

Peer support – a unique resource

Peer led education service at Stoke Mandeville Hospital

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Peer support – a unique resource

- What is the peer led education that we deliver?
- Ensuring effective peer involvement
- How we evaluate the service that we deliver

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- **What is the peer led education that we deliver?**
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Current service

Current service

- Our Patient Education Service has three staff members all peers with lived experience.
 - Patient Education lead
 - Patient Education assistant
 - Patient Education volunteer
- Our Patient education assistant has a caseload of 12 patients and concentrates on the educational needs of the older population.
- Our Patient education volunteer has a caseload of 8 patients and concentrates on the educational needs of short stay admissions.

Current service

- Inpatient Programme:
 - Six week rolling programme of 23 sessions, 13 of which are run by peers. Plus demographic specific discussion groups focusing on lived experience and led by peers.
 - Selection process based on admission, patient education screening tool used on high-risk patients (over 65, C4 and higher, English as a second language) to identify specific learning needs.
 - One-to-one session selection based on referral from MDT or through screening tool.
 - Independent living program (four sessions about living with personal assistants/carers) led by peers.

Current service

- Inpatient Programme Evaluation and Follow up:
 - Clear process within education service for identifying missed sessions and gaps in knowledge
- Family and Friends Programme:
 - Relatives day run four times per year, relatives given patient specific handout information
 - Children and siblings day run once a year.

Future plans for service

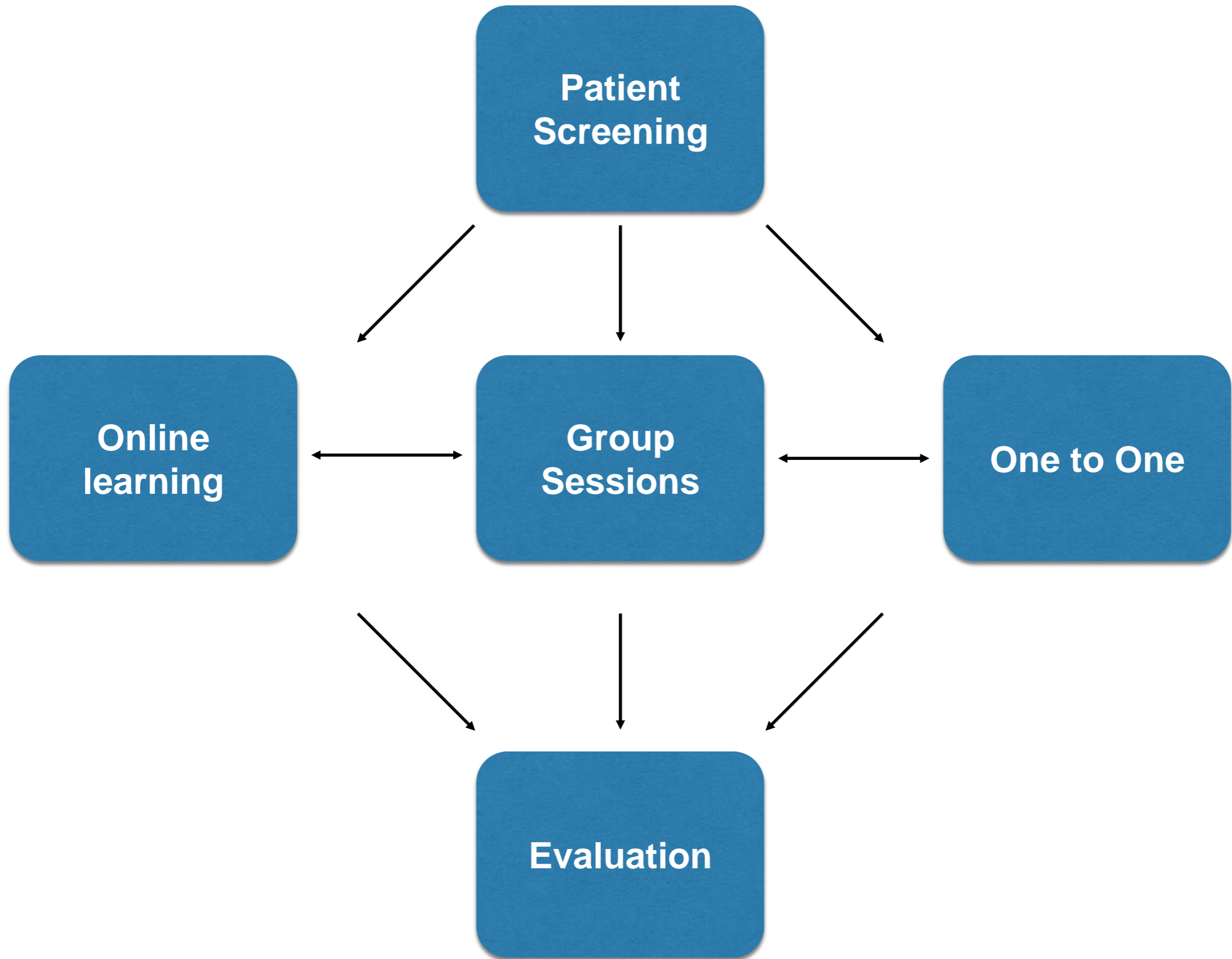
Future plans for service

- Increase patient education service to five staff members all peers with lived experience 1 Patient Education volunteer and 3 Patient Education assistants
- Increase remit of patient education assistants to focus on a broader demographic such as incomplete patients or walkers and vented/trache patients, as well as over 65's and cauda equina.
- Screen all admissions

Future plans for service

- Inpatient Programme:
 - increase in demographic specific groups focusing on who lived experience led by peers.
 - Assess readiness for education.
 - Closer working with assistive technology department for those who wish to learn about their health needs using technology.
 - Separate pathway for identifying and meeting the educational needs of short stay admissions such as Cauda Equina patients





Peer led education at Stoke Mandeville

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Effective peers

- CARF accreditation

CARF Standards for peer support

The spinal cord specialty program implements written procedures for the recruitment of peer supporters.

The spinal cord specialty program provides peer support services that:

- a. Reflect the characteristics of the persons served.
- b. Address the preferences and choices of the persons served.
- c. Address the needs of the persons served.

CARF Standards for peer support

19. Peer supporters receive documented competency based training that:

a. Is based on a peer support curriculum or a curriculum designed and developed with the input of peer supporters [ex. ISCOS (under education committee), amputee coalition]

b. Is provided with the involvement of peer supporters, as appropriate.

c. Includes:

(1) Initial training on current practices in peer support services [ex: community resources, engagement, effective use of sharing life experiences, personal advocacy, adjustment to disability]

(2) Ongoing training on current practices in peer support services.

d. Is provided in a manner that is understandable

CARF Standards for peer support

20. The program demonstrates efforts to include peer supporters in the rehabilitation process of the persons served. [ex: team meetings, education for persons served]

CARF Standards for peer support

- Have a recruitment process
- Recruit people appropriate to your audience
- Train them
- Include them within rehabilitation

Have a recruitment process



Recruit people appropriate to your audience

Train them

Include them within rehabilitation

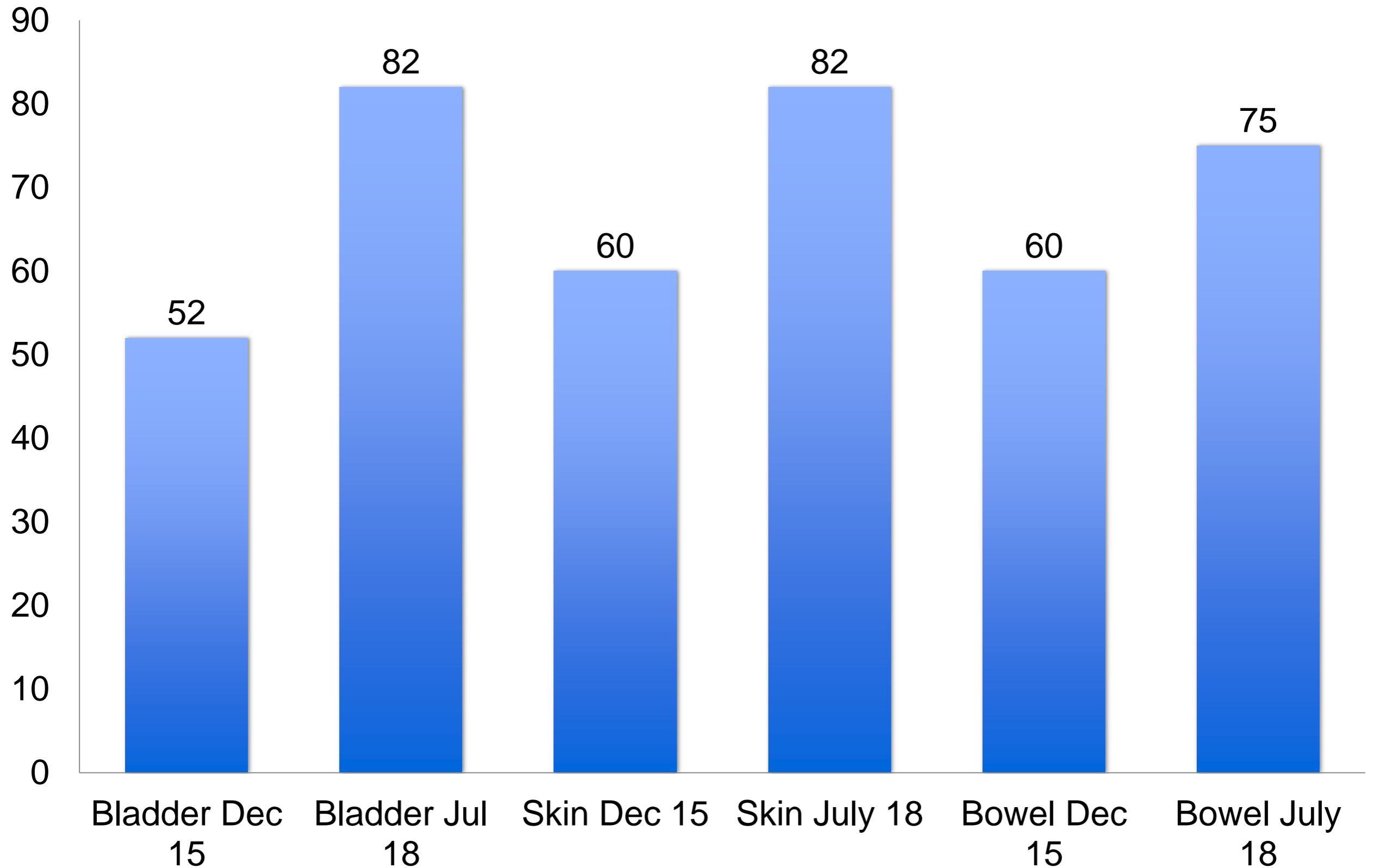
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Evaluation

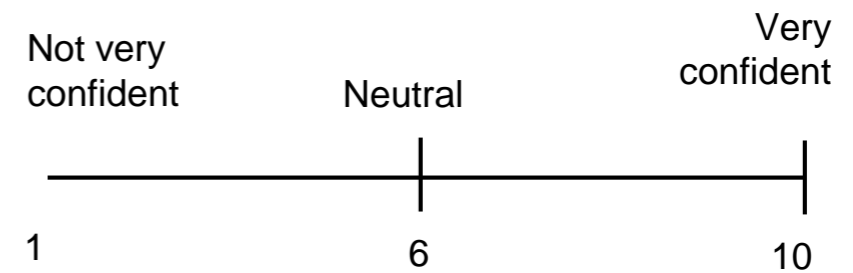
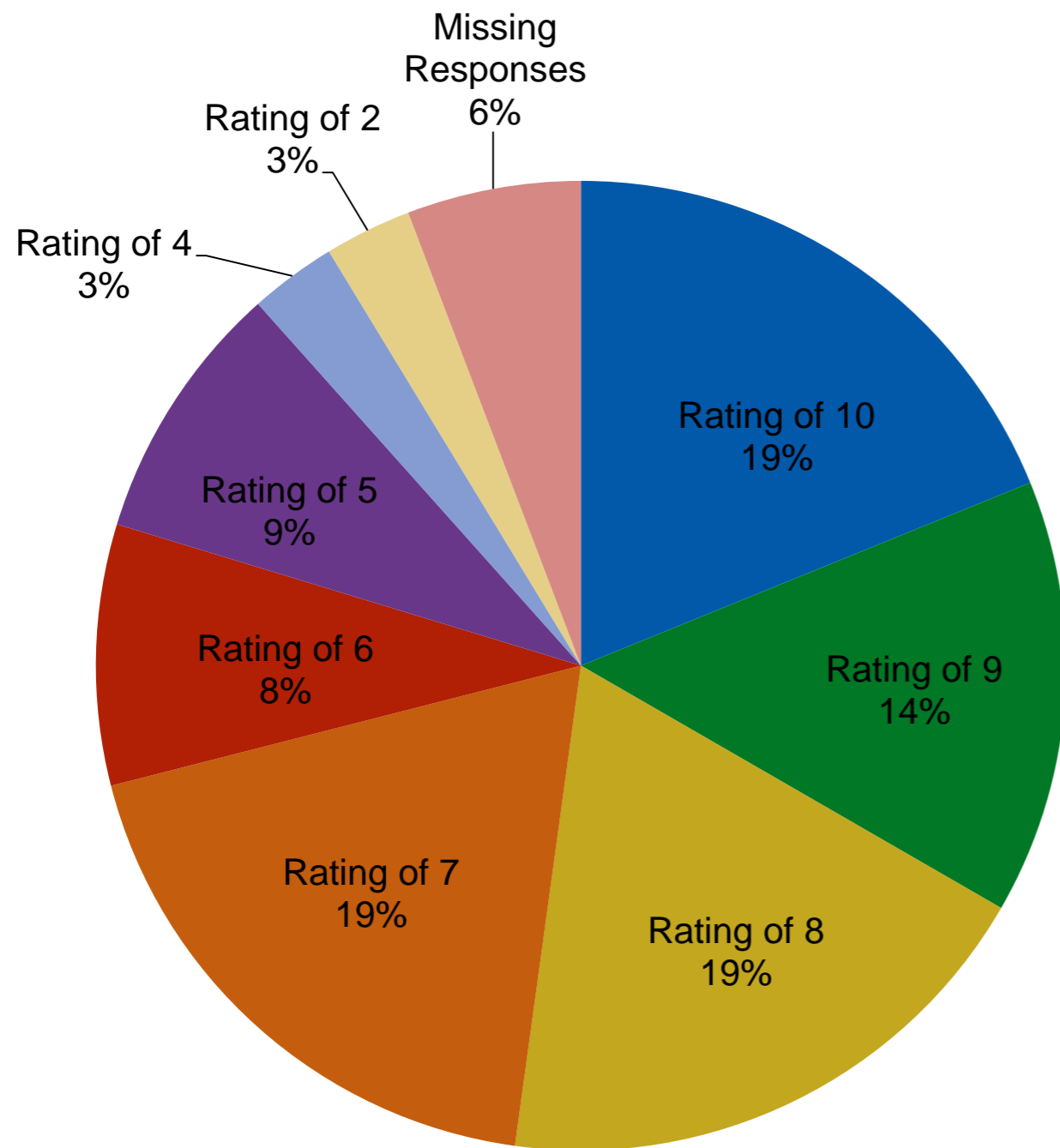
- Attendance
- General confidence living with SCI
- Would they recommend
- Specific questions

Attendance to core sessions

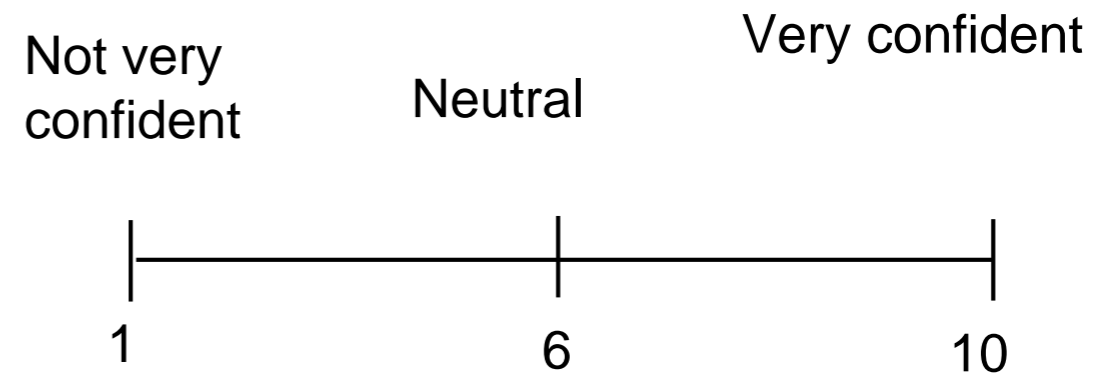
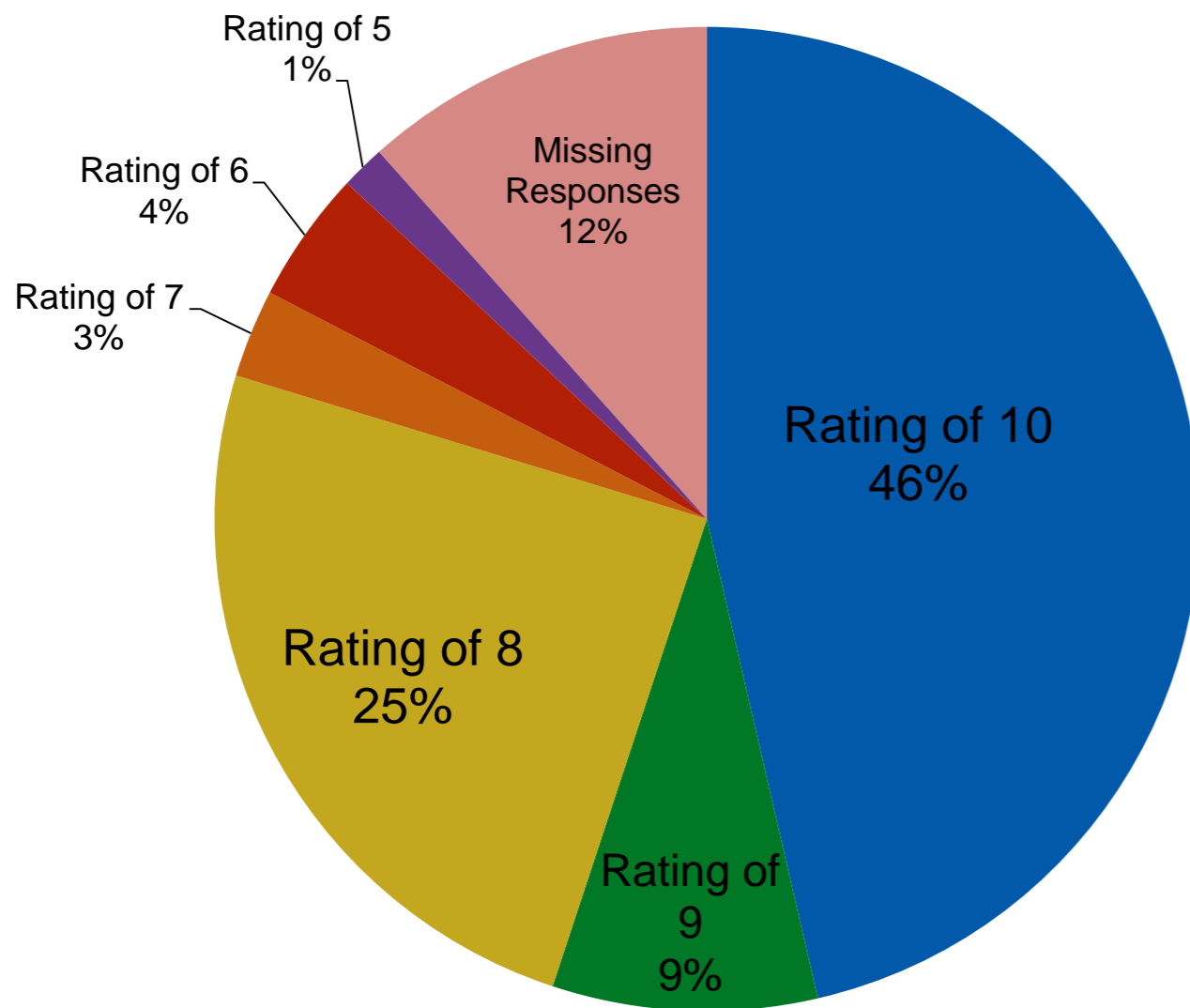


Evaluation completed with peer
educator

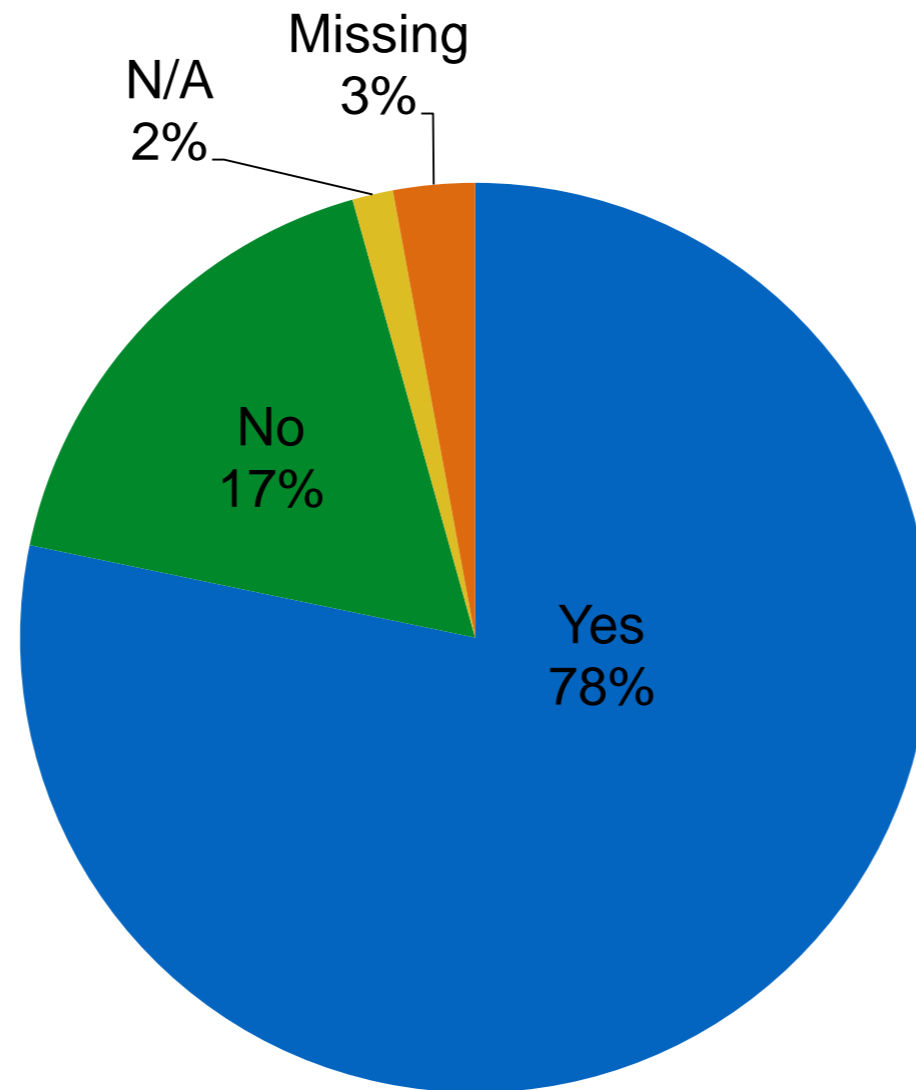
How has Spinal Cord Injury Education has made you feel confident about managing your SCI?



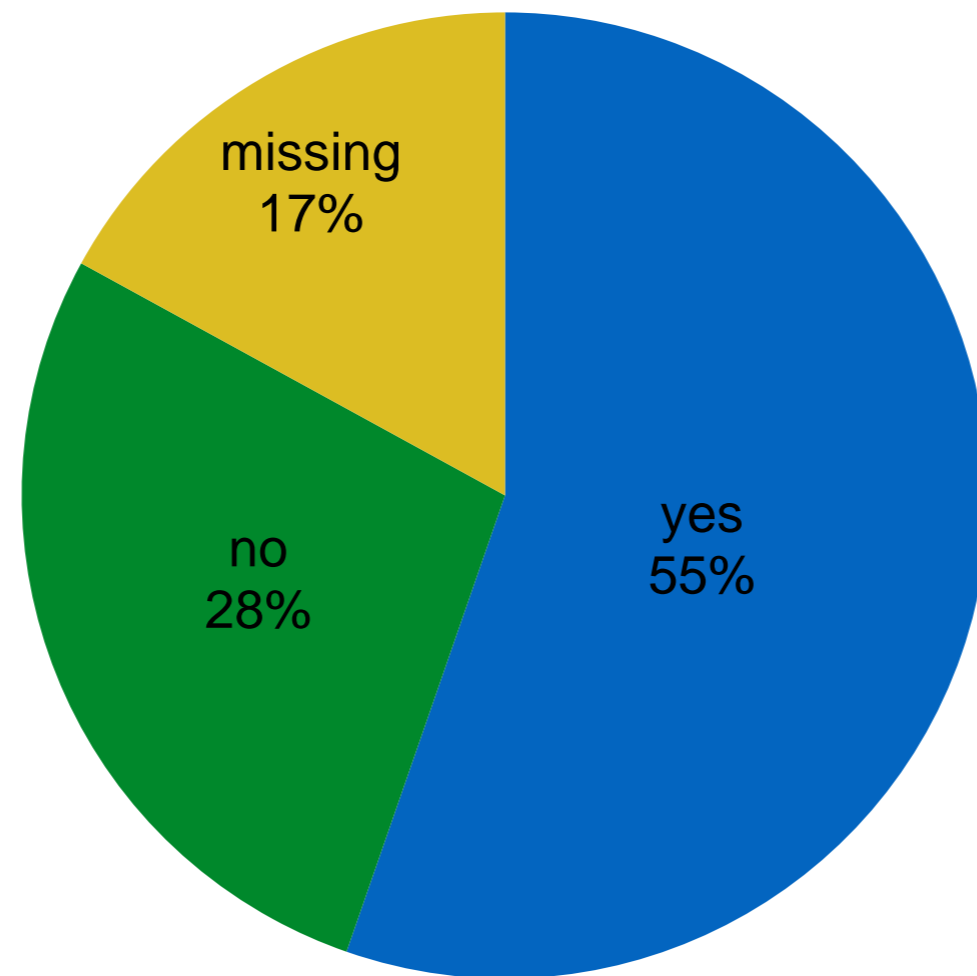
How likely are you to recommend Spinal Cord Injury Education to others



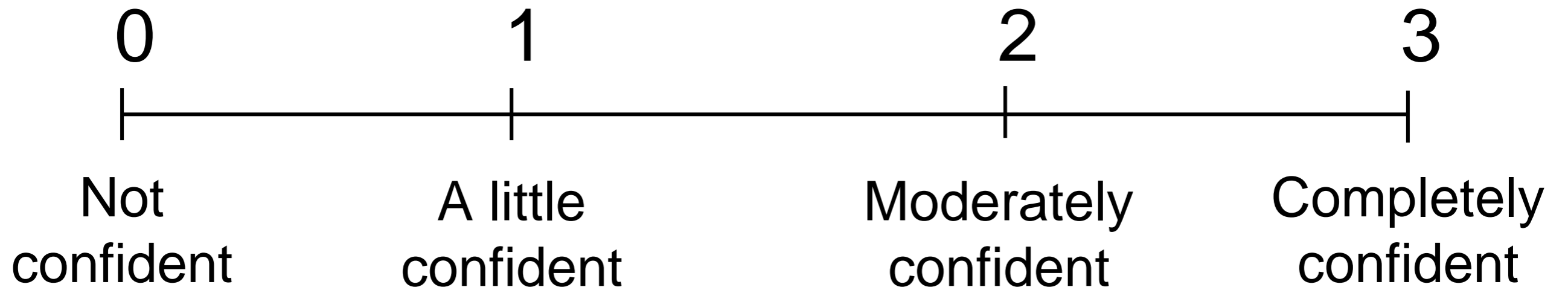
Do you confidently understand your diagnosis and prognosis?



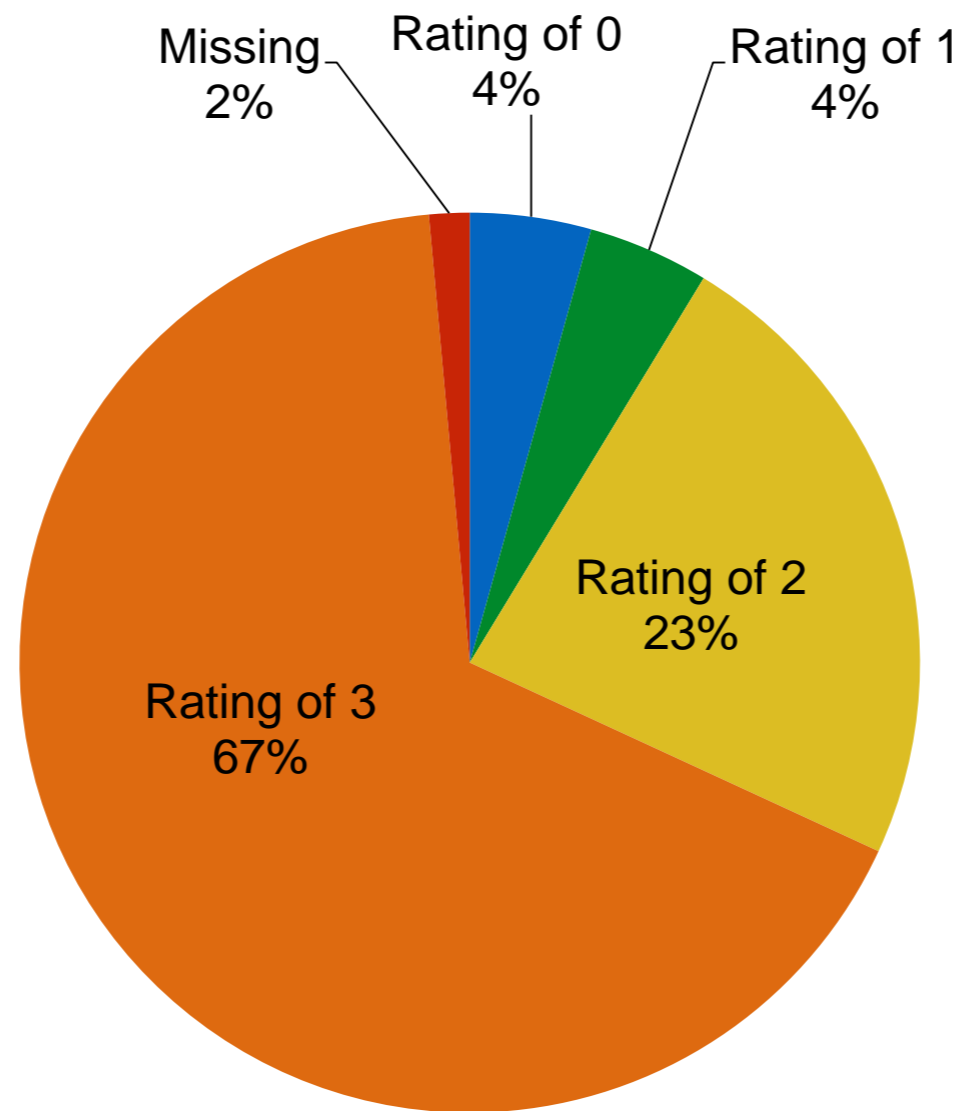
Are you confident you could manage an episode of Autonomic Dysreflexia?



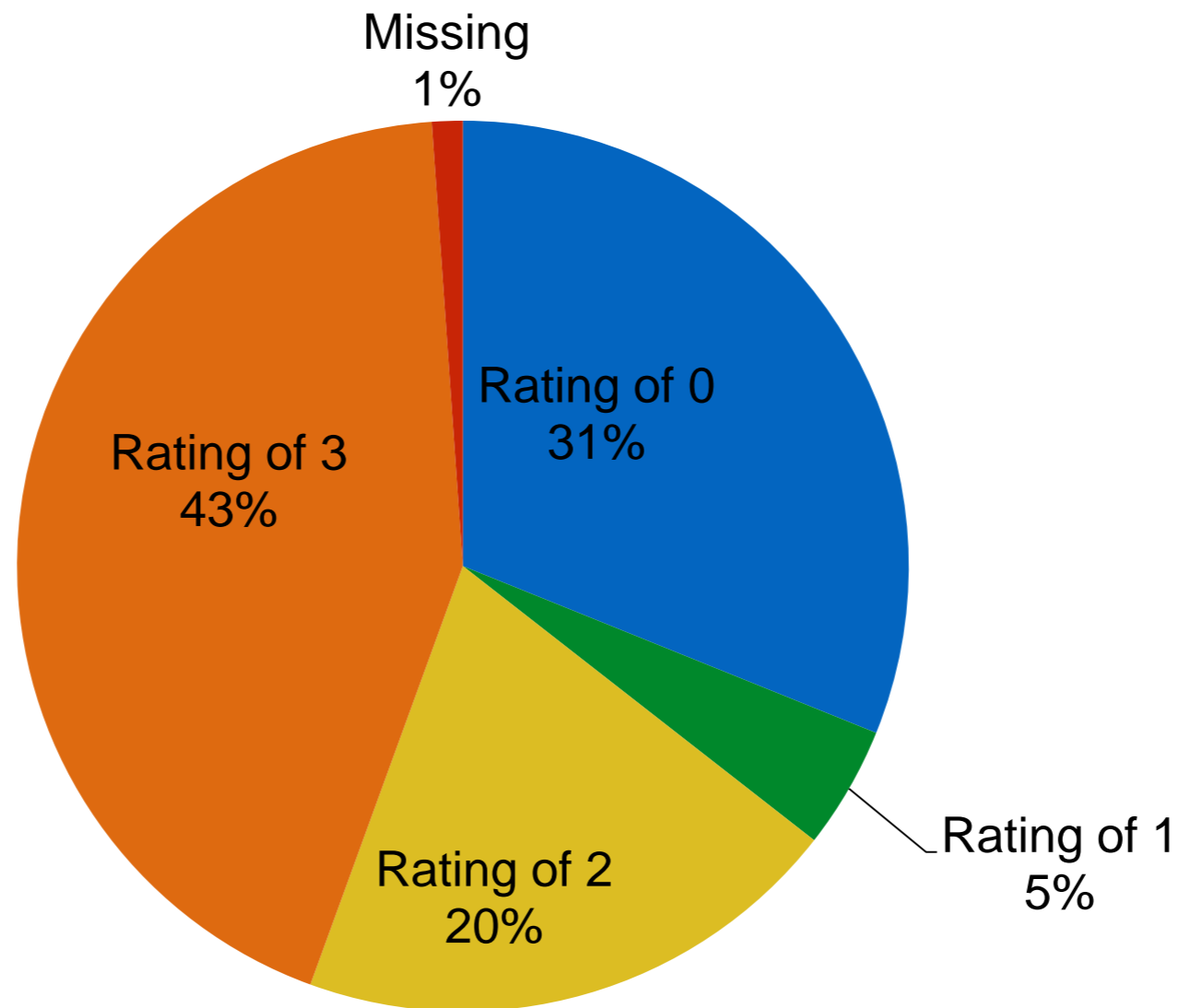
Confidence scales



Skin – Are you confident you know what to look for and where to look?



Bladder – Are you confident you could recognise the signs of a UTI?



Evaluation is key to improvement

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