

Case study: NHS Ayrshire and Arran

Developing buddies to support self-management

The challenge

We had learned from patients participating in the self-management programmes that peer support following the programmes was important. Whilst many found this from family, friends and joining local support groups (e.g. Breatheasy), others suggested that speaking on a one-to-one basis with someone who had the same long term condition would be helpful.

What we did

The idea for the buddy role was triggered from various discussions about how we could develop ongoing self-management support that would:

- be a sustainable alternative to patient reunion events
- support people who are unable or do not wish to participate in group sessions
- enable patients who had completed the self-management programme to share the knowledge and skills they had obtained with other people.

In NHS Ayrshire & Arran, there was already a buddy system within the cancer team that enables people living with cancer to have non-clinical support from lay people. MacMillan Cancer Support delivers a two-day training programme to ensure that buddies are prepared for their role. The Lead Nurse for the Co-creating Health programme held discussions with cancer service colleagues and it became clear that the approach could also be applied to support people living with other long term conditions. It was therefore agreed to test a buddy role for self-management support. The initial aim was for the Buddies to provide 1:1 telephone support to people who either self-referred to the service or who were referred by clinicians.

Through discussion with the MacMillan Buddy Trainers, the training programme was adapted to develop self-management buddies for COPD and Diabetes patients. The initial training was delivered over two-days by MacMillan trainers, however the Co-creating Health Lead Nurse supported the

training and the intention is for her to deliver the training in the future to enable a sustainable model to develop. Twelve patients completed the training.

After we advertised the Buddy Service in local newspapers, several patients self-referred and were matched by the Co-creating Health Lead Nurse to a Buddy. However, uptake of the Buddy Service was fairly slow, and the Buddies were asked for ideas about other ways that their knowledge, skills and time could be utilised. Clinicians were also asked for suggestions.

Several Buddies followed up patients who had not attended our 'Moving On Together' (MOT) programme sessions to find out why they had not attended, and – where possible – to encourage them back. This approach had some success, and some patients have since reported that the contact from the Buddies had been welcome. The Buddies considered that their contact with patients may be less threatening than from the MOT facilitators ie whereas patients may be more honest about reasons for non-attendance to Buddies, they do not wish to offend the facilitators.

Next steps

A Respiratory Consultant has also suggested that a few Buddies attend his hospital COPD clinic to meet with patients who have agreed non-clinical goals with a view to the Buddies supporting goal follow-up. The Buddies have welcomed this opportunity and are meeting to progress this at the end of July 2012.

It is proposed that this approach is tested initially with one Consultant during September 2012. Depending on the outcome of the testing, this approach could be offered in other parts of the Respiratory service, and as self management support spreads, could be an option for goal follow-up.

The intention is for the buddy role to provide an option for supporting self-management remotely by telephone, or face-to-face on an individual basis. The training will prepare lay people to make contact and build rapport with people for whom participation in a self-management programme is not desirable

or appropriate, and will also provide an option for ongoing support of people who have completed a self-management programme.

The Buddies remain enthusiastic champions of Co-creating Health and self management support, and we are keen to keep them engaged and welcome ideas of how we can extend the scope of their role appropriately and effectively to support self-management in the future.