

# Developing Peer Support for Long Term Conditions

## Final Report

October 2012



Royal College of  
General Practitioners



# Mental Health Foundation

The Mental Health Foundation (MHF) is the leading UK research and development, policy and service improvement charity working in mental health, learning disabilities and dementia. The Foundation undertakes research, develops services, designs training, influences policy and campaigns to raise public awareness throughout the UK with offices in England, Scotland and Wales.

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# Acknowledgments

The Project Team would like to thank the ALLIANCE for funding the project and all our project partners for their valuable support and enthusiasm. In particular we would like to thank Neil Bird from Waverley Care, Linda McGlynn from Diabetes UK Scotland, Margaret Somerville, Dave Bertin and Nicola Cotter from Chest Heart & Stroke Scotland, Gordon Snedden from Angus Cardiac Group, Andy Carver from British Heart Foundation Scotland, Graham Bell, Ross Kerr from Diabetes Care Focus Group, Kevin O'Neill and Janette Barrie from NHS Lanarkshire, Linda Irvine from NHS Lothian, Stewart Mercer from the University of Glasgow Institute of Health and Wellbeing and Diane Rich from RCGP Scotland.

We would also like to thank all our chairs, presenters and workshop facilitators from our networking events and the internal support we have received from within MHF, including Isabella Goldie, Lewis Brown and Claire Walsh.

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## Introduction

This is the final report of the Developing Peer Support for Long Term Conditions project, which was funded by the Long Term Conditions Alliance Scotland (now known as the ALLIANCE) through their Self Management Fund 2011/2012.

## Aims of the Developing Peer Support for Long Term Conditions Project

The Developing Peer Support for Long Term Conditions Project was led by the Mental Health Foundation (MHF) in partnership with the following organisations: Angus Cardiac Group, British Heart Foundation Scotland, Chest Heart & Stroke Scotland, Diabetes Care Focus Group, Diabetes UK Scotland, NHS Lanarkshire, NHS Lothian, The Royal College of General Practitioners Scotland (RCGP) and Waverley Care. The purpose of this project was to take forward the findings from the feasibility study with the aim to:

1. Raise the credibility of peer support in long term conditions
2. Increase access to peer support in long term conditions
3. Improve the quality of peer support delivered and the support/supervision provided to those peer workers
4. Influence the development of peer support in long term conditions to ensure that it has a mental health and wellbeing focus and meets the needs identified in the feasibility study
5. To gain resources and support to develop peer support.

## Project activities

The following activities were undertaken as part of the Developing Peer Support Project:

### 1. Networking events

Two national networking events (one in Edinburgh and one in Glasgow) were held in April and September 2012, involving a total of 147 participants and over 40 different organisations at each event. The purpose of these events was to build a shared understanding about peer support, promote the sharing of good practice and encourage partnership working with peers and between sectors. Discussions and workshops were held on a number of themes including: patient and clinician perspectives on peer support, using lived experience effectively, peer support as a paid profession and peer support and the internet.

### 2. Peer Support Training Programmes

Two new courses were developed and piloted through the project:

- Making it Happen – a one day course aimed at service managers, commissioners and organisations wishing to find out more about peer support.
- Principles into Practice – a two day course aimed at those currently in a peer support role and / or peer support supervisors to support good practice in delivering peer support

Each training course was delivered four times (twice in Lothian and twice in Lanarkshire) to a total of 96 participants. Forty two per cent of the Principles into Practice training participants indicated that they had a long term condition. Our key partner organisations including Chest Heart & Stroke Scotland, Diabetes UK Scotland and Waverley Care were involved in all aspects of training development and delivery, including co-facilitating the training with the core Project Team.

### 3. Local development support

The pilot supported two local NHS Boards, Lothian and Lanarkshire and their local voluntary sector partners, to directly influence service developments for those with long term conditions by taking forward the recommendations of both the Feasibility Study and Living Better. This was primarily undertaken through targeting the training within these two sites and using the findings to develop local action plans and recommendations for future activity.

#### 4. Guidance

The project produced a short overview of the need to know information regarding developing and implementing a peer support project entitled 'Peer Support for Long Term Conditions: The Basics'. The Basics is available in both an electronic and printed format and will continue to be available via the Peer Connect Scotland site for the foreseeable future.

#### 5. Peer Connect Scotland

Peer Connect Scotland is an online networking and information sharing resource developed by the project using the NING platform. The site acts as a one stop shop for information relating to the development and delivery of peer support for people with long term conditions. As this is a dynamic site, it is envisaged that the resource library will continue to grow and be added to over time. The site also provides the facility for discussions to take place between members, a feature that we will seek to support over the next six months.

### Project Evaluation

The project adopted an action research model, whereby evaluation findings were incorporated on an ongoing basis throughout the course of the project to inform the development of project activities. The evaluation incorporated the following:

- Edinburgh Networking Event evaluation form – 36 responses (49% response rate)
- Glasgow Networking Event evaluation form – 37 responses (50% response rate)
- Making it Happen Training courses
  - » pre & post training questionnaires – 37 responses (95% response rate)
  - » follow up questionnaires - 16 responses (41% response rate)
- Principles into Practice training courses
  - » pre & post training questionnaires – 46 responses (90% response rate)
  - » follow up questionnaires - 9 responses (18% response rate)
- Interviews with strategic leads in Lothian & Lanarkshire – 2 participants
- Expert group focus group discussion – 6 participants

### Impact Findings

Summarised findings from across the project activities are as follows:

#### Development

- After training, all but one person attending Making it Happen and Principles into Practice 'agreed' or 'strongly agreed' with this statement "I have a good understanding of what peer support is"
- The proportion of people either 'agreeing' or 'strongly agreeing' with the statement "I am confident in my ability to apply peer support principles to activities or services for people with long term conditions" went from 57% (n=27) before the Principles into Practice training to 91% (n=42) after the training
- The proportion of people 'agreeing' or 'strongly agreeing' with the statement "I understand how to use a lived experience of long term conditions safely, effectively and in a supportive way as part of peer support" went from 54% (n=24) before the Principles into Practice training to 98% (n=45) after the training

The proportion of people 'strongly agreeing' with the statement "I understand the relationship between emotional wellbeing and long term conditions" went from 20% (n=9) before attending Principles into Practice to 72% (n=33) after training, and from 38% (n=14) of participants before attending the Making it Happen training to 65% (n=24) after attending the training.

#### Partnerships

Partnership working was a core theme which ran through all project activities: from the establishment of the expert group, to piloting the training within two NHS Health Boards and facilitating networking events.

- In terms of bringing together experts by experience: 94% of respondents (n=35) at the Edinburgh networking event and 97% of respondents (n=36) at the Glasgow event felt that that this aim was 'fully' or 'partially met'
- In terms of promoting partnership working: 92% of Edinburgh respondents (n=33) and 97% of Glasgow respondents (n=36) felt that this aim was 'fully' or 'partially met'

#### Sustainability

All project activities were designed with sustainability in mind, and a number of overarching project aims make specific reference to sustainability, particularly with regards to increasing access to peer support and gaining resources and support to develop peer support.

To measure the impact of the training, all participants of both training courses were sent a follow up survey a month or two after they had completed the training.

Examples of ways in which learning was being implemented included:

- Incorporating training materials into peer support group sessions
- Using learning to inform service planning and commissioning processes
- Develop outcome measures to better assess impact of peer support services

Specific project activities, such as Peer Connect Scotland and Peer Support for Long Term Conditions: The Basics provide resources which support the ongoing development of peer support. The project has also created two quality training packages and trainers experienced in delivering them, which have the potential to be delivered again in the future. The second networking event also facilitated access to three significant Trusts which are interested in funding peer support services in Scotland. Involvement in the project has also built skills, expertise and knowledge within the project partners in general, and within the core MHF Project Team in particular.

### Conclusions and recommendations

All project milestones were achieved and exceeded partners expectations, and results from the evaluation indicate that our project activities were successful and meeting the needs of those participating. It is clear that whilst considerable progress has been made through the project, there is still a significant distance to travel in terms of making sure peer support services for people with long term conditions are widely available across Scotland and organisations are equipped with the skills and knowledge with which to develop such responses. Consequently the following recommendations, arising from the project evaluation, are warranted.

#### Development

- Build on capacity developed within project team and partners to further extend the availability of Making it Happen training and Principles into Practice training across Scotland
- Develop additional training modules to support services and organisations to set up good quality peer support services in terms of: recruitment; role descriptions; support and supervision; boundaries; how to prevent / overcome challenges
- To encourage further uptake from statutory agencies, tailor the training to focus on local strategic priorities such as promotion of self management or condition management

#### Partnerships

- Provide further opportunities and spaces to bring people and sectors together to build the credibility of peer support

- Obtain strategic commitment at local and national policy levels to embed peer support within the self management of long term conditions

#### **Sustainability**

- Continue to support the fledgling network through online Peer Connect Scotland and an ongoing programme of networking events and thematic workshops to further embed knowledge and understanding of peer support
- Build capacity to deliver training with partner agencies and through development of Training for Trainers courses

# 1 INTRODUCTION

## 1.1 About this Report

This is the final report of the Developing Peer Support for Long Term Conditions project, which was funded by the Long Term Conditions Alliance Scotland (now known as the ALLIANCE) through their Self Management Fund 2011/2012. The report outlines the aims and objectives of the project, describes the project activities, summarises findings and outcomes from the project and presents a series of conclusions and recommendations to point the way forward and future direction of peer support for people with long term conditions in Scotland.

## 1.2 Evidencing the Need for Peer Support

Research indicates that approximately 25-30% of people with long term conditions such as Diabetes and Coronary Heart Disease will experience depression<sup>12</sup>. This figure has multiple implications: for the individuals concerned, in terms of the impact on their quality of life and ability to manage their long term conditions; and for services that are supporting people with long term conditions, in terms of the costs associated with addressing mental health needs.

The Kings Fund argue a compelling economic case for additional support and attention to address the mental health of people with long term conditions because of its impact on health budgets<sup>3</sup>. They recognise that peer support may have an important role to play in helping people to self manage their conditions.

Focus groups with 200 people with long term conditions as part of the Living Better project<sup>4</sup> also indicated that people would value more opportunities to share their experiences of living with a long term condition with others in group and one-to-one settings. Similar findings were reported in the Long Term Conditions Alliance Scotland (LTCAS) report Emotional Support Matters<sup>5</sup>.

## 1.3 About Peer Support

Peer support at its simplest level can be described as one person supporting another, where both parties share a common attribute, such as a similar long term condition or life experience. In 2009, LTCAS funded the then Scottish Development Centre for Mental Health (now merged with the Mental Health Foundation) to undertake a feasibility study to explore peer support as an approach to support self management and to assess the potential for formalised peer support to be developed for people with long term conditions<sup>6</sup>. This study built on the development of formalised peer support in the mental illness sector<sup>7</sup>.

The feasibility study highlighted the important role peer support can play in supporting the mental health and emotional wellbeing of people with long term conditions. However, whilst the study found some excellent examples of peer support for people with long term conditions in Scotland, it was clear that access to peer support is still limited, is confined to the voluntary sector and can depend on the Health Board you live in as well as the condition you have.

## 1.4 Aims of the Developing Peer Support for Long Term Conditions Project

In 2011 LTCAS funded the Mental Health Foundation to undertake the Developing Peer Support for Long Term Conditions Project in partnership with the following organisations: Angus Cardiac Group, British Heart Foundation Scotland, Chest Heart & Stroke Scotland, Diabetes Care Focus Group, Diabetes UK Scotland, NHS Lanarkshire, NHS Lothian, The Royal College of General Practitioners Scotland (RCGP) and Waverley Care. The purpose of this project was to take forward the findings from the feasibility study with the aim to:

- Raise the credibility of peer support in long term conditions
- Increase access to peer support in long term conditions
- Improve the quality of peer support delivered and the support/supervision provided to those peer workers
- Influence the development of peer support in long term conditions to ensure that it has a mental health and wellbeing focus and meets the needs identified in the feasibility study
- To gain resources and support to develop peer support

## 1.5 Key Objectives

To meet the aims and objectives of the pilot, four areas of work were established. It was hoped that addressing these would raise awareness of peer support amongst professionals in long term conditions, and to help build capacity in the sector. The four elements were:

1. Network Development: Raising awareness about the benefits of peer support and the possibilities for accessing and developing new opportunities for delivering access to peer support through networking and information sharing activities
2. Local Development Support: Facilitating better levels of meaningful partnership and integration between the statutory and voluntary sectors as well as the mental health and long term conditions sectors on the issue of providing access to high quality peer support
3. Peer Support Standards: Developing standards that provide guidance and support to those employing volunteer or paid peer support workers to help them better support peer workers
4. Training Courses: Producing and piloting a standard training for peer support workers working with people with long term conditions and for other professionals who will work with them utilising current knowledge and good practice (gathered in our feasibility study) within long term conditions and from the mental health field

The project took place between October 2011 and October 2012, and was delivered nationally (networking and standards) in the Lanarkshire and Lothian areas (training delivery and local development support).

1 Fenton WS, Stover ES (2006). 'Mood disorders: cardiovascular and diabetes comorbidity'. Current Opinion in Psychiatry, vol 19, no 4, pp 421-7.

2 Lin, Elizabeth H. B., Katon, Wayne, Rutter, Carolyn, Simon, Greg E., Ludman, Evette J., Von Korff, Michael, Young, Bessie, Oliver, Malia, Ciechanowski, Paul C., Kinder, Leslie, Walker, Edward Effects of Enhanced Depression Treatment on Diabetes Self-Care Ann Fam Med 2006 4: 46-53

3 Naylor C, Parsonage M, McDaid D, Knapp M, Fossey M, Galea A (2012) Long term conditions and mental health: the cost of co-morbidities, London: The King's Fund

4 Maxwell M, Donaghy E, Woodhouse A, Mercer S, Lawton K, Wallace R & Bailey E (2011) The Living Better Project: Addressing the mental health needs of people with long term conditions, RCGP Scotland

5 Long Term Conditions Alliance Scotland (2011) Emotional Support Matters: Emotional and Psychological Support Needs of People with Long Term Conditions, Glasgow: LTCAS

6 McLean J, Woodhouse A, Biggs H, Bowie J (2012) Exploring peer support as an approach to self management: feasibility study report, Mental Health Foundation

7 McLean J, Biggs H, Pratt R & Maxwell M (2009) Evaluation of the delivering for mental health peer support worker pilot scheme, Scottish Government Social Research

## 2 PROJECT ACTIVITIES

This section provides an overview of the Developing Peer Support for Long Term Conditions project activities undertaken in 2012. They can be summarised as follows:

### Network development

- Two national networking events in Edinburgh and Glasgow (147 participants)
- Peer Connect Scotland, our online resource

### Training

- Developing and delivering two new training courses to support the development of peer support services
  - » Peer Support: Making it Happen (1 day) (39 participants)
  - » Peer Support: Principles into Practice (2 days) (57 participants)

### Local development support

- Supporting NHS Lothian and NHS Lanarkshire to enhance local capacity for peer support services through training delivery and action planning

### Guidance

- Peer Support for Long Term Conditions: The Basics – a short overview of the need to know information regarding developing and implementing a peer support project

## 2.1 Peer Support Networking Events

**17th April 2012, John McIntyre Centre, Edinburgh**

**27th September 2012, Grand Central Hotel, Glasgow**

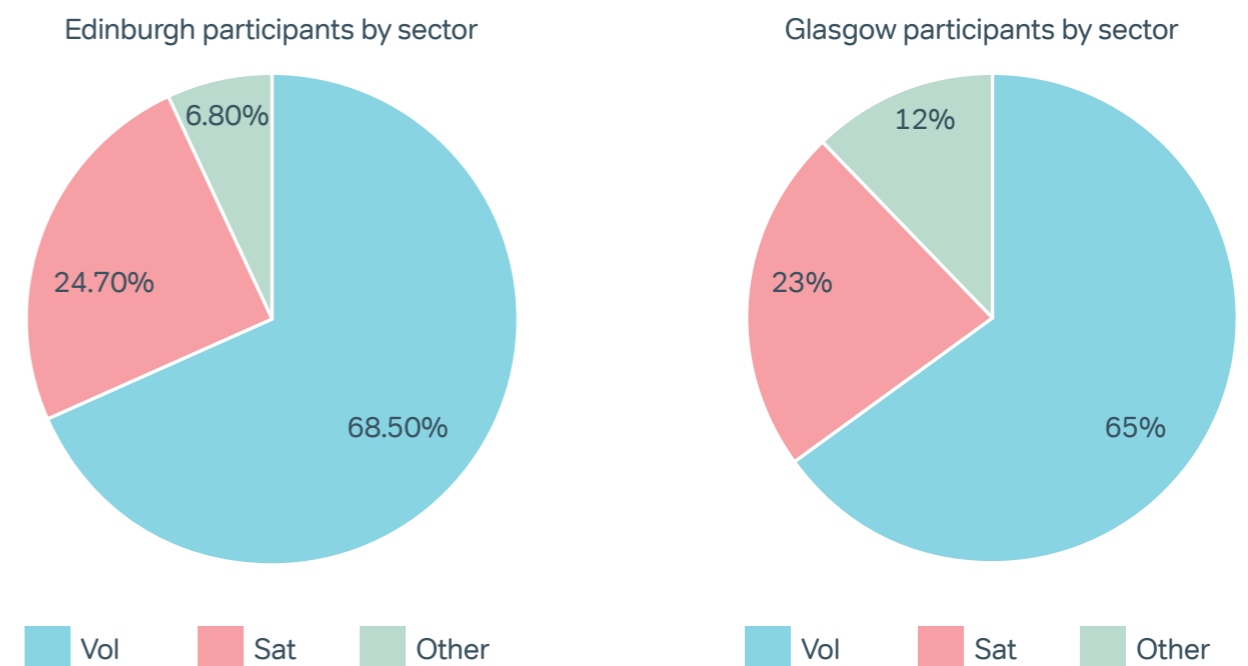
These two national networking events were designed to address the following aims:

1. Bring together expertise by experience, share good practice / examples that can contribute towards developing peer support
2. Build shared understanding of peer support, its benefits and key principles (Edinburgh)
3. Share information about and learning from our peer support training courses and other project activities (Glasgow)
4. Share information on funding sources and support partnerships in this
5. Promote partnership working between voluntary and statutory workers and organisations working with different target groups and conditions

### Who came

Seventy three individuals registered for our Edinburgh event and 74 to our Glasgow event. Each attracted a range of different organisations and sectors, as indicated:

**Figure 1: Edinburgh network event participants by sector**



In terms of the voluntary sector participation, organisations represented included: Asthma UK Scotland, Arthritis Care Scotland, Lothian Centre for Inclusive Living, MND Scotland, MS Society, North West Carers Group, People First Scotland, Pink Ladies, Scottish Huntington's Association, Stirling Users Network, Stroke Matters Inverclyde. Individual designations included: Peer Support Service Leaders and Co-ordinators, Project Managers, Self Management Trainers, Development Managers and Workers, Volunteer Co-ordinators, and Volunteers.

In terms of statutory sector participation, organisations represented included: City of Edinburgh Council, North Lanarkshire Council, South Lanarkshire Council, NHS Education Scotland, NHS Ayrshire & Arran, NHS Greater Glasgow & Clyde, NHS Lothian, NHS Lanarkshire, NHS Tayside and the Scottish Government. Individual designations included: Nurse Consultants for Long Term Conditions, Programme Directors, MCN Co-ordinators, Peer Support Managers, and Specialist Nurses.

## What we did

### Edinburgh Programme

- Introducing the project and background research – MHF
- Personal perspectives on peer support:
  - » Patient – Graham Bell
  - » Clinician – Prof Stewart Mercer
  - » Peer support service providers – Gordon Snedden, Angus Cardiac Group; Neil Bird, Waverley Care
- Peer support guidance prioritisation exercise and networking discussions

### Glasgow Programme

- Findings from the project – MHF
- Workshops on:
  - » Peer support and the internet – Action for ME
  - » Visual arts as a tool – Amaan Project, MHF
  - » Peer support for young people – Action for Sick Children Scotland
  - » Managing boundaries – Waverley Care
  - » Using lived experience effectively – Chest Heart & Stroke Scotland
  - » Peer support as a paid profession – Scottish Recovery Network
- Funding discussions with grant making bodies – BIG Lottery, Robertson Trust, RS Macdonald Trust

## Feedback from participants

**“Really helpful to meet people working in peer support on their own within an organisation. Peer support for the peer supporters!” (Edinburgh networking event participant)**

Detailed evaluation findings from the both networking events are presented in our Impact Chapter (Section 4.2). In relation to the event aims, content and overall organisation, responses from participants at both networking events was generally very positive:

- Approximately half of participants felt that three out of four aims of the networking events were fully met, with the most of the others feeling that the aims were partially met. The percentage of respondents considering the four aims fully or partially met was as follows:
  - » Aim 1 Bringing together experts by experience: Edinburgh 94%, Glasgow 97%
  - » Aim 2 (Edinburgh) Build shared understanding of peer support: 92%
  - » Aim 2 (Glasgow) Share learning from project activities: 100%
  - » Aim 3 Share information on funding sources: Edinburgh 81%, Glasgow 92%
  - » Aim 4 Promote Partnership working: Edinburgh 92%, Glasgow 98%

- The aspects of both networking events that participants liked the best and found most useful were: the opportunity to connect with other people and organisations interested in developing and delivering peer support services, and; learning about peer support in general.
- In Edinburgh, 53% of respondents rated the presentations as ‘excellent’ and a further 42% as ‘good’. The prioritisation exercise and final plenary discussion were thought to be less effective, with 14% rating the final plenary discussion as excellent and 56% ‘good’ and 8% rating the prioritisation exercise as ‘excellent’ and 47% as ‘good’. Reasons for this less positive response included some uncertainty as to the purpose of the prioritisation exercise.
- In Glasgow, all elements of the programme were rated as ‘excellent’ or ‘good’ by most participants. All but one participant who attended the presentation in the morning rated it as ‘excellent’ (24%) or ‘good’ (68%). All workshops were rated well by participants. The speed dating divided opinion: 60% of participants rated it as ‘excellent’ or ‘good’ with a further 16% rating it as ‘satisfactory’ and 13% rating it as ‘poor’ or ‘very poor’. Many of the negative comments related to the short length of time allotted to each ‘date’, which could be increased for future speed dating sessions.
- The organisation of both networking events was rated well by participants with 95% of participants saying it was either ‘excellent’ or ‘good’. Both venues and catering at each event received similar praise with 94-100% of participants rating these elements as ‘excellent’ or ‘good’. The content of both events and the delegate packs were rated as ‘excellent’ or ‘good’ by 92-98% of participants.
- Few negative comments were received about either networking events, other than those relating to the prioritisation exercise in Edinburgh and the speed dating in Glasgow. At both events some participants indicated that they would have liked even more time for networking and discussion.

Further information about the networking events is available in Section 4.2 and through Peer Connect Scotland.

## 2.2 Peer Support Training Programmes

The largest component of the Developing Peer Support for Long Term Conditions Project was the production and piloting of new training courses to support the development, reach and quality of peer support services in Scotland. Two new training courses were developed through the project:

- Making it Happen – a one day course aimed at service managers, commissioners and organisations wishing to find out more about peer support
- Principles into Practice – a two day course aimed at those currently in a peer support role and / or peer support supervisors to support good practice in delivering peer support

### How the training was developed and delivered

Each course was developed in collaboration between the core project team and project partners, particularly Waverley Care, Chest Heart & Stroke Scotland, Diabetes UK Scotland and Angus Cardiac Group. A training sub-group was set up with representatives from these organisations and the project team to plan the course content, discuss and agree facilitation roles and support recruitment to training courses. The group met on several occasions and discussions were also held remotely via email and telephone. Other expert group members were also kept informed about the training development and had the opportunity to input through expert group meetings.

It was through discussions in the training subgroup that it was agreed to develop Principles into Practice as a two day course, rather than the one day course originally planned. This decision was taken to provide enhanced and more detailed learning opportunities for participants. As a consequence, and with the agreement of the funders more time and emphasis was placed within the project on training development and delivery and slightly less on Peer Connect Scotland. Evaluation findings from Principles into Practice presented in Chapter 4 would suggest that this was an appropriate decision to make.



Representatives from Waverley Care, Chest Heart & Stroke Scotland, Diabetes UK Scotland and Angus Cardiac Group were also involved in the delivery of the pilot sessions to input direct practice experience of developing and delivering peer support services. All training courses were facilitated by at least two trainers, one of whom was always a member of the MHF Project Team.

It was anticipated at the start of the project that peer supporters themselves may have got involved in training delivery, but this did not prove to be feasible within the scope of the project. Project partners agreed that as the training was new, it warranted the involvement of those with considerable training and service development experience to enable good assessment of the content and flow of the training to take place. However, towards the end of the training pilots, certain partners, such as Waverley Care, invited key peer volunteers into the training, and their input and first hand experience was of considerable value.

The training team adopted an iterative approach to training delivery, whereby learning from initial training courses informed the content of subsequent courses. In this way the two training courses were further developed and refined over the pilot period.

Each course was delivered four times (twice in Edinburgh and twice in Motherwell) between June and September 2012. In total we attracted 96 participants to the training.

### Peer Support: Making it Happen (1 day)

Designed for service managers, commissioners and organisations wishing to find out more about peer support

#### Course aims

- To develop baseline understanding of the potential applications of the principles of peer support in practice.
- To develop their knowledge about peer support and emotional wellbeing in relation to long term conditions, before using this to consider the practicalities of implementing peer support in the context of their own work.

#### Course learning outcomes

- Participants will develop understanding of relationship between emotional health and wellbeing and long term conditions.
- Participants will gain an overview understanding of peer support principles, including the models of peer support, the context in which they are delivered, and the benefits of each.
- Participants will gain confidence in applying peer support principles to new and existing services.
- Participants will have the opportunity to discuss their needs in relation to mental health awareness and suicide prevention and tailored recommendations for recognised training courses will be offered.

#### Course outline

Section 1 – Mental wellbeing in long term conditions

- Introduction to concepts in mental health and wellbeing
- Mental health in long term conditions exercise

Section 2 – What is peer support

- Principles of peer support
- Different models of peer support

Section 3 – Implementing peer support in your work

- Developing and starting services

- Delivering services effectively
- Evaluating and improving services

#### Training partners

Angus Cardiac Group, Chest Heart & Stroke Scotland and Waverley Care were all involved in co-delivering individual Making it Happen training sessions alongside two trainers from the Mental Health Foundation. Their involvement included presenting information from PowerPoint presentations, facilitating small group discussions, taking feedback and inputting their own experiences of developing and delivering peer support services into conversations and debates.

#### Who came

Individuals were recruited to the training through a number of routes including: local strategic statutory and voluntary sector contacts in the two pilot areas (NHS Lothian and NHS Lanarkshire), network event participants, Self Management Fund award holders, expert group partner organisations and networks. This multi-strand approach to recruitment was designed to recruit a variety of strategic voluntary and statutory participants, focused primarily within the two pilot sites, but extending beyond these sites if interest was indicated.

An email invitation, programme and booking form were circulated approximately five weeks before the first Making it Happen training dates, a shorter timescale than was optimum, but as it was our intention to complete this round of training before the summer holidays, the time available was limited. Nevertheless, fifty five people registered to attend the Making it Happen one day training in June (25 in Lothian, 30 in Lanarkshire) of which 39 attended (19 in Lothian, 20 in Lanarkshire). Considering the timescales and that this was a new pilot course with no evaluation evidence to support its quality, the project team, trainers and expert group members all viewed these participation rates as successful.

Of the 37 people who attended the training and completed a post training evaluation form, 21 (57%) were from the voluntary sector and 16 (43%) were from the statutory sector. Ten participants (27%) worked for or within mental health services / organisations and 11 (30%) for long term condition services / organisations. The remaining participants (n=16, 43%) were not from specifically mental health or long term conditions services / organisations, including for example health improvement leads (n=6, 16%). In terms of individual designations, the course attracted more team leaders, project co-ordinators and service managers than those with strategic roles, whom the course was primarily aimed at. Subsequent discussion with our local leads in NHS Lothian and Lanarkshire suggested that a one day course may have been difficult for strategic managers to attend and consequently a shorter two hour briefing may be more appropriate in the future.

#### Participant feedback

**“Very well organised and delivered. Good balance between theory and practice.”**

**“This really helped me identify key action points that I need to work on and develop in my own work.”**

**“Very informative, linking mental wellbeing in long term conditions and the role peer support could have in addressing this area.”**

- Most respondents reported that they felt that the first three learning outcomes of the training were ‘fully met’:
  - » Understanding the relationship between emotional health and long term conditions: 92%
  - » Understanding peer support principles and models: 86%
  - » Confidence in applying peer support principles: 81%
- The outcome relating to discussing mental health and suicide prevention training needs was felt by participants to have been less fully achieved, with only 13 (35%) feeling it was ‘fully met’, and 15 (41%) ‘partially met’. Subsequent discussion within the training team on this issue led to the agreement that whilst it was important within the training to highlight further training opportunities around mental health and suicide prevention, it was probably outwith the scope of this course to do anything more detailed than this. Consequently future Making it Happen training courses will not include this as a specific learning outcome.

- All respondents except one rated the three sections of the training either 'very' or 'quite useful' (n=36, 97%), with 68-87% finding each section 'very useful'.
- All aspects of the training delivery were viewed as successful with the majority of respondents 'strongly agreeing' or 'agreeing' to statements such as that the trainers were knowledgeable (100%), the training was of high quality (100%), the content was relevant to their needs (97%) and the objectives were clear (98%).
- The most useful aspects of the course included:
  - » The different models of peer support
  - » The opportunity to learn from the experiences of others
  - » Explaining the links between mental health and long term conditions.
- Few (n=12) respondents provided data on what they felt was least useful. Of these, the morning presentation on the links between mental health and long term conditions was felt to be least useful because of its length and didactic nature.

Further findings from the Making it Happen training evaluation are presented in our Impact chapter (Section 4.1), and are available in full in the training evaluation report.

### Peer Support: Principles into Practice (2 days)

Designed for those currently in a peer support role and / or peer support supervisors to support good practice in delivering peer support

#### Course aims

The Principles into Practice training aimed to provide participants with an increased understanding of: peer support roles and functions and their potential benefits; the links between mental health and long term conditions; how to use lived experience of long term conditions effectively and supportively; the boundaries of peer support and avoiding dependency.

#### Course learning outcomes

1. Participants will develop understanding of the relationship between emotional health and wellbeing and long term conditions, with an emphasis on the peer supporter perspective.
2. Participants will gain an overview understanding of peer support principles, including models of peer support, the context in which they are delivered, and the benefits of each, with an emphasis on the peer supporter perspective.
3. Participants will explore the boundaries of peer support, including onward referrals, risk assessment and boundaries.
4. Participants will learn to use their lived experience of a long term condition in a focussed and professional manner.
5. Participants will discuss their role in the context of what they have learned, and create a learning and reflection log and an action plan for framing the ongoing personal learning in this area.
6. Participants will have the opportunity to discuss their needs in relation to mental health awareness and suicide prevention and tailored recommendations for recognised training courses will be offered.

#### Course outline

##### Day One

##### Section 1 - What is peer support

- Introduction to peer support
- Finding the peer connection exercise

##### Section 2 - Mental wellbeing in long term conditions

- The links between physical health and mental health
- Why the mental health of people with long term conditions matter
- What helps support good mental health for people with long term conditions

##### Section 3 – Peer Support: Roles and skills

- Peer roles and functions
- Peer competencies

##### Day Two

##### Section 4 – Finding our voice

- Exploring how to use individual peer assets and challenges identified through My Plan exercise

##### Section 5 – Boundaries and challenges

- Scenario based discussions to problem solve some common boundary issues and challenges that can arise within peer support services

##### Section 6 – Growing in role

- Reflection and action planning around putting learning from training into practice within participants organisations

#### Training partners

Chest Heart & Stroke Scotland, Diabetes UK Scotland and Waverley Care were all involved in co-delivering individual Principles into Practice training courses alongside two trainers from the Mental Health Foundation. As with Making it Happen their involvement included presenting information from PowerPoint presentations, facilitating small group discussions, taking feedback and inputting their own experiences of developing and delivering peer support services into conversations and debates.

#### Who came

Individuals were recruited to the training using the same methodology as Making it Happen, but focused invitations more specifically to those who were, or were likely to be, directly responsible for co-ordinating peer support services, or were peers themselves. Service managers and co-ordinators who registered for the training were also invited to bring peer supporters or volunteers from their organisations along to the training.

Although the timescales for recruitment were short, sixty-seven people registered to attend the Principles into Practice two day training (33 in Lothian, 34 in Lanarkshire) of which 57 attended Day 1 (29 in Lothian, 28 in Lanarkshire) and 51 attended Day 2 (27 in Lothian, 24 in Lanarkshire). Again this was widely viewed by the expert group as a successful participation rate.

Of the 57 people who attended at least one day of Principles into Practice, 24 individuals (42%) indicated that they had at least one long term condition, 28 (49%) did not and 5 (9%) preferred not to say, or did not respond. Fourteen (25%) had attended the Making it Happen training, a factor we had not anticipated when designing the training.

Of the 46 people who attended the training and completed a post training evaluation form, 33 (72%) were from the voluntary sector and 12 (26%) were from the statutory sector. One person was an independent. Thirteen participants (28%) worked for or within mental health organisations and 27 (59%) for long term condition organisations. Six participants (13%) were involved with organisations that dealt with both mental health and long term conditions.

#### Participant feedback

**“Found it all really useful: realised though that I knew more than I expected. This has really helped with confidence going forward.”**

**“Everything was useful as was networking with other attendees.”**

**“It has been very useful, well run and has highlighted areas I need to work out, work on - and celebrate too!”**

- Most respondents felt that the first five learning outcomes were ‘fully met’:
  - » Understanding the relationship between emotional health and long term conditions: 89%
  - » Understanding peer support principles and models: 85%
  - » Exploring the boundaries of peer support: 65%
  - » Learning to use lived experience effectively: 61%
  - » Developing an ongoing learning plan: 59%
- The outcome relating to discussing mental health and suicide prevention training needs was felt by participants to have been less fully achieved, with only 15 (33%) feeling it was ‘fully met’, and 24 (52%) ‘partially met’. Again, as with Making it Happen it was felt that it was not appropriate to have this as a learning outcome for future Principles into Practice courses.
- The majority of respondents rated all sections of the training either ‘very’ or ‘quite useful’. The most useful part of the course was Section 1: What is peer support, with 78% finding this ‘very useful’ and 20% ‘quite useful’. The least useful part of the course was Section 8 – Bringing strands together, with 39% finding this ‘very useful’ and 37% finding it ‘quite useful’. Since this was the last section of day two, it is possible that time constraints had affected the content of this Section.
- All aspects of the training delivery were viewed as successful with the majority of respondents ‘strongly agreeing’ to statements such as the trainers were knowledgeable (80%), the training was of high quality (65%) and provided opportunities for active participation in learning activities (76%). The majority of the remaining participants ‘agreed’ with these statements.
- The aspects of the course that participants found most useful included:
  - » The opportunity to meet other people with a common interest and hear about how they are delivering peer support
  - » Group work
  - » Discussions which offered learning through practical examples
- No particular section of the training stood out for respondents in general as not being useful, although several respondents did point to particular aspects of the course that they as individuals did not feel were so effective, such as the My Plan exercise or the PowerPoint presentations. A few participants who had also taken part in Making it Happen training pointed to some overlap between the two courses, which was unfortunate for those involved. However, it was also recognised that the courses were not intended to be delivered to the same participants.

Further findings from the Principles into Practice training evaluation are presenting in our Impact chapter (section 4.1), and are present in full in the training evaluation report.

## 2.3 Peer Support for Long Term Conditions: The Basics

A basic guide to assist with the development of peer support for people with long term physical conditions was written, produced and disseminated by the project. The guide is intended to act as a resource for organisations to follow when setting up and / or improving their peer support services, helping them to understand what criteria contribute to the development of a good quality peer support service. Included in the guide is information on the following:

- Key components of different models of peer support delivery
- Roles and functions of peer supporters and coordinators
- Support and supervision needs and example structures

- Training needs
- Recruitment (competencies)
- Partnership Working
  - » Credibility issues
  - » Referral to services
- Challenges and benefits
- Voluntary and paid peer support approaches
- Evaluation and monitoring models
- Funding sources
- Promotion of the service

The document builds on the prior work and learning developed through the feasibility study undertaken in 2010/2011. It was written with input from the project partners, who were consulted on draft versions through the expert group, and whose feedback informed the final content.

Network participants at the April networking event were also involved in a prioritisation exercise to assist with agreeing the content of the guide. In this prioritisation exercise, participants were asked to rank the themes contained within the draft guidance according to their importance and the ease of which this information was already available. Participants were also asked to identify any additional topics or themes which were thought to be missing from the draft. The results of this exercise suggested that all themes included within the draft were of importance and no clear gaps were identified.

The Basics was subsequently used as a complementary resource to the training courses, to support ongoing learning and development. A final version was disseminated more widely at the second networking event in September 2012.

A copy of Peer Support for Long Term Conditions: The Basics is attached as an appendix to this report. The Basics is also available in both an electronic and printed format and will continue to be available via the Peer Connect Scotland site and the Mental Health Foundation website for the foreseeable future.

## 2.4 Local Development Support

The pilot supported two local NHS Boards, Lothian and Lanarkshire and their local voluntary sector partners, to directly influence service developments for those with long term conditions by taking forward the recommendations of both the Feasibility Study and Living Better.

These geographical areas were chosen for the pilot because they have been instrumental in the development of peer support and the improvement of mental wellbeing for people with long term conditions and have a number of well-established voluntary and statutory sector partnerships. However, there is an acknowledgement that there is much work to be done in terms of peer support for those with long term conditions. These NHS areas have already partnered with MHF to deliver seminars to promote and discuss the findings of the LTCAS funded feasibility study (Exploring Peer Support as an Approach to Self Management) and Living Better and so were primed to develop this work further.

### What we did

Key activities with Lanarkshire and Lothian were as follows:

- Identification of key strategic leads within each Health Board
- Initial meetings between Project Manager and strategic leads to scope territory and agree procedures for developing and disseminating training in each site
- Piloting the peer support training programmes with local providers (voluntary and statutory) involving established peer support / volunteering services and those hoping to develop new services

- Evaluating the impact of the training pilots in each area
- Support from MHF staff to develop local recommendations to shape future action to further develop peer support for people with long term conditions

### What we learned

Following the delivery of training in the two pilot areas, meetings were held with strategic leads to examine the evaluation findings, discuss the strengths and weaknesses of the approaches adopted within the project and agree a series of recommendations and next steps to steer the work forward.

The following key points arose from these discussions:

- The training course evaluation findings were broadly consistent between the two local areas and numbers of participants similar.
- Local strategic leads were very positive about the uptake and outcomes of the training, particularly within the short timescale involved. In addition to the evaluation findings, anecdotal evidence had been received by Lanarkshire strategic leads from some course participants about the value of the training.
- There has been greater local strategic buy in for this stage of the project from mental health leads than from long term conditions leads. This may in part be due to previous links and partnerships, but also because both NHS Lanarkshire and NHS Lothian have a track record in developing mental health peer support services and are possibly more primed to recognise its strategic value.
- It was recognised that a longer lead in time may have allowed a more targeted approach to training recruitment to have occurred.
- It was agreed that a shorter two hour briefing would have been more attractive to strategic managers within the two Health Boards, particularly if the session was linked to local and national policy priorities.
- The local findings provide useful evidence to support further developments of peer support going forward. Within Lanarkshire, materials from the Making it Happen training were used to inform a local tendering process for peer support services, both by commissioners and applicants.
- Both NHS Lothian and NHS Lanarkshire expressed an ongoing commitment to continuing to support the development of peer support within long term conditions. It was recognised in both sites however, that obtaining further buy in from those with a strategic responsibility for long term conditions was key to future roll out.

## 2.5 Peer Connect Scotland

Peer Connect Scotland is an online networking and information sharing resource developed by the project using the NING platform. The initial project plan was to develop a database of contacts and resources which could provide organisations and individuals with information and links which could support them with the development of peer support services. A multi-stage scoping exercise was undertaken, firstly within the project team and expert group, and subsequently at the first networking event in April 2012 to agree the purpose and direction of this resource. Results from this scoping exercise revealed:

- a) What the online network should do
- Share learning and skills across sectorial and experiential boundaries
  - Link researchers, practitioners and peers
  - Gather and build evidence base for peer support
  - Reduce duplication and overlaps, whilst encouraging new partnerships
  - Encourage debate on key themes like generic / specific approaches
  - Close gaps between organisations
  - Plan and develop events, both large and small

- Help to address concerns about governance, standards, sustainability which might block referral
- Mobilise learning from other contexts and other countries

b) Who needs to be involved?

- Everyone in the pathway of support in long term conditions: acute clinical, allied health professionals, primary care, carers and peers
- GPs
- Befriending networks and other services that are like peer support and have input to make
- Anyone with a genuine interest in peer support approaches
- All peer support organisations, from a range of models
- Young people with long term conditions
- Patients with a range of experience, and those organisations who can access those perspectives
- Experienced peer support workers
- People studying for vocational qualifications, such as allied health professionals (AHPs)
- Trainers, and training groups who might connect
- Advocacy and signposting organisations, and third sector hubs

c) What can participants contribute

- Mutuality...and Hope
- Patient perspective
- Assistance with partnership development
- Experience of project and service design and development
- Chest Heart & Stroke Scotland Self Management Champions Training
- Opportunities to meet face to face
- Planning input for future events
- Stalls and information for face-to-face activities
- Suggestions and support on bringing young people with long term conditions into discussions
- Expertise on learning disabilities and long term conditions
- Ability to match and connect people
- Experience of moving from lived experience to peer support delivery

In response to these suggestions, it was agreed that an online resource would be the most accessible option. NING was identified as the most viable platform and was taken forward because of the opportunities it provides to upload documents, enter discussions and share links. It also provides a members only space, which makes moderation easier, and reduces the likelihood of problems with spam arising.

A year's subscription was purchased in April 2012, which enables the resource to have a life expectancy beyond the current project and supports the ongoing sustainability of the

work. MHF are committed to supporting the site over the coming months as part of our core workstream on mental health and long term conditions.

### **Aims**

The aims of Peer Connect Scotland are to sustain, develop and focus current interest and momentum for action through building on learning and connections made through the two networking events, training activities and the expert group. Specifically, Peer Connect Scotland aims to:

- Bring together expertise by experience, share good practice / examples that can contribute towards generic resources
- Build shared understanding of peer support, its benefits and key principles
- Share materials and resources (built over time)
- Build a shared database of contacts and resources
- Share information on funding sources and support partnerships in this
- Enhance the evidence base, using our evaluation expertise to encourage, support and facilitate self-evaluation of existing and emerging peer support projects
- Promote partnership working between voluntary and statutory workers and organisations working with different target groups and conditions

### **What it provides**

The site includes access to the following resources:

- Research paper and reports
- Project information, training outlines, presentations and evaluation findings
- International development resources on peer support for people with long term conditions
- Funding sources

In this way the site acts as a one stop shop for information relating to the development and delivery of peer support for people with long term conditions. As this is a dynamic site, it is envisaged that the resource library will continue to grow and be added to over time. The site also provides the facility for discussions to take place between members, a feature that we will seek to support over the next six months.

### **Who is involved**

Participants from our expert group, both networking events and all training courses were asked if they would like to join Peer Connect Scotland. There was considerable interest in this resource and a registry of approximately 100 contacts from across Scotland has been generated. We anticipate this number of beneficiaries continuing to grow over the next six months.

Because of the prioritisation of training activities over the summer, and to facilitate ongoing sustainability, Peer Connect Scotland was launched towards the end of the project. With all the project activities now complete, we anticipate Peer Connect Scotland is in a good position to maintain the momentum generated by the project through the networking events and training courses. We anticipate undertaking feedback on the value of this site at an appropriate point in the future.

For information about how to join Peer Connect Scotland, see:

<http://peersupportnetwork.ning.com>

# 3 PROJECT EVALUATION METHODOLOGY

The project adopted an action research model, whereby evaluation findings were incorporated on an ongoing basis throughout the course of the project to inform the development of project activities. A comprehensive evaluation plan for the project was developed to ensure that learning from each project activity was captured and any impact on participants assessed. The evaluation also explored the general impact of the project overall in terms of achieving the project aims and identifying key priorities for future activity.

Specific data capturing activities included:

- Evaluation of networking events using evaluation forms disseminated via SurveyMonkey after the events
- Evaluation of training courses (see below)
- Monitoring information to capture participation information for each aspect of the project
- Follow up interviews with local leads and a focus group discussion with expert group members on the impact of the project

## **Evaluation of training courses**

The evaluation of the training courses was built around the Kirkpatrick Model, which includes analysis of the following levels of impact:

Level 1 – Reaction – questionnaires immediately following course completion

Level 2 – Learning – pre and post training questionnaires to assess change

Level 3 – Behaviour - questionnaires one to two months following training

Level 4 – Results – questionnaires one to two months following training

Each training participant on the two courses was therefore asked to complete:

- A pre-training questionnaire to obtain baseline levels of knowledge and understanding of peer support
- A post-training questionnaire to obtain feedback on course content and organisation and reapplication of questions around knowledge and understanding of peer support to assess change achieved through training
- A follow up questionnaire (1-2 months after training) to gauge impact of training in terms of specific actions and outcomes achieved after training

## **Evaluation participants**

We received the following numbers of responses to the various evaluation components:

- Edinburgh Networking Event – 36 responses (49% response rate)
- Glasgow Networking Event – 37 responses (50% response rate)
- Making it Happen Training courses
  - » pre & post training questionnaires – 37 responses (95% response rate)
  - » follow up questionnaires - 16 responses (41% response rate)
- Principles into Practice training courses
  - » pre & post training questionnaires – 46 responses (90% response rate)
  - » follow up questionnaires - 9 responses (18% response rate)
- Interviews with strategic leads in Lothian & Lanarkshire – 2 participants
- Expert group focus group discussion – 6 participants

Overall, responses rates were higher than anticipated, particularly for the networking events, as conferences are often difficult to collect data from. The use of SurveyMonkey for the networking events evaluation forms, rather than asking individuals to complete a form at the end of the day, may have helped to boost response rates.

The response rates to the pre and post training questionnaires were very good, although follow up responses were less good, particularly for the Principles into Practice training. This may in part be due to the short timescale between the completion of the training and follow up request (one month), which was imposed because of a need to complete project activity by the end of October 2012. Going forward it is recommended that approximately three months is left between training completion and follow up to enable participants to better assess the impact of the training on their roles and responsibilities.

## 4 IMPACT FINDINGS

In this section we outline the extent to which the project activities have achieved the overall project aims and examine the impact the project has made. The results are presented in terms of the key themes of the Self Management Fund: development, partnerships and sustainability.

## 4.1 Development

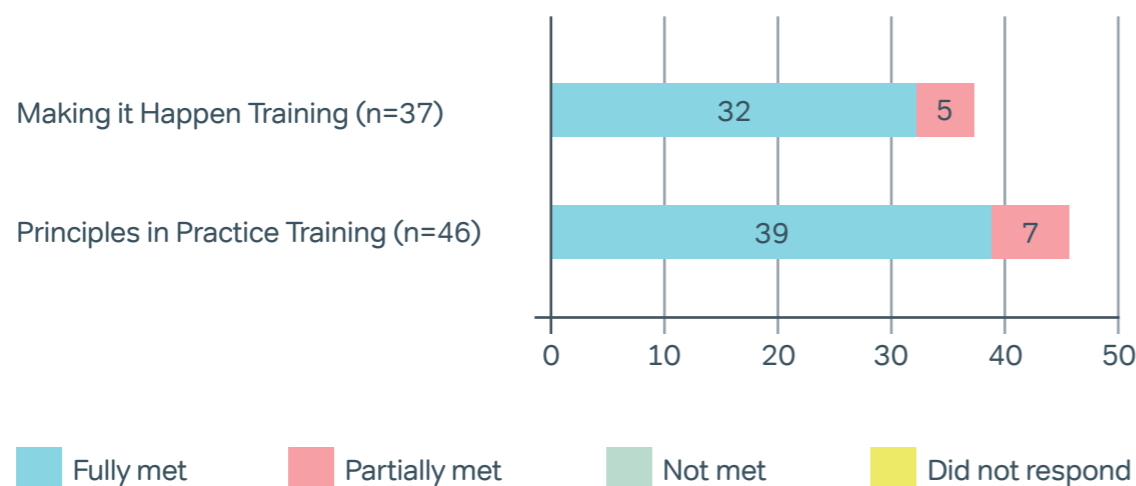
The overarching aim of the project was to support the development of peer support for long term conditions in Scotland. All project activities contributed to achieving this goal, but particular emphasis was placed within the project on the development and piloting of the two training courses 'Making it Happen' and 'Principles into Practice', which were outlined in Chapter 2. Ways in which the training contributed to the project's aims are described below.

### Project Aim 1: Raise the credibility of peer support in long term conditions

Both the Making it Happen and Principles into Practice training courses aimed to provide participants with an awareness and good understanding of: what peer support is; the different models of peer support; and the benefits of peer support for both providers and recipients. The training evaluation shows that these outcomes were successfully achieved.

Figure 3: Extent to which participants felt the learning outcome had been met

Participants will gain an overview understanding of peer support principles, including the models of peer support, the context in which they are delivered, and the benefits of each.



In the Making it Happen training 87% of participants (n=32) who completed a post training evaluation form said that the learning outcome to develop an understanding of the principles and different models of peer support was 'fully met'. For the Principles into Practice training 85% of participants (n=39) said this outcome was 'fully met' (Fig 3).

Participants' understanding of the value and credibility of peer support was further evaluated through the pre and post training questionnaires. Key findings included:

- After training, all but one person attending Making it Happen and Principles into Practice 'agreed' or 'strongly agreed' with this statement "I have a good understanding of what peer support is" (Fig 4 and 5).
- The proportion of people 'strongly agreeing' with the statement "I am aware of the different models of peer support that can be delivered" went from 3% (n=1) before the Making it Happen training to 65% (n=24) after and 4% (n=2) of people before the Principles into Practice training to 52% (n=24) after the training (Figs 6 and 7).
- By the end of the Making it Happen training, those 'strongly agreeing' with the statement "I am aware of the benefits people with long term conditions can receive from peer support" had increased from 32% (n=12) participants before the training to 68% (n=25) after the training (Fig 8). In the Principles into Practice training 43% (n=20) participants 'strongly agreed' with this statement before attending the training, but this increased to 74% (n=34) after the training (Fig 9).

- By the end of Principles into Practice those 'strongly agreeing' with the statement "I am aware of the benefits people can receive from providing peer support" increased from 35% (n=13) to 81% (n=30) (Fig 10). Participants in the Making it Happen training were not asked to respond to this statement.
- The proportion of Principles into Practice participants 'strongly agreeing' with the statement "I consider myself to have a good understanding of the roles and functions of peer support" went from 7% (n=3) before the training to 46% (n= 21) after the training (Fig 11). All other participants 'agreed' with this statement by the end of the training. This question was not asked in the Making it Happen training.

Qualitative feedback from training participants further illustrated that the training had been successful in increasing participants' understanding of the value and credibility of peer support:

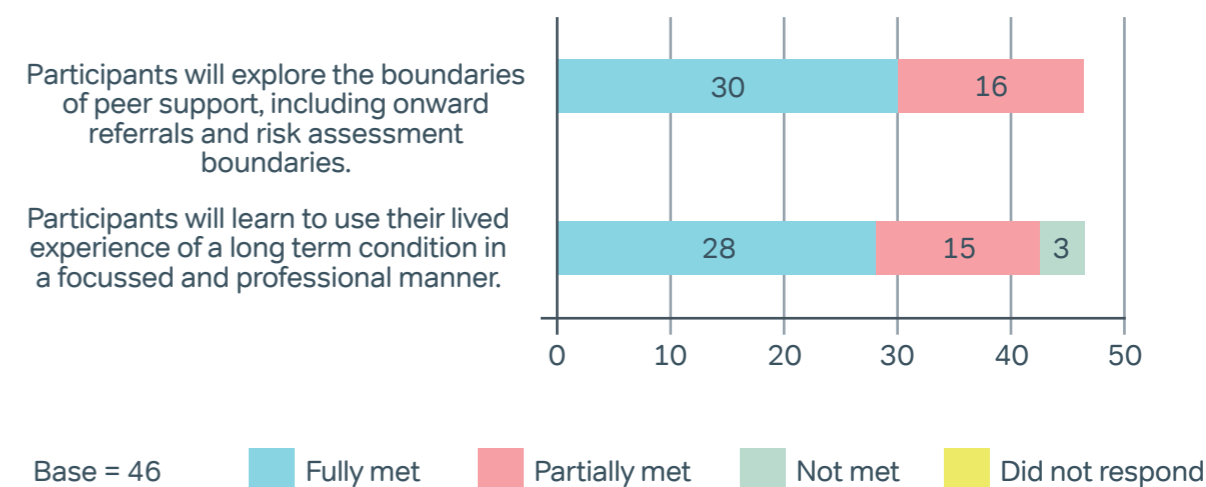
**"Exceedingly successful delivery of training. It has changed my perspective on how to support others with a long-term condition, professionally and personally, and the huge benefits of a peer support service." (Lanarkshire participant)**

**"An excellent course which pushed you into considering how you will and should use this method of support and well delivered."**

### Project Aims 3: Improve the quality of peer support delivered and the support / supervision provided to those peer workers

To improve the quality of the peer support being developed and delivered in Scotland, the Principles into Practice training supported participants to think about the process of delivering peer support. By thinking through the role of the peer, how to match peers, the boundaries and challenges involved in delivering peer support, including how to use a lived experience safely, the training hoped to improve the quality of peer support being developed and delivered in Scotland. To what extent the training courses achieved this was assessed in the training evaluation.

Figure 12: Extent to which Principles into Practice participants felt the learning outcome had been met



Approximately two-thirds of Principles into Practice participants (n=30, 65%) felt that the learning outcome relating to understanding the boundaries of peer support was 'fully met'. A similar proportion of participants (n=28, 61%) felt that the learning outcome relating to how to use lived experience effectively was 'fully met' (Fig 12).

Further evidence of the impact of Principles into Practice training is available from the pre and post training attitude statements, as follows:

- By the end of the training those 'strongly agreeing' with the statement ; "I am aware of the potential risks to people providing peer support" increased from 13% (n= 6) to 72% (n=33) (Fig 13).
- After attending the training, the proportion of people 'strongly agreeing' with the statement "I understand how the potential risk to people providing peer support can be minimised, managed and supported" went from 7% (n=3) before the training to 52% (n=24) after the training (Fig 14).



- The proportion of people either ‘agreeing’ or ‘strongly agreeing’ with the statement “I am confident in my ability to apply peer support principles to activities or services for people with long term conditions” went from 57% (n=27) before the training to 91% (n=42) after the training (Fig 15).
- The proportion of people ‘agreeing’ or ‘strongly agreeing’ with the statement “I understand how to use a lived experience of long term conditions safely, effectively and in a supportive way as part of peer support” went from 54% (n=24) before the training to 98% (n=45) after the training (Fig 16).

These changes in attitudes provide valuable evidence of the impact of the training across many areas of learning, which have contributed to improved understanding of factors that contributes to a quality peer support service amongst virtually all participants.

Qualitative evidence further illustrates these points:

**“The course has increased my knowledge and understanding of how peer support can or cannot work successfully.”**

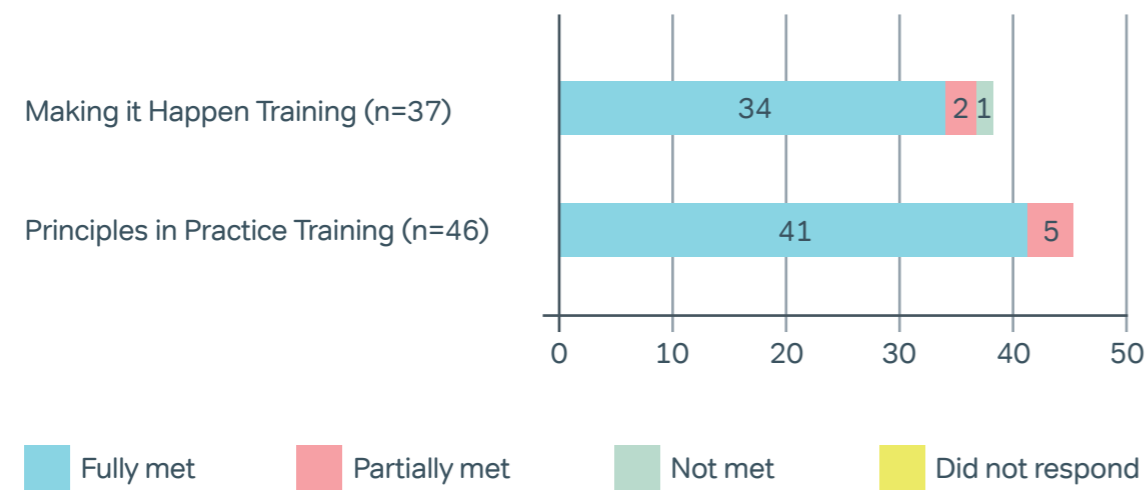
**“The matching exercise was particularly useful to start thinking about the variables involved when matching peers up.”**

Project Aim 4: Influence the development of peer support in long term conditions to ensure that it has a mental health and wellbeing focus

One of the main learning outcomes of both Making it Happen and Principles into Practice training courses was that participants would develop their understanding of the relationship between emotional health and wellbeing and long term conditions and the role peer support can play in supporting people’s emotional health. Evaluation findings indicate that this outcome was met.

Figure 17: Extent to which participants felt the learning outcome had been met

Participants will develop understanding of relationship between emotional health and wellbeing and long term conditions.



In the Making it Happen training 92% (n=34) of participants who completed a post training evaluation form said that the learning outcome for participants to develop an understanding of the relationship between emotional health and wellbeing and long term conditions was ‘fully met’ (Fig 17). For the Principles into Practice training 89% (n=41) of participants said this outcome was ‘fully met’ the rest said it was ‘partially met’.

Furthermore, the proportion of people ‘strongly agreeing’ with the statement “I understand the relationship between emotional wellbeing and long term conditions” showed a positive change after both training courses; from 20% (n=9) before attending Principles into Practice to 72% (n=33) after training, and from 38% (n=14) of participants before attending the Making it Happen training to 65% (n=24) after attending the training (see Fig 18 and Fig 19).

Qualitative data added further evidence of this aim being met:

**“Very informative, linking mental wellbeing in long term conditions and the role peer support could have in addressing this area.” (Making it Happen participant)**

**“[I have] Greater understanding of overlap between physical long term conditions and mental health conditions.” (Making it Happen participant)**

Figure 4: Participant understanding of peer support (Making it Happen)

I consider myself to have a good understanding of what peer support is.

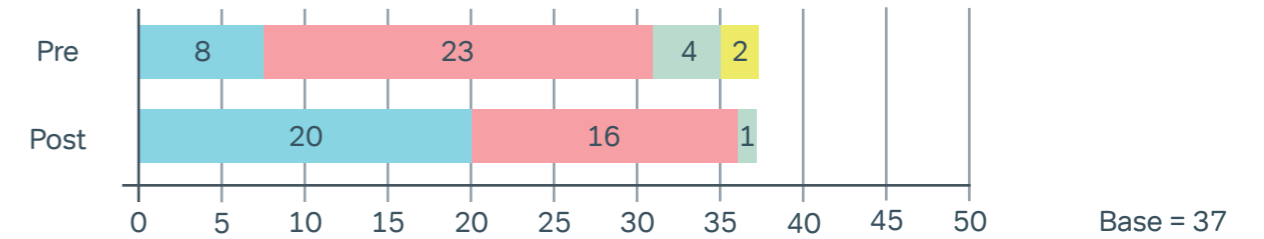


Figure 5: Participant understanding of peer support (Principles in Practice)

I consider myself to have a good understanding of what peer support is.

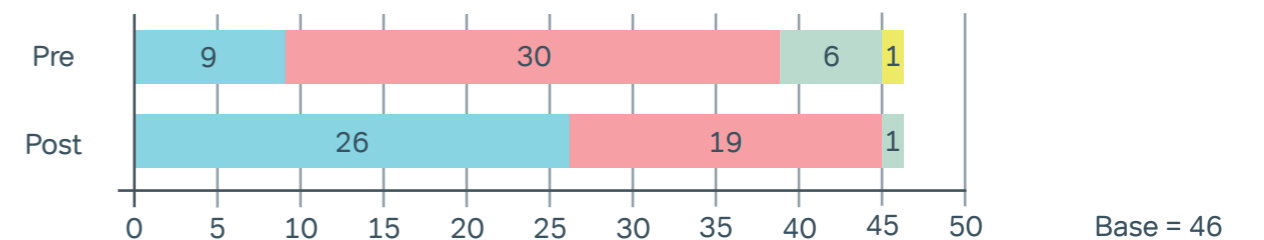


Figure 6: Participant awareness of peer support models (Making it Happen)

I am aware of the different models of peer support that can be delivered.

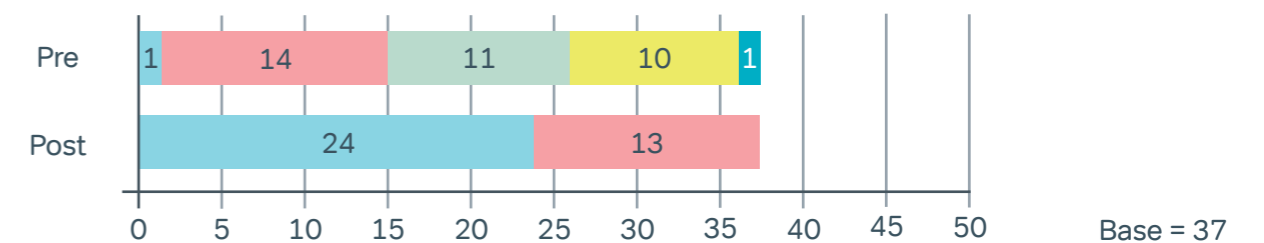
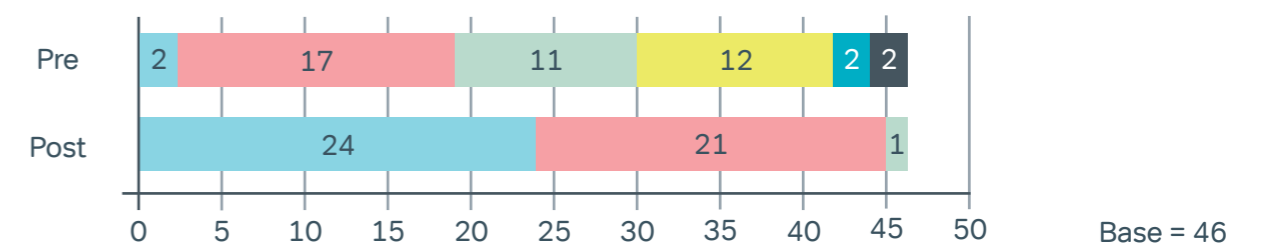


Figure 7: Participant awareness of peer support models (Principles in Practice)

I am aware of the different models of peer support that can be delivered.



KEY  
 Strongly agree (light blue), Agree (red), Neither agree nor disagree (light green), Disagree (yellow),  
 Strongly disagree (dark blue), Don't know (black), Did not respond (dark blue)

Figure 8: Participant awareness of the benefits of receiving peer support (Making it Happen)

I am aware of the benefits people with long term conditions receive from peer support.

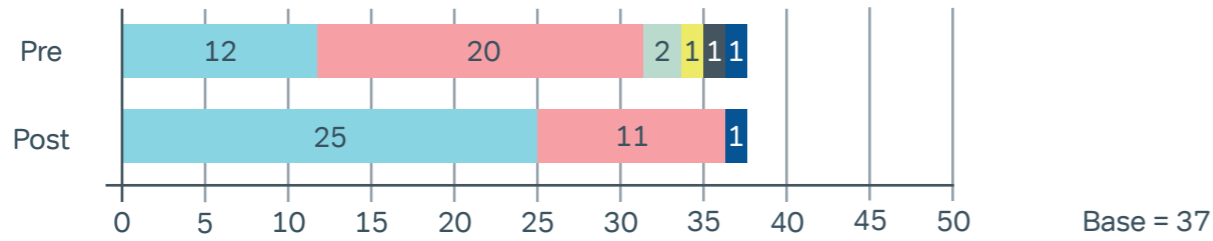


Figure 9: Participant awareness of the benefits of receiving peer support (Principles in Practice)

I am aware of the benefits people with long term conditions receive from peer support.

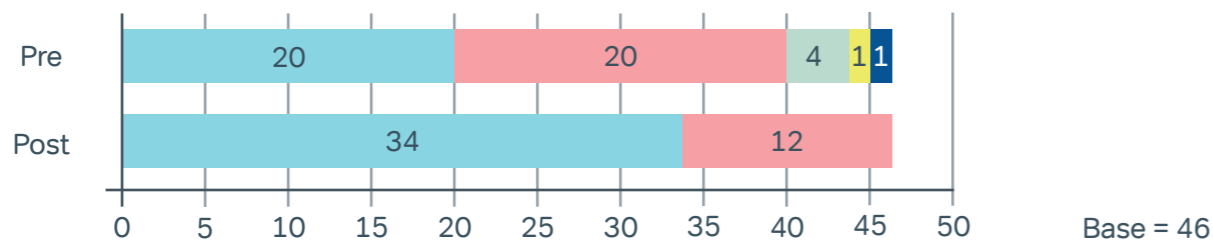


Figure 10: Participant awareness of the benefits of providing peer support for long term conditions (Principles in Practice)

I am aware of the benefits people can receive from providing peer support.

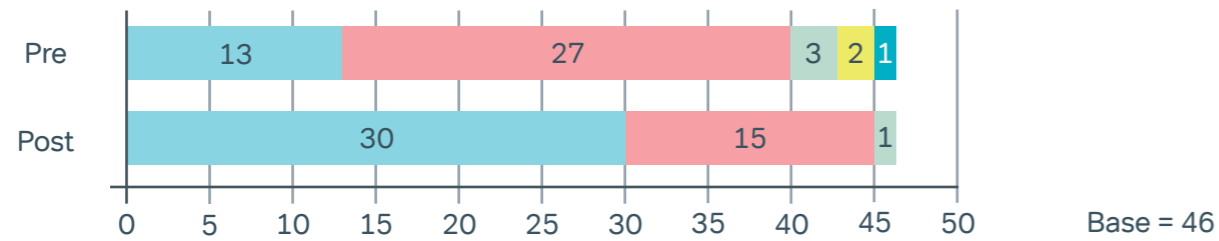
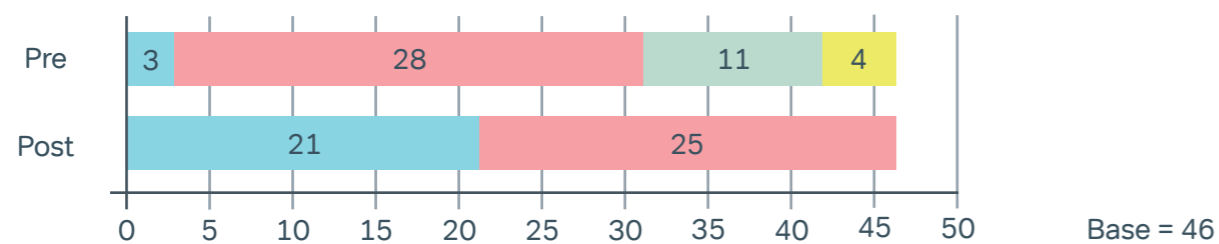


Figure 11: Participant understanding of the roles and functions of providing peer support

I consider myself to have a good understanding of the roles and functions of providing peer support.



KEY  
 Strongly agree (light blue), Agree (red), Neither agree nor disagree (green), Disagree (yellow),  
 Strongly disagree (dark blue), Don't know (black), Did not respond (dark blue)

Figure 13: Participant awareness of the potential risks to people providing peer support

I am aware of the potential risks to people providing peer support.

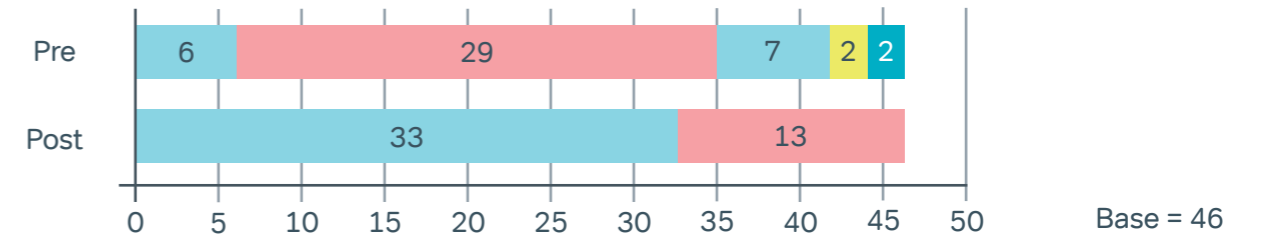


Figure 14: Participant understanding of how the potential risks to people providing peer support can be minimised, managed and supported

I understand how the potential risks to people providing peer support can be minimised, managed and supported.

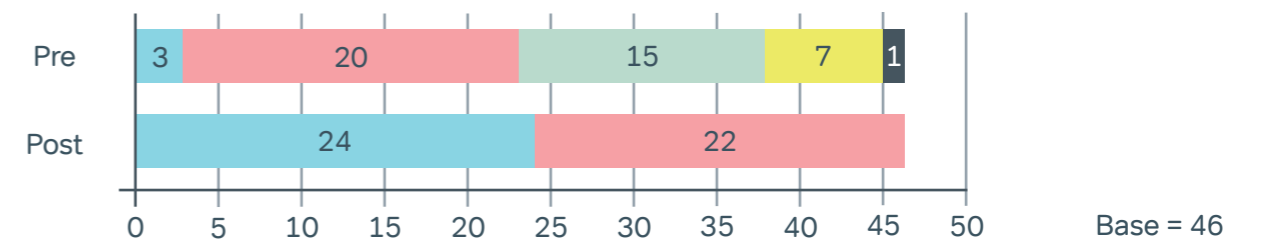


Figure 15: Participant confidence in their ability to apply peer support principles to activities for people with long term conditions

I am confident in my ability to apply peer support principles to activities or services for people with long term conditions.

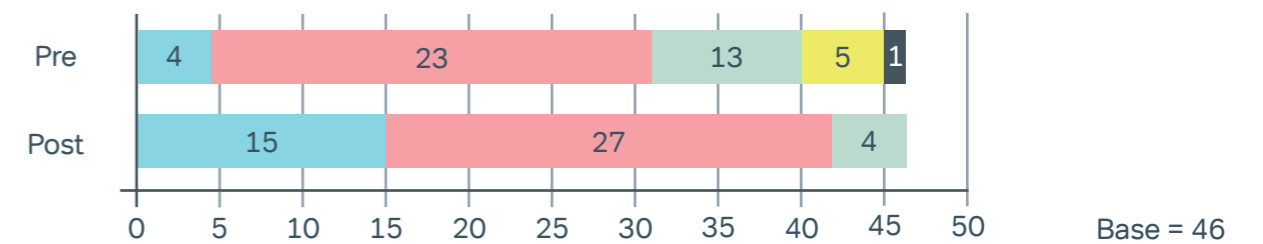
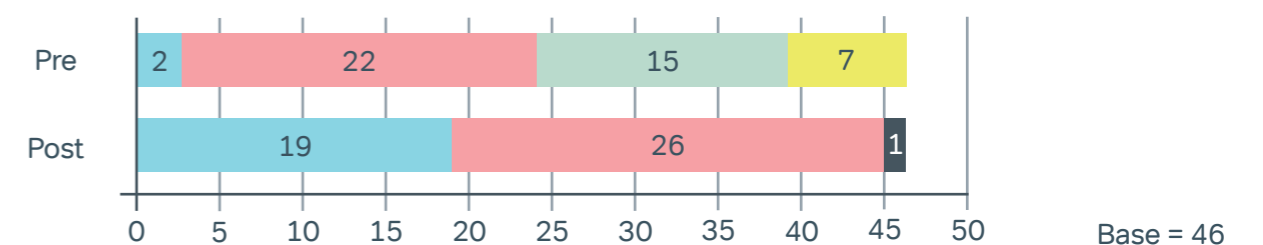


Figure 16: Participant understanding how to use a lived experience of long term conditions safely, effectively and in a supportive way as part of peer support

I understand how to use a lived experience of long term conditions safely, effectively and in a supportive way as part of peer support.



KEY  
 Strongly agree (light blue), Agree (red), Neither agree nor disagree (green), Disagree (yellow),  
 Strongly disagree (dark blue), Don't know (black), Did not respond (dark blue)

Figure 18: Participant understanding of the relationship between emotional wellbeing and long term conditions (Making it Happen)

I understand the relationship between emotional wellbeing and long term conditions.

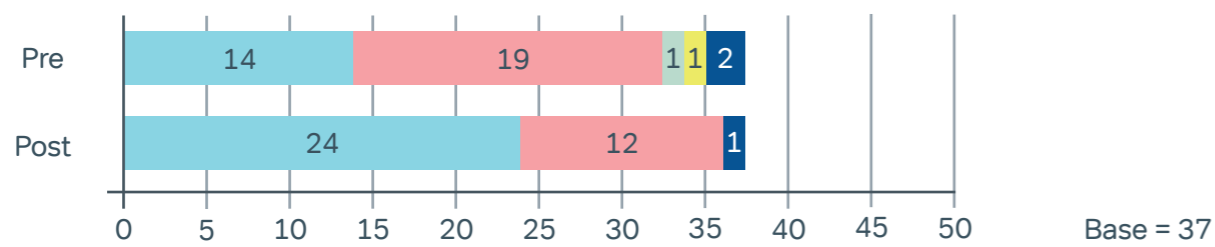
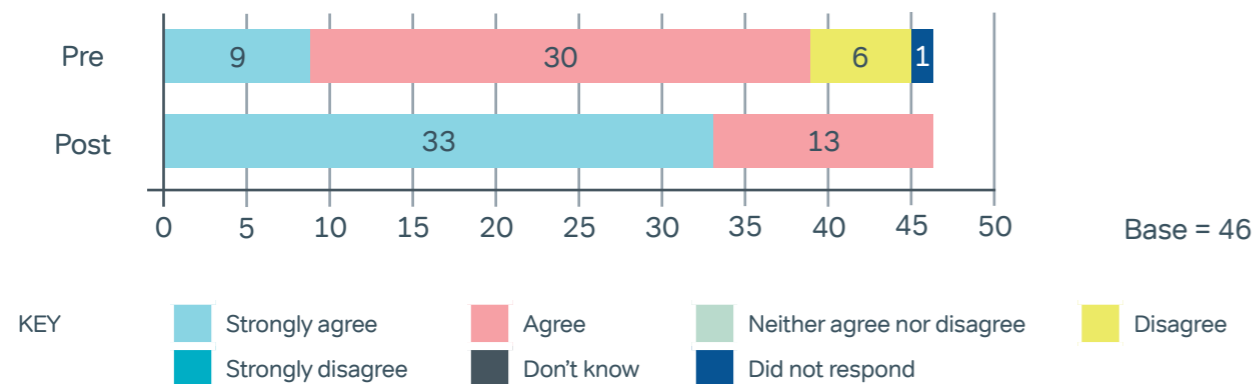


Figure 19: Participant understanding of the relationship between emotional wellbeing and long term conditions (Principles into Practice)

I understand the relationship between emotional wellbeing and long term conditions.



## 4.2 Partnerships

Partnership working was a core theme which ran through all project activities: from the establishment of the expert group, to piloting the training within two NHS Health Boards and facilitating networking events. The extent to which each of these activities were successful in developing partnerships is outlined below.

### Expert Group

The set-up and delivery of the project took a partnership approach to ensure that it built on the knowledge and experience which already existed in the long term conditions sector. Through previous studies and projects, key partners were identified and recruited to an expert group led by The Mental Health Foundation. The expert group had representatives from: British Heart Foundation Scotland, Chest Heart and Stroke Scotland, Diabetes Care Focus Group, Diabetes UK Scotland, NHS Lanarkshire, NHS Lothian, Waverley Care, The Royal College of General Practitioners Scotland (RCGP Scotland). These representatives include a wide coverage of localities including: Highland, Tayside, Fife, Lanarkshire, Lothian and Greater Glasgow. Three peer representatives were specifically included within the expert group membership to impart their experiences of living with long term conditions and peer support, as experts by experience.

All members of the expert group shared the common aim of wishing to improve access to high quality peer support for people with long term conditions and were keen to work together to progress the good work that already existed.

The purpose of the expert group was to advise the project team on the development and direction of the project and support the implementation of project activities through their own organisations. The group met four times throughout the lifespan of the project, with additional remote consultation taking place on a regular basis.

The expert group has worked with commendable commitment and enthusiasm for the project. New partners who have not worked together placed peer representatives on an equal footing with professional members and their input provided important guidance and direction to the project. Through this, the project has actively valued peer input. This is making a contribution to breaking down cultural barriers between patients and professionals within long term condition services and provides a challenging voice which supports the quality and credibility of the activities undertaken.

A good example of partnership working within the expert group was the development and delivery of the training courses. A number of expert group members played an active role in deciding the content for the training courses as well as helping to deliver the training courses in Lanarkshire and Lothian. Working in partnership in this way ensured that material was relevant. Training participants stated that they valued the input of the expert group members at training, as they were able to offer the perspective of someone who had set up and was delivering a peer support service.

Feedback from the expert group focus group provided the following evidence of impact of participation in the project partnership:

- Expert group members were very positive about the success of the project in terms of achieving a series of ambitious aims within a limited timescale
- Individual group members highlighted the impact their involvement in the project had within their own organisations, specifically in terms of:
  - » Raising awareness of the links between mental health and long term conditions
  - » Supporting members of staff to participate in project training courses, both as training facilitators and as participants
  - » Obtaining positive feedback about the quality and value of their own peer support services
- A key success factor of the project was the perceived reflexivity of the project team, which enabled advice and feedback from the expert group and others to be incorporated on a continuous basis into the project activities.
- A limitation of the project was the limited extent of strategic involvement from statutory agencies, particularly within the Making it Happen training course. It was also felt that the training courses would have benefited from giving the voices of existing peer supporters more prominent air time.
- All partner organisations voiced their ongoing commitment to taking this work forward and building on the project's successes.

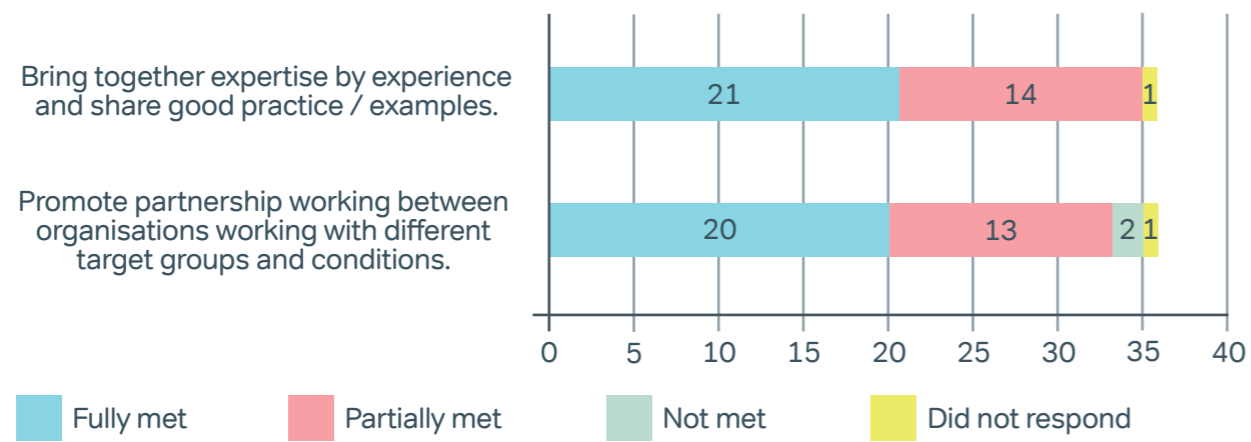
### Networking Events

The networking events were designed to provide opportunities for informal networking to promote partnership working and facilitate discussions between people from a range of sectors who work with different target groups and conditions.

The first networking event attracted 73 delegates from 40 different organisations and the second 74 delegates from 43 different organisations (see Section 2.1 for further information about networking event participants). The voices of people with lived experience of long term conditions were central to both events, including as presenters, event chairs, workshop facilitators and delegates.

Two of the four key aims from the networking events were specifically around promoting partnership working between organisations working with different target groups.

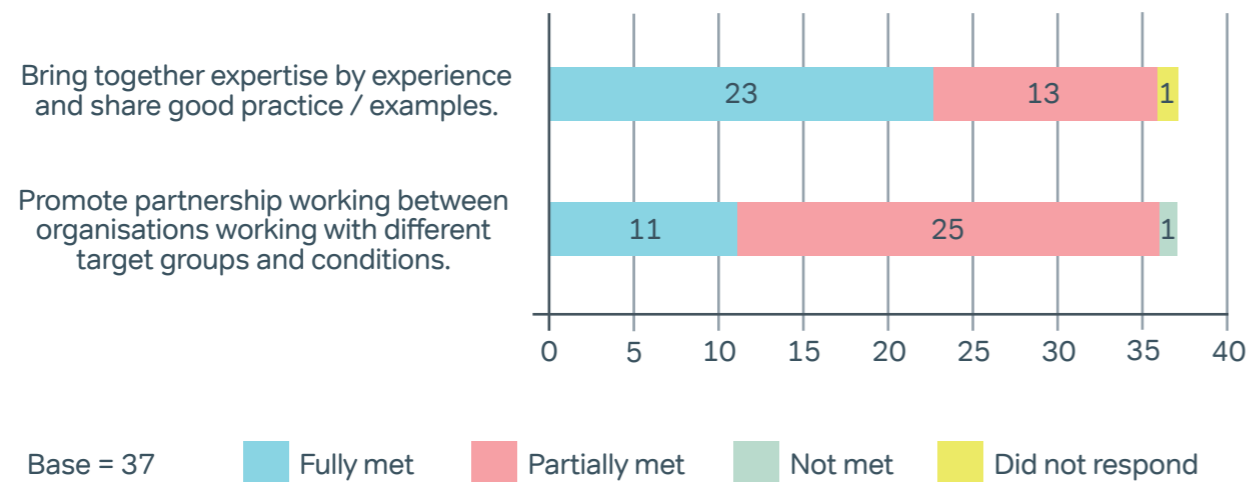
Figure 20: Networking Event One: Aims



In terms of bringing together experts by experience: 94% of respondents (n=35) at the Edinburgh networking event and 97% of respondents (n=36) at the Glasgow event felt that that this aim was 'fully' or 'partially met' (Figs 20 and 21).

In terms of promote partnership working: 92% of Edinburgh respondents (n=33) and 97% of Glasgow respondents (n=36) felt that this aim was 'fully' or 'partially met' (Figs 20 and 21).

Figure 21: Networking Event Two: Aims



Attendees at both events were also given the opportunity to respond openly about what they liked best and least about the events. At the first event, 30 respondents gave examples of aspects they like best, with opportunities to meet others working in, or interesting in working in, peer support being viewed as one of the most valuable aspects of the day (n=17, 57%):

**“I met people who I shall keep in touch with to share ideas and advice with.”**

**“I loved the opportunity to network with all different people and organisations...I learned a lot from the speakers and their experiences and it is their stories that make a conference real.”**

Of the 31 people who responded to the same question at the second networking event, over half also said the networking opportunities provided at the event, was what they liked best about the event (n=18, 58%).

**“Opportunity to network with people from organisations (voluntary and statutory) that I don't work with on a regular basis--new faces!”**

**“It was lively, and provided the opportunity to find out what was happening on the ground with other projects. Excellent networking opportunities.”**

Participants particularly liked that the event brought together people from a range of organisations, roles and experience.

**“Good range of agencies and voluntary sectors present to discuss ideas and current workng practice.”**

**“Range of delegates meant I was able to hear about lots of different models of peer support in action.”**

Participants reported that being able to listen and learn from others who are already involved in peer support in a variety of ways was valuable.

**“The participation of all the delegates and hearing their ways of doing Peer Support. Also learned about how some are still having to implement more into their ways of running Peer Support.”**

**“Being able to talk with other organisations. Get a feel for how they operate.”**

Opportunities to network with others interested in peer support was also provided by attending the training. At both trainings participants were asked what the most useful aspect of the training was for them and why. Of the 44 people who responded to this question in the Principles into Practice training evaluation 17 participants (39%) said that the opportunity to meet other people with a common interest and hear about how they are delivering peer support was the most useful aspect of the training.

**“The different range of individuals experience and knowledge within the group and the knowledge from the trainers also.”**

**“Meeting others who are much more experienced in offering this type of support.”**

In this way the project has offered participants multiple opportunities to make connections with others, share experiences and stay in touch if so desired.

### 4.3 Sustainability

All project activities were designed with sustainability in mind, and a number of overarching project aims make specific reference to sustainability, particularly with regards to increasing access to peer support and gaining resources and support to develop peer support.

The evidence on sustainability presented here indicates that the project activities have made significant inroads into supporting increased access to quality peer support for people with long term conditions. Evaluation findings suggest that the activities developed were addressing a need and were delivered effectively.

However, increasing access to peer support is inevitably an ongoing process and one which demands continued support and input. There is a need to build on what has proven effective and extend its reach. The project team are committed to keeping in touch with expert group members and project participants over the coming months to assess the longer term impact of the project.

#### Project Aim 2: Increase access to peer support in long term conditions

Part of the sustainability approach adopted through the project was to increase the number of people who are able to set up, deliver and increase access to good quality peer support. This project aimed to build this capacity particularly in Lothian and Lanarkshire by piloting the training in these two areas.

Both training courses attracted participants from an array of both statutory and voluntary sector organisations across mental health, physical and neurological long term conditions as well as general health organisations (see Section 2). Ninety six individuals received training in total.

Findings from the training evaluations indicate that valuable learning has been imparted to participants which significantly enhances chances that access to peer support will increase in the future.

Within the Principles into Practice training, a core component of Day Two was focused on action planning for the future to enable participants to put the learning from the training into practice within their own roles and organisations. A Weaver's Triangle diagram was used to assist this process, and sample diagram from one of the training sessions is included below as an illustration of how individuals planned to take the learning forward.

Figure 22: Example Action Planning triangle from Principles into Practice training



To measure the impact of the training, all participants of both training courses were sent a follow up survey a month or two after they had completed the training. Sixteen people responded to the Making it Happen follow up and nine responded to the Principles into Practice follow up.

Feedback from participants from both the Making it Happen and Principles into Practice training illustrates that they have taken forward a range of actions as a result of attending the training, despite the short timescale. Some participants are in the process of setting up or have already set up new peer support opportunities.

**“My organisation is now considering implementing Peer Support projects. I have discussed the training in depth with [a colleague] who is now developing a men's peer support group.”**

“Both my colleague and I are attending the further training sessions, along with 2 volunteers from our committee, which should hopefully enable us to deliver a better peer support service as we will know more about matching and all of the other aspects involved.”

Others have made amendments to the peer support services they already deliver as a result of what they have learned in the training.

“I have started incorporating some of the [training] content into my current peer support group sessions and also making time to hold more focused meetings on an individual basis.”

“Develop our outcome measurement, similar to Waverley Care...It will allow us to measure the impact of our peer support network over time.”

Some participants have used the contacts they have made at the training to further develop their understanding of the reality of setting up and delivering peer support in preparation of setting up their own peer support service.

“I met with workers at two services and they could not have been more helpful. It was very impressive how keen they were to share their knowledge...meeting with both services gave me an insight into the challenges I would face in setting up a peer support service. I could draw up a more accurate risk assessment and also plan the service in more detail due to the information shared by both services.”

However, implementing the learning from the training is clearly an ongoing activity, and will still take place after the current project has completed.

“Action: I will network with specific organisations to explore working in partnership to set up a peer support group programme...Time constraints - both on myself being able to find the time and also those workers from organisations that I wish to work alongside with. The time to do research and visiting places and people to discuss the purpose, structure, format and set up of a peer support programme.”

All participants who provided feedback said they would recommend the training to colleagues, for reasons including those mentioned below:

“I found it very informative and excellent at raising awareness around the whole range of factors and issues that affect health and wellbeing.”

“A great grounding for setting up peer support opportunities.”

“It was very helpful to hear from other people why and how peer support makes a real difference to people. Networking with a range of people at the event made me think a lot about what I do and why and how I can develop this further.”

Information and materials from the Making it Happen training course have been used within Lanarkshire to support local tendering processes for peer support services in terms of:

- Providing commissioners with materials which inform the tender brief
- Providing prospective applicants with wider contextual knowledge about peer support to inform the applications

**Project Aim 5: To gain resources and support to develop peer support**

Specific project activities, such as Peer Connect Scotland and Peer Support for Long Term Conditions: The Basics provide resources which support the ongoing development of peer support. The project has also created two quality training packages and trainers experienced in delivering them, which have the potential to be delivered again in the future. The second networking event also facilitated access to three significant Trusts which are interested in funding peer support services in Scotland.

Involvement in the project has built skills, expertise and knowledge within the project partners in general, and within the core MHF Project Team in particular. As a result of participation in the project, the Project Team have gained better knowledge of the long term condition peer support field, what the core training and development needs are, who needs training and how to address these needs.

The project approach has consistently built momentum over time and has attracted a growing following of interested and involved individuals and organisations. A key strength is that we have sought to involve people from a wide range of sectors, organisation types, job levels, and perspectives, including volunteers, lay people, professionals, managers, supervisors, peers and carers.

# 5 LEARNING FROM THE PROJECT

## 5.1 Development

The project set out to achieve a number of ambitious developments within a 12 month period, comprising:

- The development and piloting of two new training courses to support the quality and availability of peer support for people with long term conditions. These two courses have been tested with 96 participants within two areas of Scotland (Lanarkshire and Lothian)
- A national peer support for long term conditions network, which has engaged with 147 participants and who have been supported through two national networking events and the online resource 'Peer Connect Scotland'
- A Peer Support for Long Term Conditions: The Basics guide to provide accessible information to support the further development of peer support services

All project milestones were achieved and exceeded partners expectations, and results from the evaluations of development components indicate that our project activities were successful and meeting the needs of those participating.

However, as with any pilot project, a number of areas of learning have been generated, as follows:

- Findings have pointed to the need to continue this work further, both in terms of rolling the training out across the rest of Scotland and continuing to offer networking and learning opportunities at a national level
- Additional time for development and reflection may have resulted in a more strategic approach to recruitment of training participants and further refinement of training programmes. Both training courses attracted a range of people with varying knowledge of peer support. On the whole, Making it Happen did not attract as many strategic people as was hoped and Principles into Practice did not have as many peers. The range of participants was both a challenge in terms of managing expectations but also a strength in terms of sharing learning and ideas. Further refinement of the Making it Happen course to attract a more strategic audience would be warranted
- Within this project, the partners have, where possible, adopted an iterative approach to project delivery, whereby learning from each activity has fed into subsequent developments, to strengthen the overall approach. Recommendations from the first networking event were used to set the agenda for the second networking event for example. We have also gathered a series of topic areas and themes from participants which have been beyond the scope of this project to incorporate but would be worth including in any work going forward in this area. These include specific training and development modules on service issues such as: recruitment; supervision and support; and evaluation

## 5.2 Partnerships

The project has successfully engaged a range of people from an array of organisations spanning long term conditions, mental health and others.

In particular, the commitment of key partners within the core expert group has contributed considerably to the success of the project. Their participation in the development and delivery of the training for example, has been of significant value. Going forward, expert group members have expressed their ongoing commitment to further developing this work in partnership.

Evidence from the evaluation of project activities indicates that partnership working or knowledge exchange has been successfully promoted via the networking events and training and was viewed by participants as beneficial. Peer Connect Scotland will continue to provide an avenue for this networking to occur.

However, it was clear that overall there was more engagement with the voluntary sector in this project, than with statutory agencies. This may reflect a greater readiness within the third sector to recognise their role in developing and delivering peer support services for people with long term conditions. Nevertheless, there is a recognition that for peer support to benefit people with long term conditions further, statutory engagement is vital.

It is also recognised that going forward, there is a need to place the voice of peer supporters and beneficiaries of peer support services at the centre of this work.

### 5.3 Sustainability

The project was designed to be as sustainable as possible. Sustainability was achieved through promoting learning and skills development that could be applied going forward within participants' organisations. There is some early evidence from training follow ups that this has occurred. Expert group members have also indicated that their participation in the project has had a positive effect on how they deliver peer support within their own organisations.

However there is clearly a limit to what can be achieved within the scope of a project of this scale, and to truly build capacity for peer support across Scotland, there will be a need for further dissemination of current training as well as ongoing training and developmental support for those already delivering peer support services.

In order to build further capacity to roll out the current training, a 'Training for Trainers' course could be of value. Facilitating a network to provide an ongoing focus for peer support development, both online and face to face would also be recommended. In particular, project participants have expressed the desire to learn more from existing good practice in terms of what is working well and how they overcame any challenges.

## 6 CONCLUSIONS & RECOMMENDATIONS

Findings from the evaluation indicate that the project has made good progress towards achieving the project aims in the following ways:

### 1. Raise the credibility of peer support in long term conditions

- Through utilising network events, training courses and other project resources to promote the benefits of peer support and good practice in developing and delivering peer support to a wide range of organisations and sectors

### 2. Increase access to peer support in long term conditions

- Through building capacity to develop good quality peer support services in organisations and individuals participating in training courses

### 3. Improve the quality of peer support delivered and the support/supervision provided to those peer workers

- Through building capacity to develop good quality peer support services in organisations and individuals participating in training courses

### 4. Influence the development of peer support in long term conditions to ensure that it has a mental health and wellbeing focus and meets the needs identified in the feasibility study

- Through incorporating a focus on the connections between mental health and long term conditions in all project activities and particularly through the training courses.

### 5. To gain resources and support to develop peer support

- Through developing resources such as Peer Connect Scotland, The Basics and training packages which can be accessed on an ongoing basis
- Through building skills and capacity in the expert group and Project Team to deliver training and support networking opportunities

It is clear that whilst considerable progress has been made through the project, there is still a significant distance to travel in terms of making sure peer support services for people with long term conditions are widely available across Scotland and organisations are equipped with the skills and knowledge with which to develop such responses. Consequently the following recommendations, arising from the project evaluation, are warranted.

## 6.1 Development

To further develop peer support for long term conditions in Scotland:

- Build on capacity developed within project team and partners to further extend the availability of Making it Happen training and Principles into Practice training across Scotland. The training team should as best practice, include trainers from MHF and one other of the core partner organisations
- Create additional briefing session for strategic managers
- Develop additional training modules to support services and organisations to set up good quality peer support services in terms of: recruitment; role descriptions; support and supervision; boundaries; how to prevent / overcome challenges (what if things go wrong)
- Explore specific issues and challenges which may arise within the following identified groups: rare conditions / degenerative conditions / children and young people / BME communities
- Gather further evidence on the impact of different peer support models and approaches which can add to the evidence base and support the credibility of peer support as a viable service
- To encourage further uptake from statutory agencies, tailor the training to focus on local strategic priorities such as promotion of self management or condition management

- Build in funding, development and evaluation support for organisations wishing to develop peer support but require support and guidance to do so

## 6.2 Partnership working

**“Joint working: health boards working with the voluntary sector to deliver self management courses to people with long term conditions.” (Edinburgh networking event participant)**

To further develop partnerships in peer support for long term conditions:

- Sustain the effective partnership developed in the current project through continued delivery of training and networking activities
- Incorporate additional perspectives to address specific priorities: rare conditions / degenerative conditions / children and young people / BME communities
- Provide further opportunities and spaces to bring people and sectors together to build the credibility of peer support
- Obtain strategic commitment at local and national policy levels to embed peer support within the self management of long term conditions

## 6.3 Sustainability

**“Regular meetings to build the relationships within the network would be great as this allows us to share experience and knowledge with each other. It allows us to share our accomplishments without having to re-work what has already been achieved, this will help conserve funds and bring about a more generic understanding of peer support development.” (Edinburgh networking event participant)**

To further promote the sustainability of the development of peer support for long term conditions in Scotland:

- Continue to support the fledgling network through online Peer Connect Scotland and an ongoing programme of networking events and thematic workshops to further embed knowledge and understanding of peer support
- Build capacity to deliver training with partner agencies and through development of Training for Trainers courses
- Further dissemination of the Peer Support for Long Term Conditions: The Basics
- Continue to utilise the learning, skills and expertise developed within the MHF Project Team and expert group to take this work further by rolling out training and joint leadership approach to whole project



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