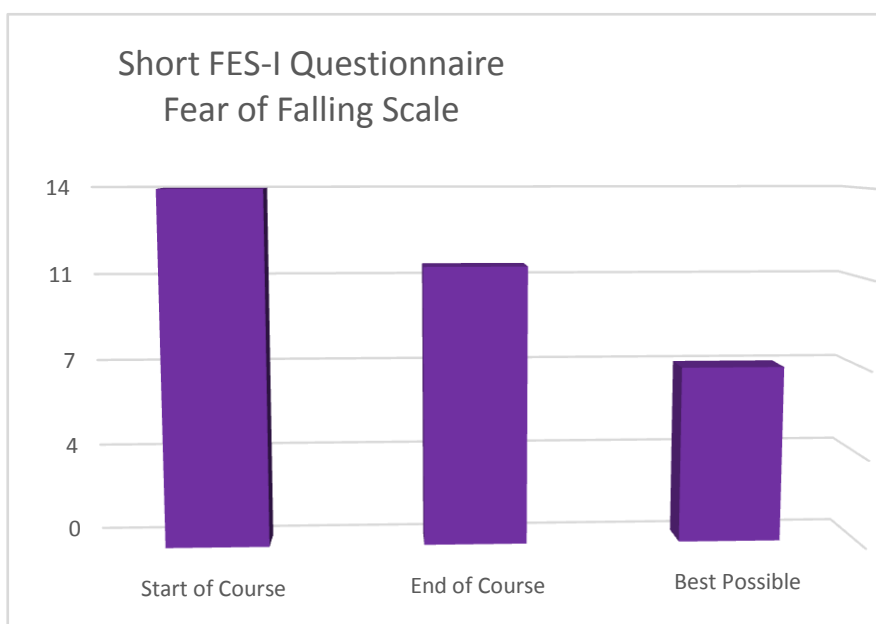
This chart shows the average scores of the 25 participants who completes at the beginning of the course (45) compared to the end (56) alongside the best (70) possible score.



### 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).

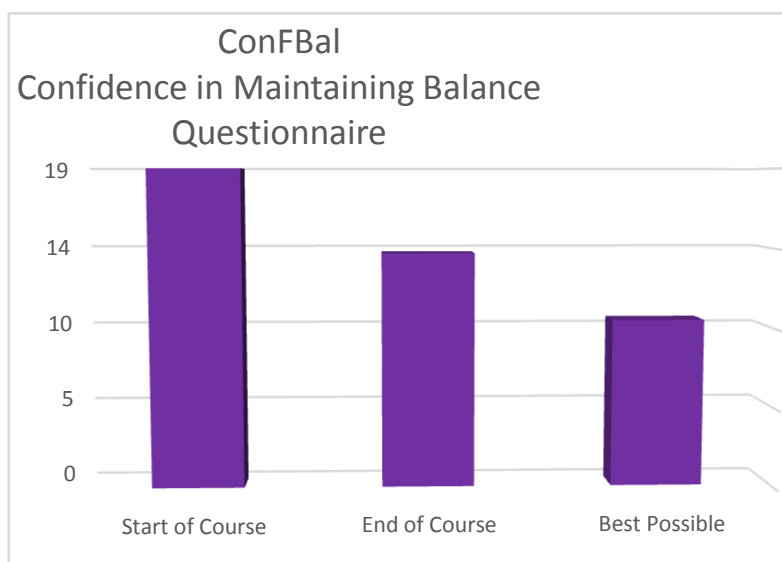
This chart shows the average scores of the participants at the beginning of the course (14) compared to the end (11) alongside the best (7) possible score.



## 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?"

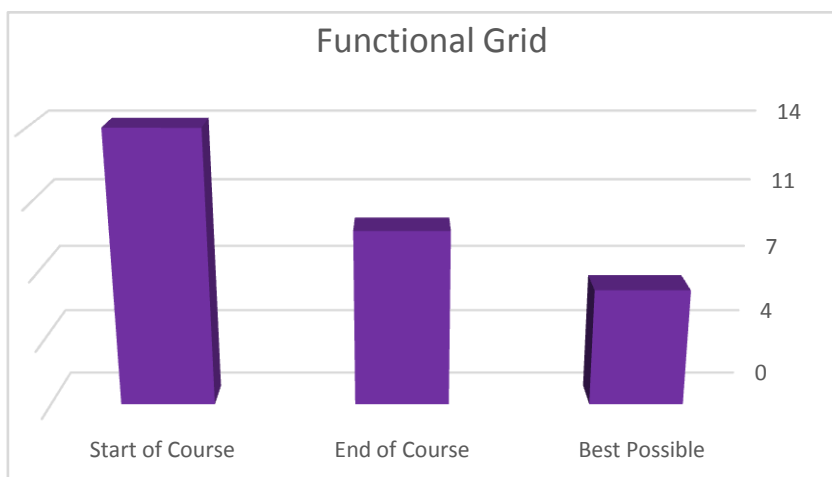
The participant chooses from 3 answers; 'not confident' (3), 'slightly confident' (2), or 'confident' (1). The numbers from each response are totalled to provide a single score ranging from 10-30 (the lower the score, the better). This chart shows the average scores of the participants at the beginning of the course (18) 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 totalled 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. Some clients improved their functional grid score by 12 points.



## **Learning**

As was the case with previous cohorts, adherence to the home exercise was not easy to achieve for all participants. To counteract this, the instructors encouraged people to attend a community exercise programme. This proved to be successful in most cases. It was 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. To help prompt clients to short exercise tasks we used prompt cards which people could put around the house to remind them to do certain things at certain times. The instructors also gave clients some home workout videos to follow.

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

## **Added Value**

All the exercise activities were followed with an educational element in which instructors covered a range of topics linked with falls prevention. These education sessions provided participants with some valuable information and discussion points, and often led to a referral to a local support service. For example, during the 'home safety' talk, participants were provided with the 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 provided additional support to participants by providing participants with a Later Life Training Postural Stability exercise guide along with their own theraband so that they were able to complete their home exercises effectively. We recommended 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 were advised about 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 focussed the final 5 weeks of the course on progression to community exercise. The final 5 weeks of the course took the shape of community exercise classes available locally, for example in a circuit format, in a gym environment, or incorporating 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. At the time of writing this report 23 out of the 25 (92%) completers have already attended a community exercise program and have plans to continue.

### **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, get dressed 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.

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

'I have enjoyed the sessions and also meeting and making new friends'

'A group which has worked together with the help from Richie and Emma'

'I intend to carry on exercise classes at Barmoor on Friday mornings as I feel I need to keep building up my confidence. I have enjoyed Staying Steady and have got a lot of pleasure from it. I feel better for it, thanks'

'I'm generally fit, walk, work in and around the garden in addition I do a modest amount of general exercises, but I have enjoyed attending, both for myself and my wife. Thank you'

'I feel more confident walking and doing things at home. I have really enjoyed the 20 weeks. Richie has made it enjoyable with lots of laughs and taught me a lot.'

'Feeling much better, more confident'

'Feeling very well, it did me good to go and enjoy the programme.'

'Consider myself very lucky to have the opportunity of taking part in this excellent programme run by two inspirational instructors, Richie and Emma. Long may it continue.'

'Look forward to Thursdays and for me the time and venue is spot on.'

'A well organised course. Well conducted by Richie. In fact, it has been a pleasure to attend each session and I am sure everyone has found some benefit.'

'The tuition has been very good and I enjoyed the variety of exercises. I would prefer the sessions to be in the mornings.'

'I feel so happy in this class. Richie make us all feel good about ourselves would love to continue.'

'I have enjoyed the course. It has made me realise the importance of exercise as we get older.'

'Have enjoyed the course, and Richie has been very helpful, and made us all feel at ease, and made it a joy to come.'

### **Case Study:**

Joan M

When I was referred to the exercise from the QE hospital I was very unsure of what the course would entail but thought I would give it a go as I had nothing to lose.

The first session I turned up I was so frightened. I didnt know anybody and had no confidence at all.

Richie made us all very welcome and helped settle my nerves a little bit with his approach to the session but I was still terrified of exercise.

We started off the exercise and there was always a seated option or you could hold on to the chair. I held the chair 'tightly' at first. After about 4 weeks I had gained some confidence and for some things let go of the chair completely.

Every week Richie give us something to challenge us and although at the time I didn't like this I knew it was doing me the world of good.

As the sessions went on and I had better idea of what we were doing I was less nervous and started to enjoy the sessions. I was gaining confidence all the time which was helping me do more around the house and get out more.

I couldn't believe the confidence I had by the end of the programme, I could do the whole session without holding on, my balance was better, I felt fitter, but most importantly I wasn't scared anymore.

I'm going to carry on exercise at Gateshead Older People's Assembly and I have made some lovely new friends who I will keep in touch with and see at sessions.