

CONFERENCE ABSTRACT

Care about Physical Activity (CAPA) improvement programme –improving older people’s quality of life through engagement in movement meaningful to them

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Introduction: Older people experiencing care should meet national activity guidelines. However a culture of sedentary behaviour where people can spend 80-90% of time seated/lying down exists. Inactivity negatively impacts physical, social, emotional and mental health. Complex causes include: lack of staff knowledge; fear of falling and culture.

The Care Inspectorate (scrutiny/improvement body for social care/work in Scotland) was commissioned by the Scottish Government to design and lead CAPA.

Practice change implemented: The CAPA team worked with organisations who completed a self-assessment.

Small improvement teams collaborated at learning events, developing skills/confidence in listening to older people and supporting them to move more in ways that were meaningful.

Local teams used Plan, Do, Study, Act (PDSA) improvement approach to carry out small tests of change.

Base line measurements were set locally.

Aim and theory of change: That all staff (from domestic staff to managers) used an improvement approach to focus on Organisational Culture and Commitment; Community Connections; Physical Activity Participation

Our theory of change was that staff’s confidence to promote movement would increase.. Staff would implement small scale improvements and influence physical activity and movement undertaken by older people. Positive improvements in psychological and physiological wellbeing of older people would result.

Targeted population and stakeholders: Older people experiencing care who are supported by care professionals in eight partnership areas in Scotland were targeted. This included people living in care homes, being supported at home or in sheltered housing or attending day services.

Stakeholders included older people, families, partnership leads, community organisations, care and health professionals.

Timeline: April 2017 – October 2018

Highlights: Staff started small scale innovative improvements based on what was meaningful to the older person.

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Staff's knowledge and confidence about movement to encourage older people to move more improved statistically significantly.

One example of impact can be seen with Beth who has advanced dementia. After 20 weeks:

sleep pattern and appetite improved

joined community walking group

physical health improved

Sustainability: Organisations have sustainable plans for beyond the life of the CAPA programme. Individual staff sustain improvements in different roles.

Transferability: The CAPA approach has spread to areas beyond the reach of original programme, to children's services and the Scottish Prison Service. The model is transferable and includes on-line learning resources open to all

Conclusions: The results show statistically significant improvement in psychological and physiological measurements such as lowered risks of falls and decreased anxiety levels. Qualitative data demonstrate enriched individual lives.

Discussions: Giving care professionals relevant tools and improvement knowledge increases confidence and belief in effecting change. Staff are increasing the number of natural opportunities for movement in everyday lives of older people experiencing care.

Lessons learned:

Start with conversations and what is important to the person.

Involve local experts, community, family, friends and all staff.

Have a range of change ideas

Use PDSAs involving all relevant people

Keep tests of change small and manageable.

Keep measures relevant and easy to administer.

Keywords: outcomes; improvement; involvement; activity; leadership
