

MAKING THE CASE: WHY DO WE NEED TO MAKE EVERY CONTACT COUNT?

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Big hearts, big changes

Setting the scene

- Five year forward view – a radical new approach to prevention
- STPs – prevention element
- CQUIN – Preventing ill health by risky behaviours
- MECC has many guises/ interplays with other initiatives
 - *Health Coaches/ Health Trainers*
 - *One You*
 - *Healthier You – Diabetes Prevention Programme*

NHS Five Year Forward View 2014

“The future health of millions of children, the sustainability of the NHS, and the economic prosperity of Britain all now depend on a radical upgrade in prevention and public health. Twelve years ago, Derek Wanless’ health review warned that unless the country took prevention seriously we would be faced with a sharply rising burden of avoidable illness. That warning has not been heeded and the NHS is on the hook for the consequences.”

Definition

Making Every Contact Count is an approach to behaviour change that utilises the millions of day to day interactions that organisations and people have with other people to support them in making positive changes to their physical and mental health and wellbeing. MECC enables the opportunistic delivery of consistent and concise healthy lifestyle information and enables individuals to engage in conversations about their health at scale across organisations and populations

MECC Consensus statement April 2016

Why MECC?

Rotherham:

- Smoking: 18.1% of the adult population
- Alcohol: 21.6% of adults drinking at increasing or high risk level
- Obesity: 32.6% of adults
- Physical Activity: 47.0% do not meet the recommended levels

Why MECC?

- Many LTC affecting our population are closely linked to known behaviour risk factors
- 40% of the UK's DALYL being attributable to tobacco, hypertension, alcohol, being over weight or being physically inactive

Sustainability

Managing Demand

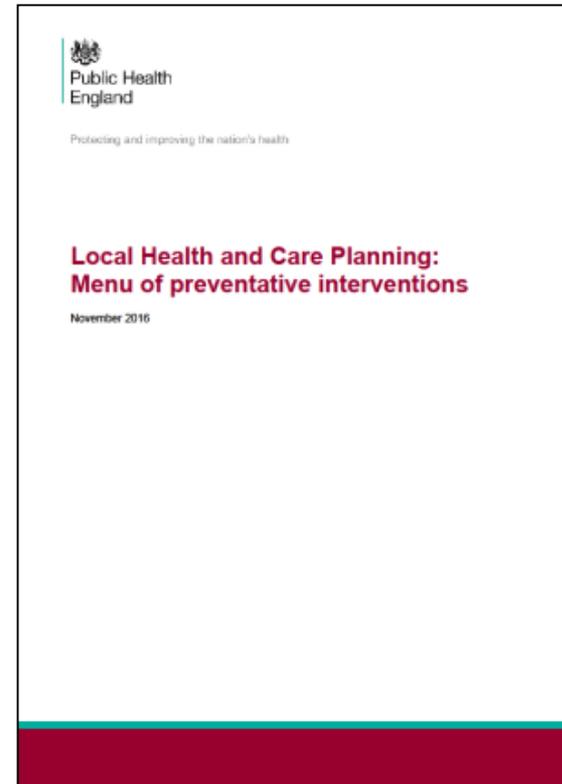
- Increasing supply
- Waiting targets
- Improving discharge
- Changing skill mix
- New Models of Care
- Drives expectation, increases throughput, creates demand & cost
- Extends LE & prolongs health & care service needs

Preventing Demand

- Improving lifestyles & tackling wider determinates of health
- BIA and preventative services
- Promoting self management
- Tackling variation
- Supports, empowers, reduces throughput, stems demand & costs
- Extends HLE, reduces inequalities, delays & care service needs

Local menu of preventable interventions

- Evidence based, preventative public health interventions that:
 - Improve health
 - Reduce demand on the health and care service
- Focus on the 5YFV so short to medium term impact interventions
- 14 topic areas with:
 - Evidence of up to 5 interventions for consideration
 - Clinical and Cost effectiveness
 - Indicators for monitoring progress
 - List of Resources



Six evidence based priorities

The six priority preventative actions that can reduce demand and deliver savings to the NHS within 4 years; and support any other actions that meet the criteria, depending on funding availability

Alcohol care teams in secondary care	Provide tailored 7-day care, especially to patients whose alcohol impacts most heavily on local services
Alcohol identification and brief advice in primary care	Identify and provide brief advice to patients with moderate-to-high alcohol consumption levels
Patients who smoke in secondary care	Screen, advise and refer patients who smoke to cessation support to ensure they are treated effectively
Hypertension in primary care	Monitor and control blood pressure more effectively via community and general practice-based pharmacists/clinicians
Long-acting reversible contraception	Train more professionals to fit/remove long-acting reversible contraceptives (LARC); and improve access in multiple settings
Fracture liaison services in secondary care	Identify people at risk of repeat falls and fractures, offer bone strengthening treatment and refer to services to reduce risk

Is this above and beyond my day job?

MECC shouldn't be a burden:-

- MECC is using the contact that you already have with service users to promote health and wellbeing
- Staff can take small steps to offer basic information and signpost/refer service users to further information and lifestyle services
- It can be as simple as starting a conversation with a person about a lifestyle issue
- Most people want to be healthy and even to improve their own health (63% of smokers want to quit*)
- MECC makes it easier for people to make those changes

*The most recent national data is from 2011: <http://webarchive.nationalarchives.gov.uk/20160105160709/http://www.ons.gov.uk/ons/rel/ghs/general-lifestyle-survey/2011/sty-smoking-report.html>

Much more than training staff

- Organisational development and culture change
- Led by staff within the context of their service and role
- A collective responsibility – staff & organisation together
- Grown from the needs of the public and what they need, want and expect
- A path to delivering system and scale
- Locally we will measure impact of MECC

Organisational Readiness

Organisational development and support is critical for staff to implement MECC. Organisations need to provide the leadership, environment, infrastructure and processes to support lifestyle improvement amongst staff, service users and the general public.

Staff Readiness

Staff need to be engaged with implementation and embed it within existing practice, building on their knowledge of their client group and expertise of service delivery. Staff should be competent and confident to support lifestyle improvement amongst service users when the opportunities arise.

Enabling and Empowering the Public

The public should be supported to engage with and/or ask about lifestyle improvement opportunities. Consideration needs to be given to accessibility and usability of information, opportunities for self-care, the impact of the wider determinants on health and wellbeing and the importance of developing individual's health literacy.

Summary

- Scaling up MECC will contribute to meeting the prevention challenge identified within the Five Year Forward View
- The regions STPs recognise the contribution of MECC
- Prevention at scale is a system wide challenge
- CQUIN - Prevention
- PHE's Menu of Interventions can support local action

Summary

Today is about collaborative partnership working and sharing best practice, so let's make a difference in Yorkshire and the Humber, let's #meccithappen



Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.

Margaret Mead