

The Functional Fitness MOT test battery for older adults

Submission date 11/02/2016	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 11/02/2016	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 13/03/2023	Condition category Other	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

The Functional Fitness MOT is made up of a number of different physical function tests that help older people to see how fit they are when compared to their peers. It can be used to highlight a person's strengths and weaknesses and as a motivator to increase physical activity. This study is looking at whether using the FFMOT by the Edinburgh Community Physiotherapy Service will be acceptable to patients, and likely to result in health benefits by helping people become more active. This will be the first time the Functional Fitness MOT has been tested in a physiotherapy department. The FFMOT was devised by Glasgow Caledonian University to raise awareness of the benefits of physical activity and how fit one needs to be for independent living, for people aged 60 years and over. It involves six simple physical tests, for example walking and stretching, to assess how fit older people compared to what is considered normal for their age and sex. The test results will be used by the physiotherapy staff running the MOT to discuss with participants the types of activities which may help them to become more fit and active. They will also provide information about appropriate local activity opportunities and home exercise based on the FFMOT test results.

Who can participate?

Adults aged at least 60 who are not very active.

What does the study involve?

All participants are first asked to complete two questionnaires about their levels of physical activity. They then have the FFMOT. The participants are asked to fill in the two questionnaires again three months later to assess any differences in physical activity levels. They are also invited to attend focus groups 2-4 weeks after the FFMOT to discuss their experiences of taking part.

What are the possible benefits and risks of participating?

There is increasing evidence that regular exercise can have a health benefit. The FFMOT is a safe way of assessing participants exercise performance and the physiotherapy staff will monitor participants closely during the FFMOT session. All of the tests involve activities that people already do in their daily life. It is possible that participants will feel tired after the FFMOT session. Participants can always, at any moment, withdraw from the FFMOT tests or session. The

information from this study will provide useful information about a possible method of improving physical activity and quality of life for people 60 years and over who wish to become more active.

Where is the study run from?

The Slateford Medical Practice and Sighthill Health Centre, both in Edinburgh (UK)

When is the study starting and how long is it expected to run for?

January 2014 to June 2016

Who is funding the study?

Edinburgh and Lothians Health Foundation (UK)

Who is the main contact?

Prof. Dawn Skelton

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Contact information

Type(s)

Scientific

Contact name

Prof Dawn A. Skelton

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Additional identifiers

Study information

Scientific Title

Phase I feasibility study of the Functional Fitness MOT: engaging older patients of a physiotherapy service in healthier levels of activity

Study objectives

The main aims of this study are:

1. To assess whether the Functional Fitness MOT (FFMOT), provided in a healthcare setting, is appealing to older patients of a community physiotherapy service
2. To understand the views and perceptions of the older people undergoing the FFMOT regarding the intervention, and the views of the physiotherapy staff delivering the intervention

Secondary aims are to assess the feasibility of carrying out a phase 2 pilot randomised controlled trial of the FFMOT, in the context of a community physiotherapy service, by establishing whether enough patients can be recruited and retained in the study, and enough outcome data can be generated.

Ethics approval required

Old ethics approval format

Ethics approval(s)

1. NHS South East Scotland Research Ethics Committee 01, Scotland UK, 20/07/2015, ref: 15/SS/0118
2. NHS Lothian Research & Development Office, 03/08/2015, ref: 2015/0283

Study design

Phase I feasibility study

Primary study design

Interventional

Study type(s)

Quality of life

Health condition(s) or problem(s) studied

Physically inactive, medically stable older adults (60 years+)

Interventions

Participants will be asked to attend Slateford Physiotherapy Clinic (in Slateford Medical Centre) where the researcher will meet them to check that they are happy to proceed. If so, they will then guide the participants through the process of signing a consent form. They will then ask participants to complete a physical activity questionnaire (called CHAMPS) which gives information about how active participants have been in the past 4 weeks and takes about 20 minutes to complete. Participants will then be taken through to meet one of the Technical Instructors for the actual Functional Fitness MOT (FFMOT). The FFMOT test comprises of a set of six (out of the usual seven) standardised, validated, age-appropriate tests aimed at raising awareness of the different components of fitness. This includes, for example, walking and stretching, to assess how fit older adults are in relation to normal values for their age and sex.

The visit to the clinic that day will take no more than 1½ hours in total. After the FFMOT appointment participants will be asked to complete the same CHAMPS questionnaire, and another brief questionnaire about physical activity (which takes about 10 minutes to complete) three months after the FFMOT session. These follow-up questionnaires will be posted out to the participants so they can be filled in at home and sent back to the researcher in a pre-paid envelope.

In order to hear about people's experiences of the FFMOT in their own words the participants will be invited to attend a focus discussion group session. This will be led by a researcher, and will not involve any of the physiotherapy staff. The focus group will take place at Slateford Medical Centre, 2-4 weeks after the FFMOT session. The focus group will last no more than 1½ hours and will involve up to 12 people, all of whom will have attended for a FFMOT as part of this study. The researcher will record this discussion on an audio recorder to help with analysing the data. The audio recordings will be destroyed as soon as they have been transcribed.

Intervention Type

Mixed

Primary outcome(s)

Recruitment and retention rates at the key stages of the study

Key secondary outcome(s)

1. Physical activity, assessed by the CHAMPS physical activity questionnaire just before the FFMOT test and 12 weeks later
2. Physical activity, measured by a bespoke post-intervention questionnaire just before the FFMOT test and 12 weeks later
3. People's experiences of the FFMOT test, via focus group discussions 2-4 weeks after the FFMOT test
4. Semi-structured staff interviews

Completion date

01/06/2016

Eligibility

Key inclusion criteria

1. Aged ≥ 60 years
2. Not physically active for at least 30 minutes on five days or more, or for at least 150 minutes (2½ hours) in total in the past week, as indicated by the questions on the Scottish Physical Activity Screening Question
3. Interested in increasing their level of PA (where this is seen as an appropriate goal by the screening physiotherapist)

Participant type(s)

Healthy volunteer

Healthy volunteers allowed

No

Age group

Senior

Sex

All

Key exclusion criteria

1. Identification of health risks (contraindications to exercise; e.g. cardiovascular disease) which prevents participation
2. Diagnosis of moderate/severe cognitive impairment, a learning disability, severe mental illness, or the screening physiotherapist believes that any of these impairments/disorders are present

Date of first enrolment

05/10/2015

Date of final enrolment

15/02/2016

Locations

Countries of recruitment

United Kingdom

Scotland

Study participating centre**Slateford Medical Practice**

Department of Physiotherapy

27 Gorgie Park Close

Edinburgh

United Kingdom

EH14 1NQ

Study participating centre**Sighthill Health Centre**

Department of Physiotherapy

380 Calder Road

Edinburgh

United Kingdom

EH11 4AU

Sponsor information

Organisation

Glasgow Caledonian University

ROR

<https://ror.org/03dvm1235>

Funder(s)

Funder type

Research organisation

Funder Name

Edinburgh and Lothians Health Foundation (Reference number 10-338)

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are available upon request from Professor Dawn Skelton (dawn.skelton@gcu.ac.uk) (qualitative data transcriptions) and Dr Andy Peters (Andy.Peters@luht.scot.nhs.uk) (demographics and CHAMPS data).

1. Screening Information (by physiotherapists in the clinic) of those who accepted pack and were entered into the study - a digital spreadsheet on a secure area of NHS Lothian's servers (anonymised, patient age, sex, postcode, and clinic where they were screened). The same spreadsheet includes data from CHAMPS screening and other questionnaires. These will be stored for 3 years post-study.

2. Qualitative data from Interviews (anonymised transcribed recordings of focus groups and interviews) and paper versions of the quantitative questionnaires will be kept for 3 years post study completion in Glasgow Caledonian University Secure Archive stores and then will be shredded.

3. Personal data linking names to Research ID codes has already been destroyed (ethics allowed 3 months post study completion and this information was only ever available on secure NHS Lothian servers).

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article		19/09/2018	13/03/2023	Yes	No
Protocol article	protocol	20/06/2016		Yes	No
Basic results		04/08/2017	09/08/2017	No	No
HRA research summary			28/06/2023	No	No