Edmonton South Side Primary Care Network
'Moving for Memory'

Final Report

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EXECUTIVE SUMMARY

While existing programs focus on normal ageing memory changes, Moving for Memory targets those noticing abnormal changes in their brain health, ranging from cognitive impairment to dementia. The participants participated in physical and brain exercises with the goal of enabling participants to take home skills, which could be integrated into their life and improve overall well-being. There are no age restrictions for the program however the age demographic we are targeting is midlife (50) to late life.

As an outcome of the Moving for Memory (10 week) program we expect participants to achieve a high level of satisfaction and a feeling of engagement within the program. The program encourages socialization and community connections. It will also enabled participation for those with transportation issues because ride services were provided through grant funding. Another expected outcome of the program is to increase participant level of physical activity as well as cognitive engagement activities measured by pre/post survey scales and follow up interviews. Additionally, we expected that participants will have a new connection to community resources, be able to navigate resources, and be empowered to sustain behavior changes that were encouraged in the program. These outcomes were measured at the 2nd and 6th month follow up interviews.

The success of the Moving for Memory program can be attributed to co-facilitation by a Registered Nurse (RN), Exercise Specialist (ES), and Occupational Therapist (OT). Involvement of the OT allowed for advancement of the program with regard to Cognitive Engagement activities. Clinical team meetings were regularly held to evaluate the content and executed of the program and to make ongoing modifications.

We incorporated a continuous intake of new participants and the transition was well executed due to clear communication among team members. Due to the high demand for the program, we opened a second day with two additional groups. This required training of a second RN and balancing the workload of two Exercise Specialists. We developed an Advisory group that included 4 former participants, 5 facilitators, 1 Administrative Assistant, a Family Physician and a chair person. The Advisory group held their last meeting on Nov 6th, which included significant input and discussion from all Advisory group members. The main focus of the final meeting was the loss of funds for transportation. Advisory group members expressed concern about how lack of funded transportation is an anticipated barrier for those that cannot afford to pay for their own transportation. Currently we are seeking other grants to help remove this barrier.

OBJECTIVE & IMPLEMENTATION

Promoting physical activity through a weekly group exercise component with a qualified exercise specialist. Encouraged socialization and community connections in a small group setting over 10 weeks. There was engagement of participants in directing topic areas within facilitated group discussions, promote cognitive engagement with brain exercises with a qualified occupational therapist. There was support for reduction of cardiac risk factors and support for overall heart health, in a supervised/facilitated and equipped location. We enabled participation for those with transportation issues giving them the option to use the Drive Happiness organization.

Using a PDSA approach ultimately delivered enhanced Moving for Memory sessions with continuous intake every two weeks. Each cycle includes 2 simultaneous groups with 12 participants each for a total of

96 participants. Program is 10 week duration with a continuous intake schedule. Active participants are welcome to continue after 10 weeks or take a 1 month break and return to the program.

The program content and activities were continuously adapted based on identified needs of the participants. These adaptations were sometimes due to limitations in physical mobility and cognition, however, adaptations were also based on participant-identified needs and interests.

Referral and intake processes: we added the option for the Moving for Memory program on to our group referral form, which enabled physicians and multidisciplinary team members to refer their patients easily. We developed administrative processes for receiving referrals and booking patients for intake assessment and registration in the program.

Session plans: We developed a 10 week session master plan that details the theme of each part of the weekly session (education component, exercise component, and cognitive engagement component). Additionally, we have an expanded description of each session to allow for facilitators to execute the program consistently and in a high-quality manner.

Participant workbook: Based on feedback of participants including those with dementia, we are in the process of developing a participant workbook. Participants expressed desire for handouts to help them remember and implement what they learned in the class. They also wanted something to share with their families and care partners. Further, the workbook will enable patients to be more actively involved in the actual sessions through following along in the book. The workbook will have content that mirrors the session plans in a simple format.

IMPACT FOR PEOPLE LIVING WITH DEMENTIA

We developed the session plans and are developing the workbook to help make this program easy to implement at other Primary Care Networks (PCNs) or through other organizations. To date, we have met with the North PCN to help them execute this program. Because of the tools we have developed, we are able to make this process easy and promote access for patients.

Contact seniorshealth.scn@ahs.ca for a copy of the Moving For Memory Final Report.

Nov 15, 2017