

Collaborative Therapeutic Interventions During Challenging Times



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Aims and Hypothesis

By combining the Occupational Therapy and Psychology group interventions we would expect to see a similar attendance rate combined in comparison to if the groups were being run separately during the pandemic.

Background

There were significant disruptions in services delivered by healthcare professionals during the COVID-19 crisis. This posed a challenge for our service users, partly due to strict but necessary social distancing measures.

Therapeutic interventions offered are an integral part of the recovery pathway, and amidst the crisis, our professionals were able to **think creatively and offer joint therapeutic interventions between Psychology and Occupational Therapy services**, with the aim of continuing care delivery for our service users and **maintaining their general well-being** during such unprecedented times.

Method

We developed two specific trial groups:

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- 1 Music and Emotional Regulation
 - 2 Sensory and Anxiety Management

Separate groups with common overlap were grouped together to run as a single joint working group whilst allowing each discipline to ensure their goals and outcome measures were still being fulfilled.

The two groups were scheduled over **4 & 8 weeks respectively**, open to all service users from the female high dependency unit, with the intention of reviewing attendance rates during the period.

Results



59%
Increase

Music and
Emotional Regulation

31%
Increase

Sensory and
Anxiety Management

We saw an increase in attendance rates in comparison to the average attendance rate in each group run separately.

Conclusions

- 1 Combining the therapeutic groups led to an **increase in attendance** rates during the pandemic.
- 2 The service users have **responded positively** to the collaborative interventions offered.

Next Steps

We would aim to **continue running the combined therapeutic interventions** and monitor attendance rates, satisfaction surveys and relevant outcome measures as restrictions ease.

Collaborative methods of working may help services prepare in advance of any future unforeseen events, with the aim of causing minimal disruption of clinical service delivery.