■ Post rating

Pre rating

# **BOOST**: A Self-Management Programme for People with Multiple Sclerosis

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#### Introduction:

- Supported self-management for people with long term health conditions is being used nationally to increase patient knowledge, skills, and self-efficacy to maintain their best health, achieve personal goals, and improve quality of life. It has been suggested that pro-active supported self-management can enhance healthcare outcomes and reduce health- and social-care burden (De Silva,
- People with Multiple Sclerosis (MS) manage their symptoms and the changes to functioning on a day-to-day basis with intermittent input from health care professionals, but there is no consensus of the most effective way to deliver support for self-management or review outcomes (De longh et al, 2015).

De Silva, D. (2011) Helping people to help themselves: A review of the evidence considering whether it is worthwhile to support selfmanagement. The Health Foundation.

De longh, Fagan, Fenner & Kidd (2015) A Practical Guide to Self Management Support. The Health Foundation.

### Background Information:

- The programme was originally created in 2013 to meet the needs of people referred to the service who did not need or want to attend the standard day hospital programme; i.e. still working or leading active lives, earlier in the disease process and fewer
- This was offered to patients with any long term neurological
- The majority of participants were found to have MS and this had been the focus of group member led discussions. Feedback was that other participants felt less included.
- In 2017 it was relaunched as an MS programme to meet the specific needs of this client group.
- The name 'BOOST' was chosen to reflect the aim of the programme - to positively BOOST people's existing self-management skills.
- The screening process was changed from telephone screens to face-to-face screening to ensure appropriate attendees were invited and encourage high attendance rates.

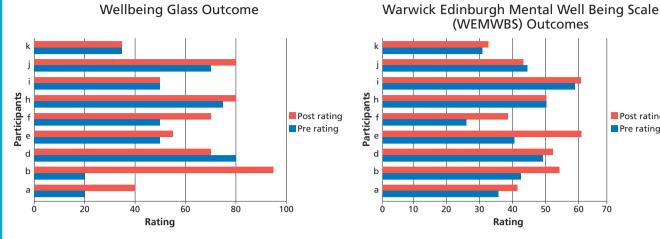
#### Programme Information January-March 2018 programme:

#### **Programme Aims**

- 1. To promote a sense of self-management and control over symptoms.
- 2. To facilitate adjustments thorough peer support and the sharing of experiences in the group.
- 3. To provide information on strategies and resources to maximize knowledge and independence.
  - Referral criteria: People with MS with an Expanded Disability Status Scale (EDSS) score of 6 or above, leading independent and
  - Screening: 25 people were offered face to face screening appointments in order to identify 10 participants who met the referral criteria and wanted to attend. Those not invited were offered other services if appropriate.
  - Professionals involved Occupational Therapy, Clinical Neuro-Psychology, Physiotherapy, Continence Advisory Nurse, MS Specialist Nurse, Neuro-Rehabilitation Consultant, Speech and Language Therapy

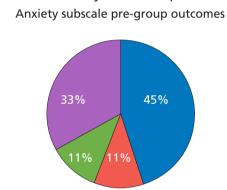
#### 2018 Boost Programme outcomes

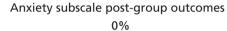
Group participants completed the following pre- and post- group measures:

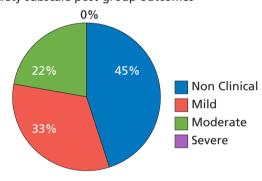


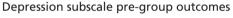
- On the Wellbeing Glass, the majority of participants demonstrated improvement in their perceptions of their health & wellbeing. Pre-ratings ranged from 20-80, whilst post-ratings ranged from 35-95. The average difference was 14, whilst one participant's rating increased by 75 points.
- On the WEMWBS, group data indicated an improvement between pre-ratings (M= 42.6; R = 26-50) and post-ratings (M=49; R=33-62), with three participants showing significant improvement in their mental wellbeing (a score difference of 9.70), indicating significant reliable change (1.96 +/-). No participants mental wellbeing scores significantly declined.

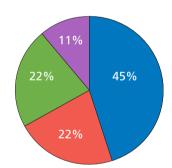
#### Hospital Anxiety and Depression Scale (HADS) outcomes



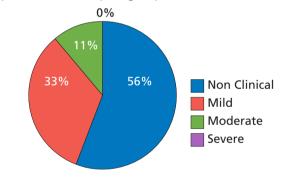








Depression subscale post-group outcomes



- Group data demonstrated improvements in pre-ratings of anxiety (M= 9.9, R=3-17) compared to post-ratings (M=7, R=0-13); and pre-ratings of depression (M=8.8, R=3-16) compared to post-ratings (M=6.4, R=2-13). After the programme no participants self-reported in the severe range.
- Wilcoxen matched-pairs Signed-Rank test indicated a significant difference between pre and post measures of anxiety (V=26, p = 0.02); but was non-significant for the measure of depression.
- On 5-point Likert-scale measures constructed for the programme, the majority of participants reported they "agree" (4): they understood MS, felt confident in managing symptoms, could manage setbacks, felt in control or their condition, and had awareness of services and where to seek

#### 2018 Boost Programme:

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6
10.00 - 11.15	Welcome, Introduction	Managing Medical issues & Medication	Managing Emotions	Communication & swallow	Managing Intimate relationships	What next? Future Goals
	Relaxation					Relaxation
11.15	Break					
11.30	Physiotherapy Exercise Talk	Physiotherapy Exercise Session • Pilates	Physiotherapy Exercise Session • Aerobic	Physiotherapy Exercise Sessio • Balance	Physiotherapy Exercise Session • Strength	Physiotherapy Exercise Session • Flexibility
12.15 - 13.00	Managing Fatigue	Information Sharing & Benefits	Bladder & Bowel Management	Relaxation	Relaxation	Outcome measures & evaluation
		Relaxation				

#### Reflections:

- Improvements in the majority of pre and post outcomes measures.
- Positive verbal and written feedback.
- Large increase in referrals from MS Specialist Nurses, due to greater awareness of the programme and outcomes which have demonstrated the positive gains made by participants.
- Improved attendance with face-to-face screening.
- High group cohesion and members commented on the value of peer support (both emotional and practical) that the group provided.
- Active involvement in the sessions.

#### Future plans:

- Continue face-to-face screening.
- Increased emphasis on goal setting at start and throughout the programme with a goals review in each
- Inclusion of sessions on memory/cognition, and diet/nutrition, following feedback from participants.
- Programme to extend to seven weeks and to run twice-yearly.
- Consider running a family session and follow up day in future

## Qualitative Feedback:

When asked about what they had found most helpful about the programme, participants commented:

'Meeting other people with the same condition' 'Finding the courage to talk to other people'

'Knowing that I'm not alone with MS'

'Sharing ideas and knowing what other people are doing'

'Sharing knowledge and developing dialogue'

'I feel like I have gained confidence and drawn from the positivity of others'

'The laughter was a release'

'Professional advice on managing MS'

'Thinking and taking time to think'