

17th Annual Self Care Conference

Public Engagement is crucial for Self Care

The Annual Self Care Conference heard from a number of experts working with local councils on innovative self care and prevention programmes. Tina Butler, heads up such an initiative for Bradford Council, and described how this is working to create a sustainable health and care economy that supports people to be healthy, well and independent within the Bradford District and Craven region.



This calls for a systematic region-wide approach to self care and prevention, with a commitment from all partners to put self care and prevention at the forefront of policy and practice, said Ms Butler. She stated: "in five years' time, I don't want to hear the word 'self care,' because by then it will be embedded in the system - into every commissioning pathway and service. It is the centre of our being."

Public engagement is absolutely crucial for self care and prevention, added Enid Feather, clinical lead for self care and prevention at Airedale, Wharfedale and Craven CCG. "For 2015, we changed our Pharmacy First campaign from the previous year to emphasise the benefits of self care," she said.

However, interviews conducted by Ms Feather at a local bus stop revealed that many residents still regard the promotion and encouragement of self care as simply a way to save money for the council, make it harder for people to access healthcare services – and make life easier for healthcare staff.

The bus stop interviews also show that people feel they have a right to statutory services. They told Ms Feather that they have paid into the current system so they should get that back and, they asked her: "what's in it for me?" Some healthcare staff share these views, she said.

So changing the culture will take time, and requires partnership working across a range of organisations and agencies – although this is "incredibly hard," Ms Feather warned. Among the many obstacles to "keeping everyone on the same page" and developing a whole-system approach are partner organisations' differing priorities and financial positions, plus the medical model vs the social model.

"But keeping communications open is key, and remember, it takes time," she told the Conference.



Matthew Clift (Bracknell)

How to do it: Self Care Week in Bracknell Forest

Delegates heard about the achievements of one council's Self Care Week. Ahead of the event in Bracknell Forest, Berkshire, local residents receive plenty of advance publicity about the Week and its activities. Tweets and digital media information start a month ahead, a press release appears in traditional media the week before and posters appear around more than 200 locations – with branded posters appearing on websites since July, said Matthew Clift, project manager for prevention and self care at Bracknell Forest Council and Bracknell and Ascot CCG.

In these promotional activities, how you brand self care is very important, said Mr Clift. "Use NHS and local council logos – they are a trusted source," he advised.

Self Care Week activities take place in over 200 locations in Bracknell Forest – not only in GP surgeries, council offices, shopping and leisure centres, but also, most importantly, within local businesses - including pubs – and with mobile outreach.

Volunteers play a central role in the Week, and this year for the first time, their roles included offering self care prescriptions to residents. These give people the opportunity to talk and learn about a wide range of self care issues including smoking cessation, befriending sessions, how to access free leisure sessions, help in preventing falls, etc, and provide them with tangible, take-away information.

Also during the Week, free taster sessions were made available for activities such as buggy walks, coffee afternoons, quizzes and exercises to help people avoid falling, pilates, ranger walks, tai-chi, yoga, zumba, boot camp, run coaching, etc etc.

Residents were also able to benefit from meeting "street doctors" – GPs offering health checks and giving general self care advice outside of their surgeries. "This is great for people who can't get GP appointments, or are reluctant to," said Mr Clift.

And health assistants, dieticians and diabetes nurses worked with schools and children's centres during the Week, providing help and advice on healthy eating, while less-able people in sheltered housing, residential homes and nursing homes were offered the chance to learn "seat exercises" to help them remain as fit and supple as possible.

This year's Week also emphasised engagement with young people. Events included a Self Care Week poster competition for primary schools and children's centres, plus volunteers from the local college of further education and students of health and social care and child care working with HealthMakers (volunteers trained in self-management to improve their quality of life and that of other people) and patient groups.

Bracknell Forest's Self Care Week has been a huge success – and, said Conference chairman Professor Ian Banks, is "a perfect example of how to do it."

Barriers to successful self care programmes

Towards the end of the Conference, delegates were asked to think about what they had learnt during the day, and to develop, in groups, statements on what is needed to implement self care locally, and what are the barriers to doing so.

This exercise revealed a major barrier to be the perceived lack of national commitment to self care, and of local agreement on what the priorities should be.

"All the messages which people receive from the government are about their named GP, 24-hour access – the publicity is all about GPs so people don't realise that they have other options," said one group.

Do we really understand what people actually mean by "normal" when talking about their health, and when and how should we intervene? asked another. "As medical people we are naturally risk-averse, but we can't have self care with caveats – do we advise people against doing things?"

Others were concerned that increasing pro-active behaviour by medical professionals might have a negative impact on existing self-help groups. "Would we be stepping on their toes, or threatening their funding?" they asked. They also pointed to the concerns that some people have that if they start to self care, "the system will leave them alone."

The difficult funding situation at many CCGs is adversely affecting how much of a priority status they can award to self care, and the requirement for an evidence base is limiting. "Self care initiatives may not produce any tangible effect for 20 years or more. This requires a leap of faith," warned one group.



So what should we be doing?

For the delegates, the most important points are to:

- recognise good self care – know what works and what doesn't. Everyone in all organisations needs to recognise this.
- know your own community – work together and set up community mapping to find hard-to-reach groups and give them information;
- start small, make every contact count and ensure that initiatives are people-centred;
- establish health champions in GP practices to offer holistic care, which also covers issues such as housing, and think about providing micro-grants - £50 or so for buggy walk projects, for example.
- use language that is suitable for the person you are talking to. Make things easy to read and avoid ambiguity. And think about how people are affected by terminology – does “looking after yourself” sound better and more positive than “self care”?
- enable CCGs to concentrate on self care and prevention - rather than penalising them for doing so - and to work with partners such as the voluntary sector. In one existing partnership, a voluntary-sector group is responsible for providing evidence for the project - and a delegate involved in the project emphasised: “the evidence is not always based on numbers. Soft evidence can be very powerful, so listen.”

According to one group, a major hindrance is the process requirements to conduct monitoring, evaluations, needs assessment, etc. So what to do? “Just go out there and do stuff!”

Groups were also asked to consider: how can we improve health literacy and ensure self care messages are matched to individuals?

One group responded - who is “we”? These efforts must be system-wide, they said. And evidence from the People's Panel shows that patients who successfully self-manage can change the behaviour of their families and others close to them.

Other suggestions from the groups included:

- try to improve current standards, with good-quality, up-to-date information, and follow the patient through.
- produce mobile apps for all patient groups, along the lines of Dr Schroeder's upcoming product for students.
- messages must be appropriate for all – think about people with mental health problems, for example - and people should be able to share them with their GPs.
- could/should we produce YouTube videos on self care?
- print self care messages onto toilet paper - everyone buys it! Start a campaign and get Alan Sugar onto it!
- start early, and keep the message consistent.
- get the information out everywhere - into hairdressers (including mobile hairdressers who visit housebound clients), cafes, bus and taxi queues, dentists' ceiling posters, etc, and with consistent messaging. This is not about “self care” - it is about your life.
- filter information so it is appropriate – don't bombard people – and make use of information which is already provided by others.
- tailor information to the “health ignorance” gap of the individual. Help people to navigate the system – and don't change the systems too often.

Added Dr Pete Smith: “use the Self care Forum's resources for Self Care Week – and join the new Self Care Foundation!”

Patient empowerment is at the heart of self care, and self care is at the heart of patient empowerment, Dr Smith told the Conference.

For more information email
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