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Edith A. Macintosh Bob Laventure

Article information:

To cite this document:

Edith A. Macintosh Bob Laventure , (2014), "Care ... about physical activity" in care homes in Scotland", Working with Older People, Vol. 18 Iss 3 pp. 120 - 127

Permanent link to this document:

<http://dx.doi.org/10.1108/WWOP-05-2014-0013>

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“Care ... about physical activity” in care homes in Scotland

Edith A. Macintosh and Bob Laventure

Edith A. Macintosh is a Rehabilitation Consultant, based at Care Inspectorate, Dundee, UK.
Bob Laventure is a Consultant, Physical Activity and Older People, based at BHF National Centre for Physical Activity and Health, Loughborough University, Loughborough, UK.

Abstract

Purpose – *The purpose of this paper is to outline an approach being taken, to improve opportunities and increase levels of physical activity amongst residents in care homes in Scotland, which has the potential to make a significant difference to the quality of lives. The approach is designed to raise awareness about the importance of physical activity, increase skills, knowledge and capacity amongst the workforce.*

Design/methodology/approach – *The paper describes the reasons for promoting physical activity in care homes. It describes the challenge to this, associated issues and introduces you to a resource pack which offers solutions to care homes through a self-improvement process. It provides a case study which exemplifies how the ideas can be applied on a day-to-day basis.*

Findings – *The paper provides insights into the challenges in the care home sector to promoting physical activity and offers some ways round these. It describes two strategies within the new resource pack to support care home residents to make person centred physical activity choices.*

Practical implications – *This paper suggests that to promote physical activity in a care home the choices and needs of an individual must be the starting point. It requires partnership working and good leadership where staff have the permission to work in a new way. It suggests that risk enablement is key and the benefits of physical activity outweigh the risks even with frail older people.*

Originality/value – *This paper promotes a new resource pack for care homes in Scotland for promoting an active life based on a self-improvement process.*

Keywords *Physical activity, Quality of life, Older people, Ageing well, Improvement, Care homes*

Paper type *Viewpoint*

Introduction

The decline in physical activity (Scottish Health Survey, 2008/2009) and increase in sedentary behaviour into later life (Harvey *et al.*, 2013) are well documented and a serious cause for concern given the impact of such behaviours on health, wellbeing and overall quality of life.

This paper outlines an approach being taken, to improve opportunities and increase levels of physical activity amongst residents in care homes in Scotland, which has the potential to make a significant difference to the quality of their lives. The approach is designed to raise awareness about the importance of physical activity, increase skills, knowledge and capacity amongst the workforce and look at a whole systems approach to self-improvement for individual care homes.

“Care [...] about physical activity” is the result of an ongoing partnership between the Care Inspectorate in Scotland and the BHF National Centre for Physical Activity and Health at Loughborough University.

The Care Inspectorate is the national scrutiny body that regulates and inspects care services across the whole of Scotland. As every person should receive care that reflects their needs and promotes their rights, the Care Inspectorate carries out thousands of care service, social work and joint inspections each year. Its job is not just to grade services on the quality offered, but to

drive improvement and help every care service reach the highest standard. During the inspection process the Care Inspectorate takes account of the National Care Standards. These are based on a set of principles that recognise that services must be accessible and suitable for everyone who needs them. The principles are dignity, choice, safety, realising potential and equality and diversity. The “Care [...] about physical activity” resource pack can help services to evidence that they are working towards meeting some of the standards that relate to promoting physical activity such as lifestyle both social and cultural, religious belief or faith, keeping well and taking part in daily life.

Why care about physical activity?

There is strong evidence that regular physical activity can help to reverse some of the age-related decline in physical and psychological function and help to maintain independent living and mobility. Many of these benefits can still be achieved in later life even by the oldest and most frail including (Department for Health (DH), 2011):

- maintaining physical and cognitive function;
- preserving mobility and independence;
- engaging in opportunities for learning and new experiences;
- improving quality and quantity of sleep;
- maintaining higher levels of energy and vitality to enjoy later life;
- reducing levels of anxiety and depression, improving mood and self-esteem; and
- engaging and interacting with others and the environment, reducing feelings of isolation and loneliness.

Even for those residents with very limited mobility, including the frailest and those who spend long periods of time sitting, small but regular bouts of physical activity and movement which promotes circulation will help to reduce the complications of immobility including (Young and Dinan, 2005):

- deep vein thrombosis (clotting);
- gravitational oedema (swelling of the legs caused by accumulation of fluid);
- contractures (thickening of the joint tissues leading to deformity);
- pressure sores; and
- faecal impaction (severe constipation).

What's new about physical activity?

In addition to our increased knowledge relating to the benefits of physical activity, we are now beginning to understand the dangers of prolonged periods of sedentary behaviour, time spent sitting (Pate *et al.*, 2008). Prolonged bouts of sedentary behaviour are now recognised as an independent risk factor for poor health (DH, 2011). This should be a particular concern in care homes as studies demonstrate that as much as 80 per cent of a resident's waking time may be spent sitting (Tinetti, 1994) and physical activity may be a thing of the past or something that they see as not important (Stathi and Simey, 2007). Moreover, low levels of physical activity may also have contributed towards frailty amongst residents and an increased risk of falls. (Spiriduso *et al.*, 2005).

Frailty is a state of vulnerability and arises from multiple factors. Whilst it is a condition brought about by a combination of old age and disease, physical inactivity is known to be a significant contributing factor (Spiriduso *et al.*, 2005). Many older people have multiple medical conditions, such as a combination of arthritis, diabetes, cardiovascular disease and dementia as well as diminishing strength and balance leading to an increased risk of falls.

Physical activity is described as “any body movement produced by the skeletal muscles that result in a substantial increase over resting energy expenditure” (Bouchard and

Shephard, 1994). Care homes have a strong tradition of providing purposeful activity programmes as well as regular exercise and movement group activities. However, being physically active is not the same as taking part in an organised exercise class or a walking group, important as they are. It is about opportunities to move more often, each day and throughout the day.

Motivating frailer, older people

Increasing physical activity amongst residents in care homes represents a significant challenge. Many may depend upon others to undertake the basic activities of daily living and have disabling conditions. Similarly, frailer, older people may have cognitive impairments or be concerned about over exertion. Patterns of sedentary behaviour may be well established with no habitual routine involving physical activity.

Frailer, older people will be more motivated when they (BHF National Centre for Physical Activity and Health, 2012):

- find a sense of purpose or reason to move which is relevant to their situation and self- identity;
- feel safe and can trust those assisting and supporting them;
- believe that significant others for example family members, carer givers and professionals have positive attitudes towards them being physically active;
- are successful and recognise their own achievements;
- discover opportunities to interact and socialise with other people; and
- engage with personal interest and enthusiasms.

In 2011, the UK Chief Medical Officers for the first time published guidance on physical activity for older adults 65 + and within this guidance, included frailer, older people. These guidelines take the form of evidence-based summary statements and are the basis for the development of a population based approach to physical activity. They can be used to inform the professional development of those working with (frailer) older people, form the basis of advice given to frailer, older people and underpin the design and implementation of programmes.

The guidelines can be summarised as (DH, 2011):

- Break up the pattern of sedentary (sitting) behaviour.
- Do some physical activity every day.
- Accumulate regular bouts (ten minutes) of physical activity.
- Undertake some strength and balance activities at least twice a week.

Regardless of age, ability or previous physical activity patterns, these guidelines can be applied to all older people although it is recommended that these are adjusted and interpreted for each individual according to their needs and abilities. However, these guidelines do represent a significant challenge for residents in care homes and those that work with them.

Risks and benefits of physical activity

Evidence suggests that continuing with an inactive lifestyle and prolonged periods of sedentary (sitting) behaviour might present greater health risks than gradually increasing physical activity. Evidence also confirms that those who are the least active have the most to gain from taking part, even with small increases in regular physical activity. (DH, 2011) If residents are supported to gradually increase the amount and/or intensity of their physical activity, they are unlikely to face undue risks. Residents themselves may feel concerned about over-exertion and causing harm to themselves. Additionally, while being physically active, the fear and risk of a fall may be further exaggerated. An individual care plan should both involve the resident in making choices to be active and indicate the extent to which a resident should be encouraged to move independently, walk or be active, with or without support and supervision.

Working differently to support choices and rights

Every person in a care home has the right to live life the way they would choose and that includes their physical activity choices. There are many opportunities in everyday life to support people to realise their physical activity choices through a true person centred approach. Many daily activities carried out by staff in care homes are viewed traditionally as “tasks to be done to” and yet provide the very opportunities that older people need, and want, which allows them to be active daily and live life the way they would wish to. Staff may feel they require permission to work differently in this way to engage and enable residents to take part in the life of the care home. Care home managers can be excellent role models and support their staff to take and seek out opportunities to enable residents to be more active every day. Make Every Moment Count (Care Inspectorate, 2013) is a helpful initiative which supports this principle, focusing on person centred care and emphasising the fact that every human interaction and intervention provides an opportunity to make a difference to the quality of someone’s life.

Raising awareness amongst the care sector

Building on the 2014 Glasgow Commonwealth Game Legacy planning, through the annual Go for Gold Challenge programme in Scotland, care homes have increased the opportunities for residents to be physically active by being inspired to take part in games, walking and dance challenges. Beginning in 2012, the Go for Gold Challenge programme in Scotland now involves around 2,000 care home residents and a similar number of carers and volunteers in local challenge events, on an annual basis. The events can vary in size and type and can involve many care homes or just one. These events have provided the opportunity for community engagement and intergenerational practice encouraging links with local organisations and community facilities.

“Care [...] about physical activity” resource pack

The new resource, published in March 2014, called “Care [...] about physical activity” provides a new and additional challenge to the care home sector which is to increase the frequency and regularity of physical activity amongst residents so that being active is an informal and daily choice that can be made at almost any time of day or night. This resource tells care homes that the key to promoting physical activity is the way in which it is built into the daily life of a care home using every day activities of daily living and ensuring the needs and choices of the individual are being met. The message is all about the opportunities available for someone to move more often.

What does the “Care [...] about physical activity” resource pack include?

The resource pack includes:

1. A booklet with:
 - an introduction to the resource, an introduction to physical activity in care homes and how to make improvements;
 - the physical activity self-assessment tool and guidance for its use; and
 - a description of the three key principles to promote physical activity.
2. A DVD to support implementation of the resource pack.
3. Make Every Move Count – a pocket guide to active living.
4. A call to action poster.
5. Physical activity and self-assessment tools.

Supporting the care sector – two strategies for action and improvement in the resource pack

To assist care homes in rising to this challenge, the new resource “Care [...] about physical activity” has been produced as a means of stimulating thinking and action. To support the

process, a whole systems self-improvement approach has been developed to increasing physical activity using the World Health Organisation Healthy Settings Model which highlights that “Health is created and lived by people *within the settings of their everyday life*; where they learn, work, play, and love” (World Health Organisation, 2008).

To support care homes to make the suggested improvements, two main strategies for action have been outlined. The first of these is the use of a self-improvement process which challenges all those working in care homes to look at how, together, they can make a number of changes that provide an environment that supports residents to increase their physical activity levels. This self-improvement process recognises three key principles for promoting physical activity in a care setting and each principle has three areas for improvement (Figure 1), which are used to provide a series of standard statements or benchmarks, against which care homes can measure their progress.

Led by a manager, staff can work together using a series of prompts and tools that relate to each area for improvement.

The second strategy is the use of a pocket guide called “Make Every Move Count” which acts as a prompt for each member of staff to look at ways to support individual residents to become more active daily using activities of daily living to increase these activity levels. The pocket guide contains five key messages which are written in the first person and act as the voice of the resident.

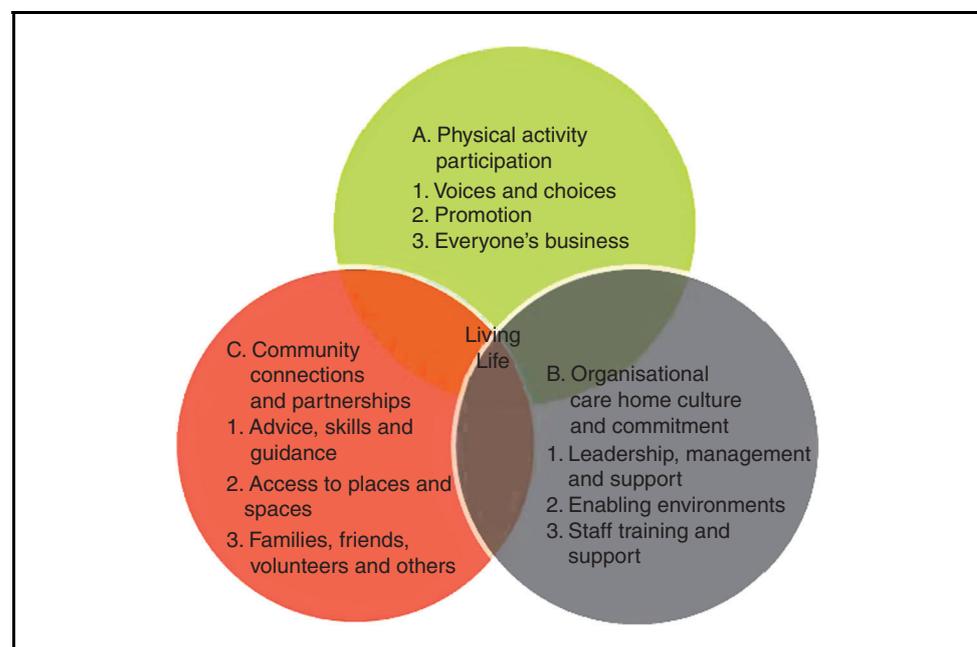
The guide tells us that:

“Being physically active will make a difference to me and to you. It’s not the same thing as planned exercise or group activities: it is about the small simple things we can add into daily life that makes the difference and make it easy to be active”.

The five key messages in the guide are:

1. Get to know me, what motivates me supporting me to move with purpose.
2. Support me to move safely with confidence.
3. Support me to move more often and be more active every day.

Figure 1 Key principles and improvement areas



4. Support me to move regularly and frequently.
5. Support me to move, giving purpose and meaning to my day.

The messages are supported by series of prompts designed to support the residents' choice and facilitate a person-centred approach and purposeful activity choice, for example rising from a chair (assisted), walking or moving around the care home to carry out an activity of choice and making use of the outdoors.

The resource also provides a set of tools to help care homes to make any improvements required and there are some links to resources. It also includes an educational DVD which has stories from care home residents, staff and relatives about the difference being active can make. There is a poster for each care home to demonstrate their commitment to implementing the resource pack. Also managers and staff can access a learning app to help their improvement work and support their understanding of the importance of physical activity.

Implications for practice

The approach outlined in "Care [...] about physical activity" has a number of important implications for those who work in care homes and those who work in partnership with care homes:

- The self improvement approach in the "Care [...] about physical activity" resource pack enables care home managers and staff to identify what they are doing well as well as areas where they need to improve.
- The whole systems approach required to provide a supportive environment and develop strong community links depends upon both leadership from managers and the commitment of all those who work with residents.
- Staff sometimes feel they require the permission to work differently in this way. The clear message is it is everybody's business.
- Physical activity promotion is consistent with choices, rights and person centred care.
- Using the resource pack and promoting physical activity with residents can support care homes to meet some of the National Care Standards.
- The approach enables residents to be supported to make a purposeful choice that is relevant to them and improve the quality of their lives on a daily basis.
- There is good evidence that the benefits of regular physical activity outweigh the risks and an appropriate risk enablement strategy will assist in ensuring that residents feel safe and trust those supporting them to make physical activity choices.
- Physical activity is not just for residents, the benefits of participation apply to everyone who works in a care setting and the wider care home community.

What might it look like? A physical activity cameo

Rosemary 92 years – a frailer, older person living in a care home

This cameo is provided to illustrate how "Care [...] about physical activity" could be interpreted to support a frailer, older person to increase their physical activity. It highlights the type of support from significant others and access to physical activity enhancing environments and opportunities that might make this possible in addition to the activities suggested.

Rosemary is single and lives in a care home as a result of her increasing frailty and a bad fall following prolonged spells of dizziness and confusion. She is able to walk with assistance using a walking frame and is actively involved in the user forum that plans a regular programme of activities for residents.

Rosemary's frailty has been highlighted within her individual care plan and a visiting physiotherapist, who leads a weekly strength and balance class, has provided her with a small number of muscle strengthening exercises for her legs and arms. Determined to maintain her independence, Rosemary is motivated to do these by herself, and the staff assist her by prompting and encouraging her to do so on a regular basis. Consequently, Rosemary is becoming more confident about walking unaided, but supervised, to the dining room. The staffs also ensure that she is able to enjoy regular fresh air by accompanying her on a daily assisted walk to the grounds to enjoy the scented garden and sit by the ornamental pond and this is something she is able to do when her family comes to visit her. When the weather is not so kind, Rosemary substitutes these visits with a corridor walk to visit other residents.

Rosemary is an enthusiastic participant in painting and music classes, activities that she is encouraged to do in her own time with a friend and she always attends sessions provided by visiting speakers. In order to break up the long periods that residents spend seated and sometimes asleep, the staff and residents have agreed a "Get up and Go" action plan, that encourages residents to make a move of their own choice every 90 minutes. Residents are also encouraged, when possible; to stand and make their own drinks as the refreshment trolley arrives in the lounge at regular intervals. The care home is also planning a week long walking challenge where residents will collectively accumulate and turn walking steps into miles, equivalent to the distance between their home and a twinned residential home in the USA.

Physical activity – what are the main messages?

Physical activity – overarching key messages

The evidence suggests the total amount of activity undertaken is the key to obtain the benefits of physical activity rather than specific types of activity or combinations of frequency and intensity.

For residents, this can be achieved by accumulating short, regular bouts of physical activity and, with improved confidence, first increasing the duration and then the intensity as and when appropriate.

Adding strength and balance activities will bring increased benefits related to independence and mobility.

Further information

Web site source URL for "Care [...] about physical activity" resource pack at <http://hub.careinspectorate.com/improvement/toolkits-and-resources/care-inspectorate/>

For more details about physical activity and older people visit at www.bhfactive.org.uk/olderadults

For the National Care Standards visit at www.nationalcarestandards.org/74.html

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Corresponding author

Edith A. Macintosh can be contacted at: edith.macintosh@careinspectorate.com

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