

Peer Support Workers

Background

North Stockholm Psychiatry (NSP) is part of the Stockholm County healthcare system, which is a county healthcare provider. NSP offers specialist psychiatric out- and inpatient care of Stockholm County residents age 18+ (service area: 350.000). Inpatient care contains of nine closed wards (139 beds), with both voluntary and involuntary detentions. Outpatient care contains of 13 local clinics. NSP employs approx. 920 people.

The User Involvement Coordinators¹ (UIC) at NSP and Psychiatry South Stockholm initiated the project Peer Support Worker² (PSW). The evaluation showed positive results and the board at NSP decided to employ two PSWs at ward 53 (inpatient ward for patients with bipolar disorder type 1).

Our aim:

1. Offer patients a sustainable and safe way to access knowledge from recovered peers.
2. Increase user involvement by employing PSWs in the health care teams.
3. Offer patients activities they defined as meaningful to their recovery when at the ward

Problem

Inpatient wards at NSP uses a structure for user involvement called *Patient forums* (PF). PF is a weekly meeting lead by the UIC, where patients can suggest how to improve the ward. Patients often requests to talk to someone who has recovered. They also want the ward to organize activities they define as meaningful to their recovery.

Assessment of problem and analysis of its causes

Looking at patient experiences as a mandatory qualification for an employment is controversial in health care. Modern approaches to health care stress the importance of looking on patient-staff relationships as a partnership between two experts rather than an expert giver and a passive receiver. The step towards using patient expertise as a part of the care team is still challenging to a health care organization.

Intervention

NSP have two PSW employed at ward 53. Their main tasks are:

1. Support patients based on exchanging peer-to-peer experiences.
2. Strengthen the patient perspective in individual care plans and general QI-work at the ward.
3. Organize and lead informational, creative and physical activities for the patients

¹ An employee with lived experience of psychiatric care set to support structures around user involvement, on organizational level. NSP has two full time employed UICs.

² An employee with lived experience of psychiatric care set to support patients, as a complementary part of the care team.

Strategy for change

- The UCIs prepared the project by creating work descriptions, recruitment criteria and risk assessments in dialogue with staff.
- Patients were invited to give feedback through PF every week.
- The PSWs had group mentoring every week led by the UCIs.
- The UCIs measured and gave feedback during the project.

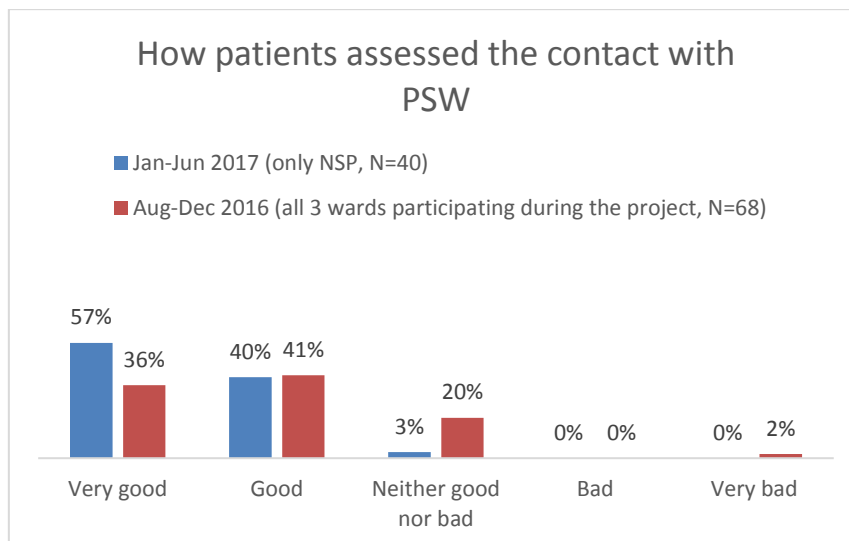
Measurement of improvement

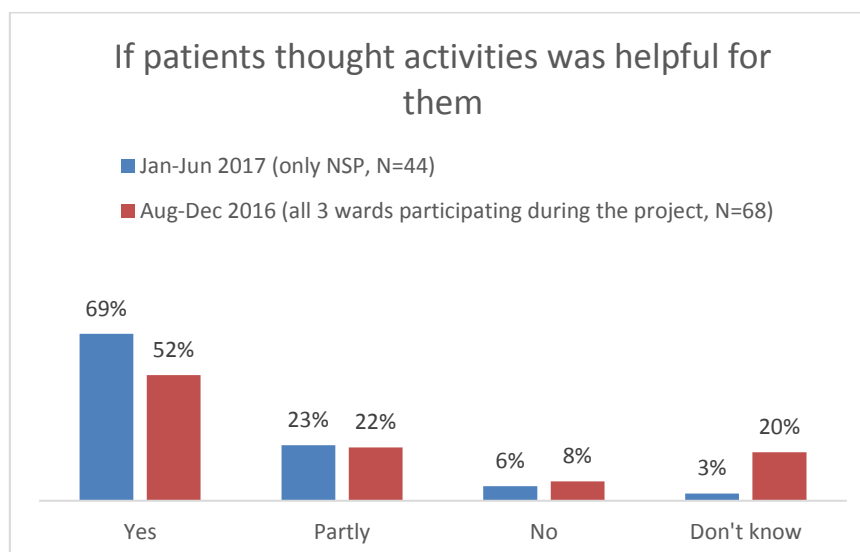
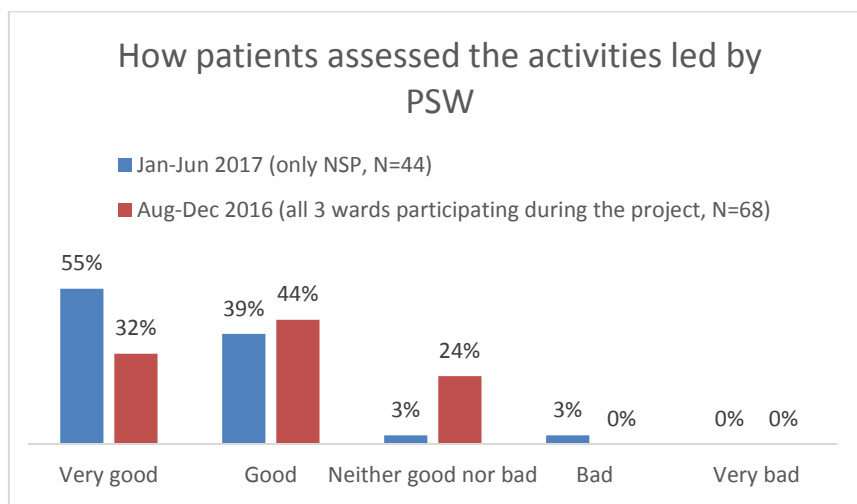
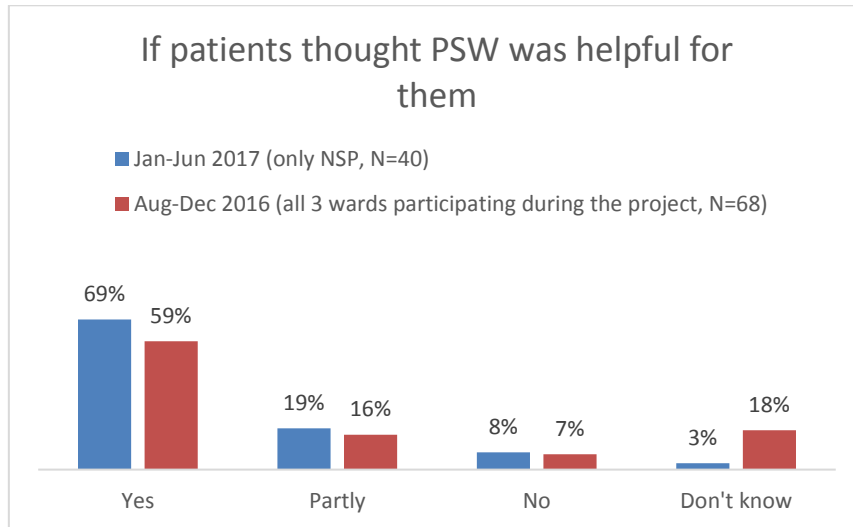
Questions	How do we find the answer?
What do patients think about PSW support?	Poll to all patients when discharged from the ward.
What do patients think about the activities?	Ask patients at PF.
Do PSW manage the activities?	Preformed activities and number of participants is documented by the PSWs.
Do patients attend the activities?	

Effects of changes

Data shows that PSW manage to lead group activities, and that patients attended and appreciated them.

Results from patient poll





Use of coercion

Comparison between year without and year with PSW at ward 53:

- 64 % less patients were subjected to coercion
- 60 % less forced medications
- 40 % less medical restraints
- Unchanged amount of forced isolations

Problems

- How to finance an expanding of PSW?
- Our data gives us a good indication, but doesn't reach scientific standards.

Lessons learnt

- The patients accepted PSW immediately.
- The activities helped create alliances with patients.
- Organized, simple activities helped stressed patients to calm down.
- Talking to PSW about experiences of treatments makes patients feel safer.

Messages for others

- A new PSW needs a work description; an introduction and mentoring (just like everyone else).
- Don't over challenge the system when starting up. The first PSWs must be easy to accept by the organization.
- Staff will worry about PSWs ability to be professional. These worries usually goes away once PSW starts working (if recruitment is done properly).

How have we involved patients, carers or family members

- UCIs led the start-up project.
- Using PSW in itself.
- Patient- and carer organizations were reference group.
- Patients at ward 53 leaves feedback weekly at PF.