## Tai Chi in Long term care: Why do it, and how can I make it work?



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\*I have no conflicts of interest

### What is Tai Chi

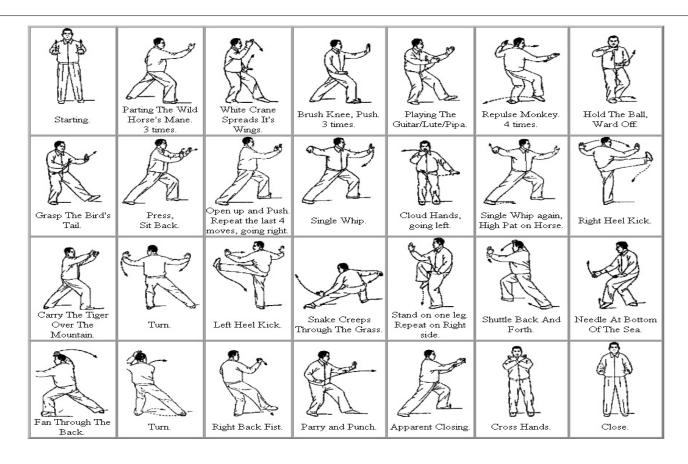
#### "Grand Ultimate"

- Philosophical idea
- Describes the natural world in a state of dynamic balance between interactive phenomena
  - · light and dark, movement and stillness, waves and particles
- Exercise named after philosophy
  - Martial art
  - Meditative movement
    - "elicit balance internally for healing, stress, neutralization, longevity, and personal tranquility."
    - · lengthy, complex series of movements

-Jahnke, 2010.

• Safe, simple, not strenuous, inexpensive

# Examples of Tai Chi movements



# What are the health benefits of tai chi?

- Reduces falls by more than half
- Improves cognition in MCI
- Improves depressive symptoms
- Improves sleep
- Reduces blood pressure
- Reduces pain from knee arthritis, fibromyalgia, and other conditions
- And many more!

# Tai chi classes in long term care

12 long term care teams wanted to try implementing tai chi

We trained Activities Coordinators as instructors for Tai Chi: Moving for Better Balance, and told them they could adjust as needed for their resident needs

Coordinators chose how long the sessions would be and how often

# Tai chi classes in long term care

- 10 of 12 long term care teams implemented the project
- "Non-implementers" cited lack of leadership buy-in, staff turnover, and time as barriers to implementation
- 7 of 10 SNF and dementia care teams were still leading tai chi classes one year later

Team members reported this project was a catalyst for improved communication

Resident Characteristics	Still Offered	Sitting/	Class	Class	Class Size
	Offereu	Standing	length	frequency	Size
All wheelchair; dementia;	No	Sitting, Most	N/A	D/C after 3	10
includes agitated residents		in W/C		sessions	
Mixed: Mild to moderate	Yes	All sitting	30 m	2x week	5-6
dementia; all have poor balance					
Severely confused with physical				D/C after 3	
limitations	No	All sitting	N/A	sessions	6-8
Mixed: SNF, ICF; mild, not severe,		Sitting, most	15-20 m	2x week	2-15
dementia	Yes	in W/C			Ave 6
Special Care: assisted care,		Standing,		2-3 x week	
memory care; mild dementia	Yes	some sitting	~20 m		3-8
Special Care: mild-moderate		Standing,		_	
dementia; inappropriate behavior	Yes	some sitting		1-2x week	3-6
Intermediate care	No		20 min		
	140	a			
Mixed: Post-acute: non-ambulatory,	Yes	Sitting W/C	15-25 m	2x week	2-8
mixed cognitive impairment	103			ZX WCCK	
Special Care: dementia with	Voc	Standing +	45-60 m	24 442 212	C 10
behavior problems	Yes	sitting		2x week	6-10
Mixed: Some rehab, mostly ICF, non-					
ambulatory, moderate dementia	Yes	Sitting	15 m	1x week	<b>5-6</b>

### Benefits of Tai Chi

#### Physical: Flexibility, balance, strength

"participants rise from chairs and make turns with greater strength and stability"

"everyone was very positive about tai chi and felt that it had improved their balance"

#### Emotional: Enjoyment, feeling of accomplishment, calming

"They really like it – they may not be able to verbalize it, but they are having fun"

Residents felt "proud and accomplished after class, more confident while practicing, and more willing to try new things"

#### Social: Engagement of residents, staff, and instructors

"nearly everyone on the unit participates in some way, as observer or participant"

Staff participate too: "They get into it and try it out when they walk by"

"it is rewarding as an instructor to see how far they have gone"

## Physical Challenges to Implementing Tai Chi and Solutions

Tai chi was too demanding for some residents

 Instructors varied the length of the classes, reduced number and types of movements, reminded residents not to over-step, and had a second staff member moving through the group to help with balance

Many residents could not do it standing- especially not at first; goal was to progress to standing, but many residents did not meet that goal

Instructors took it upon themselves to find more varied sitting tai chi poses

Some residents only had use of one arm

Instructors did private lessons till these residents could join the full class

"This was scary at first (standing tai chi), but we haven't had a fall in this class since we began a year ago" (Special Care Unit instructor)

## Cognitive Challenges to Implementing Tai Chi and Solutions

#### Many patients had dementia

"the moves are new (to participants) every time"

"it took (participants) 6-8 weeks to learn how to Hold the Ball!" (form One of TCMBB.)

- Instructors took greater care to model movements clearly and simply so residents could follow along with moves even if they could not remember them
- Instructors eliminated or simplified forms to accommodate resident deficits
- Instructors renamed the positions to reflect names familiar to the experience of the residents, e.g., Wave Hands Like Clouds was replaced in one dementia unit with Hula Dancing

## Summary recommendation

"Advice for tai chi training is to involve rehab team, house MD to help implement changes; keep CNA staff fully informed, let them take ownership as they are trained to be tai chi instructors"

### Resources

YouTube: Tai chi for better balance (Suman Barkhas)

https://www.youtube.com/watch?v=jxpKT6Rr9i8&t=188s

YouTube Chair tai chi (Suman Barkhas):

https://www.youtube.com/watch?v=qjjqllmkl5Q&t=61s

#### Tai Chi flash mob Pioneer Courthouse Square





Senior center tai chi demo



Tai Chi with Multnomah County Commissioners

