NHS Foundation Trust



- Recognise why public health is everyone's business
- State the history and background to Making Every Contact Count
- Identify how our own actions can support the care, protection and wellbeing of individuals

In this session we introduce the idea that public health is everyone's business by exploring:

- The background to Making Every Contact Count
- The aims of Making Every Contact Count
- NICE (National Institute for Health and Care Excellence) behaviour change guidance
- The definitions of health and wellbeing
- How population health and individual health differ
- The wider determinants of health
- The notion of health inequality
- The factors that affect health and wellbeing

We also look at how our actions need to support the care, protection and wellbeing of individuals.



Making Every Contact Count is for everyone

Making Every Contact Count – MECC is a national, regional & local initiative to undertake hard-hitting action on prevention on obesity, smoking, alcohol & other major risks to promote patient & employee health & wellbeing

MECC remit for LHCH

- National, regional & local programme and a key priority for North Mersey's Local Delivery Plan,
- Prevention at Scale 5 year-forward plan, Domain 2.
- Quality Indicator (KPI 85) in 2017-18 NHS Standard Contract.
- Inclusive of the NHSE CQUIN Indicator 2017 -18 -19
- (Preventing ill-health by risky behaviours –alcohol & tobacco)
- STP Agenda Demand Management & Prevention

Benefits for the Trust

Meet a number of National Workplace Charter Competencies to support Trust accreditation

Staff trained in MECC become powerful advocates to support better health with family, friends & the wider community.

BY 2021 32% of the working population will be 56-65 years old so the increase in vulnerability to developing long term conditions.

MECC is cost-effective, investment on return is £35 per £1 NHS.

Improves patient health outcomes – increase in disability free years / Quality of Life & independence

Reduce hospital admissions due to cancer, circulatory, respiratory, and digestive illness linked to modifiable risk factors

- Smoking
- Harmful levels of drinking
- Obesity
- Physical inactivity

Benefits for the Trust Health in Liverpool

- Life expectancy is 3 years lower in Liverpool than the England average.
- Men and women in Liverpool live around a quarter of their life in poor health (19 and 21 years respectively), which is significantly greater than the national average (16 and 19 years respectively).
- 1 in four describe their health as bad or very bad.
- Emergency hospital admissions are significantly higher in Liverpool than the England average 144.8 per 100,000 vs 98.4 per 100,000.
- Major causes of death are cancer, circulatory and respiratory diseases all linked to modifiable lifestyle factors.

Benefits for the Trust Health in Liverpool

- Over a third of adults (35.6%) do less than 30 minutes of physical activity a week and are classified as inactive, compared to 28.7% in other parts of England
- Hospital admissions for alcohol-related harm are higher in Liverpool than for England as a whole
- Smoking rates are higher in Liverpool than England 23.1% vs 16.9%.
- People living in the most deprived areas of the city are twice as likely to be smokers than those living in the least deprived
- (34% vs 17%)
- Treating smoking related illness costs the NHS £23 million per year; with social care costing an additional £10.2 million

Over the course of this eLearning you will learn about the background and underpinning principles that are core to Making Every Contact Count (MECC):

- Public health is everyone's business
- Actions support the care, protection and wellbeing of individuals

Question: Thinking about your work role, what is the first thing you think of if someone were to ask you to describe your job?

Answer: You have probably described tasks that you do in your role. You may have included working or interacting with people, be they members of the public, colleagues or senior members of staff. Having conversations and talking to people probably features within your working day and it is something you do without thinking.

During this eLearning you will be introduced to the idea that using these conversations to talk about health and wellbeing and lifestyle is the key to Making Every Contact Count.



Making Every Contact Count is about conversations

Public Health is Everyone's Business MECC-Who is it For?



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Every Contact Count is for everyone

Making Every Contact Count is about people having the knowledge and skills to raise awareness, motivate and signpost to other services to improve their health and wellbeing.

NICE guidance 2014 [1] recommends:

.....[people] in direct contact with the general public... use a very brief intervention to motivate people to change behaviours that may damage their health.

Question: On the diagram opposite where do you think Making Every Contact Count sits?

Answer: Making Every Contact Count includes 'Very Brief Interventions' and 'Brief Interventions'. It is the start of behaviour change and focusses on prompting the idea of change.



Behaviour change interventions mapped to NICE behaviour change individual approaches

Public Health is Everyone's Business Health and Wellbeing



What do we mean by Health and Wellbeing?

Question: Think about what being healthy means to you?

Answer: You have probably thought about your body and how you feel.

Health and wellbeing is made up of four factors:

- Physical health this is the functioning of the body
- Mental health this is the ability to think clearly
- •Emotional health this is the ability to recognise emotions and express them. It also involves the ability to deal with stress, anxiety and depression
- •Social health this is the ability to communicate with other people and form relationships

Health and wellbeing change over time and vary between different cultures and life stages. Being a healthy young adult does not automatically mean you will be a healthy older adult.



Being healthy is about a range of things

Public Health is Everyone's Business Population and Individual Health



Question: What do you think the differences are between population health and individual health?

Answer:

Individual health:

- Individual health is about a person and their risk of illness
- Individual determinants such as behaviour, lifestyle and biology affect an individual's health

We will see in the next section how other factors also influence an individual's health.

Population health:

- Population health is a broad view. It focuses on the health of an entire population
- It concerns health for a group of individuals within a population. This includes the distribution of health within that group
- Population-based health is influenced by the individuals within that group as well as other factors



Individual versus population health

The Wider Determinants of Health Individual's Circumstance and Health



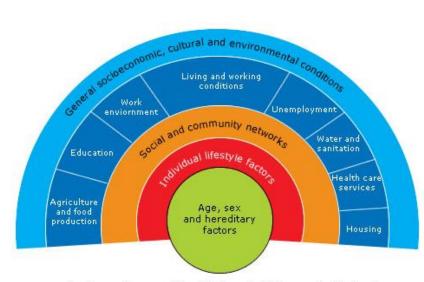
The wider determinants of health

An individual's poor health can be caused by many factors:

- •Some we cannot change such as our genetic inheritance (green area)
- •Some factors we can change, it is well known that lifestyle factors such as physical activity and what we eat can affect our health (red area)
- •Other factors can also influence our health. For example, where we are born, grow, live and work (blue area). Known as the 'wider determinants of health', these circumstances also help to explain differences in health and life expectancy [3]

In summary, on top of our biology, health is shaped by a person's behaviour and the social and economic conditions that affect their lives.

Fig 1 [4] shows the complexity of health for individuals and populations.



The determinants of health (1992) dahlgren and whitehead

Fig 1 The diagram above illustrates the conditions and factors affecting the health for individuals and populations

Can you list any of the determinants of health?

Feedback

- The main determinants of health are (in no specific order):
- Work environment
- Living and working conditions
- Education
- Unemployment
- Water and sanitation
- Healthcare services
- Housing
- Social and community networks
- Individual lifestyle factors
- Age, sex, and hereditary factors
- Agriculture and food production

Public Health Outcomes Framework

Wealthy areas fare better than those with lesser income or greater levels of deprivation. This is known as **health inequality**.

Fig 1 opposite shows how inequality can influence life expectancy [5].

To explore where you live and/or work the <u>Public Health Outcomes Framework</u> shows you the wider determinants of health for your locality.

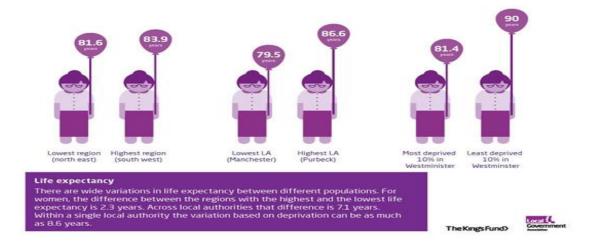


Fig 1 Determinants of health and inequality can influence life expectancy [5] (Infographic reproduced with permission from the King's Fund)

The Wider Determinants of Health Our Window on the World



How we see the world

As we have seen health and wellbeing is affected by people's perceptions and varies in different populations, and groups due to culture and social context.

Society is diverse, so we need to respond appropriately and sensitively to people's gender, race and ethnicity, disability, religion, sexuality, class and age.

When we start to talk about health and wellbeing with people, we need to recognise how the context of their lives influences their health.

The **Fig 1** shows how we see the world [6].

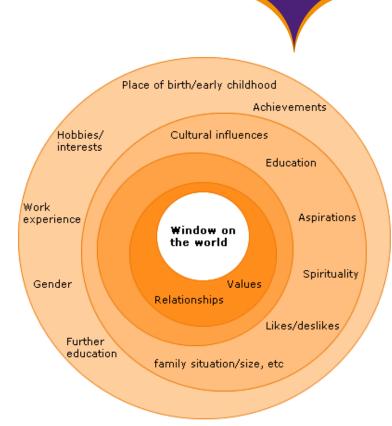


Fig 1 'Frame of Reference' illustration used with kind permission from MHFA England. Originally adapted by MHFA England from Jacqui and Aaron Schiff

The Wider Determinants of Health



Can you list any factors that affect people's health and wellbeing?

Feedback

- The main factors affecting people's health and wellbeing are (in no specific order):
- Relationships
- Values
- Family situation
- Likes/dislikes
- Spirituality
- Aspirations
- Education
- Cultural influences
- Achievements
- Place of birth/early childhood
- Hobbies/interests
- Work experience
- Gender
- Further education

Making Every Contact Count The Benefits of MECC



The need for Making Every Contact Count

The benefit of Making Every Contact Count is that it can help people live healthier lives and prevent ill health and early deaths. We will learn much more about this in Introduction to Lifestyle Topics (749-1003), but before we move on it is key we recognise the core health and wellbeing issues facing us.

These relate to:

- Stopping smoking
- Maintaining a healthy weight and diet
- Reducing alcohol consumption and substance misuse
- Improving mental and emotional health and wellbeing
- Increasing physical activity



Annual cost of lifestyle on the NHS [7,8]. A billion as illustrated here, is the widely recognised usage of billion as one thousand million (1,000,000,000)

Making Every Contact Count MECC Implementation



Who is Making Every Contact Count for?

We are all part of groups, communities and populations so Making Every Contact Count is for **EVERYONE**. Especially for:

- Individuals who have contact with the public
- Individuals who have contact with people who experience health inequalities
- Individuals who may have the opportunity to talk about health and wellbeing with others



Making Every Contact Count is for everyone

Making Every Contact Count Your Role, Scope and Responsibilities



Before we Make Every Contact Count we need to consider the following areas:

Confidentiality

You should not reveal information about people to a third party without consent or a clear legal reason.

Role, scope and responsibilities

Making Every Contact Count (MECC):

- •Only the start of change it is a quick conversation and so your role is to move people onto more specialist support
- •Is not about counselling or advocacy it is a very brief intervention focussed on specific health and wellbeing issues
- •If you do not have the knowledge, signpost onto services you could raise expectation and impact motivation to change

Making Every Contact Count Your Role, Scope and Responsibilities

MECC: Scenarios

Question: Look at the scenarios below. Do you think these are features of Making Every Contact Count?

A patient asks for help around an appointment with another department.

A person asks for advice about their drug dependency treatment.

A person you spoke to earlier returns after visiting a weight management service asking what to do about a food diary.

Answer: No – These examples go beyond Making Every Contact Count, as giving advice or advocating for someone is outside your Making Every Contact Count role.

The 'elephant in the room...'

You might find it difficult to raise a lifestyle issue if you smoke, drink too much, have an unhealthy diet, don't exercise enough or have emotional problems yourself. However, having the confidence to raise lifestyle issues provides an opportunity:

- To support someone to change
- For someone to think about their lifestyle
- For someone to make a choice
- What can make it easier is to:
- Acknowledge a healthier life may not be easy
- Ask the person what they think
- Self-awareness

Making Every Contact Count Your Role, Scope and Responsibilities



Question: How do you think your own health influences your confidence in starting a conversation about health?

Answer:

Your thoughts about having a healthy conversation may include personal barriers such as:

• I smoke/drink/have an unhealthy diet therefore I cannot ask about their lifestyle, it's wrong for me to ask...

However you could say:

• I understand how difficult... What do you think you could do to change [eating/physical activity etc...]?

- Making Every Contact Count is a very brief or a brief intervention
- Making Every Contact Count is about raising awareness and motivating people to think about changing their lifestyles
- Making Every Contact Count is a method of using current conversations you are having with people to raise the issue of health
- Making Every Contact Count is something everyone can use



Making Every Contact Count is for everyone