



Health
Hunter New England
Local Health District



G.A.N.E – Get Active New England Innovative and Flexible

GANE Motto:

“To Stay out of Care, Get out of your Chair”

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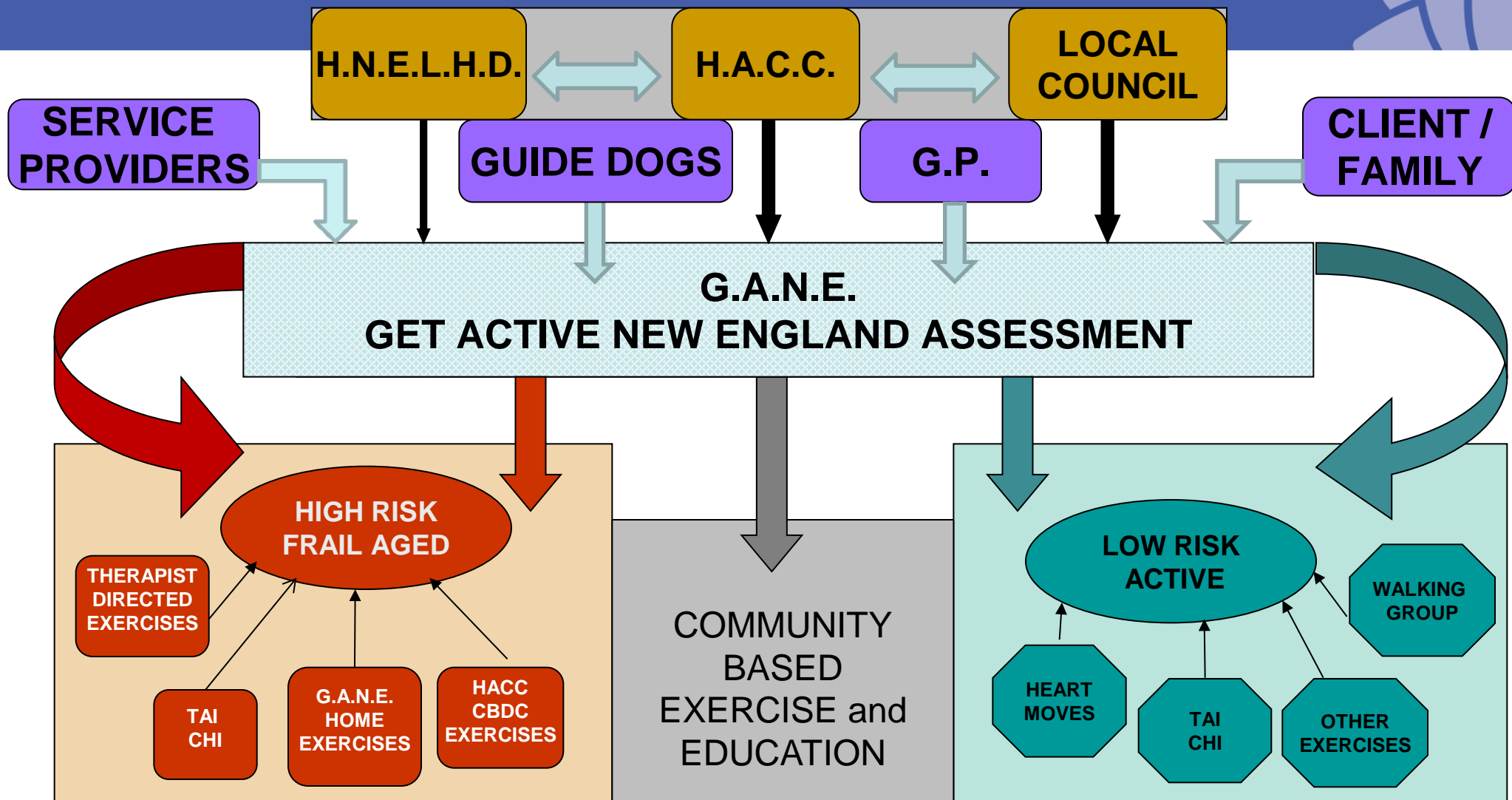
WHAT DOES G.A.N.E. DO?

1. Develop falls prevention programs for frail aged in the community (HACC eligible)
2. Conduct assessments to identify personal (physical & medical) and environmental falls risks.
3. Provide exercises that build strength & improve balance
4. Provide community education
5. Build community capacities to conduct programs

ISSUES

- Providing cost-effective, sustainable strength & balance programs in rural communities
- Identifying interested persons to deliver strength & balance programs
- Providing training that is affordable & accessible
- Support & mentorship for program providers
- Community awareness
- Engagement & support of participants

G.A.N.E. MODEL



INITIATIVES & IMPLEMENTATION

- **HACC Day Centres** - provided with equipment, manuals, training on assessing & implementing program / delivery of education, exercise programs
- **Falls 'Clinics'** – collaboration between health service physios & GANE physio
- **Home Programs** – health services, client, family, GP referrals

INITIATIVES & IMPLEMENTATION (2)

- **Partnerships**

- a) local councils who conduct day centres and provide client care services
- b) Guide Dogs NSW/ACT and Vision Australia:
high risk clients; joint visits for safety & mobility assessments

INITIATIVES & IMPLEMENTATION (3)

- **Public Education & Awareness**
 - a) forums (2 years; 18 sites; 800 participants)
 - b) special interest groups (20+ presentations in 2 years)
- **Retirement / Lifestyle Villages:** self referred requesting advice on equipment and assistance with setting up program

RESULTS / OUTCOMES

Encouraging & challenging results identified.

- **Encouraging:**

- a) home-based client engagement & participation
- b) client outcomes in all delivery areas
- c) good referral numbers
- d) high level of community interest - increasing
- e) participants → volunteers → ‘instructors’
- f) well supported by health professionals

RESULTS / OUTCOMES

ASSESSMENT	NORMAL	PRE-PROGRAM		POST-PROGRAM		% CHANGE	
		HEP	CBDC	HEP	CBDC	HEP	CBDC
Timed Up & Go	8-10 secs	17	13.8	11	12.4	35.0%	10.0%
180° Turn	3-4 steps	4.6	4.8	4	4.4	13.0%	8.3%
Sit To Stand	12 secs	20.8	17.9	14.4	14.6	30.7%	18.4%
Alternate Step Test	10 secs	15	12.9	12.2	11.7	18.6%	9.3%
Near Tandem Stance	10 secs	6	8.4	8.8	9.2	46.6%	9.5%

RESULTS / OUTCOMES

- **Challenging:**
 - a) Low engagement & poor sustainability; attitude of staff, committees, clients in Day Centres
 - b) Travel distances / return visit time frames
 - c) Service coordination
 - d) Access to skilled instructors
 - e) Extent & impact of ageism on client engagement
 - f) Low numbers of Aboriginal clients

SUSTAINING CHANGE

- **3 future projects**
 - a) Reablement: working with care workers to encourage & reable clients for independence
 - b) Building Stronger Rural Communities (HNELHD, HACC & RuralFit)
 - c) Collaboration with Guide Dogs NSW/ACT to develop a DVD with instructions for strength & balance exercises

LESSONS GAINED / QUESTIONS

- Falls prevention is NOT a tick box activity
- Service delivery MUST be flexible
- Partnerships & collaboration important

QUESTIONS

