

Upskilling a workforce to deliver Acceptance and Commitment Therapy to stroke survivors: a qualitative study

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Background & Aims

There is limited access to clinical psychologists to meet the mental health needs of stroke survivors

The Wellbeing After Stroke feasibility study (WATERs) (<https://bit.ly/2WZwl1g>):

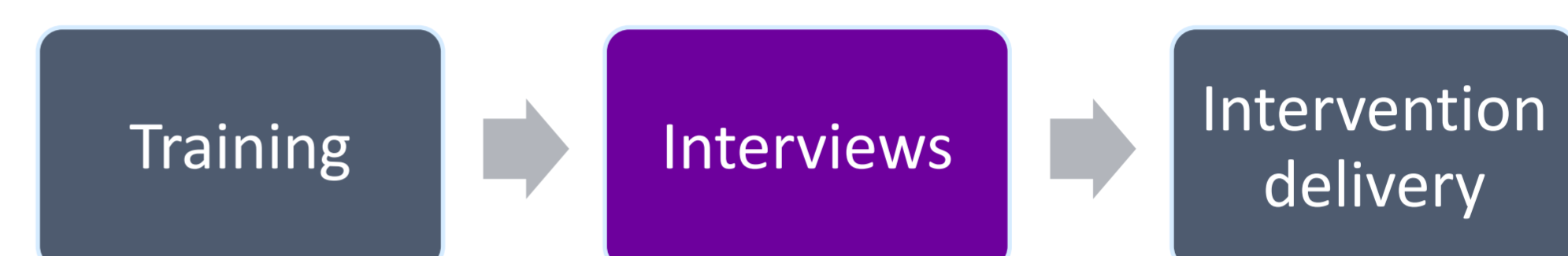
- co-developed and feasibility tested an ACT intervention delivered remotely to groups of stroke survivors
- trained practitioners (non-Clinical Psychologists) to deliver the intervention

In order to maximise future implementation potential, we explored practitioner views on:

- 1) the acceptability of the WATERs training
- 2) the extent it prepared them for delivery
- 3) perceptions of likely acceptability to stroke survivors

Methods

- Qualitative one-to-one interview study
- Participants were consenting practitioners from WATERs in one of two roles:
 - Lead (trained counsellors, experienced in stroke)
 - Support (experience in running stroke groups)
- Interviews took place after training and prior to intervention delivery



- Semi-structured interviews, guided by the Theoretical Framework of Acceptability (TFA)^[1]
- Data thematically analysed using template analysis^[2]

Results

- All trained WATERs practitioners (n=8) recruited. 5 lead and 3 support practitioners
- All white British females; mean age: 53; mean years of working with Stroke association: 6
- Interviews completed July 2021; mean length: 54 mins
- Five themes generated

1) Motivation: emotional support is important and lacking for stroke survivors

- Practitioners highly motivated to deliver the therapy

“People that we work with really struggle with their mental health and adjustment [...] and there’s a huge [...] gap out there” [ID08 Support].

2) Experiencing ACT is impactful

Practitioners experienced ACT during training, leading to:

- perceived benefits in their own well-being
- increased preparedness to deliver the intervention

“The [...] exercises we did [...] really enable us to empathise and to mirror what the stroke survivors is going to be experiencing.” [ID05 Lead]

3) Best-fit: accessibility and structure

- The training was understandable
- Practitioners perceived the intervention as acceptable for many stroke survivors
- Stroke-specific adaptations viewed positively



4) Influence of previous experience and the need to clarify expectations

- Previous experience increased understanding and confidence to deliver emotionally challenging content.
- Additional time required to prepare for delivery
- Support practitioners role required further clarification



5) Group relationships are important and challenging

- Group context predicted to be beneficial and supportive for stroke survivors, but with potential for difficult dynamics
- Remote management of group dynamics and contributions seen as biggest challenge for delivery



Conclusions & future research

- It is feasible and acceptable to upskill a workforce to deliver a protocolised ACT-informed intervention to stroke survivors
- WATERs improvements identified: clarifying roles and risk management procedures; protecting additional time for preparation
- Further research is underway to further explore acceptability of WATERs, by investigating practitioner and stroke survivor views post-intervention
- Future research should investigate who this support is suitable for, and be co-developed with under-served populations

^[1] Sekhon, M., Cartwright, M., & Francis, J. J. (2017). <https://doi.org/10.1186/s12913-017-2031-8>

^[2] Brooks, J., McCluskey, S., Turley, E., & King, N. (2015). <https://doi.org/10.1080/14780887.2014.955224>