

1. Executive Summary

FACETS (Fatigue: Applying Cognitive behavioural and Energy effectiveness Techniques to lifeStyle) is a manualised, group-based intervention for the management of MS fatigue that incorporates energy effectiveness and cognitive behavioural approaches. From MS Society funded research we know that FACETS is effective in reducing fatigue severity and increasing fatigue self-efficacy.¹ Put simply, FACETS has a positive impact when applied by people with MS (pwMS).

Our current modal of spreading FACETS to people with MS is to train professionals (referred to as FACETS facilitators) in delivering FACETS courses. FACETS facilitators might be; healthcare professionals, volunteers or therapy centre workers. The MS Society does not itself have a formal programme offering FACETS courses directly to people affected by MS, although some Branches have partnered with FACETS facilitators to offer courses.

Significant funds were invested in developing the FACETS delivery training to professionals. While we know the numbers trained it is important we understand how many people with MS have accessed and benefited from FACETS courses so far.

We conducted a survey to professionals was designed to provide an estimate of the number of pwMS who are benefiting as a result of sessions provided by MS Society trained FACETS facilitators.

An impressive 59 out of 61 (97%) of respondents had delivered FACETS in some way to pwMS, either through running group-based programmes, or by applying FACETS principles one-to-one to pwMS, or both.

An estimated total of 1,537 pwMS have received some form of FACETS training from 59 FACETS trained professionals:

- An estimated 779 pwMS have received the FACETS programme through 122 facilitated group sessions.
- An estimated 758 pwMS have received FACETS on a one-to-one basis from 53 professionals.

2. Methodology

The survey was sent to all those who have attended MS Society funded FACETS delivery training in the year from mid-2014 to mid-2015.

¹ Thomas et. al 2013, *A pragmatic parallel arm multi-centre randomised controlled trial to assess the effectiveness and cost-effectiveness of a group-based fatigue management programme (FACETS) for people with multiple sclerosis.*

Available: <http://jnnp.bmj.com/content/early/2013/05/22/jnnp-2012-303816.full.pdf+html>

The survey is reliant on FACETS facilitators self-reporting the numbers of pwMS they have worked with.

3. Response rate

The survey was sent to 95 facilitators. Of those, 61 completed the survey, a response rate of 64%. This is a very high response rate for a survey predominantly sent to health professionals.

4. Geographical spread of respondents



This map represents where FACETS facilitators are operating if they indicated that they run FACETS as a group-programme or one-to-one for pwMS.

This does not represent a comprehensive map of FACETS facilitators as some may not have answered this survey or may have undergone the training prior to mid-2014.

Commentary:

Those FACETS facilitators who responded are fairly evenly spread throughout England in London, the South and the Midlands. There were far fewer respondents in Scotland, Wales

and in rural areas in the north, east and west of England. Not all respondents were in the UK. Individuals from Norway and in the Republic of Ireland (Cork and Dublin) had also attended.

5. General questions

5.1 Where do you work?

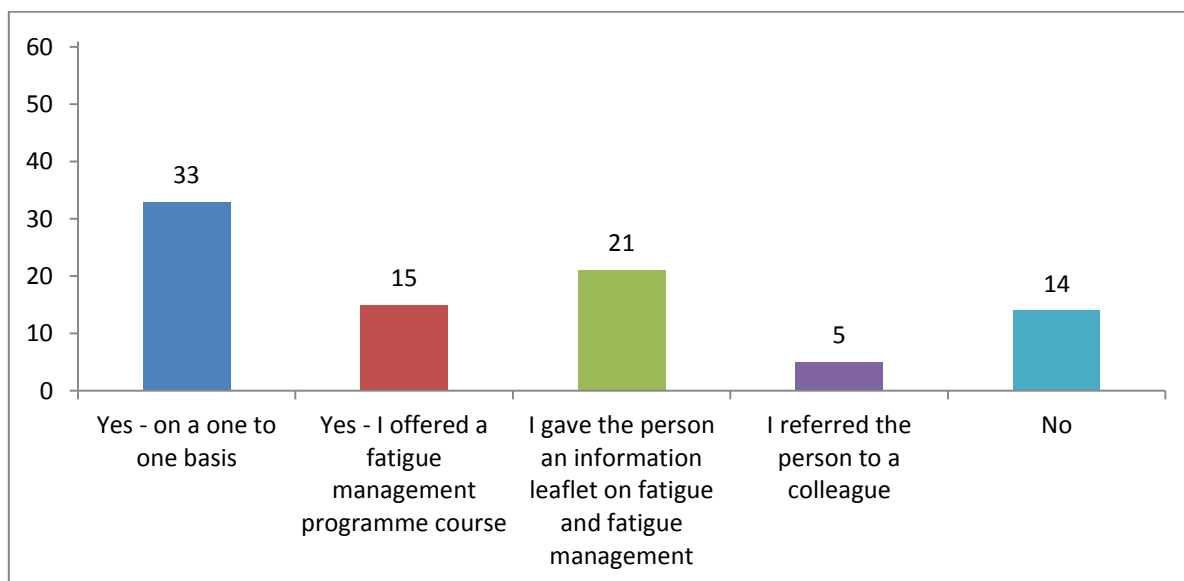


(n=61)

Commentary:

Nearly a third of respondents (19) identified their workplace as: 'Other - please state'. Of those, 9 listed areas of the NHS. Other areas of work included community rehabilitation and MS specific centres.

5.2 Prior to undertaking the FACETS training, did you offer fatigue management training to people with MS? Tick all that apply



(n=61)

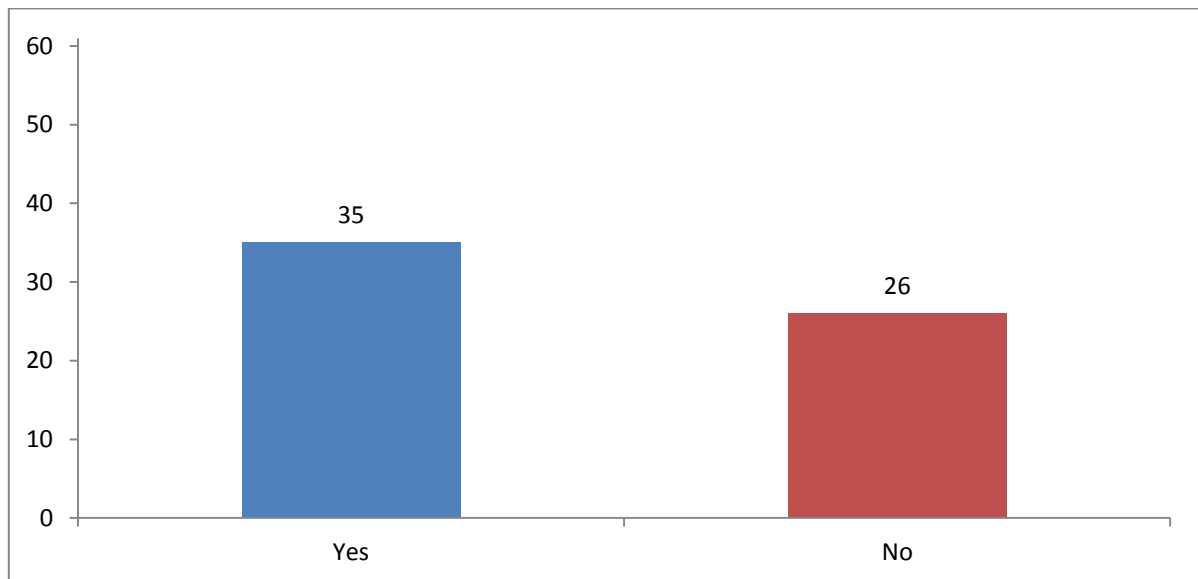
Commentary:

A majority of respondents were already offering some fatigue management training to pwMS. 33 were doing so on a one-to-one basis and 15 were offering a programme. Combining those who ticked both boxes, a total of 39 respondents (64%) offered at least one of these two fatigue management options prior to attending FACETS delivery training.

This demonstrates that the FACETS delivery training has engaged both those professionals who were already supporting pwMS to manage their fatigue and those who were not.

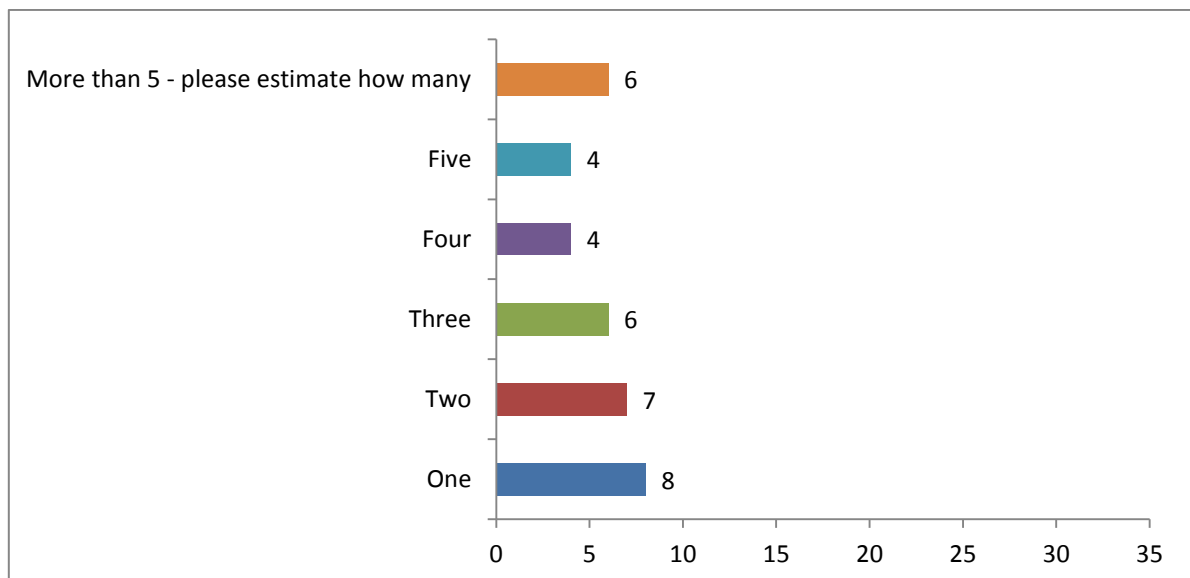
6. Providing a FACETS programme to people with MS

6.1 Since you undertook FACETS training, have you offered the FACETS programme to people with MS?



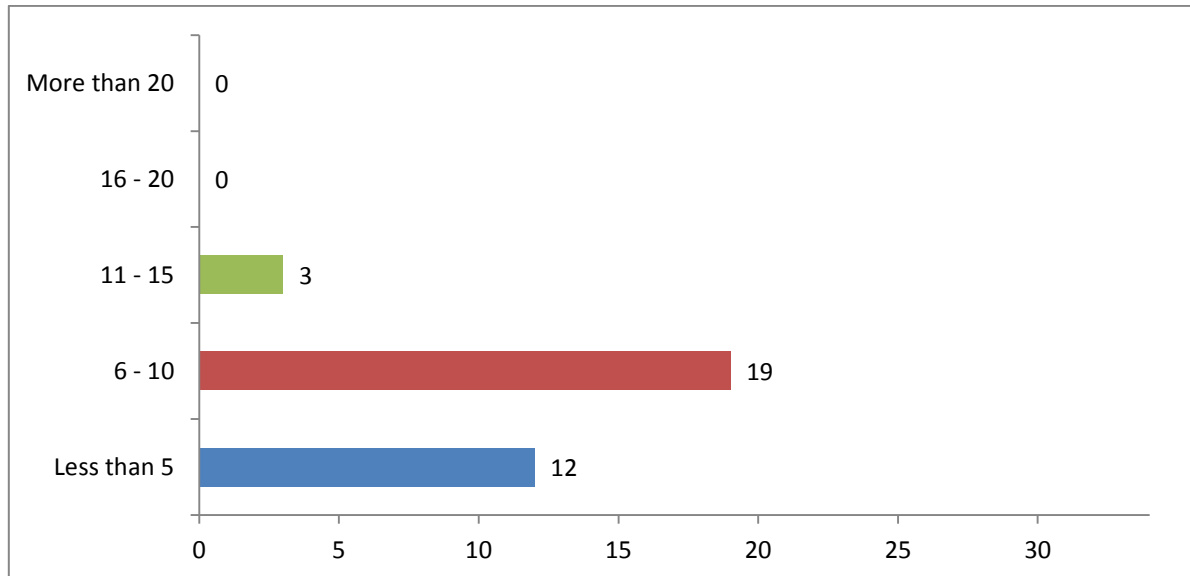
(n=61)

6.2 How many FACETS programmes have you run for people with MS?



(n=35)

6.3 What was the average attendance at the FACETS programme(s) you ran?



(n=34)

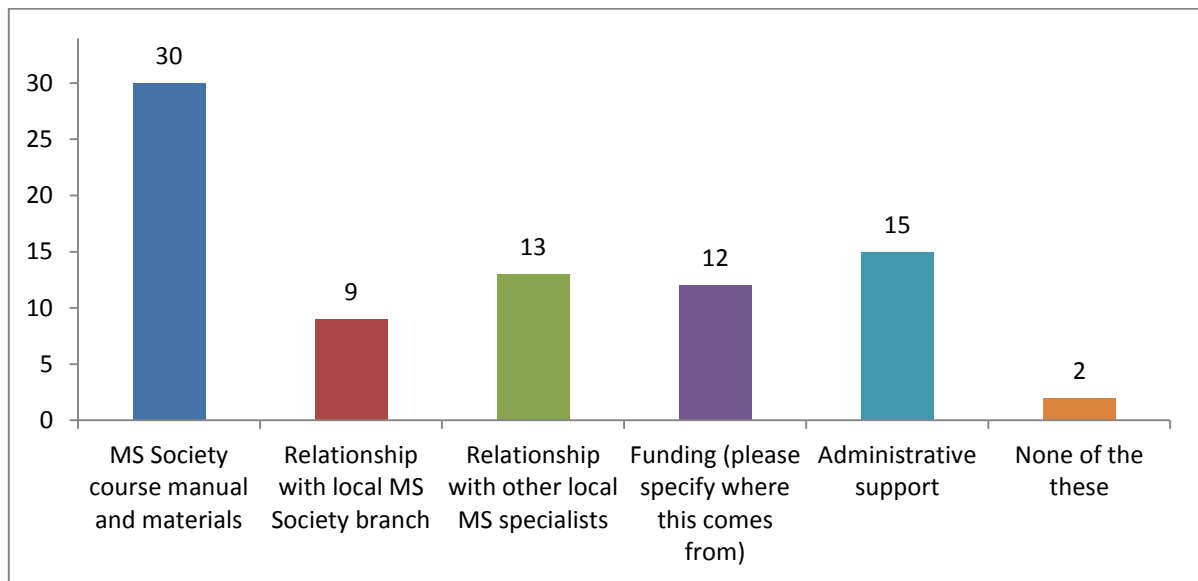
Commentary:

122 facilitated group-programmes have been offered by 35 professionals with an estimated reach of 779 pwMS.

For each respondent we calculated their estimated reach by multiplying the number of FACETS programme a respondent had run (6.2) by middle range of the average attendance at each programme (6.2). We calculated overall reach by totalling reach of all respondents.

Whilst 35 respondents (57%) might be considered a low number of respondents delivering a FACETS programme it should be noted that 53 respondents (87%) delivered FACETS one-to-one with pwMS and not as a facilitated programme. (See 7.1)

**6.4 What resources do you draw on to help you provide FACETS programmes?
(Respondents could make more than one selection)**



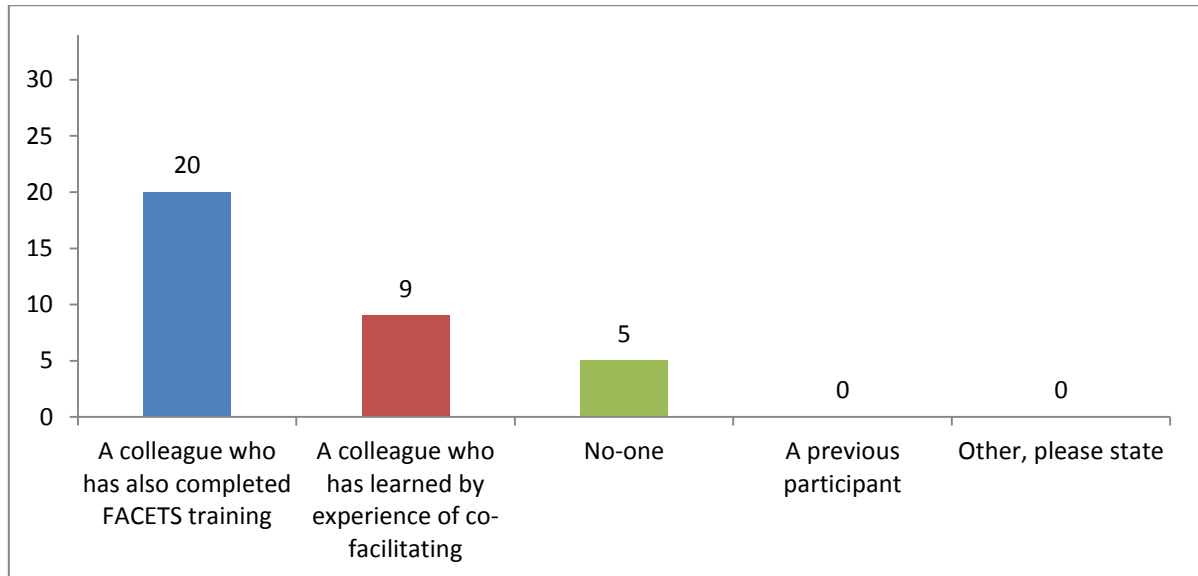
(n=34)

Commentary:

9 respondents (26%) drew on their relationship with a local MS Society branch to help provide FACETS programmes. When asked about the barriers to providing FACETS programmes (4.7), there were no respondents who felt the local branch was a barrier.

This presents an opportunity, in that it may be possible to expand the number of pwMS accessing FACETS programmes by developing relationships between local MS Society branches and FACETS facilitators.

6.5 Who co-facilitated the FACETS programme(s) with you?

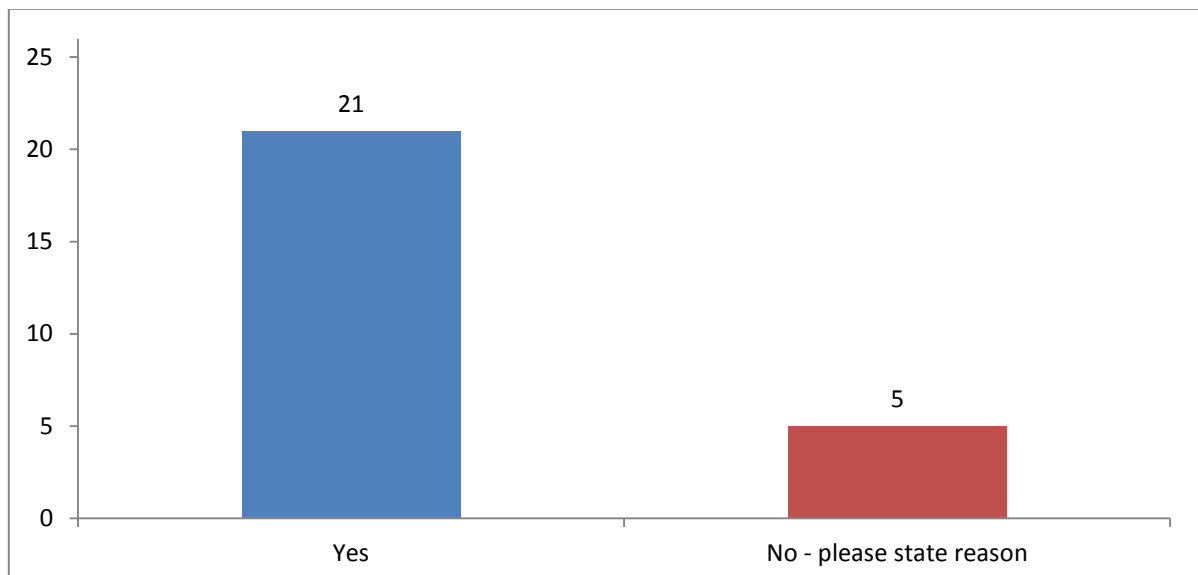


(n=34)

Commentary:

Of the respondents to this question, 29 (85%) used a co-facilitator. This demonstrates a clear preference for delivering FACETS with a co-facilitator.

6.6 If you did not offer a programme, would you have liked to offer the FACETS programme?



(n=26)

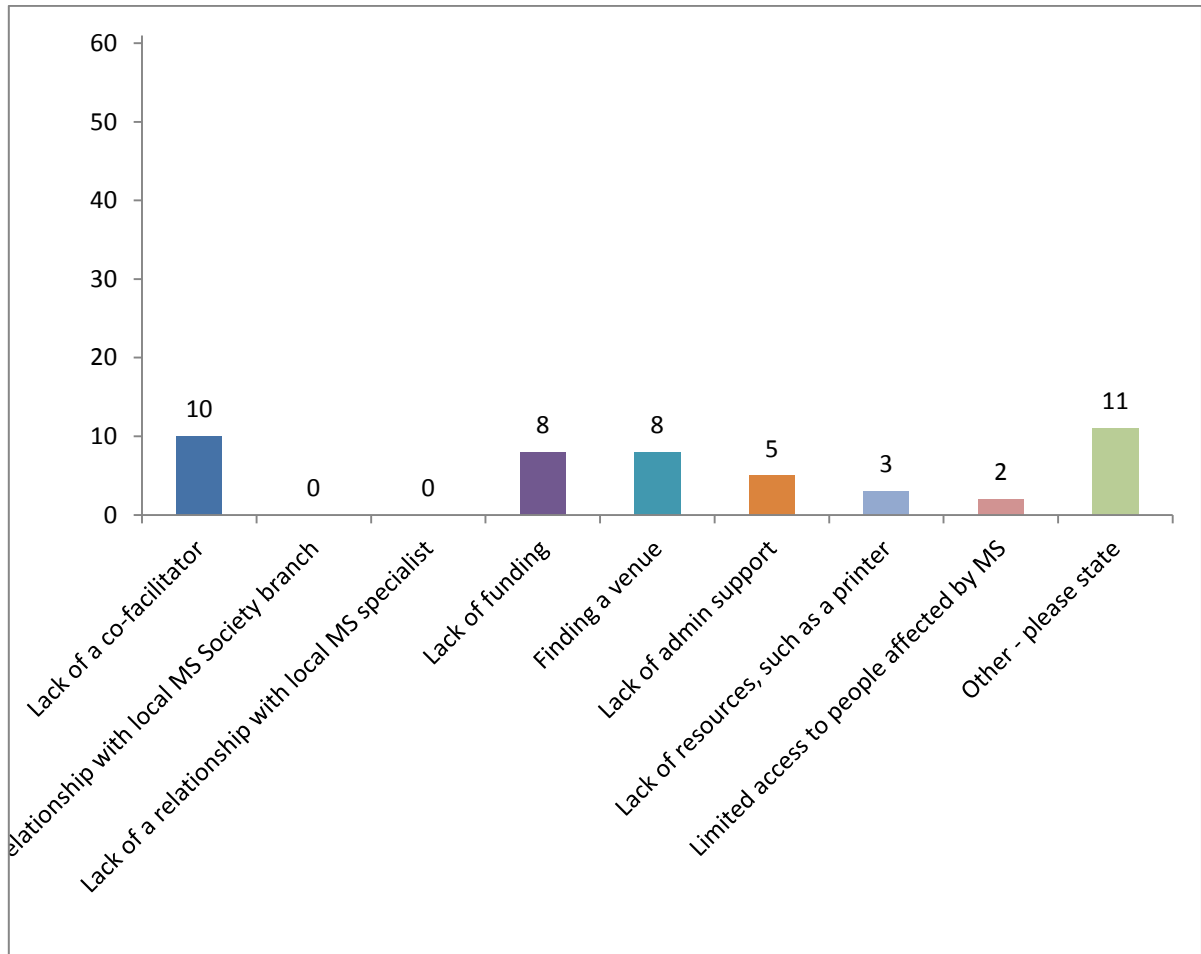
Commentary:

Four out of the five respondents who answered 'No' to this question identified the problem as an administrative or organisational reason unique to their workplace.

Only one respondent cited a negative opinion of the FACETS course as a reason, stating:

"I felt it quite limiting in what it offered and did not take into account the quality of being as an important factor in fatigue."

6.7 Were any of the following a barrier to you providing FACETS programmes?



(n=47)

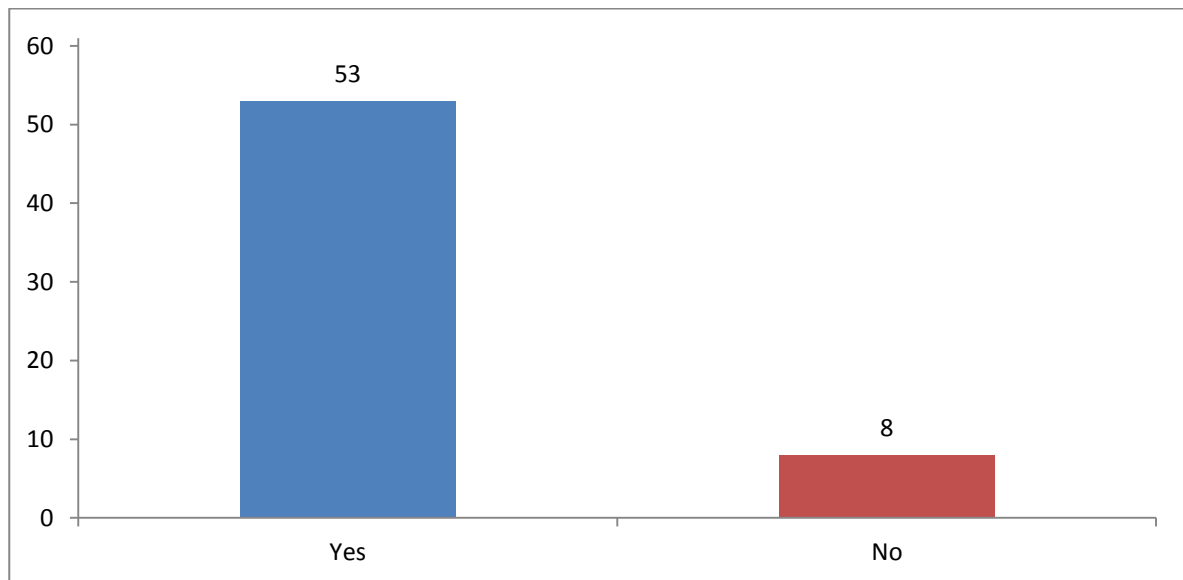
Commentary:

Of those 11 respondents who ticked “Other – please state”, the reasons stated were mostly linked to their own job specific restrictions or a lack of support from their employer.

Whilst 10 respondents stated that the lack of a co-facilitator was a barrier to them providing the training, all 10 of those did go on to provide FACETS to pwMS one-to-one.

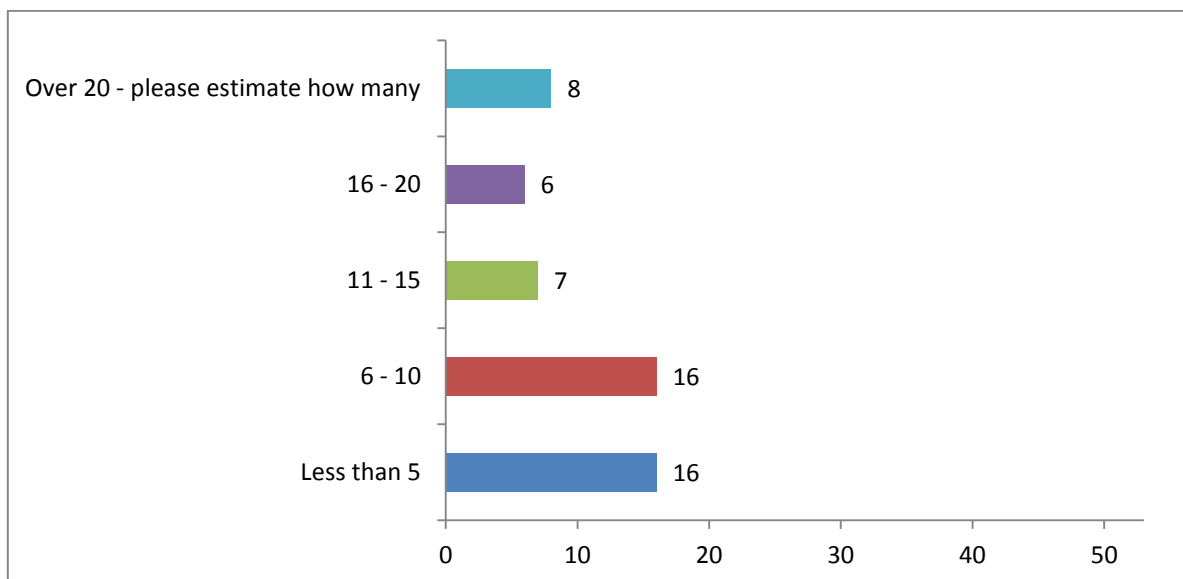
7. Providing FACETS one-to-one to people with MS

7.1 Since you undertook the FACETS training do you use the principles and tools from the programme on a one-to-one basis with people with MS?



(n=61)

7.2 Approximately how many people have you spoken to on a one-to-one basis using FACETS principles?



(n=53)

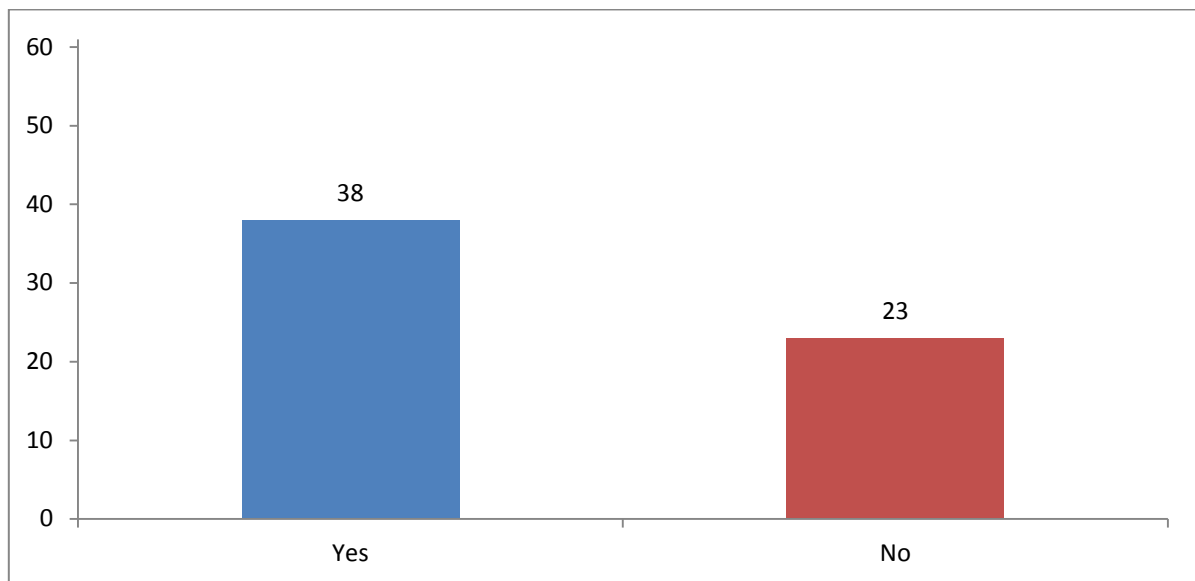
Commentary:

53 facilitators (87% of respondents) have provided an estimated 758 pwMS FACETS training on a one-to-one basis.

This estimate was calculated by multiplying the number of respondents in each range by the middle value of that range.

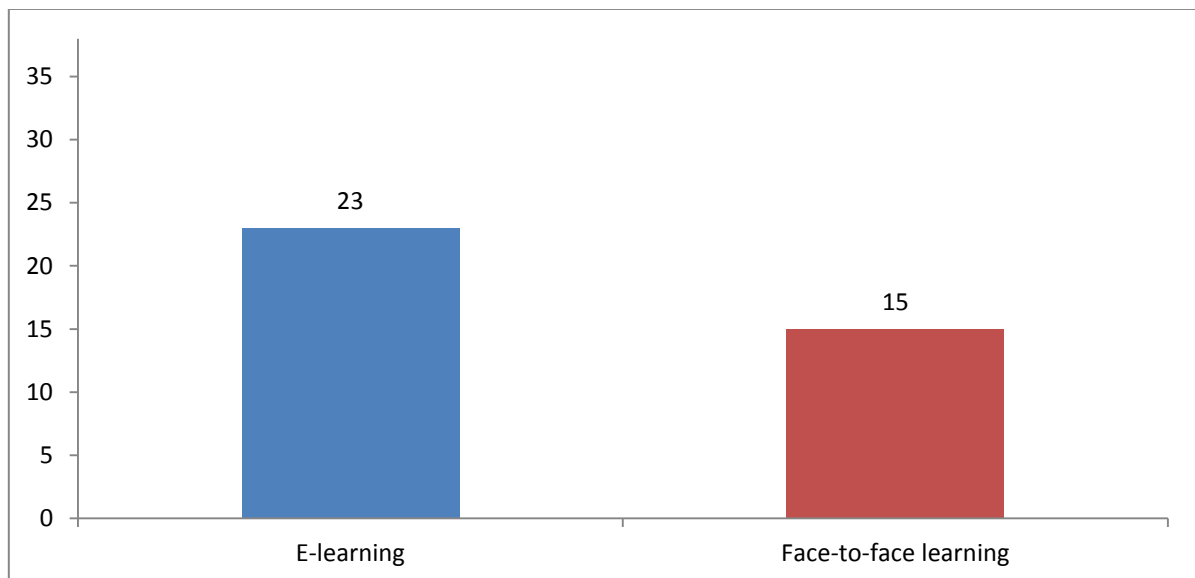
8. Possible improvements to FACETS delivery training

8.1 Would you be interested in a 'refresher' training module (a short course covering the key principles of the course)?



(n=61)

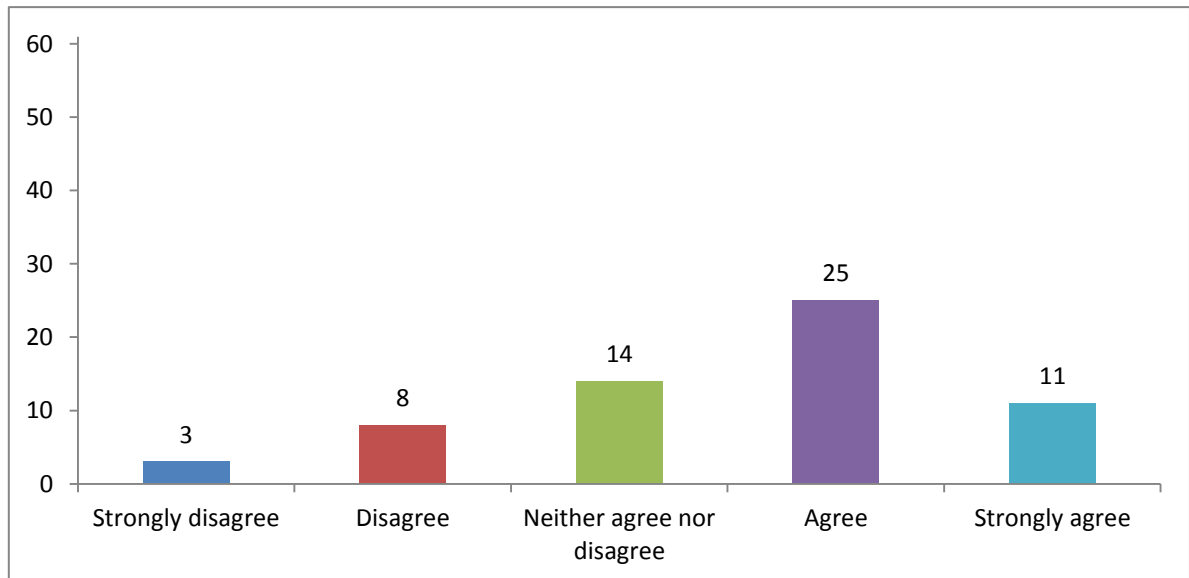
8.2 If yes, would you prefer:



(n=38)

8.3 Please indicate to what extent you agree or disagree with the following statement:

It would have been helpful for the FACETS course to have contained a 'train the trainer' element to enable participants to train other people to deliver FACETS programmes for people with MS:



(n=61)

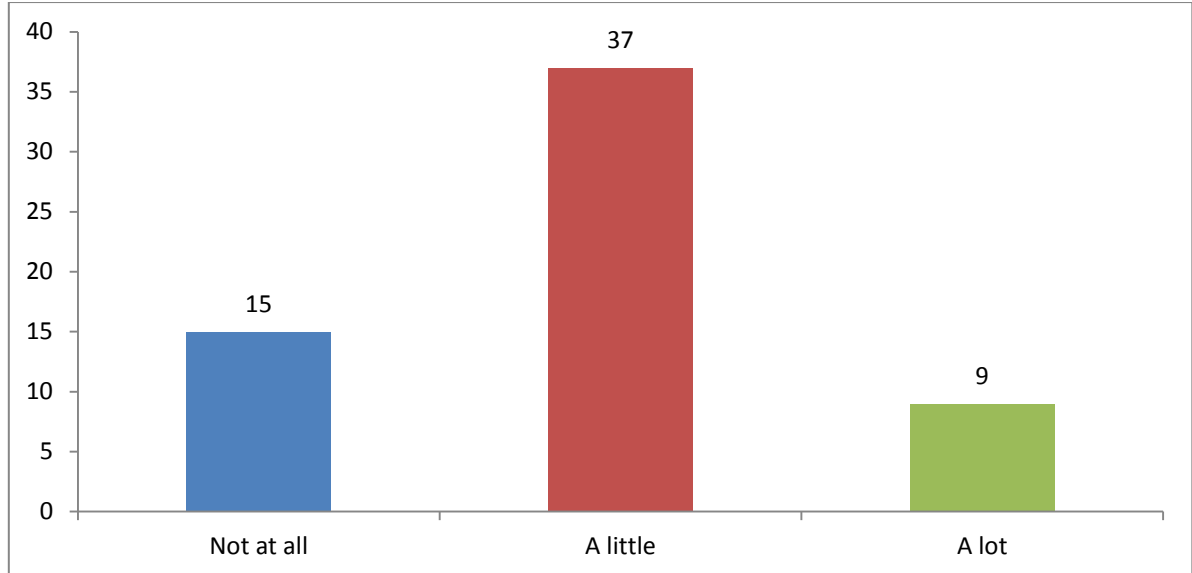
Commentary:

85% of respondents used a co-facilitator (6.5) and 10 respondents previously cited 'lack of a co-facilitator' as a barrier to providing FACETS (6.7). Therefore, as 36 respondents gave a favourable response to including a 'train the trainer' element it is something that could be considered further and potentially trialled.

9. Possible future resources

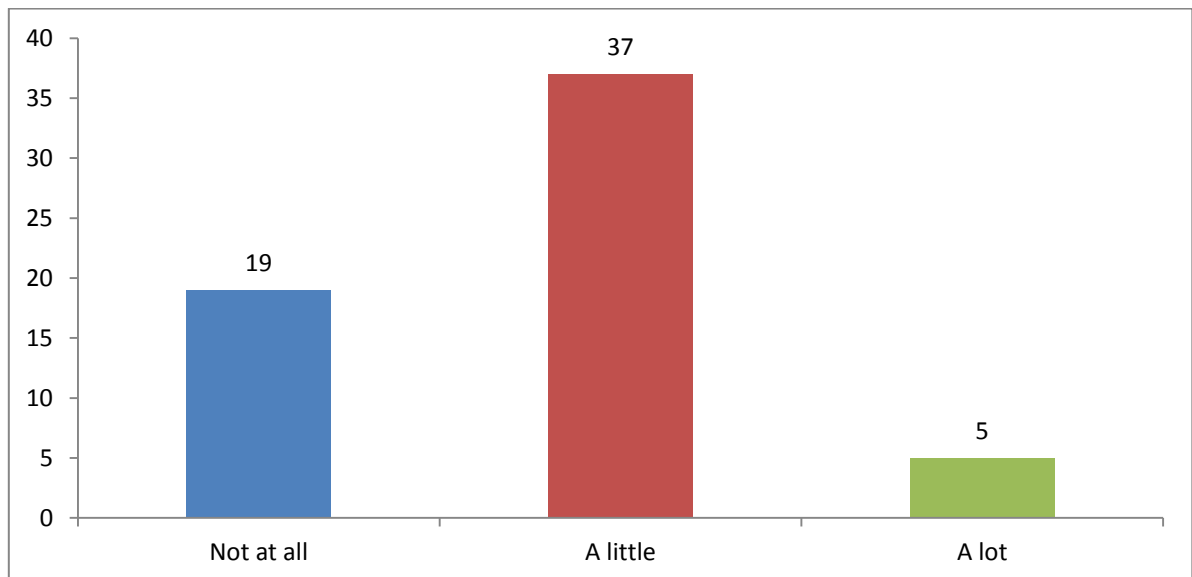
Respondents were asked to indicate to what extent they would use the following web-based resources:

9.1 A virtual facilitator forum



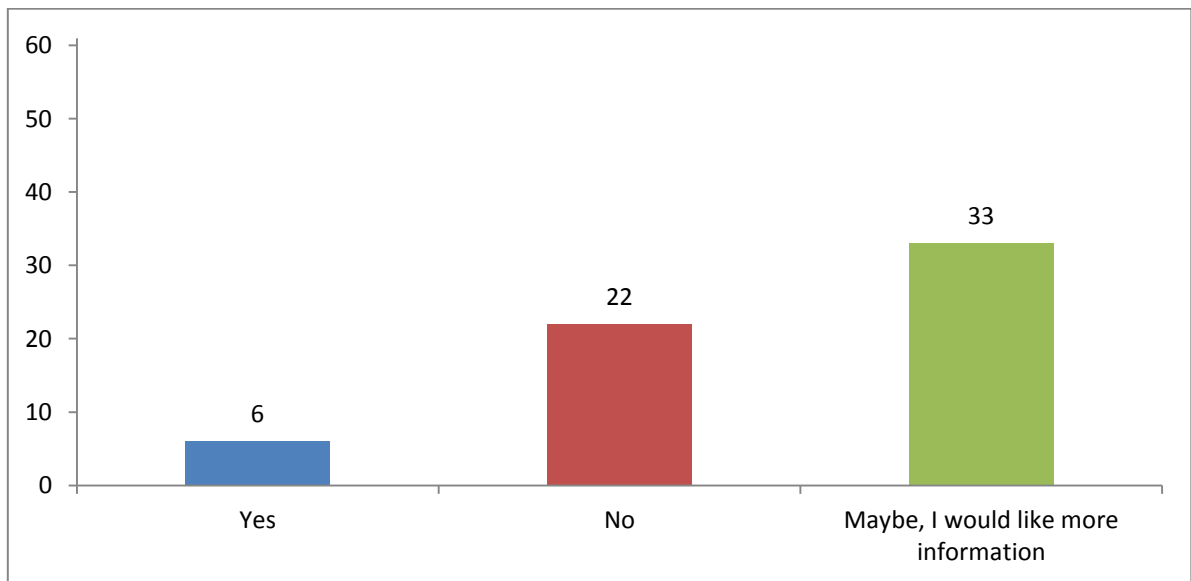
(n=61)

9.2 A virtual map of co-facilitators



(n=61)

9.3 Would you be willing to become a Facilitator Regional Ambassador/Champion (Train the Trainer)



(n=61)

Commentary:

29 respondents used a co-facilitator (6.5) and 10 respondents previously cited 'lack of a co-facilitator' as a barrier to providing FACETS (6.7). As a result, it is likely that any of the options listed in 9.1 to 9.3 would give FACETS facilitators an opportunity to expand the number of programmes they can provide.