

# Community Rehabilitation Volunteers Evaluation Report

Kingston Hospital NHS Foundation Trust

July 2024 [V3]

*helpforce*



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# Executive summary

## The project

Kingston Hospital NHS Foundation Trust ran an eight-week intervention in which trained volunteers visited patients in their homes or care residences to deliver a rehabilitating exercise programme between November 2023 and June 2024. The service aimed to reduce deconditioning and the risk of falling and improve the quality of life for the those at risk of deconditioning or falls. The programme was an extension to an established falls prevention volunteer service offered to recently discharged patients.

## Evaluation approach

Using its established [\*Insight & Impact\*](#) evaluation service, Helpforce follows a consistent methodology to determine the impact of volunteering roles on health outcomes. Target outcomes are identified across a range of beneficiaries representing the people and organisations involved, and then the necessary data is collected to prove and evidence the outcomes.

## Key findings

Over the period of project delivery:

- The cohort's average Sit to Stand movement scores increased from 6.5 to 8.3, **indicating improved strength**.
- The cohort's average Timed Up and Go scores decreased from 30.8 to 23.7, and the 180-degree turn scores improved from 6.7 to 5.0 after the programme, **suggesting better mobility**.
- The cohort's average **confidence to cope score increased** from 5.0 to 6.6 after receiving support.

Volunteers also made a positive impact on staff perceptions, with some reporting that volunteers had helped them improve their working lives and quality of care, and all staff respondents being satisfied or very satisfied with the support they received. Volunteers themselves also reported gaining personal benefits through volunteering, with all volunteers feeling satisfied with their experience.

## Conclusions

The Community Rehabilitation Programme has been effective in improving the functional fitness and health outcomes of for those at risk of deconditioning or falls in care homes and the community, with improved average scores across all functional fitness tests.



# Context: Community Rehabilitation Programme

- Falls among the elderly are a significant health concern, with an estimated 20-30% of adults aged 65+ experiencing falls annually.<sup>1</sup>
- Falls cost the NHS around £2.3 billion per year and studies have indicated that a tailored exercise programme can decrease falls by 54%, and physical activity can lower the risk of hip fractures by 50% from falls.<sup>2</sup>
- Mobility emerged as a key predictor of wellbeing changes in older fallers, with better mobility protecting against wellbeing decline, particularly in men.<sup>3</sup>
- The National Institute for Health and Care Excellence (NICE) guideline also highlights the importance of integrating exercise into strategies aimed at preventing falls, with a particular focus on improving strength and balance.<sup>4</sup>



<sup>1</sup>Pillay, J., Riva, J.J., Tessier, L.A. et al. (2021). Fall prevention interventions for older community-dwelling adults: systematic reviews on benefits, harms, and patient values and preferences.

<sup>2</sup>NICE (2019), Oldham Exercise Falls Prevention Service. <https://www.nice.org.uk/sharedlearning/oldham-exercise-falls-prevention-service>, Greater Manchester Falls Prevention: Delivering Integration and Reconditioning (2021).

<sup>3</sup>Davis, J. C., Robertson, M. C., Ashe, M. C., Liu-Ambrose, T., Khan, K. M., & Marra, C. A. (2010). Does a home-based strength and balance programme in people aged > or =80 years provide the best value for money to prevent falls? A systematic review of economic evaluations of falls prevention interventions.

<sup>4</sup>NICE (2018), Falls. <https://www.nice.org.uk/guidance/cg161/evidence/falls-full-guidance-190033741>



# Service Overview

- Kingston Hospital NHS Foundation Trust set up an eight-week intervention in which trained volunteers visited patients' homes to deliver a rehabilitating exercise programme. The aims of the service were to reduce deconditioning and the risk of falling post-discharge, increase social connectedness, and improve quality of life for the elderly. This service was [evaluated by Helpforce](#) in February 2023.
- Following the success of this service, the organisation expanded the project to include other organisations in the area, incorporating GP practices and an additional care home setting. The organisations involved in the extension of the programme include Acorn GP Practice, Holmwood Corner GP Surgery, Hampton Care Home, and The Willow Grange Care Home.
- Patients were identified by their GP surgery or their care home team as being eligible for the service based on criteria that suggest they are at risk of deconditioning.
- This report focusses on evaluating the extension of the service into GP practices and care homes.
- Between November 2023 and June 2024, there were 16 active volunteers delivering the role and the service was available to 114 care home residents, with 50 residents attending the classes.
- During this time, a large amount of community rehabilitation volunteer activity was reported. In total...



17

patients completed 8-week  
exercise programme

217

face to face patient support  
sessions completed by  
volunteers

39

telephone support sessions  
completed by volunteers

40

care home classes  
delivered

# Service Overview

## GP Patients

- Delivering 1 face to face visit in the patient home per week (duration 8 weeks), demonstrating & facilitating physiotherapy prescribed exercises
- Delivering 1 additional telephone call per week for the first 4 weeks, to provide support and encourage engagement with the programme
- Sign-posting to local community services and activities, and providing healthy living messaging
- Recording data in patient workbooks

## Care Home Patients

- Delivering seated exercise class in the care home per week (duration 8 weeks), demonstrating & facilitating physiotherapy prescribed exercises
- Throughout the week 1-1 room visits of gentle movement prescribed as bed, seated or standing exercise.
- Support in signposting to other services and onward referrals.
- Recording data in patient notes
- Providing healthy living education

# Evaluation approach: Outcomes

## Helpforce's approach to evaluating...

Using its established [Insight & Impact](#) evaluation service, Helpforce follows a consistent methodology to determine the impact of volunteering roles on health outcomes. Target outcomes are identified across a range of beneficiaries representing the people and organisations involved, and then we collect the necessary data to prove and evidence the outcomes.

Evaluation of the extension of the falls prevention volunteers project into GP surgeries and care homes at Kingston Hospital NHS Foundation Trust was completed using data captured from patients, staff and volunteers. We were looking to answer the following questions about the project:

- What difference have community rehabilitation volunteers made to the patients' physical and emotional wellbeing?
- What impact have community rehabilitation volunteers had on staff and their perceptions towards volunteering?
- What impact has volunteering had on the volunteers themselves?

The project supports a multitude of patient, volunteer, staff and organisational outcomes. These include improved patient wellbeing, reduced patient risk of falling, enhanced patient balance and strength, and development of new skills for volunteers.



### Patients

Reduced fear of falling

Increased confidence

Enhanced balance, strength and coordination

Improved patient emotional wellbeing, decreased feelings of anxiety/depression

Satisfied with their volunteer support experience



### Staff

Staff believe that volunteers are having a positive impact on their working lives

Improved efficiencies to allow staff to focus on other priorities

Staff believe that volunteers are having a positive impact for their patients / service users

Staff are satisfied with the support they receive from volunteers



### Organisation

Good integration of staff and volunteers

Volunteers are deployed into roles that deliver measurable benefits to the organisation

Continuous improvement in volunteer services and projects



### Volunteer

Develop new skills that support their personal & professional development

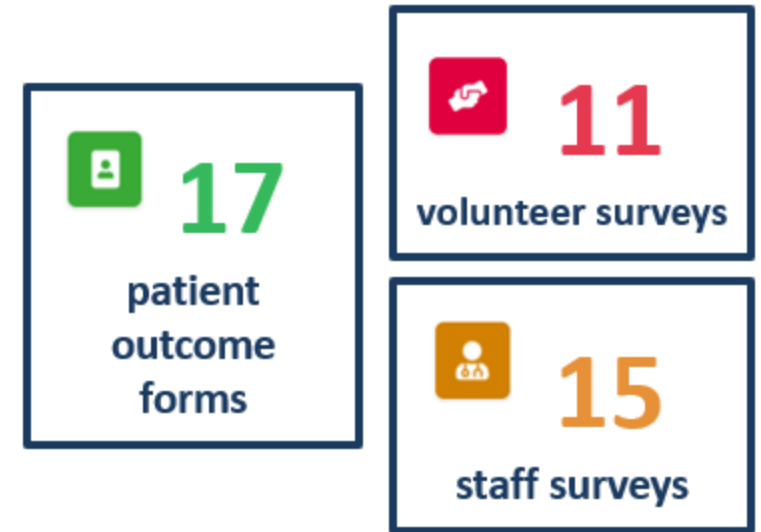
Improved confidence & sense of purpose

Satisfied with and happy in their role

# Evaluation approach: Methodology

The evaluation consisted of three different collection methods:

- A **patient outcomes** form completed jointly between the volunteer and patient, before and after the exercise programme:
  - The volunteer filled out some patient details and the outcomes of the functional fitness tests completed with the patient (180 turn, Timed Up and Go, Sit-to-Stand, hand grip strength).
  - The patient filled out the EQ5D quality of life self-assessment, their confidence / fear of falling and, at the end of the programme, their experience of receiving support.
- **Staff surveys** completed as a one-off snapshot survey, asking questions about their feedback on the community rehabilitation programme and the volunteers. The staff asked to complete this survey included physiotherapists involved in the project, care home staff and GP referrers.
- **Volunteer surveys** completed by volunteers after delivering the role for some time, asking questions regarding their volunteer experience and perceived role impact.



Throughout the report, data findings are linked back to the data collection method using icons at the top right-hand side of the screen. Evidence strength is also rated using icons. These icons are as below.

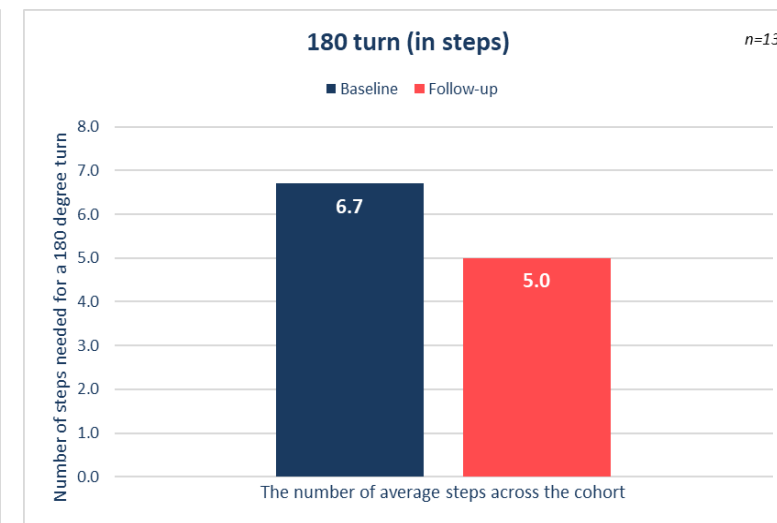
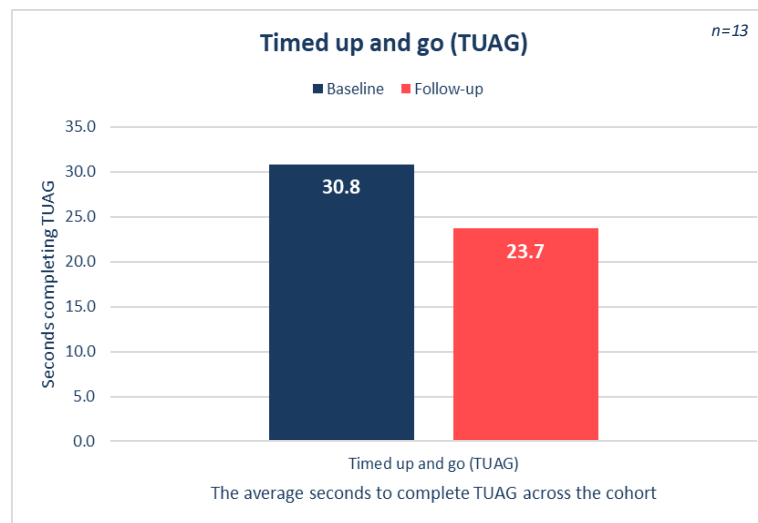
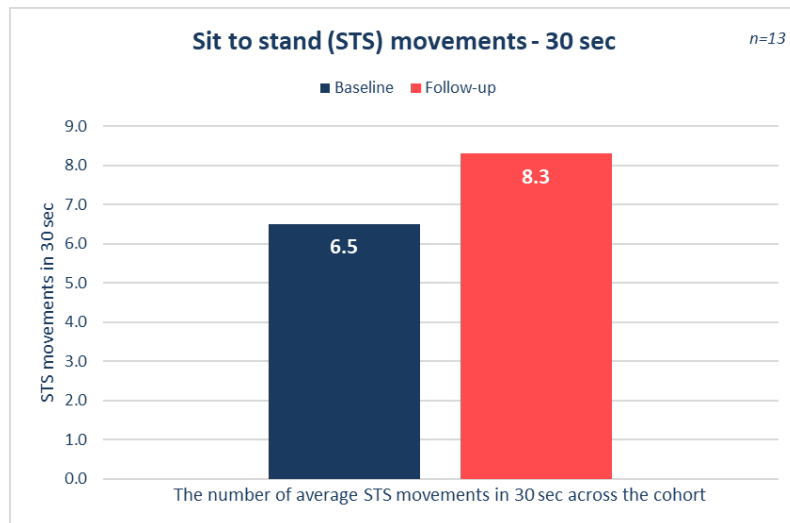




# Impact: Patients' functional fitness



## Functional Health Measures – Combined (GP & Care Home)



The patients in the programme were evaluated using several functional health measures, including a **30-second Sit-to-Stand test (STS)**, **Timed Up and Go test (TUAG)** and **180-turn (in steps)** before and after the programme. The STS assesses strength and endurance by counting how many times a person can stand up and sit down in 30 seconds; the TUAG assesses mobility, balance, and walking speed by timing how quickly a person can stand up from a chair, walk, turn, and sit back down; and the 180-turn test assesses balance and mobility by measuring a person's ability to perform a simple turn.

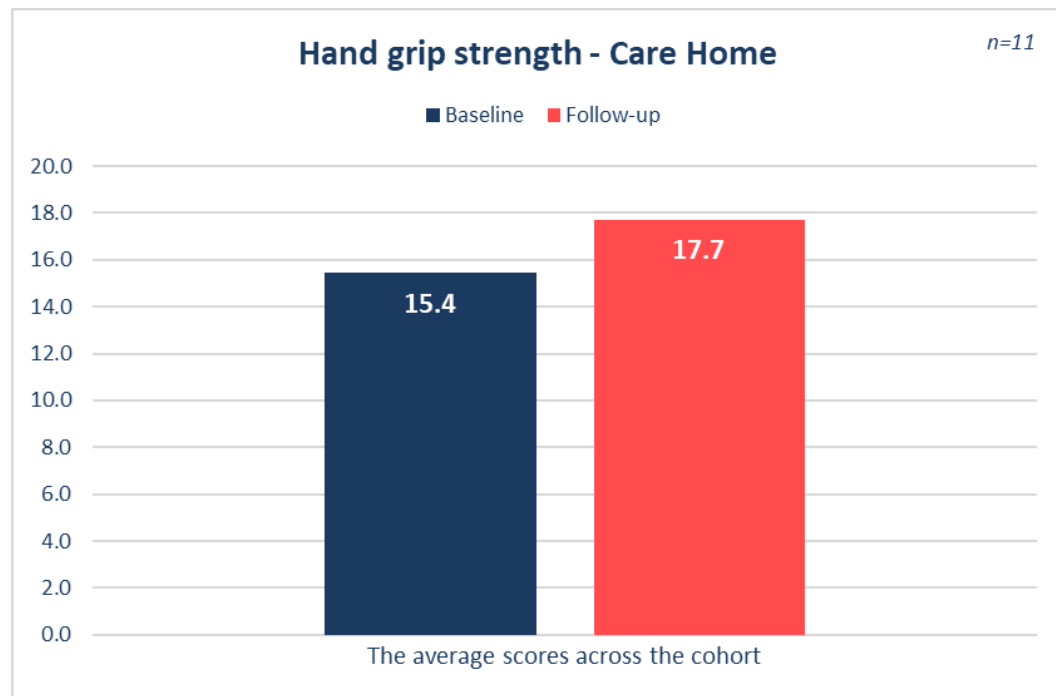
- The average scores for STS increased from 6.5 to 8.3, indicating **an overall improvement in strength and endurance for STS movements**. Eight of 13 improved their STS score and two maintained.
- The cohort had an average score of 30.8 on the Timed Up and Go (TUAG) test before the intervention, which decreased to 23.7 after. Six of 13 improved their TUAG score and three maintained it. This indicates that **the intervention resulted in better mobility and faster walking speeds** for the cohort.
- The cohort's average score on the 180 Turn (in steps) test improved from 6.7 to 5.0 after the programme, **indicating improved mobility and balance**. Nine of 13 improved their 180 turn score and three maintained.

*The comparison of pre-and post-intervention average cohort scores for STS, TUAG and 180-turn revealed no statistically significant changes, as assessed by conducting a t-test ( $p > 0.05$ ).*

# Impact: Patients' functional fitness



## Functional Health Measures (Care Home)



- Some care home patients were unable to complete all three of the previously discussed physical measures due to varying levels of physical ability and cognitive impairment.
- To ensure at least one physical outcome could be gathered for all patients, hand grip strength measurement was introduced on the advice of the physiotherapist. This measure was completed by all care home patients, regardless of their ability to complete the other physical measures.
- Hand grip strength is measured using a hand-held dynamometer, where individuals squeeze the device with maximum force. Improvement in grip strength indicates better muscle health and overall functional fitness, often associated with reduced risk of mobility limitations and improved health outcomes.
- The average scores increased from 15.4 to 17.7, indicating **an improvement in care home patients' hand grip movements**. 10 of 11 improved their hand grip strength score.
- The comparison of pre- and post-intervention hand grip strength revealed statistically significant changes.<sup>5</sup>

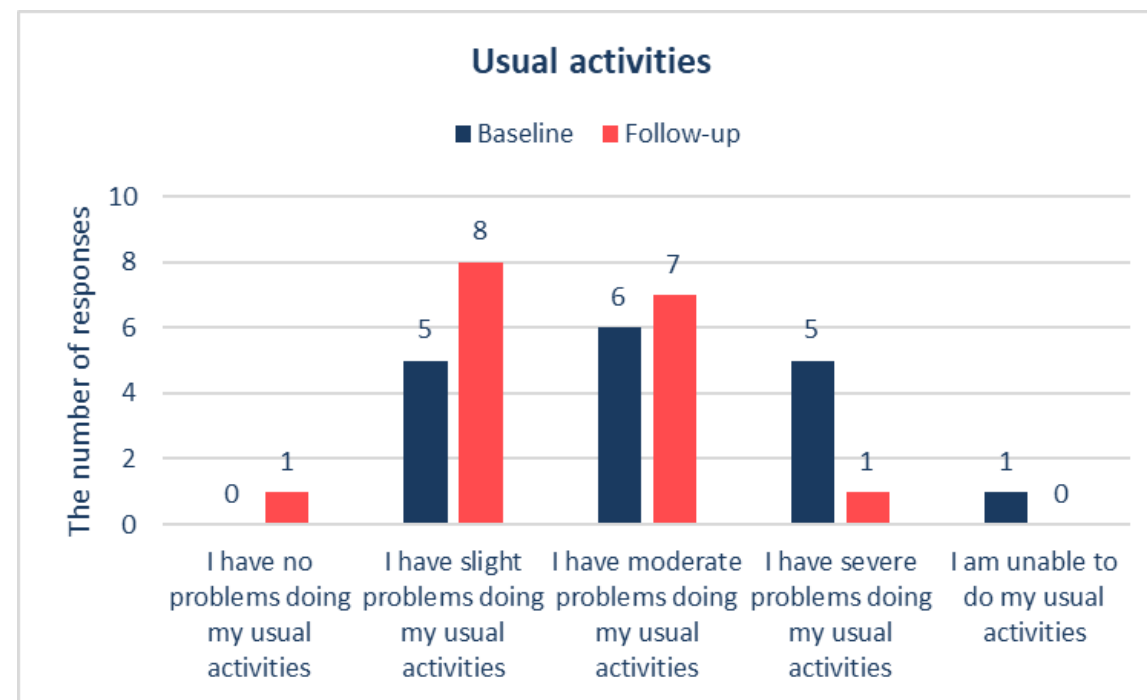
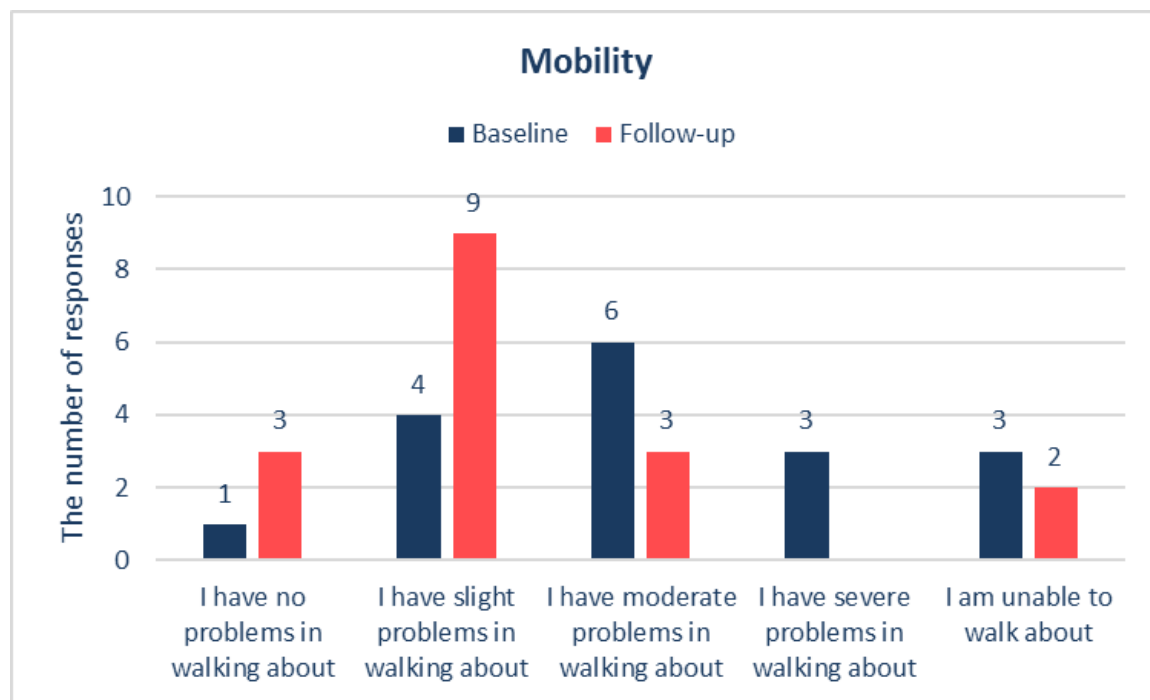
<sup>5</sup> $t(10) = -2.258, p = .048$ .

# Impact: Patients' mobility and abilities



## EQ – 5D Self Assessment – Combined (GP & Care Home)

- There was an increase in patients reporting only slight walking problems from baseline, from four patients to nine at follow up. While the **programme seemed to positively impact some participants' mobility**, with 10 of 17 improving their score and a further six maintaining, it did not have a significant effect on the entire cohort.
- The programme resulted in **an improvement in patients' ability to perform usual activities**, with the number reporting severe problems decreasing from five to one and the number reporting no problems increasing from none to one. Eight of 17 patients improved in their usual activities rating and the remainder maintained. This suggests that the programme **had a positive impact on the patients' daily functioning**.

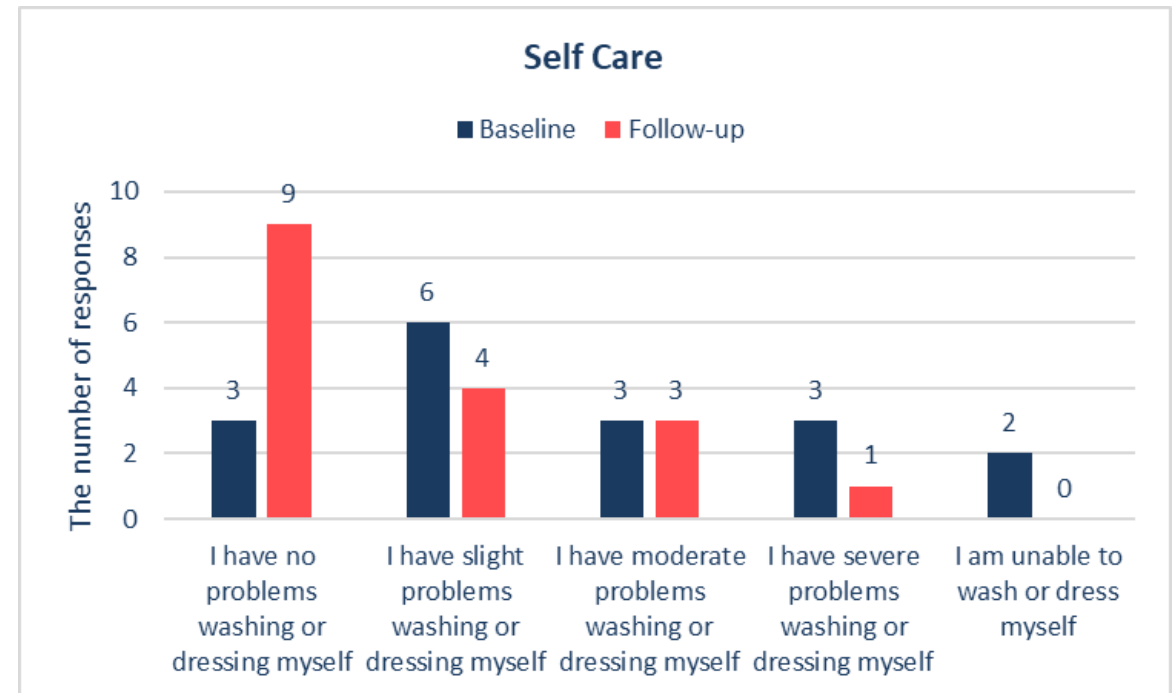
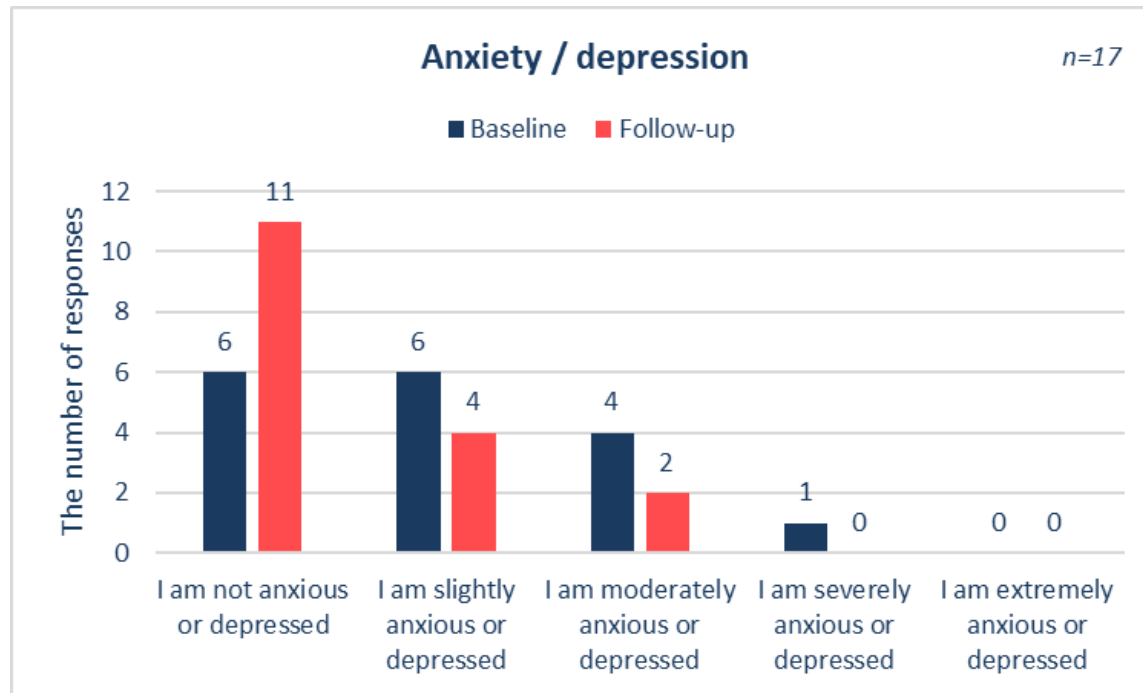


# Impact: Patient's emotional and physical wellbeing



## EQ – 5D Self Assessment – Combined (GP & Care Home)

- The number of patients reporting no anxiety or depression at the end of the programme increased from six to 11, with fewer reporting severe, slight, or moderate symptoms at the end. The data, therefore, suggests a **positive change in patients' emotional wellbeing**. Indeed, 10 of 17 improved in this area and a further five maintained.
- The data shows that there was **an improvement in patients' ability to undertake self-care**, with a significant increase in the number of patients who reported no problems washing or dressing themselves from baseline to follow-up. Additionally, the number of patients who reported slight problems in self-care decreased, while the number of patients with severe problems decreased to zero at follow-up. 12 of 17 improved their rating around self-care and another four maintained.

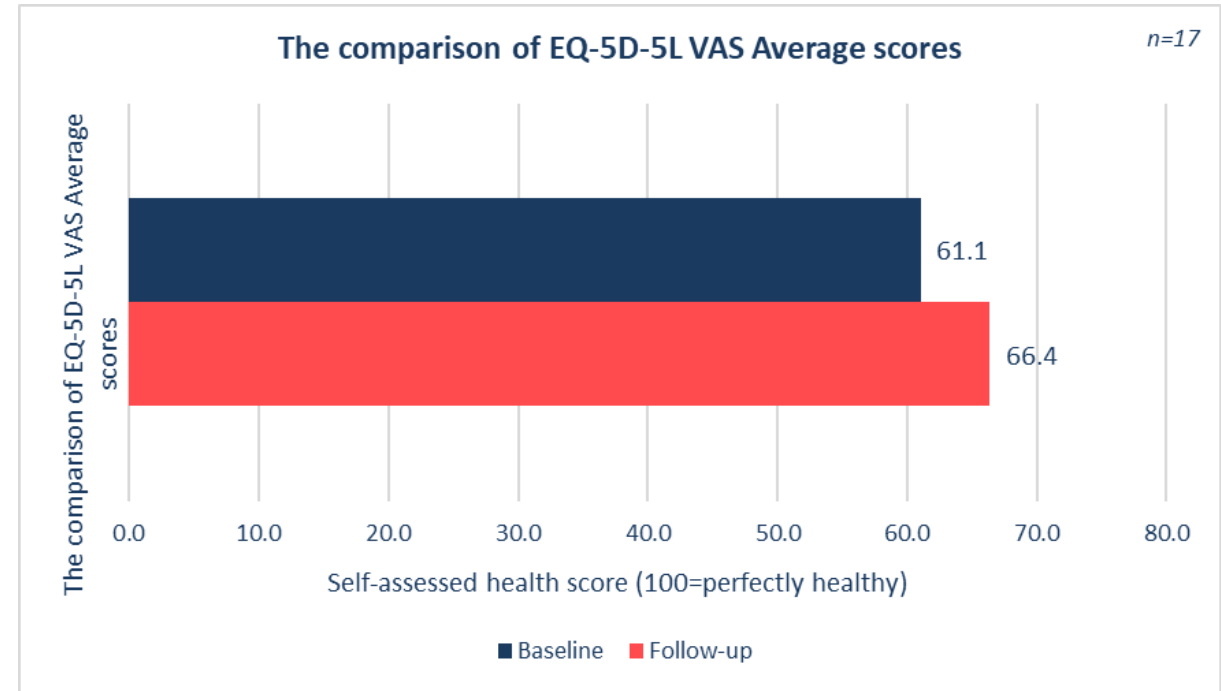
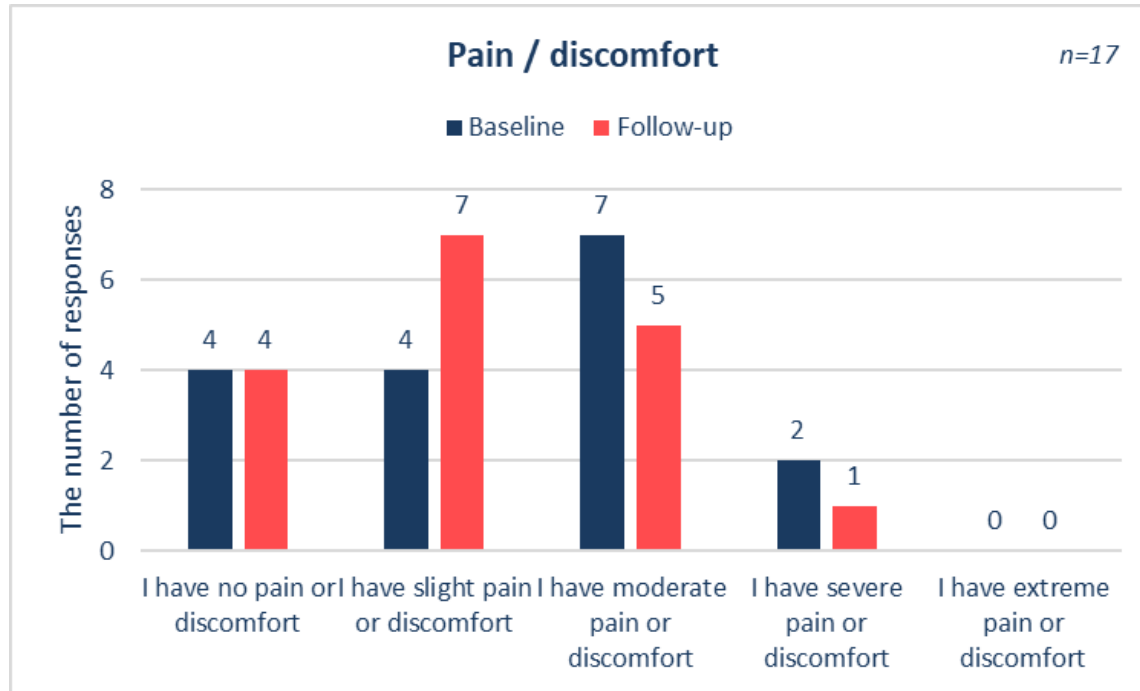


# Impact: Patient's physical and emotional wellbeing



## EQ – 5D Self Assessment - Combined (GP & Care Home)

- Patients reported improvements in their levels of severe and moderate pain or discomfort, resulting in a decrease in the number of patients reporting moderate pain from seven at baseline to five at the follow-up, while the number of patients reporting no pain or discomfort remained the same. Six of 17 patients improved in their pain rating and a further eight maintained. **This suggests that the programme was effective in reducing pain and discomfort levels for some patients.**
- The thermometer score is a simple self-assessed health score to measure overall health and wellbeing, with higher scores indicating better feelings of overall health. The average self-reported thermometer score across the cohort increased from 61.1 at baseline to 66.4 at follow-up. **This suggests an improvement in the overall health and wellbeing of the patients after completing the programme.**



*The comparison of pre-and post-intervention average cohort for Thermometer scores revealed no statistically significant changes, as assessed by conducting a t-test ( $p > 0.05$ ).*



# Impact: Patients' confidence and fear of falling

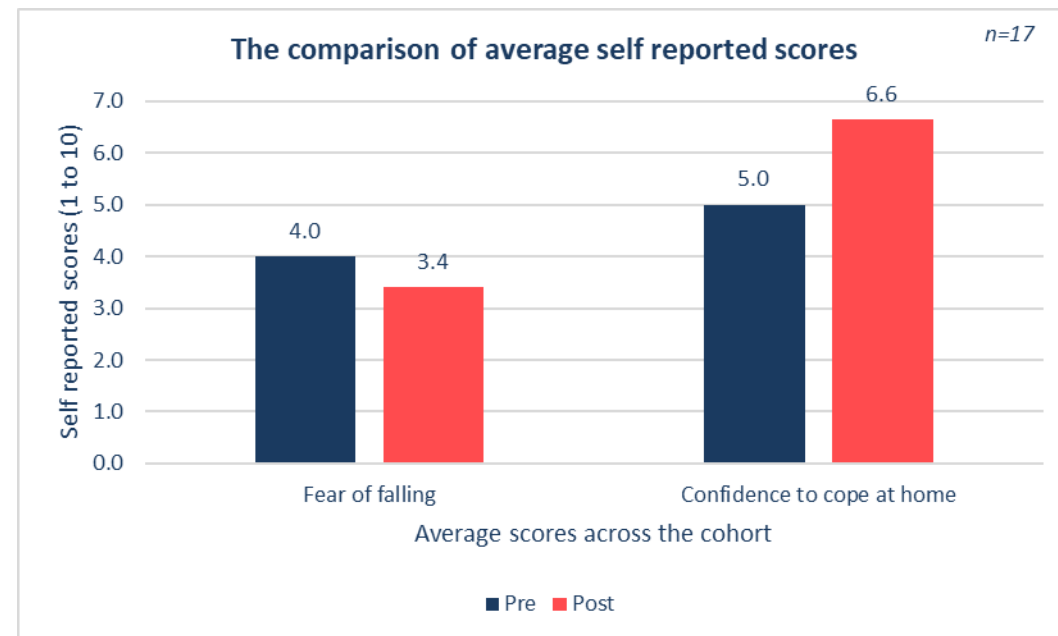


## Self-reported measures - Combined (GP & Care Home)

Before and after joining the exercise programme, patients were asked to reflect on their level of fear of falling and their confidence to cope at home.

- The data shows that the cohort's average **fear of falling score decreased** from 4.0 before the programme to 3.4 after receiving the volunteering support. Nine of 17 reduced their fear of falling and a further five maintained.
- Additionally, the cohort's average **confidence in performing daily activities score increased** from 5.0 to 6.6 after receiving support. 11 of 17 increased their confidence to cope at home and another four maintained.
- The comparison of pre-and post-intervention **average cohort scores for confidence to cope at home revealed statistically significant changes.**<sup>6</sup>

These findings suggest that the programme had a **positive impact on the patients' fear of falling and confidence levels**, therefore indicating that the programme **improved participating patients' emotional response to their physical and functional abilities**.

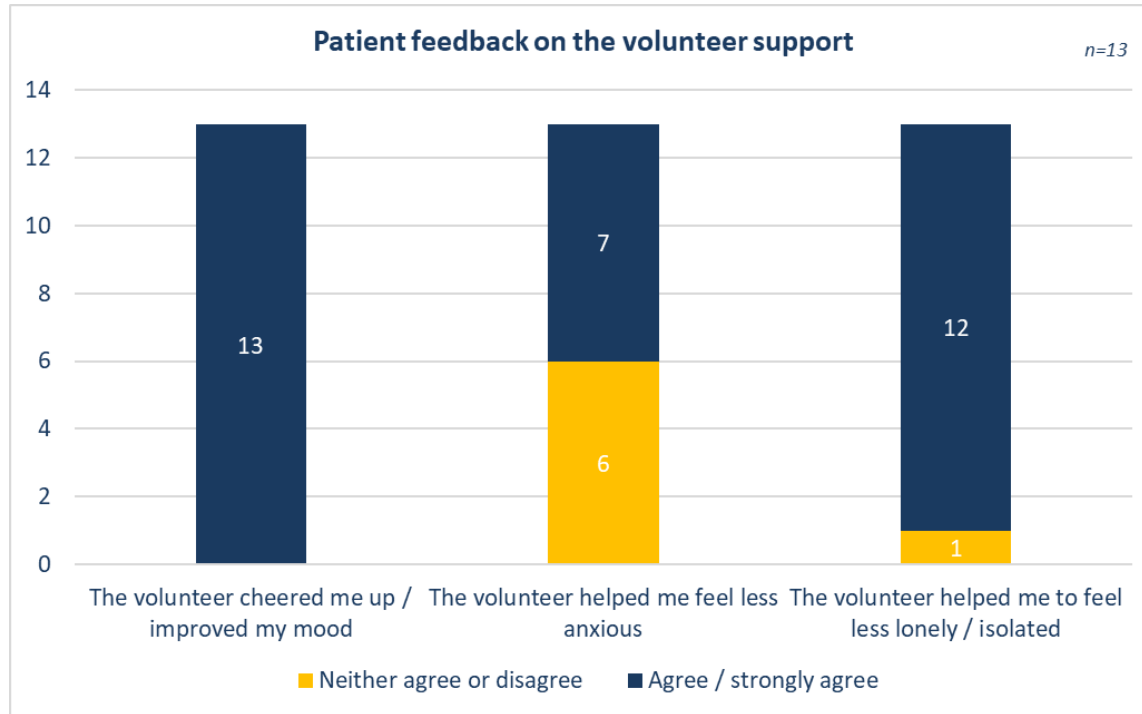


<sup>6</sup>t(16) = -3.078, p = .007.

# Impact: Patient's wellbeing



Patients were asked to reflect on the impact community rehabilitation volunteer support had on their wellbeing.



Of 13 patient respondents:<sup>7</sup>

- All agreed or strongly agreed that the **volunteer cheered them up / improved their mood.**
- Seven of 13 patients agreed or strongly agreed that volunteers helped them to feel less anxious, while six remained neutral. The respondents who remained neutral did not provide any further context.
- 12 of 13 patients agreed or strongly agreed that the **volunteer helped them to feel less lonely / isolated.**
- Overall, it was highlighted that volunteers had a positive impact on patient's wellbeing and loneliness.

Some patients provided additional feedback on the support they received...



*"I have never seen all the residents look so happy and smiling together. I know physically the exercise will help but I can't tell you how much happier everyone seems. We look forward to seeing the volunteer every week."*

Care Home Resident



*"I really feel this had made such a massive difference to my well-being, seeing the volunteer every week to do exercises and have a chat. I sometimes feel low and then I remember that I soon will see the team again, it lifts me up every time."*

Care Home Resident

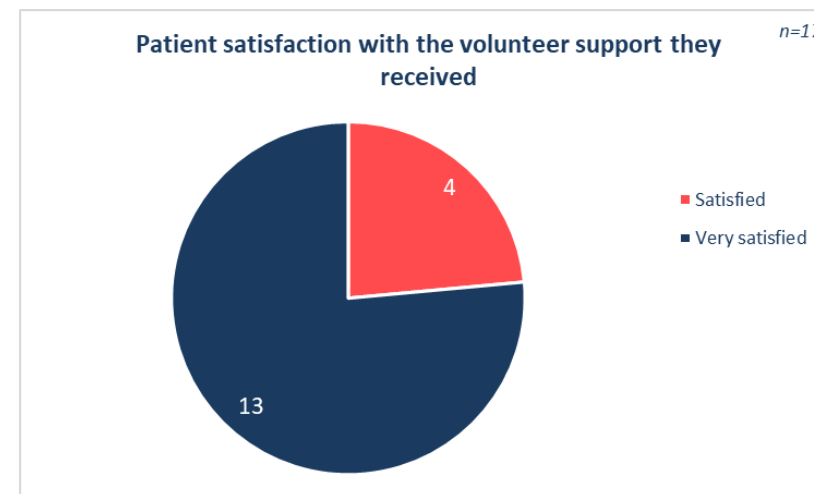
<sup>7</sup>The base size for responses to these feedback questions is smaller than for other questions because these feedback questions were optional, and patients responded only if they chose to provide feedback.

# Impact: Patient satisfaction



Patients provided feedback on their overall satisfaction with the community rehabilitation programme and the volunteer support they received.

- All patient respondents were **satisfied or very satisfied with the volunteer support they received**, and the majority of those were **very satisfied**.
- Patients provided further comments on their experience with the community rehabilitation programme and the volunteer support they received...



*"My balance I feel has massively improved, and I feel much more confident with my stick. I had a visitor last week and we did the exercises together that the volunteer has taught me so well. I really think this will help me to keep walking for as long as possible."*

Care Home Resident



*"I am lucky enough to see the volunteers and complete the class across three days in the week. I love it and I want to do more and more every time. The class is so fun!"*

Care Home Resident



*"The volunteer is fantastic, he is so kind and patient, I really like him. He helps me to complete all the exercises every Tuesday and I really enjoy and look forward to seeing him."*

Care Home Resident



*"I would really like to continue with exercise in the community now and my volunteer is helping me to do this by showing us some services we can get in contact with."*

GP Patient



*"Being able to see Brooke [the physiotherapist] and her team a few times a week over the last few months has been great - it has allowed me to practice standing and walking again for the first time in years, which is slowly allowing me to be more independent. I look forward to seeing them to work on my goals every week. I can now stand to my stick independently and take a few steps with one person to support me, something I was unable to do 6 months ago."*

Care Home Resident



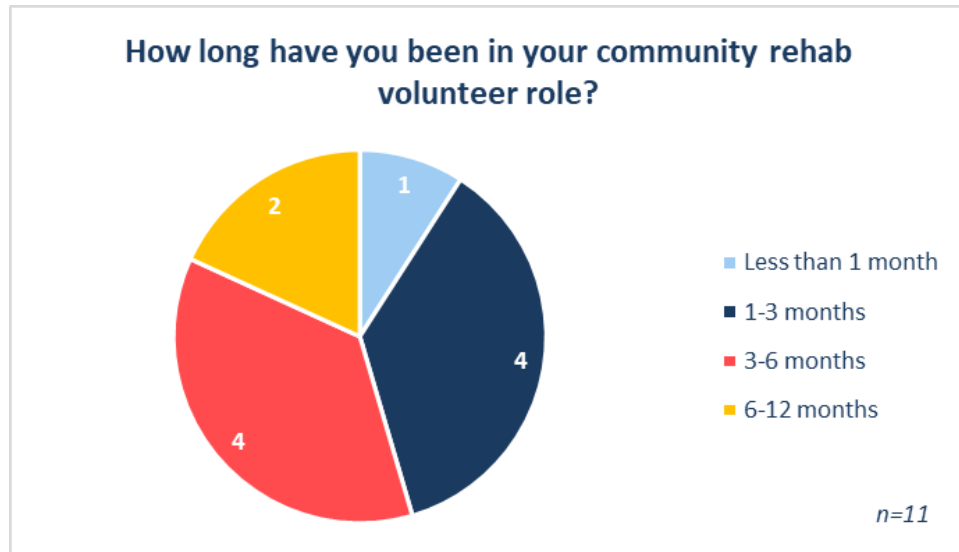
*"I was able to walk a longer distance in the hospital than I had done previously and noticed I have been getting stronger."*

GP Patient

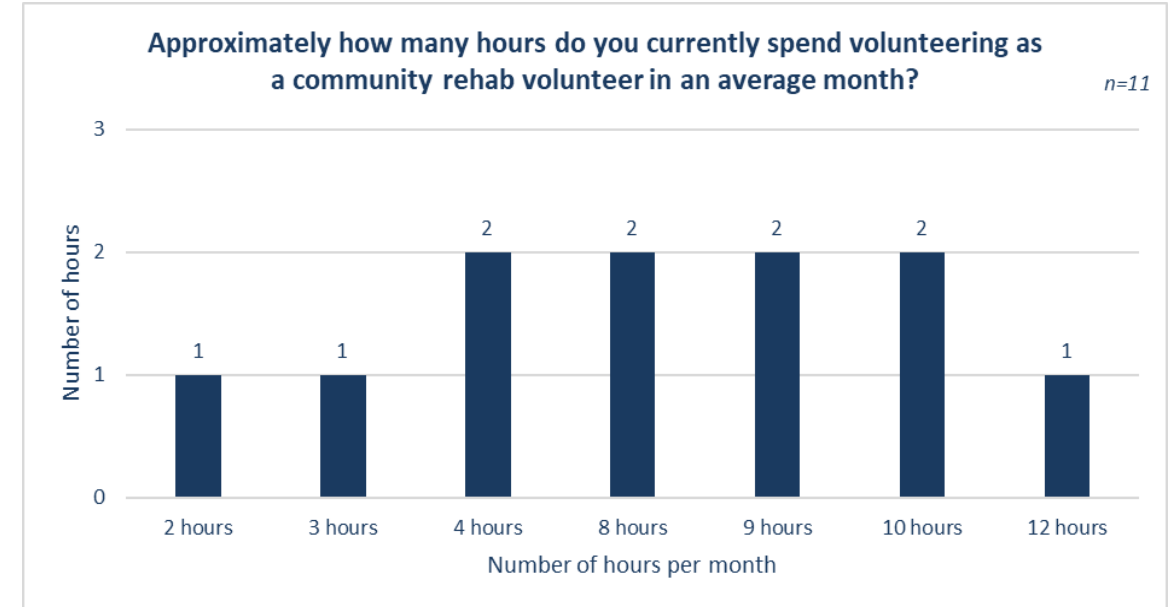
# Insight: Volunteer engagement



11 volunteers completed the feedback survey after their experience in the community rehabilitation volunteer role. They were asked about the duration and frequency of their volunteering...



- The volunteers had varying levels of experience in the community rehabilitation volunteer role, but the majority had been **volunteering for 1-3 and 3-6 months**.



- All volunteers reported they **volunteered at least once a week**.
- They reported different monthly volunteering hours, varying from 2 hours to 12 hours. The average across the group was just over 7 hour per month.

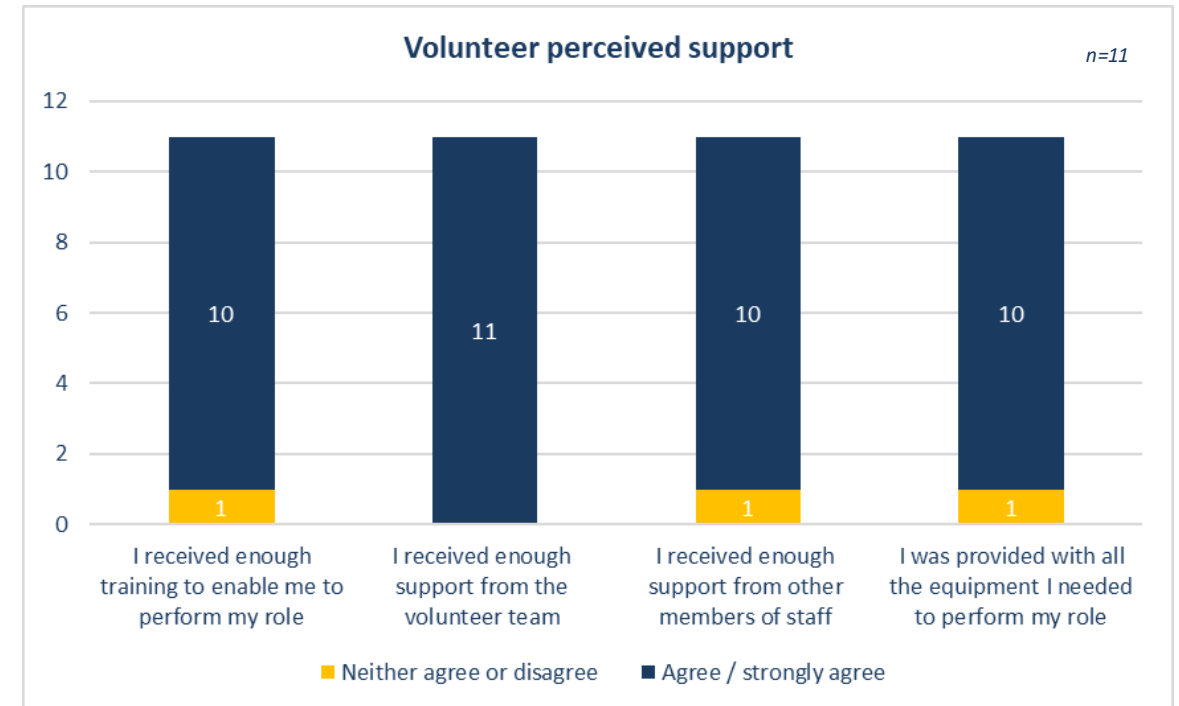


# Insight: Support for volunteers

Volunteers were asked to reflect on how supported and equipped they felt throughout their volunteering experience to deliver their roles.

- All volunteers agreed or strongly agreed that they **received enough support from the volunteer team**.
- 10 of the 11 volunteer respondents agreed or strongly agreed that they:
  - **received enough training,**
  - were **provided with all equipment needed** to enable them to perform their roles, and
  - received enough **support from other members of hospital staff**.

Overall, this highlights that the majority of volunteers felt well supported in performing their roles.

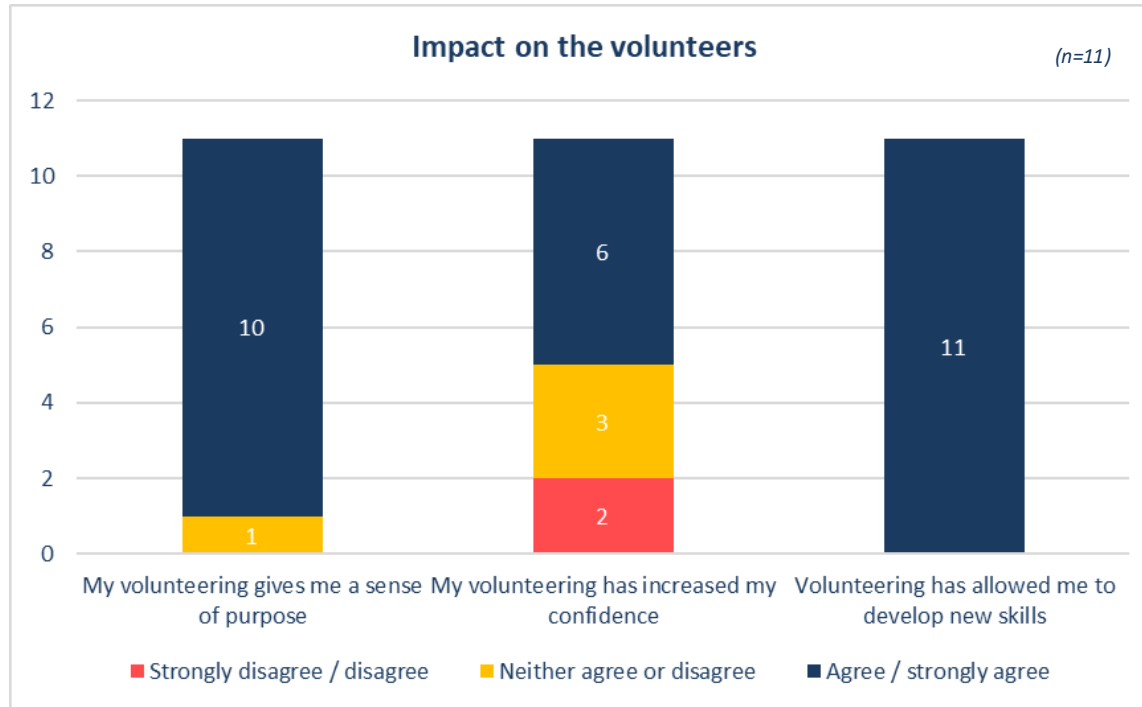




# Impact: Benefits for volunteers



Volunteers were requested to reflect on the difference volunteering has had for them as individuals. Findings indicate that there have been benefits to taking on their role as community rehabilitation volunteers.

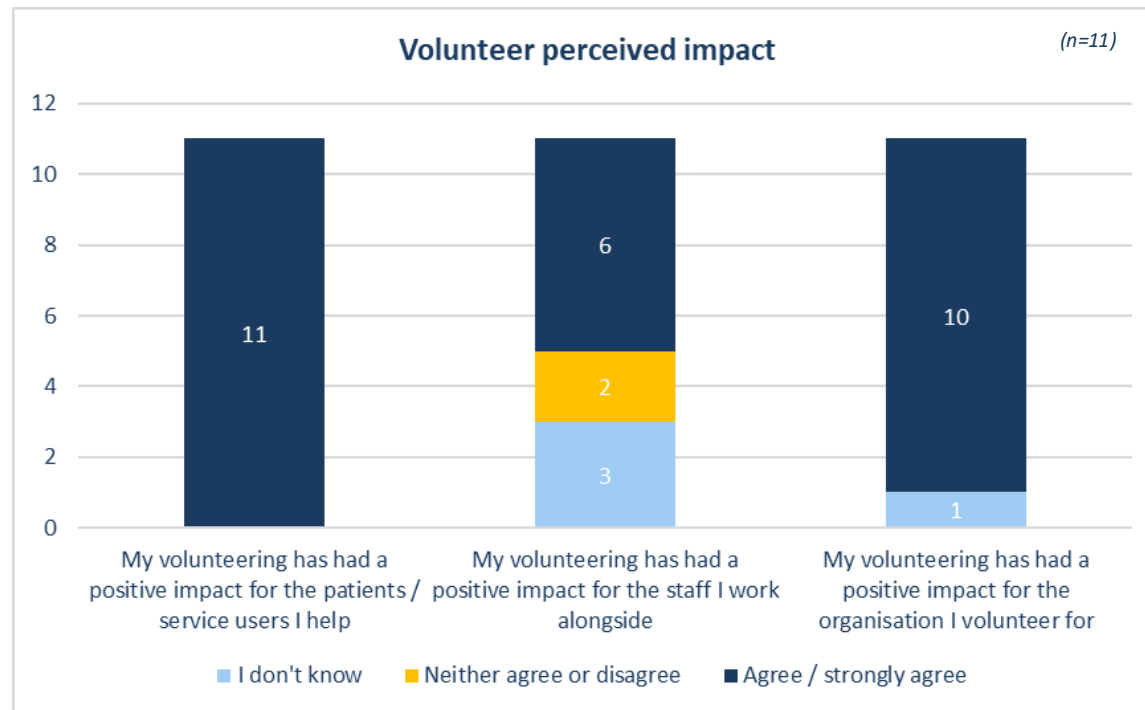


- 10 of 11 respondents agreed or strongly agreed that their **volunteering had given them a sense of purpose**. One volunteer reported being neutral, however, did not provide any further information as to why they felt this way.
- Six of 11 volunteer respondents agreed or strongly agreed that their **volunteering had increased their confidence**, however, three remained neutral while two disagreed. Volunteers who were neutral or disagreed reported satisfaction with their role, so this may not have been an expected or desired outcome from their volunteering.
- All volunteers agreed or strongly agreed that their **volunteering has allowed them to develop new skills**.

# Impact: Volunteers' perceived impact



Volunteers were requested to reflect on the difference they feel their volunteering has had for patients, staff and the organisation they volunteer for. Findings indicate that there have been perceived benefits for others.



- All volunteer respondents agreed or strongly agreed that their **volunteering had a positive impact on patients**.
- Six of 11 volunteer respondents agreed or strongly agreed that their **volunteering had a positive impact on the staff they work alongside**, however, three remained neutral while two disagreed. Individuals who disagreed or remained neutral with the statement did not provide further context.
- This may be linked to the staff survey responses, which suggest that volunteers may not be working closely with the staff. The lack of close interaction might explain why some volunteers did not perceive their impact on staff as positive or remained neutral.
- 10 of 11 volunteers agreed or strongly agreed that their **volunteering had a positive impact on the organisation they volunteer for**.

In reflecting upon the impact they had, volunteers stated...



*"One client said she loved my visits :)."*

Volunteer



*"Last week a client told me that she really looked forward to my visits and she enjoyed them very much."*

Volunteer

# Impact: Volunteer satisfaction



Finally, volunteers provided feedback on their overall satisfaction with their volunteering experience.

- All volunteer respondents were **satisfied or very satisfied with their volunteering experience** and reported that the community rehabilitation volunteer role **has either met or exceeded their expectations**.
- The retention of volunteers was high, with **16 of the 20 recruited volunteers remaining active**. Those who stopped volunteering reported securing full-time roles in the NHS, beginning their degrees, or leaving due to personal circumstances.

Overall, this suggests positive experiences for volunteers in their community rehabilitation role.

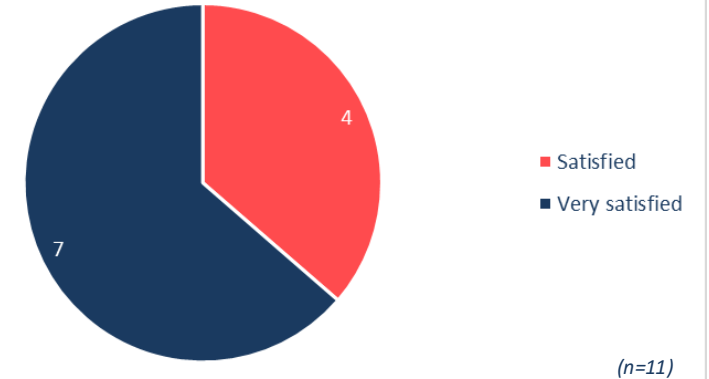
One volunteer provided additional feedback....



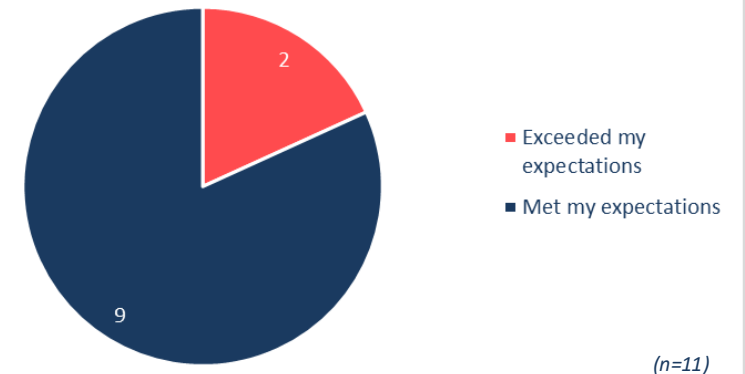
*"Thank you so much for everything. Meeting new people, helping them and helping them regain their health makes me very happy, and I observe this situation every week as my patient gets better."*

Volunteer

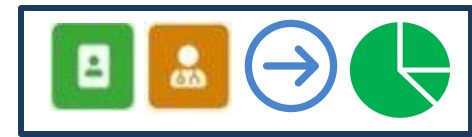
Please rate your overall satisfaction with your falls prevention volunteer role



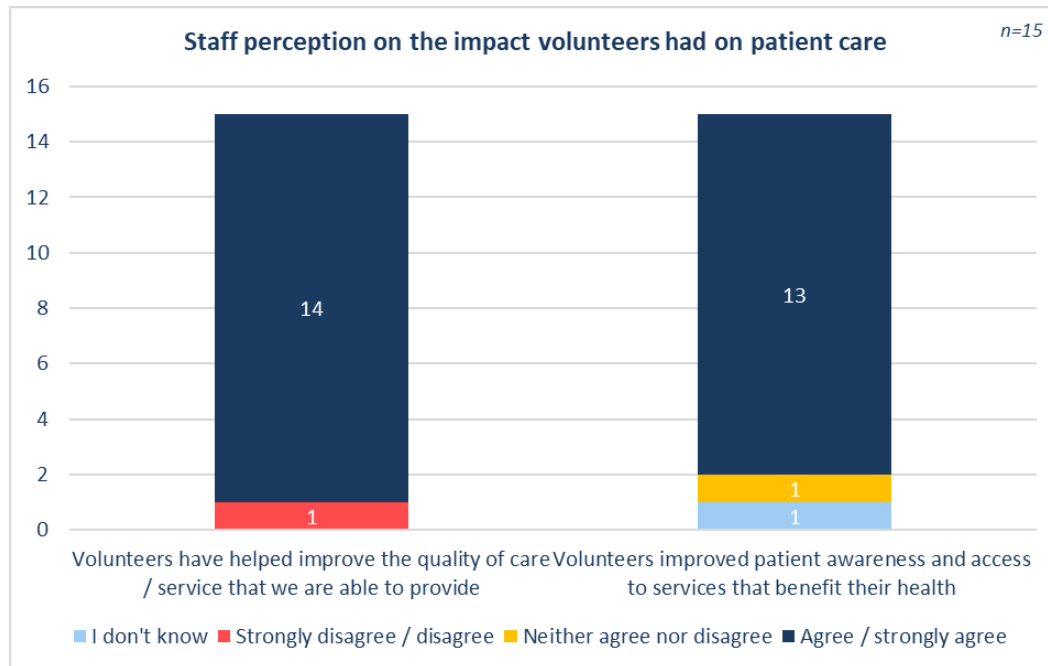
To what extent has your community rehab volunteer role met your expectations?



# Impact: Staff perceptions of volunteer impact on patient care



Staff members were asked to share feedback on the impact volunteers have on patient care. Overall, the feedback indicates some positive staff perceptions of volunteers.



The majority of staff surveyed reported that they work with volunteers regularly.<sup>8</sup>

Of the 15 staff members who participated in the survey...

- 14 agreed or strongly agreed volunteers **helped to improve the quality of care / service they were able to provide.**
- 13 staff members agreed or strongly agreed volunteers **improve patient awareness and access to services that benefit their health.**
- One staff member strongly disagreed that volunteers helped improve the quality of care and service, and two staff members remained neutral or unsure about whether volunteers improve patient awareness and access to services that benefit their health. However, none of these staff members provided additional context.

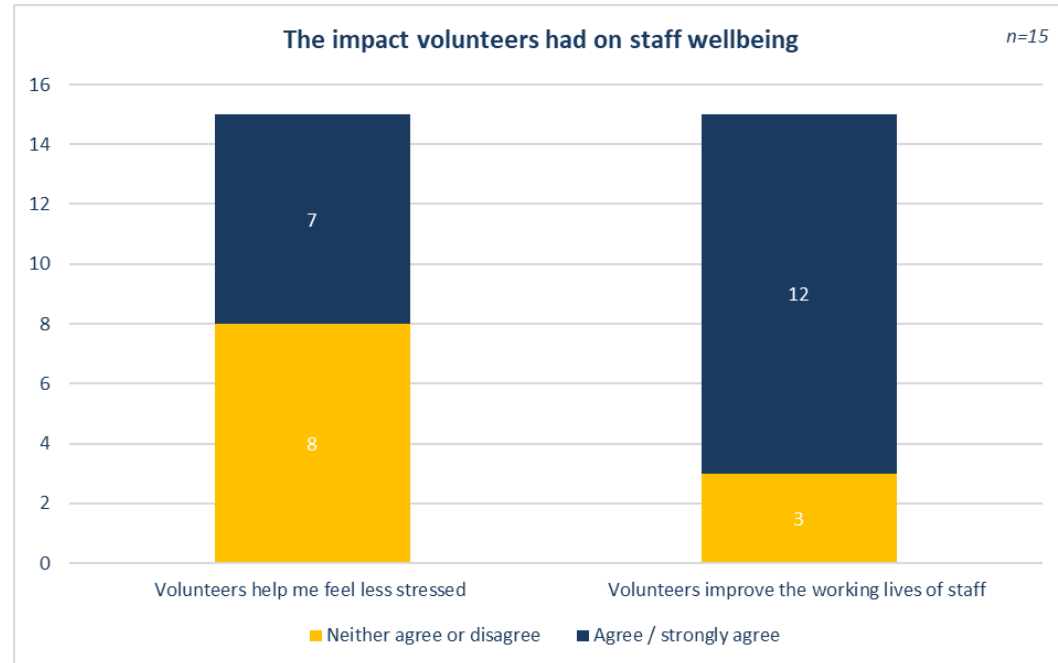
This feedback overall highlights that staff feel volunteers positively impact patient care.

<sup>8</sup> Of 15 staff respondents, 6 reported they work with volunteers regularly (at least once every other week), 4 reported they work with volunteers occasionally (less than once a month), 3 reported they refer into the service and 2 reported they work with volunteers routinely (on most shifts).

# Impact: Benefits for staff



Staff members were asked to reflect on their experience of working alongside volunteers. Overall, the feedback indicates some positive staff perceptions of volunteers.



Of the 15 staff members who participated in the survey...

- 7 agreed or strongly agreed volunteer support **helps them feel less stressed**.
- 12 staff members agreed or strongly agreed volunteers **improve the working life of staff**.
- However, eight respondents remained neutral about volunteer support helping them to feel less stressed, and three remained neutral about volunteers improving the working life of staff. These individuals did not provide additional context.
- It is important to note that not all survey participants worked directly with volunteers, as some only referred to the service. This could affect the accuracy of the responses, as they may not have sufficient experience to provide fully informed feedback on these statements.

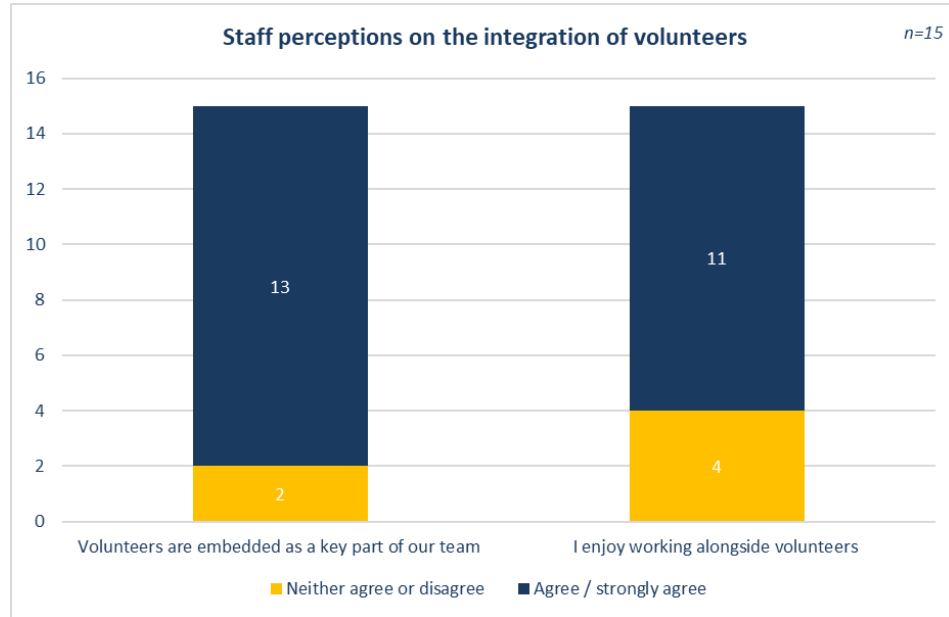
This feedback overall highlights that volunteers positively impact the working lives of certain staff members.



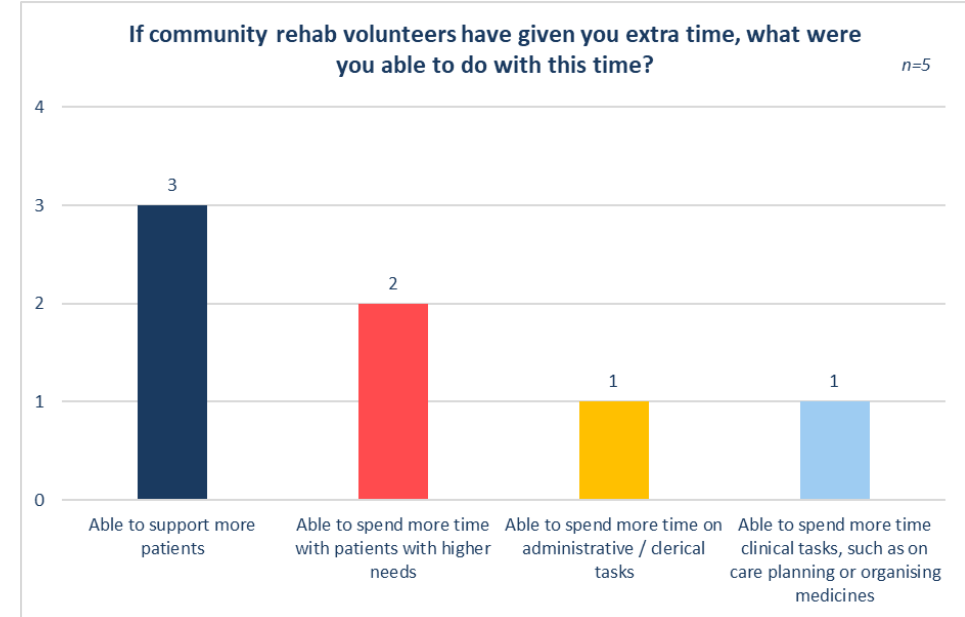
# Impact: Integration and staff productivity



Staff members were asked to reflect on their experience of working alongside volunteers, including how well they were integrated into their teams and their perception of any impact volunteers had on their productivity.



- Of the 15 staff respondents, 13 stated they felt that volunteers were **embedded as a key part of their team** and 11 **enjoyed working with volunteers**.
- Staff members who reported feeling neutral about the statements previously shared that they did not work closely with community rehabilitation volunteers. Staff who did work with the volunteers but still felt neutral provided additional context and commented positively on the programme.



- 5 of 15 staff members felt **volunteer support had freed up some time for them**.
- The remaining 10 staff reported that volunteers had no impact on their time, and none reported that volunteers generated extra work for them.
- These individuals were further asked what they were able to do with this additional time, with the majority reporting they were **able to support more patients**.

# Impact: Staff satisfaction



Staff members were asked to rate their overall satisfaction with the volunteer support they had received. Overall, the feedback indicates positive staff perceptions of volunteers.

Of the 15 staff survey respondents:

- 15 reported having **positive experience with the community rehabilitation volunteers**. Further, 12 of those staff shared that their experience with the volunteers had been more positive than expected.
- All staff respondents were satisfied or very satisfied, suggesting **high levels of satisfaction with the volunteer support** they had received.
- 15 staff reported that they were very **likely to recommend the community rehabilitation volunteers to other colleagues within their organisation**.

Staff members provided additional feedback....



*"Please keep and expand this amazing service, hugely appreciated and hugely important to our deconditioned patients."*

Staff member



*"The service has been fantastic and the residents love having the volunteers and Brooke [the physiotherapist] here each week."*

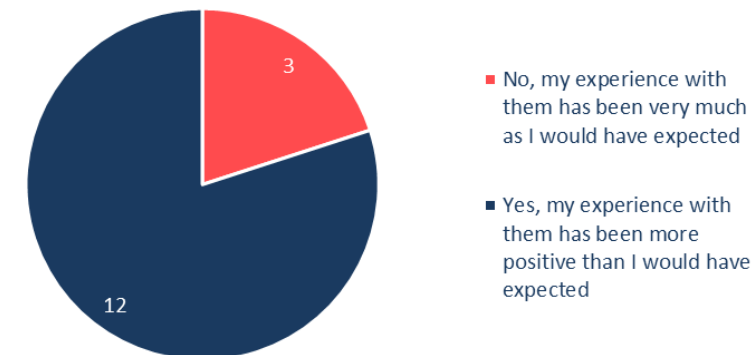
Staff member



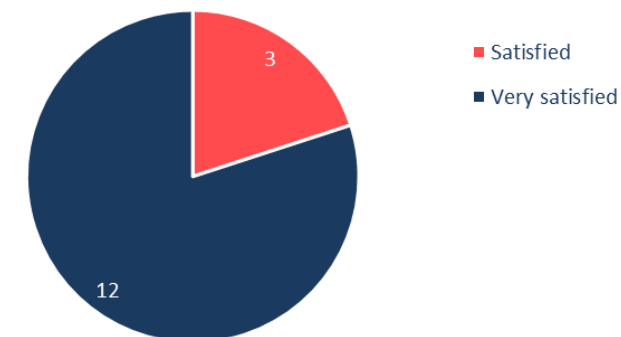
*"Knowing there is a physio who has initial contact and then oversight of the programmes gives us as clinicians confidence in the support they are providing. The communication has been refreshingly proactive flagging up issues outside their remit appropriately but also being able to take action autonomously which is also appreciated. Patients have really benefited from this service."*

Staff member

Have your recent interactions with community rehab volunteers altered your views about the positive or negative impacts that they can have? n=15



Staff satisfaction with the volunteer support they received n=15



# Impact: Staff testimonial



*"This is an excellent project*

*Impact is directly on improvement of patient care*

*Improved outcomes for patient care*

*Less hospital admissions*

*This is an excellent scheme for patient care*

*As a full time GP, I have seen substantial impact changes to patient care with  
reduction to falls risks*

*Improvement in mental health*

*Brooke has shown great leadership skills I highly recommend the project to be  
progressed from pilot to integrated ICB service."*

Dr Barbara Christie - Acorn Group Practice

# Impact: Family member feedback

Family members of the patients also provided feedback on the impact that volunteers and the community rehabilitation programme had on their loved ones.



*"Thanks to Brooke [the physiotherapist] and the volunteers my mother in law is now walking with a frame both inside and outside following a nasty hip break. It has improved her mood massively and it such a relief to know she has regained her independence. I have watched the sessions and now complete the exercises with her every time I am in, we do it together."*

Family member of care home resident



*"I have just been out walking with my mum at the hospital – I can really see an improvement and she is finally beginning to take larger steps, I have been trying to get her to do this for months! Thank you for all your hard work in helping mum."*

Family member of home resident



*"This service has changed the home for the better. Everyone is so happy to see the team come in each week and the residents have such a great time doing it. Because of Brooke [the physiotherapist] and her team my husband has been able to get the correct chair he has needed for so long and completes the class every week where he laughs with us and other residents. I can't thank them enough."*

Family member of care home resident

# Conclusions and recommendations

- The Community Rehabilitation Programme has demonstrated that targeted **exercise programme with skilled volunteers can be effective in improving the functional fitness and health outcomes of individuals who are at risk of falls or deconditioning**, both in care homes and in their own homes.
- Average scores across all functional fitness tests improved, **indicating overall improvements in strength, endurance, mobility and balance**. While not all changes were statistically significant, improvements in average scores are promising amongst the small pilot cohort. Further data collection could be beneficial to fully demonstrate these effect.
- The programme demonstrated the **need for a flexible approach to data collection in care homes**, due to individuals' cognitive abilities in giving consent to complete self-reported measures. Some care home patients were also unable to complete all physical measures, leading to the introduction of another physical measure to ensure consistent data collection across care homes. This adjustment improved suitability of the approach for patients with varying abilities.
- Comparison of physical measures between GP patients and care home patients was not feasible due to the small sample sizes. However, analysis of the combined data, including hand grip strength measurements, indicated that the programme was effective for care home patients. Notably, the improvements in hand grip strength before and after the programme were statistically significant.
- Patients appear to be satisfied with the support that they received from volunteers and the Community Rehabilitation Programme, and **positive impact on patients' emotional wellbeing** was demonstrated. **An increased number of patients reported no feelings of anxiety or depression** after the programme and almost all agreed that **the volunteer cheered them up and helped them to feel less lonely**.
- All volunteers were **satisfied with their community rehabilitation role** and felt it had either met or exceeded their expectation. They also reported **a sense of purpose and skill development** from carrying out their role.
- Finally, volunteers service appeared to make a positive impact on **staff perceptions, with the majority agreeing that volunteers improved patient care and their working lives**. Further, all staff respondents were satisfied or very satisfied, suggesting a positive experience with the volunteer support they had received.



# Conclusions and recommendations

- The investment of £35K by the Kingston Hospital Charity in part funded the recruitment of a qualified Deconditioning Physiotherapist to lead and clinically oversee the quality and impact of the Community Rehabilitation Volunteering Service. **The clinical role has been fundamental to put patient safety first, enabling clinical oversight of programme's design, the confidence and quality of the CRV Role, day to day management of patient case-load and, measurement of patients' physical outcomes as well as overall impact of the programme for patient frailty and prevention of deconditioning.** The programme has been a true partnership between a clinical service and the Volunteering programme to deliver a well-designed and highly impactful new NHS service to meet an evidenced need.
- The Trust was also able to partner with a local university to offer four Physiotherapy student placements. As the future of the NHS Allied Health Professional workforce, **students gained experience of working with frail**, older individuals and supporting data collection and also witnessed how clinically-supported volunteering can support NHS and care home staff in both patients' own homes and care home settings.
- Combined with earlier data from the Falls Prevention Volunteering Service which Helpforce supported and evaluated 2021-2022, the **Kingston Hospital Volunteering Community & Outreach Service has achieved a successful business case for substantive funding from April 2024.** This is a testimony to the rigour of the Insight & Impact methodology as well as the role of robust data to influence NHS decisions and resources.

# Acknowledgements

Helpforce would like to pass on our thanks to Kingston Hospital NHS Foundation Trust, and in particular to Brooke Holden, Deconditioning Physiotherapist, and Laura Greene, Head of Volunteering & Community Partnerships. We also share our appreciation to the patients, family/carers, staff and volunteers who participated in providing their feedback.

Additionally, Helpforce and Kingston Hospital NHS Foundation Trust would like to pass on their thanks to Kingston Hospital Charity for granting the funding through the Inspiration Fund to allow launch and implementation of this pilot.

# help*force*

## Thank you

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