



Pilot Project Evaluation Report: Sole to Soul Positive Care Programme, Bentham

May 2012



“This is one of the best choices I have ever made! A fantastic, life changing experience! I feel privileged to be a part of this and have met some beautiful people” (Participant).

Sole to Soul

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The Sole to Soul Positive Care Programme (PCP) was a 6-week pilot project to evaluate the potential benefit of a course of holistic therapies and motivational health-related workshops for people with long term conditions and/or carers.

Rationale

The key idea behind this programme is to offer people a space to identify underlying issues and lifestyle choices that impact on their health, and also offer them a supportive, non-judgmental, therapeutic environment to clear those issues and make lifestyle changes that benefit their health and wellbeing in the long term.

The Sole to Soul PCP pilot was based on a successful 24-week course in Leeds which has been running since 2006 and has achieved outstanding results.

Evaluation of 205 participants over a 3-year period (2006-2009) showed that the Leeds course had statistically significant long-term benefits for those who attended¹.

Participants reported that:

38% had visited their GPs less

32% were able to reduce their medication²

94% were more able to understand how their lifestyle affected their health

91% had made positive changes to improve their health

92% thought their mental health and well being had improved

90% said they now take more responsibility for their health

Aims of the Sole to Soul pilot

The main aim of this pilot project was to assess the viability of such a program in a rural location. We were aware that there was a large administrative component to the Leeds PCP and wanted to gain a better understanding of staff time involved and look at costings

¹ COOP-WONCA and MYCaW were used as measurement tools. The full report and case studies can be found at <http://www.touchstonesupport.org.uk/services/positive-care-programme>.

² This was not a stated aim of the programme and in fact was not encouraged at all as many participants had conditions such as diabetes which required long term management. However, 32% of participants reported that they had reduced their medication following the course.

for future development³. We also wanted to identify any issues around the programme timetable, suitability of the venue and range of therapies / workshops on offer.

We aimed to recruit 10 people with long standing health issues and/or carers for a 6-week period. Although the Leeds model is for a much longer period, given the current economic climate within the Health Service, we were interested to see how much impact a shorter course could have.

Programme Outline

The PCP ran on one morning a week for 6 weeks between 18.2.12 and 31.3.12. Each week the session consisted of 3 elements:

1 hour of one-to-one therapy (chosen from Reflexology, Bowen Technique, Journey therapy, Sound therapy, Consciousness Medicine, Finger Pressure Massage, Emotional Freedom Techniques (EFT), Flower Remedies, Pain Release Technique, Healing, Tai Chi, Homeopathy)

1 hour of gentle exercise and movement (Tai Chi, Qi Gong, Conscious Movement, Music and Movement)

1 hour of group workshops (Expressive Art, Journal Writing, Sound Therapy, Guided Visualisation, Healthy Eating)

Key components of the programme

- * Offering a safe, therapeutic space for participants to consider issues underlying their health concern(s)
- * Encouraging active participation and increasing awareness of own health choices
- * Offering practical tools and information to help maintain lifestyle changes started on course

³ Participants were asked to pay a nominal fee of £60 for the 6 weeks (£10 a session) to cover background costs. The co-ordinator and all therapists worked on a voluntary basis for the duration of the pilot. True costings for the programme are contained in Appendix D.

- * Including gentle exercise or movement in every session
- * Addressing the psychosocial impacts of long term health conditions and of being a carer
- * Offering a variety of approaches (one-to-one work / group work) and a range of approaches (therapeutic work / practical skills workshops) to suit individual need / preference.

Recruitment

Participants were recruited via local publicity, social media and word of mouth. Nine people attended an introductory day in order to find out more about the programme and meet the therapists. Eight people signed up at that event. Two participants joined the course but were unable to attend the introductory day.

All agreed to participate in the pilot project and were asked to fill in:

- * Health History Form;
- * MYCaW (Measure Yourself Concerns and Wellbeing) containing numeric (quantitative) and free text (qualitative) data;
- * EuroQol EQ-5D - a standardised measure of health status containing a descriptive questionnaire and visual analogue scale.
- * Supplementary Questionnaire⁴

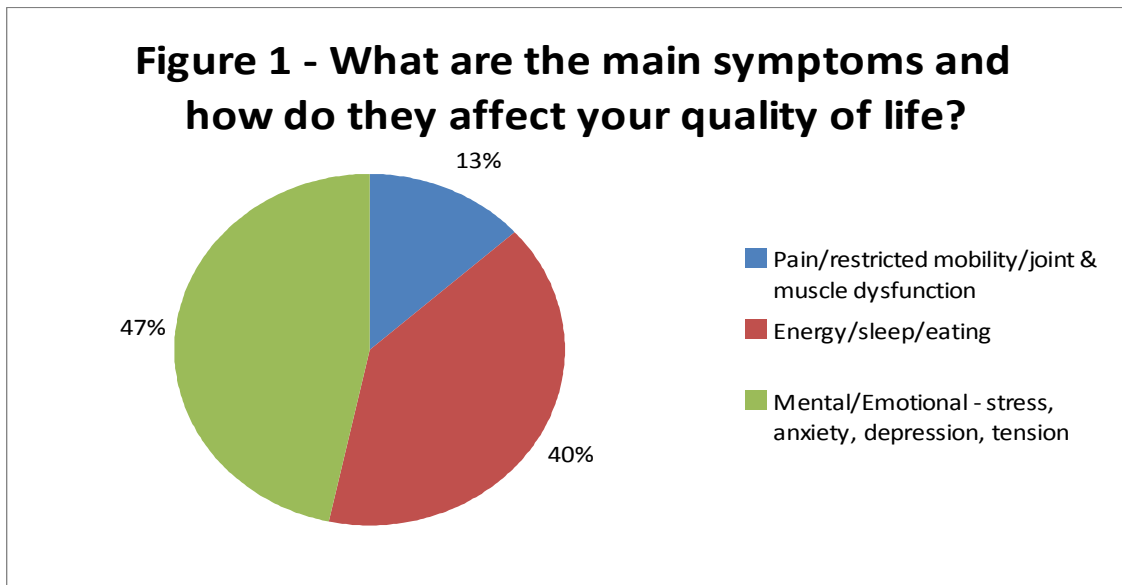
All participants signed a consent form to allow us to inform their GPs of their participation in the Positive Care Programme with information about the Programme and a named contact should the need arise.

⁴ Sample questionnaires are contained in Appendices A, B & C

Participant Profile

There were 10 participants in total; 8 women, 2 men. The age range was 23 -76 with the mean age being 50. The concerns participants stated they were seeking support for were Post-Traumatic Stress Disorder, trauma, M.E., depression, anxiety, sleep problems, exhaustion, arthritis, physical pain, emotional pain (especially from childhood), and stress.

The symptoms participants were seeking support with are illustrated in Figure 1 below.

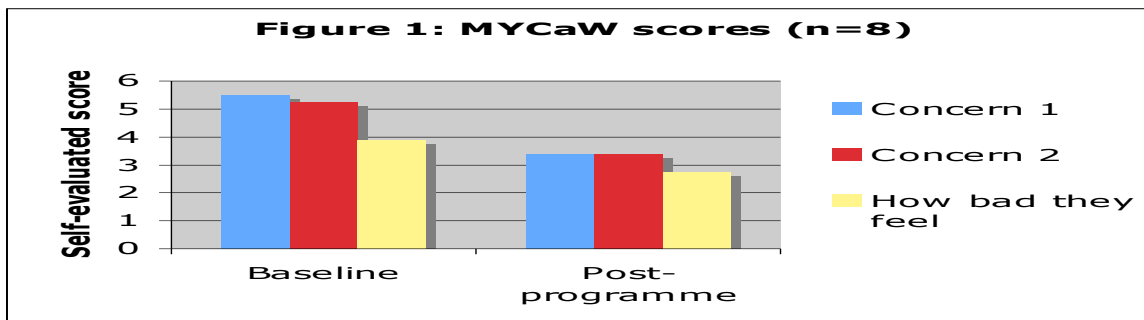


Duration of condition - six participants stated they had been living with the condition for 16+ years (3 of whom 30+ years). Two participants had been living with the condition under 10 years.

Results

MYCaW scores⁵

At the introductory day, each participant was asked to state two issues or problems that they needed help with and rate them (1 = not bothering me at all, 6 = bothering me greatly). They were asked to do the same thing for the follow-up questionnaire that was completed on the last day of the course. They were also asked to rate their general feeling of well being (1=as good as it could be, 6=as bad as it could be). Figure 1 illustrates the difference in the mean baseline scores and mean scores on completion of the programme for concern 1, concern 2 and well being.



As can be seen, there was a distinct shift in the scores for both stated health concerns and an overall perception of health improvement within the life of the programme. Further follow-up at 6 months post programme will be conducted to determine whether these levels are sustained or not beyond the programme.

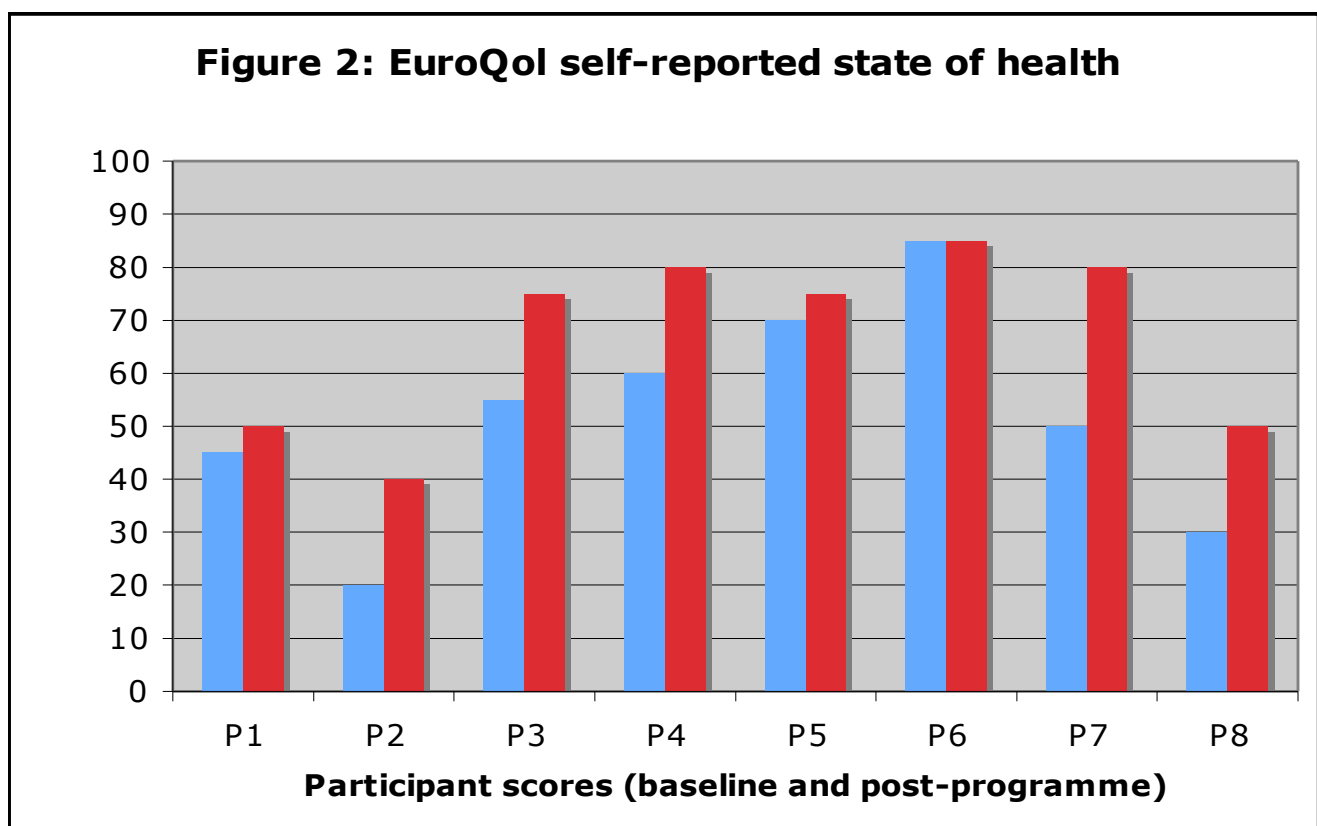
EuroQol scores

EuroQol has two parts - the first part asks participants to rate their mobility, levels of self-care, effect on usual activity, levels of pain/discomfort and anxiety/depression - Figure 1

⁵ These are limited to 8 participants as 2 did not complete the follow-up forms. Concern 1 - Baseline mean = 5.5 (SD= 0.75), Post-programme mean = 3.375 (SD= 1.06), Concern 2 - Baseline mean = 5.25 (SD=1.04) Post-programme mean = 3.75 (SD=1.04), Well being score - Baseline mean = 3.875 (SD=1.64) Post-programme mean = 2.75 (SD=1.16).

The visual analogue part of the EuroQol asked participants to indicate on a scale (which is like a thermometer) how good or bad their health was on that day, in their own opinion (0 was the worst state imaginable, 100 was the best state imaginable). Participants were asked to fill this in at the outset and last day of the Programme. The overall mean baseline score was 51.87 (SD=20.87), and the mean post-programme score was 66.875 (SD= 17.30), which is very encouraging.

Figure 2 contains the baseline scores for each participant and scores on completion of the programme.

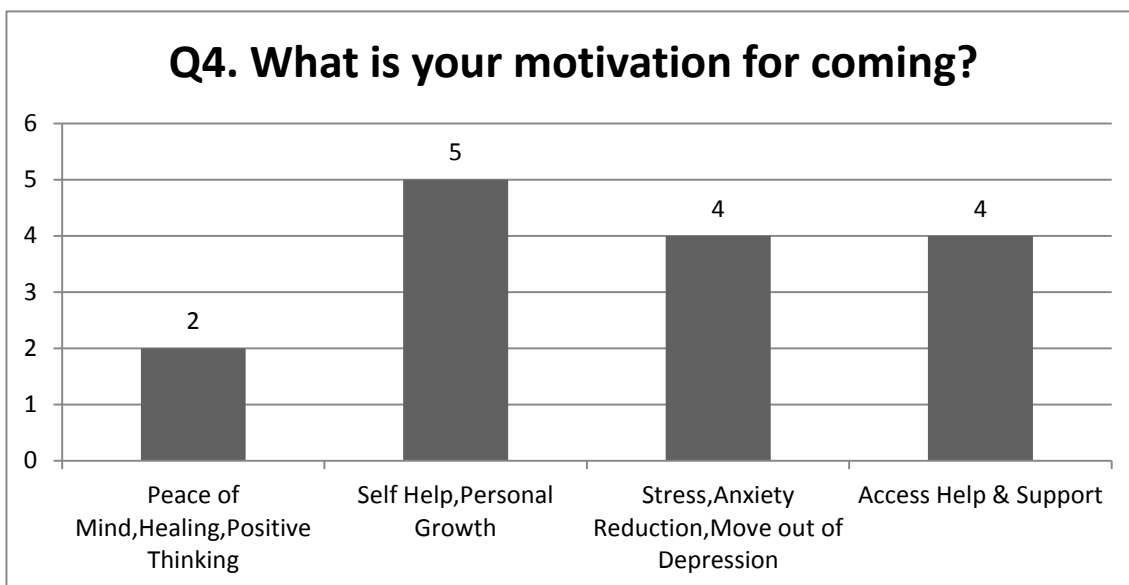


As can be seen from Figure 2, self-reported state of health improved for all but one respondent whose perception of health did not change.

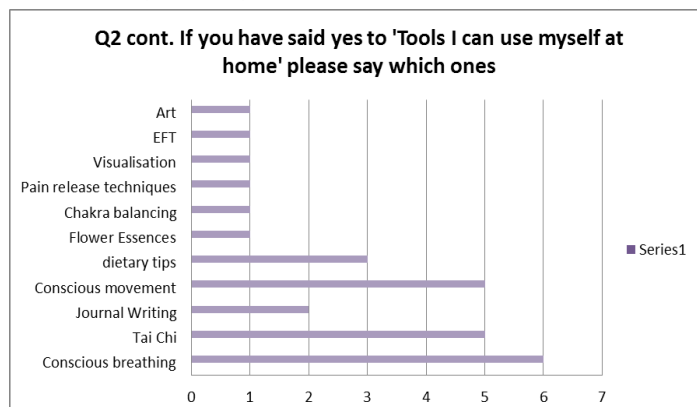
Supplementary Questionnaire

The Supplementary Questionnaire was designed to measure motivation and acquisition of tools for self help.

The motivations of participants undertaking the programme in response to Question 4 of the 'Pre-start Supplementary Questionnaire' [Appendix C], 'What is your motivation for coming?' fell into four categories – peace of mind/healing/positive thinking; self help/personal growth/; stress/anxiety reduction/move out of depression; access help & support. The highest motivator was self-help and personal growth. (see Question 4).



In the second part of Question 2 of the End of Programme Questionnaire [Appendix C] 'If you have said yes to 'tools I can use myself at home' please say which one', participants were asked to list the tools they had acquired that could be used for this purpose. Eleven tools were cited and participants indicated that they had acquired 2-8.



Participant feed back

“This programme has helped me begin the next stage of my healing journey. I am more aware of how I am feeling, of habits - emotional, mental, physical.”

“This has helped me so much, it's grounded me, made me feel confident in knowing who I am and it's ok to be me; to relax. I can sleep soundly and I'm more positive and less anxious.”

“Being in a group with the support and input of a group of skilled therapists creates a momentum that can enable and accelerate healing and a route to recovery”.

“I've become more aware of what is going on for me, learning what I need to do for myself, learning tools of how to do it, and crucially getting the support & guidance to navigate my way through. It's shown me different ways of being with myself and in the world that can allow me to function, to live in an enriching way rather than just exist”.

“This has all had a big knock-on affect to other areas of my life in a positive way. I have awakened more sensitivity and vulnerability but this time it feels safe to be this way and I can see ahead. I feel like I can move forwards in my life. Before I felt blocked, anxious and stuck. Thank you!”

“It offers a doorway out of chronic illness which is often an isolating and debilitating experience, which needs support, skill plus number of inputs. Recovery requires commitment and support through a longer term programme”.

Conclusions

These preliminary results from the pilot project are very encouraging as they clearly show an overall positive impact on the health and wellbeing of participants as measured through MYCaW and EuroQol, as well as through qualitative feedback from participants. Considering the severity of some of the symptoms and the duration which symptoms had been experienced, the 6-week programme has proved beyond doubt that this integrated approach can have real benefits for people with long-term conditions. Evaluation has indicated that a slightly longer programme of ten weeks would add even more benefit.

A further follow up will be necessary to determine whether these benefits have sustained impact for participants in the longer term. However, long term evaluation measures do exist for the Leeds project on which this pilot was based. The Leeds project was able to demonstrate a saving in medication costs (32% reported reducing their medication) and in repeat visits to GPs (38% reported fewer visits to their GPs). Given that this 6-week project cost approximately £7,470 in total (i.e. £747 per participant) we would argue that it may well be a useful investment in relation to current policy initiatives around promoting prevention, mental health and wellbeing, carers, and health inequalities.

Appendix A - Measure Yourself Concerns and Wellbeing (MYCAW)

First form

Full name.....

Date of birth

Date first completed

.....

Please write down one or two concerns or problems which you would most like us to help you with.

1.

2.

Please turn over

Please circle a number to show how severe each concern or problem is now:

This should be YOUR opinion, no-one else's!

Concern or problem 1:

	0	1	2	3	4	5	6	
Not bothering me at all								bothers me greatly

Concern or problem 2:

	0	1	2	3	4	5	6	
Not bothering me at all								bothers me greatly

Wellbeing:

How would you rate your general feeling of wellbeing now ? (How do you feel in yourself?)

	0	1	2	3	4	5	6	
As good as it could be								As bad as it could be

Thank you for completing this form.

Measure Yourself Concerns and Wellbeing (MYCAW)

Follow up form (face to face version)

Today's date

Look at the concerns that you wrote down before.

Please circle a number to show how severe each of those concerns or problems is now:

Concern or problem 1:

	0	1	2	3	4	5	6	
Not bothering								bothers me
me at all								greatly

Concern or problem 2:

	0	1	2	3	4	5	6	
Not bothering								bothers me
me at all								greatly

Wellbeing:

How would you rate your general feeling of wellbeing now? (How do you feel in yourself?)

	0	1	2	3	4	5	6	
As good								As bad
as it could be								as it could be

Other things affecting your health

The treatment that you have received here may not be the only thing affecting your concern or problem. If there is anything else which you think is important, such as changes which you have made yourself, or other things happening in your life, please write it here.

What has been most important for you?

Reflecting on your time with this Centre, what were the most important aspects for you?

(write overleaf if you need more space).

Appendix B - EuroQol

Here are some simple questions about your health in general. By ticking one answer in each group below, please indicate which statements best describe your own health state TODAY.

Please tick one

1. Mobility

- I have no problems in walking about
- I have some problems in walking about
- I am confined to bed

2. Self-care

- I have no problems with self-care
- I have some problems washing or dressing myself
- I am unable to wash or dress myself

3. Usual Activities

- I have no problems with performing my usual activities
(*e.g. work, study, housework, family or leisure activities*)
- I have some problems with performing my usual activities
- I am unable to perform my usual activities

4. Pain/Discomfort

- I have no pain or discomfort
- I have moderate pain or discomfort
- I have extreme pain or discomfort

5. Anxiety/Depression

- I am not anxious or depressed
- I am moderately anxious or depressed
- I am extremely anxious or depressed

EUROQOL® HEALTH QUESTIONNAIRE

Here are some simple questions about your health in general. By ticking one answer in each group below, please indicate which statements best describe your own health state TODAY.

Please tick one

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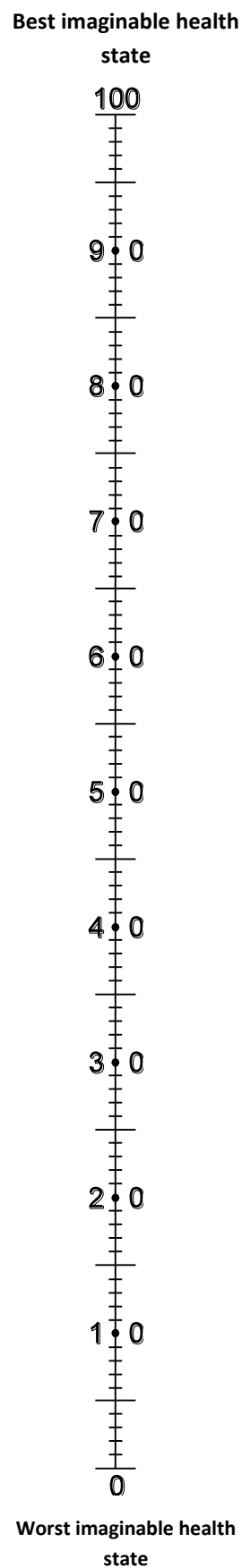
5. Anxiety/Depression

- I am not anxious or depressed
- I am moderately anxious or depressed
- I am extremely anxious or depressed

6. To help people say how good or bad their health is, we have drawn a scale (rather like a thermometer) on which the best state you can imagine is marked by 100 and the worst state you can imagine is marked by 0.

We would like you to indicate on this scale how good or bad your own health is today, in your opinion. Please do this by **drawing a line** from the box below to whichever point on the scale indicates how good or bad your current health state is.

Your own
health state
today



Appendix C

Positive Care Plan (PCP)

Supplementary Questionnaire

Pre-start of Programme

1. What is/are your condition/s?

2. How long have you had it/them?

3. What are the main symptoms and how do they affect your quality of life?

4. What is your motivation for coming?

5. Have you participated in holistic therapies before, if so please say what?

6. What are your expectations from attending the PCP? *(please tick ✓ all that apply)*
 - Reduction in anxiety/depression
 - Less pain
 - Tools I can use myself at home
 - More energy
 - Better knowledge on how to manage my condition
 - Increased confidence
 - Other *(please say)*

Thank you for taking the time to complete this questionnaire. The results are confidential and no one will be identified by name in the evaluation report which will be used for assessing the effectiveness of the pilot project.

Positive Care Plan (PCP)

Supplementary Questionnaire

End of Programme

1. Have any of your conditions improved? Yes/No

If Yes – How, If no why not?

2. Have you experienced/gained any of the following?

(please tick ✓ all that apply)

- Reduction in anxiety/depression
- Less pain
- Tools I can use myself at home
- More energy
- Better knowledge on how to manage my condition
- Increased confidence
- Other *(please say)*

If you have answered yes to 'tools I can use myself at home' please state which ones.

3. Would you consider attending further programmes?

(Please give reasons for your answer)

4. Is there anything else you would like to add?

Thank you for taking the time to complete this questionnaire. The results are confidential and no one will be identified by name in the evaluation report which will be used for assessing the effectiveness of the pilot project.

Appendix D - Estimated Costings

These figures are our projected costings for a 10-week programme for 10 people consisting of a 1-hour one-to-one session and two group sessions.

PCP Costings			10 week Programme															
			Planning Meeting 1	Planning Meeting 2	Intro Day @ 4 hours	Programme per day	Programme per day x 10	Evaluation Meeting	Co-ordination (100 hours)	Advertising	Admin	TOTAL						
Therapists (6)	£35 p.h	£	210.00	£	210.00	£	840.00	£	455.50	£	4,550.00	£	420.00					
Clinical Supervision 6 hrs	£60 p.h					£	36.00	£	360.00									
Venue	£33 per room	£	33.00	£	33.00	£	33.00	£	198.00	£	1,980.00	£	33.00					
Co-ordinator	£25 p.h					-					£	2,500.00						
Advertising										£	950.00							
Admin costs											£	200.00						
Refreshments	£10 per day					£	10.00	£	100.00									
Contingency														£300				
Total		£	243.00	£	243.00	£	873.00	£	6,990.00	£	453.00	£	2,500.00	£	950.00	£	200.00	<u>£ 12,752.00</u>
						£	699.50											