



THE CHINESE UNIVERSITY OF HONG KONG

香港中文大學

SHATIN · NT · HONG KONG ·  
香港 新界 沙田 ·TEL : (852) 3943 6096  
電話 : (852) 3943 6096FAX : (852) 2603 5781  
圖文傳真 : (852) 2603 5781EMAIL : sports@cuhk.edu.hk  
電子郵件 : sports@cuhk.edu.hk

Sports Science &amp; Physical Education Department

體育運動科學系

## Informed Consent Form

### Promoting Safe Mobility of Older Adults in Care Facilities

**Principal Investigator:** Yijian YANG, MD, PhD  
Assistant Professor,  
Department of Sports Science and Physical Education  
Jockey Club Institute of Aging (by courtesy)  
The Chinese University of Hong Kong  
Phone: (852) 3943-4001

#### **INVITATION**

You are invited to take part in this study because you reside within a population who may have high risk for falls or poor mobility. Your facility is a partner in this research project to work towards identifying strategies and technology to promote safe mobility and prevent falls among older adults.

#### **PURPOSE OF THE STUDY**

This study is being conducted by researchers from the Chinese University of Hong Kong (CUHK). The focus of this research is on safe mobility promotion and fall prevention in older adults in assisted living care facilities.

Mobility is important for maintaining independence in older adults. However, due to the decreased physical function associated with aging, older adults in assisted living have some degrees of difficulty in performing daily activities. Falls are common among older adults with poor mobility, and we are dedicated to preventing these events. Therefore, the purpose of this study is to improve our understanding of mobility patterns of older adults and the effects of physical activity programs on mobility enhancement. As a result of this study, we may be able to make changes to our method of care delivery, or to our environment, to promote safe mobility and prevent falls.

#### **PROCEDURES**

You can participate in this study if you: (a) are 65 years or older, (b) can get up from a chair (with or without using the armrests) and stand for 20 seconds, (c) are able to clearly express basic personal preferences (e.g. clothing or food), and (d) are medically stable and approved by your physician. This study includes two parts.

##### **1. Assessment**

You will participate in measures of physical function, memory, and problem solving ability. These measures will be collected again at 3 months and at 12 months.

One set of measures will examine your physical function. In these measures, you will be asked to perform a series of sit-to-stand, walk a short distance, and stand with various foot positions to test balance. You will also be asked to test your grip strength by squeezing a device as hard as possible with your hand, your arm strength by pushing armrest as hard as possible, and your

leg strength by extending your leg (e.g., knee, ankle) and pressing against a surface. These measures will take about 30 minutes including resting time. A second set of tests will measure perceived concern about mobility, memory issue, general health, and problem solving ability using questionnaires. These measures will take about 20 minutes. Finally, you will be asked to wear a sensor that record your body movement for a five-day period. The sensor is about the size of a matchbox, and will be attached to a belt worn around your waist. The sensor will be provided by a research lab at CUHK. One of our research team members will come every morning to put the sensor on you and take it off in the evening. The researcher may also ask you questions about whether you have experienced any problems while wearing the sensor.

## **2. Physical activity practice**

You will be invited to attend a physical activity program, which involves some daily activities such as stretching, weight shifting during sitting and standing, balance, and/or resistance exercises. There will be 3 sessions per week, with 45 minutes per session, for a total of 12 weeks. You will be encouraged to continue practicing the physical activity program if you think it would benefit you. There will be instructors to guide you to do physical activities and document your attendance.

## **POTENTIAL RISKS**

The study does not involve any potential risk. This study has been approved by the Survey and Behavioural Research Ethics Committee at CUHK.

During the measures of physical function, one member of the research team will act as a spotter to prevent you from falling if you lose your balance. If you feel tired or uncomfortable at any point during the tests, we can stop to take a break or discontinue the testing.

The harms and discomforts associated with physical activity practice are minimal. If the exercise is difficult for you, the instructors will adjust the difficulty level. If you feel tired or uncomfortable, you can stop practicing at any time.

## **COMPENSATION FOR PARTICIPATION**

Participants who complete the study will receive a “Thank You” card. You will also get a **FREE** summary report of their physical and cognitive tests, fall risk assessment, and recommendation of doing physical activities.

## **CONFIDENTIALITY**

Your confidentiality will be respected. Only the researchers in this study will have access to the data. Any data collected in the study will be used for research purposes only. All private, identifiable information (i.e. name) will be replaced by number when conducting data analysis and in all publications. Electronic data will be kept in secure password-protected computers at CUHK and hard copy data will be stored in a locked filing cabinet in the secure research facilities at the university for ten years. Meanwhile, as one of the authorized parties, the NTEC-CUHK Cluster REC/IRB can access your records related to the study for ethics review purpose.

## **PARTICIPATION AND WITHDRAWAL**

Your participation is voluntary. You have the right to refuse to participate in this study. If you decide to participate, you can still choose to withdraw from the study at any time without any negative consequences to medical care, benefits, or other services to which you are entitled or are presently receiving.

**QUESTIONS AND CONCERNS**

If you have any questions about the research, please feel free to contact Professor Yijian YANG at: 39434001 (telephone) and [yyang@cuhk.edu.hk](mailto:yyang@cuhk.edu.hk) (email).

**SIGNATURE**

\_\_\_\_\_ (Name of Participant) \_\_\_\_\_ (Signature)

\_\_\_\_\_ (Name of legal guardian) \_\_\_\_\_ (Signature)

On behalf of the participant,

I understand the procedures described above and agree to participate in this study aimed at understanding mobility patterns of older adults and the effects of exercise programs on mobility enhancement conducted by Professor Yijian YANG in the Department of Sports Science and Physical Education at the Chinese University of Hong Kong.

Date: \_\_\_\_\_