# **INCREASING PATIENT ENGAGEMENT: THERAPEUTIC GROUP ON** ACUTE MENTAL HEALTH INPATIENT UNIT (AATU)

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# Humber River **Health** Lighting New Ways in Healthcare<sup>™</sup>

### DESCRIPTION

Patients admitted with acute exacerbation of psychotic disorders present with increased clinical risk of responsive or disorganized behaviours. Due to the unpredictability of the therapeutic milieu, recreation therapy was not previously offered to patients. At Humber River Health (HRH) the goal is to proactively engage with patients to minimize boredom, improve therapeutic rapport and reduce aggression on the unit. Additionally, AATU clinicians can further assess mental status and functioning: attention,

### **LESSONS LEARNED**

Improving patient engagement through groups by leveraging the frontline clinicians to drive meaningful change for acutely ill mental health patients.

- Team Leader assigned an RN to co-facilitate groups
- RN assigned to groups has specific duties to identify patients, notify security, communicate with Recreation Therapist and stay for the duration of the group,
- Identified key stakeholders including Recreation Therapist, frontline nursing staff, resource person, and management,
- Created a working group
- Collaboratively determined the eligibility criteria for patients.

focus, cognition, ability to follow instructions, and appropriate socialization. To support this mission, the AATU team collaborated with the Recreation Therapy team to implement groups.

## **OBJECTIVE**

To implement collaborative therapeutic group programming in the AATU utilizing a Plan-Do-Study-Act model.

## **ACTIONS TAKEN**

Developed a working group with frontline nursing, recreation therapy, and leadership to:

- Determine the eligibility criteria for patients
- Identify the appropriate staffing supports to ensure staff and patient safety: 1 RN, 1 Recreation Therapist and 1 security guard
- Purchase the appropriate equipment for supervised patient use
- Establish a set time to run groups based on feedback from

- Updated Daily Nursing Assignment sheet to reflect added RN responsibility
- Incorporated the expectation and education in the orientation manual for new hires.
- Updated Standard of Care and policies to reflect expectation of nursing collaboration in providing therapeutic group programming on the unit
- Measured the frequency of groups on the Quality Board
- Tracked patient attendance and response
- Identified barriers when groups did not occur
- Created education materials to support nursing: assessment criteria, nursing responses
- Incorporated the expectation and education in the orientation manual for new hires
- Identified barrier was consistent nursing support, lack of preparation

- Determined appropriate staffing supports to ensure staff and patient safety: 1 RN, 1 Recreation Therapist and 1 Security Guard
  - Established a set time to run groups Tuesday and Thursday 1300-1330
    - Purchased appropriate equipment for supervised patient use
  - Created education materials to support nursing: assessment criteria, nursing responses
- Regular check-ins and emails sent out to staff to provide updates regarding groups, including kudos and reminders

### Figure 1.

PDSA cycle used to support the implementation of groups on the AATU.

Inclusion Criteria	Exclusion Criteria
<ul> <li>Improvements in the patient's behaviour and mental status</li> </ul>	Refusing medications
<ul> <li>Patient's positive response to antipsychotics</li> </ul>	<ul> <li>Irritable, labile, unpredictable</li> </ul>
<ul> <li>Reduction in PRN medication usage to manage emotions</li> </ul>	Sedated or medically unwell

### frontline nurses.

- To ensure sustainability of the initiative:
  - Education materials were created to support nursing: assessment criteria, nursing responses
  - Incorporated the nursing expectations into new hires orientation manual for the AATU.

Reduction in FRN medication usage to manage emotions • Patient's ability to follow instructions • Withdrawing from substances • Patient's ability to respond to redirection • Grossly disorganized with psychotic symptoms • Patient's ability to focus on simple tasks until completion Risk of elopement • Patient's increased insight or awareness of their surroundings • Not following instructions • In isolation precautions

### Figure 2.

Group therapy Inclusion and Exclusion Criteria, co-developed by frontline nursing and Recreation Therapy.

## **SUMMARY OF RESULTS**

Therapeutic groups are currently being offered to adult acute mental health inpatients twice a week, using a collaborative Recreation Therapy and Nursing model. Anecdotal feedback from patients and staff have highlighted the positive impacts of groups on patient experience. Patient engagement is also seen through the consistent group attendance. Barriers that prevent groups from occurring are identified and brought forward by the group facilitators to be addressed by the working group.

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