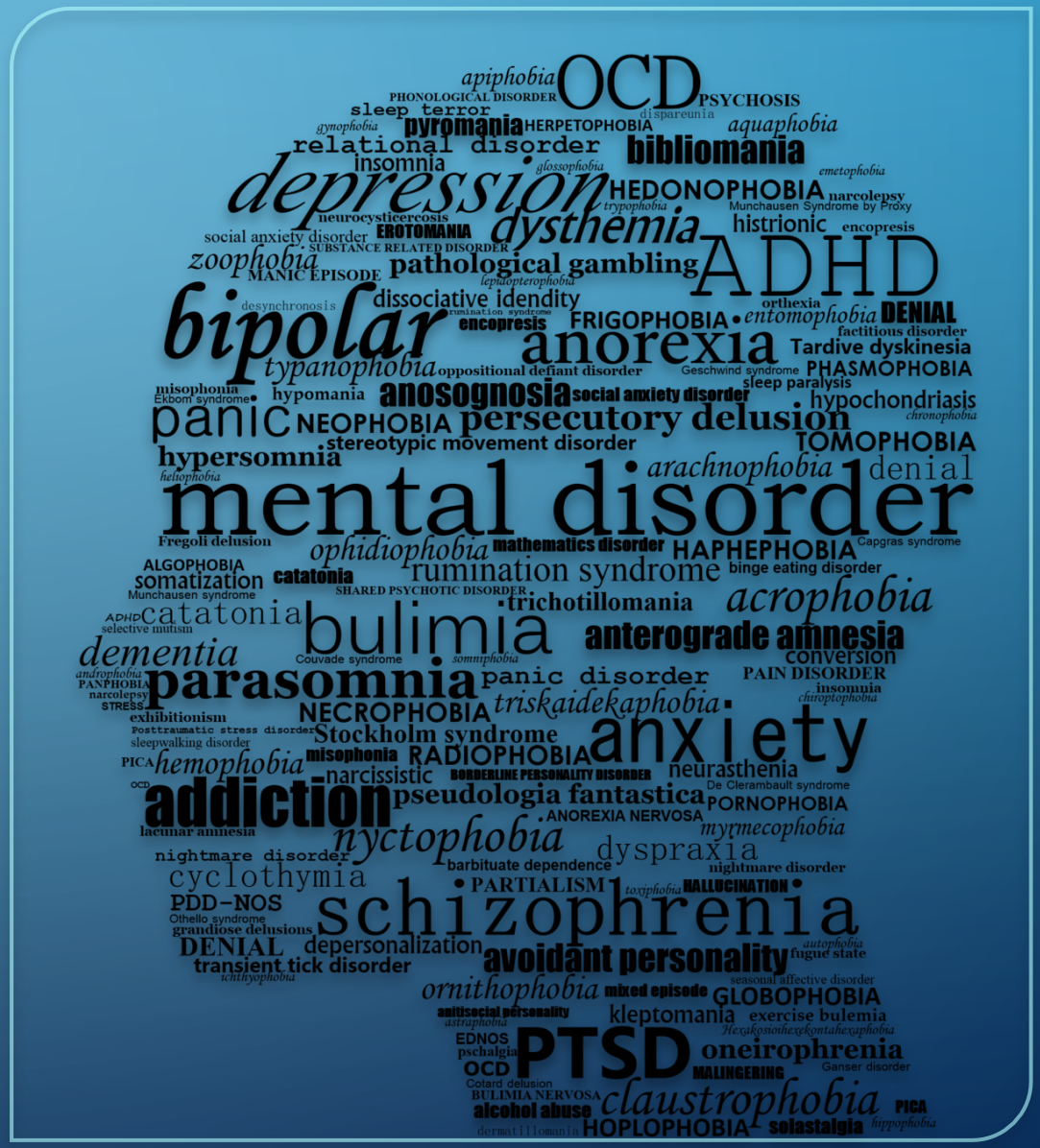
THE ROLE OF PHYSIOTHERAPY IN PICU, FORENSIC LOW SECURE AND ENHANCED CARE MENTAL HEALTH FACILITIES.



AIMS

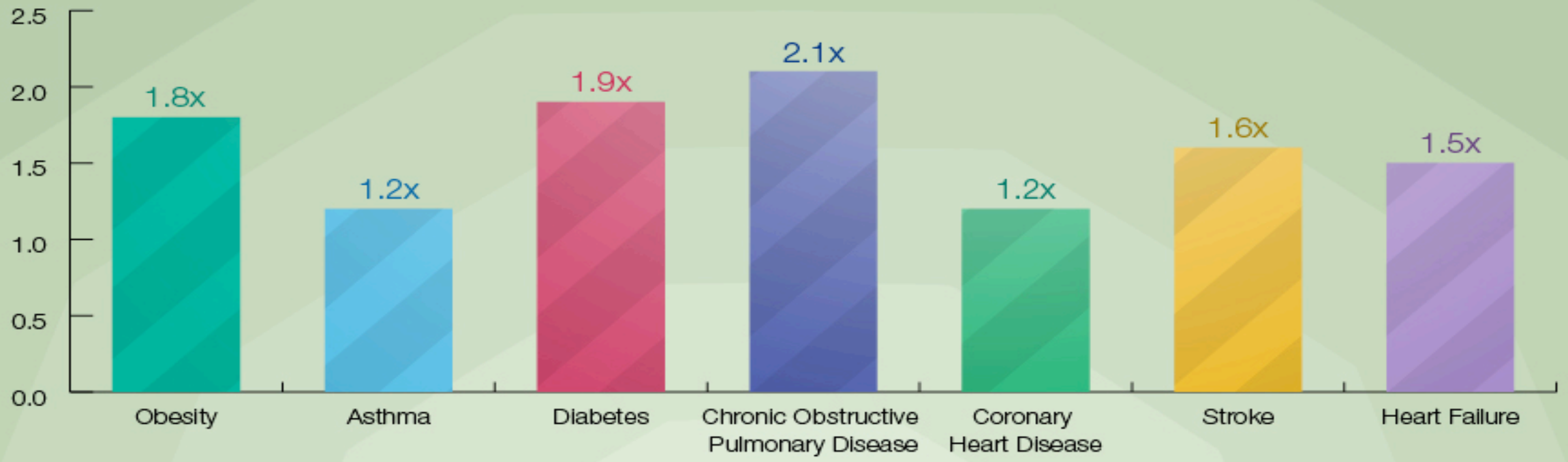
- Introduction
- The importance of physical activity in mental health recovery and rehabilitation and the unique role of physiotherapy within this
- Integrating with other therapeutic approaches and the multidisciplinary team
- The unique challenges of working in secure settings
- Overcoming barriers, ensuring equal access and measuring impact

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

World Health Organization (2024)

Adults with severe mental illness (SMI) are more likely to have physical health conditions

When compared to **the general population** of the same age group, **people with severe mental illness (SMI)* aged 15-74** are more likely to have:



**Sample of people with SMI registered with a general practice*

THE IMPORTANCE OF PHYSICAL ACTIVITY IN MENTAL HEALTH RECOVERY

- Physical activity and mental wellbeing
- Improved mood and self esteem
- Stress and anxiety reduction
- Treating depression
- Reduced symptoms and improved function
- Improved sleep quality
- Endless opportunities – something to suit everyone!

THE ROLE OF PHYSIOTHERAPY IN SECURE MENTAL HEALTH SERVICES

- Healthcare professional who looks at the body as a whole and can give important holistic education and advice to service users.
- BUT is also able to give specific education, advice and treatment – MSK, neuro, FND, respiratory, falls, frailty, mobility aids, manual handling, pain, chronic pain, rehabilitation.
- Interventions – specific targeted exercises, rehabilitation, groups, aerobic, strength, balance, relaxation, mindfulness, tai chi.
- Screening, referrals and pathways
- Specialist mental health physiotherapist – understanding of different mental health conditions, working with service users to overcome barriers, therapeutic relationship
- Functional, person-centred, promoting independence, improving confidence, preventative care, alternative/adjunct to medication
- Early intervention – prevention of other comorbidities

INTEGRATING WITH OTHER THERAPEUTIC APPROACHES AND THE MULTIDISCIPLINARY TEAM

- Psychiatry, psychology, occupational therapy, nursing, healthcare assistants, activity coordinators, gym instructors, speech and language therapy, dietetics, art/music therapy …
- Be aware of repetition
- Formulation
- Holistic – whole person-centred approach
- Overlap – right person, right time, right place
- What does the service user want?

THE UNIQUE CHALLENGES OF WORKING IN SECURE SETTINGS

- Personal safety
- Environmental factors
- Lone working may not be possible
- Dealing with challenging behaviours and distressing situations
- Nonadherence
- Medication
- MH legislation – MHA/ MCA / sections

OVERCOMING BARRIERS, ENSURING EQUAL ACCESS AND MEASURING IMPACT

- Building therapeutic relationships
- Building relationships with ward staff
- Risk assessment
- Equality and reducing health inequalities
- Adapting intervention to individual need
- Empowerment / reducing stigma
- Outcome measures (physio specific and general e.g. SIMPAQ)
- Therapeutic alternatives/adjuncts to medication
- Peer support

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