

Setting Up and Running a Health-based Knitting Group

When we were first thinking of starting a health-based knitting group we thought it would be better for patients to meet away from the hospital environment. We thought it would be beneficial for them to enjoy their knitting in more relaxing, leisurely surroundings – to take them away from the ‘sick room’. However, it soon became apparent that many patients with long-term medical conditions needed the ‘safety’ of a medical environment in order to be able to ‘trust’ us and the group. Their social confidence was low and they didn’t have the courage to attend a group outside this familiar space.

Setting up knitting groups in a range of venues has numerous benefits; we can cater for all levels of disability and social confidence and a range of physical and mental health issues which may not be easy to manage in a more conventional leisure setting.

In addition, a group attached to a hospital unit or GP surgery soon becomes an integral part of that unit. Doctors will more readily refer patients and you can develop a good relationship with the doctors, nurses and patients. This enables the patient to maintain contact with the medical professionals without taking up clinician time. It also enables the clinicians to monitor, support and motivate their patients in the longer term at little to no extra cost. Since these issues are a source of huge stress for clinicians working in a system which does little to cater for those with long-term chronic conditions it is of enormous benefit to them to find a means of long-term monitoring, motivation and support at low cost.

Health-based groups, however, require a lot more formality and planning for various reasons. Let’s take a look...

The Group Leaders

We’d recommend having two leaders, certainly until the group is well established. It’s best if one of these is a healthcare professional or someone with counselling skills, but the other can be a knitter with an interest in running a health-based group. It’s not vital for the healthcare professional to be a knitter initially. In fact, learning with the group can help to build group cohesion. This professional is needed to deal with issues which may arise from patients’ questions on medical matters, and to listen to and counsel conversations which can get intimate very quickly. They can also provide vital feedback to other medical staff and treatments may be changed as a result of what is learnt at the group simply because the group provides an opportunity to hear the patient’s real story – what is really going on in the patient’s life. It could be a perfect role for a retired healthcare professional or for one who is at home with children at school and wants to maintain contact with the medical world.

The group needs to operate with minimal to no disruption to the medical unit it is attached to, whether it is a hospital or GP based group. The second leader can step in to run the group when the leader is away.

As we mentioned in the Core Pack, conversations become intimate quickly and as a result emotions may bubble to the surface. Having two leaders present means you can deal with these more efficiently and, if necessary, the healthcare professional can take an individual to one side and counsel them privately while the rest of the group get on with knitting. You may also find that one or two people demand more of your time, particularly if they have mental health issues. Add a new learner to the mix and you'll have more than you can manage successfully on your own!

Star Tip – If you're not medically trained don't be tempted to give medical advice!

Volunteer or Honorary

If you're not already employed in the health service, we would strongly recommend that you ask about an honorary contract with the hospital. If you're thinking of starting a group at a GP surgery, talk to the Practice Manager about the best option. To get an honorary contract set up you will need to go through the same process as if you were being employed. This involves a police or Criminal Records (CRB) check, a visit to Occupational Health and a review of your immunisation status which will be highly beneficial to you. It also means you will be covered by insurance whilst on the premises and might get the benefit of reduced parking fees.

When the value of knitting groups for wellbeing is fully recognised we're hoping it will be possible for group leaders to negotiate funding for their time and running of the group. Having an honorary contract already in place will make the shift to employment much easier.

Star Tip – Having an honorary contract will protect your health through up to date immunisation and protect you legally.

Criminal Records Bureau (CRB) checks

These are necessary if you're running a group in a healthcare, care home or school settings. They cost money, but the organisation you'll be running the group for should cover these costs for you. The check itself involves filling out a fairly simple form which seeks to confirm your identity and asks about previous criminal convictions.

The Venue

The Venue – basics

Our Core Pack covers the basics to look for in a venue. Many GP surgeries and hospitals will have a room to spare and being already in a healthcare environment, access, heating and lighting issues should already have been dealt with. Nevertheless you should always be vigilant of potential dangers to vulnerable group members. The room needs to have adequate ventilation as hospitals are notoriously warm. You also need access to tea making facilities as sharing a good cuppa is an essential part of the group! (see refreshments below). When the group is running, close the door, so conversations remain confidential. It also means the chatter and laughter which ensues doesn't disturb the running of the clinic!

Star Tip – Remember, shut any open windows when you leave and clear materials safely away.

Health and Safety

Health and Safety is more of an issue when running a health-based group as generally people are more vulnerable and more likely to fall over a stray ball of wool! So ensure materials are kept in boxes, needles are stashed away safely, hand bags and other bags are stowed underneath chairs, trailing cables are secured or removed and hot tea isn't perched precariously on the arms of chairs! It's just common sense but something to be aware of.

Be aware also of patients stooping to rummage through bags and boxes of yarn as the 'head down' position can sometimes result in dizziness and a stumble. Place materials on tables for ease of use.

Car Parking

Most hospitals charge for parking these days, so be aware that you will have to pay to park your car, as will group participants. Negotiating an honorary contract may reduce your parking costs. Ideally, ask staff if they have storage for materials, magazines, books and finished items as this will mean less to carry and perhaps make it possible to travel by bus. Disabled parking may be offered free, so make sure group members are aware of this.

Transport

Getting people to the group is a problem with a hospital-based group. The people attending tend to be less mobile and more likely to be living on low incomes. The hospital is highly unlikely to sanction paying transport costs and in any case hospital transport can be soul destroyingly slow – it might take all day to attend a two hour group. We made a decision with our first group (at a Pain Clinic) that 'getting to the group' was part of the intervention – part of what would need to be done in 'normal' life. Social knitting groups expect you to make your own way there and no-one would expect to have transport provided. However, this does sometimes leave us with a problem – what do we do with the disabled who cannot make their own way and have no money or relatives to bring them? Our ultimate solution is to take knitting groups closer to home, so that getting there isn't such an issue. Meanwhile, if they're attending the clinic for other treatments we schedule them in around the knitting group, so that hospital transport can be used legitimately. This isn't an ideal solution but is a means of getting them started whilst more groups are set up. Two of our patients have already started their own groups in their home towns.

Refreshments

Talk to the clinic about provisions for making a cuppa and whether they'd be willing for you to use their supplies. Some will be happy for you to do so, others may ask for a small

contribution or, of course, your group can club together to buy a box of tea bags and a jar of coffee! Depending on where the tea is made, you could arrange a rota of tea makers, however in a clinical setting this may not be possible and it may need to be you who makes the tea. As a health-based group we don't normally offer biscuits as many of our members need to lose weight for health reasons and we have a high proportion of diabetics. We do however, have the occasional treat when it's someone's birthday. On these occasions we would advise having a diabetic alternative available, but we leave the decision whether to eat these to the individual as part of their self-management approach. However, it is something we keep an eye on!

As we mention later, our group has a stand at the hospital fete and makes a small donation (around £50) to the Pain Unit as a thank you for letting us have free space and tea / coffee.

Star Tip – If you hold a sale of knitted items, it's a good idea to offer the clinic housing your group a small donation to say thank you.

The Materials

You'll need a bigger supply of yarn and needles than you would if you were setting up a social knitting group. In our experience many patients turn up without any yarn or needles and sometimes not knowing why they've come along at all! This is all part of their psychological condition – they will have made great effort to BE at the group, but not thought things through further than that. So it's a good idea to have a selection of DK yarn in bright colours with 4mm needles in metal and wood (see Troubleshooting – Knitting in the Core Pack).

Magazines and books are a good way to draw in those who are more withdrawn and you may find all they do is browse these during the first visit – but they will be listening and taking in the group goings on! Having a few small cross stitching kits is a good idea too. We've found that the more vulnerable patients aren't yet ready to knit so we use cross stitching (which is 'safer' and more structured) as a bridge into knitting.

The Materials – where to find

As a health-based group, you may find it easier to obtain donations from charity shops, yarn companies and shops, so it's worth asking. Car boot sales are another great source of cheap yarn! Our patients are all on low budgets so mainly knit in soft acrylic. Using acrylic also has the advantage of enabling us to send knitted items to our hospital Neonatal Intensive Care Unit (NICU) where wool items are unacceptable due to washing requirements and potential allergies to wool and hand-dyed products. Putting a poster in the waiting room to ask for donations can yield a constant dribble of supplies. You could also try your local Freecycle network, simply type Freecycle into Google to find a network nearby.

For therapeutic knitting the texture of the yarn is vitally important, so don't choose one which is hard or 'nylony' to touch. Fortunately price isn't a guide to yarn which is pleasant to touch or

visually stimulating. There are plenty of cheaper yarns which are soft and have great colours. Self-patterning yarns always attract a lot of positive comment. By no means discount acrylic as it's often the only material a person on benefits can afford and there are plenty of great examples around.

Star Tip – Car boot sales are a great source of yarn and needles!

The Materials – storage

Finding safe storage is important as you don't want to be lugging heavy materials to your group every week. You'll also find the group becomes prolific in their output of knitted items.

It's advantageous to have somewhere to store materials so that if you are unable to attend the group your deputy can run the group efficiently and if necessary, one of the patients can take responsibility for helping out too. We use large plastic, boxes to store our yarn. They stack safely and for health and safety reasons are more robust in a clinical environment.

Star Tip – Ask about having somewhere to store your materials which will mean you can travel by bus and avoid the parking charges operational in hospital car parks!

Other materials to consider

If it's possible, have a laptop available. You'll need to discuss obtaining internet access with the clinic manager. It can enable you to show group participants the large amount of free patterns available online, 'how to' videos on YouTube and, of course, the Stitchlinks website and forums. Your group members can use these forums to talk to each other free of charge between group times and, crucially, talk to others across the world who may have similar problems. This all helps to 'open out' their world which may have become restricted and confined to a narrow window focussed on their personal problems. We have found that becoming part of an online group helps participants to improve their social confidence and encourages them to develop other skills such as learning to post comments, taking photographs of knitted items and learning to post these. These photos attract praise from around the world which adds to their growing social confidence and self esteem. As Group Leader you can help to develop these additional skills by showing your members the basics of getting onto forums, starting new topics and making comments.

The Meetings

We would recommend holding meetings every week. This avoids confusion about when meetings are held. Patients coming to these groups require as much 'safety' and 'certainty' as you can give them, so if your group is held on the third Monday of every month the uncertainty of whether you'll be there or not, because they can't quite remember when they last attended, is likely to put those with low social confidence off making the effort to come along.

You might like to discuss whether the group would prefer to wear name badges. Our patients wanted this for the initial six months or so – everyone was new and it prevented those embarrassing situations when a name was forgotten. However, they now know each other so well – and often meet up during the week outside the group – that they no longer wear their badges. It then becomes our job as Group Leaders to ensure that all new patients are introduced properly and integrated into the group.

Housekeeping – Ensure everyone knows where to find the toilet and fire escape. This is more important in this type of group particularly if individuals require assistance.

Timing

Timing will depend entirely on when you can find a room available, but if you're given a choice we would recommend running your group between 2pm and 3.30pm. In our experience people will begin arriving early – some of our members arrive around 1.15pm so you'll need to make provisions for somewhere for them to wait if the room's not available. GP surgeries are slightly less busy in the afternoons and are more likely to have a room available. We generally advise those coming by car to arrive around 1.30pm which enables them to find parking before hospital visiting times begin. This period of time can give you valuable time to discuss any problems or ideas with individuals attending too. Finishing at 3.30pm enables members to travel home before the rush hour. Patients can come and go as they please within this time although in reality they tend to stay for longer than the allocated time!

Attendance at our group is completely open ended and patients from the unit are free to come and go as they please, exactly as they would in a social group. There is no cut off time and it helps them to know that this contact with the unit is always available to them. Two of our group members have moved on to start their own groups; one within a care home and another in her local town twenty miles away.

Confidentiality

We spoke about confidentiality in our Core Pack. It's even more important in a health-based group. Conversations can reveal intimate details of illness and personal situations so it's important to impress on the group that all conversation is confidential to the group. This knowledge can also help to encourage members to talk more freely and openly which will be of benefit to them.

Star Tip – Remember, what goes on on tour stays on tour! So what goes on in the knitting group stays there.

Star Tip – Close the door of the room to keep conversations confidential.

Stimulating and steering the group

Our Troubleshooting – Knitting and People packs cover most of the problems you're likely to encounter. You'll find that your health-based group needs more management than a social group. Newcomers are likely to be a lot more insular and nervous and some may be very withdrawn, however they will have already taken that first BIG step to self-management in bringing themselves to the group in the first place. Introduce them to the group and allow them time to sit quietly to soak in the environment. Sit beside them and offer them some yarn and needles. If they're new to knitting offer to teach them. You may have some who are happier just to sit and listen to the group conversation for the first visit. In our experience they're soon drawn into the conversation. If you have someone who's very withdrawn we've found giving them some vibrant soft textured yarn to hold and stroke works well to stimulate and draw them into the conversation.

Our narrative collection has highlighted the fact that the more vulnerable patients tend to choose cross stitching and we've found this to be the case in our group, too. Patients may also revert to cross stitching during flare-ups. Our theory on this is that cross stitching provides more 'safety' in its structure and if counted cross stitch isn't possible then you can move back to stitching on a pre printed large holed canvas. Gradually as they regain confidence they regain the desire to move onto more creative projects. It is then these particular patients become ready to knit. We would recommend beginning with structured projects such as squares and gradually introducing them to more creative tasks as their skills and confidence grow. Interestingly, our group began with 50% cross stitchers and 50% knitters. All now knit and some have moved on to experimenting with different yarns, complicated techniques without the fear of failure they initially harboured.

Individuals within a health-based group will need ongoing encouragement to develop their skills. Those with low social confidence will tend to have an ingrained fear of trying new activities because they fear failure so you will need to guide in choosing projects which they can be successful at, but which also gradually build on their skills. We think that by gradually nurturing a person's creativity we can nurture their ability to self-manage their illness.

Maintaining interest

As we mentioned in the Core Pack, in our experience it can take up to six months to build a core group who will turn up every week, health permitting. Interest needs to be maintained both in the participants and in the clinic staff, so good communication is key.

- Newsletters are a great way of staying in contact with those who may be occasional members, potential new members and staff. Regular attendees love paper-based newsletters too.
- Keep staff updated with research news from the Stitchlinks website.
- Build links with other hospital departments and surgeries by asking other healthcare workers to attend.
- Build links with NICU and the Elderly Care wards and develop projects to benefit these departments.

- Book a stand at the hospital fete and advertise the fact that you're the clinic knitting group (see fundraising).
- Knitalongs and team projects encourage group cohesion.

Advertising your Group (see Templates)

Depending on your chosen venue those attending will probably need to be confined to patients at that particular clinic or surgery.

- Liaise with the manager of the unit so that staff are aware of the group and can recommend to patients that they attend.
- Place a poster on the notice board advertising the group with advice to ask for extra details if required. Please ask permission first.
- Invite in nurses from other departments in order to encourage similar groups (check first with the manager).
- Decorate the waiting room to attract attention. Christmas time is a good time to decorate the waiting area with bunting and knitted tree decorations.
- Design a notice board or tabletop presentation for the waiting area. We hung tiny NICU cardigans on a washing line with miniature colourful pegs over a poster for the group (see Core Pack for a poster template).
- Keep up-to-date with our research information and alert the medical staff to this.
- Work with the clinic staff to gently persuade those who could benefit by arranging appointments around the knitting group. They can then join you for a cuppa and see what happens.
- Talk to District Nurses and Health Visitors who may know of isolated patients in the community who may benefit from attending the group.

Communication

Building good communication with the staff and patients is vital to the success of a health-based group. It's a good idea to develop a single point of communication with staff and this will usually be through the Practice Manager or someone like the Nurse Practitioner. These can be instrumental in passing information on to medical staff and encouraging referrals to your group. In turn, you can feed back information to them. Another vital link in the communication chain is the clinic receptionist. She needs to know about your group, when it takes place and where to send people. Also, you'll find people turning up with donations of materials when you're not around, so she needs to know how to deal with these. Inviting staff members to sit with your group can work well too. District nurses and health visitors may also be able to identify patients within the community who are isolated and may benefit from attending the group so let them know what you're doing too.

If the doctors or nurses would like to know more about the background research then Betsan would be happy to talk with them. In the meantime you could refer them to the Stitchlinks websites where they'll find a lot of information.

Develop links

Develop links with other hospital departments and surgeries who might be interested in setting up similar groups. Forming links with units such as the Neonatal Intensive Care Unit and Elderly Care unit who will benefit from knitted items can help to encourage group members to knit for a specific purpose which will, in turn, help them to feel more worthwhile. We've developed links with a small charity which sends knitted cardigans and hats to children with aids in Africa, children in Sri Lanka and Nepal. Helping those more needy than themselves has helped our patients to better manage their own difficulties. There is something about knitting for a child or a needy person which is symbolic of warmth, hugging and taking care of that person, and this can have significant benefit for the person doing the knitting.

Troubleshooting

See our Troubleshooting packs for advice on problems which may arise from those who may find knitting difficult (Troubleshooting – Knitting) and on how to deal with troublesome group members (Troubleshooting – People). These articles are of particular importance for setting up a health-based group where you are more likely to encounter these issues.

Measure it

Finding a valid outcome measure is difficult for such a group, but it's a good idea to take some sort of base-line measurement when a new person starts. For the time being the Beck's Depression Inventory (BDI) and a Quality of Life (WHOQoL-bref) are ones worth considering, plus other questionnaires already routinely used in the clinic. As the research progresses we will identify others, perhaps more suitable.

Other ideas

Feedback

Individuals in the group will blossom with positive feedback, so ensure you praise their work and try to arrange feedback from other sources too. The manager of our NICU, for example, writes a thank you letter and this always promotes feelings of pride and improved self worth.

Fundraising

It's not practical or desirable to be constantly asking for donations. Although most of our group now provide their own materials, it's also nice to provide them with the occasional treat. Our group has a stand at the hospital fete and at local Christmas fetes. You'll have to accept you won't get the true value of an item at this type of event (unless you go to a dedicated craft fair) but you'll be able to raise funds for future purchases. We run a tombola alongside our knitting sale and make a few hundred pounds at each event. This has the additional benefit of getting members involved in other activities. They plan the stands, do the advertising, pricing and organising as a team project. They then decide how to spend the monies. We would recommend opening a bank account (we have a charity account for our group which has no charges) with two signatories, one of whom is the Group Leader and the other either the Practice Manager or Nurse Practitioner.

Staff groups

Stress among healthcare workers is high so why not enquire about setting up a staff only lunch-time group? It can be open to all staff at the hospital / practice and encourage interdepartmental discussion in a social environment as well as lower stress levels over lunch!

See also the [Stitchlinks Guide to Good Posture](http://www.stitchlinks.com) available on www.stitchlinks.com, In Health page.

We will be continually developing information packs and would welcome your feedback and input particularly if you have any ideas for future content or packs.

If you require any further help or clarification of any of the above points then please contact Betsan at Betsan@stitchlinks.com