



**Program: Evidence-Based Disease Prevention:
Physical Activity**

Organization: Partners In Care Foundation

Project Title: Healthy Moves for Aging Well

Project Period: 10/01/2003 TO 09/30/2006

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Model

In 2002 Partners assembled a pilot intervention to increase physical activity through in-home exercise to frail, low-income elderly in community care management programs. The rationale for this approach is that relatively few evidence-based programs exist that focus specifically on improving health outcomes among frail elderly. The physical activity portion of this intervention is modeled after a research tested approach called **LifeSpan: A Physical Assessment Study Benefiting Older Adults**. The LifeSpan Assessment was born out of a need to assess the fitness levels of older adults. This program was developed by Dr. Jessie Jones and Dr. Roberta Rikli, researchers of kinesiology and health promotion at California State University, Fullerton. This research was then developed into a health promotion intervention with PacificCare, but never implemented due to fiscal crisis. Their materials were donated to Partners for this work, along with technical assistance from staff. Additionally, the Brief Negotiation Model of Change is implemented and taught during the training of the Care Managers who will ultimately deliver the physical activity training, and the volunteers who will follow-up and help reinforce participants.

Project's Overall Design

This intervention utilizes Care Managers (CMs) from community-based care management agencies to teach evidence-based exercises to home-bound, frail, low-income elderly clients. The clients will be assessed, taught a variety of safe exercises, and monitored by their CMs and volunteer peer coaches. These volunteers will be recruited and trained by the agencies to contact the senior participants and conduct telephone coaching and monitoring. CMs will monitor their clients' participation during their regularly scheduled appointments and reassess them at 6-month intervals.

Prior to implementation, the CMs will attend a training session led by a Behavior Change Educator and a Fitness Expert Consultant who will orient them to the project

and teach them how to reinforce principles of behavior change for the physical activity intervention. CMs and volunteer peer coaches will learn how to use behavior change techniques to engage clients in agreeing to improve healthy lifestyles. The target population will also attend an orientation session where they will take part in the functional fitness test developed by Rikli and Jones and administered by the CMs. The Behavior Change Educator and Fitness Expert Consultant will conduct regularly scheduled telephone follow-up support sessions with the CM teams.

Both client and CM satisfaction with the program will be explored using survey instruments. The clients will also take part in a follow-up functional fitness test to determine their progress.

Partnerships

- Senior Care Network, Huntington Memorial Hospital
- AltaMed Health Services
- Jewish Family Services

Target Population

Frail, low-income (dually eligible) home-bound elderly who are current clients of the selected Care Management agencies.

Anticipated Outcomes

Studies have shown that physical activity is the single most powerful health intervention available in improving the health status among older adults. It is anticipated that by addressing concerns about client safety and falls prevention, and teaching care managers how to implement new and simple evidence-based exercises for their older clients, further improvements will be seen in the health of this vulnerable population.

This intervention is intended to:

- Improve levels of physical activity in frail elders enrolled in care management programs;
- Strengthen and advance geriatric care management practice by training care managers in principles of behavior change; and helping them to apply these principles in motivating clients to enhance the level of physical activity in their daily lives;
- Synthesize a final cost-effective, culturally sensitive model and be able to incorporate the Healthy Moves intervention in a community-based agency's care management program without significant additional expense or time demands on staff;
- Be widely replicable in care management agencies throughout the country.