## **Victorian Active Ageing Partnership (VAAP)**



## Transition Pathways – Key Elements to Maximise Sustainability of Exercise

The successful operation of pathways governing the transition of older people from formal, supervised programs to more independent, community-based exercise is vital. Well functioning transition pathways will assist in maximising the older person's continuation and sustained engagement in exercise.

The table below has been formulated with the input of service providers in a range of settings and outlines the key features and factors integral in promoting successful transition pathways.

	Key Element	Further Detail/Background
	Defined staff responsibility or role for the transition of clients	This would take the form of either a designated staff member to oversee and coordinate transition, or as a designated component of one person's role. Given the focus is on exercise, many services have an exercise physiologist in this position/role.
<u> </u>	Buy-in and support of all staff at the initial site	It is vital that management and all relevant staff at the initial site (especially the allied health professionals directly involved in a client's care) are knowledgeable and supportive of the rationale for the transition process and the steps involved.
	Establish the goal and understanding for transition from the beginning with clients	During initial or early conversations with clients, it is important to establish the mindset of progress, so they know the potential next steps after the completion of their initial program. This way, they aren't caught off-guard when the program finishes, it gives them something to work towards and they don't feel like they are being 'pushed out' at the end of the program.
	Encouragement and support in the initial program aimed at building self-management and self-efficacy	Building people's confidence and self-efficacy during the initial program so they are independent in their exercise should be a key focus. Undertaking personal goal-setting with the client would be part of this process.
<u></u>	Assessing the client's readiness for transition	This would involve assessing the client's physical/functional readiness, confidence levels, etc. Ideally, the client and the health professional should be in agreement about the client's readiness for transition.
	Identification and knowledge of appropriate services to which clients are being transitioned	An initial internet search followed by face-to-face meetings can assist in identifying appropriate services and willing service providers in the relevant geographic area or catchment. A checklist of key attributes may also be helpful (e.g. cost, accessibility, cleanliness and well functioning equipment, supportive staff/guidance). It is important to note that the affordability of services to which clients are being transitioned is a major issue, as it is important that the cost is not unaffordable or too different from the costs of the initial site. Having an up-to-date directory of local 'transition options for clients' will be useful for relevant staff and clients.
		A good working relationship between services is enhanced by a key contact person or 'champion' at the new service and ongoing contact, if possible. It may also be determined that having a memorandum of understanding in place will assist in clarifying roles and responsibilities between services. Meeting regularly assists in building relationships, maintaining communication and facilitating knowledge/skill transfer. Working with fewer, good quality community-based providers rather than many, may make communication and quality monitoring easier.

	Key Element	Further Detail/Background
	Comprehensive transition/referral/ discharge exercise information to be provided to the client and the staff at the new service	By the time a client is transitioning, they should have moved from high(er) to low(er) risk and be ready to exercise fairly independently. Transition communications between providers should be detailed but in 'easy to read' language. This improves confidence in the provider taking the client on. The written letter should detail the exercise program for the person and provide guidelines for the trainer, e.g. how many reps people should be doing, setting an understanding of the pace, etc.
		<ul> <li>A transition/referral letter from an initial setting to a new exercise setting might include:</li> <li>Main medical issues</li> <li>Current physical profile and exercise program</li> <li>Exercise recommendations</li> <li>Example suitable exercise program</li> </ul>
	A built-in 'overlap' stage	This 'overlap' stage would be facilitated by either: a) attending the new service with the client for an introduction and familiarisation; b) running some or all of the classes of the initial program on-site at the new service c) co-location of the initial service and new service d) the client beginning to attend classes at the new service prior to being discharged from the initial program.
		Any of these approaches can assist in building participant knowledge, familiarity and confidence in the new provider. A transition destination built around familiarity is very helpful.
	Maintenance of the social aspect of the exercise program	Maintenance of the social aspect is facilitated by either transitioning clients together or ensuring a social aspect to exercise at the new service (e.g. tea/coffee available at the end of the session).
<b>C</b> 'C'	Upskilling of staff at the new service re: awareness of the needs of the incoming client group (if possible)	Conduct training or workshops to upskill staff at the new site, so that they are equipped to work with these clients. Also, inviting the staff to visit the initial site will increase their understanding and knowledge of the client group and enhance working relationships between the two sites.
	Follow-up with clients (if possible)	Follow-up with clients soon after they transition will allow many initial problems to be dealt with in a timely manner before they potentially escalate. Staying in contact with clients longer-term (resources permitting) will also assist in determining the overall success of the transition process.
		It may also be determined that targeted and tailored follow-up, where greater resources are devoted to clients with more needs and barriers, is necessary or takes priority.







