UP AND ACTIVE: PREVENTING FUNCTIONAL DECLINE IN THE ACUTE HOSPITAL SETTING

Background
Older people in hospital are at risk of functional deterioration during their acute hospital stay.

Goal
To determine the feasibility and efficacy of a model of care targeting older people at risk of functional deterioration, including an Allied Health Assistant-led group exercise class.

Methods
Design: Observational study compared routinely collected data from an intervention ward with two usual-care wards during a 6 week period.

Intervention: Thrice weekly exercise group and dedicated ward physiotherapist focusing on physical activity interventions.

Outcomes: Length of stay, discharge destination and change in mobility status (level of independence).

Results
Data from 369 patients were collected (Intervention n=127, Usual Care n=242).

There was no difference between the intervention and usual care wards in relation to length of stay or discharge destination. No adverse events were experienced by patients participating in exercise groups.

The odds of patient mobility status improving was significantly higher on the intervention ward compared with the usual care wards (OR 2.47 (95% CI 1.54 to 3.95) p<0.001).

Conclusion
The Up and Active model of physiotherapy care was feasible and improved mobility status, but did not show improvements to length of stay or discharge destination.

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