

Freedom of Information Request

Reference Number: EPUT.FOI.22.2551
Date Received: 29.06.2022

Information Requested:

1. Does your Trust offer a physical activity programme* to patients with severe mental ill health (psychosis, schizophrenia, schizoaffective disorder, or bipolar disorder)?

a. ~~Yes~~

b. No organised physical activity programme – signposting, psycho-education, advice and consultation. Physical activity relating to falls management, transfers, posture stability may included in clinical intervention.

*by physical activity programme we mean any programme that incorporates an element of physical activity.

2. Does your trust offer more than one physical activity programme?

a. ~~Yes~~

b. No specific physical activity programme by the service

3. Please enter the name of the programme you are completing the form for:

No specific activity programme but psycho-education, consultation with carers where needed and signposting to community providers offering physical activity programmes

4. Who can be referred to this programme? Select all that apply.

a. All service users have access to signposting and advice as listed above

Other: Dementia

b. People with psychosis

c. People with schizophrenia

d. People with schizoaffective disorder

e. People with bipolar disorder

5. In a typical month approximately what proportion of eligible patients are referred?

a. _____

b. Don't know – variable depending on individual identification of need and preference

6. In a typical month approximately what proportion of patients referred, attend the programme?

a. _____

b. Don't know -variable depending on individual identification of need and preference

7. What are the key features of this programme? Select all that apply.

a. ~~Supervised physical activity sessions~~

b. Information or education about physical activity

c. ~~Physical activity counselling from a trained facilitator~~

d. ~~Peer support~~

e. Other (please give details) Information and consultation to and carers

8. What type of physical activity is available?
- ~~Swimming~~
 - ~~Access to a gym~~
 - ~~Football~~
 - ~~Access to fitness classes~~
 - ~~Walking group~~
 - ~~Netball~~
 - ~~Cycling~~
 - ~~Yoga~~
 - ~~Basketball~~
 - Other (please state) signposting
9. What is the setting of this programme?
- ~~a. Inpatient~~
 - b. Older Adult Community Mental Health and Dementia Service
 - ~~c. Mixed inpatient and outpatient~~
10. What is the format of this programme? Select all that apply.
- a. One-to-one face-to-face
 - b. Group face-to-face
 - c. One-to-one online
 - d. Group online
 - e. One-to-one by telephone
 - f. Other (please give details)
11. How is the programme arranged?
- ~~a. Ongoing course~~
 - ~~b. Drop-in sessions~~
 - ~~c. Over a fixed period (e.g., 1 session a week for 8 weeks)~~
 - d. Other (please give details) Usually as signposting or psycho-education, and identified as part of the treatment plan
12. If more than one mode of support was selected in Q10, can each patient choose how they receive support?
- ~~a. Yes~~
 - ~~(please give details) – depending on the treatment plan~~
 - ~~b. No~~
 - c. N/A
13. Is everyone who accesses services able to access the physical activity programmes as part of standard care? Please tick all that apply
- ~~a. Yes~~
 - ~~b. Only those who express an interest in physical activity~~
 - ~~c. Only those who are eligible, if yes how is the decision made and by whom _____~~
 - d. No – usually identified as part of the assessment or when identified in and during intervention.

14. Who supports patients in this programme? Select all that apply.
- ~~a. Fitness instructor~~
 - ~~b. Healthy living advisor~~
 - ~~c. Physiotherapist~~
 - d. Occupational therapist
 - ~~e. Mental health worker trained in physical activity (e.g., nurse)~~
 - f. Peer support worker
 - g. Other
(please give details) Occupational Therapy Assistant
15. What level is the person providing the support trained to?
- a. To degree level or above in a relevant area
 - b. Other training (please give details)
16. Does the Trust signpost service users to physical activity programmes outside of the Trust?
- a. Yes
 - ~~b. No~~
17. If yes, who provides these programmes? Select all that apply.
- a. Local council
 - ~~b. Secondary care trust~~
 - ~~c. Other NHS~~
(please give details) _____
 - ~~d. Not for profit company~~
 - e. Charity
 - f. Other third sector organisation
(please give details) Alzheimer's Society
18. Does the Trust use any other strategies to promote physical activity in people with severe mental ill health? (e.g., one-off activity health promotion events, brief advice during healthcare contacts, environmental prompts)
- ~~a. One-off activity events~~
 - b. Brief advice during healthcare contacts
 - ~~c. Financial support (e.g. free gym membership)~~
 - d. Sign posting to activities
 - d. Other (please give details) _____
19. Do you feel that the physical activity provision in the trust meets the needs of the patients?
- ~~a. Yes~~
 - b. No/Don't Know
19. If there is anything else you would like to say about physical activity please state below.
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Publication Scheme:

As part of the Freedom of Information Act all public organisations are required to proactively publish certain classes of information on a Publication Scheme. A publication scheme is a guide to the information that is held by the organisation. EPUT's Publication Scheme is located on its Website at the following link <https://eput.nhs.uk>