Essential Elements of the FaME Intervention - What makes FaME, FaME?

'Essentials' focus on service planning processes and programme design that determine 'FaME' is being delivered rather than any other/generic strength and balance programme /intervention.

These do not focus on the quality of delivery (PSI skills) but on the **unique** aspects of FaME delivery. It is assumed that Postural Stability Instructors (PSI) trained by Later Life Training understand these aspects in greater detail than presented here. PSIs are expected to maintain a focus on quality of delivery and to deliver FaME to best possible fidelity.

Essential Element	Notes
Instructor Training Postural Stability Instructors (PSIs) deliver FaME exercise sessions and are required to pass planning and practical skills assessments to a minimum standard	PSI training includes; scope or practice, use of participant assessment and outcome measures to identify suitability (functional grid and other subjective measures), determine exercise design and progression, and document effectiveness at end of programme. Behaviour change principles and strategies are pro-actively embedded within conversations and group FaME delivery supporting behaviour change to achieve effective dose with home exercise practice, and regaining the skills to get up from the floor skills.
Suitability of attendees a) Evidenced in those at high or intermediate risk based on World Falls Guidelines. (focussed on Secondary Prevention for those who have fallen or at very high risk). b) Evidenced in those at low or intermediate risk (focussed on Primary prevention for sedentary older adults who have gait or balance concerns, had one fall or are concerned about falls and their balance). c) Suitability should be defined at initial assessment.	FaME has been shown to work as both secondary and primary prevention however, group classes should have a singular focus (secondary or primary) otherwise PSIs are challenged with a diverse group of physical function/ falls risk/concern about falls and optimal challenge and progression is harder to achieve for everyone. Suitable attendees: 3 or more on FRAT, or yes on the first question or avoiding activity due to concern about balance or falls + Functional grid scores to define if someone is too fit or frail to benefit from FaME and may require referral back to rehabilitation or signposting to generic strength and balance classes. Different class numbers will be appropriate depending on whether session addresses high or intermediate risk participants.
Exercise Dose – incl. home exercise practise a) Three times per week (>2hrs total) of exercise activity. b) for minimum of 12 weeks, more for greater effect. c) Sufficient continued exercise programmes after FaME (to continue the gains)	FaME is evidenced to reduce falls at 24 weeks. Twelve weeks or more has an indication of, though lesser, effect on falls rate reduction and reduced efficacy on physical function and concern about falls. Note: falls risk and functional improvements will slowly return to baseline without ongoing training stimulus and signposting to appropriate egress opportunities or ongoing engagement in sufficiently challenging and dosed home exercise is important. It is adaptable as to how 'sufficiently dosed exercise' is reached through in-person, home exercise and use of online provision (though robust evidence not currently available for FaME remote)

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FaME pre-exercise Assessment a) Participant pre-exercise assessment is undertaken to deem suitability (see above) and ascertain start points for exercise and behaviour change. b) Mid-programme assessment is to deem continued suitability (are they ready for onward exercise programmes) and inform exercise and behaviour change tailoring and progression. c) End-programme assessment is for informing self-management and appropriate onward signposting and outcome reporting.	Evidence-based tools such as the functional grid (including timed up and go, 30 sec chair rise etc.) and concern about falls (Short FES-I), should be used alongside others to support tailoring, progression and reporting. A minimum dataset has been agreed.
Exercise content – components of fitness Warm up for range of motion training 1. Dynamic Endurance (aerobic capacity) training for balance 2. Dynamic Balance training 3. Targeted Resistance training 4. Getting down to and up from the floor (backward chaining approach) 5. Functional Floor activities 6. Flexibility training 7. Adapted Tai Chi	FaME is a standing programme with requirement for seated options sometimes and especially for those presenting with low levels of physical function (requiring more rest and slower graded approach to challenge / intensity of exercises increases to support progressive overload principles). Floor activities include coping strategies (crawling/rolling) alongside component of fitness (strength/flexibility).
Floor based coping strategies Getting down to and up from the floor using the backward training method.	It is adaptable as to how floor work is included (not whether it is included as it is important to reduce the consequences of a long lie and increase a persons' perceptions as to how to manage a fall). It could be included through visualisation, demonstration, preparation, watching others, working on mastering the different stages, as well and getting down to and up off the floor.
Tailoring and Progression PSIs tailor and progress exercises (in the group and for home exercise prescription) for each participant to optimise training gains and behaviour change.	Tailoring and progression may be achieved through increased difficulty of exercise, increased resistance (e.g. weights/bands) and approach (floor vs standing/circuits).
Supporting Behaviour Change Behaviour Change to support motivation and adherence to the programme and self-literacy to continue after programme cessation (individual and local setting).	PSI training includes a specific teaching structure and focus on language and words used to support self-efficacy and independent exercise at home. In addition, it is adaptable as to what approaches to behaviour change are included (education, prompts, goal setting, problem solving, social cohesion, etc)