

WALKING THE LINE

A collaborative quality improvement project to reduce falls in an adult hospice in-patient unit

There is a growing body of evidence in support of the importance of rehabilitation within palliative care ⁽¹⁾. Care at Kilbryde Hospice is tailored so that we are providing the right amount of support to empower and enable individuals to achieve their goals

This quality improvement project with physiotherapy and music therapy collaborative input investigated the use of Rhythmic Auditory Stimulation (RAS) to improve mobility and reduce the risk of falls for in-patients at Kilbryde Hospice.

REFERENCES:

1. **Campbell A et al.** (2011) The importance of physical activity for people living with and beyond cancer: A concise evidence review. MacMillan Cancer Support. London England
2. **Thaut, M.** (2014) The Handbook of Neurologic Music Therapy, Oxford University Press

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BACKGROUND

RAS is well-evidenced in the treatment of neurology patients,⁽²⁾ however the project authors are aware of no studies into the impact of RAS on gait re-education within a palliative care population.

With their background in specialist palliative care and neurological support, the authors wished to explore a collaborative approach to assisting in the reduction of falls and the improvement of mobility in the hospice in-patient unit. Combining their 2 specialities they used music and movement methods to explore how this might affect a patient's gait and confidence in walking independently.

The inclusion criteria was as follows:

- At risk of falls
- Mobile without assistance by another person
- Able to cover a minimum of 10 metres
- Non-neurological diagnosis
- Has understanding of project and can gain consent
- Record patient's pre-admission level of mobility, current level of mobility, diagnosis/co-morbidities & falls history

AIMS

- To establish a joint quality improvement project with Specialist Palliative Care Physiotherapist (PT) and Music Therapist (MT).
- To investigate the use of Rhythmic Auditory Stimulation (RAS) to improve mobility and reduce the risk of falls for palliative care in-patients at Kilbryde Hospice.
- To support 10 in-patients over a 12-month period with a view to improving mobility and confidence, as well as reducing the risk of falls.

METHOD

- Assessment by PT/MT, RAS data obtained, and initial measures taken – Tinetti, Elderly Mobility Scale and Patient Reported Confidence Score recorded.
- Daily gait re-education provided by various members of the multi-disciplinary team (MT & PT are part time)





RESULTS/CONCLUSIONS

- Further study is required owing to low sample numbers
- Although this patient initially showed signs of improvement in mobility (progressing to independence with delta frame) they became too unwell to complete the project. His family reported an improvement in self esteem during the work.
- Due to lower numbers of in patients due to COVID-19, the authors hope to continue the project with patients attending the Hospice Day Service in the future.