Integrated Care Matters
Care Homes MEMC and CAPA; Living well in Multipurpose services NSW
Knowledge Tree Branch
Resources about Promoting Physical Activity and Living Well in Care Services

Scotland

Care Inspectorate (2014) Care… about physical activity [link]
Based on the World Health Organization model of ‘Health Promoting Settings’, this resource provides principles and a self-improvement framework for care homes. It is designed to stimulate simple solutions and practical approaches to enable all residents to choose to be active every day.

Macintosh, EA and Laventure, B (2014) “Care … about physical activity" in care homes in Scotland. Working with Older People, 18(3) [link]
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.

Care Inspectorate (2015) Evaluation of ‘Care… about physical activity’ [link]
This report describes an evaluation of the Care… about physical activity (CAPA) resource which was issued to all Care Homes for older people in Scotland in Spring 2014. The evaluation was undertaken using an online survey issued to all service managers and eight focus groups conducted in care homes. This was supplemented with a survey of a small number of staff from these care homes, and views of a small number of residents. The report concludes that CAPA has been well received by the majority of the care homes which were aware of it, but the number of homes that were not aware of the resource indicates that increased promotion of it would be beneficial. In general, in homes which were aware of it, CAPA has helped to increase awareness of the importance of movement, which has resulted in increased activity / movement for residents and staff. Some recommendations are made for further rolling out the resource.
Care Inspectorate (2018) Care about Physical Activity (CAPA) [link]
Care about Physical Activity (CAPA) is an improvement programme led by the Care Inspectorate to help older people in care to move more often. From little things like encouraging older people to post their own letters or walk up the stairs instead of using the lift. It’s about staff, people experiencing care and their friends and family working together to increase health, well being and mobility. It’s about making things easier so that people can do things for themselves. The website has a variety of resources and video clips including:

- ‘Care...about physical activity’ booklet
- Call to action poster
- ‘Make Every Move Count' pocket guide
- A DVD to support the implementation of the resource pack.
- Physical activity tools
- Self Assessment Tools

Care Inspectorate (2017) Make Every Moment Count: a guide for everyday living [link]
The Care Inspectorate has worked with a team of experts to develop the ‘Make Every Moment Count’ resource, which contains easy to read and simple guidance for everyone supporting older people in a care home or at home. The resource highlights how making the most of every moment can make a real difference to a person’s quality of life in simple but very meaningful ways.
The five key messages are:

- Get to know me
- It's not just what you do... it's how you make me feel
- Know what I can do and support me to do it
- Help me feel comfortable, safe and secure in my surroundings
- Remember little things all add up

Macintosh, EA (2013) “Make Every Moment Count” in care for older people. Working with Older People, 17(3) [link]
Purpose: The purpose of this paper is to highlight the importance of Make Every Moment Count (MEMC) and explain the development of it.
Design/methodology/approach: A working group of representatives from key organisations in Scotland developed the resource MEMC. It was tested out in a variety of care settings and issued to all care homes for older people and care at home services in Scotland.
Findings: The paper highlights the importance of participating in day-to-day life on health and well-being and provides feedback from care staff on using the resource.
Practical implications: The resource is for all those supporting someone to engage in day-to-day life. A lot of good care is given however sometimes the small, everyday interactions are taken for granted and people need reminded about the big difference this can make to someone’s life.
Social implications: MEMC has the potential to begin to change culture – to rethink “activity” which is often thought of as planned organised events to everyday activities and interactions.
Leisure and Culture Dundee (no date) Dundee Physical Activity Strategy [link]
Context: We will work collectively through a managed physical activity network to enable people who are inactive to become active and those who are active to remain active. Includes CAPA.

Perth and Kinross Council (no date) Care Home Activity Network: Perth & Kinross Care Home Meaningful Activity Network [link]
The Perth & Kinross Care Home Activity Network (CHAN) was established following a Care Home Meaningful Activity Conference which was held in Perth in March 2010. At this event, care home staff indicated their keen interest in being involved in a forum where they could support each other, network and share ideas, information and resources which would enhance the provision of activity in local care homes. The ultimate aim of the CHAN is to benefit all our residents’ physical and mental wellbeing and thus improve their quality of life. Being engaged in meaningful activity promotes self worth and gives meaning, purpose and enjoyment to each day. Meaningful activity is the responsibility of all care home staff and should happen all the time. Everyday activities are meaningful activity.

Scottish Government (2017) Allied Health Professions Co-creating Wellbeing with the people of Scotland The Active and Independent Living Programme in Scotland [link]
The Active and Independent Living Programme 2016-2020 intends Allied Health Professionals to work in partnership with the people of Scotland to enable them to live healthy, active and independent lives by supporting personal outcomes for health and wellbeing.

Slightly outdated, but still relevant guide to policies and procedures relating to encouraging active ageing.

Age Scotland (2017) Physical Activity [link]
Advice on increasing activity for older people in care and home settings


Take the Balance Challenge campaign’ targets people over 50, their families and friends, as well as services and organisations with which they may be in contact. It invites people to check their balance and use the ‘super six’ strength and balance exercises described in a Campaign leaflet; and an animated film of the ‘super six’

Seniors USP [https://www.gcu.ac.uk/seniorsusp/] brings together internationally-recognised multidisciplinary expertise in a range of areas such as active ageing, sedentary behaviour and physical activity/inactivity to collectively deliver crucial information to inform future interventions to reduce sedentary behaviour and increase physical activity in older people. It will help to design more effective interventions to encourage older people to become less sedentary and more physically active, as well as identify key life stages at which intervention are crucial to promote activity and who may be vulnerable to low activity.
UK Physical Activity Guidelines (2011) [link]
The UK-wide CMOs report presents physical activity guidelines for all four UK home countries, covering early years; children and young people; adults; and older adults. This is the first time UK-wide physical activity guidelines have been produced and will help to ensure consistent messaging across the four countries. This report also represents the first time guidelines have been produced in the UK for early years (under 5s) as well as sedentary behaviour, for which there is now evidence that this is an independent risk factor for ill health.

England - NHS Choices: Activities for the Elderly [link]
NHS advice on exercise for older people with helpful links

Wales - Steady On Stay Safe campaign has a range of materials for over 50s to reduce risk of falling. The ‘Get Up & Go’ booklet highlights three simple things that people can do to reduce their fall risk and has been distributed to every GP surgery in Wales.

International Examples

Australia

Agency for Clinical Innovation (2018) Living Well in a Multipurpose Service [link]
The Living Well in MPS Principles of Care have been developed to support staff in providing care for residents of Multipurpose Services (MPS); not as patients in hospital, but as people living in their home. The Principles of Care aim to:

- Enhance quality of life, independence and wellbeing for people living in an MPS, and their families.
- Support staff capability in providing an individualised person-centred care culture for residents within MPS, not based on clinical need but based on lifestyle and enablement.

Agency for Clinical Innovation (2018) Living well in Multipurpose Services: principles of care [link]
This document identifies eight key principles designed to improve the quality of life and wellbeing of residents living in MPS residential aged care facilities.

Agency for Clinical Innovation (2018) Living Well in Multipurpose Services Self-Assessment Checklist [link]
This resource has been designed to help MPS identify their current strengths and weaknesses in relation to the eight key principles and prioritise areas they wish to improve.

Agency for Clinical Innovation (2018) Living well in Multipurpose Services: principles in practice [link]
This report highlights the small (and larger scale) changes implemented as a result of the MPS Collaborative, with an emphasis on staff, resident, carer and family experiences. It describes specific case studies of changes implemented in MPS, highlighting achievements across NSW. The final section of the report outlines opportunities and recommendations for the future.
Agency for Clinical Innovation (2018) Living well in Multipurpose Services: resource guide [link]
This guide provides details and links to resources around the principles of care: respect for rights as an individual, informed and involved, comprehensive assessment and care planning, homelike environment, recreational and leisure activities, positive dining experience, multidisciplinary services and expertise in aged care.

Burton, E et al. (2015) A Systematic Review of Physical Activity Programs for Older People Receiving Home Care Services. Journal of Ageing and Physical Activity, 23(3) [link]
The proportion of older people living in our communities is rising and, to live independently, some require assistance from home care services. Physical activity can improve and maintain function, strength, and balance, which are important for those receiving home care. This study reviewed the evidence on physical activity/exercise interventions trialed with older people receiving a home care service. A systematic review of studies published from January 1982 to September 2012, from five databases, was undertaken. Inclusion criteria were: aged 65+ years; community dwelling; no dementia diagnosis; receiving home care services; and a physical activity/exercise program. Eight articles were included and results show there were few consistencies between intervention types, groups, outcome measures, and follow-up. Study quality was mixed. Future studies should include pragmatic randomized controlled trials involving home care practitioners and their clients to gain “real-world” knowledge of what interventions are effective and can be delivered within this setting.

Background: Physical activity (PA) in older people is critically important in the prevention of disease, maintenance of independence and improvement of quality of life. Little is known about the physical activity of the older adults or their compliance with current physical activity guidelines.
Methods: A systematic search of 53 papers published since 2000 that reported: the PA level of non-institutional older adults (aged 60 years and over); and the proportion of older adults in the different samples who met PA recommendations or guidelines.
Results: The percentage of older adults meeting recommended PA ranged from 2.4 – 83.0%. Older age groups were less likely than the reference group to be regularly active, and women were less likely than men to achieve regular physical activity, especially leisure time physical activity, when measured by both subjective and objective criteria.
Conclusion: The review highlights the need for studies which recruit representative random samples of community based older people and employ validated measurement methods consistently to enable comparison of PA levels over time and between countries.

World Health Organisation (no date) Factsheet on Physical Activity and Older Adults [link]
In adults aged 65 years and above, physical activity includes leisure time physical activity (for example: walking, dancing, gardening, hiking, swimming), transportation (e.g. walking or cycling), occupational (if the individual is still engaged in work), household chores, play, games, sports or planned exercise, in the context of daily, family, and community activities.
List compiled by Iriss Evidence Search and Summary Service.