

Self care

Councils helping people
look after themselves

Foreword

We talk a lot about person-centred care these days; the idea that services should be focussed around the needs of the individual rather than the service.

Well, self care is exactly that. It is about giving people choice and control by helping them to decide how best to protect, maintain or improve their health and wellbeing.

It can include getting people to live healthier lives by drinking sensibly, quitting smoking, and exercising more. Or it may involve taking medications and treating minor ailments by yourself, while knowing when and how best to seek help if needed.

And for people with long-term conditions, such as heart disease and diabetes, it can be used to refer to the self-management of disease whereby patients take charge of aspects such as blood pressure and cholesterol monitoring. That does not mean simply teaching a patient how to use a piece of equipment. It is about supporting them to make decisions that are matched to their preferences and views.

Whatever the situation, there is one thing all people who self care have in common: they feel empowered and confident to take responsibility for their own health. Not only is this good for the individual, it is also important for the health and care system which is under more strain than ever.

If you want proof of that, look at what is happening in GP surgeries up and down the land. About a fifth of consultations are taken up by people with minor conditions. This costs the NHS about £2 billion a year and takes up an hour of the average GP's day.

Despite this, research shows people do not always feel confident or able to self care or are too quick to abandon it. Councils working with their local partners can play a vital role trying to address this.

We can support patients and teach them how to look after themselves. We can encourage them to make lifestyle changes that will improve their health in the long-term. We can provide the equipment and know-how so they can self-manage their illnesses. The starting point for all is working out what matters to the person – and helping them achieve that.

In this Local Government Association (LGA) report you will find examples of all of these approaches – and more. Councils and clinical commissioning groups are working together with other partners to make a real difference to people's lives.

Councillor Ian Hudspeth

Chairman, LGA Community Wellbeing Board

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Why is self care good for people?

Empowering people with the confidence and information to look after themselves when they can, and visit the GP when they need to, gives people greater control of their own health and encourages healthy behaviours that help prevent ill health in the long-term. In many cases people can take care of their minor ailments, reducing the number of consultations and enabling health care professionals to focus on caring for higher risk patients, such as those with comorbidities, the very young and elderly, managing long-term conditions and providing new services.

Key statistics:

- one in five GP appointments are for minor conditions
- 50 per cent of people with long-term conditions do not stick to their medication regimes
- four symptoms of ill health are experienced every fortnight by the average person
- 70 per cent of the NHS budget is spent on people with long-term conditions
- one in seven emergency admissions are preventable
- people are living longer and spending more of their extra years in poor health
- unhealthy eating habits and tobacco-use continue to be the biggest contributors to ill health, accounting for 10.8 per cent and 10.7 per cent, respectively, of the nation's total disease burden
- people managing their health and engaging in prevention activities could save the NHS around £30 billion by 2022/23
- health literacy is key to living a long and independent life and health education in

schools is crucial.

More cost-effective use of stretched resources allows money to be spent where it's most needed and improve health outcomes. Furthermore, increased personal responsibility around healthcare helps improve people's health and wellbeing and better manage long-term conditions when they do develop. This will ultimately ensure the long-term sustainability of the NHS.

Around 80 per cent of all care in the UK is self care. The majority of people feel comfortable managing everyday minor ailments like coughs and colds themselves; particularly when they feel confident in recognising the symptoms and have successfully treated using an over-the-counter (OTC) medicine before.

On average, people in England experience nearly four symptoms every fortnight, the three commonest being feeling tired/run down, headaches and joint pain and most of these are managed in the community without people seeking professional healthcare.

Despite people's willingness to initially self-treat, there are still 57 million GP consultations a year for minor ailments at a total cost to the NHS of £2 billion, which takes up, on average, an hour a day for every GP.

Research shows that people often abandon self care earlier than they need to, typically seeking the advice of a doctor within a period of four to seven days. The main reasons for this are:

- lack of confidence in understanding the normal progress of symptoms (eg a cold can last up to 14 days)

- the perceived severity and duration of symptoms
- reassurance that nothing more serious is wrong
- a prescription to 'cure' the illness, even though the same medicine may be available over-the-counter.

Often just simple changes aimed at meeting the needs of local communities can be very effective at encouraging increased self care. These include giving patients the information they need to care for their common ailments and to make healthy lifestyle choices, signposting people to the right local services and outreach work to provide health advice in non-traditional settings such as pubs, libraries and job centres.

How can councils get involved?

Local authorities are clearly a key partner for the health service in encouraging self care. In fact, in many areas councils are playing a leading role as the case studies later in this document show.

When considering self care, it may be useful to think of it as a house. The foundations are commissioning tactics that embed self care. One of the walls is supporting people to develop the knowledge and skills to self care, while the other relates to enabling staff to help them to do these. These walls are then bridged by a roof representing organisational systems that allow all of this to take place. The approach is known as the House of Care.

The Self Care Forum

National Self Care Week and the Self Care Conference are two of the main activities of the Self Care Forum, a charity passionate about furthering the reach of self care and embedding it into everybody's everyday life. The charity is predominantly a resource for people-facing organisations such as local authorities, clinical commissioning groups, surgeries, pharmacies etc wishing to support people to better look after their own health, and their family's health. Guides, case-studies, leaflets, material, including factsheets on self-treatable conditions are freely available from the Self Care Forum website to help progress self care. If you need help to implement self care strategies, please contact selfcare@selfcareforum.org

Case studies

Bracknell Forest Council: engaging community groups and clubs

Bracknell Forest Council has built on its involvement with the national Self Care Week by running a Year of Self Care and then setting up a community-wide network of clubs and groups that is seeing thousands of local people taking part in activities and looking after their health and wellbeing.

The challenge

Bracknell Forest was one of the first councils to embrace the national Self Care Week concept. It got involved in 2012. By the third year, events were being organised at more than 100 locations, including GP surgeries, children's centres, cafes and the local leisure centre.

There were a whole host of free events from Zumba and boxercise to organised walks. In total, 700 people got involved in 2014, but the council decided it wanted to do more.

The solution

Working with the local clinical commissioning group, the Berkshire-based council replaced a week of self care with a whole year. The idea was to create a theme for each month.

The topics covered were:

- introduction to self care (January)
- mental wellbeing (February)
- healthy ageing (March)
- physical activity (April)
- eating and drinking (May)
- carer wellbeing (June)

- learning and volunteering (July)
- children and families (August)
- workplace health (September)
- quitting smoking (October)
- winter wellbeing (November)
- sharing success (December).

The Year of Self Care was promoted via a dedicated website and on social media. The council's public health team arranged events as they did during previous Self Care Weeks, but the focus was very much an asset-based one involving working with existing community groups and clubs. The year-long celebration was repeated in 2017.

Council Public Health Consultant Dr Lisa McNally said: "The two years were incredibly successful. It helped us develop really good links with the community and that in turn evolved into what became known as the Warm Welcome programme."

The programme is essentially a network of local clubs and activities run by local people. They include everything from running clubs and organised walks to choirs and chess clubs. The groups are promoted on a dedicated website, while the council has run Community Expos to highlight what is available.

All the groups that join are assessed and vetted, before being promoted. As well as self-referral through the website, the groups are also put on the list for the social prescribing service to refer people on to.

The impact

Since the network started being developed, it has gone from strength-to-strength. There are now over 400 different groups that are part of it.

One of those is Fit for All, run by Deborah Miller. She said the support provided by the council was “wonderful”. She recently attended a Community Expo and said it was a “fantastic” event. “I spoke to a number of groups I didn’t know existed. It was great to see what was going on.”

Dr McNally said building connections like this has been an important reason for Bracknell’s success. She added: “Tens of thousands of people are now getting active – both physically and mentally – and socialising because of the way the local community has been linked in. This is having a tremendous impact on people.”

Official figures support this. Data from Sport England show that the number of physically active adults has risen by over a quarter, while those reporting they have enough social contact is also climbing, according to the Adult Social Care Outcomes Framework.

Lessons learned

Dr McNally said working with these local groups is a very different proposition than the normal commissioner-provider relationship councils traditionally have.

“We are not funding them – apart from a little seed money here and there – but we do support them in other ways. What we have learned is that the thing they most want and need is promotion. They do not have the time or reach to promote themselves so we have done that for them on social media and online.

“You need to think carefully how you do this. For example, we had a dad’s crèche group, ‘Who Let the Dads Out?’, which we promoted on Facebook.

At first we targeted dads aged 18 to 50, but then we realised we would have more success if we targeted the mums so they would get their partners to come. They did. It is now really well established.”

How is the approach being sustained?

The council has recognised that, for all its success with the Warm Welcome network, there are some groups that often miss out on information about the programme. These include older people and adults with learning disabilities who may not always find the internet accessible.

Bracknell Forest is now in the process of bidding for funding from the Social Care Digital Innovation Project run by the LGA and NHS Digital. It is hoping to get funding to pay for kiosks to be installed around the area allowing people to search for events close to them. There will also be an app that has been designed to be user-friendly for these groups.

Beyond that, the team is increasingly looking to work with the wider Frimley Health and Care Integrated Care System.

Dr McNally said: “Prevention is a key part of that work, but it is not something that many of these sustainability and transformation partnership (STP) areas have really got to grips with yet. We ran a public health social media campaign across the five councils and clinical commissioning groups (CCGs) in the Frimley Health system in August promoting the benefits of physical activity. This is something we want to do more of.”

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Bradford Council: creating an easy-to-understand self care campaign

Self Care Week has been running across Bradford and Craven for a number of years. Last year the council's public health team and three clinical commissioning groups introduced a new campaign: the Make One Change Challenge. It inspired thousands to start taking action.

The challenge

The Bradford District and Craven region has been an active participant in Self Care Week since 2012. The work is delivered through the Self Care and Prevention Programme, a joint partnership between Bradford Council's public health team, the three local CCGs and voluntary sector.

Each year the area runs a series of events encouraging people to become active and engaged in their own health and wellbeing. This has included pop-up events in supermarkets, shopping centres, pharmacies, GP practices, community centres and high streets where sports and leisure services have run fitness demonstrations.

To encourage the public to take up physical activity the council has offered free gym and swim trial passes, while pharmacists and other partners have been run a variety of health related awareness sessions in schools and other community settings.

Mark Thornton, the council's Health and Care Partnerships Project Manager, who takes a lead in organising Self Care Week, said: "Self Care Week has always been very popular and we work collaboratively with our partners to plan and deliver a comprehensive week of activities and events.

"In 2017 we started thinking about how we could engage people further. We wanted to develop a campaign that would generate interest on social media and then be sustained throughout the year."

The solution

The Self Care and Prevention Programme came up with the Make One Change Challenge as an approach to encourage and support the public to make simple lifestyle changes.

Mr Thornton said: "People lead busy lives so we wanted a concept that was easy to take up. It is about like avoiding sugary drinks, walking briskly for 10 minutes a day, eating more fruit and veg or taking up a new activity."

To help promote the campaign they developed a toolkit of branded material, both hard copies and online versions. These were distributed across the health and care sectors as well as voluntary sector partners.

Social media activity was also encouraged. Partners and members of the public were asked to take photos, post selfies and tweet their Make One Change Challenge with the hashtags #makeonechange and #selfcare4life

The impact

Around 30 Twitter accounts were regularly tweeting about the campaign, including the council, local NHS trusts and third sector partners, reaching many thousands of people. At events held in church halls, supermarkets, GP practices and leisure centres, more than 2,000 people pledged to make a change as part of the Make One

Change Challenge.

Mr Thornton said: “They are just the pledges we know about and I’m sure many others will have taken up the challenge away from our organised events. It resulted in our most successful Self Care Week to date and it left a legacy too as many partners have continued promoting the initiative throughout the year.”

An example of this can be seen through the work of the voluntary sector organisation, New Horizons, which has included the Make One Change Challenge in the physical activity and healthy eating programmes they deliver out in the community.

Lessons learned

One of the most popular events last year was the launch event at Airedale Shopping Centre, Keighley, including a pop-up shop, which was visited by hundreds of people during Self Care Week.

Mr Thornton said: “One of the key lessons learned from the week was the power of offering people an incentive. We gave away free pedometers and it was a great way to engage people into having a conversation.

“People were encouraged to talk about how they could improve their health and wellbeing and the Make One Change Challenge gave them an opportunity to start making the changes they had identified.”

How is the approach being sustained?

The Make One Change Challenge was once again part of Self Care Week in 2018, but it was also promoted alongside another campaign, Living Well.

During the week the public was encouraged to complete a Living Well Planner by taking up the Make One Change Challenge and making a change every day to improve their health and wellbeing. By taking part in the challenge, it is hoped people will be

encouraged to follow their Living Well Planner after Self Care Week for a healthier, happier life.

The health and care workforce is also being encouraged to promote self care. There are three levels of training currently being offered through the Self Care and Prevention Programme – a basic e-learning course, Making Every Contact Count training and Conversations for Change, which promote motivational interviewing-style approaches.

Mr Thornton said: “We want people to take responsibility for their own health and wellbeing but the health and care workforce require the knowledge, skills and confidence to empower the people they are working with. The training is helping to ensure that they are able to do that and build on what we have achieved across Bradford District and Craven so far.”

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Cheshire: engaging the whole community

In Cheshire, two CCGs and the council have worked together to engage the wider local community in self care by recruiting a network of champions and setting up a Self Care Award to entice employers to get involved.

The challenge

When Noreen Caldwell started working as the public engagement and involvement manager for NHS South Cheshire CCG and NHS Vale Royal CCG two years ago, she recognised the self care agenda was a key priority. But to have an impact she would need the help of others to spread the message.

Ms Caldwell said: “Self care is something you need the whole community to get involved with. You cannot just have it driven by the NHS or local council, you need the wider public, the police and voluntary sector engaged.”

The solution

Her first step was to recruit self care champions. The aim was to create a network of experts who could advocate the importance of the issue and explain to the public about what self care means.

Half-day workshops were set up to train the champions. The first to sign up were the council’s local community development team, but these have since been followed by police officers, members of local charities, GP practice staff and members of the local Healthwatch branch.

As well as promoting self care messages as part of their day-to-day work, the champions were instrumental in helping Ms Caldwell run Self Care Week in 2017. Stalls were run in community venues and local supermarkets, leisure providers ran taster sessions and GP practices engaged their patients.

She said: “We had a fantastic response to Self Care Week. It was the first time we had done it and with the champions on board we were able to get all sorts of conversations going and people thinking about what they could do. There was a big emphasis on physical activity. But afterwards we decided we wanted to do something to engage educational establishments and businesses even more to build on what had been achieved.”

This then led to the creation of a local Self Care Award. There are three levels – bronze, silver and gold – to reward how active each organisation has been. They are open to both the public and private sectors.

To achieve bronze, the organisation needs to appoint a self care champion and send them to one of the workshops and start drawing up an action plan. Silver requires the organisation to start actively promoting the benefits of physical activity, while for gold they must introduce measures to take mental health and wider wellbeing.

The impact

In little over a year, more than 70 self care champions have been trained, and the local community development team at the council has taken it a step further by running workshops themselves.

Councillor Janet Clowes, Cheshire East's Cabinet Member for Adult Social Care and Integration, said the council saw it as a "really exciting opportunity" to address health inequalities. She said staff have used it to go on to work on a number of specific projects, including:

- helping young mums eat healthily on a tight budget
- encouraging the LGBTQ community to become more physically and socially active
- working with older people on nutrition, diet and domestic violence.

And she said the work has continued to reap benefits. "Many of the people have continued to get together and carry on supporting each other in their self care journeys which is fantastic."

Meanwhile, the award has started gaining traction. Three schools have achieved bronze with another 10 expected to get the accreditation soon.

The first school to gain the accreditation was Audlem St James Church of England Primary School. The school ran a session at the start of the school holidays on the best ways to say 'sunsafe' during the summer.

Headteacher Rebecca Jewitt said they based the advice around the five S's – slip, slop, slap, slide and shade. "Our pupils are knowledgeable about how to be sun smart and look after themselves. The awards are great – and we're looking forward to working towards our silver and gold."

Local businesses have also started signing up, including the local Nantwich Museum, which is in the process of training its army of volunteers. Museum manager Elliot Goodger said it was great to be involved. "The museum is at the heart of the community. We are part of it and will do what we can to help improve the health and wellbeing of local people."

Lessons learned

In delivering the workshops and getting the self care message out there, Ms Caldwell has worked hard to make the messages relatable.

One of the most effective methods has been a visual prompt based around the message that it does not cost much to take care of minor ailments at home. For £10, a range of medicines, including painkillers, antihistamines, diarrhoea relief, constipation relief, throat lozenges and antacid, have been purchased and attached to a board.

"It has really struck home," said Ms Caldwell. "I have used it in the workshops and when I am talking to the public. It really gets people thinking – especially when you consider the cost of a prescription."

How is the approach being sustained?

Ms Caldwell said the main goal going forward is to build on what has been achieved so far. Talks are under way with one of the major employers in the region to get them on board with the Self Care Award.

"Students are one group of our local population that we haven't engaged with as much as others – I think they believe that they're indestructible. Based on this, we're going to deliver some focused engagement with Cheshire Colleges to get these self care messages out there to our students."

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Huntingdonshire District Council: getting cancer and cardiac rehab patients active

Huntingdonshire District Council has worked with its local academic health science network to encourage cancer and cardiac rehab patients to become active and involved in the self-management of their recovery. Patients are being taught how to use remote monitoring technology, while taking part in exercise classes.

The challenge

Cancer and heart disease are among the most common conditions – and killers – in the country. For those who survive, self care can play an important role in improving quality of life and reducing the risk of death.

But Macmillan Cancer Support has estimated about eight in 10 cancer survivors are not active enough. The charity says this has a major impact on their lives with many reporting they are struggling with difficulties from tiredness to weight gain even years after treatment has finished.

Meanwhile, good rehabilitation and self-management of their health for those with cardiovascular disease can reduce the risk of an early death by a third, according to the British Heart Foundation. Yet less than half of patients follow the recommended course of rehab.

The solution

A project to encourage better self care among cancer and cardiac patients was launched in Huntingdonshire last year.

The local district council and the Eastern Academic Health Science Network worked with the local hospitals and technology company Aseptika to launch Active+.

The programme teaches patients to use remote monitoring technology, including activity trackers, blood pressure monitors, scales and peak flow meters for lung function, to keep an eye on their health. They also routinely record how regularly they are taking medicine. All this is logged electronically and patients are taught how to access and review their own data during the eight-week course.

The course runs in conjunction with weekly exercise classes at the local leisure centres as part of their ongoing rehabilitation. A social group takes place after the class to encourage discussions between participants and allow questions to be asked of professionals.

The Active+ option is being offered in three of the four cardiac rehabilitation courses in the area and has been extended from two to four cancer classes run in conjunction with Hunts Community Cancer Network.

Darren Lander, Active Lifestyles Development Officer for Huntingdonshire District Council, said: “We teach them how to use the data and what they need to look out for. The idea is that when they go to their GP or see other health staff they are fully aware of their health and are able to have informed conversations. It also encourages them to take good care of themselves. They become expert patients.”

The impact

Those who have taken part are full of praise for the way they have been able to take control of their conditions. Maggie, a cardiac patient who completed the course, said: “It made me feel much more secure about my health, I can print out data and take it to the next doctor’s appointment instead of having to remember how I’ve been feeling. It’s all there in black and white. I hope by looking at the charts, I won’t have to go back to hospital.”

Meanwhile, Colin, who has had cancer, said: “When you are told that you have a life-threatening condition, it damages both your confidence and self-esteem. The Active+ programme brought back my confidence. It has given me back my life.”

Data from the first 20 patients who completed the course has also showed positive results. There was a 15 per cent improvement in patient activation measure, an assessment of how involved they are in their own self care, and a five per cent improvement in overall health.

Lessons learned

It has been left up to participants to decide whether to take part in the Active+ side of the rehabilitation. Some just choose to do the physical activity classes and do not use the technology to monitor their own health.

Mr Lander said: “You have to be prepared for the fact that some people are worried about using the technology and understanding the data. We spend quite a bit of time supporting them with it and encouraging them.

“Some people will be resistant. We have found once they start using the equipment they understand the benefits and continue to use it. Having people who have already started the course available to talk to them at the start can be very effective. When they see others do it, it gives them confidence to try it themselves.”

How is the approach being sustained?

The Eastern Academic Health Science Network (EAHSN) is now encouraging other areas to start running Active+ courses. The network has produced a six-step guide on how to use Active+ and the benefits of it, which has been targeted at health and care staff locally. Talks are currently under way with a number of councils and hospitals.

It forms part of a sustained focus on self care EAHSN. The network has worked with Essex Healthwatch to promote self care on social media, including using Healthwatch Harriet, a 10-year-old girl who appeared in a video that went viral last year of her grilling senior health leaders about jargon in the NHS.

EAHSN Transformation Director Victoria Corbishley said innovation is going to play an important role in the local health economy in the future. “We’re delighted that these collaborative projects have had such a positive impact on the community. We anticipate implementing supported self care will help many others to set up similar programmes in the near future.”

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Leeds City Council: using the House of Care model

Leeds City Council and the local NHS have adopted the House of Care model as a framework for developing self care. Health and care professionals have been given training and patients are being empowered with the skills and confidence to self-manage their own health.

The challenge

Back in 2011/12, Leeds City Council and the local NHS were working closely with Sir John Oldham, from the Department of Health, on a new model for integrated care focused on supporting people living with long-term conditions.

There were three strands to the work – developing integrated neighbourhood teams, risk stratification and supporting people to self-manage their conditions.

Leeds Public Health Consultant Lucy Jackson said: “It’s fair to say the first two proved to have more traction at the time than self-management, but through committed people across the health and care system in both the statutory and third sectors we have continued to work on that in the preceding years. Self-management requires a culture change – that is more difficult to achieve.”

The solution

Working together, the NHS and Leeds City Council set up a self-management steering group and adopted the House of Care model to centre care around people and ensure they have the appropriate skills to be able to self-manage their condition.

One of the first steps – started in 2013 – was the implementation and roll out of Collaborative Care and Support Planning across primary care. The aim of this approach is to transform the annual long-term conditions review to become a more collaborative process, putting the person in the driving seat of their care and helping them set realistic goals. In order to establish this approach, a programme of training for staff was put in place to embed the approach. This represents one of the ‘walls of the house’.

The other wall is about developing engaged people. One example of how this has been achieved is peer support. There have been 10 ‘Breathe Easy’ peer support and exercise groups set up across the city for people in partnership with the British Lung Foundation for people living with respiratory disease. A peer support worker has also been appointed to help encourage other similar schemes to get off the ground.

But it is not all about group working, said Ms Jackson. “You have to realise some people do not like to take part in groups so the key thing is to support people to connect in a way that is important and fits for them. For example, it can be via apps or WhatsApp groups in a much more informal way. We have also encouraged community champions to help push this forward, working in their local community.”

People have also benefited from the well-established social prescribing services that has developed over the last four years. There are currently three separate schemes – a legacy of the fact there were once three CCGs in Leeds.

They support people to consider what is important to them and offer people access to everything from social or economic support to physical activity opportunities. Those who are referred on to the scheme are given a link worker who helps them find the right 'prescription'.

The impact

Training on Collaborative Care and Support Planning has been provided to over 80 per cent of staff from across all 101 GP practices. It means in the last quarter more than 17,000 consultations have taken place using this approach.

Those who are prescribed on to social prescribing report high levels of satisfaction. Over 70 per cent of those referred take up the offer of a social prescription with one of the schemes reporting that over three-quarters of participants have improved health and wellbeing, around 5,000 people are taking up this opportunity every year.

The success has also been recognised by the Health Foundation think-tank. It has praised Leeds for its "dedicated" approach and for "creating change and shifting old ways of working".

Ms Jackson said she was delighted with how it has gone. "We wanted to ensure people in Leeds felt confident and supported to manage their own health and live independent and active lives."

Lessons learned

Developing work like this requires patience and time. To date, much of the work has had to be funded from either the NHS or the public health budget.

Ms Jackson said: "We have spent a lot of time in the past few years talking to commissioners and providers. You cannot underestimate the amount of time and effort needed to keep people from directors down to the frontline involved in a culture change programme such as this.

"They understand the importance of the concept but finding the money to pay for it is difficult. It does not generate immediate results, so I have used an economic modelling tool developed by the Health Foundation – called Realising the Value – to help put the case."

How is the approach being sustained?

The work has recently been given Improved Better Care Funding to help invest in a culture change programme named 'Better Conversations' alongside other self care programmes.

These are now at the heart of the Leeds Health and Care Plan. The 'Better Conversations' training will include mental health and hospital services to ensure the entire NHS will be engaged.

Three facilitators and two support workers have been employed to carry out the training. The facilitators will also work directly with frontline staff looking at how they can embed self care into their everyday activities.

Ms Jackson said: "Previously we've relied on training members of staff to deliver it to their colleagues, but having these dedicated people will allow us to do much more and really embed this approach across the system.

"We are picking an number of key areas for focus, such as respiratory disease, people living with frailty and cancer. But eventually we want all the different parts of the NHS and social care to be encouraging and empowering patients to self manage."

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Lincolnshire County Council: getting people engaged

The NHS and county council in Lincolnshire have worked with partners to use social media and the local press to get the message out there about the importance of self care. It has helped reach thousands of local people.

The challenge

The success of running any public campaign rests on reaching lots of people. In the past, different agencies in Lincolnshire had individually promoted Self Care Week held in the autumn, but with little impact.

So in 2017 the four CCG, three NHS trusts, county council, district councils, County Sports Partnership and voluntary sector came together to set up a task and finish group to look at how to promote self care more effectively.

The solution

The group identified social media and the local press as two key priorities. A number of inspirational case studies were identified – mainly focused on people who had got healthy against the odds, such as a woman who had gained weight after fracturing her skull following a fall from a horse, but then took up physical activity because she did not want to become a burden on the NHS which had saved her following the accident. Local NHS experts also penned columns. These were distributed to local papers via press releases.

Each partner also scheduled posts on social media channels, including Twitter and Facebook. These included encouraging people to try Public Health England's One You quiz, which details what changes they can make. Posts were also sent out promoting the fact local pharmacists have a wealth of knowledge to support people, while there was a big push on getting people active.

All partners promoted Active Lincolnshire's activity finder website, while agreements were reached with local leisure centres to offer free passes, consultations and classes throughout Self Care Week. Volunteering and activities such as lunch clubs and day centres were also encouraged to combat isolation among older people.

At the activity events, an NHS pocket guide was handed out providing advice about self-care and which services to access when they need medical support. Scratch cards were also produced to be used as conversation starters about which services should be used in three different scenarios.

The impact

The partners had great success in reaching and engaging people. The local newspapers, the Lincolnshire Reporter, Lincolnshire Echo and Boston Standard, covered the case studies and other elements of Self Care Week, which, coupled with the social media engagement, meant the messages reached in excess of 250,000 people. Meanwhile, more than 70,000 copies of the NHS pocket guide were handed out.

Kevin Gibson, Engagement Manager at Lincolnshire West CCG, said: “We really wanted to create a buzz around Self Care Week. We wanted to get people talking about it and involved. By coming together, we were able to achieve something that we had not before. It started a real conversation about self care and that has continued.”

What is more, the benefits were achieved without any dedicated funding other than people's time. The cost of the campaign materials, such as NHS pocket guides and the scratch cards, came from budgets assigned to other campaigns, such as the winter communications budget. Meanwhile, the leisure centres absorbed the costs of the free classes and passes.

Lessons learned

The task and finish group recognised that even with some widespread social media and local newspaper coverage, there may be certain groups that could be resistant to the messages.

The group identified students and parents with young children as two of these and so it organised targeted interventions. To tackle this, officials from the partner agencies attended local campuses and children's centres during Self Care Week to engage directly with members of the public.

How is the approach being sustained?

Mr Gibson said that direct targeting convinced the agencies to carry on working directly with the public.

“We were really pleased with how it developed so we have tried to build on it by embedding it in what we do. For example, we went to Fresher's Week this year to promote self care. We were stressing the importance of physical activity, getting involved in clubs and what opportunities there are for physical activity in the county.”

Other projects have also been run, including work with the rough sleepers team to talk to homeless people. And, of course, a co-ordinated approach to Self Care Week has been running once again this year.

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Manchester City Council: putting theory into practice

A self care strategy was published two years ago in Manchester. Since then the city council and its partners have started implementing changes that should see a revolution in self care.

The challenge

Manchester City Council, working with the local NHS and voluntary sector, published a Self Care Strategy in 2016, which promised to place the issue at the heart of the city's approach to health and wellbeing.

The strategy set out four basic aims:

- encourage people to access, understand and use the information they need to care for and support their own health and wellbeing
- enable people to identify lifestyle changes and goals for themselves, improving their physical and mental wellbeing and preventing ill-health
- promote collaborative decision making between people with physical and mental long-term conditions, their carers and the teams that work with them
- facilitate the changes in the system required for enabling self care.

It recommended taking an asset-based approach with organisations and frontline practitioners forming new relationships with the people they work with to enable self care. To achieve this, it recognised it would require “large-scale cultural and behavioural change”.

The solution

The steering group overseeing the strategy put Sharon West, the Population Health Programme Manager at the Manchester Local Care Organisation, a partnership between the Manchester City Council, NHS Manchester University Trust and Greater Manchester Mental Health Trust and Manchester Primary Care Partnership, in charge of implementation.

One of her first steps was to introduce a training programme, Person, Partner, Place (PPP) at the start of 2017 with funding from Health Education England North West. A consortium of The Big Life Group, Manchester Metropolitan University and The Performance Coach was chosen to deliver it.

It is comprised of three modules – an introduction, learning how to facilitate asset-based care and having self care conversations. Staff from the community, primary care, social care, housing, health and voluntary sector have all been taking part.

Ms West said: “It is a different way of working so we knew the most important thing to do first was to support our staff to encourage self care. We wanted to help them better understand asset-based approach to care, how to tap into those local resources and what the impact on people's health will be if they do. Then we wanted to build their skills and knowledge and capacity to successfully deliver these approaches to people.”

The impact

More than 300 staff have taken part in the programme so far. An evaluation, which looked at the first 118 through the course, concluded it had had a “good impact” and resulted in a “significant shift in learning, awareness and skill development”.

The report said attendees found the training interactive and informative and a majority of those who responded to questions about impact on practice, reported that the training had led to them adapting their approaches and they had noticed a positive impact with their clients.

Some 80 per cent of those who took part in module one said they had applied their learning into practice within two weeks, while 100 per cent of those who completed the final module said they would recommend it to practitioners.

Meanwhile, 78 per cent of those who completed the second module reported they had a good or high level of skills to help empower patients to self care.

Feedback from individuals who took part was also incredibly positive. One described the course as “fantastic and inspirational”, while another said it would help them implement the new way of working with “passion, commitment and dedication”.

Lessons learned

Ms West said you have to accept cultural change is hard to implement and requires patience. She cites an example shared by a falls specialist nurse who has undertaken the training. The training has encouraged him to take a holistic approach, to find out what else is going on and what’s important to the individual.

“However, what comes out of the conversation is that the fall, the reason for the assessment, is not the key issue as far as the patient is concerned. The predicament is that he has to complete a falls assessment because he has targets to meet while his organisation has a key performance indicator (KPI) that it needs

to meet.

“The system is sometimes a barrier. How do you solve that? It takes time. At the moment the focus is on solving the presenting problem, in this case the fall the reason the person was referred to the service in the first instance. We have to accept that change takes time and will not happen overnight.”

How is the approach being sustained?

While the commissioned training course has now finished, a number of staff who took part have been on train-the-trainer training to ensure the skills and knowledge can be cascaded across the workforce.

“This will help it to become sustainable,” said Ms West. “A PPP trainers practitioners’ forum has also been set up which meets regularly and provides staff with a place to discuss what they have learned.”

Going forward, Manchester PPP programme is turning the attention to the final strand of this work – empowering patients. “It is in the early stages,” said Ms West. “We are looking for funding. We want people with long-term conditions to be able to access and own their own records wherever they are – whether they are in a hospital, in another city or just at home.

“We need to make it easy to understand so it is useful to help them manage their condition by including information such as the medicines they are taking. However, we have to consider what information is appropriate and take into consideration an individual’s situation. For example it would be highly inappropriate for a person to see a cancer diagnosis in their records before they have had a conversation with their doctor. We have to be mindful of how this is managed in the future.”

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Milton Keynes Council: promoting self care on a super local level

Milton Keynes takes part in the national Self Care Week. But as well as running events around the district, the council and CCG have also run a super local version on one of the most deprived estates in the area.

The challenge

Self care has been of interest to the council and local NHS in Milton Keynes for some time. In 2017, the two bodies agreed to work together more formally, forming a steering group with other local partners, including Healthwatch MK and local GPs.

The group helped to organise a range of activities for Self Care Week in 2017. This included a toolkit for staff and a public health campaign promoted across social media and in the local press. One part of the campaign was aimed at promoting the alternatives to the GP, such as the pharmacy, the NHS website and NHS 111.

But the group was also aware that some of the most deprived communities were the most difficult to reach and least likely to get involved in events like these.

Pharmacist Sonal Mehta, who is the lead for self care for the CCG, said: “We decided we wanted to do something on the super local level. Self care can be a funny topic. People don’t know that it covers many different activities, but once you explain it they really understand it. We knew we had to do something different to reach out to hard-to-reach communities.”

The solution

The Lakes Estate was chosen to pilot this approach. It is among the 10 per cent most deprived neighbourhoods in the country with half of children living in poverty. The estate was built in the 1960s and is now home to about 5,000 people living in 2,200 homes.

Working with her colleagues from Milton Keynes Council’s public health team, Julia Banham and Liz Wilson, and Bletchley and Fenny Stratford Town Council, Ms Mehta engaged with youth club leaders, residents groups and the local school. A joint group – the Lakes Estate Self Care Group – was formed and together they began to plan a special calendar of events for Self Care Week in 2017 to take place on the estate.

The main focus of the events was the community centre and GP surgery. National charities, including Age UK and Brook, had information stands and ran clinics, while there was a healthy eating and nutrition stall at both sites offering advice alongside fresh fruit and other healthy snacks, donated by the local supermarket.

An interactive game was also set up. The purpose of the game was to allow the team to engage with the public and have conversations about self care. It was based around finding solutions for common ailments by navigating a ‘treatment path’ across a board. Players were given a bear with logos for NHS 111 and the local pharmacy for taking part.

Impact

Ms Mehta said it was an “incredibly successful” week. “The game worked really well in particular. It was a great ice-breaker. We had lots of people coming to look at the displays and engaging. What was really pleasing was that each day we would end up having really in-depth conversations with five to 10 people about self care. There was no cost – just people’s time. It goes to show that you don’t always need a bucketful of resources.”

But it did not end there. Since Self Care Week, the team has returned and run events at the local school. They include health and wellbeing sessions during the induction days for the new intake.

Ms Mehta said: “They’ve just been about re-enforcing healthy messages and making sure parents and children understand self care. When children start school there are always lots of bugs and illnesses flying around.”

Lessons learned

Since Self Care Week has taken place, the team has continued to meet with residents of the Lakes Estate.

Ms Mehta said: “We have a number of people involved, but it became clear it was perhaps not working as well as it could. We had a formal meeting structure and I think that was putting some people off. We found ourselves only engaging with the most active and involved people in the community.

“It got us thinking about how else we could engage different people. We are now looking at changing things a bit by linking in with some of the existing groups, like coffee mornings, and engage them that way. You need to think outside the confines of your normal way of working.”

How is the approach being sustained?

The Lakes Estate is undergoing a major regeneration programme with parts of the estate being demolished and homes being rebuilt. That has allowed the self care group to tap into that process to help them build on what has been achieved.

A housing needs assessment was carried out during 2018, which saw residents answer questionnaires. The self care group was able to get a number of health-related questions included.

Ms Mehta said: “It gave us some really good ideas about what the needs were. There was a lot of loneliness and anxiety – and general mental health problems. We are now going to focus on those in our next initiative. We will be repeating our local Self Care Week next time. But it will be in three areas instead of just one. We know this is an effective way to approach this.”

Ms Wilson agrees. “Self care awareness is key to prevention, being part of the local project has been as much of an education for us about how we work with local communities in the future.”

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Somerset County Council: using social prescribing to promote self care

The council and local NHS have identified social prescribing as a key priority in terms of encouraging self care. They are working with the Richmond Group of Charities and local partners to spread social prescribing equitably and sustainably across the county.

The challenge

In Somerset about 175,000 people – just under a third of the population – have a long-term health condition. These are conditions for which there is no cure. Medical support can help, but these patients also have social, emotional and practical needs.

These problems cannot always be addressed within the GP surgery. Instead, they require people to be connected to local community services and activities to tackle problems such as isolation and promote good wellbeing.

This in turn requires local communities, voluntary groups, professionals, NHS managers and council officers to work together, as partners of people themselves. In doing so, patients can be empowered and engaged in their own self care.

The solution

Over recent years, a number of areas in Somerset have set up their own social prescribing schemes that link people to peer support groups, community groups and social networks where they live.

For example, in the town of Frome, a project was created by a GP surgery in 2013. Known as the Compassionate Frome Project, it has health connectors who act as a bridge

between the patient's medical and social needs and community connectors to link patients with support including help with house and debt problems as well as choirs, exercise classes and lunch clubs.

GPs have access to a directory of support, but the community connectors are also on hand to provide one-to-one help and home visits to work with patients and get them involved in activities.

In other parts of Somerset there are some slightly different models. For example, South Somerset's Symphony Project has 50 health coaches who provide a social prescribing function and in West Somerset village agents are working with the Living Better Programme. Meanwhile, the council's adult social care team has developed a 'community connect' approach to enable its social workers to link people directly with micro-providers in rural areas.

The impact

People with all sorts of conditions and circumstances, from chronic pain to mental illness, have been helped through these schemes to improve their lives.

Those who have been involved are full of praise. One patient in Frome said: "The doctor said this would probably help more than tablets – I think it has." Another praised the approach. "It think it's a progressive way of bringing health to the community. It's very positive."

Academic analysis also suggests these approaches are effective. This, along with it being the "right thing to do", convinced the council, local CCGs and acute NHS trusts

that social prescribing should be available equitably and sustainably across the county.

Given the importance of strong and resilient communities for successful social prescribing, Somerset is taking a collaborative approach to spreading the approach further. Working together with the Richmond Group of Charities and the Somerset Voluntary Community and Social Enterprise Strategic Forum through the Stronger Communities for Somerset group, the partners secured a £30,000 development grant from the Life Chances Fund, which was matched by the South West Academic Health Science Network.

The partners recognised it was important to explore the opportunities for social prescribing and the barriers that may prevent its spread further, from different perspectives.

Lessons learned

Several pieces of research were undertaken in the first six months of 2018. They included in-depth work with 100 residents and 100 GPs. This showed there was a real appetite for more social prescribing.

Dr Will Harris, the CCG's Primary Care Lead, said: "Although family doctors support people with their day-to-day health needs, good health and wellbeing is not just about the absence of illness. GPs want to work with the voluntary sector and communities to address the social, emotional or practical needs in people's lives and social prescribing has been shown to offer a practical and effective way to addressing loneliness, to improving diet and physical activity."

The research also concluded that there was not a single model that should be developed county-wide across Somerset. Each area has different infrastructure, assets and relationships upon which to build.

Richmond Group National Programme Manager Chloë Reeves said: "We initially looked at spreading social prescribing through an outcomes-based contract, but the research suggested this 'blanket'

approach might work well in some parts of the county but less well in others.

"Something more akin to a 'quilt' – knitting together what works well in each part of the county – makes more sense. Every district is different, so why try to pursue a single way of developing and implementing social prescribing?"

How is the approach being sustained?

The partners are now working toward spreading social prescribing schemes in 2019.

A follow-up mapping exercise across the county showed that three of the 10 districts were starting from a lower level in terms of community assets, infrastructure and collaborative working, which would impact their ability to support successful social prescribing.

It is recognised that in some areas – particularly these three – there will need to be investment, perhaps in the form of new or extended roles, dedicated to building capacity among the voluntary and community sector.

There is also likely to be a need for some seed funding to get new groups off the ground, as well as funded link worker to work with individuals and act as a bridge between their social and health needs.

Councillor Christine Lawrence, Chair of the Health and Wellbeing Board, said this should help embed social prescribing across the county. "It marks an important next step in the shared commitment in Somerset to work together to build community resilience and improve the wellbeing of our population across the statutory, voluntary, community and social enterprise sectors."

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