

17th Annual Self Care Conference

Getting serious about prevention

Speakers at the Annual Self Care Conference emphasised the need for the NHS to “get serious” about prevention, and to make far greater use of healthcare professionals’ skills in this area. Wendy Nicholson, lead nurse for children, young people and families at Public Health England, called for greater recognition of the self care role of public health nurses – community midwives, health visitors, district nurses, school nurses and especially general practice nurses. These professionals are well-placed to find out what people and communities actually need, and we need to raise their profiles and use them more effectively, she said.



Ms Wendy Nicholson (Public Health England)

“All Our Health” is a new toolkit being launched by the Department of Health and NHS England to help maximise the contribution of healthcare professionals to Prevent, Protect and Promote - prevent avoidable disease, protect health and promote wellbeing. We want to empower people and communities, but to do this we must also empower the workforce, supporting them with evidence and measured impacts, said Ms Nicholson.

She also emphasised the need to break the cycle of dependency on “the mothership” of primary care and switch the public mindset away from the belief that the only “successful” medical consultation is one that concludes with a prescription.

Children and the young as self care champions

We can learn a lot from children and young people about how to communicate, and we need to be working with schools and utilising social media, said Ms Nicholson. She pointed to successful schemes with Brownies and Cubs, who can now receive digital badges for their self care knowledge; these enable them to educate their friends and families about a range of topics such as healthy eating and oral health, as well as other important issues including bullying.

Emma Freda, a delegate from HealthWatch England’s Bedford Borough told the Conference that the branch has 15 Youth Ambassadors aged 16-19 years and is recruiting more, to talk about health issues to school children in years 3, 4 and 5 who live in deprived areas of the borough.

The first pilot for Bedford Borough’s scheme is Eye Heroes. Run with Moorfields Eye Hospital, this project aims to raise awareness about avoidable blindness by empowering children and young people to help adults in their communities understand eye health issues and the importance of regular eye checks. It is winning national acclaim and is soon to be rolled out nationwide, and Emma said the branch is now also looking at other such initiatives. “We know that young children benefit from slightly older ones talking to them,” she added.

Health literacy “must be taught in schools”

Today’s schoolchildren are now required to develop competencies in a wide range of literacies – financial, computer, scientific, document and quantitative as well as English - but health literacy is not regarded in the same light, nor is it a compulsory part of the school curriculum. But proficiency in health literacy has now become essential to maintaining health and wellness, said education and public health expert Dr Selwyn Hodge.

With the growth of the NHS, people’s ability to look after themselves has declined rapidly, and we have become increasingly dependent on healthcare professionals, particularly GPs. People now visit them for the most minor problems, blocking the system and costing the NHS millions of pounds every year, noted Dr Hodge, who co-chairs the Self Care Forum.



Dr Selwyn Hodge (Self Care Forum)

“More worryingly, when people can’t get to see their GP they go to A&E – which increasingly, for some communities, has now become their first point of contact anyway,” he added.

Dr Hodge called for formal health education to be introduced into all schools in England, from nursery to sixth form – and stressed that this should not just consist of seasonal or basic messages – eg, “cover up in the sun” and “don’t smoke” - being delivered by “unwilling and untrained teachers in tutorial time.” Instead, this has to be a properly planned curriculum, taught by teachers trained in the subject - and inspected by OFSTED, as this is the only way to ensure quality, he said.



Dr Phil Hammond (GP, broadcaster, author)

Dr Phil Hammond, the broadcaster, writer, comedian and campaigner, also called for resilience to be taught from school age upwards, to help people deal with anxiety over their health issues. When people become ill, he said, they use his eight-point advice plan, known as CLANGERS, which he has devised to help people live as healthily as possible by:

C connecting with people. Don’t live in isolation, he advises, and also points out that people prefer to connect with healthcare professionals than getting information off the Internet.

L learning new things and continually challenge yourself. And learn about your condition, he said, but stressed that this can only happen in a safe environment.

A becoming active.

N noticing the world around you – and noticing the balance between negative and positive thinking.

G giving something back – smile, volunteer, have something to care for – get a dog!

E eating well, including taking notice of portion size.

R relaxing, take time out to chill, meditate.

S sleeping – six to eight hours good-quality sleep a night is essential.

Healthcare begins with self care, and self care begins with self-love and self-compassion, Dr Hammond told delegates.



The People's Panel

The People's Panel

In a new feature at this year's Conference, delegates heard from a People's Panel of consumers and patients about how they use health services and their feelings about them. The panel members were asked: when you are unwell, what is it that makes you consult a healthcare professional, and what makes you decide which particular professional to approach?

All responded that they would only visit their GP if they suddenly had a problem that they had not experienced before. Several had tried online self-diagnosis – and wouldn't do so again. "I don't look online now – you can scare yourself witless, and going the self-diagnosis route can be very dangerous," said Diane, a mother of two young children. However, she added: "when children are small and they can't tell you what's wrong and it's unusual, then yes, I would consult my GP."

Diane has a keen interest in self care, but said that she had only become aware of the self care section of the NHS Choices website as a result of attending the Self Care Conference. This resource should be patients' and consumers' first point of call, she agreed, but emphasised that she had not previously known about it.

Worryingly, none of the panel members were aware of this resource or of other national self care initiatives, such as the Stay Well This Winter Campaign, and they called for these to be much more widely publicised.

"I have full faith in the NHS – it delivers when it really matters. Self care is a wonderful concept but how it is promoted is a real concern," said retired probation officer Amrik.

Student Ellie, who has recurring medical issues and is living at home, said that if she experiences anything unusual: "I ask my mum. But it's not the same for students living away from home," she added.

All the panel members were concerned about what they saw as the potential for wasting healthcare professionals' valuable time. Joe, a recent graduate from Brighton, said he visited his GP after experiencing a headache that had gone on for several weeks. "I told my doctor that I needed to know how long I should wait before seeking help. The doctor said this was the right decision, But, I told the GP, 'I don't know whether I should be here. The symptoms aren't stopping me from doing anything'," Joe told the Conference.

In general, he added: "I wouldn't go to the GP unless I had broken a bone or feared I wouldn't make it through the night."

The panel members all agreed that a long-lasting cold would not be a reason for consulting their GP. "I would drink more water, take rosehip syrup, eat fruit, sit and lie down more, and listen to my body," said Brenda, a retired home care officer from Sussex. However, she added: "but then, I'm not having to go to work or look after children."

What about using other services?

Panel member Seb, who has ulcerative colitis, is a self-taught patient expert and is familiar with what are usual symptoms for him. "But on two occasions I have had to go to A&E because care was not available quickly enough. There was a three-month waiting list for NHS gastrointestinal services, so NHS Direct told me to go to A&E," he said.

He added: "self care kicks in when you've been diagnosed. With my condition, I have more access to healthcare professionals."

Generally, the panel said that they were not aware of other service options – and Mike, a retired quality manager, pointed out that the message from the government is that your GP is your first point of contact.



Would panel members consult a pharmacist?

Rachel, a single mother of a child who has special needs, said: "if you have children, pharmacists tend to tell you to go to your GP." With the concern that all panel members showed for using healthcare professionals properly, she added: "so, we've wasted two people's time."

Added mother-of-two Diane: "and you come out with a bag of pills. Too often, my GP offers me antibiotics for my children, which we don't take."

And asked if she kept antibiotics at home "just in case," Rachel replied: "yes, but that's because I am always given too many."

This remains a serious concern. This year's Conference was held just ahead of the national annual Self Care Week and before European Antibiotic Awareness Day (November 18) and Antibiotic Awareness Week (16-22 November); this year and for the first time, the latter is a worldwide event. Antibiotic resistance remains one of the greatest threats to health; recent research shows that patients are still being prescribed antibiotics for coughs and colds, said Dr Diane Ashiru-Oredope, Self Care Forum Board member and pharmacist lead for antimicrobial resistance at Public Health England.

Antibiotic Guardians

Delegates were urged to join the Antibiotic Guardian pledge campaign (antibioticguardian.com) set up by Public Health England. This calls on everyone in the UK, both the public and the healthcare community, to become "antibiotic guardians" by making one simple pledge about how they will make better use of these vital medicines.

Conference speakers expressed concern that consumers and patients generally don't realise how highly-trained pharmacists are. Pharmacists have 5-7 years of education and training in pharmacology, while GPs get just an initial six months and then practical experience, said Conference chair Professor Ian Banks, who is president of the European Men's Health Forum and a member of the Self Care Forum board.

Alistair Murray, clinical lead at the Green Light Pharmacies in London, reminded delegates that self care is part of the pharmacy contract – "if you want to dispense NHS prescriptions you have to do it," he said – and emphasised the importance of getting to know your patients and customers.





Prof Ian Banks (Conference Chairman)



Alistair Murray (Green Light Pharmacies)

“Make every contact count”

“When they bring in a prescription, you have a hostage situation – so sit down next to them and have a chat,” he advised. Ask them: ‘how are you feeling?’ It’s about having conversations and building rapport, and making every contact count.”

Challenged by a questioner about whether or not pharmacists should be supplying patients with cough mixtures for which there is little evidence of effectiveness, Mr Murray responded: “if they come in for a cough mixture that means they haven’t been to the GP for an antibiotic - that’s a win already. And we give them advice, reassurance and awareness – this all helps build resilience.”

“We should be picking up the people who wouldn’t go to a GP anyway,” he added.

He also emphasised the importance of knowing what other help is available locally and utilising it. For example, Green Light works with the social prescribing programme run by the Bromley by Bow Health Centre, and offers patients’ services such as help to stop smoking “when they are ready” and confidential support to substance abusers.

The professional help and advice offered by community pharmacy is available straight away, without the need for an appointment, usually anonymously and locally-focused, he said. It should offer services such as vaccinations for flu, pneumonia, travel, hepatitis B – and keep the costs of these low. “After all, we’ve already paid for the lights to be on,” he said.

“We need to make services more uniform, to think more about confidentiality – and we need access to patient records,” Mr Murray added.

Nevertheless, the People’s Panel saw a need for improvement. “Pharmacists have not won the confidence of people or created the right environment for consultation – they get their medication and off they go,” retired probation officer Amrik told delegates. “When I was prescribed some new medication, I had to ask my pharmacist for information on it. Pharmacists have to win public support.”

And these concerns are not confined to the UK. In the Netherlands, the first evidence-based study is now underway looking at how men use community pharmacies – and why they don’t, said Dutch pharmacy leader Maayke Fluitman.

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