

Name of project: Postural stability online exercise classes

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What was our aim?

Following a return to duties after the first lockdown, we were tasked with restarting later life balance groups to patients that are at risk of falls. This was to be via a virtual platform and supplemented with a DVD. The secondary aim was to have at least 50 per cent of the waiting list able to access a virtual class by December 2020.

Why is it important to service users and carers?

COVID-19 meant that face-to-face patient groups were no longer viable. An alternative online group provision needed to be designed and implemented.

Lockdown led to physical inactivity and reduction of mobility and balance for many people. Online postural stability exercise classes enabled people to maintain and improve their functional ability and reduce their risk of falls.

Prior to the lockdown and cessation of our group classes, we had a large number of people on classes or waiting for them. Our first duties were to allow as many of these to resume classes as soon as possible. We offered everyone who had been on the service a chance to attend online classes.

These online classes also helped to reduce social isolation for many in this vulnerable group demographic.

Ideas and tests of change

The challenges faced with this new way of working meant that we had to trial and test the processes at every stage. Our first challenge was to upskill the staff to a suitable level to run online classes. This initially meant that we had to become proficient in the use of online systems of exercise delivery and rewrite the exercise routine to fit an online setting, making sure that all clients were taught at the same level, whoever took the classes.

With us unable to assess the clients in person it initially became clear that we needed to develop ways of checking the suitability of our clients. We initially produced a video to demonstrate how they could self-assess and send the results to us. However, this was unsuccessful as the returns were few and far between. Eventually we settled upon a reduced test and carried this out in a one-to-one breakout room on Zoom.

Online exercises were not for everyone. We attempted to make sure that as many people as possible could access this medium. Those that found it outside of their technological knowhow were helped through the first few weeks. Most of those who started had little or no problems. Some persisted, even though they still could not grasp it, while others were transferred back to the face-to-face list for future community classes.

The tools we used





Results/How did we do/Anticipated outcome

Of those who started a class in September, there was a 20 per cent drop out rate in the first six weeks. These were people who struggled with the online format and many elected to wait for face-to-face classes to return. Of those that stayed on the course, their comments tell the story as well as any statistics:

"An absolute lifeline as unable to walk far without support, due to rheumatoid arthritis and spinal stenosis. Very convenient to have home zoom calls - could not have attended classes elsewhere"

"The service is unique in its focus on stability and balance, yet it adds general fitness too. And the session leadership is so positive and motivating that it helps also in mental wellbeing."

"This is a course for all elderly people who can no longer get about much. It develops slowly at a comfortable pace and there are visible results quite soon after starting. We all seem much more flexible and stronger than we were before beginning. The leaders are easy to understand and hear and it is important to know that they are carefully watching us. We can exercise with knowledge, all in the warmth of our own homes. The company is good too, we are no longer so isolated and alone."

The online classes have been remarkably successful given that when the majority of the participants started they were expecting to take part in a face-to-face class.

Online Zoom classes have shown to be a valuable addition to the postural stability team's exercise delivery and has had a positive impact upon those attending classes on a regular basis. We will continue to run these classes alongside face-to-face community classes.

What we learned and what's next

The learning curve for the transition to online classes was a steep one for both clinicians and clients alike.

A large part of the planning stages was about learning how to provide effective classes. As we were unable to use equipment, we had to find alternative ways to deliver a similar content as we do in face-to-face classes.

We found that this was not a one-stop-shop where we develop a new way of delivery and that's it. This is an ever adapting and evolving service that is capable of meeting any challenge.

We are continuing to deliver the online classes while at the same time we are reinstating face-to-face classes. The end product of these two exercise delivery systems may be the same, but the way in which they are carried out have different challenges.



"Its given me a lot more confidence already and psychologically, when you can do things that you didn't do so well a few weeks ago it does give you a terrific boost"

