

## THE STATE HOSPITAL BOARD FOR SCOTLAND

### REHABILITATION THERAPIES

12 Month Update Report

**01 July 2023 – 30 June 2024**

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Approval Group	Clinical Governance Committee	
Effective Date	July 2024	
Review Date	July 2025	
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## **INTRODUCTION**

Rehabilitation refers to a wide-range of approaches that include activities, interventions and information resources that support individuals to recover or adjust to achieve their full potential. It includes approaches that focus on early intervention for prevention, prehabilitation and supported self-management. Good rehabilitation is multi-faceted and the individual should feel empowered and supported to explore what is important to them. It should be personalised, supportive of the whole person, including their mental and physical health, and should take into account their desired lifestyle.

The Scottish Government's Once for Scotland Approach continues to drive the rehabilitation agenda in Scotland focusing on the individual and putting them at the centre of their rehabilitation journey, supporting their needs with timely access to the rehabilitation they may need. The State Hospital Allied Health Professionals and Skye Centre staff continue to be guided by this approach and its six principles of 'Good Rehabilitation' (easy and timely access, realistic and meaningful to the individual, integrated, innovative and ambitious and delivered by a flexible and skilled workforce).

This report provides an overview of the rehabilitation activity provided within the State Hospital for the period July 2023 to June 2024. For the purposes of this report the scope of rehabilitation services are the activities and interventions delivered by the Allied Health Professions and the Skye Centre.

Throughout the reporting period leadership and service development along with staff engagement, health/wellbeing and empowerment have proved prudent in shaping robust service delivery. The continuation of team development sessions and focusing on strengthening independent professional groups' identity whilst enhancing the Allied Health Professions' common goals and shared vision have proved beneficial. Reviewing patient assessment and treatment pathways has assisted in facilitating the direction of travel for the Allied Health Professions services in light of the developing Clinical Services model hospital wide.

Allied Health Professionals and Skye Centre staff have continued to provide some support to nursing colleagues over this reporting period albeit this resourcing need has reduced somewhat. This support has been reciprocated when needed to the Allied Health Professions teams. Clinical services continue to work creatively together to maximise delivery of therapeutic activity. Multi professional collaboration is at the heart of good rehabilitation.

## **1. CORE PURPOSE OF SERVICE**

The Allied Health Professions staff is a diverse group of professions who provide diagnostic, therapeutic and re-ablement/rehabilitation interventions across all sectors. Allied Health Professionals work in partnership to enable healthy, active and independent lives by supporting personal outcomes for health and wellbeing. This is set within an overarching recovery agenda where patients are encouraged to be an active part in their recovery in partnership with the Therapist. The following Allied Health Professions' disciplines provide individual and group activities – Arts Therapists, Dietitians, Occupational Therapists, Speech and Language Therapists and Physiotherapy.

The Skye Activity Centre is defined by 4 Activity Centres - Patient Learning, Sports and Fitness, Gardens and Animal Assisted Therapy and Craft & Design. The Atrium is also an area where the patients can access the café, library, shop and bank. The Skye Centre service consists of a group of registered staff – nursing and a Specialist Occupational Therapist (post currently vacant), skilled technical and educational Rehabilitation staff and Healthcare Support Workers who are all dedicated to meeting the clinical, rehabilitation and recreational needs of our patient population.

### **Safe and Effective Service Delivery**

Supervision continues to be an important and integral component part of effective service delivery with the commencement of supervision workshops to examine the best supervisory practices for

Allied Health Professionals whilst utilising the Four Pillars of Practice (NES). A caseload management tool has been introduced to enhance clinical reflection and effectiveness. A six weekly facilitated Reflective Practice Group has been established for the Skye Centre staff group. Group members have been invited to participate in the evaluation of Reflective Practice Groups, being carried out by the Nurse Consultant. The progress of individual patients' intervention is captured and monitored in a number of ways. This can be achieved subjectively using non standardised methods such as observation of behaviours, interactions with peers/staff and the recording of staff clinical reasoning and judgement, documented using the electronic patient record (RIO). This is more effective and robust when consistently using standardised measurement and rating tools.

The Assessment of Motor and Process Skills (AMPS) is an assessment tool which provides a robust standardised assessment of functional skills. Completed in the admission phase and re-administered to review changes at any point thereafter. However, the Assessment of Motor and Process Skills requires post graduate training and calibration as an assessor. Unfortunately the training for this tool no longer exists, with Occupational Therapists in the State Hospital and Nationally exploring alternatives. The Allen Cognitive Level Screen assessment has been identified as a possible alternative with work currently underway to explore its relevancy and appropriateness for practice within the State Hospital. We currently have 2 Occupational Therapy staff still trained in AMPS with these assessments continuing to be completed within their services. Therapists who are not trained in AMPS have been using an in-house generalised Functional Assessment tool that was developed by the Occupational Therapy service and uses their professional knowledge and skills to administer.

Model of Human Occupation Screening Tool (MOHOST) can be used by any registered Occupational Therapist and is utilised to analyse a person's general occupational participation irrespective of symptoms.

The following tables provide an overview of the assessments carried out over the last 12 month period with comparative data for previous years also being noted. As can be seen there has been notable improvement in completion rates of MOHOST both on admission and at the patients' annual review since the previous year. This can also be seen in the AMPS completion rate at admission with a General Functional Assessment completion figure of five for the year. The completion of interest checklists on admission have also increased by 7%. These improvements are quite impressive in light of a number of resourcing issues that have been evident over the year encompassing vacancies, long term/short term sickness, restricted duties and maternity leave.

**Table 1: Model of Human Occupation Screening Tool Standardised Assessment**

	<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>	<b>22/23</b>	<b>23/24</b>
<b>Annual Review</b>	68.1%	75.3%	87.4%	79.8%	45.7%	<b>79.8%</b>
<b>Admission Review</b>	71.4%	51.7%	93.8%	66.7%	53.3%	<b>78.9%</b>

**Table 2: Assessment of Motor and Process Skills - Admission Review Only**

<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>	<b>2022/23</b>	<b>23/24</b>
35%	16.1%	35.1%	20.9%	9.1%	<b>19.1%</b>

**Table 3: Interest checklist – Admission review only**

<b>2018/19</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>	<b>2022/23</b>	<b>23/24</b>
64.3%	48.3%	93.8%	66.7%	66.7%	<b>73.7%</b>

**Table 4: Assessment Data**

Assessment	2019/20	2020/21	2021/22	2022/23	2023/24
<b>AMPS</b>	<b>35</b>	<b>58</b>	<b>23</b>	<b>23</b>	<b>8</b>
<b>General Function</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>5</b>
<b>Interest Checklist</b>	<b>31</b>	<b>39</b>	<b>16</b>	<b>3</b>	<b>17</b>
<b>MOHOST</b>	<b>103</b>	<b>25</b>	<b>93</b>	<b>75</b>	<b>96</b>
<b>Occupational Case Analysis Interview Rating Scale</b>	<b>3</b>	<b>19</b>	<b>1</b>	<b>1</b>	<b>1</b>
<b>Occupational Self Assessment</b>	<b>9</b>	<b>3</b>	<b>0</b>	<b>2</b>	<b>2</b>
<b>Worker Role Interview</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>
<b>Assessment of Communication &amp; Interaction Skills</b>					<b>12</b>
<b>Volitional Questionnaire</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>9</b>
<b>Falls Assessment</b>	<b>28</b>	<b>33</b>	<b>12</b>	<b>2</b>	<b>17</b>
<b>Manual handling</b>				<b>6</b>	<b>5</b>
<b>Wheelchair assessment</b>				<b>2</b>	<b>1</b>
<b>Sensory assessment</b>				<b>1</b>	<b>7</b>
<b>Occupational Performance History Interview</b>				<b>4</b>	<b>1</b>

## **2. CURRENT RESOURCE COMMITMENT**

Allied Health Professions Staffing Compliment as at 30 June 2024

Job Title	Actual WTE	Budget WTE	Variance/Comments
Lead Allied Health Professional	1.0	1.0	
Lead Occupational Therapist	1.0	1.0	Mat leave from Dec 23
Lead Dietitian	0.78	0.78	
Band 6 Occupational Therapist	1.0	2.0	1 vacancy from Apr 24
Band 6 Dietitian	1.0	1.0	
Band 5 Occupational Therapist	2.0	4.0	2 vacancies from May/July
Band 4 AHP Support Worker	1.92	2.11	0.18 vacancy Nov 23
Band 3 Support Worker	0.41	0.41	
Arts Therapists	0.0	0.8	0.8 vacancy Long term
<b>Total</b>	<b>9.12</b>	<b>13.09</b>	
<u>Service Level Agreements</u>			
Music Therapist	0.4	0.4	
Speech and Language Therapist	0.2	0.4	0.2 vacancy from Sep 23
Physiotherapy	0.1	0.1	
<b>Total</b>	<b>9.82</b>	<b>13.99</b>	

The current vacancies as of 30 June 2024 include 2.0WTE Band 5 Occupational Therapists, 1.0WTE Band 6 Occupational Therapist, 0.8WTE Arts Therapists, 0.18WTE AHP Support Worker and 0.2WTE Speech and Language Therapist (Service Level Agreement).

The Occupational Therapy service is currently running with two Band 5 vacancies although they have recently been recruited to and personnel should be in post by October 2024. The Band 6 post has proved more difficult to appoint to with this being a national picture within Occupational Therapy. Annex 21 is currently being explored as an option to assist with recruiting to this post.

The implementation of the Arts Therapies service redesign has unfortunately taken longer than expected due to job evaluation processes although the first part of this process will commence soon. The new 0.6 Band 7 Team Lead Arts Therapist post is expected go out to recruitment in August 2024 with it being envisioned that the Band 6 Arts Therapists posts will follow once the Lead has commenced. These posts will be open to Therapists' of all modalities including Art, Music and Drama and will hopefully attract a greater pool of applicants. The Speech and Language Therapy service continues to be provided via a Service Level Agreement with NHS Lanarkshire with there being a 0.2WTE vacancy that Lanarkshire have found some difficulty recruiting to, other ways of incorporating these sessions and how to encourage applications for the post are being considered.

The Skye Centre funded establishment is 43.16WTE. The service currently has two vacancies with consideration being given to the skill mix, prior to recruitment.

#### **Skye Centre Staffing Compliment**

	<b>Establishment</b>	<b>Actual</b>	<b>Variance</b>
<b>Skye Centre Manager</b>	0.93	0.93	0
<b>Band 7 Nursing</b>	1.8	1.8	0
<b>Band 7 Patient Learning Manager</b>	1.0	1.0	0
<b>Band 6</b>	5.0	4.0	1
<b>Band 5</b>	9.0	8.0	1
<b>Band 4</b>	17.43	17.43	0
<b>Band 4 admin</b>	2.0	2.0	0
<b>Band 3</b>	4.0	4	0
<b>Total</b>	43.16	41.16	2

### **3. SUMMARY OF CORE INTERVENTION/ACTIVITY FOR THE PAST 12 MONTHS**

Over the last year activity data has continued to be recorded, with the RIO Timetable being utilised to provide reports on the planned activity offered, against the actual activities delivered. A wide range of activities are available. The Allied Health Professions service, Skye Centre, Nursing, Psychological Therapies and Person Centred Improvement Team collaborate to support each other to maximise resources and ensure patient activity is maintained.

Intervention is delivered individually and via groups using a variety of methods. There are regular ongoing group activities e.g. vocational, educational and sports activities for which there is no restricted time limit, these are mainly delivered by the Skye Activity Centre. There is scope for these activities to be modified depending on the needs of the patients participating. Dietetics jointly delivers groups with Psychologists and Occupational Therapists. Occupational Therapists facilitate structured groups such as Participate (social interaction skills) sometimes with the Speech and Language Therapist, Recovery Through Activity, Leavers Group as well as other less unstructured groups such as walking, cooking and relaxation. Patients are referred to these group interventions after discussion with their respective Clinical Teams and/or after assessment by Allied Health Professionals.

The Occupational Therapists have been focusing on providing more targeted groups to meet the rehabilitation needs of the patients including skill building groups such as budgeting/money management, self-care skills, and cooking with plans for the delivery of behavioural activation to assist patients in developing the necessary and valuable skills to structure their own time. A range of open “Drop In” style group activities continue to be offered from all services which encourages participation from patients who are less likely to engage with pre-planned activity and may have difficulty sustaining commitment and are held in the hub area. These sessions provide patients with access to a range of activities including hub gyms, pool, table tennis, board and card games and craft activities. They allow assessment of mental state and functioning and encourage social interaction through engagement in meaningful activity. They offer patients the opportunity to be introduced to a variety of environments and the use of different utensils/materials (‘tools’) and their response to these. MOHOST assessments are used within these group settings to assess patients’ level of functioning.

### **Allied Health Professions**

Development of clinical skills and knowledge remains high on the Allied Health Professions agenda with this being seen through our continued training commitment in Occupational Formulation (Occupational Therapy), Low Intensity Psychological Therapies Group work (Occupational Therapy and Dietetics), Sensory Integration and Trauma, Risk Assessment (HCR20), Food, Health & Hygiene training (Occupational Therapy), Behaviour Change Training (Support Workers/Dietetics/Occupational Therapy) with training to be planned in Behavioural Activation when new Occupational Therapists onboard.

Team development sessions have continued to be led by the Lead Allied Health Professional and the Organisational Department with focus on profession specific identity as well as continued development of the Allied Health Professions shared vision and goals. Work has continued developing our presence Nationally and solidifying our roles within the State Hospital via a variety of methods i.e. use of social media, updating intranet/website material, engagement with Healthcare Educational Institutions, showcasing development work at Allied Health Professions and hospital events, engagement within Service Leadership Teams.

Workforce retention has improved over the reporting period with change being evident only within the last quarter, seeing one Band 6 and two Band 5 Occupational Therapists leaving the organisation. It is worthy to note that Band 5 Occupational Therapists retention within posts nationally is normally shorter than that of other bandings due to the nature of the experiential learning needs that newly qualified practitioners seek at this stage of their career. These posts have now been recruited to with an extremely good response rate being evident. Long-term and short term sick leave remain a feature with variance being evident throughout the year.

In line with the Scottish Government’s Allied Health Professions Education and Workforce Policy review, the Lead Allied Health Professional as a part of the Scottish Directors Allied Health Professions Group has been working with NES and Scottish Government policy officials to enhance Allied Health Professionals access into the NHS workforce.

Allied Health Professionals and Skye Centre staff have continued to be central with their clinical counterparts in shaping the four service specialties. Review of the Occupational Therapy Assessment/Treatment Pathways and Support Worker referral pathway have been completed including important improvements to clinical documentation. This has been in conjunction with the work completed by the Mental Health Steering Group on the CPA documentation and the emergence of the Rehab Outing Assessment and General Functional Assessment tools. Subsequently Allied Health Professionals continue to embrace quality improvement work to improve their services.

Outcome measures have started to be explored and examined over the reporting period. Development of these can aid more effective service delivery planning and intervention outcomes but could also assist in contributing to important information re patients’ progress of their recovery journey from admission to discharge via functional assessment.

With regards to Allied Health Professionals' patient attendance figures at individual and group sessions, Table 5 below compares these over the past 3 years.

Table 5: Comparison of Allied Health Professionals contacts (Individual Group and cancelled) from 2021-2024

- Individual contacts = face to face contact with patients on a one-to-one basis
- Group contacts = face to face contact involving 2 or more patients

#### Individual Contacts

	2021/ 2	2022/ 3	2023/4
<b>Occ. Therapy</b>	1243	669	1348
<b>Dietetics</b>	570	244	367
<b>Art Therapy*</b>	-	-	-
<b>Dramatherapy</b>	-	-	-
<b>Music Therapy</b>	179	184	146
<b>Speech &amp; Language Therapy</b>	53	118	67 (90 indirect)

\*Art and Drama Therapy data not collected due to vacancies

#### Group Contacts

	2021/ 2	2022/ 3	2023/ 4
<b>Occ. Therapy</b>	3336	3336	1899
<b>Dietetics</b>	220	87	0
<b>Art Therapy*</b>	-	-	-
<b>Dramatherapy</b>	-	-	-
<b>Music Therapy</b>	260	258	266
<b>Speech &amp; Language Therapy</b>	0	0	16

\*Art and Drama Therapy data not collected due to vacancies

#### Cancelled Sessions

	2021/2	2022/ 3	2023/ 4
<b>Occ. Therapy</b>	537	72	755
<b>Dietetics</b>	149	40	6
<b>Art Therapy*</b>	-	-	-
<b>Dramatherapy</b>	-	-	-
<b>Music Therapy</b>	65	4	333
<b>Speech &amp; Language Therapy</b>	20	2	12

\*Art and Drama Therapy data not collected due to vacancies



This shows variance between professions with Occupational Therapy individual contacts being doubled and Dietetics increasing by a third. Speech and Language Therapy individual contacts are reduced due to a vacancy although group contacts have increased and likewise with Music Therapy whose group contacts have also increased.

Occupational Therapy group contacts have reduced but this could be due to more targeted work being employed on an individual basis. The changes in data retrieval from manual to RIO only has impacted on the number of cancelled sessions being recorded for Occupational and Music Therapy with some sessions not being updated and cancellations being due to sickness, leave, inability to staff, patients declining.

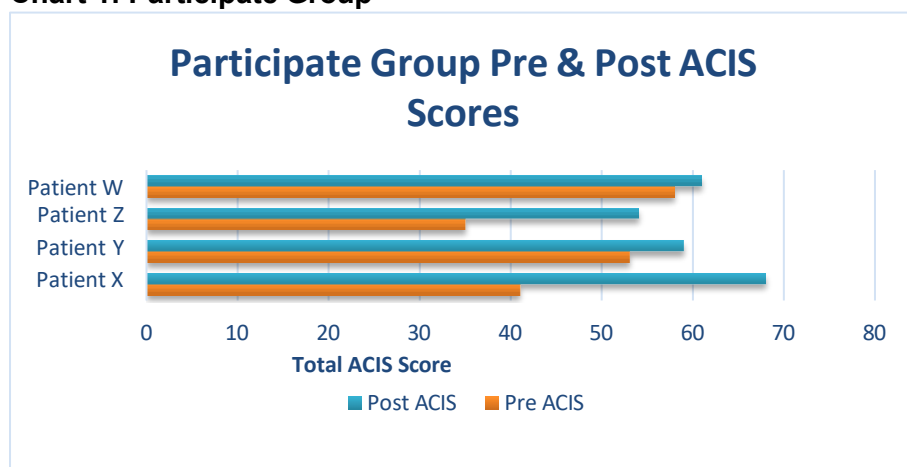
### **Occupational Therapy**

This reporting period has seen the Occupational Therapy department focusing heavily on developing and improving their service delivery via monthly team development sessions. Within these sessions the Occupational Therapists have developed '**Activity Boxes**' for patients who are on enhanced care/ continuous observation to enhance their experience, by way of offering distraction, structure to time and enable small goal setting. More in depth assessment of mental state, response to guidance and opportunity for progression can also be achieved. Review of the Occupational Therapists' assessment and treatment pathways have been completed with changes to documentation and processes now being implemented with plans for review in August. All hub kitchens have re-opened with most services now receiving regular cooking sessions with healthy eating components being part of this intervention. Therapists have been working to provide an assessment process within rehabilitation outings primarily within the Transition service with this now having commenced. Relevant documentation, feedback and any actions will be provided to clinical teams and the relevant receiving agencies on discharge.

### ***Nu 2 U Project***

The Nu 2 U Charity Shop continues to be a successful vocational project supporting patient volunteers led by the Occupational Therapy service working alongside the Person Centred improvement Team and the Patient Learning Centre which provides work rehabilitation and the ability to achieve a SVQ Award. This is the first year where two patients have successfully completed their SVQ Award as part of their vocational role. A vocational role within the shop is currently being explored with all interested parties.

**Chart 1: Participate Group**



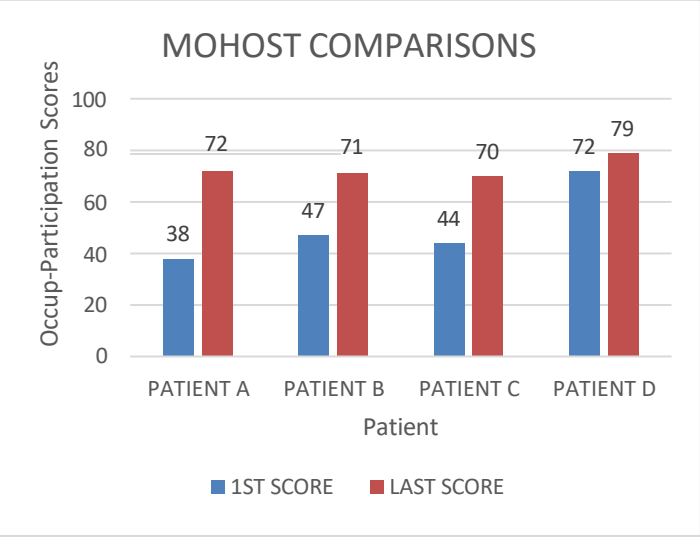
With regards to group work the Participate Group (social interaction skills) was delivered with all patients demonstrating improvement in their communication skills following the use of the standardised assessment and Outcome Measure - Assessment of Communication and Interaction Skills (ACIS) as can be seen in Chart 1

The Occupational Therapy Leavers Group has been delivered twice within the year period in the transitions service to assist patients' preparing practically and emotionally to moving onto the next stage of their journey. Group materials and protocols were reviewed following feedback from patients and staff to improve its efficacy. The Occupational Therapist working in the Intellectual Disability service has been focusing on skill development and providing a service to patients not previously participated in any off-ward activity. Subsequently the 'Hard2 Reach Café' provides patients with a low stimulus environment with 1:1 support from staff, allowing for engagement in meaningful activity which was previously declined in larger hub groups. The 'Hard2 reach Café' provides further opportunities to engage in rehabilitation with the wider clinical team and also

completes the preparatory work for patients being able to move onto attending the Skye Centre. The MOHOST assessment and outcome measure tool is utilised on admission and at annual review and as can be seen in chart 2 below has demonstrated improvement of four identified patients.

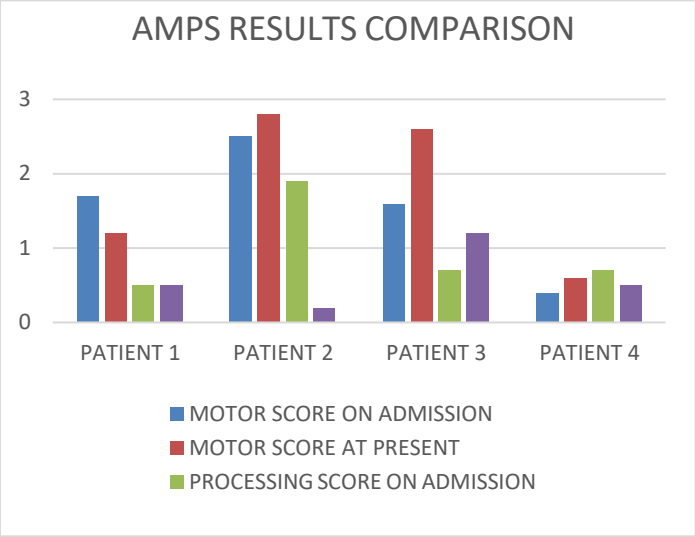
The AMPS tool can also provide the service and the Hospital with valuable information contributing to the patients' recovery journey from admission to discharge via functional assessment as per the results seen in chart 3.

Chart 2



NB: The MOHOST aims to measure specific areas of occupational participation including organization adaptability, knowledge, verbal/non-verbal skills, problem solving

Chart 3



NB: The AMPS aims to evaluate motor and process skills and their effect on an individual to perform activities of daily living

## **Dietetics**

The service continues to run with 1.78WTE registered staff plus 0.52 WTE dietetic assistant delivering a clinical remit, supporting the Clinical Team and providing reports to patient CPAs. The wider focus of the service assists with leading on and supporting the **'Supporting Health Choices'** remit and the **'Food in Hospitals' Education and Training Programme** for students, junior doctors and wider disciplines. The Supporting Health Choices Action Plan has been identified and the department is pivotal in realising and driving this work forward. The REHIS food and Health Course aims to be delivered in October 2024 for a number of departments. The Food In Hospitals review (2022) was a positive report (April 2024) with one action regarding nutritional analysis to be completed. Provision of alternative and new approaches to managing physical health continue including 'Counterweight Plus'. Production of the Supporting Health Choices Guidance document (with psychology) and the development (with pharmacy), of the guidance document for the use of GLP-1 medication for the treatment of those living with overweight and obesity. Counterweight Plus' delivery has continued to be successful with funding being maintained.

## **Arts Therapies** (Music Therapy)

Over the reporting period, the Music Therapist provided individual sessions to patients across all four services. Patients are typically referred to help support their communication skills, social relating skills and develop emotional insight. In addition to individual sessions, the Music Therapist continues to facilitate the Skye Centre choir with Allied Health Professionals and Skye Centre support for up to 12 patients per week. Patients provided feedback on their experience of the choir and with the Music Therapist identified a specific target aim they wanted to achieve eg help with 'concentration' and 'getting on with others'. These aims are reviewed by the Music Therapist and Allied Health Professional staff at regular intervals and will be due for review with patients at the end of August 2024.

In December 2023 the Choir performed in two concerts; one for staff and patients, the other for patients and their families at the annual Family Lunch. In addition to the choir concerts, the Music Therapist provided the music for the hospital's ecumenical Christmas service for patients, a Christmas Carol Sing-along as part of the Wellbeing Week series of events for Hospital staff and for a patient's memorial service in March 2024. Feedback has included: From a patient Choir Member, *'It was great! Lots of people clapped for us and it was a lot of fun. We should do it again next year'*. A patient's visitor noted, *'I appreciated very much being included in the Christmas lunch as a guest of my patient. I found it most enjoyable and the staff had made a big effort to give us entertainment as well as the meal. The choir were a huge success!'*. These important performances have a marked positive impact on patients' self-worth and confidence levels and reinforce a 'community' spirit for patients and staff.

## **Speech and Language Therapy**

Therapy provision has continued to be provided in a number of different ways: 1:1 sessions for assessment and/or intervention; group sessions e.g. jointly with Occupational Therapy colleagues re cooking; consultation; general advice and support for staff/other colleagues. The input with patients includes both direct and indirect assessment of communication and/or eating, drinking and swallowing difficulties with patients being referred hospital wide. Interventions are provided as appropriate and patients may request advice or review at any point in their stay. Written reports and strategies to support patients are provided following the assessment process, with easy read versions available for the patients who wish them. Patients with a Learning disability also have "All about me" passports included in their files and which are reviewed and updated as appropriate.

## **Physiotherapy**

Input has been focused on musculoskeletal injuries (acute and chronic) and post-orthopaedic rehabilitation. Referrals are sourced via Clinical Team Meetings, GPs, Health Centre nurses, and acute hospital services, Physiotherapy intervention helps patients become more active and comfortable, enhancing their understanding of physical health concerns and contributing to mental health recovery. The role is crucial for physical health and obesity management, contributing significantly to health policies and agendas. The service has expanded beyond the Health Centre, utilising the gymnasium for practical rehabilitation, contributing to stroke analysis review, joining the Physical Health Steering Group and Supporting Health Choices Improvement Programme of work.

The current Physiotherapist, who has been in post since September 2023, continues to provide essential services that align with broader health initiatives and policies, underscoring the need for the role within the State Hospital.

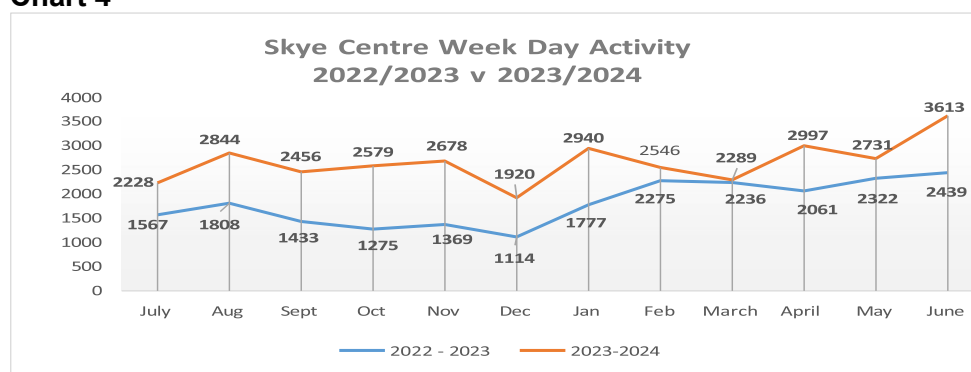
### **Skye Centre**

Patients can attend 4 activity centres (Sports, Crafts, Gardens, Patient Learning Centre) during weekdays, on a sessional basis, supported by a range of staff across various grades and skills.

Over the past 12 months there has been improvement. There has been improvement in the number of sessions delivered based on the previous year's performance. However the number of sessions has fluctuated throughout which can be attributed to the increased sickness absence that the service has experienced over this timeframe.

Chart 4 below provides more detail on the number of sessions delivered during this period. The Skye Centre service continues to resource the delivery of Mental Health Tribunals and all legal Court Hearings.

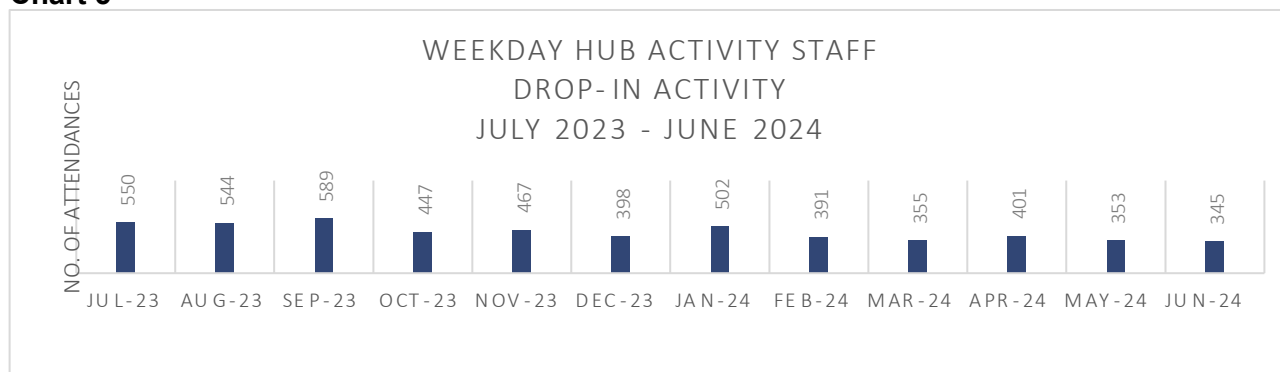
**Chart 4**



### **Hub and Weekend Activity**

The Hub Activity staff resource (6 WTE staff working 5/7 shift pattern) are part of the Skye Centre establishment. The timetable of activity they deliver is across the wards/hubs/grounds and Skye Centre Monday to Friday in and also work in collaboration with Allied Health Profession staff. They also support weekend activity in the Skye Centre. These staff were allocated in May 2023 to support activity within each specific service area as outlined within the Clinical Model however through discussion at the Activity Oversight Group this resource is now allocated across each of the service areas dependent on defined need. Their programme of activity is planned on a weekly basis. Chart 5 below details the improvements achieved in the number of sessions being delivered by this group since the changes were made in May 2023. The number of sessions delivered has been affected by staff sickness and one member of the team is currently participating in the Open University Nursing Degree programme and has been away from their work base whilst attending the required student training placement.

**Chart 5**



Weekend activity can be accessed by all patients across the hospital, staffing levels permitting. The delivery of weekend activity continues to fluctuate and is influenced by the availability of registered ward nursing staff support. The weekend Skye Centre staff are now allocated to cover visits in the Family Centre each weekend afternoon.

#### **4. KEY PERFORMANCE INDICATORS**

The rehabilitation therapies services' contribute to a range of corporate KPI's including physical health and therapeutic/meaningful activity. Service specific performance is measured through the following:

##### **Annual ICP VAT Information**

**Table 6: % of Annual Review Reports Completed**

	2017/18	2018/19	2019/20	2020/21	2021/22	2022/3	2023/4
<b>Occupational Therapy</b>	76.0	70.3	75.3	86.8	80.4	41.9	80.5
<b>Dietetics</b>	8.0	90.1	83.5	85.1	85.9	88.6	94
<b>Skye Centre Nursing</b>	70.0	88.9	95.8	89.4	96.6	73.6	97.2

**Table 7: % Annual Review Reports Discussed**

	2017/18	2018/19	2019/20	2020/21	2021/22	2022/3	2023/4
<b>Occupational Therapy</b>	62.0	47.3	52.9	63.2	61.6	27.1	71.4
<b>Dietetics</b>	8.0	49.5	23.5	63.2	70.1	68.6	77.4
<b>Skye Centre Nursing</b>	-	86.1	52.1	45.5	78.2	41.5	94.4

**Table 8: % Annual Reviews Attended**

	2017/18	2018/19	2019/20	2020/21	2021/22	2022/3	2023/4	<b>LDP Target</b>
<b>Occupational Therapy</b>	71.3	68.9	76.2	77.8	62.7	39.6%	69.4	80%
<b>Dietetics</b>	0.0	48.4	70.6	65.5	67	55.7%	58.3	80%
<b>Skye Centre Nursing</b>	1.0	2.8	2.6	0	0	0	0	No target

All professions and Skye Centre staff's annual review figures have improved somewhat from the previous year with the most marked improvement being seen in the number of reports being discussed with patients. Occupational Therapy resourcing improving within the first 9 months of the reporting period will have contributed to this. LDP targets unfortunately are not being met but should improve when resourcing improves.

# 1. COMPARISON WITH LAST YEAR'S PLANNED ACTIVITY

Planned Activity	Progress Update	Outcome
AHP Team Development sessions  Continue to raise the profile and understanding of AHP services internally and nationally	Two sessions completed with service objectives identified. Professions sharing of skill set AHP shared vision Attendance at national and local events Engagement with HEI's	<b>Achieved and Ongoing objective</b>
Review supervision practices/ Supervision Protocol and deliver appropriate training to staff where required	Workshops commenced to explore supervision models and examine AHP practices. To continue with workshops and revise model utilising the Four Pillars approach (NES)	<b>Ongoing</b>
Explore Opportunities for Digital interventions	The outcome of the Options Appraisal have been put on hold due to current financial pressures	<b>On hold</b>
Continue with AHPs and Skye Centre staff supporting the definition of activity and therapeutic interventions into the Clinical Model	Occupational Therapy assessment and treatment pathways reviewed in line with services AHP representatives embedded in services SLT's and assisting in shaping service models and delivery	<b>Ongoing</b>
Review and assess the success of the new Arts Therapies service model and implement appropriate structure	Band 7 Lead Arts Therapist post to go to advert Aug/Sept and Band 6 posts to follow	<b>Partially Achieved</b>
Implementation of Occupational Formulation into services	All Occupational Therapy staff trained Staff commenced using with identified patients within services	<b>Achieved</b>
Identify treatment pathways for AHP's delivering low intensity psychological therapies within the Hospital and train staff according to need	Treatment pathways identified. Low intensity psychological therapies in group work completed by some staff Behavioural Activation training to be completed when new Occupational Therapists on-board	<b>Partially Achieved</b>

## **2. QUALITY ASSURANCE ACTIVITY**

### ***Standardised Assessment***

Performance in utilising standardised assessments are reported elsewhere this assures the best quality assessments are used to plan intervention.

### ***Leadership Development***

The Lead Occupational Therapist has completed MSc in Healthcare Management and the Lead Allied Health Professional completed the Acorn Accredited Coaching training. All opportunities will be encouraged.

### ***Staff and Team Development***

As stated above training is important in achieving service objectives and is highlighted throughout this document. The Specialist Occupational Therapist completed their post graduate training in Sensory Integration. Allied Health Professions' Team Development sessions have continued with Organisational Development support.

### ***Key Performance Indicators***

Key Performance Indicator (KPI) measurement and definitions are kept under review. The KPI's related to patients' engagement in activity continue to be reviewed.

## **7. QUALITY IMPROVEMENT ACTIVITY**

### ***QI Clinical Model Implementation***

As stated previously the Allied Health Professionals and Skye Centre staff have been working collaboratively with clinical teams and services to develop care pathways within the service specialties, supporting the definition of activity and ensuring patients' treatment goals and interventions are adhered to. Reviews of assessment and treatment pathways have been completed with this work now being due for review.

### ***Occupational Formulation & Measurable Goal Setting***

More training in Occupational Formulation was completed in June with forensic services from NHS Greater Glasgow and Clyde. Consideration is continuing for the best position across the service specialties. It is envisaged that Occupational Formulation will be embedded in the Occupational Therapy Assessment and Treatment Pathway.

### ***Nutritional Care Plans (NCP)/Health and Wellbeing Plans (HWP)***

The Care Plans have been under review again following ongoing annual audit outcomes. This was due to poor quantitative information and the increased need for physical health care aspects to be addressed in line with the Hospital's priority for supporting health and managing overweight and obesity and meeting the Fluid Food and Nutritional Care standards. Health and Wellbeing Plan terminology is no longer being used. Nutritional Care Plan Process supports the ongoing use of the Nutritional Screening Tool with a nutrition and physical health care checklist completed to support formulation of the nutritional care plan which is a responsibility of nursing staff to be completed alongside the wider multidisciplinary team such as Dietetics, Occupational Therapy as required.

### ***RIO Data Collection***

Allied Health Professions data is now being collated wholly by RIO with manual collection having ceased. Collation has proved to be more time efficient although some work is still required with data entry. It has highlighted some anomalies re how cancelled sessions were being recorded previously manually and on RIO.

### ***Digital Interventions***

The completed option appraisal along with the outcomes, costings and priorities determined from the Digital Inclusion workshop was presented to the CMT for discussion. The Digital Inclusion programme has been paused due to the current financial situation and the work associated with the project will require to be phased and will unfortunately not be concluded within the timescales

outlined within the option appraisal. It was acknowledged how much Digital Inclusion matters to the patients and the amount of time and effort that has been put into this project by patients and staff across the hospital. Due to the extensive engagement with both patients and staff a 'Road Map' is now available and will provide the necessary information as and when new funding becomes available in the future, informing what the Digital Inclusion priorities are.

## **8. PLANNED QUALITY ASSURANCE/QUALITY IMPROVEMENT FOR NEXT YEAR**

### **Planned Activity**

- Continue Allied Health Professions and Occupational Therapy Team Development Sessions
- Allied Health Professions and Skye Centre staff continue to define and support activity and therapeutic interventions into clinical service specialties
- Embed Occupational Formulation into clinical practice and the appropriate service specialties and pathways
- Identify the treatment pathways for AHP's delivering low intensity psychological therapies within the Hospital and train staff accordingly to the need
- Review supervision practices and Supervision Protocol and deliver appropriate training to staff where required
- Increase and maximise employability opportunities throughout hospital
- Implement new Arts Therapies service model

### **9. Review Date:**

The next annual report will be due in July 2025, work shall continue on areas specified to enhance on service provision.