

Details of Usual Care

Routine physical activity support for patients with severe mental ill health (psychosis, schizophrenia, schizoaffective disorder, or bipolar disorder)

Trust Name: **Birmingham & Solihull Mental Health Foundation Trust**

Date of completion: **14th July 2022**

Role of person completing: **Professional Lead Health Instructor**

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

*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 (if yes, please complete a separate form for each programme).**

b. No

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

Early intervention Health Instructor Pathway & Synergy Programme

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

a. All service users

b. **People in early intervention services**

b. People with psychosis

c. People with schizophrenia

d. People with schizoaffective disorder

e. People with bipolar disorder

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

a.

b. **Not know**

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

a.

b. **Not know**

6. 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)

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7. 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) Activities are identified on assessment (SU Choice/Likes), Activity organised in community meeting activity identified. Varied approach e.g fishing, golf, rock climbing.

8. What is the setting of this programme?

a. Inpatient

b. Outpatient/Community

c. **Mixed inpatient and outpatient**

9. 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) _____

10. 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) _____

11. If more than one mode of support was selected in Q10, can each patient choose how they receive support?

a. Yes

(please give details) _____

b. No

c. **N/A**

12. 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

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13. 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) _____

14. 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) Chartered Institute for Sport and Physical Activity – (CIMSPA/REPS) Exercise qual, level 4**

15. Does the Trust signpost service users to physical activity programmes outside of the Trust?

- a. **Yes**
- b. No

16. 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) e.g All sessions considered**

17. 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) _____

18. Do you feel that the physical activity provision in the trust meets the needs of the patients?

- a. **Yes**
- b. No

19. If there is anything else you would like to say about physical activity please state below.
No