



Complementary Therapy Project

Evaluation

Summer 2008

Introduction

Aims of the Evaluation:

- To conduct an evaluation of the Complementary Therapy Project.
- To include all relevant groups associated with the project, including therapists, clients and health professionals.
- To assess the project in terms of the current project's structure and facilities, the health professionals referral service, advertising, client and therapist opinions and the organisation of the project.
- To develop a set of recommendations for extensions and improvements to the project.

The Current Complementary Therapy Project

Background:

East End Health's Complementary Therapy Project was established in 2001. The project initially ran one afternoon per week and provided both paid and free therapy sessions.

In November 2007, the project was expanded to run five days a week, between 9am and 5pm. The service is currently staffed by five volunteer therapists including two students from Newcastle College's Complementary Therapy Department and three trained local therapists. All appointments are free of charge to clients and to health professionals who make referrals.

The Complementary Therapy Project is aimed at helping members of the local community to access necessary therapies, who otherwise would be unable to access such services for financial or accessibility reasons.

Therapies:

The current Complementary Therapy Project has nine therapies, offered by the following therapists:

- Acupressure – Rob Penman
- Aromatherapy Massage – Michelle Jones & Louise Bell
- Bowen Therapy – Steve Austin
- Hot Stone Massage – Sandra Wagner & Mark Gaul
- Indian Head Massage – Sandra Wagner & Louise Bell
- Massage – Michelle Jones & Louise Bell
- Reflexology – Louise Bell
- Sports Massage – Michelle Jones & Mark Gaul
- Swedish Massage – Michelle Jones, Sandra Wagner & Mark Gaul

The Hot Stone Massage and the Indian Head Massage are only going to be available once the stones and massage chair have been purchased using the O2, It's Your Community funding.

Appointments:

When the second treatment room is open, and with the current therapists all working, the project will have up to 30 appointments each week. When the new students start (if there are two new students alongside Louise) there will be a maximum of 44 appointments each week. These are divided as shown:

Current Appointments:

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|---------------|------------------|------------------|---------------|---------------|----------------|
| Room 1 | Michelle: | | Mark: | | Louise: |
| AM | 2 | Rob: 2 | 2 | XXX | 2 |
| PM | 3 | Sandra: 2 | 3 | XXX | 2 |
| Room 2 | | | Steve: | Steve: | |
| AM | XXX | XXX | 2 | 2 | XXX |
| PM | XXX | XXX | 4 | 4 | XXX |

Appointments (with New Students included):

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|---------------|--------------------|------------------|---------------|-----------------|-----------------|
| Room 1 | Michelle: | | Mark: | Student: | Louise: |
| AM | 2 | Rob: 2 | 2 | 2 | 2 |
| PM | 3 | Sandra: 2 | 3 | 3 | 2 |
| Room 2 | | Michelle: | Steve: | Steve: | Student: |
| AM | Ncl College | 2 | 2 | 2 | 2 |
| PM | Ncl College | 3 | 4 | 4 | 2/3 |

XXX – room available for new therapist

Student: - available spaces for students

Therapists:

The balance of work on each therapist currently means that Michelle and Steve receive the most referrals (See table below).

| Therapist | Current no. of Clients |
|-----------|------------------------|
| Sandra | 1 |
| Rob | 1 |
| Michelle | 9 |
| Steve | 10 |
| Louise | 7 |
| Mark | Yet to Start |

Once the new room is open, Steve will be working two days each week, and will be able to see a maximum of twelve people.

Michelle will be returning to college in September and will then only be available for sessions on a Monday. There will therefore be a need to reduce the number of clients that Michelle has. This can be achieved by transferring some of Michelle's clients to Mark who will be starting in September. If funding is secured to allow



Michelle to work as a paid therapist for the project, she will then work two days each week, for 15 hours, and will be able to see a maximum of ten clients per week.

Louise is planning to return to college to complete her third year and work towards a BA (Hons) in Professional Practice in Complementary Therapies. There is the possibility that she may be able to stay with the charity and to again use it as a placement.

Sandra is currently able to volunteer for an afternoon each week. At present this is on a Tuesday, although she does work other days too. With the college taking over the room each Monday, there will be a need for Sandra to fix her day as a Tuesday.

Rob is currently only available one morning each week. At present this is a Tuesday morning. Rob is also returning to college in September to study physiotherapy. He will therefore be looking to use the project as placement for his course and will therefore require more clients. It may be that he decides to volunteer more time each week to the project.

Clients:

Clients currently receive an initial block of six treatments and are then assessed by the therapist as to whether they could benefit from more sessions.

For the majority of clients it is felt that a second or third block of treatments may be necessary. In this case, the client is either kept on by their current therapist, or if it is felt that they may benefit from a different type of therapy, they are moved to a different therapist.

If following the second or third block of treatments, a client still requires further sessions, they are usually moved onto fortnightly and then monthly appointments and therefore the amount of treatment they are receiving is gradually reduced and becomes a maintenance programme rather than a treatment programme.

Health Professionals Referral Service

The Complementary Therapy Project operates on a GP and Health Professional referral service basis.

The project currently receives referrals from seven GP Surgeries, including fifteen GPs, four Primary Care Mental Health Workers, one Community Health Trainer and two Clinical Psychologists. (See Table for breakdown of referrals).

The GP practices which currently refer to the project are:

Dr Wilkins & Partners: 42 Heaton Road, NE6 1SE. Tel: 0191 265 5911

Dr Lovedale & Partners: Heaton Medical Centre, 37A Heaton Road, NE6 1TH. Tel: 0191 265 8121

Dr Robson & Partners: Biddlestone Health Group, Biddlestone Road, NE6 5SL. Tel: 0191 265 5755.

Dr Schofield & Partners: St Anthony's Health Centre, St Anthony's Road, NE6 2NN. Tel: 0191 219 6100

Dr Pearston & Partners: Walker Medical Group, Church Walk, NE6 3BS. Tel: 0191 262 0444

Drs Dalal & Partner: Broadway Medical Group, 164 Great North Road, NE3 5JP. Tel: 0191 213 5005

Dr Gray & Partners: Thornfield Medical Group, Molineux Street, NE6 1SG. Tel: 0191 275 5740.

There are two further GP Surgeries within the NE6 postcode; these are Dr White and Partners at the Molineux NHS Centre and the Welbeck Road Medical Practice. At present these two surgeries do not refer to the project.

Once the new treatment room is established and the new college students have started their placement, it will be possible to contact the surgeries who do not refer, as well as those who have referred only a small number of clients, with the aim of developing new and better relationships with these practices.

With the introduction of the massage chair to the treatment rooms, it will also be possible to target new client groups, such as pregnant women and those with physical conditions which restrict their ability to lie flat. This will allow the project to access a wider client base and will provide useful case studies for the College's Placement Students.

As shown by the breakdown of referrals, the Primary Care Mental Health Team (City East) and 37A Heaton Road Medical Centre make the most referrals to the project.

| Health Service | Referring Doctor/ Health Professional | Number of Referrals |
|--|--|------------------------------------|
| <u>37A Heaton Road Medical Centre</u> | A. Willins A. Leeder M. J. Woolley | 5 4 2 Total: 11 |
| <u>42 Heaton Road Medical Centre</u> | D. E. M. Wilkins P. H. Brookes | 1 1 Total: 2 |
| <u>Biddlestone Health Group</u> | P. M. Carrington A. M. S. Craig | 1 1 Total: 2 |
| <u>Broadway Medical Centre</u> | M. Chaudhary | 1 Total: 1 |
| <u>Clinical Psychology Services, Newcastle General Hospital</u> | S. Wrigley J. Welsh | 1 2 Total: 3 |
| <u>Community Health Trainers</u> | S. Ritson | 1 Total: 1 |
| <u>Primary Care Mental Health Workers (City East)</u> | W. Mead D. Hildreth C. Hopkins S. Schofield | 13 2 3 2 Total: 20 |
| <u>St Anthony's Health Centre</u> | W. Ross N. Cavanagh | 1 1 Total: 2 |
| <u>Thornfield Medical Group</u> | A. Hogg R. L. Wakerley | 1 1 Total: 2 |
| <u>Walker Medical Group</u> | G. Pearston A. Truefitt H. Jones J. Clark | 2 1 1 1 Total: 5 |
| | | Overall Total: 49 referrals |

Advertising the Project

At present there are no general advertisements for the service in the local area. The nine GP practices within the area were contacted when the new leaflets were developed and seven of the practices have since made referrals to the service.

New Client Groups:

With the development of the second treatment room, and the purchasing of the massage chair, it will be possible to target new client groups with the service. Community midwives and older people's services will be areas to focus on, as the massage chair does not require clients to be able to lie flat.

In order to reach these new client groups it will be necessary to contact the community midwives based at each of the GP practices, and it may also be possible to contact the Maternity Unit at the RVI. To be able to access older people, it will be necessary to contact local older people's housing organisations, clubs, community groups and care facilities.

Ways to Advertise:

In order to advertise the service to these new client groups, it will be necessary to locate the relevant organisations across the NE6 area and then to do a leaflet drop to promote the service to these new groups. This should be done once the second treatment room is established and the new students have started their placement.

A further way to advertise the service will be to ensure that the project is listed as a separate entry in directories and databases. This will make it easier for both clients and health professionals to identify the project, rather than having to search for East End Health and then for the Complementary Therapy Project.

Once the new treatment room is established, it will also be possible to contact local newspapers to advertise the success of the O2 It's Your Community bid. Only six awards are given each month and the project was one of the successful bids for June.

Alongside advertising the service to local groups and organisations, it will be necessary to develop the Complementary Therapies page on the website. At present only five of the nine therapies are listed on the page, the further four therapies will therefore need to be added. Alongside the brief descriptions given for each of the therapies, it will be possible to add links to the new information sheets that are being developed for each of the therapies. These information sheets will provide potential clients with details of what each of the therapies entails as well as details such as what to wear, how long a treatment session will last and also what the potential benefits of the treatment are.

Health Professionals:

Alongside the advertising of the scheme to potential new clients, it will be necessary to contact more health professionals based within the NE6 area. Similar methods as mentioned above can be used and it may also be beneficial to include the statement given by Wendy Mead, of the Primary Care Mental Health Team (City East), about the service:

“I am a mental health nurse working in the East End of the city. I have referred many people to East End Health’s Complementary Therapy Project. I believe that the range of therapies on offer can work as an adjunct to "traditional" approaches to mental health and well being, as they can help with some of the more problematic symptoms of depression and anxiety such as poor sleep.

From feedback, patients referred there have found the service extremely beneficial, as the treatments have helped them cope with their symptoms.

Others have found the service beneficial in terms of having time to themselves to relax. The feedback has been helpful to me as a referrer to the service as good feedback often acts as a recommendation for others. I can't praise the service highly enough.”

Wendy Mead
Primary Care Mental Health Worker
(City East)

Clients & Therapists

The project currently has 53 active referrals. Where totals do not equal 53, no data was available. Where totals are higher than 53, clients were referred for more than one condition.

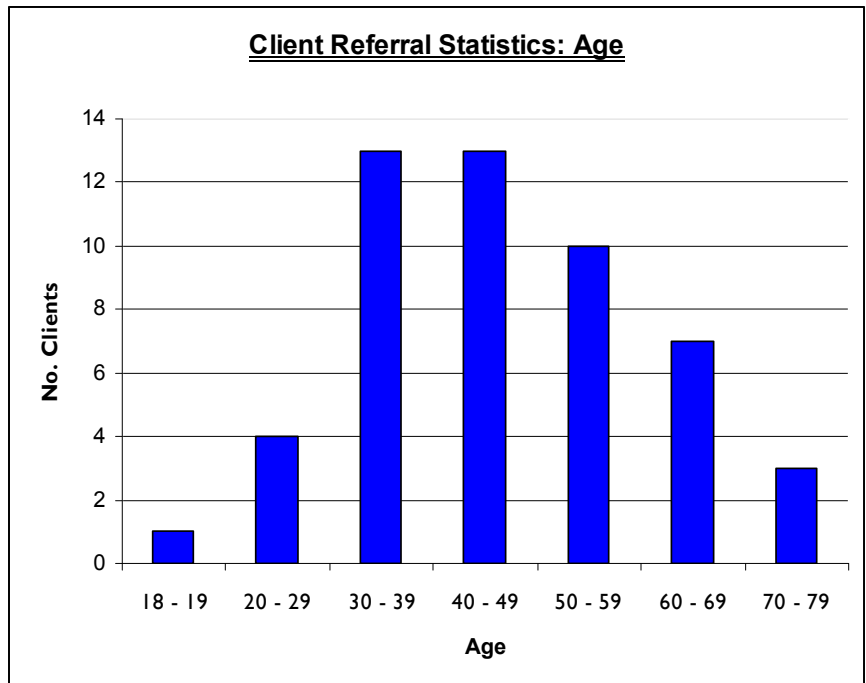
Client Statistics and Opinions:

The clients who chose to give their age fitted into the following age boundaries (see Graph 1), showing that most clients referred to the service are between 30 and 49 years:

Graph 1: Client Referrals, shown by Age of Client

Client Ages:

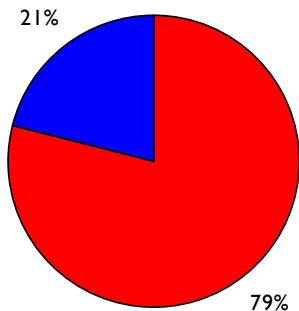
- 18 – 19 Years: 1 client
- 20 – 29 Years: 4 clients
- 30 – 39 Years: 13 clients
- 40 – 49 Years: 13 clients
- 50 – 59 Years: 10 clients
- 60 – 69 Years: 7 clients
- 70 – 79 Years: 3 clients



Graph 2: Client Referrals, shown by Gender of Client

Client Referral Statistics: Gender

- Female
- Male



The clients were also divided according to their gender.

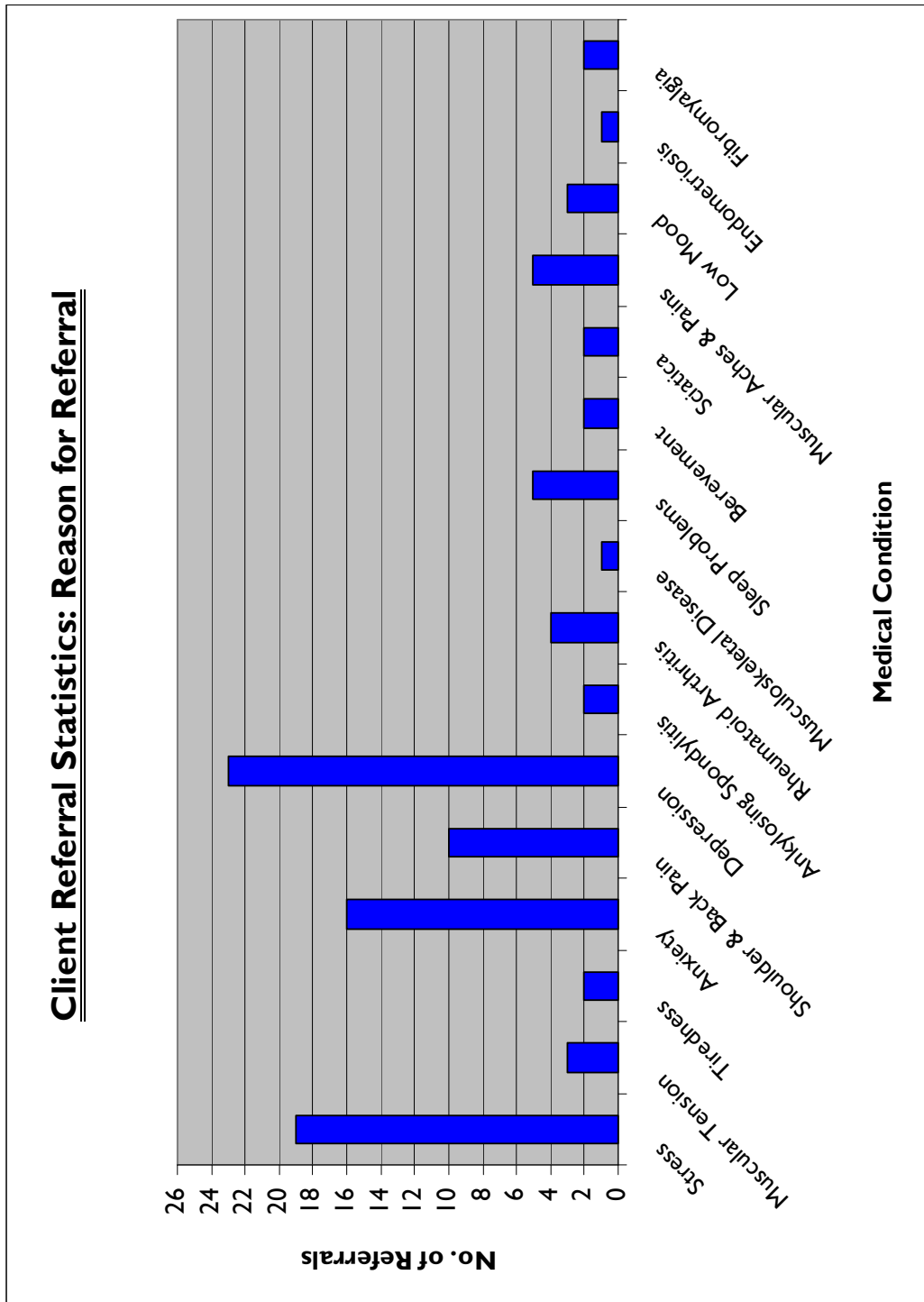
Eleven of the referrals made to the service were for male clients and forty-two were for female clients (see Graph 2), showing an obvious bias.

In the future, it will be necessary to promote the service to male clients more.



The referrals were divided according to the medical conditions for which they were referred. As shown, the most frequent reasons for referral were stress, anxiety and depression.

Graph 3: Client Referrals, shown by Reason for Referral



At the end of a block of six sessions, clients are asked to complete a short evaluation about the project. Eleven clients have so far been asked to complete a form. Where totals do not equal eleven, no answer was given.

Service Organisation

1) For your first appointment how easy was it to find the building?

Very Easy: 8 Easy: 3 Difficult: 0 Very Difficult: 0

2) How easy was it to get a referral from your doctor?

Very Easy: 4 Easy: 6 Difficult: 0 Very difficult: 0

3) If you received a leaflet about the service, how usefulness was the leaflet?

Very Useful: 4 Useful: 2 Not Useful: 0 Did Not Receive a Leaflet: 1

The Therapy Sessions

4) How clear were the explanations about the therapies?

Very Clear: 8 Clear: 1 Unclear: 0 Very Unclear: 0

5) Did the therapy you were offered help improve your overall sense of wellbeing?

Very Much: 11 A Little: 0 Not At All: 0

6) Did the therapy help alleviate the main symptoms of your condition?

Yes: 11 No: 0 Not Sure: 0

7) How would you rate this service?

Very Good: 11 Good: 0 Satisfactory: 0 Needs Improvement: 0

8) Do you think the room used for the therapy sessions was:

Very Suitable: 11 Suitable: 0 Not Suitable: 0 Very Unsuitable: 0

9) Would you recommend this service to a friend?

Yes: 11 No: 0

Further comments made by Clients:

“Thank you for all your help.”

“Have really enjoyed and feel that the treatments have made a huge difference to my state of mind and body.”

“The Complementary Therapy Service gave me a chance to experience therapy that I could not find myself.”

“This has been a wonderful experience. The staff are lovely and it has been the highlight of my week to come here.”

“Very friendly and informative. Thank you very much!”

“I have benefited greatly from this service and I would pay to use this service.”

“The girls are excellent.”

“The East End Health Project has a very warm and friendly atmosphere. I found the people I met friendly. Because of the massages I received, I felt they helped me, but because of my anxiety and depression only on the day. They helped me relax a bit better. Michelle has a very good approach, and is very warm and friendly and understanding.”

“I found my therapy very useful and I was surprised how much tension I have in my neck and upper and lower back. It’s a pity that my six sessions went over so quickly. I found my therapist, Sandra, really helpful. Thank you.”

The therapists also ask clients to complete a comments form about the project. So far six clients have completed the form.

1. How did you feel after your first treatment?

Tired, relaxed, a little sore. Surprised at the amount of tension. I felt a little nervous.

I felt anxious when I arrived. Michelle was easy to talk to and the massage was very good, I felt a bit more relaxed.

Relaxed, clear headed and positive.

Very relaxed and calm.

Very relaxed.

I felt really great. I was very well treated. Clare is a really nice girl. She made me feel at ease. I could not wait for Mondays to come quick enough.

2. How did you feel by the end of the course of treatments?

Totally different, relaxed but I still have some tension. If it was possible I would like some further treatments please.

Although I felt more relaxed when the course finished, I am still anxious, but better than I was when I first came.

I definitely noticed a difference. My aches had eased up a lot and just my outlook was a lot more positive.

More relaxed and less stressed.

Pins and needles sensation has now gone from my calf muscles.

I have had my feet, neck and shoulders done. I felt like a new woman. My back was also done with care.



3. How has coming to the project helped you?

It has helped me relax and talk. I have found it really interesting and informative. It's a pity it went over so fast.

Because of my anxiety and depression it gave me a reason to get out and something to look forward to.

It's made me realise how important it is to look after and be more in tune with my body. In turn this has helped me stick to my healthy eating plan and lifestyle.

It has alleviated my stress levels and made me feel more calm in myself.

Shoulder pain has now seemed to have gone.

I feel that on Mondays, the day I went on, it was my special day, a time just for me. It made me feel a very important person.

4. Why do you think the therapy sessions helped you?

I have problems with stress and tension and I think that these sessions have helped alleviate some of this.

Because of my Anxiety and Depression it gave me a reason to get out and I looked forward to coming. The massages helped me to relax if only on the day.

I feel that as I usually have a lot of pain in certain areas of my body. It generally lowers my mood and can make me depressed. With these treatments it helps, as my aches have definitely become less intense.

Because they have improved how I felt before the treatments.

By easing certain pains.

I have mental health problems and at the time I was having my therapy it seemed to take some of my troubles away and made me feel good in myself.

5. Have you any other comments about the therapy sessions or the project in general?

I think it is really useful, and if more leaflets could be placed in more surgeries I think that a lot of people would also like this treatment. I think it is a very useful project.

I found the project a very warm and friendly environment. Michelle was very understanding and she helped me not only with my massage but also with her friendly chat, understanding and warmth.

I think that a lot of people would gain a lot from coming to these sessions.

Very professional and friendly service. Many thanks!

Enjoyed the course very much. At the end of that day I was very relaxed and slept well.

I have arthritis in my back and knees and found it a bit hard trying to get on the table. Clare was very good and what I did not know was that I could look on the computer to try and find foods for my pains.

6. Would you recommend the Complementary Therapy Project to a friend? Yes: 6 No: 0

Therapist Opinions:

The project is currently staffed by two student therapists from Newcastle College's Complementary Therapy Department and three qualified local therapists. A fourth qualified therapist is to start at the beginning of September. All six therapists volunteer for the project free of charge.

Organisation of the Diary:

Do you think the diary needs to be organised differently, if so how?

Louise: I find that the diary works well for me, especially being able to check it online.

Distribution of Clients to each Therapist:

Do you think each therapist gets a good mix of clients, or do some of the therapists get too many referrals?

Louise: Seems fine at the moment.

Mixture of conditions that you work with:

The project has had referrals for sixteen different medical conditions; do you think you get to see a good range of these?

Louise: Yes.

Organisation of the treatment rooms:

Do you like how the treatment rooms are set up? Is there any way that they could be improved?

Sandra: I quite like the layout.

Michelle: We should have a timetable for the rooms and a list of which therapists do which therapies so that each therapist knows when the others are in and what they can refer people for.

Louise: The treatment room is set out well.

Therapy Forms:

All the treatment record forms are going to be re-designed to make them simpler, can you think of any additional forms that would be useful? We are making forms and letters to go back to the referring doctors as feedback.

Louise: This may not be relevant to some, but I've been using aroma disclaimer forms, just in case a client has a reaction to one of the oils and an aftercare advice leaflet.

Equipment and Supplies in the Rooms:

What else does the project need or what else would you like in the rooms?

Michelle: A second diary will be needed to be used in the new treatment room. A trolley for the second room, to bring the oils closer to the table.

Sandra: A proper case for essential oils so you can find them easily, new relaxing music, colourful box for clothes, office chair, colour reflexology chart on the wall, full length Anatomy and Physiology poster on the door and pillows and heated pillows.

Mark: A trolley to put the hot stones on.

Feeling of the building

Is it welcoming to new clients and to you as a therapist? Anything that could be improved?

Sandra: Picture of the therapists on wall.

Would an info pack for new therapists be of use?

A user guide to the project for the therapists, so you had something to refer back to, giving details about how we get referrals, the forms we use, where everything is in the building etc.

Sandra: Yes.

Louise: Yeah, that would be a really good idea so all therapists knew they were following the same protocol.

Any other ideas?

Michelle: Some clients have a tendency to get attached to a therapist if they are treated by them for extended periods. To reduce the risk of this happening, in the future each therapist should only see a client for a single block of sessions before referring them onto a different therapist should they require further treatment.

Louise: Maybe we could employ a similar 3 strikes protocol that GPs use in order to deal with clients who fail to attend on a regular basis, e.g. if they fail to attend 3 sessions without prior notice, then they are referred back to their GPs with an explanation as to why.

Organisation of the Project

The project has now been running in its current form for nine months. With the expansion of the project to include a second treatment room, a new qualified therapist and with the future new student placements to be arranged, there is a need to assess the organisation and co-ordination of the project.

Treatment Forms:

The project currently uses eleven forms, as listed below. There is a need to condense the forms to make them more succinct and appropriate to the therapies offered by the project. With the introduction of the new therapies to the project, there is also a need to develop forms for Indian Head massage and Hot Stone massage, as well as forms to be used when sending feedback to the referring doctor or health professional.

| Treatment Forms: | Other Forms: | New Forms: |
|---|--|---|
| <ul style="list-style-type: none"> - Aromatherapy Consultation - Body Massage Consultation - Essential Oil Selection Sheet - Therapist Comments - Reflexology Chart - Reflexology Client Record | <ul style="list-style-type: none"> - Client Comments - Client Evaluation - Parental Consent | <ul style="list-style-type: none"> - Indian Head Massage Consultation - Hot Stone Massage Consultation - Referral Acknowledgement - Therapist Feedback and Letter - End of Treatment - No Response Acknowledgement - Aromatherapy Disclaimer - Aftercare Advice |

Laundry of Towels:

With the introduction of the second treatment room, there will be an increase in the number of towels used each week. There will therefore need to be a change in the way that the towels are sent for washing.

Suzy has said that she will be able to take the towels twice a week, possibly on a Tuesday and a Thursday and Shirley has said that she will be able to wash more over the weekend. With the increase in the number of loads for both Suzy and Shirley, there will be a need to increase the number of hours that each can count as having worked, or to introduce a pay scale, whereby they are each paid for the loads that they do. Suzy has said that being paid for the loads would be easier as it varies each week and at present she only adds one hour to the number of hours she has worked for doing the laundry.

Alternatively, it may be necessary to look for an outside company who can collect and wash the towels. Shirley feels that this would be best.

Treatment Rooms:

As suggested by the client evaluation forms, the current treatment room is well fitted out, however, to complete the room there is a need for some additional



decorations to be added. As suggested by the therapists there are a few additional items that they feel the room could use. These included: some different CDs of relaxing music, an office, or straight backed chair, a colour reflexology chart, a full length anatomy and physiology poster, a second diary and some pillows.

Contacting Clients and Referral Organisation:

When we contact a client for the first time, a letter is sent to the client telling them about their referral. They are asked to contact the project to arrange their first appointment. A letter is used rather than a phone call as the clients are often unable to say whether they can make an appointment if they are contacted out of the blue.

The problem with the referral letters is that a number of clients do not respond. In this case we try to contact the client by telephone to arrange their first session. If this then fails we do not contact the client further.

In the future, if the client fails to respond to the letter and the phone call, it may be advisable to send a letter to the referring doctor explaining that the client did not respond. A cut off point of three weeks can be set within which we would expect a client to respond.

There is a standard referral letter that is sent to each client. This currently informs the client of the referral, offers them a course of six treatments and gives details about the sessions. One of the therapists has suggested that it would be a good idea to add a paragraph explaining that this is a volunteer led project, that the project does not receive funding from the NHS but that we raise the necessary funds ourselves. It can also be added that there is no cost associated with the project but that donations are very much appreciated to help the project continue.

Alongside the referral letter the project is also going to start sending out information leaflets about the therapy that the client will be receiving. This will require the client to be allocated to a particular therapy, and therefore a therapist, before their referral letter can be sent. If the client is unable to attend on that particular day, it may be necessary to change the therapy they are going to receive. In this case, it may be necessary to have a back-up therapy that the client has been allocated to.

Health Professionals:

To help increase the profile of the project, two new forms are to be introduced. These are an acknowledgement form which will be sent to the health professional that makes the referral to the service and a feedback form, with cover letter that will be sent to the same doctor at the end of each block of six sessions. The therapists are to be responsible for sending each of these forms.

Recommendations

As a result of the evaluation, a number of recommendations can be made to improve the project:

GP & Health Professional Referrals:

- Make contact with GP surgeries within the NE6 area that do not refer.
- Contact new health professionals who work independently of doctors surgeries.
- Contact the GP surgeries and health professionals who have made only a small number of referrals to try and improve the relationship with these practices.

Advertising:

- Make contact with new health services such as maternity clinics and older people's services once the massage chair has been bought.
- Check listings for the project in databases and directories.
- Contact local newspapers to advertise the success of the O2 It's Your Community Bid.
- Add additional therapies and information sheets to the website.

Clients & Therapists:

- Promote the service to male clients.
- Promote to Health Professionals the range of medical conditions which can be treated by the therapies.
- Source and fund further equipment and supplies for treatment rooms.
- Produce an information pack for new therapists.

Organisation of the Project:

- Re-design each of the current therapy forms (set up a meeting to start this).
- Develop new forms as listed.
- Re-organised laundry of towels.
- Additional decorations for Treatment Room I.
- Add charity background information to referral letter.
- Develop information leaflets.
- Include information leaflets with referral letters.