

BUnyAH

**Bond UNiversity Allied Health
Interprofessional Healthy Lifestyles Program**





The Program

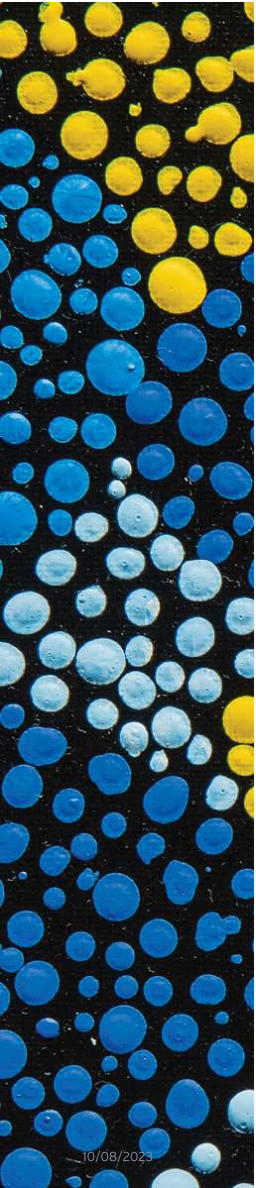
- A 12-week intensive active lifestyle program linking with ongoing referral pathways aimed to sustain gains
- Developed by Bond University Allied Health Professionals including occupational therapy, exercise science, physiotherapy and nutrition and dietetics programs.
- Designed to deliver bi-weekly, client-centre health education and exercise classes to Gold Coast community members that are at risk of frailty and/or early admission to aged care facilities.
- Informed by the latest evidence-based research
- Positively framed around lifestyle re-design and behavioural change theory



Program goals

1. Improved Physical Function: Regular exercise has been shown to improve physical function in pre-frail older adults. A RCT by Cadore et al. (2013) found that a 12-week progressive resistance training program improved muscle strength, physical performance, and functional capacity in pre-frail older women.

2. Decreased Risk of Falls: Regular exercise has also decreased the risk of falls in pre-frail older adults. A meta-analysis by Sherrington et al. (2019) found that exercise interventions that included balance and functional training reduced the risk of falls in community-dwelling older adults, including those who were pre-frail.



3. Improved Quality of Life: Regular exercise has been shown to improve the quality of life in pre-frail older adults. A systematic review by Huang et al. (2021) found that exercise interventions improved quality of life outcomes, such as physical function, mobility, and social participation, in pre-frail older adults.

4. Reduced Risk of Hospitalization: Regular exercise has also been shown to reduce the risk of hospitalization in pre-frail older adults. A systematic review by Cadore et al. (2019) found that exercise interventions reduced the risk of hospitalization in community-dwelling older adults, including those who were pre-frail.

5. Improved Cognitive Function: Regular exercise has also improved cognitive function in pre-frail older adults. A randomized controlled trial by Fissler et al. (2019) found that a 12-week combined exercise and cognitive training program improved cognitive function and physical performance in pre-frail older adults.



Community development, consumer co-design

- Bespoke healthy ageing program to support senior Australians to live safely in the Gold Coast community for longer.
- An evidence-based program co-designed by allied health clinicians inclusive of occupational therapy, exercise science, nutrition, and physiotherapy from Bond University. Input from participants enrolled in the demonstration project will inform future program design.
- Promote ‘healthy lifestyles’ to participants to improve physical activity, enhance quality of life so to reduce falls, prevent hospital and aged care admissions.
- Increase access to health services for participants in the Gold Coast community by post-program referrals to appropriate local business including over 50s gyms, allied health professionals for individual therapy, and social connection groups.



Developing workforce capacity

Authentic interprofessional clinical placements

- The program is structured as a time limited, 12-week program enabling students to move through as a part of their clinical practice education.
- Aim to compliment external placement providers and provide authentic clinical experiences in a real-world clinical environment.

Future Workforce Development

- Incorporation of students – Masters level in OT, PT and N and D
- Build an increased graduate awareness of the workforce demands of primary health care and simultaneously develop clinical skills required to identify and manage those at risk of frailty.
- A key component of the program is establishing referral pathways from GPs and developing clinical competencies in interprofessional communication, assessment, discharge, and handover practices.



Developing Research Capacity

- The program model includes a comprehensive interprofessional assessment of consumers on entry to and exit from the program.
- Subject to full ethics, and consent processes data will be collected and stored for current and future research projects into the area of frailty and the trajectory of consumers referred to the program.
- This is a unique opportunity to investigate the antecedents, effective interventions and consequences of frailty in the Gold Coast community, and add to the global evidence base



Program structure

1. Two sessions per week over 12 weeks
2. One hour group education, followed by group exercise program and individual therapies as required (all supervised by registered AHP)
3. Pre and post clinical assessments by exercise science, occupational therapy, physiotherapy and dietetics and nutrition
4. Lifestyle changes sustained by referral to continuing services as required
5. Interprofessional and intergenerational approach.



Weekly session topics (educational and activity)

What matters to me?

- Keeping active
- Strong bones
- Healthy eating
- Understanding balance
- How to future proof your Home
- Technology and independence.
- Hobbies and interests
- Brain Gym
- Transport & driving
- Meal preparation
- Self-care
- Bowel and bladder health
- Sleep hygiene and sex
- Home maintenance



Exercise program

- **Informed by the World Guidelines for Falls Prevention and Management for Older Adults: A Global Initiative Group-based, supervised exercise intervention¹.**
- **Exercises developed to target the individual's capacity to maintain balance during functional tasks needed for daily life.**
- **Exercises will be individualised in order to provide an appropriate level of challenge to;**
 - Enhance neural, muscular and skeletal function,
 - Maintain safety to prevent injury
 - Be achievable for sufficient dose and sense of mastery
- **The exercise program has been developed to enhance modifiable intrinsic falls risk factors**
 - Muscle weakness – strength and muscular power with a focus on applicability to ADLs
 - Balance deficits – static/dynamic steady-state, proactive and reactive
 - Gait instabilities – maintenance of, or increase in gait speed

1. Montero-Odasso, M., van der Velde, N., Martin, F. C., Petrovic, M., Tan, M. P., Ryg, J., ... & Masud, T. (2022). World guidelines for falls prevention and management for older adults: a global initiative. *Age and ageing*, 51(9), afac205.



Service Setting



Groups Initially
Gold Coast Surgery Centre,
Level 1, 103-113 Nerang Street, Southport



Individual follow-up and Longer term
Bond Institute Health and Sport
1 Promethean Way, Robina.





Admission criteria

- Age - 65 plus or 55 plus (Aboriginal & Torres Strait Islander)
- Gold Coast resident living at home within the Community (NOT RACF)
- Score >1 in the FRAIL scale risk assessment
- At risk of frailty – presents with one or more of the following: social isolation, poor self-care, recent hospitalisation, polypharmacy, multimorbidity, falls, poor nutritional intake, low socio-economic, mood changes.
- Unable to access mainstream services (available privately, through private insurance and/or the medical benefit scheme)
- Has Commonwealth pension / health care card
- Cognitively and physically able to provide informed consent and participate in group activities

Exclusion criteria

1. Patients under palliative care services,
2. Patient is already in a Residential Aged Care Facility

Referral

REFERRAL FORM Bond University Allied Health (BUnyAH) Interprofessional Healthy Lifestyle Program



Phone Professor Susan Brandis for further information on **0437143704**
Forward completed Referral via **Medical Objects (preferred)** to: Prof Susan Brandis email BUnyAH@bond.edu.au

DATE:

PATIENT DETAILS

| | | |
|--------------------------------------|----------------|----------------------|
| Patient Name: | DOB: | Gender: M / F |
| Address: | Email: | |
| Daytime contact number: Home: | Mobile: | |

PATIENT PRESENTATION

Clinical History:

PAST HISTORY

Has the patient previously attended a falls prevention or frailty program/clinic? YES/NO

If yes, specify where and when:



Core program indicators

- **The Edmonton Frail Scale (EFS)** - is a practical tool to be used by health care professionals to measure the risk or severity of frailty in the general population based on the following 9 components: cognition, general health, functional independence, social support, medication use, nutrition, mood, continence, and functional performance (Rockwood, K.et al. 2005)
- **SF-36** – to assess quality of Life.

Questions?

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Assistant Professor Neil Chapman: nchapman@bond.edu.au





Acknowledgement of Country

**Bond University acknowledges the Kombumerri people, the traditional Owners and Custodians of the land on which the University now stands.
We pay respect to Elders past, present and emerging.**

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