PATIENT PARTICIPATION IN PSYCHOLOGY

Using a standardised engagement scale

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Introduction

Engagement in rehabilitation is associated with improved outcomes and functional recovery (Iosa et al., 2021). Research in stroke rehabilitation demonstrates that cognitive and mood factors influence participation levels (Yang & Kong, 2013). Given the complexity of neurorehabilitation populations, measuring engagement using a standardised tool supports quality improvement and equitable access to therapy.

Objectives

- To evaluate engagement in psychological sessions across two neurorehabilitation centres.
- Assess patient engagement in psychological sessions using a standardised tool.
- Identify factors that support or hinder engagement.
- Inform service development and quality improvement.

Standard

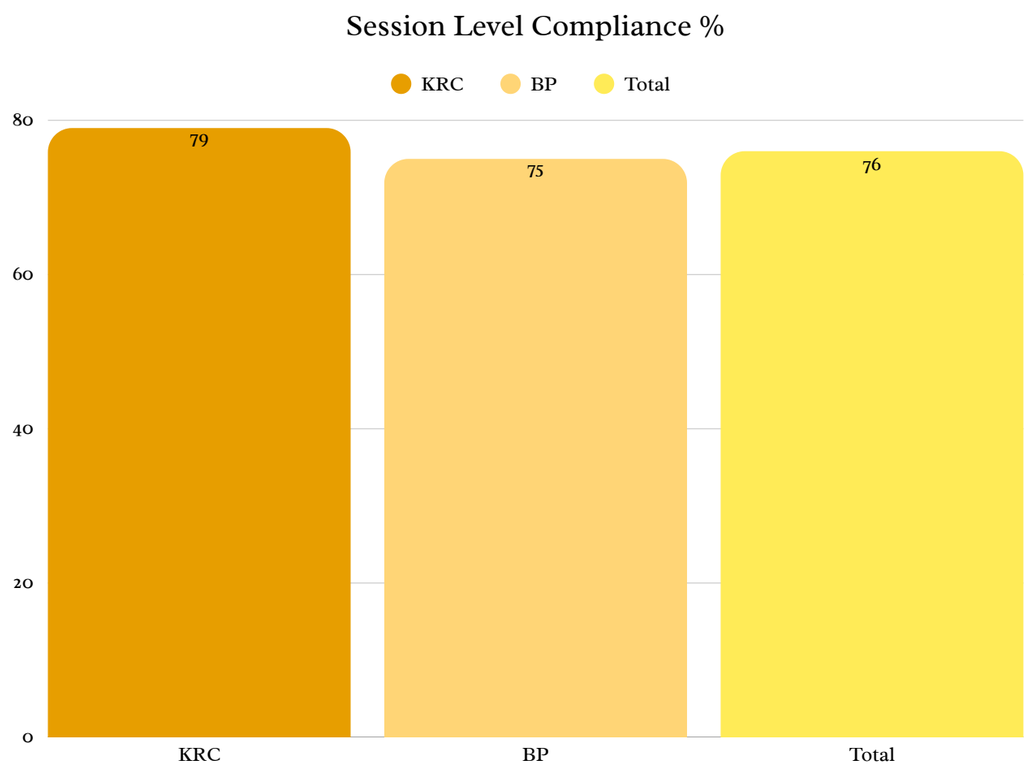
≥80% of each patient's 10 psychology sessions should be rated as "Active" or "Engaged" using the Modified Psychology Pittsburgh Rehabilitation Participation Scale (MP-PRPS).

Methodology

- Design: Retrospective Clinical Audit.
- Setting: Two Neurorehabilitation centres.
- Sample: 32 adult patients attending ≥10 psychology sessions.
- Measure: MP-PRPS (1–5 scale; 4–5 = meaningful engagement).
- Analysis: Descriptive statistics and thematic review of session notes.

Result

- 66% of patients met the 80% engagement standard.
- Average session-level engagement: 76%.
- Engagement fell below the agreed standard, indicating scope for service improvement.



Anlaysis

Gaps Identified:

- Session timings clash with family visits, outings and other therapies.
- Inconsistent contextual documentation alongside MP-PRPS scores.
- Reduced engagement in patients with aphasia/cognitive impairments.
- Cognitive and physical fatigue affected the ability to engage in sessions.

Key Findings

- Fatigue and poor sleep were commonly associated with lower engagement.
- Patients with aphasia or cognitive impairments showed reduced engagement.
- Engagement was affected by clashes with personal care, other therapies, and family visits.
- Poor physical health and pain were linked to lower participation.

Service improvements/ next steps

- Review psychology session timings for clients with fatigue.
- Add engagement contextual column to SOAP format session notes, alongside MP-PRPS scoring.
- Provide guidance on adapting sessions for clients with communication impairment.
- Re-audit planned within 6 months to evaluate impact of changes.

Conclusion

Patient engagement in psychological sessions did not meet the agreed 80% standard, with only two-thirds of patients achieving adequate engagement. Lower engagement was most strongly associated with fatigue, communication and cognitive impairments, and competing rehabilitation demands. These findings emphasise the importance of contextual information when analysing engagement in psychological intervention and the importance of adaptability in services to support meaningful participation.

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