
Tips from the field

Using research to build a wellness program

by Denise Heimlich, MS

All of us in the wellness industry like to believe that our programs increase fitness, improve health and benefit the well-being of our participants. We use this reasoning to encourage people to join our programs. What we also should be doing is clearly demonstrating these benefits by producing hard data.

When planning a program, research relevant published guidelines so that you understand what criteria will produce the results you intend. Established bodies of research provide clear pathways to success. Keeping abreast of evolving science and avoiding the hype surrounding trendy ideas establishes your personal and program credibility with residents and administration, helps keep your participating residents safe, and sets your program above many others.

Additionally, using standard assessments to measure baseline and advancement will clearly chart progress toward goals or demonstrate whether the goals were achieved. Thus, you will have hard data that demonstrates the benefits of your programming.

The Wellness Program at Still Hopes Episcopal Retirement Community serves about 500 residents, staff and people living in the local area. As the wellness director, my job is to help people stay more independent for a longer period of time. Because our program can produce documentation of program results, we have established Still Hopes as a premier wellness provider and are rapidly growing our memberships from the local community.



Resident satisfaction with programming is very high due to the transparency of our program planning and outcome measures. As director, I always introduce new programming by citing the research on which it is based and, later, announce documented benefits to our residents.

Evidence guides the program

Start by identifying clear goals for each program or class you create. Is the goal to build strength, or cardiovascular conditioning? What do you want the class members to achieve? Then, use established training protocols to achieve the desired result. Components of physical fitness include cardiovascular endurance, muscular strength, muscular endurance, flexibility, body composition and balance.

Training guidelines are well-established by the American College of Sports Medicine (1) for each component using the FITT (frequency, intensity, time and type) principle. Thus, if you wish to create a strength training class that includes flexibility and balance, you can outline specific FITT principles for each of those three goals and base your instruction around the principles.

Organizations such as the American College of Sports Medicine provide guidelines and position statements that

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Set program goals using research				
Goal	Frequency	Intensity	Time	Type
Strength	2 days/week minimum	Work toward 8-12 repetitions		Major muscle groups using elastic bands, dumbbells, body weight
Flexibility	2 days/week minimum	Stretch to point of mild discomfort	Hold for 15-30 seconds (3)	Static stretches for all major muscle groups
Balance	No research-suggested data	No research-suggested data	No research-suggested data	Progressively difficult postures using stable & unstable surfaces

are excellent summaries of research accumulated and updated through the years. The American Institute of Cancer Research, American Heart Association and the Centers for Disease Control and Prevention provide program recommendations for exercise, nutrition and other wellness dimensions as well as guidelines for specific health conditions.

Certification organizations may provide publications and presentations that are based in research, as do publishers of professional books and peer-reviewed journals. Look for workshops and distance learning approved for continuing education units, because these often are based on established guidelines and research. You can find a few recommendations in the Resources list.

Apply your research to a new program

Here is an example of using research to choose a new brain fitness program.

Because I did not have much experience in brain fitness, I began educating myself and researching programs a year and a half ago. I, in turn, educated administration. My direct supervisor and I formed a partnership to investigate brain fitness programming, with me doing most of the initial work.

We began by reviewing studies on brain fitness. When we found brain fitness articles in magazines and journals, I noted research references and looked up the studies. We read (in print and online) about various brain fitness training programs and contacted company representatives. We narrowed our consideration to two companies and a representative from each demonstrated their programs. One company could satisfy our request for research specific to their program and one could not. Both companies allowed us to try their training systems for six weeks, and volunteer residents used the programs.

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Resources

ACSM/AHA Physical Activity & Public Health Guidelines for adults over age 65

ACSM Position Stands: Exercise and Physical Activity for Older Adults (July 2009)

Progression Models in Resistance Training for Healthy Adults (March 2009)

American College of Sports Medicine
www.acsm.org

American Council on Exercise
Certifications and books
www.acefitness.org/

American Heart Association
www.americanheart.org/

American Institute of Cancer Research
www.aicr.org/site/PageServer

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Over time, even more research studies were published related to the company we were considering. We had some healthy skepticism about a company that supplies its own research studies, so I contacted local academic and professional experts in the geriatrics field. We listened to pros and cons related to the brain fitness training we were considering.

Understanding the positives and negatives of any training program is very important for promoting realistic benefits to your participants and helping you to design your program to maximize said benefits.

Additionally, we worked to ensure that our classes would conform to the training protocols suggested by the research. For example, the research indicated a certain number of training hours in a week. In order to meet that requirement, we had to offer three classes per week (not the two classes originally planned) and establish minimum class times and training periods (a FITT principle.)

To assure ourselves that training effects translate into real-life cognition benefits, academic experts helped us identify independent cognitive assessments that could serve as pre- and post-tests in addition to the periodic assessments built into the training program.

Over a year later, we were finally prepared to begin. As we progress with our brain fitness program, we will collect the outcome measures, using these figures to ensure that our program is generating the results we seek. If not, we can tweak the program.

Basing your programming on research and established guidelines, mirroring your programs as closely as possible to the research studies on which the guidelines are based, should point you toward success. Now you must identify a means of demonstrating the success of your program.

Benchmarking progress

Benchmarking progress is highly motivational to older adults. Remember, this is a demographic group that has been taught to expect that physical failure and declining health accompany aging. Older adults delight in observing progress in fitness and health.

To assess individual and program benefits, Still Hopes' residents are highly encouraged to take part in the Senior Fitness Test twice a year. The results of these assessments provide each person with a concrete picture of progress and physical strengths and weaknesses related to activities of daily living. These measurements aid in identifying and setting achievable goals for individuals while periodic assessments reinforce their commitment and encourage additional healthy behaviors.

Many residents have participated in the fourth round of testing, representing two years of training (and aging!). In this group, there has been an average improvement of 28% in fitness since the first baseline test. In the first six months alone, the average improvement is 8%.

Each participating resident receives a printout of scores and percentile rankings. If the results are improving or holding steady, each person knows that he or she has been successful. If scores in a particular category are trending downward, we can discuss modifying the exercise program.

We have even recommended medical assessments because of downturns in cardiovascular fitness in spite of consistent training to guidelines. In some of these cases, medical conditions were discovered and treated simply due to residents showing their test scores to their physicians, who saw the decline in cardiovascular fitness.

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Resources

Centers for Disease
Control and Prevention
www.cdc.gov/

Human Kinetics
www.humankinetics.com

Senior Fitness Test
Roberta Rikli and C.
Jessie Jones
(2001)
ICAA Bookstore
www.icaa.cc/professional_education/bookstore.htm

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This positive information not only motivates residents, it is valuable for assessing the wellness program. Periodic assessments demonstrate whether your wellness programming is getting the results that you intended. For example, a wellness director may observe that most assessments show low levels of joint range of motion. These results indicate that creating a flexibility class with a catchy title is in order.

When we decide to create a new program, we also identify a method of assessing the worth of the program. For example, we conduct Hip School classes that include pre- and post-testing (Tinetti Assessment Tool for Balance [3] and an index for

osteoarthritis pain and function). A nearby university partners with us for a Stay in Balance class that includes pre- and post-balance tests.

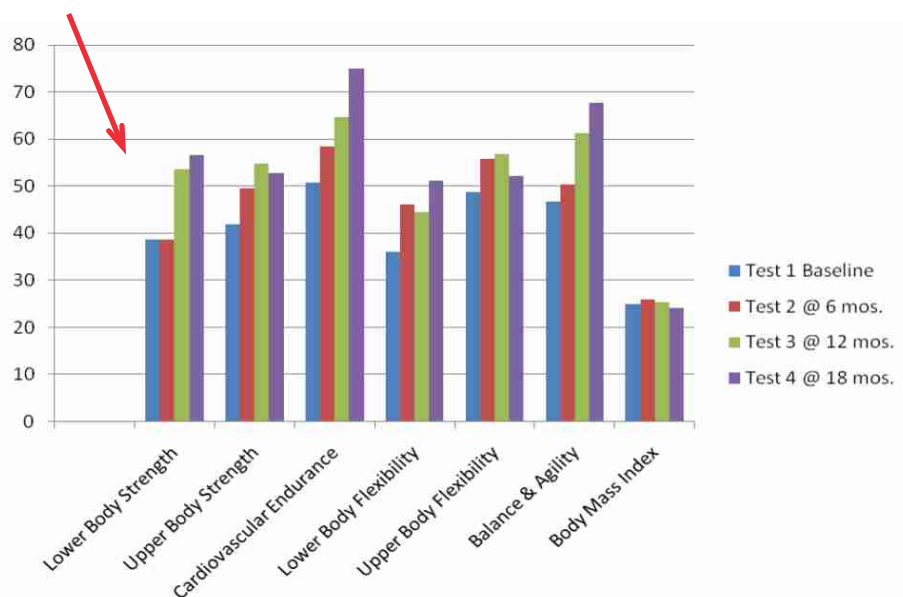
Sometimes, we make up a test. Although such a test has no scientific validity, we can at least demonstrate that an individual improved at a specific task. An example is timing the length of time it takes a person to walk down a corridor when the person cannot walk for the six minutes required in the Senior Fitness Test. If we can shorten the corridor-walking time after several weeks of exercise, then that person knows he or she has improved.

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Evaluate benchmarks to improve results

When studying the results of the first two Senior Fitness Test assessments, the wellness team saw that leg strength results between the baseline assessment and the second test six months later had not increased. We had, of course, included leg strengthening exercises in many classes, and concluded that the exercises were too low in intensity because we were worried about lack of balance and safety.

Most of our residents perform standing leg exercises in our classes while supported by the back of a chair. We increased the intensity of each exercise, over time, and carefully monitored balance and safety. After charting the results of the third assessment, the group results clearly demonstrated increased leg strength.



References

1. American College of Sports Medicine. (2010). ACSM's Guidelines for Exercise Testing and Prescription. Lippincott Williams & Wilkins
2. Howley, Edward T. Ph.D. and Franks, B. Don Ph.D. (2007). Fitness Professional's Handbook. Human Kinetics
3. Tinetti ME, Williams TF, Mayewski R. Fall Risk Index for elderly patients based on number of chronic disabilities. Am J Med 1986;80:429-434

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Occasionally, we use single, standard quick-tests. If a staff person asks us for abdominal exercises, we conduct a valid abdominal test, recommend 2-3 abdominal exercises, explain relevant FITT guidelines, and arrange to test again in 6-8 weeks.

The value of numbers

Producing hard data to evaluate the results of your programming benefits you, your facility and your population. If you have done your research, you are training clients in established methods that are already known to produce positive results, and you have the tools to analyze your program.

The combination of research-based programming and assessment has proven itself at Still Hopes. Transition rates from independent living to higher levels of care have significantly slowed, in part due to increases in physical fitness. Residents talk of being taller, walking farther, being brave enough to go on African safari and climbing in and out of Land Rovers with more agility and ease than people half their age.

Before jumping on any trend, think about how the exercise or program fits into previous research and resulting training standards. Establish clear goals for the training and ask yourself how the FITT principle applies. By putting forth effort on the front end of a program and monitoring results, you identify yourself as an expert and your programming as successful.

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Active Aging Week 2010

Be Active Your Way

Monday, September 20 to
Sunday, September 26, 2010

Active Aging Week is the annual health promotion event organized by International Council on Active Aging, the association that supports professionals who develop wellness and fitness facilities and services for adults over 50.

As a host, you choose the type and number of activities to offer.

Active Aging Week events are:

- Free to the older adult.
- Emphasize fun and education.
- A single event or multiple activities during the week.
- A chance to build a sense of community and camaraderie.

Professional resources are at www.icaa.cc/aaw.htm

- Fact sheets and handouts
- Planning guides and worksheets (downloadable)
- Promotional materials (logo, press releases, certificates)

Start planning today!

