

# Project Healthy Bones 2018 Manual Webinar



**NJ DEPARTMENT OF HUMAN SERVICES  
DIVISION OF AGING SERVICES**



# Remembrance



Governor Phil Murphy has ordered that U.S and New Jersey flags be flown at half-staff at all state buildings and facilities from Tuesday, October 30th through Sunday, November 4<sup>th</sup> in remembrance of the victims of the mass shooting at the Tree of Life Synagogue in Pittsburgh, Pennsylvania.

*“New Jersey mourns for the victims and their loved ones during this difficult time. Regardless of your beliefs, one deserves to be able to worship in peace. We must stand together to fight prejudice and continue the effort to end gun violence.”*

*Governor Phil Murphy*



# Today's Agenda



- Welcome & Introductions
- Manuals
  - Exercise
  - Education
- Testing
- Documentation/Forms
- Fidelity to Project Healthy Bones

# Welcome & Introductions



## NJ Division of Aging Services (DoAS)

Dennis McGowan, Heather Taylor, Andrew Biederman

## Interagency Council on Osteoporosis (ICO)

Mary Bridgeman, Mary Wagner, Sally Fullman, Margie Bissinger

## Project Healthy Bones (PHB)

Lead Coordinators and Peer Leaders



# History and Infrastructure of PHB



- 1997: The Osteoporosis Prevention and Education Program Act establishes the New Jersey Interagency Council on Osteoporosis (ICO) to develop public education and outreach.
- The New Jersey Division of Aging Services (DoAS) initiated an education and exercise program for osteoporosis, Project Healthy Bones, with oversight by the ICO.



# History and Infrastructure of PHB



- Project Healthy Bones exercises are based on research at Tufts University, and are designed to improve balance and strength, and to protect bone density.
- 1997-2005: Directors from the NJ Association of Retired and Senior Volunteer Program (RSVP) had a grant from the State to offer Project Healthy Bones classes in all 21 counties. Saint Barnabas provided peer leader training twice a year.



# History and Infrastructure of PHB



- 2005-2018: PHB moved to a “train-the-trainer” model in collaboration with The Arthritis Center at Morristown Medical Center, other hospitals, and RSVP.
- 2018: Morristown Medical Center steps down from the Program Trainer role and DoAS assumes that role, in consultation with the ICO.

# DoAS First Steps



- Complete manual revisions with ICO Committee
- Take over PHB listserv
- Update listing of PHB network through e-mail survey
- Host this webinar
- Build a website for PHB lead coordinators and peer leader resources



# DoAS Next Steps



- Improve data collection
- Establish regular communication with network
- Host additional PHB network calls and webinars
  - Topic suggestions welcome
- Design and implement a fidelity monitoring protocol

# Manual Updates



- What's new?
- What's revised?
- Why is this important?

# Manual Updates



- Participant Manual
  - Five new activities
    - ✦ Deep Breathing
    - ✦ Weight Shifting, Side to Side
    - ✦ Weight Shifting, Front and Back
    - ✦ 4-Step Square
    - ✦ Guided Imagery
  - Updated education sections
    - ✦ Important changes in osteoporosis management

# Manual Updates



- Peer Leader Manual
  - Major revisions throughout
    - ✦ Updated information
    - ✦ New emphasis on education
    - ✦ Support for showing program outcomes
  - Exercises
    - ✦ New exercises
    - ✦ Instructions for consistency class to class
  - Education
    - ✦ Reorganized and updated

# Manual Updates



- Peer Leader Manual
  - New, improved guidance:
    - ✦ Setting up exercises
    - ✦ Coaching for correct performance of exercises
    - ✦ Leading discussions
    - ✦ Managing class forms
  - Other revisions:
    - ✦ Included additional examples of healthcare professionals and topics that may be useful
    - ✦ Sample Class and Lesson Plans revised to more accurately reflect what a PHB class looks like

# Manual Updates



- Peer Leader Manual
  - New resources:
    - ✦ Medical matters
    - ✦ Peer to Peer: sharing ideas
    - ✦ Good wishes from the Long Hill class
    - ✦ Calcium questionnaire

# Manual Updates



- Lead Coordinator Manual
  - Changes to match those in the other manuals

# Exercises



- What's new?
- What's revised?
- Why is this important?



# Deep Breathing



- Purpose: Increase your energy and oxygen supply, improve your posture, and reduce stress and anxiety.
- Instructions:
  - Stand tall, with your back straight, and feet slightly apart, pointing straight ahead. At first, you may wish to place your hands gently on your stomach.

# Deep Breathing (continued)



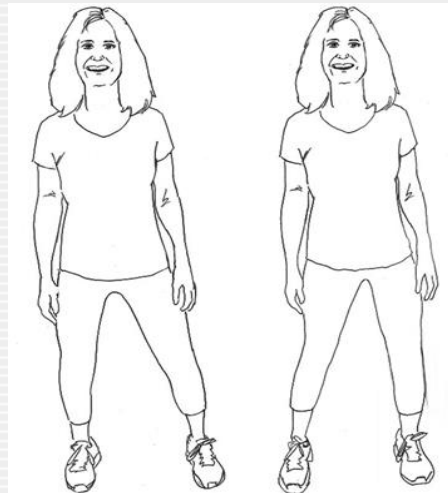
- Imagine that there is a balloon in your lower abdomen. Inhale through your nose to the count of four as if you are expanding (blowing up) the balloon.
- Hold for four seconds.
- Exhale slowly through pursed lips or your nose and deflate the balloon to the count of four.

# Weight Shifting: Side to Side



- **Instructions:**

- Stand with your feet in a comfortable wide stance. Keep your body straight, knees bent, and toes pointed forward.



# Weight Shifting: Side to Side



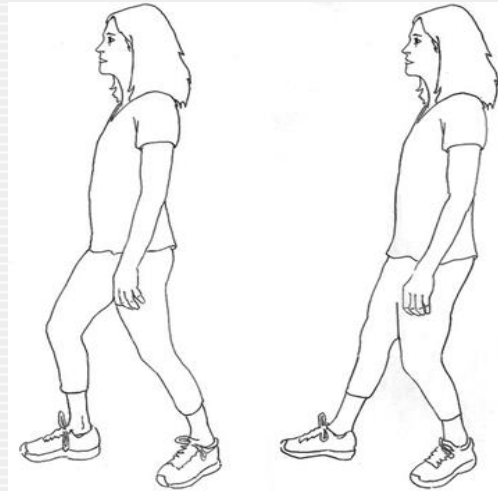
- Gradually shift your weight to the right, keeping your pelvis level. Then slowly shift to the left. Be mindful of your body as you slowly and smoothly move from side to side. Only shift as far as you feel stable and comfortable. You want to strengthen your legs in your normal right and left, forward and back positions, and to feel confident of your balance.
- Move right and left a total of 8 times.

# Weight Shifting: Front to Back



- **Instructions:**

- Stand with your body straight, knees bent, feet shoulder-width apart and pointed forward. Pivot your left foot back pointing your left knee and toes slightly outward.
- Gradually shift your weight forward to the right foot as you bend your right knee while keeping your upper body straight. Then shift back to your left foot as you bend your left knee.



# Weight Shifting: Front to Back



- Shift your weight forward and back only as far as you feel stable and comfortable. Your front forward-bending knee should not go beyond your toes to avoid straining on your knee joint. Move smoothly and slowly, with good posture.
- Move forward and back a total of 8 times. Then place the left foot forward and repeat.

# 4-Step Square

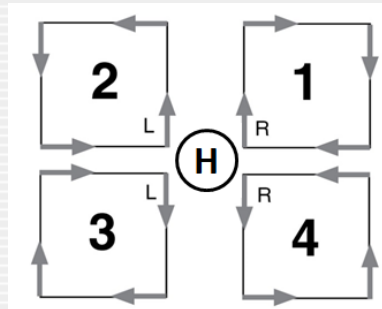


- **Purpose:** Improve your dynamic balance and ability to step over obstacles in forward, side, and backward movements.
- **Instructions:**
  - Stand tall with good posture, body straight, feet pointing forward. Visualize four squares in which you will be moving forward, sideways, and backward, bringing your feet together after each step.

# 4-Step Square (continued)



- Think of the squares as being numbered and set up counter clockwise, with the center of the squares as your “home” position. Start by standing with your feet together in this home position. Move around each square twice, starting and ending each time at the home position.
- In square 1, step forward with your right foot, close with your left. Step to the right with your right foot, close with your left. Step back with your right foot, close with your left. Step left with your left foot, close with your right. Do 2 times.





# Manual: Exercise Section



- Videos Available for New Exercises
  - Deep Breathing
    - ✦ <http://tinyurl.com/PHB-breathing>
  - Weight Shifting (Side to Side)
    - ✦ <http://tinyurl.com/PHB-sidebalance>
  - Weight Shifting (Front to Back)
    - ✦ <http://tinyurl.com/PHB-balance>
  - 4-Step Square
    - ✦ <http://tinyurl.com/PHB-Fourstep>

# Guided Imagery



- Purpose: Make stretching a time of calm and relaxation.
- Instructions:
  - Focus on breathing and reducing muscle fatigue
  - 12 suggested phrases, thoughts
  - Use others if they feel more natural

# Education



- What's new?
- What's revised?
- Why is this important?

# Revisions and Updates



- **Suggested Education Topics and Curriculum Outline**
  - Altered to be more realistic and accommodate all PHB sites
- **Education Curriculum Content**
  - Updated with the most accurate/recent information as of 2018

# Education Importance



- The education component of PHB provides participants with knowledge about osteoporosis and bone health, as well as other important topics to improve their overall health and well-being
- It sets PHB apart from other exercise-only programs
- Discussions help group dynamic
- Key factor in evidence-based effort

# Education Help



- Session by session fact sheets for education and discussion have been posted on the PHB website
  - [www.state.nj.us/humanservices/doas/home/phbresources.html](http://www.state.nj.us/humanservices/doas/home/phbresources.html)

# Testing



- What's new?
- What's revised?
- Why is this important?

# Evidence-Based Study and Testing



- An estimated 2,000 seniors participate in Project Healthy Bones each year for past 10+ years.
- To sustain and grow, PHB needs to be recognized as evidence-based.
  - Effective
  - Tested
  - Published
  - Translated
  - Materials



# Evidence-Based Study and Testing



- The steps needed for certification include:
  - Gathering information about participants (creating a database)
  - Tracking performance
  - Tabulating results
  - Publishing an article in a peer-reviewed journal

# Evidence-Based Study and Testing



- NJ DHS, the ICO, and faculty members from Rutgers University will provide support for the research and publication
- Your role as lead coordinators, peer leaders, and participants is to provide the data
- This information gathering is a short-term project
  - New classes and new participants only

# Evidence-Based Study and Testing



- We will be using the following tests to obtain certification:
  - Timed Up and Go
  - 30-Second Chair Stand
  - A Mini-Cognitive Test (may be needed in future, not now)
- Other documents that will be used:
  - Medications List
  - Calcium Diary
  - Action Plan
  - Participant Summary

# Timed Up and Go Overview



- This test, completed at Session 1 and Session 24, is designed to measure mobility, strength, gait, and balance
- To perform the test, you will need:
  - A chair with a straight back (seat 17-18” high)
  - A stopwatch
  - Tape (to mark floor 10 feet in front of the chair)
  - 15 feet of clear floor space

# Timed Up and Go Instructions



- **Instructions to the Participant:** “When I say “Go,” I want you to stand up, walk to the line on the floor at your normal pace, turn, walk back to the chair at your normal pace, sit down again.”
- **Start timing on the word “Go” and stop timing after the participant has sat back down**
  - If using an armchair, instruct participant not to use the arms to rise or sit. If they must, make a note on the Participant Summary Form.
- **Log the results on the Participant Summary Form**
- **Have one leader be timer/recorder and another give instructions and ensure test is done correctly, safely**

# 30-Second Chair Stand Overview



- This test, completed at Session 1 and Session 24, is designed to measure leg strength and endurance
- To perform the test, you will need:
  - A chair with a straight back (seat 17-18” high)
  - A stopwatch



# 30-Second Chair Stand Instructions



- **Instructions to the Participant:** “Sit in the middle of the chair. Place your hands on the opposite shoulder, crossed at the wrists. Keep your feet flat on the floor. Keep your back straight and keep your arms against your chest. On “Go,” rise to a full standing position, then sit back down again. Repeat this for 30 seconds.”
- Count the number of times the participant comes to a full standing position in 30 seconds and log the results on the Participant Summary Form
- Have one leader be timer/recorder and another give instructions and ensure test is done correctly, safely

# Mini Cognitive Test Overview



- Included in the new manual to support research but not needed at this time.
  - Used to ensure participant is competent to give consent
  - Checks memory and the ability to follow directions
  - Mini-Cog is meant to protect, not exclude participants



# Documentation/Forms



- What's new?
- What's revised?
- Why is this important?

# Action Plan



- Helps participants focus on improving bone health and minimizing falls
- Participants complete daily as they accomplish these tasks, turn in at Session 24
- Give to lead coordinator at end of program

Participant Completes Daily; Collect at Session 24

## Project Healthy Bones Action Plan

Name/Identifier: \_\_\_\_\_ Date: \_\_\_\_\_

During the education portion of Project Healthy Bones, you will be asked to visit a variety of health care providers, and you will learn about various questions to ask these providers. Please place a check mark next to each follow-up action item that you complete. Please return this form to your peer-leader before the last class.

### Visits to Healthcare Providers

- I talked with my doctor about osteoporosis and/or the medications I take for osteoporosis and other diseases.
- I discussed my medications with my pharmacist.
- I had my foot health checked by a podiatrist.
- I had my vision checked by an optometrist or ophthalmologist.
- I had my hearing tested by an audiologist or hearing technician.

### Changes Made to Improve Bone Health and Reduce the Risk of Falling

- I stopped/modified medications that may weaken my bones or increase my fall risk.
- I started taking a medication for osteoporosis.
- I had a DXA scan (my results were \_\_\_\_\_).
- I had my vitamin D concentration tested (my concentration was \_\_\_\_\_).
- I am eating more calcium-rich foods.
- I started taking a calcium supplement or changed how I take one.
- I added a vitamin D supplement or changed how I take one.
- I drink more water to improve hydration.
- I changed how I care for my feet (ex: seeing a podiatrist regularly; proper footwear).
- I changed how I care for my vision and hearing (ex: yearly check-ups; wearing glasses/contacts if needed; wearing a hearing aid if needed; etc.).
- I made changes in/around my home to make it safer and decrease my risk of falling.
- I move more safely (ex: minimizing forward bending movements; posture; etc.).

# Medication List



- Helps participants and providers monitor benefits and side effects, if any
- Used to compare medications/supplements taken before and at the completion of the program
- Participants complete at Session 1 and Session 24

*For Participant Use Only at Last Session*

## List of Medications and Supplements

Name/Identifier: \_\_\_\_\_ Date: \_\_\_\_\_

Please list the medications you are taking, including vitamins, supplements, and herbals. Keep a copy for yourself as a reference and bring a copy with you when you see your doctor or pharmacist to determine if any of your medications increases your risk for a fracture or bone loss.

Medication:	Dosage:	Reason for Taking:

# Calcium Diary



- Helps participants calculate the amount of calcium in their diet
- Participants complete at Session 3 or 4, then again in Session 23
- Discuss the results in class and enter in Participant Summary

Participant Completes at Session 3 or 4

### Calcium Diary

Name/Identifier: \_\_\_\_\_ Date: \_\_\_\_\_

**Directions:** Record the calcium in your meals for three days. This will help you estimate your average calcium intake. For help regarding calculations, please refer to the last page of the diary. **Do not include vitamins or supplements until the end.**

Breakfast	Amount	Calcium (mg)	Lunch	Amount	Calcium (mg)
<b>Breakfast Total</b>			<b>Lunch Total</b>		

Dinner	Amount	Calcium (mg)	Snacks	Amount	Calcium (mg)
<b>Dinner Total</b>			<b>Snack Total</b>		

**Total Calcium for Day One:** \_\_\_\_\_  
*(add breakfast, lunch, dinner, and snack totals)*

**DAY ONE**

### Calcium Diary Summary

Name/Identifier: \_\_\_\_\_ Date: \_\_\_\_\_

**Total Calcium Over Three Days**

Day One Total \_\_\_\_\_

Day Two Total \_\_\_\_\_

Day Three Total \_\_\_\_\_

**3-Day Total** \_\_\_\_\_ *(add Day One, Day Two, and Day Three totals)*

**Average calcium per day** = \_\_\_\_\_ *(divide your "3-day total" by 3)*

**If you take a calcium supplement, list the milligrams and when you take it (with meals or not).**

Calcium: \_\_\_\_\_

Vitamin D: \_\_\_\_\_

**NOTE:** To calculate calcium in milligrams, take the percentage of calcium on the food label (e.g. 20%) and add a zero to get 200 mgs per serving. If you do not have the information, we will review in class.

**NOTE:** When calculating calcium from your food, pay attention to the serving size. If you eat more or less than the serving size, calculate by proportion size. For example, if 1 cup of milk has 300 mg. of calcium, but you drink only half a cup, the amount of calcium in half a cup is 300 mg. divided by 2, or 150 mg. calcium. Make sure to record the amount that you eat for an accurate measurement.

# Participant Summary



- Captures information about participants' health and current exercise level, as well as testing results
- For accuracy, completed by Peer Leaders
- New: Chair Stand, TUG, Calcium split, Falls data

PL Collects at Session 24

## Participant Summary Form

Name/Identifier: \_\_\_\_\_ Date: \_\_\_\_\_

Participant Age at Session 1: \_\_\_\_\_ Participant Age at Session 24: \_\_\_\_\_

Site: \_\_\_\_\_ Total Sessions Attended: \_\_\_\_\_

<b>Balance Test:</b> <i>Record # of Seconds</i>	<b>Session 1</b>	<b>Session 24</b>
Right Foot		
Left Foot		
<b>30-Second Chair Stand Test</b>	<b>Session 1</b>	<b>Session 24</b>
Number of Times Stood Up in 30 Seconds		
<b>Timed Up and Go (TUG) Test</b>	<b>Session 1</b>	<b>Session 24</b>
Time to Rise, Complete Walk, and Sit Again		
<b>Strength Exercises:</b> <i>Record Weight</i>	<b>Session 5</b>	<b>Session 24</b>
Seated Leg Lift		
Side Leg Lift		
Back Leg Lift		
Arm Curl		
Shoulder Rotation		
Shoulders Back		
Arms Forward and Back		
<b>3-Day Calcium Challenge Diary</b>	<b>Session 4</b>	<b>Session 24</b>
Average Daily Calcium from Food		
Average Daily Calcium from Supplements		
<b>Falls Data</b>	<b>Sessions 1-12</b>	<b>Sessions 13-24</b>
How Many Falls Occurred		

# Forms and Reporting



- Two Categories of Forms:
  - Those that help you organize your class
  - Those that contain information for and about your participants
    - ✦ All of them are simple, and only need to be done when a new class begins or when a new participant joins an established/on-going class
- This paperwork is vital for the future of PHB and our goal of obtaining national recognition as an evidence-based disease prevention and health promotion program
  - Accurate records are the means of proving that Project Healthy Bones is effective and of helping the program grow

# Organizational/Optional Forms



- Participant Forms:
  - Home Exercise Log

Participant Completes Weekly

### Home Exercise Log

Name/Identifier: \_\_\_\_\_

Week	1	2	3	4	5	6	7	8	9	10	11	12
Date												
Did You Fall This Week?												
<i>Posture: Put a checkmark when completed</i>												
Deep Breathing												
Head Tall												
Standing Back Bend												
Chest/Shoulder Stretch												
<i>Balance: Put Level 1 or 2</i>												
Weight Shifting												
4-Step Square												
Chair Stand												
Heel Raise												
Toe Raise												
Reverse Leg Raise												
Tandem Stand												
Tandem Walk												
Waiter's Walk												
<i>Strength: Put number of pounds used</i>												
Seated Leg Lift												
Side Leg Lift												
Back Leg Lift												
Arm Curl												
Shoulder Rotation												
Shoulders Back												
Arms Forward and Back												
<i>Stretch: Put a check mark when completed</i>												
Calf												
Quadriceps												
Overhead												
Shoulder												
Neck												

- Peer Leader Forms:
  - Participant Form Checklist

### Project Healthy Bones Participant Form Checklist

Site: \_\_\_\_\_ Date: \_\_\_\_\_

Participant Name/Identifier	Medical Approval	Release Form	1 <sup>st</sup> Session Survey	Medication List (Session 1 & 24)	Calcium Diary (Session 4 & 23)	Last Session Survey	Action Plan	Participant Summary
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								
16.								
17.								
18.								
19.								
20.								

# Required Forms



- **Peer Leader Forms:**
  - Program Information Form
  - Class Cover Sheet
  - Registration Form for Peer Leaders and Participants
  - Attendance Record



# Required Forms



- **Participant Forms:**
  - Medical Approval to Exercise
  - Participant Agreement and Release
  - First Session Survey
  - Class Exercise Log
  - Calcium Diary
  - Last Session Survey
  - Project Healthy Bones Action Plan
  - Participant Summary
  - List of Medications and Supplements (new classes only)

# Submitting the Forms



- **Send the Following Forms to DHS:**
  - Class Cover Sheet
  - Attendance Record
  - First Session Survey
  - Last Session Survey
  - List of Medications and Supplements (New Classes Only)
  - Calcium Diary
  - Project Healthy Bones Action Plan
  - Participant Summary
  
- **Send To:**
  - NJ Department of Human Services
  - Division of Aging Services
  - (Mail) P. O. Box 807, Trenton, NJ 08625-0807
  - (Delivery) 3444 Quakerbridge Plaza Drive, Bldg.12 D
  - Mercerville, NJ 08619
  - ATTN: Heather Taylor, PHB Coordinator



# Privacy Concerns



- Keep the paperwork in a secure folder or box at your site, or bring the records with you to each class
- When papers are turned in to DHS, each participant will be assigned a randomized, computer-generated code, names will be removed and data will be shared with researchers
  - If participants or your agency do not wish to provide names, use an alternate name/nickname/code on the forms
  - Whichever is used, be consistent on all forms, including the Attendance Record

# Final Note on Forms and Reporting



- At the end of the 24-week program, please submit required forms to your lead coordinator, who will then forward to the NJ Department of Human Services, Division of Aging Services
- It will be put into a statewide database to track outcomes
- Keep your forms organized and neat so that data entry is easily understandable
- If you have questions or need assistance, ask your lead coordinator for help



# Program Fidelity



- Leading the program as designed vital to research and to consistent outcomes for all PHB participants
  - Use latest manuals – 2018 versions
  - Include education in every session
  - Lead exercises as explained in the manuals
    - ✦ Never add an exercise or improvise existing ones
  - Use manuals and weights in class
    - ✦ Keep a set of manuals and weights at class location if cost a factor
- Fidelity shared responsibility of DoAS, Lead Coordinators and Peer Leaders

# Website Resources



- **PHB Website:**
  - [www.state.nj.us/humanservices/doas/home/phbresources.html](http://www.state.nj.us/humanservices/doas/home/phbresources.html)
  - We will update periodically, so please use this site as a resource for your classes, as well as for any updates to PHB
- **Osteoporosis Website:**
  - [www.state.nj.us/humanservices/doas/healthy/osteoporosis/](http://www.state.nj.us/humanservices/doas/healthy/osteoporosis/)
  - You can find information about osteoporosis and the ICO
- **National Osteoporosis Foundation (NOF) Website:**
  - [www.nof.org](http://www.nof.org)
  - The National Osteoporosis Foundation has several resources on their website that you can use, as well as the most current osteoporosis information available

# DoAS Contacts



Heather Taylor

609-438-4798

E-Mail: [Heather.Taylor@dhs.state.nj.us](mailto:Heather.Taylor@dhs.state.nj.us)

Andrew Biederman

609-438-4797

E-Mail: [Andrew.Biederman@dhs.state.nj.us](mailto:Andrew.Biederman@dhs.state.nj.us)

Dennis McGowan

609-438-4495

E-Mail: [Dennis.McGowan@dhs.state.nj.us](mailto:Dennis.McGowan@dhs.state.nj.us)



Q&A



Thank You for Attending!

