Annual Report
2016

HEALTH CONNECTIONS MENDIP

HEALTH CONNECTIONS MENDIP

Working with you to build healthy, supportive communities.

Foreward

For nearly 70 years, the NHS has been there for us. It is a constant in our lives, from cradle to grave. But the NHS was never designed for the 21st century. It was never designed to provide ongoing support for people with long term conditions. These people (including me) have conditions which can only partly be treated. So, when medicine can only do so much, what else can or should public services do to support people to live well despite their medical conditions?

We are now beginning to understand that the roots of health lie not in hospitals or GP surgeries, but in our communities. We have really known this all along. Work from Peckham in the 1920s showed this, In the 'Peckham Experiment' communities were supported to thrive and live well in a long term programme of its work that still resonates and that ironically lost its funding at the inception of the NHS.

Frome and Mendip are a 21st century Peckham. Thanks to the ceaseless energy of the staff and the communities they work with, they are showing us all how a 21st century health and wellbeing system should and can work. Take your time to read about their work. But don't just read about it. Make it happen elsewhere.

Professor Alf Collins
Clinical Advisor, Person and Community Centred Care
NHS England

General practice has always aspired to help patients in an holistic way through understanding the whole patient in the context of their family and community. The GP surgery is the first point of contact with the NHS for many of our patients and accounts for 90% of patient contacts with the NHS.

Many of the issues that individuals now face are multifaceted and increasingly patients find themselves living with multiple long term conditions which can be managed but not cured through conventional treatment. An integrated holistic approach using both conventional medical treatments and community resources can help promote optimal health and wellbeing.

The Health Connections team has been funded through and completely integrated with general practice in Mendip. Working together with this service we are able to ensure that patients have the resilience and tools to navigate their long term health problems and live as well as possible fully integrated with their community and recognising the value that they too can contribute to others through peer support.

The report contains the views of some of the many patients touched by the service and is testament to what can be achieved by working together in a truly integrated way.

Dr Helen Kingston
Senior Partner, Frome Medical Practice

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Health Connections Mendip – One year

In our first year, over 80% of people using our service had measurable improvements in their wellbeing, 95% felt more able to access support in the community and 94% felt more able to manage their health.

Health Connections Mendip is a new and exciting service which provides peer support, social prescribing, one-to-one and group support to enable people living in Mendip to improve personal and community resilience. The service is available to people who would like support with health and wellbeing issues, for example self-managing a long term health condition, increasing social connectedness or changing health behaviours. This support is in addition or instead of the support they have traditionally received from their GP Practice and other healthcare services.

Health Connections Mendip is celebrating its first year of operation in which significant progress has been made thanks to the commitment and dedication of the Team and the many local people and organisations who have supported us.

Our key achievements, which are set out in more detail throughout this End of Year Report include the following:

- We have identified over 370 support groups, services and networks and made these available via the Health Connections Mendip website - www.healthconnectionsmendip.org and through the distribution of hard copies of our directory via our Community Connectors. There is considerably more local support available than we could have imagined!
- We have brought local people and services together via our weekly Talking Cafés which are now available in Frome, Shepton Mallet, Glastonbury, Wells and Street. We now have over 226 people meeting and connecting at the cafés each week.
- We have helped local people set up a wide range of new support groups where local people themselves identified these as gaps. These include the Macular Degeneration Support Group, Stroke Support Group and Diabetes Support Group. All of the groups have been very well attended and some have become self-sustaining. 349 people now have access to these groups.
- Our Health Connectors, Community Connectors and General Practice staff have listened and talked with over 1000 people about local support they are seeking and signposted them to support that is most relevant.
- We have trained over 53 signposting volunteers, known as Community Connectors. These are members of the community and staff employed by other organisations who can signpost people to the local resources available.
- As well as connecting people, we have connected a number of organisations together for example in our three-monthly Mental Health Networking meetings.
- We have seen over 400 people on a one-to-one basis. These sessions are aimed at people who are not yet confident to engage with local groups of their own accord. Our focus in these sessions is to support people to gain confidence and to increase their knowledge, skills and confidence to self-manage their health and care.
- We run a number of specific groups such as Talking Cafés, Self-Management Programmes, an Exercise Programme and On Track Goal Setting Groups. 380 people have attended these Health Connections Mendip group programmes.
- We have established a full staff team of 12 people and now operate, with the support of all 12 Mendip practices and 53 Community Connectors, across the whole of Mendip. We have gained the confidence of a wide range of professionals about our service and our local resources.

Our key priorities for next year are to continue developing our core services, as above, and to work with commissioners and others to establish the service on a permanent basis. We will aso continue to develop links with new service models such as Mendip Symphony and Compassionate Communities.

Thank you again to the many people and organisations who have engaged with, used and supported the service.

1.0 Mapping what is already out there

We start with the assets in the community – its opportunities and strengths.

There is a huge amount of support available in the community from befriending services and community transport, to peer support groups and credit unions. Health Connections Mendip (HCM) has mapped this support and we let people know about this support in a variety of ways.

Health Connections Mendip has its own website where patients and professionals can access our Directory of Services. This is a list of all the support groups/organisations in Mendip that can support people's health and wellbeing and help them manage their long term conditions.

HCM staff, Community Connectors, health care professionals, support group members, voluntary sector staff and patients all have access to our Directory of Services on our website.

Total Website views	
Over the 12 month period	28,433

As well as finding support via the website we have a huge number of people in the community who all keep us informed of changes that they are aware of to groups/services in our directory. This makes it really easy for us to keep the directory up to date.

We recognise that people access support in different ways – many people do not have access to the internet. **Our model enables people to find information in the way that suits them best which isn't necessarily just via a website** (see section 3).

"I had no idea there was so much out there, I feel that just knowing this has made me feel more positive".

2.0 Building social capital and peer support

HCM helps build social capital in a number of ways.

2.1 Gaps in service provision – supporting people to set up new groups.

When gaps in service provision are noted, we draw on the knowledge, ability and resources of individuals and the community to develop solutions to this perceived need. We check that developing a new service/group would complement rather than duplicate services and that it is a true gap in service provision. We work with individuals, community groups, the voluntary sector and partner organisations to see how best to fill this gap.

If it is decided that a new independent group is the best way forward, we help the members set up the group. HCM can support groups to set up a management committee and constitution, and we support with fundraising. We can help groups for as long as is needed but we aim for these groups to become self-sustaining.

The more gaps that are filled, the better able the community is to support those that need help. Being active collaborators in this community development process leads to increased local confidence and a sense of empowerment for those involved.

Over the year HCM has helped set up many groups/ services. These have often been peer support groups. We recognise that local people and communities have assets, skills, knowledge and experience that enables them to offer valuable help to their peers.

Groups set up to date:

- Weekly Exercise group
- Weekly Multiple Sclerosis Exercise Group
- Monthly Macular Degeneration Support Group
- Monthly Café Connect (people with dementia and carers)
- Monthly Long Term Conditions Support Group
- Weekly Leg Club – helped set up management committee, raised funds and supported non-medical side of service.
- Monthly Stroke Support Group
- Monthly COPD Support Group
- Monthly Peripheral Neuropathy Support Group
- Monthly ADHD Support Group
- Monthly Stroke Support Group – partnership working
- Monthly Fibromyalgia Support Group
- Monthly Diabetes Support Group

HCM has supported the set up of:	
Number of groups	No. of regular attendees
3 weekly groups	165
10 monthly groups	184
13 in total	349 in total

A total of 349 people have access to 13 regular ongoing groups that did not exist before HCM's support. HCM continues to support these groups until they are ready to run without our help.

"I have suffered with COPD for many years with no one to talk to and feeling very alone. I attended the first meeting of this group and enjoyed meeting new people who knew how I felt. I look forward to each meeting now, we have fun and a chat and sometimes a game of bingo or skittles for fun." **COPD Support Group member**

"The group is lovely for me because we care about each other all the time now."

Peer Support Group Member

"…the things that go on with me, you think well was that the stroke or was that something else, but then you see it around you in your fellow people and you realise you're not this weird and peculiar person, and you think 'Oh I'm a little bit like you because yes I've had a stroke…"
Stroke Peer Support Group Member

We inform the CCG when there is a gap in service provision that we are not able to fill or we do not feel it is within the service's remit.

2.2 Volunteers for other organisations

When services are not able to provide enough support to Mendip patients due to a lack of volunteers, HCM has found volunteers for these services.

Over the last year we have found 29 volunteers that have now gone on to support voluntary sector organisations to provide services to Mendip patients.

"It has been really useful being able to team up with Health Connections to help raise the profile of Contact the Elderly, and help recruit new volunteers to enable us to get a new group going in the Shepton area".
Contact the Elderly, Bristol, Bath & Somerset Regional Development Officer

2.3 Networking Meetings

HCM has a three-monthly Mental Health Networking meeting. At the last meeting over 20 people attended from from a wide range of services/organisations.

"Really useful meeting, great contacts made for future work."
Mental Health Networking meeting participant

"Fantastic to have the opportunity to find out what services are about and who to link up with."

Mental Health Networking meeting participant

3.0 Communicating with the community and Social Prescribing

There is a huge amount of support available in the community from befriending services and community transport, to peer support groups. How do patients know about this support? Often we hear patients who say that they want support but they don't know what to ask for.

We have a model where we try to enable patients to access this information in a number of ways, as people access support and information in different ways.

We do this

- via our website,
- via our Health Connectors,
- at our Talking Cafés,
- at our monthly radio slot,
- by sending letters out to patients identified on the practice registers,
- via health care professionals and
- via the Community Connectors.

This signposting happens in a variety of venues from community cafés, to awareness raising stalls at GP surgeries, in the workplace, in support groups, in people's homes and GP practices.

Signposting is not about telling someone where to go for support but it is about letting people know that there are lots of options and informing them of what these options are. If a patient is not able to access the support via signposting, they are able to work one-to-one with a Health Connector to look at what might be getting in the way of them accessing support.

1678 people have been signposted to services and support in the community.

In addition to the 1,678 people who have been signposted face-to-face or via the phone, our website has had 28,433 views over the last year.

"I found your input invaluable in raising patients' awareness of the course and giving them the opportunity to attend. 23 people contacted me in response to the letter you sent out, so approximately half of each course was made up of patients from the Mendip area."
Support Group Facilitator for whom we sent out a letter to people on the GP practice register.

The signposting has been done by a variety of people from GPs to empowered patients to HCM phone support – GPs being those who have done the most signposting.

This GP signposting is accessible to all Mendip GP practices via their EMIS patient record. GPs have 'social prescribing at their fingertips'. With one click they can find a category of support e.g. carers, stroke or exercise and print out all the options available in the area.

"I wish I had know about all of the support sooner. It is so simple and so sensible to have it all in one place. I don't need everything on the list but at least I know it is there if I ever do."

Patient who received information from GP

The table below shows the groups of people who signpost patients:

Signposter	Volume Signposts	% of total Signposts
GP	706	42%
Health Connector	512	31%
Community Connector	337	20%
Phone signpost	112	7%
Email signpost	11	1%
Total Signposts	1678	100%

The table below shows the top fifteen categories of support that people have been signposted to.

Signposted to...	Count	%
Befriending/isolation	289	17%
Exercise	191	11%
Health Connections Mendip	175	10%
Carers	122	7%
Healthy Lifestyles	112	6%
Dementia	73	4%
General Advice/ Support/Employment	64	4%
Mental health	55	3%
Older People	47	3%
bereavement	41	2%
Diabetes	38	2%
Counselling/therapy	37	2%
Poverty/finance	36	2%
Cancer	33	2%
Pain Management	30	2%
Rest are under 1%		

The table below shows the age range of people who have been signposted:

Row Labels	Count of Age Range	%
Up to 20	98	6%
21-30	200	12%
31-40	203	12%
41-50	243	14%
51-60	257	15%
61-70	354	21%
71-80	205	12%
81-90	70	4%
91+	12	1%
DK	37	2%
Grand Total	1679	100%

The table below shows the gender of people who have been signposted:

Row Labels	Count of Gender	%
F	1108	66%
M	568	34%
Transgender	3	0%
Grand Total	1679	100%

We continue to look at ways to increase people's chances of finding out about support. Following consultation with patients, it was suggested that people who are able to signpost have badges, and venues where people can find out information have stickers in a prominent place.

4.0 Health Connections Groups/Programmes

Health Connections Mendip also runs a number of groups/programmes.

4.1 Regular 'open' HCM groups

HCM runs regular drop in groups across Mendip. These are On Track goal setting groups and Talking Cafes.

On Track Goal Setting Groups

On Track Groups are friendly, peer-led sessions where patients can join others who are setting goals that might improve their health and wellbeing or help them manage their long term condition. These groups provide continuity for patients who have completed our pain management course or have seen a Health Connector for one-to-one support. We have three On Track Groups across Mendip.

Over the last year we have supported 36 people in the On Track groups.

As these groups become more established in the new areas, numbers are increasing.

Talking Cafés

Talking Cafés were set up to meet the needs of people who are isolated, want to make friends or find out about activities, support groups and services in the community. The idea was patient-led – the patient had a health condition but didn't want to go to a support group for that specific health condition but just wanted to meet people. The Talking Cafés take place in cafés in the community and run on a weekly basis.

A Community Connector is available in the Talking Cafés and we are planning to train more Community Connectors to be available in the remaining Talking Cafés. The Talking Café in East Mendip has been running for nearly two years, and since April Talking Cafés have been set up in Glastonbury, Street, Shepton Mallet and Wells. They have proven to be very popular as they appeal to a wide range of people from all age groups.

A total of 226 people have attended the Talking Cafés across Mendip with the established Talking Cafés having an average of 12 people per week per café.

"It's helped me quite a bit, you know the company. You're home on your own and you come and talk to people about different things, you meet different people, you hear different things that you probably wouldn't at home. …. I think I would miss it, I do look forward to coming. The doctor said that this would probably help better than having tablets which I think it has."

"I am so much more informed about what is going on in the community, what services and social groups are available, it's been a blessing to have somewhere I can go and meet and make friends being a pensioner and a widow. I don't have a lot of money to socialise, so I look forward to the talking café."
Talking Café member

"My husband and I have found that the Talking Café has given us both the opportunity to make friends. It has also opened up a huge amount of clubs to join, and thus, make even more opportunity to widen, our friends. We look forward to going out and the Talking Café is an area where we can talk about anything, and laugh, it lifts our spirits, we both enjoy the community which we now have access to. From an introduction from this café, my husband has joined the Men's Shed, which he enjoys, and feels he is a valued member. I am hoping to join the Ladies' Shed, which might start in the area. I am also now a Health Champion and this also gives us the ability to introduce others to the clubs available in the area. Many older/ retired people are isolated, and uninspired, and very sad, as was I, now I feel happier, and look forward to meeting others. The Talking Café is a brilliant starting point to the wider community, but the Talking Café in itself is a great club to be in."
Talking Café member

"It has given me a place to go and chat, talk about any problems and things that are on my mind it is also a place to find what's going on in the area."

Talking Café member

"I look forward and enjoy the weekly Talking Café, meeting other people in different circumstances I find is very interesting and also educational, you can get so involved in your own problems and not realise that other people have similar situations/frustrations as well. I have never known anyone like the Health Connections team member. She has such a vast amount of knowledge about different types of subjects and if she is not sure then you can guarantee an answer within minutes. I have through Health Connections gained some valuable contacts which have been and will be of great help in the future. It is quite amazing what is available out there but without this service it would be very difficult to find out what is on offer. The service I feel is extremely valuable if you are on your own and do not know which way to turn for advice and help and equally beneficial for people who are not alone but would like to know what is available and how it would help them. In short it is a very worthwhile couple of hours spent chatting and having a hot drink, long may it continue and grow from strength to strength."

Talking Café member

"If it weren't for this Talking Café I would have a lonely experience. They have helped me look forward to getting up on a Monday morning."

Talking Café participant

"I have found being involved with this service invaluable both as a person with a health condition who is able to support those attending in the group and most importantly to listen, but I have also found friendship, support and camaraderie with those who attend and find that attending this group has been very important for my wellbeing too."

Talking Café member and Community Connector

West Mendip Talking Café

East Mendip Talking Café

4.2 Regular HCM courses

We run time-limited sessions across Mendip. These are Pain Management Programmes, Exercise Sessions and pilot Relaxation Sessions.

Over the year 115 people have been through these three HCM courses.

Pain Management Courses

These courses support people living with chronic pain. This friendly 6-session programme helps patients to better manage their health and become more confident in managing their pain. Patients increase their knowledge about their condition, and learn new skills and techniques. We have run 4 six-session courses across Mendip.

44 people have attended the Pain Managent courses over the last year.

Patient Activation Measure (PAM) and Warwick-Edinburgh Mental Well-being scale (WEMWBS) scores are taken for all participants.

Feedback from the course has been very positive.

"Made me think about how I cope and how I can continue to help myself."

Pain Management Course participant

"I think the thing that helped me the most was the SMART goal setting. That sort of helped me focus on things and has been really good…it helps to motivate and I've done things that I thought I couldn't do."

Pain Management Course participant

Exercise Sessions

East Mendip has piloted a free 12-week exercise programme for those who would not otherwise increase their exercise. Patients are supported through the programme by a Health Connector and before they finish the 12 week programme the participants are supported to plan their next steps after the exercise sessions. 45 people signed up for the programme. 8 people dropped out.

From the 37 that have completed the 12 week course, all have gone on to continue their exercise.

The sessions have been very well received and as a result we have decided to roll the programme out across Mendip. We are working closely with Zing to support patients to take up exercise after the 12 weeks.

Pilot Relaxation Sessions

These offer patients a fun way to learn about a variety of easy-to-use relaxation tools and techniques in a group setting. Three sessions were available and patients could attend all three, or pick and choose individual workshops. HCM ran 4 Relaxation programmes across Mendip.

34 people attended these relaxation sessions.

Feedback from participants was positive but we currently have these groups on hold.

- In twenty-one out of twenty-two sets of feedback (95%), participants reporting feeling that they had more tools for relaxation as a result of the workshops.
- In twenty out of twenty-one responses to the question (95%), participants felt that they would use the tools in the future.

"I think it's a wonderful and progressive way of bringing health to the community. Very positive."

Relaxation Group participant

"It's made me happy, very enjoyable and inspiring."
Relaxation Group participant

As well as the regular groups and courses above HCM also has Healthy Mondays and Tuesdays where we bring together support – all in one place.

Healthy Weekdays

Healthy Weekdays act as a hub; bringing together organisations that work with people to improve their health and wellbeing. Healthy Mondays in Frome offers a Talking Café, several different exercise classes, health walks and a weekly weigh-in. Healthy Tuesdays in Glastonbury offers a Talking Café, an exercise class for people with Multiple Sclerosis, health walks, and coming soon a beginner's exercise class for older people.

Weekly Weigh-ins

Weekly Weigh-ins are sessions that started due to requests from patients. Weekly Weigh-ins are now run in several GP practices across Mendip.

5.0 Community Connectors

Our Community Connector service was piloted over the last year in East Mendip with the support of Frome Town Council. Community Connectors signpost friends, family, colleagues and neighbours to support in their own communities. They enable a large number of individuals to access health support and advice and are aware of the wider determinants of health e.g. support such as housing, education and debt advice. Connectors can be very effective at integrating with local communities and providing a bridge between local people and other services. The Community Connectors receive locally tailored training and are part of the Health Connections Mendip Service.

Anyone who is interested in finding out about what is available in their community and would be keen to pass this information on can be a Community Connector.

The more people there are that know about the support that is available in the community, the more we can all support each other. There are great services in our community but sometimes people don't know about them. This is where the Community Connector's role is pivotal in informing the people, so we can work towards a more resilient and supportive community.

Over the last year HCM has trained 53 Community Connectors who have so far signposted 337 people to support in their community.

Each Community Connector lives, works or studies in the area they represent, so they have knowledge and understanding of their locality. We have Community Connectors in a large number of organisations such as local support groups, Health Walks, Town Council, park rangers, churches, community groups, large supermarkets and Youth Community Connectors at a local College. We have Community Connectors aged from teenagers to people in their 80s.

As a result of the success of this pilot we have rolled out the programme to the rest of Mendip.

It is not only the members of the community who have been signposted who benefit but the Community Connectors themselves.

These shared benefits are expressed in the quotes below.

"It has given me the confidence to engage with people more, as I now have specific information I can pass on to the person, which I know will help them."

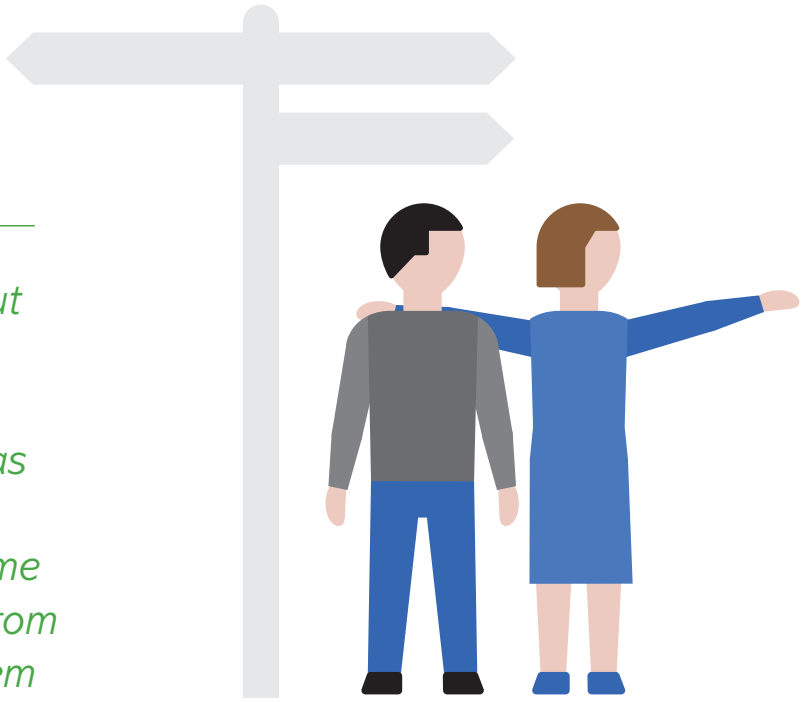
Community Connector

"I have been surprised at the number of places I have been where I have had conversations with people and have ended up signposting them to services and organisations, chatting to people at bus stops, engaging with individuals at the various groups I attend, on one occasion even talking to a young man in the street. Being a Community Connector has meant I talk more to people of all ages, not only have I signposted people but have gathered more information regarding other groups or services from people to add to our Directory."

Community Connector

"I love the fact not only do I give out information to people at the centre where I work but when I needed to sort out a problem of my own, I was able to refer to my directory to find the exact service I needed to help me out. I also love the feedback I get from people when having signposted them to a group or service, they update me on how helpful it has been, usually with a big smile on their face."

Community Connector



"I work outside and come into contact with people almost daily, people will often chat to me as I work and occasionally tell me about their problems, since doing the Community Connector training, I feel confident that I could signpost people to suitable organisations or I could direct them to where they could get more information."

Community Connector

"I enjoy my role as a Community Connector, as I have always been involved with groups and organisations, but even I was impressed with how much support is out there for people of all ages, it is great to be able to pass on the information. I also am able to feedback to Health Connections if I have come across areas where there is a lack of support and ideas for future groups."

Community Connector

"I have found being involved with this service invaluable both as a person with a health condition who is able to support those attending in the group and most importantly to listen, but I have also found friendship, support and camaraderie with those who attend and find that attending this group has been very important for my wellbeing too."

Community Connector

"I feel more confident about discussing problems with my peers, as I know that I can signpost them to a more suitable person, to help them deal with the more complicated problems they have."

Youth Community Connector

First Community Connectors Training Group

6.0 Health Connectors

Health Connectors offer one-to-one appointments where they can listen to people's health story, support patients in managing a long-term health condition and assist them in setting health-related goals and making changes that are meaningful to the individual. Health Connectors can also connect people to free and low-cost local services, such as exercise classes, befriending services and support groups. Appointments are held in GP practices or in patients' homes. The main route into the service is self-referral or health professionals can 'task' the service via EMIS (GP clinical IT system) if they feel the patient may not make contact themselves. The one-to-one work has been received extremely well by both patients and health professionals.

Health Connectors

HCM has 7 part-time Health Connectors. Just over 5 full-time equivalents. The Health Connectors were trained during April and May 2015.

Health Connectors have seen 409 patients for one-to-one sessions with a total of 1199 appointments.

Each appointment can last for 50 minutes. Average number of appointments per patient is 2.9.

Patient Feedback

69 people filled in our Patient Feedback form. See Appendix 1.

95.6% of these patients said that they felt more able to access support in the community. 94% said they felt more able to manage their health and wellbeing or long term health condition.

Patient Activation Measure

The Patient Activation Measure (PAM) assesses an individual's knowledge, skill, and confidence for managing one's health and healthcare. Individuals who measure high on this assessment typically understand the importance of taking a pro-active role in managing their health and have the skills and confidence to do so. Level 1 is low activation and level 4 is high activation.

261 patients completed the initial PAM. 77 have completed initial and follow up PAMs (Patient Activation Measure). 7 saw a decrease in their PAM score, 6 were level and 64 saw an improvement. According to the evidence base, these people will have improved clinical outcomes, use NHS servises more effectively and have a better experience of care.

The average increase in PAM score was 10.8. The average increase in PAM level was 0.9.

Warwick-Edinburgh Mental Well-being Scale

The Warwick-Edinburgh Mental Well-being scale (WEMWBS) was developed to enable the monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing.

89 people completed initial and follow up WEMWBS questionnaire. 13 declined in score, 4 stayed the same and 72 improved. Thus:

81% saw an improvement in their wellbeing.

6.1 Patient Activation Measure statistics

Completed initial PAM	261
Completed initial and follow up PAM	77
Of which:	
Saw a decrease in PAM Score	7
Were level	6
Saw an improvement	64

	Average score	Average Level
All initial PAMs for those who also did a follow up PAM	50.8	1.9
Follow up PAMs	61.6	2.8
Net Difference	10.8	0.9

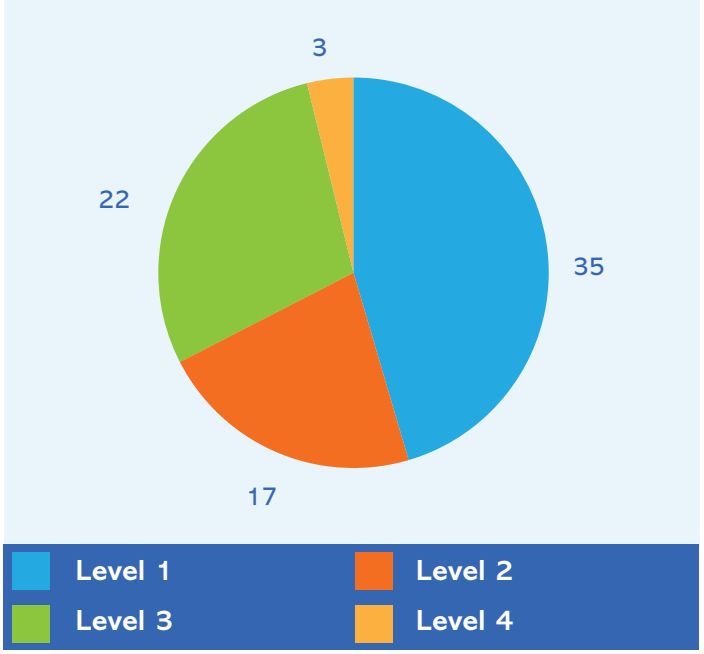
Count of initial PAM Score/Level

Score Level	Count
Level 1	35
Level 2	17
Level 3	22
Level 4	3
Grand Total	77

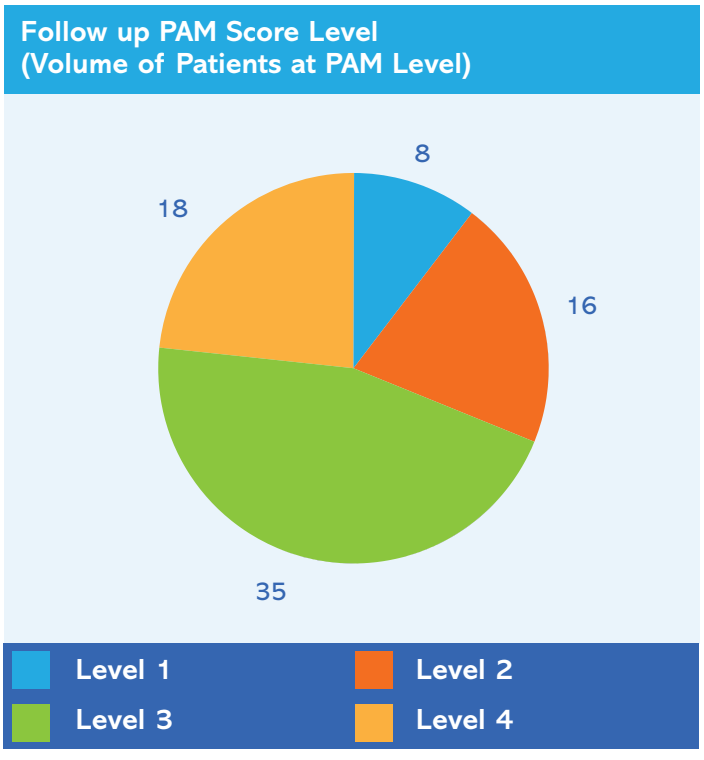
Count of follow up PAM Score/Level

Score Level	Count
1	8
2	16
3	35
4	18
Grand Total	77

Initial PAM Score Level (Volume of Patients at PAM Level)



Follow up PAM Score Level (Volume of Patients at PAM Level)



6.2 Warwick and Edinburgh Statistics

WEMWBS Key	Results
Your wellbeing score is very low.	31 points
Your wellbeing score is below average.	32-40 points
Your wellbeing score is average.	41-59 points
Good news, your wellbeing score is above average.	60-70 points

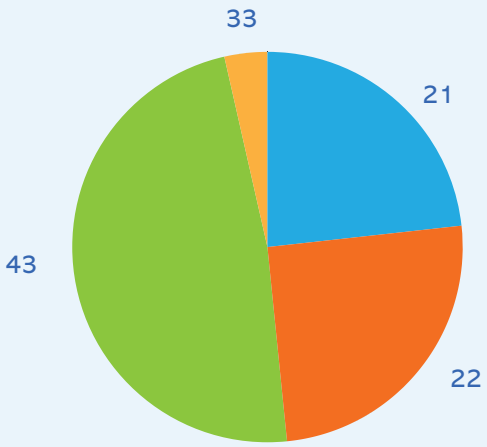
Count of Improve, Steady or Decline Cat	
Improve, Steady or Decline Cat	Total
Decline	13
Stayed the same	4
Improved	72
Grand Total	89

Count of Initial WEMWBS Scores	
Initial Score	Total
0-31 points	21
32-40 points	22
41-59 points	43
60-70 points	3
Grand Total	89

Improve, Steady or Decline Cat	Total
Decline in WEMWBS Score	15%
Steady WEMWBS Score	4%
Improvement in WEMWBS Score	81%
Grand Total	100%

Count of Follow Up WEMWBS Scores	
Follow Up Cat	Total
0-31 points	7
32-40 points	13
41-59 points	57
60-70 points	12
Grand Total	89

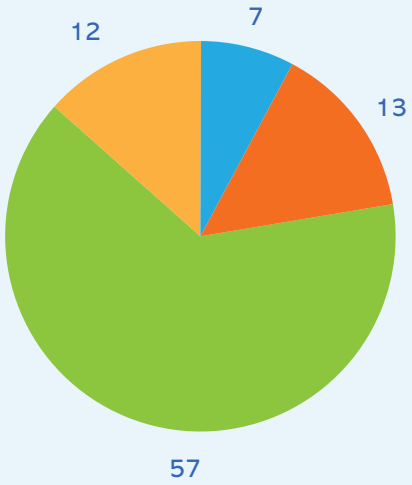
Initial WEMWBS Level for Patients Completing Inital and Follow Up WEMWBS



Wellbeing Score:

- Low
- Below Average
- Average
- Above Average

Follow Up WEMWBS Level for Patients Completing Inital and Follow Up WEMWBS



Wellbeing Score:

- Low
- Below Average
- Average
- Above Average

"You have helped me to feel like a worthwhile person and much more confident. I have learnt to laugh at myself and keep going."

One-to-one patient

"It was good to let certain things out and get off my chest and become more focussed on my reading and maths. I have been able to manage my anger better and have felt less angry. More able to walk out of a situation where I feel angry. I feel happier in myself and more able to laugh and joke with family and friends."

One-to-one patient

"I think the whole town should use the service! It makes me feel like I do count."

One-to-one patient

"The advice and support was very helpful and I felt I was being listened to. It has given me courage to access other services. To change my diet and look at how to improve my quality of life and pain management. Thanks for the support and help."

One-to-one patient

"Thank you v much for your help and time for Ms R. She has definitely benefitted and is in a much better place than she was prior to your work with her. I will continue to encourage the use of tools you have given her to help herself."

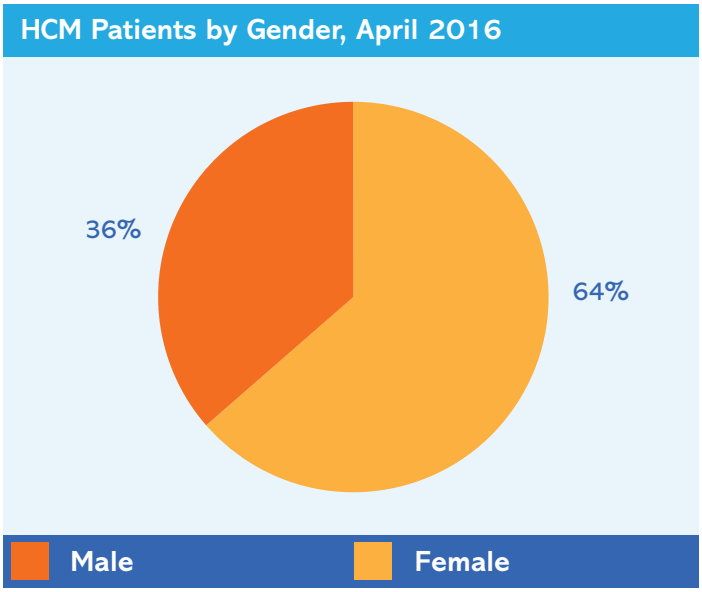
GP feedback

See Appendix 1 for Patients' Stories

Table below shows age of patients supported one-to-one.

Age Band	Total	%
20 or under	9	2%
21 to 30	26	6%
31 to 40	27	7%
41 to 50	61	15%
51 to 60	85	21%
61 to 70	84	21%
71 to 80	72	18%
81 to 90	40	10%
91 to 100	4	1%
DK	1	0%
Grand Total	409	100%

Gender	Total	%
Female	260	64%
Male	149	36%
Grand Total	409	100%



The table below shows the top main issues that people come with to the one-to-one sessions. Patients often come with more than one main issue.

Issue	Count	%
Pain management	76	12%
Anxiety states	66	11%
Health ed. - exercise	46	7%
Health education - weight management	41	7%
Carer	40	6%
Low mood	39	6%
Social isolation	38	6%
Other referral	27	4%
Finances	20	3%
Healthy eating advice	19	3%
Bereavement	15	2%
Housing problems	15	2%
Stress related problem	15	2%
Relationship problems	13	2%
Support group	13	2%
Sleeping Pattern	11	2%
Depressed	10	2%
Poor self-esteem	10	2%
Rest are less than 1%		

7.0 Patient and professional feedback – improvements

HCM service always listens to patients and bases its service provision around being responsive to the community's feedback and suggestions. Here we have listed some of the feedback we have received and how the service has responded.

a) The service has had many requests for home visits and initially we did not provide this service. Due to the demand we have trained our staff and now our service provides home visits for Symphony patients.

b) A patient said that our small A5 fliers were 'patronising' and following discussions with a wider group of patients, we are looking at changing the wording.

c) HCM became aware that certain patients did not attend the Talking Café because of the venue. The service then learnt that this was due to the venue previously having been a Conservative Club. HCM then changed the venue as a consequence and the attendance has increased.

d) Patient feedback on our Pain Management Course was that it was too long. We are now trialling 2 hours sessions instead of 2.5 hour sessions.

e) HCM offers one hour sessions over a period that is most suitable to the patient's main area of focus. We have had requests for more sessions and we are looking into this. Part of the solution is for us to signpost to support in the community and for those who need a stepping stone, we have set up the 'On Track' groups for people who have used the service and still want support.

f) Some patients in Street found the location of the Glastonbury and Street Talking Café a barrier to their participation so it was decided to set up an extra Street Talking Café to provide for these patients.

g) HCM is working on increasing its profile in the community as feedback has been that people still do not know about the service.

h) The service has had to work with the fact that the Central and West teams are not as established as the East Mendip team. The Central and West teams have worked with this challenge and have quickly built relationships in the practices and in the community.

i) A member of staff resigned in the West Team, so staff in other areas took on extra hours to cover this loss. We have now filled this post. We have changed the job description for future posts and taken on ideas for future interviews in view of feedback from the staff member who resigned.

j) Some patients find the PAM difficult to fill out. This is due to a number of different reasons. They may have barriers to being able to fill the form eg sensory difficulties and learning difficulties; it is not the right time to ask these questions eg they are very upset; it may be clear that the work with the patient will only be for one session and therefore the post-PAM scores would not necessarily be due to the intervention that we have provided. We are keen to work with other organisation who are using the PAM and the CCG to learn from them to see how they are dealing with these issues.

k) The service moved over from one method of record-keeping to EMIS half way through the year. We set up a new EMIS clinical service which has meant that the team had to input a backlog of patient data. The team are all learning how best to use EMIS so some reporting has been less in depth than we would have liked due to staff learning the new system. We are putting on more training on EMIS to be able to provide better reports in the future.

l) Patients said they wanted to speak to someone on the phone. Our team took turns to cover the phone in different areas. This was not working. We employed a part-time admin support and phone Health Connector. This Connector has become an extremely valuable resource for patients and the team.

Appendix 1.0 Sample of patient feedback

It helps to have something on. I don't get in a state so much or get anxious so much.

I have now found a job and feel a lot better about things.

Helpful as they enabled me to move forward with my life positively

I am now able to go out and walk on my own for a short amount of time. I am also in regular contact with someone from active and in touch.

I found the workshop on exercise particularly useful.

I found it has been useful to use the gym and I am really looking forward to re starting at the leisure centre.

It is helpful to have someone to talk to. I give 20/20 for how I feel now - I even look better. Please keep these people not just for me but for others. This is invaluable to people.

The course got me out and about and helped me cope with lots of things.

I know where to get help but still find it difficult to approach people, I will miss the Connector as she has been very helpful, listening to me when I come and see her to discuss my problems. I know I can contact her again if I need more help, I will miss her.

The breathing exercises are helpful when I am feeling anxious.

The Connector assisted me in setting goals breaking them down into smaller achievable steps. Her support and empathetic approach made a huge difference, really pleased she was there.

I have found this service very helpful even when I was struggling they were there to support. Encouragement to help and stay motivated. Kept me going out and about.

I found the course helped me to understand other ways of dealing with things.

Thought it was brilliant to be offered the use of the gym and exercise sessions. It also made me think about my posture and to walk faster. I thought the whole service was wonderful and I was impressed that the Connector could cater for everyone's needs in the class.

It helped to have another point of view. It helped me when other professionals do not have time to listen as my health Connector did. I am very grateful of the kindness and compassion shown to me. please continue to fund this valuable service.

I managed to lose the weight I needed to have the operation and I will continue with eating healthily and exercising. I have lost 3.5 stone and I feel better than I have in years. I walk 10,000 steps a day.

Thought I'd give it a try as I was desperate. Always said I'd never join a group, but found it very helpful and social.

Now I know where to turn to for help if necessary. It was helpful to go to relaxation classes and be able to talk through my problems it cleared my stress. I will try to attend more group activities to engender positive wellbeing.

I was feeling stressed particularly about my blood pressure. The one-to-one conversation and reflection helped me think through different approaches. The sessions were interesting and helpful and have given me alternative approaches to reduce stress and increase happiness.

I attended the course to gain a better understanding of managing my health conditions.

I love the way we are able to say what we feel - we are listened to.

Being given the information I needed and explaining everything was very helpful. I was very happy with the service. I feel on the right road now.

Goal setting, reflecting back, helped me to focus on what is needed and priorities. Resources and links were useful. Great service. The health connector was engaging and seemed genuinely interested, sympathetic and helpful.

The exercise sessions have really helped me and everyone has made me feel that I do count and that everyone in Frome should use the service. I have continued with the exercise classes.

Goal setting when feeling low in mood (was helpful) thank you for your help and support - free from judgements.

I was very satisfied with the kindness I was shown by my consultant (Health Connector) I find it easier to relax.

Talking with someone and having various points raised was very helpful it made me think of trying to look ahead. I found the Connector very pleasant and gave advice accordingly, very good listener"

Initially my mobility was very poor, I can now walk my dog from Foxbury Road to Bath Road, twice a day. I only ever used lifts, if available, now I am strong enough to get up and down most staircases by holding the rail. Much improved, thank you.

I found it really useful being able to talk about my home situation, about living with someone who is depressed, about my health issues that result from the relationship/situation at home. Being able to express concerns without feeling rushed and that there was a time limit. To clarify the situation in my mind and to discuss options and have a plan for the future. Having a number for relate is very useful.

A wonderful service I can't praise it highly enough!!! Helped me through a very difficult period in my life.

This is a great service and I am grateful I had access to it.

This service is a valuable life line for people to feel heard and feel cared about.

It has given me a practical session to attend and broadened my outlook on how others cope with pain. I have felt better for attending.

I was in such a bad place and having someone calm to talk to helped me get the motivation to do things. Breathing techniques were ideal - lying in bed and my mind is going onto what's wrong - I do it for a few minutes and it takes my mind off it.

I am now aware of all the support available in the community, I now attend quite a few groups, I will also train to become a Community Connector.

Health Connector has been my rock during a very difficult time. I am now a lot more confident, I am going to train as a Health Walk Leader and a Community Connector.

I wish we had known about Health Connections before, as they sorted out so much to make things easier for us.

Helpful having someone to talk to and talking about the future when she was concentrating on the past. Relaxation techniques helpful. She is friendly, patient and understanding. Very satisfied with service.

I feel more positive about the future, I have more knowledge of suitable therapies out in the community, it was good to spend time discussing all the various therapies and groups available for my condition with a Health Connector.

Met like-minded people. Reassurance that i am not alone. Refreshed some basic skills. Learnt some techniques.

Historically made me think about my life, the control I have over my choices and decisions. Thank you so much for the kindness, education, and allowing the group to 'gel'.

The course made me think about how I cope and how I can continue to help myself.

I have been very supported by my Health Connector, I know I can find groups for support and socialising in my area, especially when I feel low, I really appreciate all their help and support.

I feel so much better and I have told friends and family about the great service I have received from Health Connections Mendip. I wish I had heard about the service sooner. I now engage with lots more people and I know it sounds strange but I feel more important. I have also lost weight which I had tried to do for years. I love my walks too! Thank you!

Meeting other people with the same condition has helped me knowing i'm not alone - and have the same symptoms as me.

I thought that this course would help me. It has given me an insight into people with the same or similar problems as myself. Making me feel not so isolated with this complaint.

I feel I can communicate better with my doctor.

I thought it would help me to understand how to cope better. It was good to interact with the group.

The goal setting really helped to motivate me. I have now started to cook for myself rather than buying ready meals and I have also started to work on my garden again rather than letting it get overgrown.

I feel like my life is worth living again after doing the sessions. Would not of done this without the support of Health Connections.

Being able to talk to someone was most helpful. She was most caring and helpful.

Good to talk through matters and get info on organisations

It made me feel like I had a support network and it helped to discuss opportunities and gain a new perspective.

The course has made me look at my exercise and eating patterns and how they affect my health and pain levels. I felt able to take control of my diet and look at my exercise pattern in light of my out of control sugar levels.

I found the opportunity to talk to other people with Fibromyalgia particularly helpful, and it helped me understand things more clearly. I think the support available from this kind of service and from my GP is very good.

Health Connections gave me the push to do something about my problems rather than just thinking about it.

I feel more able to manage my husband's health and wellbeing as well as my own.

Sharing & discussing how we feel when dealing with pain was useful. We all have different health conditions and the way we can deal with them is the same. Thanks for the reassurance in dealing with my health problem

Appendix 2.0 Patients' Stories

Patient A

Situation

Patient A was referred by a Mental Health Nurse. He has been out of employment for four years due to an accident at work leaving his arm severely injured and needing reconstructive surgery. Patient A has not been signed off by his surgeon and still needs further surgery. The injury has acutely affected his sleep and left him frustrated that he still cannot work.

Goals

To find opportunities to help others and fill his time and to improve his sleep.

Outcomes

Patient A and I discussed his sleep issues and he decided to follow through on a number of strategies I shared with him. We were able to review what worked and what didn't in the next session. I signposted Patient A to a volunteering opportunity in a new local sharing shop. Patient A now volunteers there several afternoons each week and has reported that it gives him a sense of purpose. He has also found himself another opportunity volunteering at Oxfam in the time we have worked together.

Quote from Patient A

"The Connector helped me to get a volunteering role in a new Share shop which fills my time and someone can be happy with what I do there. Speaking to him has helped me sort things through in my head and think how to move forward."

Quote from Project Manager at Share – A Library of things – about Patient A

"Patient A has, in a very short space of time, transformed lots of areas within our shop. I'm so grateful for his support, knowledge and hard work. He arrives and with little direction he creates and builds shelves out of unusual recycled materials as well as cleaning and maintaining tools. Nothing is too difficult and he's extremely efficient, knowledgeable and brings a lot of useful skills to SHARE. I can't stress enough how incredibly useful he has been and he's such a delight to work with."

Patient B

Situation

Patient B said she had hit 'rock bottom', was struggling to cope, feeling lonely and isolated and lacking confidence to leave the house on her own. She was also extremely concerned about her memory and inability to sleep and had suffered with depression for many years. She felt like she couldn't open up to anyone about her problems as she didn't trust people and had only one family member around.

Goals

To be more active, make friends and get things sorted.

Outcomes

I've had four one-to-one sessions with Patient B and have telephoned her a number of times in-between. I accompanied Patient B along to a local befriending group which at the time was meeting in the Medical Centre for tea and friendly conversation. She decided to give it a go on a regular basis and they arranged lifts for her to and from the sessions. She began to attend on a weekly basis. I then told the patient about a local singing group for people with memory problems. She asked if I could attend the group with her the first time. The second time I accompanied her at the beginning and by the third time she felt confident enough to attend on her own and enjoyed it. A priority for Patient B was her memory and medication and she was confused about her medical care so I helped her identify her main concerns and encouraged her to raise these with her GP. During one session Patient B identified that she would like to open up to someone about some of her past experiences which may be causing her depression, so I was able to encourage and reassure her that it would be safe to do so with the Mental Health team. I liaised with the CPN [Community Psychiatric Nurse] who had been to see her and reassured her that she was on a waiting list to see a Psychiatrist. She appreciated this reassurance.

Quote from Patient B

"I was down in the dumps and had hit rock bottom. Since seeing a Health Connector, we've had lots of chats which have been helpful and I've joined a befriending group. I have seen a psychiatrist who has changed my medication which is now improving and a psychologist regularly who I've been able to open up to. The CPN nurse has also been out four or five times and explained everything to me. My panic attacks are settling down and I'm feeling a lot better. I feel I'm doing very well."

Patient C

Situation

Patient C hadn't left her house on foot since the local shop had closed 2 months previously. She hadn't told anyone before she mentioned it to her Symphony Care Coordinator who did a home visit. The Health Connector visited the patient and found out that the patient had lost all confidence in her ability to get out of the house.

Outcome

The Health Connector has been to visit her and they walked round the block. By coincidence a GP signposted another patient to HCM who was also isolated due to the same shop closing. Both patients have agreed to be linked and the Connector is going to go for a walk with them both next week.

Quote from Patient C

"I feel so much better already just for going out and getting some fresh air. I am looking forward to next week."

Married Couple (Patients D and E)

A married couple came for a one-to-one session, both with the goal to lose weight and be more active. They've had two appointments so far. After their first appointment together they both made adjustments to their diet and after eight weeks Patient C had walked an average of five miles per week and lost his target of eight pounds. Patient D lost seven pounds in eight weeks and said that her breathlessness had improved.

Patient F

Situation

He was struggling with his temper and did not like social situations for this reason. He struggles with reading and writing, is unemployed and lives with his foster mother. He shared a lot of his emotional difficulties from the past.

Goals

To manage his anger and improve his mood.

Outcomes

Patient F came for six one-to-one sessions. Working together we were able to identify things that trigger his anger and came up with some strategies for responding better to it. Patient F reported after a few sessions that he had put these into practice and felt much better for it. He decided a good way to improve his reading was to buy a word search book which he found enjoyable. We visited a job club together which was a big challenge for him and he decided he wasn't ready to be applying for jobs yet but to put himself in this situation was a big step towards building his confidence.

Quote from Patient F

"It was good to let certain things out and get off my chest and become more focussed on my reading and maths. I have been able to manage my anger better and have felt less angry. More able to walk out of a situation where I feel angry. I feel happier in myself and more able to laugh and joke with family and friends."

Quote from Mental Health Nurse about Patient F

"Patient F first came to see me in May 2015, with his foster mum, he sat with his head down and shoulders slumped and foster mum did all the talking, with very little input of him. Reluctantly Patient F decided to contact Health Connections and over the coming months I noticed a huge change, he started to come on his own, he would sit up in his chair and engage in conversation with me. On our most recent appointment he was reluctant to leave and was cracking jokes as he was leaving. All credit to Patient F for taking the courage to commit and trust in people outside of his immediate circle of friends and family."

Patient G

Situation

Patient G and his wife were referred to our service by a practice nurse. Patient G has Diabetes and Parkinson's, and both he and his wife are aged 90. Patient G was worried about his balance, his wife had hearing difficulties and they were worried about the smoke alarm and whether she would be able to hear it. Their garden was overgrown as they could no longer look after it and they needed practical help around the home for example putting up shelves.

Outcomes

I contacted the fire service and explained the situation; they then contacted the patients to install an updated fire alarm. I contacted the Independent Living Team, who then arranged with Patient G for him to attend Balance and Safety Exercise Classes and they did a home assessment. I passed on information to the patients about Somerset Care and Repair, so they could contact them about the small home repairs and gardening jobs they needed doing.

Quote from Patient G

"Thank you so much, everything we discussed and needed to be sorted, has been and very quickly. Wish we had known about you sooner. Now I have all these contact details I feel confident we can organise some of these jobs that need doing ourselves in the future."

Patient H

Situation

I've been seeing a lady who had complex physical and mental health issues. She is getting appropriate support from the mental health team so we focussed on her social isolation, low self-esteem, anxiety and domestic issues.

Outcomes

We set achievable goals each week and she made great progress. She started to take pride in her appearance, began to de-clutter and clean her house, started to go for short walks, got help with her garden and went to a Talking Café.

Quote from Patient H's GP

"Thank you v much for your help and time for Patient H. She has definitely benefitted and is in a much better place than she was prior to your work with her. I will continue to encourage the use of tools you have given her to help herself."

Patient I

Situation

I am seeing a lady who was referred by her GP, to encourage her to exercise. She has arthritis and experiences pain. Her family were worried about her staying in bed all day.

Goals

She likes watching TV in bed in the mornings so we set a realistic goal based around her wanting to do something instead of watching TV.

Outcome

She started swimming twice a week with her daughter and went to the pain management course with her husband, which they both enjoyed.

Appendix 3.0 Patients' Experiences of Belonging to Peer Support Groups

Purpose

To explore patients' experiences of, and feelings relating to, attending peer support groups.

Method

Qualitative methods were used in order to gather rich data. Logistical factors determined whether focus groups or interviews were the most appropriate method.

A focus group was carried out with members of the Stroke Peer Support Group. There were eleven participants: 6 men and 5 women. A group facilitator guided a discussion to elicit participants' experiences, thoughts and feelings relating to attending the group and participants also introduced new areas for discussion.

Short individual semi-structured interviews were carried out with participants from the Macular Degeneration Group. There were five participants: 3 women and 2 men. An interview schedule was used to guide the discussion and participants also introduced new topics.

All participants gave their consent for the sessions to be audio-recorded; the recordings were transcribed and anonymised and a Thematic Analysis was applied to analyse and describe the whole dataset.

Theme

From the analysis of the data from both the Stroke and Macular Degeneration Support Groups two main themes and seven sub-themes arose:

Sharing strategies and information

- Practical strategies
- Mental strategies
- Information

Group Identity

- Social Connection and Support
- Shared understanding
- Normalisation
- Empowerment

Sharing Strategies and information

Participants within both groups found that meeting others with similar conditions allowed coping strategies and information to be shared.

Practical Strategies

Practical strategies shared by participants within the groups had improved participants' quality of life, both within the remits of leisure and carrying out tasks:

'It's nice to talk to others and see how they cope and that. Certain things, at home I have to watch TV through a small pair of binoculars [Interviewer: Was that something someone suggested at the group?] Yes, yes. [Interviewer: And does that help?] Oh definitely, definitely and I mention it to other people from time to time as well.' Macular
Degeneration Peer Support Group Member

'I think I've learned odd things like I found it difficult putting tooth paste on a tooth brush…there was one person who said 'oh don't put it on your tooth brush put it straight onto your mouth… so its practical tips like that I think, very good.'
Macular Degeneration Peer Support Group Member

Mental Strategies

As well as practical strategies, one participant described learning a mental strategy for coping from another member:

'One person has given me the best tool I've ever had and I didn't realise that, is that you've got to be able to laugh at yourself.'
Stroke Peer Support Group Member

For some, being able to share strategies helped to relieve the frustrations of living with their condition:

'We're all frustrated by different things but you find ways of getting round that frustration, and one of the ways might be talking to other people who have experienced something and have found ways of getting around it, sharing practical things.'
Stroke Peer Support Group Member

Information

The groups were also found to be highly useful to participants for obtaining information relating to living with their condition.

For one participant, overcoming her initial reticence about attending the group was rewarded by finding out about an exercise class that subsequently helped her recovery:

'I have to push myself to come to the group but once I'm there I'm so very glad I walked in that door and there are other avenues that I've been pointed to that I wouldn't have known existed, like the exercise and stuff that I'm doing, and it is helping because I actually found myself walking down the stairs properly last week, so it helps, its good, very good.'
Stroke Peer Support Group Member

Within the Macular Degeneration group, some members had gone to national conferences and specialist centres to get up-to-date information to share with the rest of the group:

'I think it's a good platform to exchange information. There's a few of us on the committee who go to the macular conferences and find out everything there is going... and we feed back and talk about the speakers… and I think people took it in very well, they were very interested…'
Macular Degeneration Peer Support Group Member

'…we went to Devizes to Somerset Sight to see all the things they've got to help you.'
Macular Degeneration Peer Support Group Member

Group Identity

Some participants seemed to feel a sense of shared group identity, which appeared to have a positive impact on their self-identity. Four processes were described relating to this: Social Connection and Support, Shared Understanding, Normalisation and Empowerment.

Social connection & support

As well as allowing for information and strategy sharing, groups had provided social connection, companionship and support. This was perceived to be particularly valuable for some, who were rarely able to go out:

'The group is lovely for me because we care about each other all the time now.'
Stroke Peer Support Group Member

'It's nice to be with like-minded people who are similarly visually impaired.'
Macular Degeneration Peer Support Group Member

'Some people here only get out occasionally and so it's a big deal for them.'
Macular Degeneration Peer Support Group Member

Shared understanding

Prior to attending the support groups, some participants had never met others with their own condition. This had led to feelings of isolation which had exacerbated their difficulty in coping:

'The frustration you feel, well I felt, as if I was the only person in the whole wide world who's had this, and therefore it is an uphill struggle.'
Stroke Peer Support Group Member

Within both groups it had been significant to participants to meet and spend time with others who really understood what it was like to live with their condition. Part of the benefit was derived from not having to explain how their condition affects them:

'…like you say, for you communication is difficult, but we understand that communication is difficult for some people.'
Stroke Peer Support Group Member

'Well it's just nice to know that when you come here people understand that you can't see things. A lot of people who've never heard of it don't understand what you can see and what you can't see.'
Macular Degeneration Peer Support Group Member

Among members of the Stroke group, there was a sense that adapting to the condition had brought about a changed perception of time; group members acknowledged a shared understanding of this phenomenon and felt others who had not experienced a stroke could not understand this. One participant's words in describing other people as the 'outside world' suggests a particularly strong feeling of group identity:

'I think it's important that we see other people who you don't have to explain to, you don't have to explain it's a different time-scale, it's a different way of looking at the world…'
Stroke Peer Support Group Member

'… we know that time is different for us and we can't always tell the outside world how different it is.'
Stroke Peer Support Group Member

Normalisation

Meeting others with the same condition meant that experiences that had previously caused participants to feel 'weird' or 'peculiar' were viewed differently, as they found that others had had similar experiences:

'…the things that go on with me, you think well was that the stroke or was that something else, but then you see it around you in your fellow people and you realise you're not this weird and peculiar person, and you think 'Oh I'm a little bit like you because yes I've had a stroke…'
Stroke Peer Support Group Member

'…you don't realise until you're in the group with other people that it's not that you're the freak, that's the way it is.'
Stroke Peer Support Group Member

Empowerment

A sense of group cohesiveness also seemed to be engendered by coming together to share and use skills rather than relying solely on medical care:

'I think what we've all got is a very positive attitude – we're not going to go into the 'poor me' syndrome and feel sorry for ourselves, we're going to do something about it and I think that's very important because it's bypassing you as a medical team a lot of the time and it makes us feel more important – it transfers our skills – we've got a good positive attitude towards things.'
Stroke Peer Support Group Member

Summary and Discussion

A focus group and individual interviews were carried out with members of Stroke and Macular Degeneration Peer Support Groups, to explore experiences and feelings about attending these groups. A total of 16 participants were involved: 8 men and 8 women. Thematic Analysis was used to analyse and describe the data.
Participants from the Stroke and Macular Degeneration support groups described benefitting from sharing coping strategies and information. It seemed that processes occurred within the group situations that created a shift in some participants' perceptions of themselves and their personal resources for coping with their conditions: some participants from the Stroke Group seemed to feel a shared identity as one among others who also experienced their health condition; they could integrate their experiences as part of a 'norm' for their condition and place their experience within a contextual framework, which brought comfort. No negative experiences or feelings relating to attending either group were raised. The groups, therefore, would seem to be effective for participants in increasing their coping ability and improving psychological and social wellbeing.

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