Lifestyle Matters: An Occupational Approach to Health and Wellbeing in Later Life

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http://www.sheffield.ac.uk/lifestylematters
• Lifestyle Matters: an occupational approach to healthy ageing

• Developed in partnership with older people for older people

• Inspired by work of Clark and colleagues in the US: Lifestyle Redesign
Research into a US intervention, Lifestyle Redesign (reported 1997; 2001; 2002) showed that....

• Participants experienced benefit; health, function and quality of life

• Benefit was sustained six months later

• The intervention was cost effective
Lifestyle Matters

Inspired by A Lifestyle Redesign® but different in the following ways……..

- Content reworked to meet the needs of a UK population – validated by older people
- Different delivery modes tested – facilitated by staff who are not necessarily trained occupational therapists
- Involved older people living independently in the community – not in sheltered apartments as in the first US study
A complex intervention

- Research into implementation
- Translation of findings into practice
- Population based study of effectiveness
- Evaluation of cost effectiveness
Study design informed by the UK Research Council guidance on evaluation of complex interventions

- Feasibility study to inform trial design
- Randomised controlled trial with process evaluation

http://www.bmj.com/content/337/bmj.a1655
Feasibility Study (2004-2005)
What we had to consider

- Recruitment of older people
- Who will deliver the programme and how will they be trained and supported
- Outcome measures necessary for a future randomised controlled trial
Sheffield, UK – a very different setting for intervention delivery
A test of different methods of recruitment

- District nurses ✗
- General Advertising ✗
- Telephone ✗
- Press Release / Radio ✗
Workshops in community venues and talks to church groups were successful ways of recruiting.
As were ‘taster sessions’
Results of feasibility study

- Twenty eight people aged 60 and over commenced the eight month programme and 26 completed it.
- They still meet together independently (several years later).
- Post intervention interviews illustrated the benefits participants experienced with greater self efficacy being a significant theme.

(Mountain & Craig, Occupational Therapy International, 2011)
Results cont.

- Comparison of pre and post scores on quantitative measures showed upward trends on all dimensions of quality of life
  
  (Mountain et al, British Journal of Occ Therapy, 2008)

- Measurement of cognition and dependency proved useful for screening purposes and for identifying individuals at risk, but not as outcome measures
Outputs from the feasibility study

Results used to inform national guidance alongside well elderly study: [http://guidance.nice.org.uk/PH16](http://guidance.nice.org.uk/PH16)

Intervention published
After the feasibility study....

- Research to examine the effectiveness of Lifestyle Matters – trial funded by the UK Medical Research Council 2011 onwards through the Lifelong Health and Wellbeing programme

- 1.3M over 4 years
Trial design

- Pragmatic, two arm, parallel group, individually randomised controlled trial (Lifestyle Matters v ‘standard care’)

- Two recruitment sites – Sheffield (urban) and Bangor, North Wales (rural)

- Outcome measures applied at baseline (consent), six months and two years
Trial design cont...

- **Primary outcome** (6 months post randomisation):
  - SF36 (mental health dimension)

- **Secondary outcomes:**
  - SF36 (other dimensions)
  - General Self Efficacy Scale
  - EQ-5D
  - PHQ-9
  - de Jong Loneliness Scale
  - Brief Resilience Scale
  - health and social care utilisation
  - Wellbeing question from the Integrated Household Survey 2011
Intervention delivery

- Intervention delivered for four months in a community venue and in the community
- All participants offered monthly 1:1 sessions
- Intervention facilitated by grade 4 NHS equivalent staff (lower pay than for occupational therapists)
- Facilitators trained in intervention delivery
- Weekly supervision by trained OTs for facilitators
Recruitment methods

- GP mail outs most successful method of recruitment
  - 93% of enquires across both sites

- Other methods negligible
  - Direct referrals through health and social care, voluntary organisations
  - General advertising in local press
  - Attending local older people groups
  - Venues e.g. churches, libraries, post offices
Recruitment of trial participants
(end date 30.4.13)

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### Cycles of intervention delivery
*(8-16 participants per group)*

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Fidelity checks

- Instruments were constructed to assess;
  - The content of the training programme
  - The delivery of the programme by rating video recordings of group sessions

- Training delivered by same trainer (facilitators and OT supervisors)

- Use of weekly and 1-1 registers

- Reflective diaries

- In-depth interviews with facilitators and participants
Process evaluation

Qualitative interviews are being conducted to capture experiences of being involved in the programme with:

- all intervention facilitators
  - n= 4 facilitators
  - End of Group 2 and final group

- approximately 10% of intervention participants
  - n=12 participants
  - Purposive sample
  - Across both sites and all three cycles
Trying the intervention with other user groups

As part of the overall programme we are also undertaking two feasibility studies;

People with early stage dementia in Sheffield

- ‘Journeying through Dementia’ programme content
- Recruitment methods
- Sample size for an RCT
- Outcome measures – tolerance and suitability
- Length and modes of delivery

Older people with diagnosed mild to moderate depression in Wales

- Recruitment strategies
- Explore research methods and study design
- Outcome measures – tolerance and suitability
- Develop and modify selected topics from intervention
Thank you

Any Questions?

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