

Outdoor Mobility After Hip Fracture: Protocol for a Feasibility Randomized Controlled Trial

Anna Lyczmanenko; Denise Bastas; Stefanny Guerra; Siobhan Creanor; Claire Hulme; Sallie Lamb; Finbarr C Martin; Catherine Sackley; Toby Smith; Philip Bell; Melvyn Hillsdon; Sarah Pope; Heather Cook; Emma Godfrey, Katie J Sheehan.

 @OutdoorTrial @KatieJSheehan

Full protocol at:
[DOI: 10.1371/journal.pone.0306871](https://doi.org/10.1371/journal.pone.0306871)



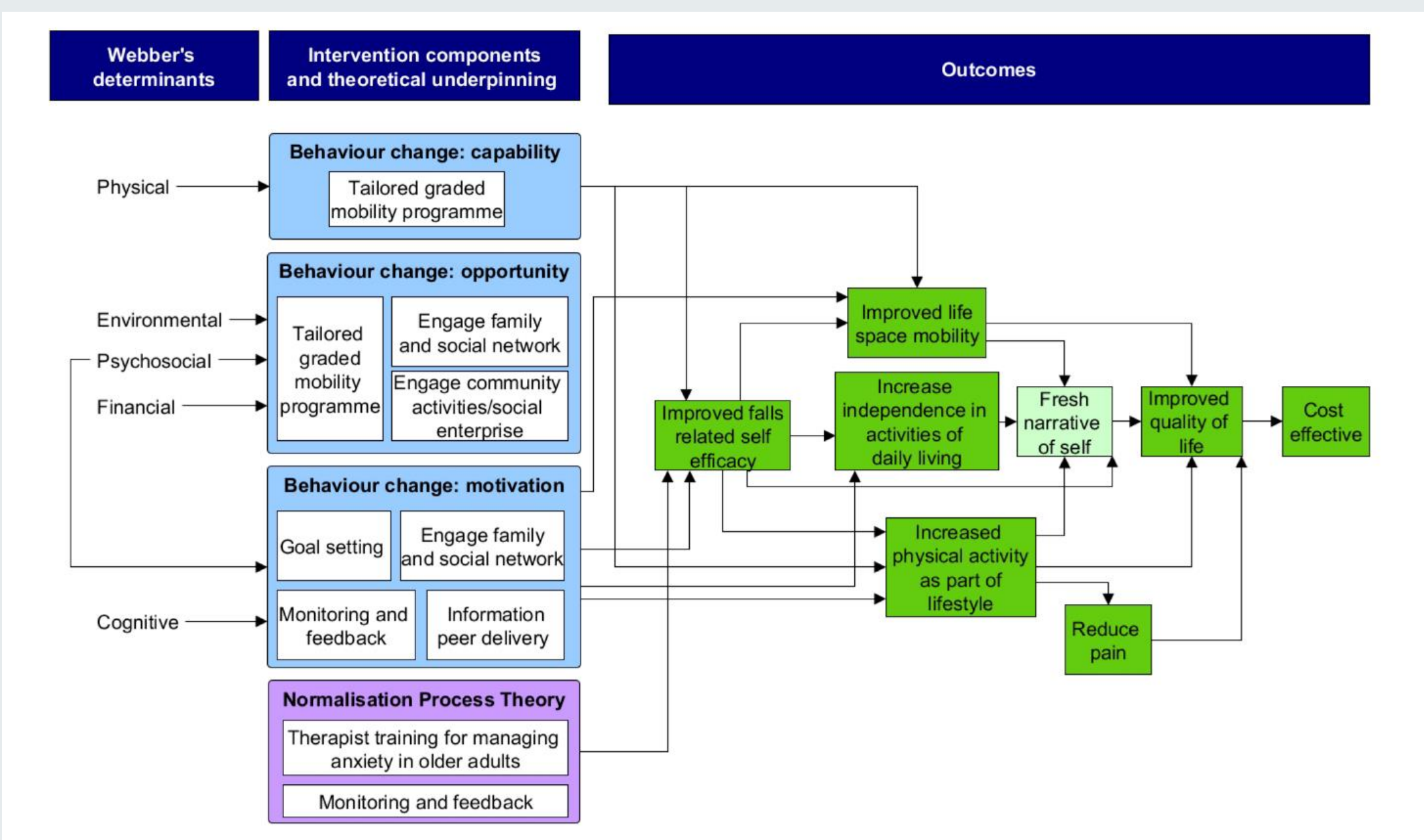
What is known?

- Clinical guidelines provide limited recommendations for community rehabilitation after hip fracture.
- Rehabilitation targeting outdoor mobility is needed to enable patients to recover activities which they value most after hip fracture.
- Systematic reviews suggest a potential benefit of an outdoor mobility programme incorporating: 1) walking, use of assistive devices and transport; and 2) a behaviour change component, on outdoor mobility, physical activity and endurance.

What this adds...

- A protocol for an intervention designed to enable recovery of outdoor mobility among adults after hip fracture.
- A protocol to determine the feasibility of a randomised controlled trial aiming to assess the effectiveness of this intervention.

Intervention logic model



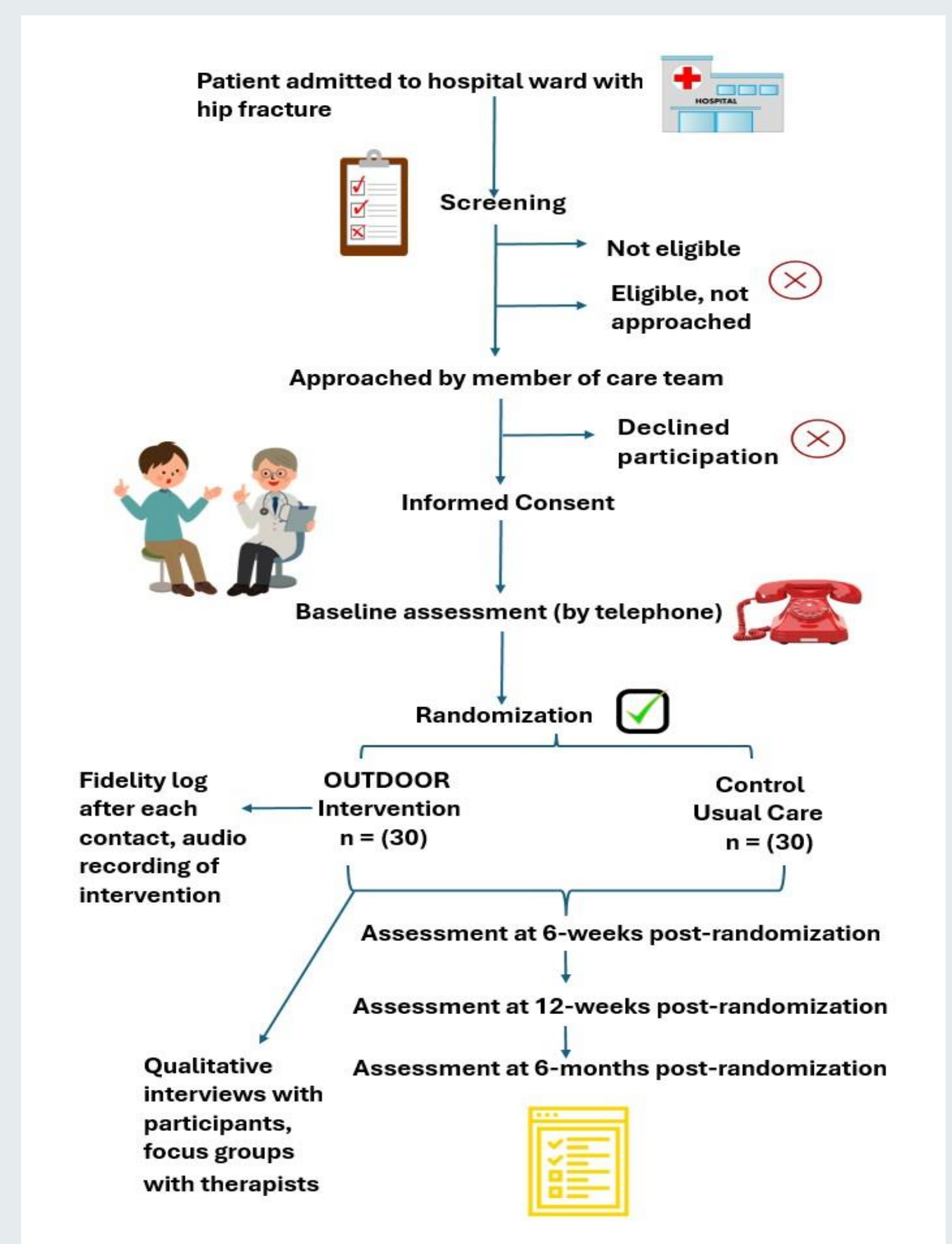
Intervention protocol

Usual care plus:

1. Motivation – peer support (video)
2. Goal orientated outdoor mobility programme
3. Motivation – additional professional support
4. Support to transition to independence

Physiotherapy/Occupational therapy/Rehabilitation support worker training in motivational interviewing.

Flow diagram for the OUTDOOR feasibility randomised controlled trial



Feasibility trial protocol

Design: multi-centre, pragmatic parallel group, randomised (1:1 allocation), controlled, assessor-blinded feasibility trial.

Setting: participants home(s).

Intervention: usual care or usual care + outdoor intervention

Primary objective: determine intervention fidelity

Secondary objectives: acceptability (intervention and outcome collection), eligibility, recruited and retained, indicative sample size definitive trial.

Eligibility: (target sample = 60): age 60+ years admitted to hospital from and planned discharge to home, surgically treated for hip fracture; self-reported outdoor mobility 3 months pre-fracture.

Fidelity: audio recording of interventions, questionnaires.

Outcome measures: quality of life, daily activities, pain, community mobility, falls related self-efficacy, resource use, exercise adherence, acceptability, accelerometry.

Schedule: baseline, 6-weeks, 12-weeks, and 6-months post-randomisation.

Analysis: to address objectives against progression criteria defined a priori.

Status: close to recruitment January 31st 2025.

