



VITALITY CLUB

Community Programs & Minimising Frailty in Older People

Presented by Theeban Rubasingham & Ahilan St George
Vitality Club Directors & Co-Founders

Outline of talk:

1. The Founders
2. The Vitality Club Story
3. RAS Assessments
4. Mobile Allied Health & Exercise Classes
 1. Reputation
 2. Frailty & PACE
 3. Questions & Thank You



The Founders

- **Theeban Rubasingham -**

- Civil Engineering/ Commerce.
- Project Management, Property Development, Funds Management.



- **Ahilan St George –**

- Law/ Commerce.
- Civil Litigation & Class Action Lawsuits.

The Vitality Club Story



- Founded in 2014 as a free walking group in Strathfield Park.
- Community Exercise Classes
- My Aged Care- Regional Assessment Services
 - Northern Sydney + South East Sydney
- Mobile & Residential Allied Health
 - Multidisciplinary Allied Health team- Exercise Physiologists, Physiotherapists, Occupational Therapists, Podiatrists, Dietitians
 - Private Services
 - Commonwealth Home Support Programme (CHSP) providers 2017 - 2020
 - 5 regions of Sydney- 15,000 output hours
- Future Plans – Home Care Packages, NDIS & PACE



VITALITY CLUB

COMPANY VALUES



FAMILY

If we treat everyone with the same respect & empathy as we do our family members, we will always produce our best work.



LEADERSHIP

We have the opportunity to lead by example in order to create a better process and product for everyone involved.



EVERYDAY IS A GIFT

We as a collective and as individuals get to wake up every day and make a positive difference in the lives of others.

My Aged Care – Regional Assessment Services

- Multidisciplinary Staff – Social workers, Allied Health Staff, Nurses.
- Issues in the community to allow older people to stay at home.
- Service Provisions & Timing & Costs.



Mobile Allied Health & Exercise Classes

- Multi-disciplinary Case Conferences.
- Services in the Home & Residential Aged Care Facilities.
- Exercise Classes throughout South-East & Inner West Sydney.
 - Health & Exercise
 - Quarterly Assessments
 - Social Isolation

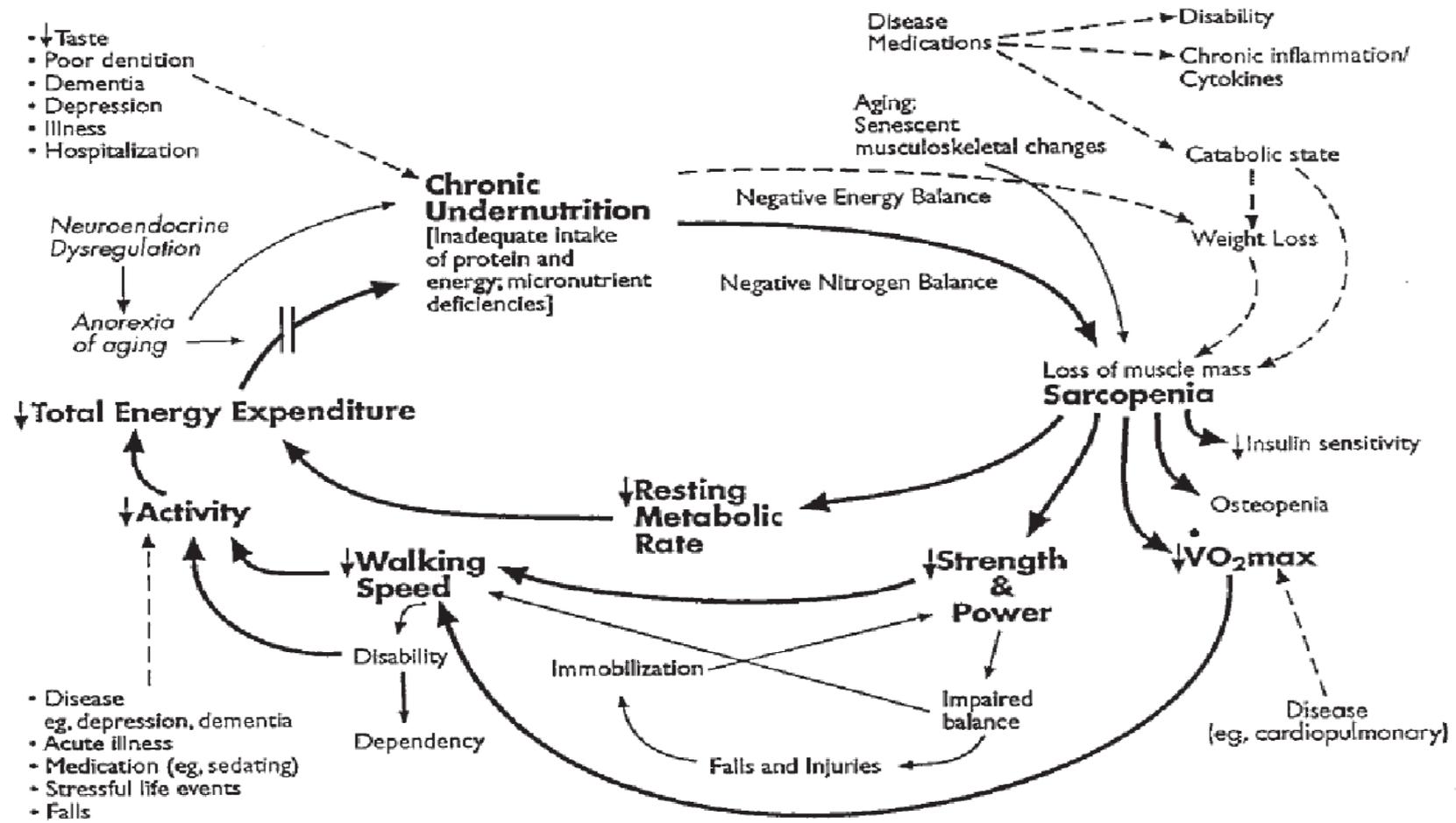


Reputation & Innovation

- Creating new Innovative Models in Aged Care.
- Intersection of Spaces & Aged Care.
 - De Hogeweyk Aged Care Facility
- Intersection of Technology & Aged Care.
 - Telehealth Products.
- New Models of Care.
 - Primary Care & PACE.

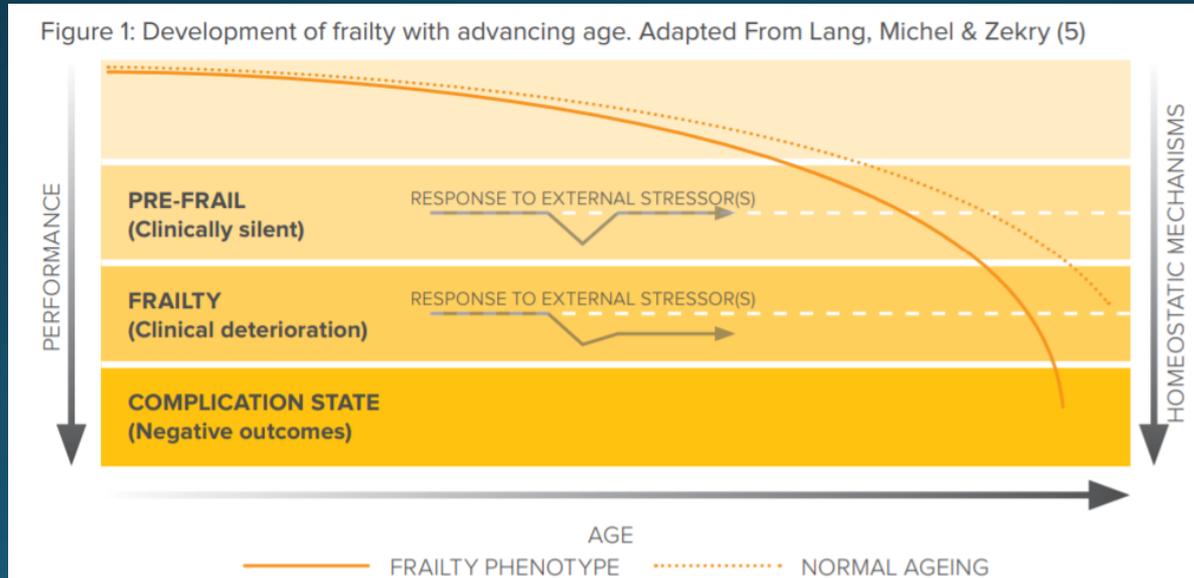


What is Frailty?



Definitions

- A decline in function across several organ systems.
- Linked to ageing.
- Progressing at different rates in different people.
- Characterised by increased risk of poor outcomes in individuals exposed to an apparently innocuous stressor.



Managing Frailty In the Community

Since frailty is potentially a determinant of the way care resources are used, the assessment of frailty should also inform processes of planning service provision and resource allocation, but there are major barriers to identification of frail older people.



Problems

- Too many tools.
- Substantial variation between tools.
- No integrated assessment for frailty at acute hospital level
- Time consuming assessment for Primary Care
- Tools only a subset of patients, with most older people in hospital not having their frailty assessed at all.



Prevalence

- Australia

- Benetas Survey (3,000 people over 65) - 6% of people are frail, 38% of people are pre-frail – the proportion of the population found to be frail or pre-frail in the general population was far less than in the sample of Aged Care Service seekers.
- There was a marked disparity in frailty prevalence related to sex, with women found to have a much higher incidence of frailty than men. While 5% of males were found to be Frail, 8% of females

- Internationally

- Older people (conventionally aged at least 65 years care in developed countries and increasing in the developing world).
- In England, a fifth of hospital admissions in 2014–15 were among people aged 75 years and older, accounting for around 40% of all days spent in hospital.

A/Prof Peter Gonski

PACE

Proactive Assessment Clinic for the Elderly

525 Kingsway Drive,

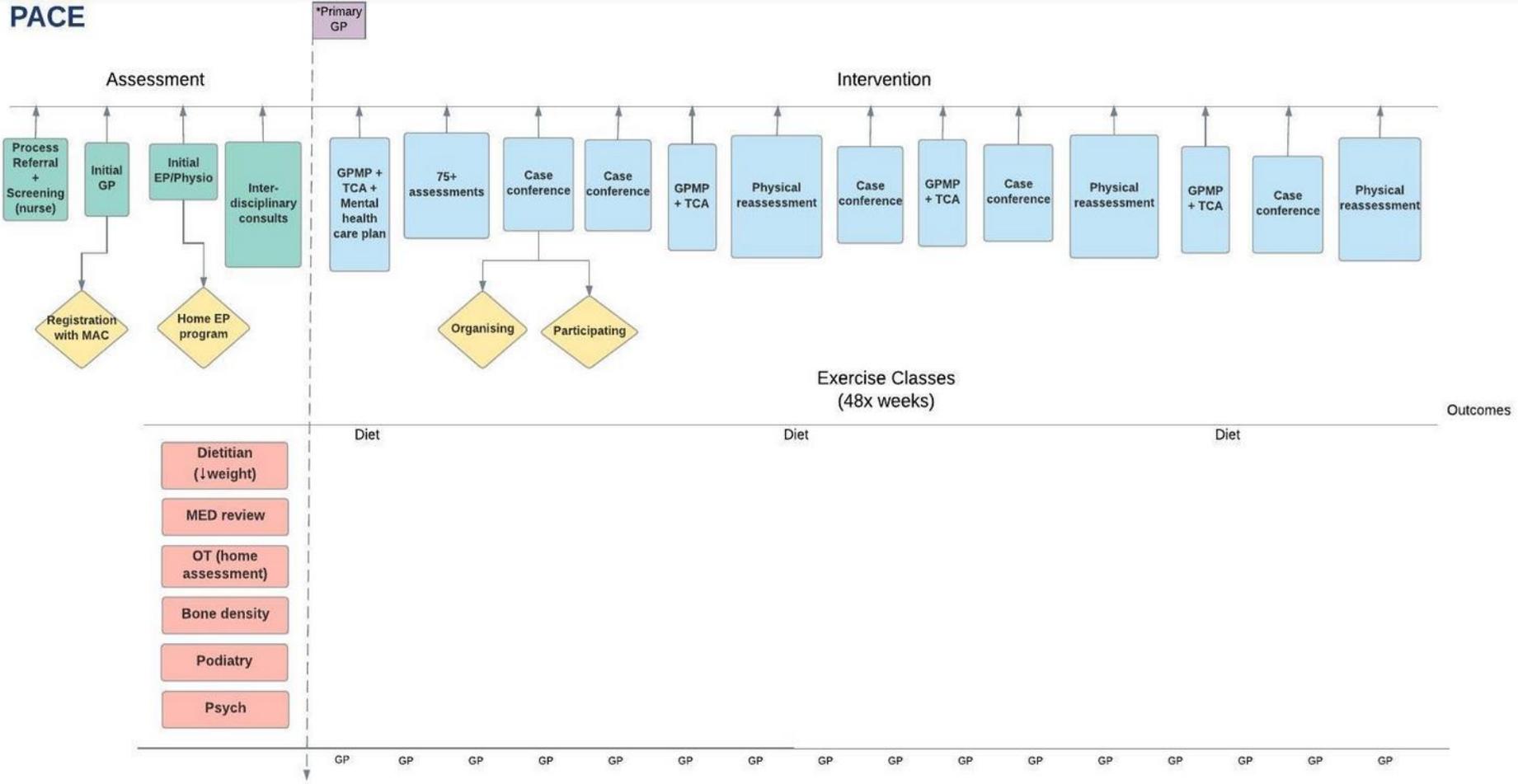
Sutherland

PACE CLINIC AIMS

The aim of this project is to improve outcomes for frail elderly patients by:

- Standardize assessment against international best practice.
- Provision of timely comprehensive geriatric assessment.
- Reduce avoidable admissions through rapid access clinic assessment and treatment.
- Reduce avoidable disability/harm – with potential associated on-going burden of care and loss of independence through community intervention.
- Optimise partnership approach between the LHD's, patients, carers, primary care, social care, community service, mental health.
- Improve patient and carer experience
- Provide training and resources to GP's for upskilling in comprehensive geriatric assessment and assessment for frailty.

PACE



Multidisciplinary case conferences

- Benefits of a multidisciplinary approach:
 - Comprehensive care.
 - Added incentive to GP's through improved billings
 - Multifactorial problem- so requires a multifactorial approach.
 - Frailty presents similar to a lifestyle disease, so requires similar motivation and resources as other chronic diseases and disabilities:
 - Currently doesn't have the infrastructure set up to support this.
 - Requires constant monitoring and review:
 - Communication between care team is facilitated.

Exercise and Frailty

- Exercise is more beneficial than any other intervention.
- Contraindications are the same as those used with younger and healthier people.
- Therefore exercise underpins the multidisciplinary approach.
- Allows for a weekly touch point for clients to help adopt lifestyle changes.
- Exercise improves functional outcomes:
 - Sarcopenia
 - Cognitive performance
 - Mood
 - Physical function

Outcomes

- Exercise adherence was high.
- Multicomponent training was more positive on functional ability and adverse health consequences.
- Resistance training alone had a greater impact on physical and psychosocial determinants.
- Interventions lasting longer than 5 months saw greater improvements.
- No adverse events in most reported studies - exercise is a safe and feasible intervention for this population.

Why should I care?

- Interventions do show significant improvements.
- Frail patients are increasing in numbers every year.
- Ability to identify frailty will affect your medical decision-making and treatments regardless of specialty.
- Improvements in identifying frailty will improve outcomes dramatically for patients.



Refer to us

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QUESTIONS?

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THANK YOU!