

Tell us about your idea/project:

New Sensations is a sensory modulation therapy program for mental health consumers at Hornsby Ku-Ring-Gai Hospitals Adult Mental Health Inpatient Unit (HKH AMHU). Sensory modulation refers to the process of regulating one's response to sensory stimuli through active engagement with the external environment. The use of sensory-based approaches has been demonstrated to provide welcoming, safe environments that foster self determination and autonomy in mental health care in which consumers are actively involved in the modality and delivery of their care (Sutton & Nicholson, 2011). In offering individually tailored, person-centred care New Sensations will consist of:

- 1. The introduction of personal sensory "tool kits" with the aim of providing consumers with individualised therapeutic strategies for self-soothing, grounding and distress tolerance.
- 2. Purchasing 25 portable mp3 players and wireless headphones for individual consumer use to provide music therapy, guided meditations to help consumers "self soothe".
- 3. Purchasing 10 weighted blankets for use with highly distressed consumers to lower consumer distress, agitated, aggressive and violent behaviour.

The HKH AMHU Sensory Modulation Program will be implemented and managed by the unit Diversional and Occupational therapists, who will oversee the budget, purchasing and maintenance of the program, equipment and materials. Training in the use of sensory modulation equipment and materials will also be offered to allied health, medical and nursing staff, family members and carers.



Provide a case for change:

Sensory modulation therapy has been explored as an effective means of managing consumer distress, it also provides consumers with opportunities to learn how to manage their own distress independently. Providing consumers with the knowledge and tools to self-soothe and manage distress in the community may in turn lead to fewer instances of hospitalisation, need for acute care and over-reliance on psychiatric medications for mental health consumers.

New Sensations will also target reducing the use of seclusion and restraint (S&R) to manage consumer distress in mental health inpatient units. The 2017 NSW Health Review of seclusion, restraint and observation of consumers with a mental illness in NSW Health facilities (2017) recommends that:

"All acute mental health units and declared emergency departments should conduct a review of their facilities and implement minors capital works and equipment purchases to improve the therapeutic potential. This will support people to self-manage and assist in the prevention of seclusion and restraint."

At present, S&R is used at HKH AMHU to manage consumers experiencing acute distress, agitation and/or aggression. New Sensations will offer consumers opportunities to engage in alternative interventions such as the use of music and weighted blankets to self-regulate before S&R is considered to de-escalate and manage acute distress. Without alternative interventions to manage acute distress, S&R will continue to be utilised to manage complex consumer behaviour. Furthermore, the Review of seclusion, restraint and observation of consumers with a mental illness in NSW Health facilities (2017) has listed the above recommendation as requiring immediate implementation (within 6 months), supporting the immediacy and priority of this project in working towards the reduction of seclusion and restraint at HKH AMHU.



Please list how you will implement the project:

In progress: Research and development of sensory modulation therapy in an inpatient mental health unit. (Diversional therapists, recreation therapists, occupational therapists, clinical nurse specialist).

Within one month of receiving Innovation Program Prize: Consultation with relevant executive staff regarding purchasing of sensory modulation equipment. (Diversional and occupational therapists, NUM 1 and NUM 3, unit director.)

Within one month of receiving Innovation Program Prize: Purchasing of sensory modulation equipment from pre-researched suppliers. (Diversional and occupational therapists, NUM 3, unit director.)

Within one month of purchasing sensory modulation equipment: Establishing maintenance guidelines and practices for purchased sensory modulation equipment. (Diversional and occupational therapists, HKH MHDA environmental services manager.)

Within one month of purchasing sensory modulation equipment: Integration of sensory modulation equipment into group programs and 1:1 therapy sessions. (Diversional therapists, recreation therapists, occupational therapists, clinical nurse specialist.)

Within one week of implementing sensory modulation program: Commence on-admission consumer surveys. (Diversional therapists, recreation therapists, occupational therapists, clinical nurse specialist)

Within one month of implementing sensory modulation program: Commence consumer feedback surveys on discharge. (Diversional therapists, recreation therapists, occupational therapists, clinical nurse specialist.)

Within one month of implementing sensory modulation program - ongoing: Data collection from consumer feedback surveys, evaluation of family and carer feedback, data collection of monthly S&R and IIMS reports. (Diversional, recreation and occupational therapists.)



How will you measure/evaluate your project:

Outcome 1. Reduction of the use of seclusion and restraint.

Evaluation: Monthly and annual reviews of the number of S&R and IIMS reports compared to previous data

Outcome 2. Reduction of consumer distress.

Evaluation: Surveying consumers on admission and discharge using a brief questionnaire addressing if they engaged in sensory-based therapies and how they have influenced their experience and management of psychological distress.

Families and carers of consumers are also invited to attend regular family support meetings in which feedback regarding sensory-based interventions will be discussed and assessed on an on-going basis.

Self-reported distress scales completed by consumers before and after engaging in sensory modulation therapy.

Outcome 3. Increased consumer engagement in non-pharmacological interventions

Evaluation: Monthly reviews of the number of consumers engaged in sensory-based interventions with the aim of engaging at least 50% of consumers within a monthly period.

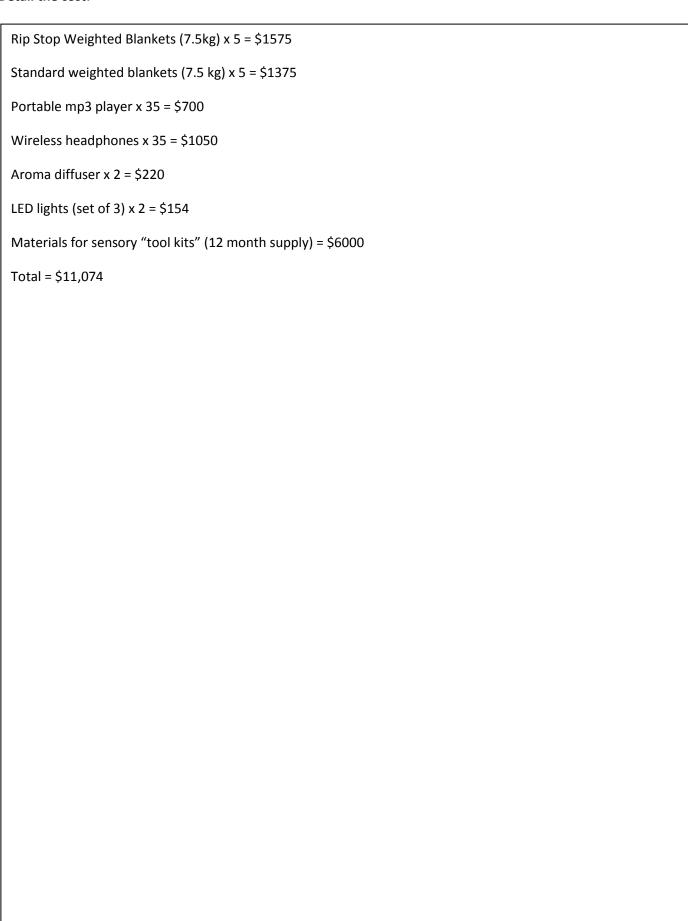
Background Research:

A consumer survey conducted in July 2018 by diversional therapists at HKH AMHU produced the following findings:

- •90% of consumers agreed that Sensory Modulation resources would help reduce seclusion rates and improve psychological distress. The remaining 10% of consumers were unsure.
- •75% of consumers agreed that they would find the use of a weighted blanket most effective in reducing distress.
- •80% of consumers reported that previous sensory modulation therapy had been effective in improving their mood.
- •Other symptoms that were effectively reduced with the use of sensory modulation therapy were agitation, anxiety and anger. Limited data was available on the reduction of hearing voices, boredom, drug and alcohol withdrawal and alertness.



Detail the cost:





Additional comments/references:



Lebel. J., Champagne, T. (2010). Integrating sensory and trauma-informed interventions: a Massachusetts state initiative, part 2. Special Interest Section Quarterly: Mental Health 33(2). American Occupational Association Inc.

Lebel, J. Goldstein, R. (2005). The economic cost of using restraint and the value added by restraint elimination and reduction. Psychiatric Services 56. Pp.1109-1114.

NSW Health (2017) Review of seclusion, restraint and observation of consumers with a mental illness in NSW Health facilities.

Sutton, D., & Nicholson, E. (2011). Sensory modulation in acute mental health wards: A qualitative study of staff and service user perspectives. Auckland, New Zealand: Te Pou o Te Whakaaro Nui.

Sensory resources:

http://tecsol.com.au/cms123/index.php?option=com_content&view=article&id=50&category_id=20&main_cat =20&Itemid=89