

Exploring how physical activity can be better utilised within NHS Talking Therapies services to improve mental health outcomes

Case Study – Ealing NHS Talking Therapies

What is the service?

The **Running to Better Health** programme is based on the NHS Couch to 5k programme and Brain Train self-help guide. This free programme helps service users become more active, as well as supporting recovery and management of depression and anxiety.

The programme links to a local Park run to ensure social inclusion and sustainability, offering the opportunity to continue indefinitely after the course is complete.

The programme is 8 weeks in duration, with each session comprising of an hour of structured jogging or running, including a warm-up/cool down followed by an hour of psychoeducation with advice on activity and wellbeing, the links between mental health symptoms and activity, danger zones, activity diaries, goal setting and diet.

Facilitators took part in each session alongside service users to provide encouragement and motivation, fostering the idea of doing this 'journey' together.

The ethos of this course is to encourage people to become more active both inside and outside of the session via the formation of WhatsApp groups and signposting to local clubs/activities. This helped people to connect with others in the community to ensure longevity.



How do you identify and engage service users in physical activity?

Participants were required to meet the standard NHS Talking Therapies criteria and be registered with the Ealing NHS Talking Therapies service.

109 people seeking help from Ealing NHS Talking Therapies service were recruited with an age range from 21 to 86 years old with 91% of the participants being women.

'It has been amazing to see the positive impact our Running to Better Health course has had as part of Ealing NHS Talking Therapies work to increase access to psychological therapies for the borough's residents. The course has really demonstrated the link between getting active and improved mental wellbeing'.

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Have you measured the impact and if so, what have you found?

Of the 109 referrals received, 79 people started the programme and 27 dropped out for various reasons. The programme saw a recovery rate of more than 80% for the 52 participants who completed the course. For those that did not reach recovery, reliable changes were achieved.

Qualitative feedback included comments on improved wellbeing, being social again and achieving a goal they never thought they would.

The course showed that a structured running programme helps reduce depression and anxiety symptoms and increases individuals' wellbeing. Some participants came back to mentor others and encourage others in the running groups.



What challenges have you faced and how did you overcome them?

We noticed a reduction in participants over holiday periods and a discrepancy between the numbers of participants signed up compared to the numbers that started. We discovered that contacting participants a week before the start date acted as a reminder and provided encouragement and therefore reduced the number of nonstarters.

Referrals into the programme were a challenge for several reasons: therapists not feeling confident talking about physical activity or forgetting the offer due to other demands.

What is next for your service?

Plans moving forward include closer links with the community, developing other sporting modalities and adaption for long term condition programmes

This course has now been the basis of another new weight management service that is running alongside the NHS Talking Therapies service which includes three components: Physical (running/walking and remote cardio), Nutrition and Computerised Cognitive Behavioural Therapy (cCBT).