

Preserving independence evidence inventory

Revised after the 7/28/20 SAPA Priority Outcomes Work Team Meeting

SAPA work teams: In your review of this strategy handout, please consider the following questions:

1. **Are there any evidence-informed strategies you would recommend adding?** If yes:
 - a. **What is the evidence that this strategy achieves relevant outcomes?** (send link, preferably to systematic review or evidence registry; or to journal article or grey literature from external organization)
 - b. **If it doesn't fit as an evidence-informed strategy, what is the rationale for including it in the SAPA?** (This list was developed using evidence registries and national or state sources of evidence-based strategies. Some types of strategies, such as systems changes and emerging approaches, may not be captured by these sources. Are there any of these types of strategies we should consider, and how do they further SAPA objectives?)
2. **Are there any strategies on the list you think should be renamed, combined (i.e. grouped together) or split out?**
3. **Are there any strategies you would recommend removing from consideration and why?** (Please consider the strategy selection considerations below.)

Strategy selection considerations

- Evidence of effectiveness
- Potential size of impact on SAPA outcomes, including equity
- Co-benefits (impacts multiple SAPA outcomes)
- Opportunities given current status
- Alignment with the 2020-2022 SHIP

Preserving independence outcomes and preliminary potential indicators

| Desired outcome | Indicator name | Indicator description (source/lead agency) |
|---------------------------------|---|--|
| Improve chronic pain management | Functional limitations due to arthritis | No strong state indicator. Monitor progress toward improved data collection and develop indicator. |
| | | Percent of adults, ages 65 and older, with arthritis who reported that arthritis or joint symptoms do not limit their usual activities (BRFSS, as compiled by AHR Senior Report) |
| Reduce falls | Fall within last 12 months | Percent of adults, ages 65 and older, who report having had a fall within the last 12 months (BRFSS, as compiled by AHR Senior Report) |

Evidence sources

| Evidence registry, systematic review or federal source of evidence-based strategies | Recommendation level(s) included in this inventory (if applicable) |
|---|--|
| What Works for Health (WWFH) : Evidence registry from County Health Rankings and Roadmaps, a project of the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation | <ul style="list-style-type: none"> Scientifically supported Some evidence |
| The Guide to Community Preventive Services (Community Guide) : Systematic reviews from the U.S. Centers for Disease Control and Prevention (CDC) | Recommended |
| National Council on Aging (NCOA), Evidence-Based Health Promotion/Disease Prevention Programs : List of evidence-based health promotion/disease prevention programs approved for Older American's Act Title III-D funding | N/A |
| Administration for Community Living (ACL), Aging and Disability Evidence-Based Programs and Practices : Collection of evidence-based programs and practices that address older adult health and wellness, long-term services and supports, and caregiver and family support | N/A |
| U.S. Preventive Services Task Force Recommendations (USPSTF) : Systematic reviews from the Agency for Healthcare Research and Quality | <ul style="list-style-type: none"> Grade A (recommended; high certainty of benefit) Grade B (recommended; moderate certainty of benefit) |

Table 1. SAPA preserving independence outcomes: Chronic pain management

| Strategy/policy/program Orange = Likely to reduce disparities, based on review by WWFH, or health equity strategy in Community Guide | Outcomes Note: for WWFH, Bold= expected beneficial outcomes; unbold= other potential beneficial outcomes; * = other potential beneficial outcome listed in research | Included in 2020 - 2022 SHIP? |
|--|---|-------------------------------|
| Chronic disease management | | |
| 1. Chronic disease and pain management programs , including managing osteoarthritis | WWFH <ul style="list-style-type: none"> Improved health outcomes Improved quality of life Improved mental health Reduced hospital utilization | Yes |
| 2. Chronic disease self-management programs , | WWFH <ul style="list-style-type: none"> Improved health outcomes | No |

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| including managing chronic pain and osteoarthritis | <ul style="list-style-type: none"> • Increased healthy behaviors • Improved quality of life • Increased self-efficacy • Improved mental health • Reduced hospital utilization • Improved chronic disease management • Improved care for chronic conditions | |
| 3. <u>Better Choices, Better Health – Chronic Disease</u> , an online chronic disease self- management program | NCOA <ul style="list-style-type: none"> • Improved management of chronic health conditions • Reduced arthritic pain* | No |
| 4. <u>Live Healthy, Work Healthy</u> , a workplace chronic disease self- management program | NCOA <ul style="list-style-type: none"> • Improved management of chronic health conditions, including arthritis, hypertension, heart disease, stroke, lung disease and diabetes* | No |
| Physical activity | | |
| 5. <u>AEA Arthritis Foundation Aquatic Program (AFAP)</u> | NCOA <ul style="list-style-type: none"> • Increased social interaction • Improved quality of life • Reduced pain/inflammation • Improved joint function • Increased muscular strength | No |
| 6. <u>AEA Arthritis Foundation Exercise Program (AFEP)</u> | NCOA <ul style="list-style-type: none"> • Increased sense of well-being • Improved quality of life • Reduced pain/inflammation • Improved joint function • Increased muscular strength | No |
| 7. <u>Tai Chi for Arthritis – available online</u> | NCOA/ACL <ul style="list-style-type: none"> • Improved movement, balance, strength, flexibility and relaxation • Decreased pain and falls | No |
| 8. <u>Walk with Ease</u> , a group and self-directed walking and education program | NCOA <ul style="list-style-type: none"> • Reduced pain and discomfort of arthritis • Increased balance and strength • Improved confidence in the ability to be physically active • Improved overall health among older adults • Decreased disability • Improved arthritis symptoms, self-efficacy, and perceived control, balance, strength and walking pace | No |

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| <p>9. Fit & Strong!, a multi-component physical activity program for older adults with osteoarthritis</p> | <p>NCOA/ACL</p> <ul style="list-style-type: none"> • Improved lower-extremity osteoarthritis management • Increased lower extremity strength | <p>No</p> |
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Table 2. SAPA preserving independence outcomes: Falls

| <p>Strategy/policy/program Orange = Likely to reduce disparities, based on review by WWFH, or health equity strategy in Community Guide</p> | <p>Outcomes Note: for WWFH, Bold= expected beneficial outcomes; unbold= other potential beneficial outcomes</p> | <p>Included in 2020-2022 SHIP?</p> |
|--|---|---|
| <p>Physical activity</p> | | |
| <p>1. Activity programs for older adults</p> | <p>WWFH</p> <ul style="list-style-type: none"> • Improved health outcomes • Improved mental health • Reduced isolation • Improved quality of life • Increased activity levels • Reduced falls | <p>Yes</p> |
| <p>2. Falls Prevention in Community-Dwelling Older Adults: Exercise Interventions</p> | <p>USPSTF</p> <ul style="list-style-type: none"> • Reduced falls | <p>No</p> |
| <p>3. Enhance®Fitness</p> | <p>NCOA/ACL</p> <ul style="list-style-type: none"> • Reduced fall risk • Improved functional health and well-being • Reduced depressive symptoms • Reduced health care costs | <p>No</p> |
| <p>4. Healthy Steps in Motion (HSIM)</p> | <p>NCOA</p> <ul style="list-style-type: none"> • Reduced falls and injuries resulting from falls • Improved overall health | <p>No</p> |
| <p>5. The Otago Exercise Program, series of strength and balance exercises delivered by a physical therapist in the home</p> | <p>NCOA</p> <ul style="list-style-type: none"> • Increased strength, balance and endurance • Reduced falls | <p>No</p> |
| <p>6. Stay Active and Independent for Life (SAIL)</p> | <p>NCOA</p> <ul style="list-style-type: none"> • Reduced falls and risk factors for falls • Increased strength • Improved balance | <p>No</p> |
| <p>7. Bingocize®, a 10-week program that is a</p> | <p>NCOA</p> | <p>No</p> |

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| <p>combination of exercise and health education in a bingo format</p> | <ul style="list-style-type: none"> • Improved functional performance including lower/upper body strength, gait, balance, range of motion • Improved aspects of cognition (executive function) • Increased social engagement • Improved knowledge of falls risk reduction • Improve health activation | |
| <p>8. Tai Chi, including Tai Chi for Arthritis (available online), Tai Chi Prime (available via DVD) and Moving for Better Balance</p> | <p>NCOA</p> <p>Tai Chi for Arthritis</p> <ul style="list-style-type: none"> • Improved movement, balance, strength, flexibility and relaxation • Decreased pain and falls <p>Tai Chi Prime</p> <ul style="list-style-type: none"> • Reduced falls • Improved strength, balance, balance confidence and gait/mobility • Improved cognitive skills <p>Tai Chi: Moving for Better Balance</p> <ul style="list-style-type: none"> • Reduced falls • Increased functional balance • Improved mobility | <p>No</p> |
| <p>Falls prevention education and self-management</p> | | |
| <p>9. A Matter of Balance (MOB)</p> | <p>NCOA</p> <ul style="list-style-type: none"> • Reduced fall risk and fear of falling • Improved falls self-management • Improved falls self-efficacy and promote physical activity | <p>No</p> |
| <p>10. CAPABLE (Community Aging in Place – Advancing Better Living for Elders)</p> | <p>NCOA</p> <ul style="list-style-type: none"> • Reduced fall risk • Reduced fear of falling | <p>No</p> |
| <p>11. FallsTalk</p> | <p>NCOA</p> <ul style="list-style-type: none"> • Increased falls prevention behaviors and falls self-management skills • Improved recognition of fall threats (personal traits and circumstances that could cause a fall) & self-efficacy • Reduced participant falls and fall risk | <p>No</p> |
| <p>12. FallScope</p> | <p>NCOA</p> <ul style="list-style-type: none"> • Increased falls prevention behaviors and falls self-management skills | <p>No</p> |

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| | <ul style="list-style-type: none"> Improved recognition of fall threats (personal traits and circumstances that could cause a fall) & self-efficacy Enhanced fall threat recognition and prevention behaviors with multimedia Reduced participant falls and fall risk | |
| 13. Healthy Steps for Older Adults (HSOA) | <p>NCOA/ACL</p> <ul style="list-style-type: none"> Increased awareness of risk of falls Reduced falls Reduced frequency of self-reported hospital and emergency department (ED) use Reduced costs associated with hospital and ED use | No |
| 14. Stepping On | <p>NCOA</p> <ul style="list-style-type: none"> Reduced falls Increased self-confidence in making decisions and behavioral change in situations where older adults are at risk of falling | No |
| Care coordination | | |
| 15. Integrated long-term care for community-dwelling frail elders | <p>WWFH</p> <ul style="list-style-type: none"> Reduced hospital utilization Improved day-to-day functioning Reduced nursing home use Increased caregiver satisfaction Reduced falls Improved quality of life | No |
| Risk assessment and interventions | | |
| 16. STEADI (Stopping Elderly Accidents, Deaths & Injuries) | <p>CDC</p> <ul style="list-style-type: none"> Increased screening for fall risk Reduced falls Improved health outcomes Reduced healthcare expenditures | No |
| 17. Multi-component fall prevention interventions for older adults , including exercise, education, medication management and home modifications | <p>WWFH</p> <ul style="list-style-type: none"> Reduced falls Reduced injuries | No |
| 18. Risk assessments & personalized approaches to fall prevention among older adults | <p>WWFH</p> <ul style="list-style-type: none"> Reduced falls Reduced injuries | No |

Relevant state plans and other resources

- [Ohio Older Adults Falls Prevention Coalition 2017 to 2021 State Plan](#)
- [STEADY U Ohio initiative](#), led by the Ohio Department of Aging
- [The Impact of Chronic Disease in Ohio 2015](#) report, Ohio Department of Health
- [Ohio's Plan to Prevent and Reduce Chronic Disease: 2014-2018](#), Ohio Department of Health