Stepping On

Building confidence and reducing falls
A community-based program for older people

Lindy Clemson & Megan Swann

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Stepping On is research-based and scientifically proven to reduce falls

Research and development of this program was conducted by professional geriatrics practitioners and researchers at the University of Sydney, Australia, and accepted for peer-reviewed publication in the Sept. 2004 issue of the Journal of the American Geriatrics Society. The study was a 14-month randomised trial involving 310 elders aged 70 and older, who had a fall in the previous 12 months, or were concerned about falling.

At the end of the study, those completing the Stepping On program experienced a big 31% reduction in falls! The authors commented that these results showed that ‘cognitive behavioural learning in a small-group environment can reduce falls.’

Stepping On is a seven-week group multi-faceted program with a follow up visit to support and facilitate strategies adopted during the program. There is a booster session after three months and we also recommend a six-month booster phone call.

Major authors of Stepping On were Associate Professor Lindy Clemson and Megan Swann with contributions from several other geriatric experts also involved in the project.

Lindy Clemson is an occupational therapist with a PhD in epidemiology. She is an Associate Professor in Ageing at the Faculty of Health Sciences, The University of Sydney. She is an international researcher in falls prevention with over 30 published papers.

Megan Swann is an occupational therapist who has 20 years experience working with elders. She has presented at various health conferences in Falls Prevention and has currently conducted over 50 Stepping On programs in Australia.
# CONTENTS

Acknowledgments.................................................................................................................................................. viii
Introduction.......................................................................................................................................................... 1
  Who is this program for?.................................................................................................................................... 3
  How to use this manual ................................................................................................................................... 3
Background.......................................................................................................................................................... 5
The underpinning concepts: making decisions, learning, and improving confidence ............................... 6
  Decision-making as a process .......................................................................................................................... 6
Storytelling and the use of story in facilitating learning and confidence ....................................................... 8
Learning and older adults as learners .................................................................................................................. 11
The principles of adult education ....................................................................................................................... 12
Self-efficacy beliefs as a tool for change ............................................................................................................. 13
Follow through with safety behaviours .......................................................................................................... 17
Group work, and the facilitator as a catalyst for change .................................................................................... 18
  Preferred seating and group size ................................................................................................................... 19
  Quality facilitating ......................................................................................................................................... 20
  Working with different participant styles ....................................................................................................... 22
Recognizing culture.............................................................................................................................................. 25
Marketing and recruitment ................................................................................................................................ 27
Evaluation .......................................................................................................................................................... 29
  The nature of the intervention (process) ......................................................................................................... 29
  The effects on older people (impacts) ............................................................................................................. 30
  The longer-term consequences (outcomes) .................................................................................................... 32
  Directions for the Timed ‘Get Up & Go’ ........................................................................................................... 32
Review of the program ....................................................................................................................................... 36
  Preparing and planning for sessions ............................................................................................................... 38
  Preparing the guest facilitators ....................................................................................................................... 42
  The homework .............................................................................................................................................. 43
Contents

The handouts.......................................................................................................................................................... 44

Session One: Introduction, overview, and risk appraisal .............................................................. 49

Objectives............................................................................................................................................................... 49
1.1 Introductions and sharing concerns and expectations ................................................................. 52
1.2 Summary of the program and aims ................................................................................................. 54
1.3 Your views: using the shopping list ............................................................................................... 54
1.4 Strength and balance exercises ......................................................................................................... 55
1.5 Risk appraisal ........................................................................................................................................... 58
Exercises to improve strength and balance ......................................................................................... 63
Safety precautions and contra-indications ............................................................................................ 67
Strength training .............................................................................................................................................. 67
Balance training ............................................................................................................................................ 68
Sustaining exercise ......................................................................................................................................... 69

Session Two: Exercise and moving about safely ............................................................................. 95

Objectives............................................................................................................................................................... 95
2.1 Welcome and outline.............................................................................................................................. 97
2.2 Pros and cons of regular exercise ....................................................................................................... 97
2.3 Review of exercise homework ............................................................................................................ 98
2.4 Review the shopping list results ........................................................................................................ 99
2.5 Goal setting for mobility mastery experiences .............................................................................. 99
2.6 Practising the exercises ...................................................................................................................... 100
2.7 Moving about safely: mobility and transfers ................................................................................ 100
2.8 Getting up from a fall ......................................................................................................................... 101
2.9 Safety alarm systems ......................................................................................................................... 102
2.10 Telling fall stories............................................................................................................................. 103
2.11 Homework .......................................................................................................................................... 103

Session Three: Home hazards ................................................................................................................... 109

Objectives............................................................................................................................................................... 109
3.1 Welcome and outline............................................................................................................................. 111
CONTENTS

3.2 Continue with the exercises .................................................................................................................111
3.3 Home fall hazards: The Apple Game quiz ..............................................................................................111
3.4 Home fall hazards ..................................................................................................................................113
3.5 Safe clothing .........................................................................................................................................118
3.6 Homework..............................................................................................................................................118
The Apple Game quiz: .................................................................................................................................120
Home fall hazards: slide or colour photo presentation ................................................................................123

Session Four: Community safety and footwear........................................................................................131

Objectives......................................................................................................................................................131
4.1 Welcome and outline................................................................................................................................133
4.2 Exercise review .......................................................................................................................................133
4.3 Home fall hazards homework ................................................................................................................133
4.4 Community mobility and pedestrian safety..........................................................................................133
4.5 Footwear audit .......................................................................................................................................135
4.6 Homework..............................................................................................................................................137
Footwear........................................................................................................................................................138
The safety features of shoes ..........................................................................................................................138

Session Five: Vision and falls, vitamin D and transportation safety..........................................................151

Objectives......................................................................................................................................................151
5.1 Welcome and outline................................................................................................................................153
5.2 Review of homework and exercises .......................................................................................................153
5.3 Vision and falls .......................................................................................................................................153
5.4 Guest participant to reflect on the barriers and achievements.................................................................157
5.5 Vitamin D, calcium and sunlight ............................................................................................................158
5.6 Travel with safety.....................................................................................................................................158
5.7 Hip protectors.........................................................................................................................................159
5.8 Homework..............................................................................................................................................159
Vision and falling..........................................................................................................................................160
## CONTENTS

Vitamin D and calcium................................................................................................................................. 164  
Osteoporosis.................................................................................................................................................. 169  
Vitamin D and calcium session outline ........................................................................................................... 170  
Vision and falling session outline ................................................................................................................ 172  
Hip protectors session outline ....................................................................................................................... 174  
Travel safety .................................................................................................................................................. 176  

**Session Six:** Medication management and mobility mastery experiences .............................................. 187  
Objectives...................................................................................................................................................... 187  
6.1 Welcome and outline................................................................................................................................. 189  
6.2 Review the homework .............................................................................................................................. 189  
6.3 Medication management ......................................................................................................................... 189  
6.4 Strength and balance ............................................................................................................................... 190  
6.5 Mobility mastery experiences ................................................................................................................ 191  
6.6 Sleeping better......................................................................................................................................... 194  
6.7 Planning next week ................................................................................................................................ 194  
Medication management to reduce falls...................................................................................................... 195  
Outline: managing medications ................................................................................................................... 196  
Sleeping better ............................................................................................................................................... 199  

**Session Seven:** Review and plan ahead .................................................................................................... 211  
Objectives...................................................................................................................................................... 211  
7.1 Overview of today...................................................................................................................................... 213  
7.2 Review of homework ............................................................................................................................... 213  
7.3 Exercises .................................................................................................................................................. 213  
7.4 Revision................................................................................................................................................... 213  
7.5 Group evaluation ..................................................................................................................................... 214  
7.6 The follow-up ......................................................................................................................................... 216  
The Apple Game quiz: revision ..................................................................................................................... 217  
Dizziness .......................................................................................................................................................... 220  
The follow-up home visit ............................................................................................................................... 228
Session Eight: Three-month booster session

Objectives

8.1 Welcome

8.2 Review progress

8.3 Coping with negative stories and fall stories

8.4 What helps you keep doing exercises?

8.5 Strength and balance exercises

8.6 Brief review of key issues

The display

Stepping On workshop facilitator supplies
Many thanks to all our participants; you taught us so much.

We acknowledge the contribution of our co-investigators in conducting the randomised trial of Stepping On. These were Professor Robert G. Cumming, Professor Hal Kendig, Robyn Twible and our research assistant Kirsty Taylor. We particularly thank Robyn Twible for her inspiration to run group-based intervention and her lifelong commitment to community-based rehabilitation.

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**Introduction**

This manual is for occupational therapists, physical therapists, and other health professionals and health promotion workers in the area of falls-prevention with older people. It presents Stepping On — a community-based fall prevention program. The manual describes how to plan, prepare, and run the program, and includes suggestions for evaluation.

Many older people have had a fall experience that has shaken their confidence and may have resulted in injury. Older people understand that the threat of a fall can be a barrier to safely doing all the things they want to do at home, and in the community. The prevention of falls is vital to maintaining personal independence for older people.

The Stepping On program offers older people a way of reducing falls and at the same time increasing self-confidence in situations where they are at risk of falling. The program incorporates a group setting plus individualised follow-up. It covers a range of issues, including falls and risk, strength and balance exercises, home hazards, safe footwear, vision and falls, safety in public places, community mobility, coping after a fall, and understanding how to initiate a medication review.

The program uses adult learning principles in a group setting over a seven-week period. It is about building self-confidence, about making decisions and about behavioural change.

**Important:** All participants should previously determine that they’re medically fit for these exercises, and are doing so with the approval of their physician. They should notify instructors of any special needs or considerations beforehand. Instructors are not responsible for determining medical suitability for participating in this program.

‘It’s made me more aware, just so much more aware. Of the buses, of my place. Of making it brighter inside, getting rid of leaves outside, of everything.’ — Roleena

‘I’ve had some near falls, but you have a quicker recovery and your muscles don’t collapse.’ — Herbert

‘I feel more confident and I’m going out more.’ — Marie

‘I never cross the street now unless it’s at a crossing. I take the longer route; it’s good exercise.’ — Betty

‘We all have our abilities and disabilities. As we get older the disabilities become more obvious. You lose some sight, some hearing and maybe your balance is worse. But you have done is focus on our abilities. No one else has done that.’ — Nancy
**INTRODUCTION**

**Aims of the program**

The Stepping On program allows seniors to determine issues and approaches that are personally relevant. The program is designed to challenge the older person to appraise their risk realistically as well as to provide a forum for gaining knowledge about safety practices. In the program, participants explore options and barriers to putting safety strategies into practice. The aim is to facilitate the person in taking control, to explore different coping behaviours, and encourage follow-through of safety strategies in everyday life.

To achieve these aims the program is built on a sound conceptual basis. A decision-making theory (Janis & Mann, 1977) provides a framework for understanding and facilitating the preventive process. The program draws on Bandura’s (1977; 1997) theory of self-efficacy, which describes techniques to enhance confidence in specific situations.

Successful adult learning depends not only on expert health professional knowledge, but on an approach that actively builds on and uses the knowledge and experiences of the older person. Storytelling is one method we use to help achieve these aims. The program facilitator requires an understanding of group work, a commitment to working with older people, and a belief that falls can be prevented.

We recommend that facilitators keep abreast of new knowledge about what works in falls prevention. For example, work is presently emerging on the impact of podiatry and orthotics on foot pain and deformity. As specific information about what works becomes clear we recommend it be included or developed in additional learning segments.
Who is this program for?

Inclusion criteria for group participants reflects those older people at risk of falls and who will potentially benefit from Stepping On. The following were our inclusion criteria for the research and whom we recommend you recruit:

♦ Older people who have had a fall in past year or have a fear of falling
♦ Independent with or without a walking stick
♦ Cognitively intact
♦ Able to speak conversational English (or language in which group is facilitated*).

In the research we targeted older people over 70 years of age.

* Translations of handouts are available in some additional languages. See Clemson’s website at the University of Sydney

How to use this manual

1. Essential background reading to assist with understanding, running, and evaluating the program is found in Chapter One, Background. This chapter also includes a section on marketing and recruitment, as planning and resources are required.

2. The program, outlined in Chapter Two, runs for seven sessions of two hours’ duration, with a morning coffee break. This is followed by a home visit by the program leader, to facilitate follow-through with preventive strategies and to assist with home adaptations, as required. In our experience the leader was an occupational therapist, however, this will vary for different organisations and contexts depending on availability and skills of staff. Follow-up consists of a three-month booster session and a six-month follow-up phone call to all participants.

The program begins by describing the steps needed to prepare and plan for the program. Each session is then outlined with the following structure:

♦ Objectives of the session
♦ A checklist of resources required for the day
♦ Outline of the session format
♦ Detailed information to assist with running and presenting each segment.

Experts in content areas can be invited to lead segments within each session. For example, the physical therapist can teach the exercises and answer questions, and a medication expert can be invited to discuss medications and falls. These segments are followed up with homework and revised during other sessions. Opportunity is given for the participants to move through the decision process and to become actively involved by means of discussion and questions, by practice, and by reinforcement through reflection, and by social and peer support.

3. The topics provide more in-depth information about each content area. The topics, along with the handouts, are useful for both the expert presenters and the group facilitator. Initially, our experts have not always had specific knowledge of how their content area relates to the falls prevention.
Some topics include a table that can be copied and used to facilitate discussions or question/answer segments.

4. The resources that are needed for the program were current in 2008.

5. Handouts and overheads are included. These provide summaries of important points and for some participants, may be useful to reinforce what is learned in program sessions.

References


The following publication is a useful supplement for older people. It is based on the information in the Stepping On program.