The Postural Stability Instructor: Qualification in the UK for Effective Falls Prevention Exercise

Skelton DA, Dinan SW†, Laventure RM††, School of Nursing, Midwifery & Health Visiting, University of Manchester, Manchester, UK; e-mail: dawn.skelton@man.ac.uk † Royal Free and University College Medical School and Royal Free Hospital NHS Trust, London, UK; †† British Heart Foundation Centre for Physical Activity, Loughborough University, Loughborough, UK

Falls Prevention Exercise Provision, despite its predominance within the UK’s National Service Framework (NSFOG) for Older People (1) and the evidence for its beneficial effects to reduce falls both as a standalone intervention and as an integral part of a multifactorial falls intervention, is still widely divergent across the UK. Many of the guidelines for falls prevention suggest that exercise should be considered both as a rehabilitation technique (the 6-8 week programmes which run within the Hospital Setting by Physiotherapists) but also there should be long term community support strategies with specific balance training classes offered within the community setting (2,3,4). Community exercise programmes, both group based (5,6,7) and home based (8) have been shown to be effective but can the research be implemented safely and effectively? A further challenge to ensure a continuum of provision is to fill the current gap in physical activity provision between the Hospital-based rehabilitation setting and the much more active ‘senior’ exercise classes that can be found in community settings. The need for specialized exercise instructors to work with frail older adults has been addressed in a number of UK guidelines (9). The Department of Health funded the development of a specialist exercise training qualification for health and exercise professionals to help address this need. In the UK these specialists are now called Postural Stability Instructors (PSI) and have qualified in the “Exercise for the Prevention of Falls and Injuries Course. A number of falls prevention exercise services across the UK have been heralded as models of good practice by the NSFOG Implementation team.

One published comment on the course illustrates the usefulness of the course aims and objectives: “Our local Physical Activity Strategy now states that Primary Care Trusts, City and District Councils will only employ PSI instructors to lead classes for elderly frail fallers. Running a PSI course has broken down barriers between therapists and exercise instructors, forged new friendships and proved invaluable in developing an effective exercise continuum across health and leisure services in and around Cambridge, as part of a Falls Prevention Service.” The course aims to establish quality-assured service provision in community settings; enable consistency in communication, understanding of roles and sharing of skills between the professionals involved; improve access for this vulnerable group of participants by increasing frequency and flexibility of exercise programmes and encourage education about the benefits of exercise for reducing falls and injury among primary care professionals and lay people. Candidates, by the end of the course should be able to plan and deliver an exercise programme for frail older people, which will safely and effectively improve their physical function, and in particular their postural stability, in order to reduce their risk of falls. They will be able to support this practice with relevant background knowledge of the causes and consequences of falls and fall-related injuries; the evidence relating to physical activity, falls and fall-related injuries; the medical conditions and medications likely to be encountered and the adaptations to practice, programming and supervision of falls and injury prevention sessions. They will have the skills to provide safe, effective, enjoyable exercise programmes; graded transitions between the primary care and community leisure Settings; build on the functional gains achieved through physiotherapy and occupational therapy, ongoing assessment of health and functional capacity and social opportunities to increase long-term commitment to exercise.