Adapting group support

Beth Scrimshaw 1 July 2021



stroke.org.uk

Stroke Association vision

Our vision is for there to be fewer strokes, and for people affected by stroke to get the help they need to live the best life they can.



Our Goals

Make stroke the priority it needs to be Ensure that everyone affected by stroke has access to the rehabilitation and lifelong support they need

Partner with people and communities to help them take action on stroke

How do we make a difference?



Peer support groups

We deliver 216 peer support groups across the UK

- Led by 1,120 Stroke Association volunteers
- Supporting 3,682 members

We also work with 238 independently run stroke support groups

COVID-19 and peer support

- Role of peer support in enabling people to cope became even more apparent
- Translating core values of mutuality, choice, control, equity and safety into remote environments
- Best response models co-produced, and not always online, with change happening at pace of people's growing confidence with remote tools

Phone trees, WhatsApp Groups

The members really appreciate and look forward to the calls. They feel fed up with everything going on and the calls really lift their mood and they like to chat!





Regional and national online meetings

- Communities of identity (BAME and younger stroke survivor groups)
- Communities of interest (singing)

I appreciate the fact that it concentrates on the BAME groups. Being from a minority myself, it's good to know what others are experiencing and to share knowledge.



Being of a working age group meant that we were all better able to understand each other's struggles and share what works for us.

Supporting volunteers



1. Understanding

Who responded to the survey?

260 Stroke group members and volunteers	118 Stroke groups across England, Scotland, Wales and N Ireland
People aged 31 to 92 years old, averaging 67 years old	A similar number of men and women took part
23% live alone and 65% with family	43% said they had poor health and 53% reported good health
14% had received	a 'shielding' letter









RESEARCH HIGHLIGHTS

Dear stroke group members and volunteers,

Many of you have helped with the 'Community Groups for Post-Stroke Support' research.

Between November 2019 and March 2020, many of you completed a **paper survey in your groups**.

We wanted to repeat this survey again a year later, but this plan changed when COVID-19 arrived.

We decided to do a second **online survey in June/July 2020** to find out how you were coping while groups were not meeting face-to-face. We call this our 'lockdown survey'.

Ruth has also enjoyed talking to a number of you over the phone.

Thank you to everybody who took part.

In this update, we share with you some highlights from the 'lockdown survey'.

This is just some of the helpful information you have provided by supporting this research.

All the best from the research team at the University of Exeter.



Wellbeing during lockdown



Members reported high well-being.



Average scores for well-being were just a fraction below the norm for adults.



Those with poor health were much more likely to be lonely.



Those living alone were much more likely to be lonely.

How stroke groups kept in contact

During the lockdown, stroke survivors stayed in contact with their groups in the following ways:



The importance of group volunteers

- Most contact was with the group leader or a volunteer.
- The group leader or volunteer often made contact first.

A range of support

- Groups were good at 'keeping in touch' and 'checking-up'.
- They also provided some emotional and practical support, and information.
- This was often through volunteers.

Not without its problems

- Staying in touch was often difficult.
- Difficulties with technology often got in the way.
- Stroke-related disability stopped some people from making contact.
- Others did not feel close enough to the group to keep in touch.

I have received 1 call from [redacted] who co-ordinates the stroke meeting I attend. She was just checking I was keeping ok and she had been calling other group members. Very appreciated.

I get a call from the leader once a fortnight and they called me when I went into hospital. I call one of the ladies every other week who I know better as she can get down sometimes.

> If I am able to get people on the phone we usually have a good natter, but it is limited by their disability which often means it is short and sweet!

Improving support for stroke group members

Member-to-member contact

- Contact between group members was not as common as with volunteers.
- Some people suggested sharing members' numbers with permission and buddying systems.



The guidance includes how to safely share details and ideas for ways to facilitate member-to-member contact

H

Technology-based solutions

- Some people need help to get access to the internet, smart phones and computers.
- Some people need help to learn how to use the technology.

- If you want help for members to get online, here are some free resources:
- Free IT support from: <u>abilitynet.org.uk</u>
- A guide for people with aphasia: <u>CLICK HERE</u> (free to download/print or order from <u>online</u>)
- Call/email the Stroke Helpline for information on grants to buy technology for members: Call: 0303 3033 100 or email: helpline@stroke.org.uk

Understanding

- Online support not a panacea
- Facilitating online peer support requires training and support
- Prioritise resuming face to face
- Address the digital divide, improve inclusivity and focus on co-production

2. Guides

Phone conversation guide for volunteers

Using Facebook Groups

This information is for volunteers to help you use Facebook groups to stay connected with other volunteers and your group members.

Some of you may already be familiar with Facebook groups but others may not be. This information will help with the basics but there is much more than can be done through Facebook. If you are less familiar with Facebook, speak to those you work and volunteer with so you can help each other. In the coming weeks we will be looking to develop further resources to make the most of connecting digitally.

Contents

	What is Facebook?	. 3
	What is a Facebook Profile?	. 3
	What's the difference between a Facebook group and Facebook page?	. 3
_	Who should set up a group?	



Connecting Members within Voluntary Groups

With groups not meeting face to face, members may want to be put in touch with each other. Or volunteers might want to offer this option to give members more opportunities to socialise remotely. To facilitate this, members contact details must be shared which means we must do this in accordance with data protection laws.

Stroke Association Voluntary Groups must follow the process below when putting group members in touch with each other - by phone or email. Independent stroke clubs may use this to inform on their own approach.

Before the call

- Find a quiet place.
- Think about what you want to say.
- Hide caller ID (this guidance can help you find out how)

Beginning of the call

- How are you feeling today?
- What have you been **doing** since we last spoke?

Check they are doing OK

- Do you have the practical help you need?
- · Have you been worried about anything?

Clubs and groups resources

This page is here to support our clubs and groups leaders during the coronavirus outbreak.

Always follow the latest advice from the government, the NHS and any organisational decisions that we've communicated.

Communications guidance and templates

Use these guides to learn how to use different platforms:

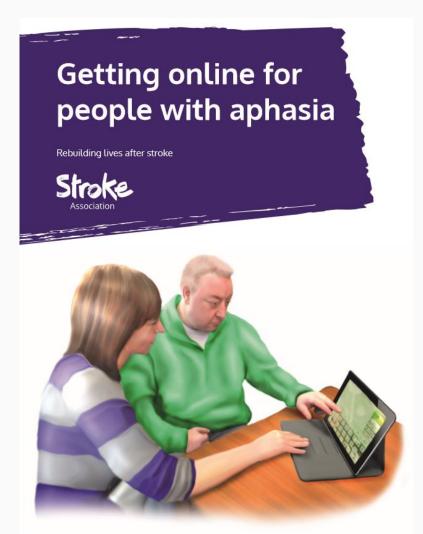
- Using Facebook groups
- Using WhatsApp
- Keeping data safe on WhatsApp
- Using WhatsApp on your computer
- Making video calls
- Installing zoom
- Joining a zoom meeting on a laptop
- Keeping zoom meetings secure
- Zoom video tutorials
- Joining zoom by telephone
- Tips for having online discussions

Latest information and advice

Where local and national restrictions allow, Stroke Association Voluntary Groups volunteers can meet with members outside in groups of up to 30 to offer social and peer support. Volunteers must follow our Outdoor Chats Guidance (PDF) guidance. Volunteers do not need to complete a risk assessment for this as we have an organisational risk assessment which you can view here.

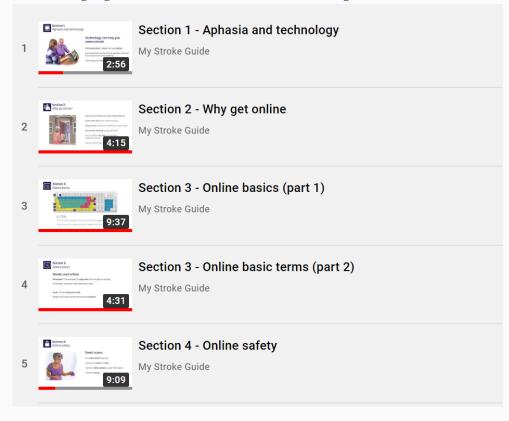
From the 5 July, Stroke Association Voluntary Groups can resume indoor meetings, subject to local restrictions. You can use our Requirements for Resuming Groups Indoors (PDF), risk assessment template (word document) and template letter to members (word document) to help you prepare.

For more information, see our **Coronavirus Recovery FAQs for voluntary groups** (PDF) or go to the main **coronavirus page** for links to the latest government advice.



- Can be downloaded in full or by chapter
- Free printed copies available

Videos to support each chapter on YouTube



Additional video calling resources

Video calling for people with aphasia



Video calling is a popular way to connect with family and friends.

You can use a computer, tablet or smart phone to make a call.

When you video call you are able to see the person you are talking to.

People with aphasia often find video calling better than a phone call.

There are many different video call platforms.

This guide will give you information about 3 popular options:



Skype

Zoom



 How to download on different devices

 How to use the video call platform

Feedback so far

At last a guide that Stroke Survivors of all ages can use with out feeling patronised It's like the idiots guide, it just works for me!

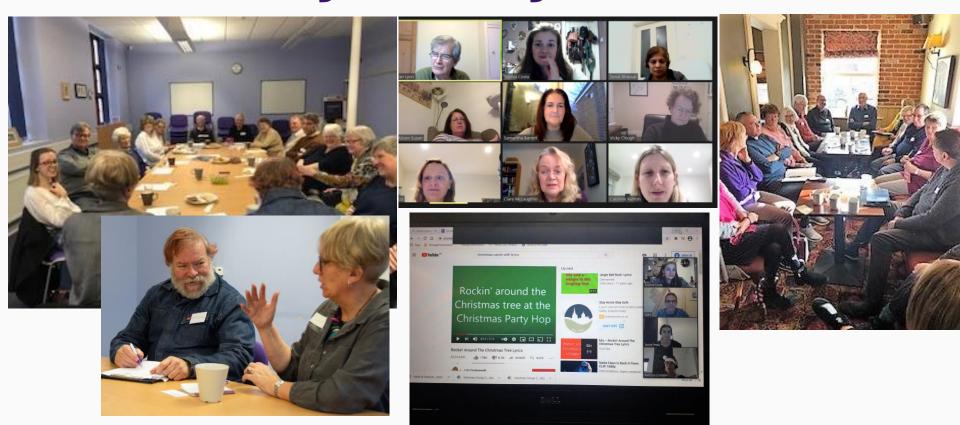
This is the perfect level for my dad who has never used a computer before

3. Opportunities to build confidence & skills

- 1-1 support to build confidence and learn about tech
- Update on changes to tech
- Building partnerships



4. Connecting leaders together



5. Evaluate

What happened?

Give information on the activity, and the reasons why it happened this way. Consider what resources or help you needed to make it happen, such as working with another group or members making donations.

Long for: What do you want to see in the future?

- Zoom activity
- Sent out Zoom instructions and guidelines
- Had 1-1 with the Chair via to practice
- Prepared art assignment
- They voted to upgrade the Zoom account with group funds allowing more time and more features, like having more than one host

Lacked: What could

What feedback did participants give? Any comments, ideas or suggestions given by who benefited from the activity. Use quotes when possible.

"It has **given me motivation** to do something because we can now share with others and have some support"

"I was **surprised** that group members were **able to log on** and participate"

They suggested all members be allowed to share screen that way those with aphasia could present, one member did this and showed photographs of work he used to do

we have done better? Share what hindered you and why this was. Try to give specific examples.

Key learnings and opportunities

- Online has potential to widen access to peer support
- Face to face group support is important
- Exploring hybrid approach going forward
- Understanding where online has a unique value

Although I enjoy my regular chats with Christine and other members of the group, it isn't the same as being together and I really look forward to the day that we can all reunite. Sheila, Stroke Group Member



Rebuilding lives after stroke