

Consultancy brief

Equity in our

‘Rebuilding Minds after Stroke’ programme

1. Overview

Stroke Association and Mind Cymru are working in partnership to develop and deliver mental health support for Stroke Survivors. We are part way through the design and development process, and we are seeking to recruit a consultancy who can help us improve our plans, so that we can feel confident that our future mental health support offer will reach and help people from racialised communities.

2. Stroke & mental health

Around 7,400 people have a stroke each year in Wales and there are currently over 70,000 stroke survivors living here. People of **Black and South Asian heritage** are at greater risk of stroke and are more likely to have a stroke at a younger age. **Black people are twice** as likely to have a stroke than white people.

Our research shows that stroke survivors are not getting the mental health support they need after their stroke. For example, in 2018, the Stroke Association surveyed people’s mental health experiences following their stroke and found that:

- 52% of people experienced depression/low mood
- 47% experienced anxiety
- 43% reported mood swings
- 16% had experienced panic attacks
- 12% had suicidal thoughts.

However, the survey also found that only 3% of stroke survivors with emotional support needs got the help they needed, at the time they needed it.

3. Rebuilding Minds after Stroke

Given the gap in mental health support identified above, Stroke Association and Mind Cymru have agreed to partnership programme that aims to ensure stroke survivors and their carers and families in Wales receive the mental health support they need following their stroke, enabling them to rebuild their lives.

To achieve this, we have created a programme that will design, test and scale-up a mental health support offer for Stroke Survivors and their loved ones. The working title of this programme is '*Rebuilding Minds after Stroke.*'

We have already completed Phase 1 of the programme, the service design phase, and a report describing this work is attached in the supporting materials.

During this phase we employed a '*design from the margins*' approach that aimed to incorporate the perspectives and needs of marginalized or underrepresented groups in the design process. We hoped that using this approach would lead us to create a more inclusive, equitable, and accessible service design. We had some notable successes, for example 12 Stroke Survivors with diverse experiences played a lead role in the service design process. However, in spite of various engagement efforts, we only had **1 Stroke Survivor of Black and South Asian heritage** take part in the design process. As a result, we do not currently feel confident that our proposed concepts have been tested with and influenced by the views of people from this group, and we would like to remedy this.

We are now in Phase 2 of the programme and this is focussed on turning the service design concepts into a structured programme and a funding bid. We are looking to engage consultancy support to help us to ensure that the next stage of our work is more inclusive.

4. Equity & terminology

Both Mind Cymru and Stroke Association are committed to equity and we approach this work using different but complementary perspectives and terminology.

Stroke Association often use the term '***people of Black or South Asian heritage***', as this is the category most often used in stroke research. This grouping is relevant for the reasons set out above, i.e. people from this group are more likely to have had a stroke, and that stroke is more likely to have happened at a younger age.

Mind Cymru tend to use the term '***racialised communities***' and we are committed to anti-racism and we want to acknowledge that people are categorised by race because of white-led systems in society, and they may experience different treatment as a result. However, we understand that any umbrella term can be problematic, and we welcome interested parties in to share their preferences on language.

Ultimately, both organisations want to prioritise equity, and make sure that our solutions serve people from these communities.

5. Consultancy requirements

We are looking to recruit an organisation or consultancy that is run by and for people of Black and/or South Asian heritage to act as consultants for Phase 2 of the programme. We want the consultant to:

- Critically review the processes and strategies adopted in Phase 1
- Offer best practice advice and recommendations on how we need to shape our Phase 2 programme plan to ensure we reach and offer effective and inclusive support to those from racialised communities. We expect this to cover how we need to shape all aspects of the programme, including the support solutions being taken forward, our marketing and engagement, our programme governance, evaluation approach and our overall plans.
- Offer broader recommendations on our processes for setting up future programme plans in a way that ensures they are shaped by anti-racist and inclusive expertise.

We are looking for consultants with significant experience of similar work helping government, NHS or charity services to design inclusive services.

6. Approach

We'd welcome interested parties to suggest how they would approach this work, and to understand how the proposed approach is shaped by experiences of similar work.

We are particularly keen to hear about any opportunities seen to conduct involvement/insight gathering activities with people from racialised communities to inform any final recommendations put forward.

7. Criteria for success

This work will be considered successful if, as a result of using recommendations made to shape the Phase 2 programme plan:

- Funders recognise that our programme plan activities **represent best practice in involvement / engagement** of people from racialised communities.
- Our support solutions **reach and are accessed by** stroke survivors of Black and South Asian heritage, and other racialised communities.

- Our support solutions are **effective** and offer an inclusive experience for people of Black and South Asian heritage, and other racialised communities.
- We have generated **transferable learnings** about how to best embed equity approaches in our programmes, in line with our ongoing strategic commitments.

8. Deliverables

The deliverables for the contract are:

- Overall report outlining the work done, findings and recommendations.
- Visual / auditory outputs from any involvement work undertaken – photos, videos, voice clips etc – with appropriate consent in place to enable use in future communications.
- Final presentation to the Programme Steering Group.

9. Contract management

Consultants will report into the Rebuilding Lives after Stroke Steering Group, made up of Stroke Association, Mind Cymru and Lived Experience representatives. Two members of the Steering Group will act as named contacts for day-to-day activities, one from each organisation. The contract for the work will be issued by Stroke Association.

10. Supporting materials

The following documents provide context and background for the work:

- Rebuilding Minds after Stroke - Phase 1 Final Report
- Mind Anti-Racism Toolkit
- Stroke Association Solving Inequities in Stroke – need to check this document can be shared
- Different Strokes <https://differentstrokes.co.uk/>

11. Timescales

We anticipate this being a fixed-term piece of work taking approximately **three months** to complete. Ideally, we would like the work completed by mid-November 2024 but we are open to hearing from people who have strong reasons for needing to take longer.

12. Budget

We have a budget of approx. £15,000 – 20,000 for this work (including VAT) and will award on a fixed cost basis so please include all costs in your proposal including any expenses etc. If you feel that we are unable to achieve our stated research objectives and outcomes within budget, please feel free to provide two cost options – one within budget (noting where you may not be able to deliver against objectives), and one which meets all objectives.

13. Application process

Applications open	28 June 2024
Deadline for applications	18 July 2024 (5pm)
Short-listing	19 July 2024
Interviews	29 July to 1 August 2024
Offer of appointment	2 August 2024

There isn't a specific form to apply on. You can use any format you choose.

Submit your completed applications to:

Nicola Whitson n.whitson@mind.org.uk

For pre-application queries please contact:

Katie Chappelle Katie.Chappelle@stroke.org.uk