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mosAIC's Regular Reads aims to give relevant, useful information to Community Care partners for the improvement of their operations. This section features journal articles that highlight latest research findings as well as good, evidence-based and innovative practices. While the articles aim to keep Community Care partners informed of current developments in the sector, the views and opinions expressed or implied do not necessarily reflect those of AIC, its directors or editorial staff.

## » Strategies to overcome barriers to implementing osteoporosis and fracture prevention guidelines in long-term care: A qualitative analysis of action plans suggested by front line staff in Ontario, Canada

This report identified several barriers to the implementation of evidence-based practices for osteoporosis and bone fractures in Canada. They include lack of educational information and resources prior to the ViDOS (Vitamin D and Osteoporosis Study); difficulty in obtaining required patient information for fracture risk assessment; and inconsistent prescribing of vitamin D and calcium at the time of admission. Recommendations to address these barriers included establishing and adhering to standard admission orders regarding Vitamin D, calcium and osteoporosis therapies; improving the use of electronic medical records for osteoporosis and fracture risk assessment; and making bone health a topic for quarterly reviews and multidisciplinary conferences.

Alamri, S., Kennedy, C., Marr, S., Lohfeld, L., Skidmore, C. & Papaioannou, A. (2015, August 1). Strategies to overcome barriers to implementing osteoporosis and fracture prevention guidelines in long-term care: A qualitative analysis of action plans suggested by front line staff in Ontario, Canada. BMC Geriatrics.

Search for the full-text article at [www.biomedcentral.com](http://www.biomedcentral.com)

## » Rehabilitative palliative care: Enabling people to live fully until they die – A challenge for the 21st century

This report guides and challenges hospices to place greater emphasis on promoting independence in the care they provide for people with terminal illnesses. Rehabilitative palliative care can be brought about by: identifying what is important to each person by actively exploring their personal goals for living; supporting and encouraging people to take responsibility for their own health and wellbeing and teaching them strategies to achieve this; and creating an 'enabling culture' of support where people are given choices and opportunities to do things for themselves wherever possible. Simple practices highlighted include: encouraging patients to get dressed in their own clothes every day, rather than pyjamas (to reduce the 'sick role' experience), sitting out of bed for all meals (to support safe swallowing and normality) or maintaining the amount of walking usually done at home (to stay active).

Tiberini, R. & Richardson, H. (2015, July 3). Rehabilitative palliative care: Enabling people to live fully until they die – A challenge for the 21st century. Hospice UK.

## » An occupational therapy intervention for residents with stroke related disabilities in UK care homes (OTCH): Cluster randomised controlled trial

This United Kingdom study evaluates the clinical efficacy of an established programme of occupational therapy in maintaining



functional activity and reducing any health risks arising from inactivity in care home residents with stroke. The three-month therapy was delivered by a qualified occupational therapist and assistants and consisted of patient-centred goal setting, education of care home staff and adaptations to the environment. This therapy did not have an impact on measures of functional activity, mobility, mood or health-related quality of life, and alternative strategies should be looked at to provide care.

Sackley, C., et. al. (2015, February 5). An occupational therapy intervention for residents with stroke related disabilities in UK care homes (OTCH): Cluster randomised controlled trial. *BMJ*.

Search for the full-text article at [www.bmj.com/thebmj](http://www.bmj.com/thebmj)

## » Reinventing rehab

In recent years, the skilled nursing sector has started offering short-term rehabilitation stays and outpatient services for discharged acute care patients. This has opened up new revenue streams for long-term care facility operators. More facilities are looking at ways to add it to their portfolio of services, while those already offering it are looking at ways to make their programmes stronger. This article provides insights on “how to construct a proper-sized room, what equipment to purchase, which therapies to offer and how to properly staff the operation”.

Andrews, J. (2015, April 6). Reinventing rehab. McKnight's.

Search for the full-text article at [www.mcknights.com](http://www.mcknights.com)

## » Predictors of attendance to group exercise: A cohort study of older adults in long-term care facilities

Offering physical exercise and activities to frail nursing home residents may reduce health risks associated with inactivity. This study aims to identify the predictors of attendance at physiotherapy-led exercise groups offered to older adults residing in long-term care facilities in the United Kingdom. It found that depression, social engagement, and socio-economic characteristics were significantly associated with participant attendance at exercise groups in the residential homes, but none of these factors predicted attendance at group exercise in nursing homes. There were individual and home-level reasons for attendance and non-attendance.

Finnegan, S., Bruce, J., Lamb, S., & Griffiths, F. (2015, April 2). Predictors of attendance to group exercise: A cohort study of older adults in long-term care facilities. *BMC Geriatrics*. 15.

Search for the full-text article at [www.biomedcentral.com](http://www.biomedcentral.com)

## » Factors associated with lower gait speed among the elderly living in a developing country: A cross-sectional population-based study

This study explores the association of lower gait speed with socio-demographic, anthropometric factors, mental status and physical health in a developing country, Brazil. It finds that gait speed is a clinical marker and an important measure of functional capacity among the elderly. Lower walking speed is associated with age, education, and modifiable factors such as impairment of Instrumental Activities of Daily Living (IADL) such as using transportation, the phone, going shopping, taking medication, and taking care of one's own money; physical inactivity; and cardiovascular disease. The study emphasises the importance for the elderly to remain active and healthy.



Busch, T., et. al. (2015, April 1). Factors associated with lower gait speed among the elderly living in a developing country: A cross-sectional population-based study. BMC Geriatrics.

Search for the full-text article at [www.biomedcentral.com](http://www.biomedcentral.com)

## » Stroke rehabilitation: Strengthening synapses to achieve optimal outcomes

This article discusses several stroke rehabilitation therapies that can be used to improve daily life. It describes two categories of therapies: those intended to speed stroke recovery by generally enhancing brain activity or stimulation-based approaches; and therapies intended to focus and target specific task practices. It details the advantages of using these approaches compared to conventional techniques. It highlights that successful stroke rehabilitation requires individualised treatment focusing on reorganisation in the recovering brain, a multidisciplinary rehabilitation approach, goal setting, and community therapy resources.

Oyawusi, M., Adler, U., & Barrett, A. (2014, September/October). Stroke rehabilitation: Strengthening synapses to achieve optimal outcome. *Today's Geriatric Medicine*. 7(5): 12.

Search for the full-text article at [www.todaysgeriatricmedicine.com](http://www.todaysgeriatricmedicine.com)

## » The effect of interactive cognitive-motor training in reducing fall risk in older people: A systematic review

This review examines the effectiveness that interactive cognitive-motor training, which combines cognitive and gross motor physical exercise, has on fall risk in older people. It analysed 37 case studies and covered five categories of physical exercise: step training; balance board training; balance board plus aerobic training; multi-component programmes with low challenge of balance; and aerobic programmes. It found that interactive cognitive-motor interventions can improve physical and cognitive fall risk factors in older people; however the effect of such interventions has not been demonstrated definitively and larger, high-quality trials are needed to get further insights.

Schoene, D., Valenzuela, T., Lord, S., & de Bruin, E. (2014, September 20). The effect of interactive cognitive-motor training in reducing fall risk in older people: A systematic review. *BMC Geriatrics*. 14(107).

Search for the full-text article at [www.biomedcentral.com](http://www.biomedcentral.com)

## » The psychology of falls in long-term care

Falls are the leading cause of fatal and non-fatal injuries among older adults. This article highlights the factors associated with falling: medication; polypharmacy; orthostatic hypertension; alcohol abuse; diabetes mellitus; confusion and cognitive impairment; gait and balance disorders; muscle weakness; poor vision; urinary incontinence; inappropriate footwear; and environmental factors including home hazards. It explains the impact of falls for residents; the concealing of falls due to fear that their independence will be limited; empowering residents by giving them tools needed to reduce the likelihood of falls; and empowering care teams to care for residents.

Barbera, E. (2014, August 7). The psychology of falls in long-term care. McKnight's.

Search for the full-text article at [www.mcknights.com](http://www.mcknights.com)