

Physical Activity for Anxiety Management: a service redesign

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Introduction

According to the Scottish Government Mental Health Strategy 2017-2027, waiting times for anxiety management for mild to moderate symptoms should be 6 weeks. Our waiting times were significantly over the recommended 6 weeks.

It was proposed that the mental health physiotherapy team would pilot a group-based activity for anxiety management patients. This proposed group would involve both an exercise and education component with a large focus on self-management to help reduce waiting times.

Aim

The aim of this project was to reduce the waiting times for anxiety management by introducing a physiotherapy led physical activity based anxiety management group.

Method

A 6 month secondment was created to lead this project (0.6 WTE band 6 and 0.6 WTE band 3)

A programme was researched, designed and delivered
 Covid-19 protocols were followed and adapted as required

In order to start this project the first task was to create a PDSA (plan, do, study, act) cycle.

The next steps were;

- Gathering information on wider staff team knowledge of the service (eg. CMHT)
- to gather up to date evidence by conducting a literature search
- brainstorming exercise within the team to create a plan for each session
- Both inclusion and exclusion criteria were decided
- Deciding on appropriate outcome measures
- Creating patient feedback forms
- Completing risk assessment, SOP and SBAR

Inclusion Criteria	Exclusion Criteria
Completed initial assessment	Severe anxiety symptoms
Willing to participate in group activity	Unable / unwilling to participate in exercise
Able to travel to class location	Underlying health issues that may prevent participation in exercise
Mild to moderate anxiety symptoms	

Acknowledgements

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For more information on:

Poster Design, Scanning and Digital Photography, and Image / file size contact:

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**BEFORE
WORKOUT**

**AFTER
WORKOUT**



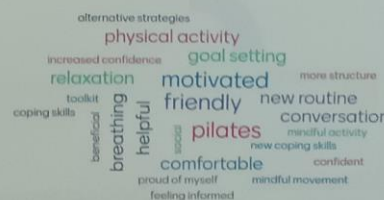
So far...

- Our classes have started and we have run 3 separate groups with varying degrees of participation levels.
- After each group we have had another cycle of PDSA making adjustments/improvements each time.
- We have had positive feedback from group participants so far and some suggestions for improvements from our patients.
- Each session now has a power point presentation for education sections.
- Each group has had a follow up phone appointment where progress and future treatment/discharge to self manage is discussed.

Next steps

- Have classes in other localities
- Rolling programme of classes
- Create an information leaflet for pre-participation

Feedback



References

Aylett E., Small N. & Bower, P. "Exercise in the treatment of clinical anxiety in general practice - a systematic review and meta-analysis.", BMC health services research 2018, vol. 18, no. 1, pp. 559