



Green Walking Project Case Study

South West Yorkshire Partnership NHS Foundation Trust: Walking Group

Project Description

In June 2018, the occupational therapy assistants (OTAs) at the Priestley Unit, Dewsbury utilised the sufficient staffing levels and pleasant weather to set up the group; they felt the group would help reduce boredom on the ward and promote healthy and active lifestyles. Prior to the establishment of the walking group, patients with leave were able to access organised trips to the shops, bowling, and canal trips as ways to spend time outside of the hospital and also to access their function in the community in preparation for discharge. The OTAs felt that the ward atmosphere could be lightened and pushed the idea forward at a team meeting.

Prior to embarking on the walk, it is necessary to check with the nurse in charge to confirm which patients can leave and to be aware of any potential risks. The patients can join the group by approaching staff or staff may approach patients to recommend joining the group. In order to join the group, the OTAs consider how patients interact in groups, their health, their leave status, and if they have participated before (in order to prioritise patients who have not had a chance). There needs to be a ratio of 1 staff member to 3 patients to provide sufficient support during the activity. Sometimes 1 staff member to 2 patients and even 1:1 depending on the needs of the patient. The staff ensure that the Band 3 therapy assistants are contactable during the activity and record in the diary where the group has gone. When deciding where to go for the walk, the therapy team will discuss with patients beforehand; there is also a community meeting on the wards where patients can suggest locations but in order to manage risk effectively, a familiar route is used.

The group usually meets fortnightly and when the weather is nice, the group meets weekly. The average walk usually consists of 2 members of staff and 4 patients. Walks follow the Spen Valley Greenway and last about 2 hours total. In lieu or in addition to the main walks, the group also takes informal walks to the local duck pond.

Currently, there are only informal evaluations of the group through conversation with the occupational therapy manager.

At The Dales Unit, Halifax, once staffing levels allow, walking groups will be a more regular part of the service offer.

Benefits

Patient outcomes: By providing access to green spaces and a chance for physical activity, patient outcomes may improve as healthy behaviours are built (Branching Out, 2009).

Environmental/Financial: The activities of the walking group may not produce direct environmental and financial benefits, but could offer knock on effects in the future. The walking group could alleviate the stress within the ward and allow for staff to more efficiently operate the ward. Creating and maintaining a

walking group does not require many resources. The walking group places value into green spaces and protects them for the future.

Social: According to the staff, patients appeared to be frustrated on the ward and the walking group would help settle them. The activity promotes healthy living and can be done post-discharge. It is a financially accessible activity as patients do not require money to access the activity and offers a way to join a community.

Financial Appraisal

The OT budget funds the walking group and the only expense is the taxi trips.

Barriers encountered

Challenges to operating the walking group were:

- Staffing levels – Available staff members are needed to organise the walk; lack of staffing has reduced the frequency of a walking group in Halifax.
- Funding – When money has not been sufficient, the walking group cannot get to the site via taxis.
- Risk profile of patients – If patients have the potential to abscond, this poses challenges for staff.
- Mental state of patients – Patients not mentally fit enough cannot join the walk.
- Well-being of staff – When staff feel unwell and cannot join the group, then the group may not have sufficient staff to happen that day.
- Training of staff – Junior staff may feel overwhelmed and struggle with supporting the group during the activity.

Risks

Risk assessments for individual patients are done and are informally discussed before the walk.

What the team had to say

‘Currently, in Halifax when a walking group takes place, there are limited activities available in the hospital as there are not enough staff to facilitate both ward based activities and walking groups simultaneously.’

Prior to the set up of the walking group in Dewsbury the feedback was: ‘Patients need to access the outdoors particularly in the hot weather.’

At first the walking group was fortnightly but increased to weekly due to the positive uptake and ongoing warm weather during the summer.

For more information please contact:

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References

Branching Out. (2009). *Branching Out: Resource Guide Greenspace and Conservation on Referral*. Forestry Commission Scotland. Retrieved from <https://www.gcvgreennetwork.gov.uk/publications/237-branching-out-resource-guide-greenspace-and-conservation-on-referral>