

**Companion Walk Pilot**  
**Case Study - Client A**  
**22 November 2020**

*“Helped a great deal, you don’t know how much”*

*“Would have previously made an excuse not to come. Now I want some sort of life to get out and about”*

*Client A – October 2021*

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## 1. Document overview and summary of conclusion

This is an interim case study for one of our Clients on the Branton Companion Walks. This case study will provide interim feedback to Branton Caen Rotary, Live Well in Branton and the Natures Tonic Project on what has worked well and what could work better in the pilot. This case study will also feed into the final project evaluation.

Client A has given Live Well permission to use the information as part of the trial evaluation.

For Client A this pilot was a success. He saw improvements in both his physical and mental health, with onward referrals which will support him over a longer period.

Key to the success of the pilot for this Client was the companionship and the safe, non-judgemental space. Throughout the period of the trial, the client got more confident, resting less and having the confidence to meet the volunteer in Branton rather than walking from his home, quickly starting to walk into Branton and get bits of shopping or go to the Dr's on his own.

Recommendations would be to increase the number of the weeks offered to the client from 6 to 8 and to explore the potential for Health Connectors or Community Connectors at the Medical practice to become the companion walkers: as a way of working holistically with the client to build scaffolding to support clients with their mental and physical health over the longer-term.

## 2. Background to project

As part of the AONB Natures Tonic project, Live Well in Branton is running a pilot scheme with Branton Caen Rotary and the local Social Prescriber to support people leaving their house for a gentle walk or on their first trip to the shops, following a period of isolation.

Our aim is to start clients/walkers on a journey to happier more active lives in nature, which we hope will positively impact their physical and mental health.

The Companion walk involves a person being referred into the scheme via the medical centre Social Prescriber. The client will be matched to a volunteer, who will accompany the client on a series of walks, up to a maximum of 6. If the walker is able, it is hoped the walker will be accompanied on one final additional walk with Walking for Health or accompanied to another activity group, the hope is they can carry on an activity in nature with a group of people or be connected to something that is meaningful for them.

The Live Well Community Connector will work with each client, to collect baseline data, look at what each client hopes to gain from the pilot and to review this and make recommendations. Where the client gives permission the Live Well Community Connector will also complete a case study, as in this case.

Depending on the outcome of the pilot it is hoped the Live Well community connector will be able to make robust recommendations and if appropriate, look to roll out Companion walks in the community during the first 6 months of 2022.

Based on our experience working with people in the community, we think people having a pathway to another group or activity will be key to the long-term benefit for the client following the companion walk, but we do not have this data yet and will have to follow up with clients after 6 months to start

to understand the long-term impact of the Companion walks and the outcome of any on-ward referrals.

Although the pilot has not been done in conjunction with Active Devon, we have based our outcome measures around their CAN project evaluation scores (Connecting Actively to Nature), the hope is we will be able to show the performance of the project against their criteria so we can share our learnings with them and that could be a possible avenue for funding applications in the future.

### 3. Summary of Client

Our client struggles with depression and anxiety and recently tried to commit suicide. Extreme isolation as a result of COVID was a large contributing factor to the deterioration in our clients mental health.

Following discharge from hospital, our client was referred to Social Prescriber at Caen Medical Centre. He was subsequently referred to Christians Against Poverty, Talkworks and the Companion walk pilot.

### 4. Summary of Results

Comparing the baseline data and final assessment data it is clear there was an overall improvement in the client's mental well-being, his level of physical activity and the amount of time he spent in nature.

**Mental wellbeing improved,** Client A feeling useful and relaxed often, , and by the ender of the pilot dealing with problems well, thinking clearly and being able to make his own mind about all things

The client did move one down the scale for feeling close to other people, but when we talked around this statement this could have been influenced by reduced family connection over ½ term and not having had a companion walk over ½ term.

**Level of Physical Activity drastically improved:** Client went from having done no walking for over 24 months and not being able to walk of outside his house by himself, to walking into the village on 7 occasions in a single week.

**Relationship to the natural environment scores remained similar:** Although most of the scores remained the same the Client went from spending no time in nature to over 5 days in the past week. At the end of the trial the client did seem to find more beauty in nature but there was a small reduction in where the client had scored "spending time in nature is very important to me" but he still agreed it was important to them.

In the qualitative interview with the client he explained before he had met the Social Prescriber and had been put in touch with Christians against poverty, he had thought there was only "black and white", now he realises there are shades in between and there is help out there.

The client feels the Companion had a noticeable positive impact on his physical and mental health. He explained, it has helped his depression because he is out and about and able to see and do other things and he find his mobility has improved.

Against the original goal he set himself, the client feels he achieved it, although he still feels giddy when we go for walks, he doesn't need as long to recuperate.

The walks have improved his motivation, so he now might want to do a few of the more mundane tasks done at home and will continue till he has finished them and he recognises it makes him feel better, prior to the trial he couldn't have done them because of the depressions.

When asked what part of the companion walk had the most benefit, Client A said

**“Companionship, contact with people”**

**“You know you can talk about anything and do anything; you feel safe”**

During the walk he also found he met people he knew prior to when he was ill and they all stopped to talk and ask after him, Client A said he now realised:

“People genuinely care what happens!”

The walk also gave the Volunteer and the client the opportunity to discuss other things the client was struggling with and lead to an onward referral to the Royal Airforce Association (RAFA).

## 5. Conclusion

It is clear for Client A this was a success, with improvements in both his physical and mental health, with the client now able to leave the house by themselves and have motivation and drive to start to do other things to support themselves. Key to its success was the companionship and the volunteer being able to create a safe, non-judgemental space.

There were also some really positive on-ward referrals from the walk, for example to RAFA who will support the client with some other areas they are struggling with. These further connections came from the conversation and trust in the relationship with the Volunteer being able to make suggestions and the client being able to listen to them.

Recommendations from this Case Study would be that this model could benefit other patients, but it is important that the volunteer has some knowledge of what groups and organisations the client could be connected to going forwards and then the Client can start to build some self-sustaining scaffolding for their mental and physical health over the long-term.

Finally, looking forwards I think there were opportunities on the walks to talk to the client about diet and look at other well-being measures in a non-explicit, non-threatening manner, supporting the Client to manage some of his long-term health conditions. However, this could not be picked up by a volunteer and would need someone with training in the appropriate areas. I would recommend if the Health Practice was to develop further resource in the form of health coaches or community connectors, Companion walks could be a tool they use to support patients whilst getting them more physically active, out in nature and building their confidence and self-esteem to join other activities.

## 6. Appendix A - Raw Data

### Why was he referred to Companion Walks?

Client needed support with short walks in order to help him regain his confidence and physical stamina. He needs this to become more independent, after a long period of being housebound, which it was hoped would also benefit his physical and mental health. It was also thought he would benefit some contact with people outside his family.

### What does the referrer hope the outcome of this referral will be for their client what change do they expect to see?

An increase in physical stamina, in independence – i.e., will be able to walk to the shops by himself, and consequently an improvement in his mental health.

### What does the client hope to get from this trial?

“Want to be able to walk with help to Cawthornes, without being washed out, giddy and disorientated”

Baseline data was collected by the Live Well Community Connector at the beginning of the trial, and this was reviewed at the end of the trial with Client A. A number of additional questions were also asked at the end of the trial to assess how the client had found the experience and to identify any outcomes both positive and negative.

### Relationship to the natural environment

Relationship to the natural environment			
Statement (scale: 1 strongly disagree – 7 strongly agree, unless word score)	Baseline data	Post companion walk	Movement
I always find Beauty in nature	5	7	
I always treat nature with respect	7	7	
Being in nature makes me very happy	7	7	
Spending time in nature is very important to me	6	5	
I fine being in nature really amazing	6	6	
I feel part of nature	5	5	
In the past 7 days, on how many days did you spend outside time in nature (this may be gardening, a short walk, a car trip to the beach)?	No time in nature	5 days in the past week	



If the answer as 'No time in nature', when was the last time you did a walk lasting at least ten minutes?	Over 24 months	n/a	n/a
<b>Level of Physical Activity</b>			
In the last 7 days, on how many occasions did you do a Walk lasting at least 10 mins?	No Walking	7 days in the last week	↑
If the answer was 'no walking', when was the last time you did a walk lasting at least 10 minutes?	Over 24 months	n/a	n/a
Was the effort you put into walking usually enough to raise your breathing rate?	Yes	Yes	→
In the past 7 days, on how many days did you do sport, fitness activity or dance?	No sport/fitness	No sport/fitness	→
<b>Mental Wellbeing</b>			
I've been feeling optimistic about the future	Often	Often	→
I've been feeling useful	Some of the time	Often	↑
I've been feeling relaxed	Rarely	Some of the time	↑
I've been dealing with problems well	Rarely	Often	↑
I've been thinking clearly*	Some of the time	All of the time	↑
I've been feeling close to other people	Often	Some of the time	↓
I've been able to make up my own mind about things	Often	All of the time	↑
<b>Individual Development</b>			
To what extent do you agree with the statement 'I can achieve most of the goals I set myself'	5	6	↑

\* "not black and whiter, shades in-between. Made me realise there is help out there"

**Has this activity had any noticeable impact on your disability or illness identified in the base line data and what is this impact?**

Statement	1	2	3	4	5	6	7
	Strongly disagree						Strongly agree

Companion walk has had a noticeable impact on my illness or disability?						Yes	
I have achieved the target I set myself at the beginning of this project?						Yes*	

\* Yes, although I still get giddy, but I don't need as long to recuperate.

**Qualitative feedback**

**What impact has the companion walk had on your day-to-day activities?**

Has a walk and then a rest.

Might clean a bit of the kitchen, move things around. Might do a few mundane tasks that make a difference. I do it till I finish, and it makes me feel better....Couldn't do it before because of the depression”?

**How has the walk affected your long-term disabilities?**

“Helps depression because I am out and about and there are other things to do and see”

“Mobility is better that what it was”

**What do you feel went well in the Companion Walk pilot/ which part of it do you feel had the most benefit?**

“Companionship, contact with people”

“Met people that I knew before, realised people genuinely care what happens”

**What would you change about the pilot?**

“It is early days, keeping it simple. You know you can talk about anything and do anything; you feel safe. 8 weeks would be better.”

What are the next steps for you following the pilot?

“Tomorrow, is the beginning of something new. Not freaking out about going to Cawthornes on my own.”

**Have you been able to access any other opportunities as a result of this pilot?**

- Contact with the RAF

**Are there any other comments you would like to make?**

“Helped a great deal, you don't know how much” “Would have previously made and excuse not to come. Now I want some sort of life to get out and about”

**Any onward referrals from Companion Walk?**

Client was given details about RAFA (Royal Air Force Association) and he contacted them directly to for support in getting some specialist home help that will hopefully be funded by RABF (Royal Airforce Benevolent fund).

Live Well Volunteer Co-ordinator was able to support client in getting relevant quote in regards to specialist support.

Client has had a re-referral to Companion walks for another 6 weeks walking with a different volunteer. The client will also be referred back to the Social Prescriber to link to other Social groups the clients should now be able to link to.

End.