## ASSESSING FEASIBILITY OF A HEALTH AND WELLNESS INTERVENTION FOR ADULTS WITH SERIOUS MENTAL ILLNESS

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**Background**: Adults living with Serious Mental Illness (SMI) experience a reduced life expectancy of 10-25 years when compared to similar aged peers. The majority of premature deaths in adults with SMI are due to preventable physical health conditions. Health, exercise, and wellness habits are essential for individuals with SMI because regular exercise increases physical health and in turn leads to a positive effect on symptoms, mood, and wellbeing. The I-HOPE intervention (Integrating Healthy Habits Optimized by Community Participation and Engaged Learning) was developed to address the wellness needs of adults with SMI in a community-based setting. This interprofessional study collected pilot data while assessing the feasibility for future I-HOPE studies. Feasibility studies are crucial to successful implementation of higher level research yet are rare to be found in occupational therapy literature. **Purpose:** The purpose of this feasibility study is to investigate if the implementation of the I-HOPE intervention program which includes group intervention and 1:1 coaching is practical to deliver in a community based setting.

Methods: The I-HOPE project is an additional service to IMPACT, a team of interprofessional mental health providers for adults with SMI. The overall goal of IMPACT services is to reduce hospitalizations and keep members with SMI within the community. This study used a pre/post design examining outcomes for the physical and mental health of 8 members who receive services through IMPACT utilizing the I-HOPE curriculum. We utilized interdisciplinary faculty and students to deliver 1:1 coaching and group interventions to participants. Program dosage was completed 2 days a week (30 minutes of group intervention and 1 hour exercise) for 14 weeks. Group interventions focused on healthy habits, practical nutrition, stress management techniques, and exercise concepts. Inclusion criteria includes adults over the age of 21, receiving services through a PACT team, and medical clearance from a physician. This feasibility study reports recruitment rate, attendance, attrition, participant demographics, and fidelity rates. Feasibility data including physical and financial resources, personnel and supplies, and time spent for data collection will be analyzed prior to this presentation. Descriptive qualitative comments from participants will also be presented.

**Results**: We met 80% (8/10) of our recruitment goal, attendance rate was 89.88% (18.9/21; attended sessions/overall sessions; fraction), and attrition of 20% (2/10 did not complete program). Demographics include average age of 52.87% (SD=15.2: R= 45); ethnicity distribution of 5:3 (Caucasians: African-Americans), gender distribution of 5:3 (males: females). Overall average fidelity rate was 47.79%. Ongoing analysis for additional feasibility factors will be available at the time of research presentation. **Conclusion:** To date, the I-HOPE project appears feasible to deliver to adults with SMI in a community based setting based on attendance, recruitment and attrition rates. This information will inform our future implementation of the program.

**Relevance to Allied Health:** Allied health professionals may consider establishing feasibility to inform their personal research to strengthen its validity. Knowledge of this intervention approach for adults with SMI and its overall feasibility can help interprofessional teams collaborate to support patients in their health goals.