

A Qualitative Investigation into the Variables Which Effect the Group Physiotherapy Treatment Sessions in the Rheumatology Unit

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Introduction

Intensive physiotherapy rehabilitation is reported to improve the physical outcomes of children with Rheumatological conditions. One option is to provide treatment as group therapies. At Great Ormond Street Hospital we provide group physiotherapy. These groups include children of all ages with different Rheumatological conditions. They are designed to improve muscles strength, joint range of movement, stamina and function. In a group setting the use of varied communication techniques is vital in ensuring the group is effective.

Methods

Observational analysis was conducted within daily group treatments over a 4 week period. Frequency of verbal and non verbal communication between physiotherapists and patients was recorded for two stages; the introductory rehabilitation session and the consecutive sessions. Semi-structured interviews were undertaken with the physiotherapists to determine their views of important communication strategies.

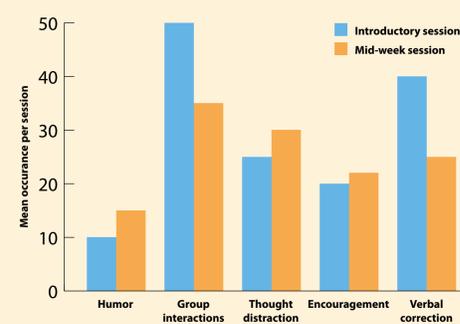
Results

A number of themes emerged as significant factors in influencing the children in the groups. These included touch (hands on facilitation of movement), facial expressions, emotional distraction (such as humor), thought distraction (such as shifting focus away from pain) and group distraction (interaction with other children). The physiotherapists used tone of voice, volume and eye contact to further encourage cooperation and compliance in the group setting.

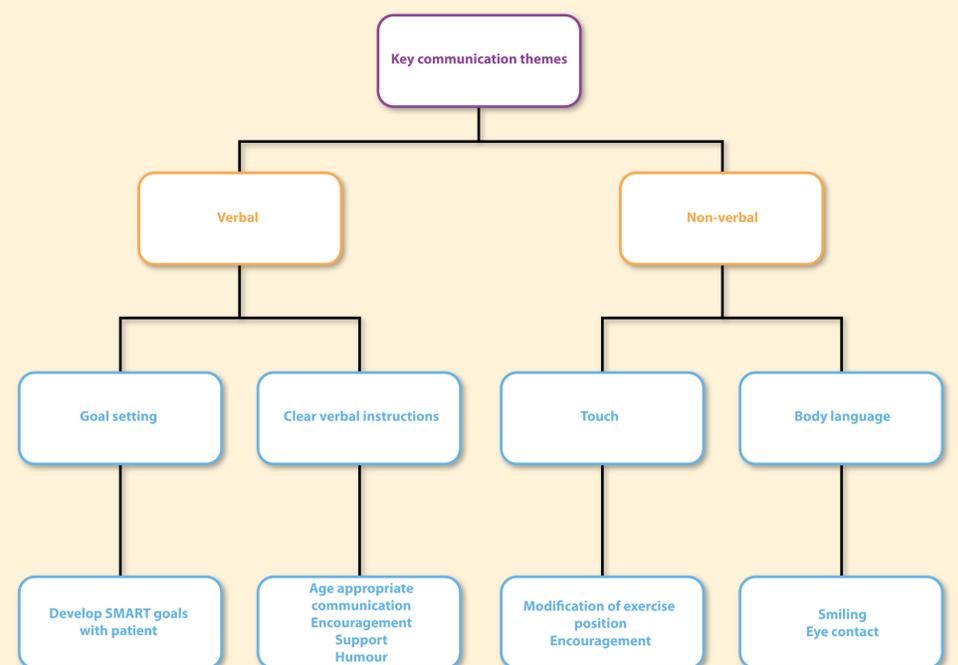
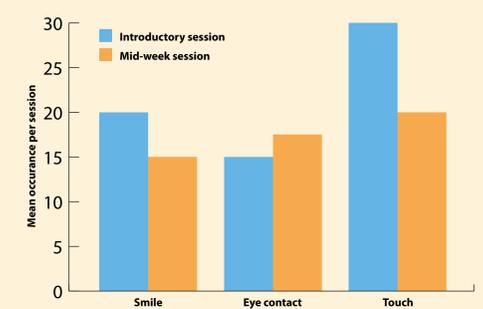
Themes resulting from the semi structured interviews included the importance of peer support and encouraging interaction between group members, clear communication of the goals and purpose of the group and use of verbal and non-verbal communication strategies to maintain momentum and effectiveness of the group.

Key differences between the introductory group session and subsequent sessions were identified. In the introductory sessions hands on facilitation was increased as the children were learning the correct technique to carry out the exercises. Group interaction was also increased in the initial session with the emphasis building rapport and familiarity between children. As the patients became more confident in carrying out the exercises more subtle non verbal communication was used with an increase in eye contact and gestures.

Verbal communication:



Non-verbal communication:



Conclusion

In physiotherapy group treatment sessions a wide range of verbal and non verbal communication skills are used. These are aimed at managing group dynamics and ensuring treatment is effective. In observing and analyzing the characteristics of this communication we noted differences between the initial session and subsequent group sessions. As participant confidence and skill increases less hands on facilitation and verbal correction is required. There is an increased emphasis on humor, distraction and encouragement in subsequent group sessions.