



Allied Health Assistant (AHA) led exercise before Physiotherapy assessment was safe and feasible in GEM: A pilot trial

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Background

Allied Health Assistants are qualified to supervise exercise therapy for older patients in hospital and this is important as hospital patients are frequently inactive during hospital admissions.^{1,2} Physical activity is known to decrease the risk of negative patient outcomes including, falls, delirium and functional decline.^{3,4} At Eastern Health, transitions between acute and sub-acute wards result in reduced participation in exercise therapy with the AHA (figure 1).

An average of 7 days between acute and sub-acute AHA input, potentially leading to functional decline.

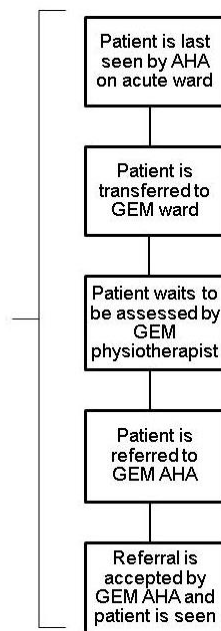


Figure 1 – AHA input at time of transition between wards

Aim

To examine if direct AHA care before physiotherapy assessment was safe and feasible on a GEM ward at Eastern Health.

Methods

Patients on a GEM ward at BHH were recruited to the trial (Figure 2).

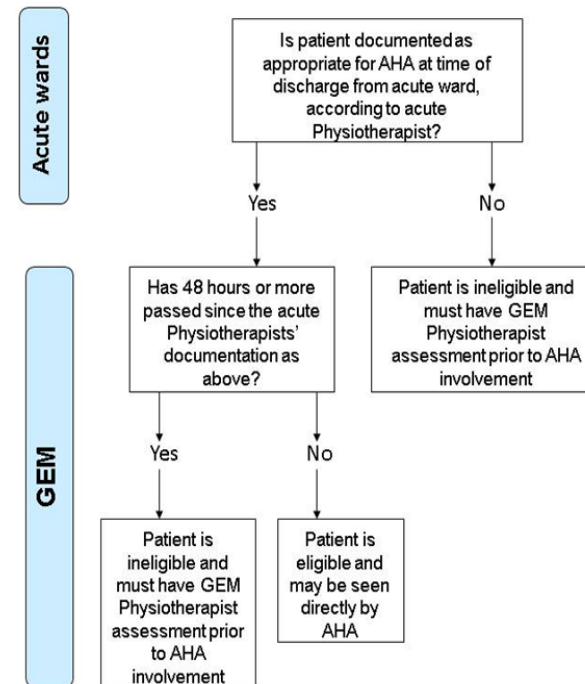


Figure 2 – Pathway to patient recruitment

The main outcomes were related to safety and feasibility including feedback from patients and staff, number of patients eligible to receive the intervention and adverse events to patients recorded on the Victorian Health Incident Management System (VHMIS).

Results

During the trial period (16th April – 8th June 2018), 11 patients successfully received AHA intervention before physiotherapy assessment (Figure 3). No VHIMS or adverse outcomes were recorded.

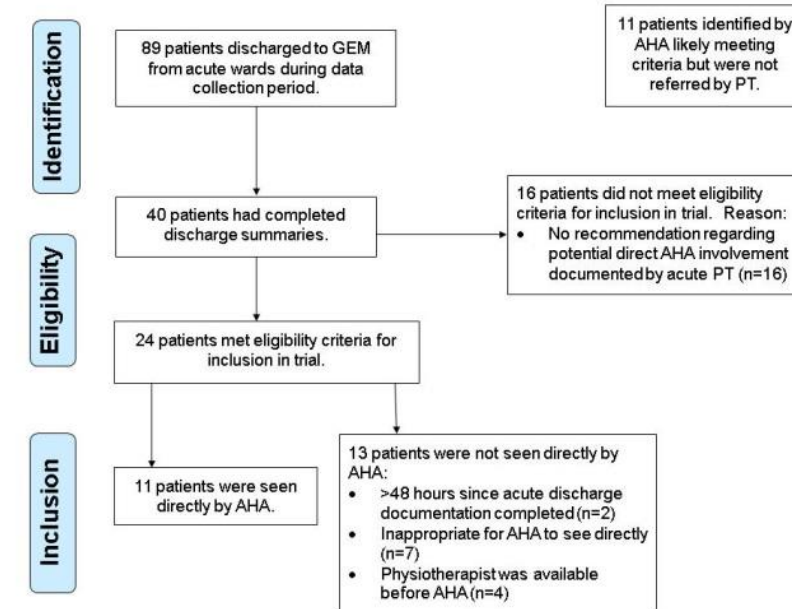


Figure 3 – Results of pilot trial

Conclusion

AHA intervention before physiotherapy initial contact on a GEM ward was feasible and safe. This project is being extended to other wards and sites at Eastern Health.

