

Contents

Foreword	3
Background	4
Section 1: Introduction to 'Care about physical activity' 1.1 Introduction to the good practice resource pack 1.2 Introduction to physical activity in care homes 1.3 How can you make improvements?	7 7 8 13
Section 2: Physical activity self assessment tool and how to use it 2.1 Using the physical activity self assessment tool 2.2 The physical activity self assessment tool	16 16 19
Section 3: Principle descriptor and tools 3.1 Principle A: Physical activity participation 3.2 Principle B: Organisational care home culture and commitment 3.3 Principle C: Community connections and partnerships	28 28 30 31
Section 4: Tools and useful information 4.1 Tools 4.2 List of tools 4.3 Useful information	33 33 33 34

Foreword

The wide range of physical and psychological benefits of physical activity for older people is well established, yet building regular activity into the lives of residents in care homes remains a significant challenge for us all.

'Care... about physical activity' has been developed by the Care Inspectorate in partnership with the British Heart Foundation National Centre for Physical Activity and Health at Loughborough University to support those who work in the care sector to make physical activity part of every resident's daily life.

Based on the World Health Organization model of 'Health Promoting Settings', this resource provides principles and a self-improvement framework for care homes. It is designed to stimulate simple solutions and practical approaches to enable all residents to choose to be active every day.

We would like to thank everyone who has contributed to developing this resource pack. We hope that 'Care... about physical activity', through the key principles, promotes and supports the integration of health and social care and becomes a valuable tool for those looking to improve the quality of life for residents in care homes.

Annette Bruton Chief Executive Care Inspectorate Jacqui Lunday Johnstone Chief Health Professions Officer Scottish Government Elaine McNish Director BHFNC



Background

There is a lot of research about the wide range of health and wellbeing benefits from physical activity for older people. Research also tells us that there is a steady decline in activity with increasing age and frailty. This has a huge impact on an older person's quality of life, where they may, in time, not be able to maintain their independence or carry out simple activities in daily life, such as rising from a chair. Often, older people just need the opportunity or the support to be more active and to engage in activities on a daily basis.

Promoting physical activity can support care homes to meet some of the National Care Standards. During the inspection process the Care Inspectorate takes account of the National Care Standards. These are based on a set of principles that recognise that services must be accessible and suitable for everyone who needs them. The principles are dignity, choice, safety, realising potential and equality and diversity. This resource can help services to evidence that they are working towards meeting some of the standards that relate to Lifestyle – social, cultural and religious belief or faith (12/4), Keeping well – healthcare (14/7) and Daily life (17/1/4/7) (see **Tool 5**).

This resource offers support for everyone in a care home to get involved and become physically active in different ways and not just through formal exercise sessions. This bespoke physical activity resource for care homes in Scotland is a key objective of the Go For Gold Challenge Scotland Programme.

What is the Go for Gold Challenge Scotland Programme?

The Go for Gold Challenge Scotland Programme was established in 2012 to involve professionals and residents in the care sector in the legacy celebrations offered by the London Olympic Games and the World Congress on Active Ageing in Glasgow, both staged in the summer of 2012 and the 2014 Commonwealth Games (also in Scotland).

The Go for Gold Challenge Scotland Programme aims to:

- promote and celebrate participation in physical activity among older people supported by the care sector
- build capacity in the care sector workforce to promote physical activity with older people on a daily basis
- develop links between the care sector and physical activity organisations in Scotland
- contribute towards the 2014 Glasgow Commonwealth Games Legacy.

The Go for Gold Challenge Scotland Programme is supported by a stakeholder network group made up of interested and motivated people from different backgrounds and across all sectors; and a strategic reference group which includes organisations from across Scotland.

In 2012 and 2013, the Go for Gold Challenge Scotland Programme invited a range of organisations in the care sector to take part in one of these challenges:

- games challenge events
- walk with me challenge events
- dance with me challenge events
- tri-athlon challenge events
- create your own activity challenges.

An increasing number of care settings and older people took part in the challenge events over the past two years. As a result, many have been inspired and motivated to be more active on a daily basis.

The Go for Gold Challenge Scotland Programme continues to work with the care sector and partners through a programme of further activities and challenge events, building towards increased participation and support for the 2014 Glasgow Commonwealth Games Legacy Plan.



Section 1: Introduction to 'Care... about physical activity'

1.1 Introduction to the good practice resource pack

We have developed this important resource to support national and local organisations to promote physical activity in care homes. A group of key representatives and experts from across all sectors were involved in the development of the resource pack.

The resource pack includes:

- 1. A booklet with:
 - an introduction to the resource, an introduction to physical activity in care homes and how to make improvements
 - · the physical activity self assessment tool and guidance for its use
 - a description of the three key principles to promote physical activity.
- 2. A DVD to support implementation of the resource pack.
- 3. Make Every Move Count a pocket quide to active living.
- 4. A call to action poster.
- 5. Physical activity and self assessment tools.

An app will be available to download which will provide education and awareness for everyone and support the implementation of this resource.

We have designed this resource pack to support you to make improvements in your service in this area of care, and also, importantly, to acknowledge what works well and enables your residents to be more physically active.

You can use this resource pack:

- during induction of new staff to promote the importance of physical activity
- to support training and education relating to good practice
- to support continual professional development
- to improve care and the health and wellbeing of your residents.

The care home manager or a senior member of staff should carry out the physical activity self assessment and decide, along with other staff, what improvements need to happen. Not all improvements can be made at once so it is important to prioritise your actions. All staff, in the care home, should be familiar with the resource and the planned improvements and understand the importance of being more active. This resource will only be effective if it is implemented in a way that meets the needs and choices of those living in a care home and all the staff are involved.

During the development of this resource pack, we tested components of it in care settings across Scotland. The valuable feedback helped shape this final resource.

1.2 Introduction to physical activity in care homes

Physical Activity – overarching key messages

- The evidence suggests the total amount of activity undertaken is the key to obtaining the benefits of physical activity rather than specific types of activity or combinations of frequency and intensity.
- For residents, this can be achieved by accumulating short but regular bouts of physical activity and, with improved confidence, firstly increasing the duration and then the intensity as and when appropriate.
- The addition of strength and balance activities will bring increased benefits related to independence and mobility.

Most importantly, the benefits of physical activity outweigh the risks. What is physical activity and why is it important for residents in care homes to be active?

Physical activity is described as "any body movement produced by the skeletal muscles that results in a substantial increase over resting energy expenditure." (Bouchard C, Shepherd RJ)

The **needs of the individual** are the starting point for promoting physical activity and encouraging residents to be more active. It is best not to be prescriptive about what physical activities are appropriate for residents in care homes. Understanding individual interests and abilities, previous successful physical activity experiences and personal beliefs and expectations of others should inform personal choice on suitable activities. This is in addition to using a person centred care plan which includes the medical conditions of the individual as well as the views of other health, therapy and social care professionals.

A key to promoting physical activity is the way in which it can be **built** into the daily life of the care home such as using activities of daily living for example rising from a chair (assisted), walking and moving around the care home and making use of the outdoors. Being physically active is not the same as taking part in an organised exercise class or walking group, important as they are. It is about opportunities to move more often.

Key messages on physical activity

- Taking part in any amount of physical activity will provide some essential benefits to both physical and mental health.
- Some physical activity is better than none!
- Everyone should limit and break up the amount of time spent being sedentary (sitting).
- Physical activity should be built up gradually.
- Physical activity should provide a sense of enjoyment and purpose.
- Physical activity is everyone's business and everyone benefits.

Why is physical activity important?

Physical activity declines and sedentary behaviour increases with age. Physical function, mobility and the ability to perform activities of daily living also decline with age. There is strong evidence that regular physical activity can help to reverse some of the age-related decline in physical and psychological function and help to maintain independent living and mobility. Many of these benefits can still be achieved in later life even by the oldest and most frail including:

- maintaining cognitive function
- preserving physical function, mobility and independence
- engaging in opportunities for learning and new experiences
- improvements in quality and quantity of sleep
- maintaining higher levels of energy and vitality to enjoy later life
- lower levels of anxiety and depression, improved mood and self esteem
- engagement and interaction with others and the environment and
- reducing feelings of isolation and loneliness.

For those individuals with very limited mobility, including the frailest and those who spend long periods of time sitting, bouts of physical activity and movement that promote circulation will help to reduce the complications of immobility including:

- deep vein thrombosis (clotting)
- gravitational oedema (swelling of the legs caused by accumulation of fluid)
- contractures (thickening of the joint tissues leading to deformity)
- pressure sores
- faecal impaction (severe constipation)
- obesity.

How much physical activity should residents do?

The UK Chief Medical Officers recently published recommendations on physical activity and for the first time this guidance has included older adults 65+.

The guidelines can be summarised as:

- break up the pattern of sedentary (sitting) behaviour
- do some physical activity every day
- accumulate regular bouts (10 minutes) of physical activity
- undertake some strength and balance activities at least twice a week.

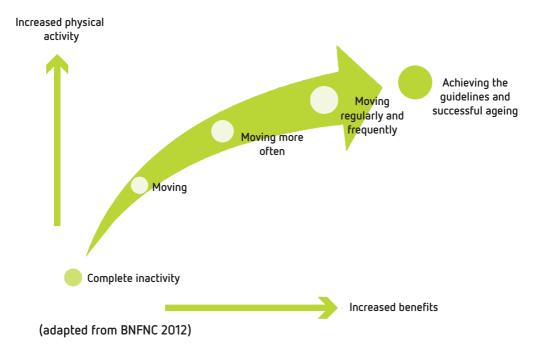
The guidelines apply to all older adults 65+ and they pose a significant challenge for people living in care homes, and also those who work with them. When as much as 80% of a resident's waking time may be spent sitting and physical activity may be a thing of the past, or something that they do not see as important, this can be difficult, but not impossible.

The diagram on page 12 suggests that increasing physical activity can be a step by step, incremental approach. The steps being moving, moving more often and moving regularly and frequently.

- **Moving** such as standing up from the chair several times a day, moving in bed, brushing teeth, and washing face.
- Moving more often such as walking to the dining room each meal time, walking to rooms to collect an item.
- Moving, regularly and frequently such as going outside, setting the tables for meals, sorting laundry, feeding the birds and doing meaningful and purposeful activity.

These activities can be enhanced by group based activities which will provide additional benefits and opportunities such as maintaining social connections.





What about the benefits and risks of physical activity?

Evidence tells us that continuing with an inactive lifestyle and prolonged periods of sedentary (sitting) behaviour presents greater health risks than gradually increasing physical activity levels. **Those who are the least active have the most to gain from taking part** even with small increases of regular physical activity. If residents gradually increase the amount and/or intensity of their physical activity, they are unlikely to face undue risks. The risks associated with taking part in physical activity are minimal for most individuals including residents in care homes.

Evidence suggests frailer, older people themselves feel concerned about over-exertion and causing harm to themselves. Additionally, while being physically active, the fear and risk of falls may be further exaggerated. However, an individual care plan should indicate the extent to which a resident can be encouraged to move independently, walk or be active with support and/or supervision from someone or a walking aid. When recommending physical activity to residents, it is important to consider

any long term medical conditions they may have and how this impacts on their ability to be more active. Focusing on and building upon what an individual can do, and enjoys doing, should always be the aim.

Key messages on the benefits of physical activity

- Physical activity helps to maintain physical function, activities of daily living, mobility and independence.
- Physical activity maintains social connections.
- Physical activity can reduce the risk of falls or harm from falls.
- Physical activity will help to reduce the complications of immobility.

1.3 How can you make improvements?

What are the must dos?

Successful, effective and sustainable improvements in promoting physical activity are based upon a "whole setting" or "whole system" approach (World Health Organization (WHO) 1986). The settings approach has roots in the WHO Health for All Strategy and, more specifically, the Ottawa Charter for Health Promotion.

"Health is created and lived by people within the settings of their everyday life; where they learn, work, play, and love." The Ottawa Charter (1986)

This approach recognises three key principles for promoting physical activity in the care sector. Each principle has three areas for improvement (Diagram 1).

Diagram 1. Key principles and areas for improvement (see Section 3, page 28 for a full description)



One very important component to making these improvements is the culture within the care home and the need for everyone to role model a positive attitude towards physical activity. If staff and those who visit the care home adopt a positive approach towards being active themselves, not only will this support and reinforce positive behaviours, but also contribute towards the health of all those who are a part of the care home community.

What are the good to dos?

The principle challenge for those in care homes (residents and staff alike) is to build on the successes of current work and find ways to improve. This may be by moving from participating in annual physical activity challenge events to participating in daily physical activity. Or starting at the very beginning and making physical activity a daily priority in a care setting.

This can be achieved by thinking about how to change:

frequency – from annual events through monthly and weekly programmes to daily physical activity organisation – from structured and organised events through organised teacher and leader led programmes to supported choice purpose – from raising awareness and profile through planned programmes to lifestyle habits and routine.

This challenge should not exclude or discard previous events, programmes and activity choices but instead, look at ways to enhance choice, interest and opportunity and contribute to meeting the overall challenge of increasing daily physical activity for everyone in a care home.

Key messages on putting it into practice

- Physical activity can be increased by providing accessible, convenient and personal choices.
- Physical activity can be increased when people feel safe and trust those supporting them.
- Motivation to be more active increases by having a sense of purpose, relevance or reason to move.



Section 2: Physical activity self assessment tool and how to use it

2.1 Using the physical activity self assessment tool

What does the physical activity self assessment tool look like?

The physical activity self assessment tool (page 19) is based on three key principles.

The three key principles are:

- A. Physical activity and participation.
- B. Organisational care home culture and commitment.
- C. Community connections and partnerships.

There are three improvement areas within each principle. These are the essential areas for you to consider when promoting physical activity in your care setting. (See diagram 1 on page 14)

Each improvement area has a **standard statement** which tells you what it should look like in your care home if you are meeting the standard for an improvement area fully.

There are columns available for you to enter a tick at yes if you are meeting the standard statement, a tick at no if you are not and a space to enter what you are doing to work towards making improvements in a particular area.

The last column of the physical activity self assessment tool gives some examples of evidence.

What is the purpose of the physical activity self assessment tool?

The physical activity self assessment tool enables you to identify the level of commitment there is in your care home to promote physical activity. It does this by examining the processes and working practices that take place under each of the three key principles and subsequent areas for improvement.

It will help you to:

- identify areas of good practice and what is working well now
- consider what improvements can be made.

Who should complete the physical activity self assessment tool?

The manager of the care home and/or a senior member of staff should complete the physical activity self assessment tool and agree together whether a standard statement is being met or not, or if you are working towards it. It is also helpful to consider in what way you can evidence how you are working towards the standard statement. Staff should be fully aware that the self assessment process is taking place. It can be helpful to discuss the findings with them and agree together, as a team, how improvements can be made.

How do I use the physical activity self assessment tool?

Step 1: Complete all three sections of the assessment tool

Each section (A, B and C) must be completed. However, you may not wish to do this all at the same time. Prioritise what section (A, B or C) you need to complete first so that it is not too overwhelming. All principles and improvement areas are important and all standard statements are achievable

There are columns available for you to enter a tick at yes if you are meeting the standard statement, a tick at no if you are not, and a space to enter what you are doing to work towards making improvements in a particular area.

Sign and date the physical activity self assessment tool and make a date to review it as this should be a continual improvement process.

Step 2: Complete the action plan

Once you have completed the physical activity self assessment tool list all the areas where you have identified a need for improvement and record them in order of priority on the action plan (Tool 4). It can help to discuss this with your team so that each person takes responsibility for achieving the required improvements. Note the improvement action required, when

it is to be completed and who is responsible for this action. Once you have done this, and the action is completed, it is very important to note the outcome and a review date.

Some tools and helpful information are provided in the resource pack. This should help you to decide on what you may need to do next to make any improvements required.

Step 3: Review your action plan regularly and keep it updated as work progresses

How often should I repeat or review the physical activity self assessment?

You should carry out the physical activity self assessment annually; however in some cases you may wish to repeat it sooner if you feel it is appropriate. You may find it helpful to compile a resource folder in line with the physical activity self assessment tool headings and include examples of evidence for information.

There is an A4 master version of the physical activity self assessment tool available in this resouce pack.

2.2 Physical activity self assessment tool Principle A. Physical activity participation

Area for Improvement A1: Voices and choices

Standard statement	Yes	Working towards (document what you have achieved so far)	Š	Examples of evidence
Residents have physical activity choices documented in their care plans; they are regularly reviewed and show that they are enabled to take part in daily life as they would choose.				Choices and outcomes are written in resident care plans. Physical activity plans are updated at formal reviews and as appropriate.
				Residents (where appropriate) are able to say they are enabled to be physically active.

Area for Improvement A2: Promotion

		Working towards		
Standard statement	Yes	achieved so far)	9	Examples of evidence
All staff understand the importance of daily physical activity and encourage residents, at every opportunity, to be more active in a way that meets their needs, choices and has a clear purpose.				Visible signs of physical activity promotion (going outside, walking supported or unsupported, standing more often, spontaneous activity). Physical activity care plans. National Care Standards 12/4.

Area for Improvement A3: Everyone's business

		Working towards		
Standard statement	Yes	achieved so far)	No	Examples of evidence
Physical activity is valued and is a commitment for everyone				Range and frequency of opportunities for residents.
who is part of the care home community such as relatives,				National Care Standard 12/4.
staff, friends and others.				Staff can explain when asked why physical activity is important.
				Residents and staff actively ensure that residents do not sit for long periods in the day.
				Staff, relatives, friends and others participate in physical activity.
				Staff, relatives, friends and others have opportunities to discuss physical activity and engage in it through various groups/forums.
				Residents and staff have the opportunity to access resources in the local community.

Principle B. Organisational care home culture and commitment

Area for Improvement B1: Leadership, management and support

		Working towards (document what you have		
Standard statement	Yes	achieved so far)	No	Examples of evidence
Management provides leadership and support to promote physical activity.				Physical activity is part of the organisation's mission statement and values are incorporated in: • the recruitment process • induction • CPD • supervision • appraisal • policies, protocols and procedures. Evidence in staff meetings/ forums that managers are leading by example.

Area for Improvement B2: Enabling environments (both inside and out)

	:	Working towards (document what you have		
Standard statement	Yes	achieved so far)	9	Examples of evidence
The environment facilitates an active lifestyle to take place by being appropriate for the needs and choices of the residents, staff and those in the care home community.				Risk enablement policy in place for physical activity. Where required, appropriate resources are easily accessible for all, for example coats near the door, sun tan lotion, benches in gardens and walking routes. Staff and others have the opportunity and are encouraged to be creative in line with resident choices. National Care Standards

Area for Improvement B3: Staff training and support

		Working towards (document what you have		
Standard statement	Yes	achieved so far)	No	Examples of evidence
Training is available for staff to raise awareness of the honefits of physical activity				Staff have an awareness of benefits of physical activity if asked.
and ways to enable residents to be active.				Training in enabling physical activity and reducing sedentary behaviour is taking place.
				Evidenced in PDPs, supervision, induction etc.
				A health promoting environment is evidenced throughout the care home on a daily basis —opportunities, posters, active daily life etc.

Principle C. Community connections and partnerships

Area for Improvement C1: Advice, guidance and planning

Standard statement	Yes	Working towards (document what you have achieved so far)	S S	Examples of evidence
Connections have been made with accessible local services and organisations to provide specific advice, guidance and support to promote physical activity.				Key local partners have been identified such as: • health promotion leads • voluntary sector organisations • community facilities • physical activity coordinators Evidence of regular partnerships taking place.

Area for Improvement C2: Access to places and spaces

		Working towards (document what you have		
Standard statement	Yes	achieved so far)	No	Examples of evidence
The care home is aware of what local places and spaces are available to support people to be more active on a daily basis				Community partnerships in place that extend physical activity opportunities.
and makes use of the available opportunities.				Local directory has been developed and is regularly updated.
				National Care Standards 14/7.17/7
				Information is available and updated regularly on local services, opportunities and facilities to support residents to be physically active.

Area for Improvement C3: Families, friends, volunteers and others

		Working towards (document what you have		
Standard statement	Yes	achieved so far)	No	Examples of evidence
It is seen as everyone's business to be physically active and to support people to do so. Family, friends, volunteers and others are actively supported to engage in physical activity opportunities.				Promotional materials are available that illustrate organisational commitment towards physical activity (see poster in the resource pack). Evidence that the care home contributes to the local community. Evidence of intergenerational practice. Evidence of activities taking place that include the wider community. Evidence of solunteer involvement in care home.

Section 3: Principle descriptor and tools

3.1 Principle A: Physical activity participation

Introduction

This section refers to good practice relating to older people having the choice and the opportunity to take part in physical activity on a day to day basis. It also stresses that staff knowledge and understanding about the importance of physical activity participation is crucial, helping them to see that there are opportunities in the everyday activities of life to become more physically active. Every human interaction and intervention provides that opportunity for everyone to be more active. Make Every Moment Count (MEMC) is an initiative which links with this principle and focuses on person centred care. It provides five key messages and prompts to support everyone to enable people to be active and live life as they would wish.

MEMC can be found on the Care Inspectorate's website at http://cinsp.in/1dy7LGf

This also Inks with the Make Every Move Count initiative in this resource pack.

A1. Voices and choices

Residents have physical activity choices documented in their care plans. These are regularly reviewed and show that residents are enabled to take part in daily life as they would choose.

Voice – being involved, listened to, engaged and consulted.

Choice – staff have a good understanding of resident's choices and there are increased opportunities for people to be active.

Care plans – reflecting that physical activity is integral to daily life for all in the care home and part of their care process.

A2. Promotion

All staff understand the importance of daily physical activity and encourage residents at every opportunity to be more active in a way that meets their needs and choices with a clear purpose.

Importance – the range of benefits for residents, staff and others. **Encourage residents** – encouragement and support to be active. **Daily** – residents should have the opportunity be active every day and participate fully in life.

A3. Everyone's business

Participation in physical activity is valued and is a commitment for everyone who is part of the care home community such as relatives, staff, friends and others.

Valued – the benefits are for everyone and this is understood. **Commitment** – leading by example throughout and is the culture of the care home.

Everyone – who lives, works and contributes to the life of the care home.

Tools

- A 1 Individual care plan and physical activity **Tool 6**
- A2 Recognising individual achievement **Tool 3**
- A 2,3 The National Care Standards what about evidence? Tool 5
- A2 Promotion case studies **Tool 7**
- A3 Know your friends **Tool 1**



3.2 Principle B: Organisational care home culture and environment

Introduction

This section refers to good practice relating to processes, policies and procedures within the care home and the very important requirement from managers to demonstrate commitment and leadership, and to be a role model for promoting physical activity. It is vital that all those who are part of the community of the care home understand the benefits and the impact physical activity can have. The whole environment plays a huge part in facilitating physical activity and this includes the building itself, the outside and the social and spiritual aspects of the environment.

B1. Leadership, management and support

Management provides leadership and support to promote physical activity.

Management – embed this as integral to the life of the care home. **Leadership** – show commitment and be an active role model. **Support** – for everyone, enabling decisions and actions.

B2. Enabling environments (both inside and out)

The environment facilitates an active lifestyle to take place by being appropriate for the needs and choices of the residents, staff and those in the care home community.

Environment – the total environment not just the building. **Appropriate** – identifying needs and enabling choices. **Community** – residents, staff, friends, family, local community and others.

B3. Staff training and support

Training is available for staff to raise awareness of the benefits of physical activity and ways to enable residents to be active.

Training – for everyone to play their part.

Benefits – can be achieved by everyone.

Enable – support for everyone to be active in their own way. Enable support for everyone to be active in their own way.

Tools

- B1 Make Every Moment Count and Make Every Move Count initiatives can be used to form a mission statement.
- B2 The National Care Standards what about evidence? **Tool 5**.
- B2 Risk enablement **Tool 2**.
- B3 DVD and APP available for training.

3.3 Principle C: Community connections and partnerships

Introduction

This section refers to good practice relating to community engagement and the importance of having relevant, up to date information on local connections, partnerships and resources. It is important to seek out and work in partnership with the wider health, social care and local authority partners as well as other sectors.

C1. Advice, guidance and planning

Connections have been made with accessible local services and organisations to provide specific advice, guidance and support to promote physical activity.

Local services – find out who they are and build a directory. **Advice, guidance and support** – providing the knowledge and skills. Physical activity – a wider range of opportunities and community engagement.

C2. Access to places and spaces

The care home is aware of what local places and spaces are available to support people to be more active on a daily basis and makes use of the available opportunities.

Aware – what's on, where and when? **Local services** – getting out and about. Available facilities – gaining from and contributing to the community.

C3. Families, friends, volunteers and others

It is seen as everyone's business to be physically active and to support people to do so. Family, friends, volunteers and others are actively supported to engage in physical activity opportunities.

Significant – physical activity is everyone's business. Others – the wider community, schools and voluntary services. **Supported** – enabled and encouraged to play a part.

Tools

- C1-Know your friends Tool 1
- C2 -Access to places and spaces Tool 8
- C 2,3 The National Care Standards what about evidence? Tool 5
- C3 -Active Ageing - www.active-ageing-events.org.uk
- Generations Working Together -C3 http://generationsworkingtogether.org/

Section 4: Tools and useful information

4.1 Tools

The tools in this resource pack are included to help you to make the identified improvements documented in the action plans as a result of completing the physical activity self-assessment process. They do not provide "one-size fits all" solutions, but highlight the key improvement areas that need to be addressed. Some for example, Tool 1 Know your friends, are provided as a specific check list for completion. Others for example, Tool 2 Risk Enablement, provide an outline of actions required, which may need to be interpreted for individual care homes. Elsewhere, the tools provide either broad guidance such as Tool 3 Recognising individual achievement and/or more detailed information such as Tool 5 The National Care Standards - What about evidence? The tools are here to help. Only use the tools if you feel they will be useful. You are not expected to use all the tools unless you decide it is necessary.

4.2 List of tools (these are at the back of this resource pack)

Physical activity tools

- Tool 1 Know your friends
- Tool 2 Risk enablement
- Tool 3 Recognising individual achievement
- Tool 4 Promoting physical activity in your care home
- Tool 5 The National Care Standards what about evidence?
- Tool 6 The individual care plan and physical activity
- Tool 7 Promotion case studies what could these look like?
- Tool 8 Access to places and spaces

Physical activity self assessment tools

- A1 Voices and choices
- A2 Promotion
- A3 Everyone's business
- B1 Leadership, management and support
- B2 Enabling environments (both inside and out)
- B3 Staff training and support
- C1 Advice, guidance and planning
- C2 Access to places and spaces
- C3 Families, friends, volunteers and others

4.3 Useful information

Here are some websites which may be helpful:

- CMO Physical Activity Guidelines www.gov.uk/government/publications/uk-physical-activityquidelines
- BHFNC Older people and physical activity information www.bhfactive.org.uk
- 3. Local information to support self- management http://aliss.org
- 4. Training for health and leisure professionals working with older people www.laterlifetraining.co.uk
- Social Services Knowledge Scotland www.ssks.org.uk/topics/care-for-older-people-portal.aspx
- 6. Centre For Policy On Ageing www.cpa.org.uk/index.html

- 7. EuroHealth Net Healthy Ageing www.healthyageing.eu
- 8. Inclusive Design For getting Outdoors www.idgo.ac.uk
- Generations Working Together http://generationsworkingtogether.org
- 10. Social Care Institute for Excellence www.scie.org.uk/topic/careservices/residentialornursingcare
- 11. Physical Activity and Health Alliance http://paha.org.uk
- 12. Active Scotland www.activescotland.org.uk
- 13. Make Every Moment Count http://cinsp.in/1dy7LGf
- 14. Care Inspectorate www.careinspectorate.com



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Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànain eile ma nithear iarrtas.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

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