

### Agenda and Objectives

1. Welcome & outline — review today's agenda
2. Benefits of and barriers to regular exercise
3. Review of exercise homework and planning ahead
4. Review shopping list results
5. Goal setting for mobility
6. Walking sticks
7. Practicing the exercises

#### **BREAK**

8. Moving about safely
9. Safety alarm systems
10. Analyzing fall stories
11. Homework

#### **The main objectives of this session are:**

1. To recognize the benefits of regular exercise, and the barriers.
2. To be able to do each exercise and have a plan for doing them at home.
3. To be able to put on the ankle cuff weights.
4. To learn how to move around safely — getting up from a chair, sitting down, walking, and climbing curbs and stairs.
5. To understand that there are ways of getting up after a fall, recognize the importance of not panicking, and identify a plan that might work if you do fall.



### 2.7 Practicing the exercises (10 min)



#### Our guest expert will complete this section.



- **Everyone should practice all of the exercises, including leaders.** Explain each exercise carefully, as well as the reasons for doing them. Everyone goes through the routine. Link the exercises to how they prevent falls and improve function.

The physical therapist corrects any mistakes, talks through any problems and questions, and modifies exercise as needed. For each exercise, reinforce quality, considering alignment and the way people move. Confirm aches or pains; the therapist may modify the exercise to suit the individual's needs. If participants feel that the exercises are too easy, use the information in the Exercise Manual to guide them on how to advance the exercises. There is a section at the front of the manual that discusses general principles about advancing, and each exercise has specific information on how to do this. If someone needed the exercises modified at Session 1 to make them easier, advancing will mean a gradual progression toward the initial exercise suggestions.

#### Advancing the exercises:

- **Balance:** If some participants feel very stable doing these exercises and do not feel their balance is challenged, have them advance.
  - **Sit-to-stand** and **Sideways walking:** Increase the number of repetitions first, then later advance them by decreasing hand support.
  - **Tandem standing:** Decrease hand support, then later hold the position longer.
  - **Tandem walking:** If some participants were unable to walk heel-to-toe at Session 1, getting the feet closer to a heel-to-toe position is the first step. When they can do that, add backward walking, followed by decreasing hand support.
- **Strength:** When a strength exercise becomes too easy, first increase the number of repetitions.
  - **Heel and Toe raises:** Later progress to decreasing hand support, if possible.
  - **Front knee- and Side-hip-strengthening:** Add ankle weights once 10 repetitions seem easy.



- Give each participant strap-on adjustable 5-pound ankle weight bands to use for this session and then take home and keep.
- While sitting, demonstrate how to put the ankle band on without any weights in the pouches.
- Have everyone practice putting the empty ankle straps on and taking them off so they are comfortable with this. Make sure the participants can manage the Velcro and fastenings.
- When participants do the exercises with weights at home, caution them not to walk with the weights on their ankles. Recommend having a chair near the counter where they will do these exercises so they can sit to put the weights on and off.
- For those who are ready, have them add weights to their band. It is better to start out with a light weight (2 lbs or less) to ensure that some people do not overdo it in the initial stages.
- For some people, it is an achievement to graduate to another weight. For others, it is an achievement just to try a weight.
- Explain that participants can increase the weight at any time by adding an additional 1 pound to the pouches of their adjustable weights.\* Participants are encouraged to increase the weight throughout the program and they often begin to report positive feedback about the benefits of the exercises. For example, “my balance is better” or “my foot drop is improved.”
- Have weights available at every session so people do not have to carry their weights from home.



**Leader announces 15-minute break.** Put out beverages and snacks. Make sure the physical therapist works with participants who have questions or need additional assistance. Also encourage participants to look at display table items.

## 2.8 Moving about safely: (40 min)

### **The therapist demonstrates the steps involved and discusses:**

- How to get up from a chair.
- How to sit down in a chair.
- The correct and safe use of a cane.
- Care of your cane — height and tips.

\* Some participants may be strong enough to use more than 5 pounds per leg; they can ask for a second weight band and wear 2 bands on each leg to increase above 5 pounds.



## Session 2

- If relevant to the individuals in the group: The correct and safe use of other mobility aids (**Walker Safety** handout on table).
- Safely climbing steps and stairs.
- Negotiating curbs using wider-based gait for stability.
- Compensating by holding onto things like signposts to assist in negotiating curbs. Learning to scan for useful street furniture.
- For those with one stronger leg, reinforce the stronger leg up/weaker leg down strategy for climbing steps and curbs.
- Scan ahead.
- Heel-toe walking.
- How to get up from a fall.

The theme is *Stepping On Safely*. This links with the balance and strength exercises. Knowing what to do and having the strength and balance to do it gives confidence. The leader should echo and assist the therapist in making these key points.

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### **Getting up from a chair**

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Break this down into simple steps and demonstrate:

- Move forward to the edge of the chair.
- Place your feet behind your knees.
- Lean forward over your knees (nose over toes).
- Push off with both hands, look up, and stand up slowly.
- Pause to regain balance before moving.

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### **Sitting down safely**

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Break this down into simple steps and demonstrate:

- Back up to the chair until you feel it hit the back of your legs.
- Look back at the chair to check your position.
- Reach for the arm rests if you need them.
- Lean forward (nose over toes) as you bend your knees.
- Slowly lower down to sit in a controlled manner; don't plop!
- Watch out for rocking chairs, gliders, or chairs with wheels.



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## The correct and safe use of a cane\*

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Break this down into simple steps and demonstrate:

- Demonstrate, with the assistance of a participant, how to adjust the cane to the correct height.
- Demonstrate the proper way to walk with a cane.
- Talk about maintaining the cane by checking the rubber tips or other articles used on the ends of canes.
- Demonstrate how to navigate steps and curbs with each device.



Point out the handout on cane safety on the display table.

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## Safely climbing stairs and curbs

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### Demonstrate on stairs, using the railing.

For people who have one leg that is stronger than the other, we teach: “Up with the good; down with the bad” to help remember which way to step up and down stairs and curbs. This expression is an appreciated and commonly used cue. A cane is held on the stronger side and, when walking or climbing steps, moves forward at the same time as the affected (bad) leg.

Advise participants that they can hold onto someone’s arm, grab a light pole or street sign, or use their cane or walking stick if no railing is available.

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## Scan ahead and heel-toe walk

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### Demonstrate.

This is one of the things that participants most appreciate learning and remember most after the course is completed. It teaches how to walk without shuffling. They first place the forward foot heel down,

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\* If someone uses a walker, use the steps from the walker safety handout. Point out that there is a handout on the display table.



toes up. They then roll their weight onto the toes. This way, they can avoid tripping (catching toes on hazards). Demonstrate the difference between heel-toe walking and shuffling. Scanning ahead gives time to prepare for hazards and changes in levels. They need to look down but also should have a picture of what's coming up ahead. Tell people as a general rule to try looking about 10 feet ahead as they walk. This will give them time to see a hazard and make a plan for navigating it before it's too late!

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### Getting up from a fall

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This is a worry for many people. Demonstrate and talk through the technique of getting up from the floor after a fall. Distribute the hand-out **Getting Up After a Fall**. This is the method we teach, breaking the process down into 8 simple steps. Use the overhead to present it to the participants as a simple 8-step process. The following description goes into more detail so you can demonstrate accurately:

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#### Steps in Getting Up From a Fall

- Try not to panic and take your time. What you have feared has just happened, so just stop and take stock.
- Bend your knees. This is a most important step — hips need to be at 90°.
- Roll onto your side.
- Place your free hand flat on the ground and come up onto the other elbow.
- Move onto a fully extended arm and then into a side sitting position.
- From side sitting, come up onto hands and knees so you are in a 4-point kneel. Get your balance.
- Crawl to a chair and place your hands on it. Flex one leg ready to stand. Alternatively, crawl to the telephone, which should be placed in a convenient low place.
- Stand up and sit on the chair.

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Demonstrate the process, asking the participants to instruct you in the process by taking you through the steps. Practice with as many people as are willing to try. Leaders often are asked to go over this in other sessions as well. People probably will tell you whether this worked for them or not. Not everyone is able to do this, but for many



people, it gives them time to calm down and focus on something they can at least try. **Remind the group:** *“Remain calm — try not to panic and don’t do anything quickly.”*

- Discuss other ways to get up off the floor. For example:
  - If a knee problem stops you from crawling, adapt the above method by rolling onto your bottom and doing a “bottom crawl.”
  - Crawl to a chair.
  - Use steps/stairs and pull up onto the step backward.
  - Push up from a sitting position with your back against a wall.
  - Place the phone down low so you can get to it easier.
- Participants sometimes raise the possibility of being hurt if someone rushes to help and pulls on them. One participant told us how she instructed the stranger who came to her assistance by saying, before he could pull her up, “Can I use you as a piece of furniture rather than your pulling me up? Give me your hand.” The method we teach can be used to guide others.

**Thank the guest speaker** for sharing expertise during this section of the class.

## 2.9 Safety alarm systems (5 min)



**BRAINSTORM** • *What are some examples of different safety alert systems?*

Include these items if not mentioned:

- Emergency response systems.
- Personal alarm systems.
- Telephone placed in a low, convenient place. Relocate the wall phone if necessary (related to DVD A — Staying On: Living at Home Safely in Session 1).
- Family member calling daily.
- A sign to neighbors, such as putting the blinds up every morning. If neighbors see the blinds are not up by a certain time, they check the reason. Alternatively, if you live in an apartment block, just calling out to the neighbors every day may work.



### Cane Safety

#### **General principles for using a cane safely:**

- Your cane should be adjusted for your height. The hand grip should be level with your wrist when your arm is at your side.
- Use your cane in the hand opposite to your affected or weaker leg. Bring it forward with your weaker leg.
- Renew the rubber tip of the cane when it becomes worn down. Have a look at the end of your cane now.
- Apply luminous tape so that others can see you when it is dim or dark.

#### **Remember:**

- Walk with your legs a little wider apart to make ramps and slopes easier.
  - On the stairs or curb:
  - Step up first with your stronger leg.
  - Step down with your weaker leg.



### Walker Safety

#### **General principles for using a walker safely:**

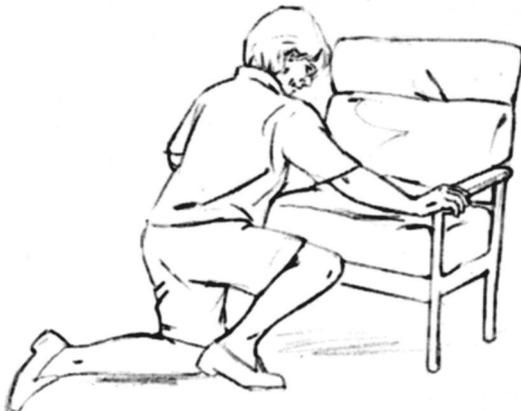
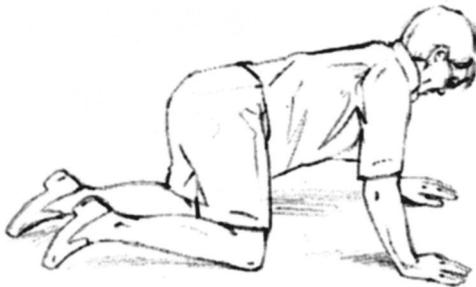
- Your walker should be adjusted for your height. The handgrips should be level with your wrist when your arm is at your side.
- Push up from the chair, not from the walker, when rising to stand. When sitting down, reach for the chair arm rests instead of holding on to the walker.
- Try to not let the walker get too far in front of your body as you are walking. Keep yourself upright and avoid stooping as you walk.
- Renew the rubber tips, glides, or tennis balls on the back legs of the walker when worn. If your walker has wheels, these also need to be replaced every so often.

#### **Remember:**

- When stepping up a curb, put all four legs of the walker up on the curb first. You may want to lock the brakes for added stability. Step up. When stepping down from a curb, put all four legs of the walker down on the ground, lock the brakes if needed, then step down.
- If your walker has brakes, remember to use the brakes to slow the walker down if you feel it is getting away from you, or to slow down on ramps.
- If your walker has a seat, remember to lock the brakes before sitting down or standing up from the walker seat.



## Getting Up After a Fall



1. Don't panic; take your time.
2. Bend both of your knees.
3. Roll onto one side.
4. Push up onto one elbow.
5. Move into a kneeling position on hands and knees.
6. Stop and get your balance.
7. Crawl to a phone on a low table or to a chair.
8. Using both hands, pull yourself up.

