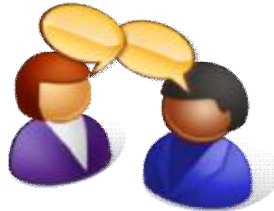




## **Lambeth & Southwark Stroke User Network**

### **Peer Support Service**



**Disability Advice Service Lambeth**

**336 Brixton Road**

**London, SW9 7AA**

**Telephone: 020 7738 5656**

**Fax 020 7924 9621**

**[Enquiry.line@disabilitylambeth.org.uk](mailto:Enquiry.line@disabilitylambeth.org.uk)**

**[www.disabilitylambeth.org.uk](http://www.disabilitylambeth.org.uk)**

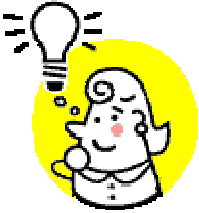
# About The Stroke Peer Support Service



**The service is for people living with Stroke in Lambeth and Southwark**



**The co-ordinator will match you with a specially trained volunteer.**



**The Volunteer is a person like you.**

**They have personal experience of living with stroke**



The **peer support volunteer** can meet up with you on a **1:1 basis**:

During these meetings you will be able to share:

- Your **experiences** of stroke
- **Tips** about **living with stroke**
- **Knowledge** about what's **available** for people living with stroke in your local area

Everything that is talked about is kept confidential.

## QUESTIONS ABOUT THE SERVICE

- **Where would we meet?**

- At **your home**, or
- At a **local day centre**, or
- At your **local community centre**
- At **Disability Advice Service Lambeth** or
- **Other local organisations**



- **How many times could I meet with the peer support volunteer?**



- You will meet with the volunteer for **at least two sessions.**
- If you want to meet for a **longer period**, this can usually be **arranged**

## **Are the Volunteers medically trained?**

- **No.** The volunteers will **not** give advice on **medical** matters
- Their **role** is to **share their experiences** of living with stroke



## What happens if I want to stop using the service?

If you decide you **do not wish to continue**.

- **That's fine** - you can do that at **any time**
- **Let us know**
- We will **discuss** the **reasons** why you want to leave the scheme

## What happens if I want a different volunteer?

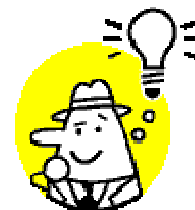
- **Let us know.**
- We will **discuss your reasons** for wishing to change
- **If possible**, we will try to find you a **new volunteer**



## What are my responsibilities to the service?

We need you to **let us know**

- When you plan to be **away**
- When you **cannot make a visit**
- When you are going to be **late**

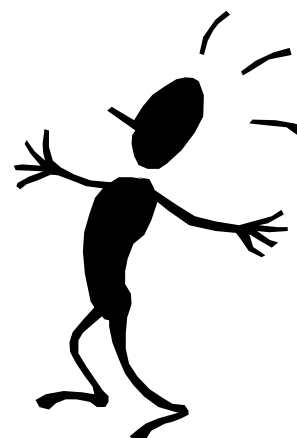


**Your volunteer will have to travel to meet you. They need to know before they leave home if the visit is cancelled.**

## How do I apply for peer support?

For further **details** about the service please contact the **Information Worker** on **020 7738 5656**

Or **fill in** the following **form** and **return** it to **DASL** at the **address shown**



# Peer Support Consent Form



1. I am **interested** in finding out more about **Peer Support**.

**Name:** \_\_\_\_\_

2. I would like a **Peer Support Volunteer to meet with me**

**Signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone number:**

**Email address:** \_\_\_\_\_

**Return to:  
Information Worker  
DASL, 336 Brixton Road, London, SW9 7AA**

# **The Lambeth & Southwark Stroke Peer Support Scheme**



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**336 Brixton Road**

**London, SW9 7AA**

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