View results

Respondent

24 Anonymous

21:50
Time to complete

Title and contact details

1. Title of Initiative (please ensure this is a good description of your initiative in no more than 90 characters) *

Public Health Self-Care Outreach and Engagement in Stockport

2. Name of organisation and region (please state context, ie general practice, community care etc) *

Stockport Metropolitan Borough Council - Local Government Authority

3. Name of person or team involved in the self-care initiative *

PHOET (Public Health Outreach and Engagement Team)

4. Timeframe and dates of initiative *

01.05.25-30.4.26

5. Contact name for entry *

Hayley Taylor-Cox

6. Contact email for entry *

hayley.taylor-cox@stockport.gov.uk

About your self-care initiative

7. Describe the problem you were facing and your objective(s) in tackling this. (1200 characters max) *

Many Stockport residents who could benefit most from self-care support are often least likely to access or act on traditional health information. This includes people experiencing health inequalities, digital exclusion, language or literacy barriers, low confidence in services, or uncertainty about which sources of health advice to trust. Standard approaches such as websites, leaflets or formal appointments can miss people who need information to be practical, accessible, and delivered in a familiar setting. The objective of the initiative was to take self-care support directly into communities, rather than expecting residents to come to services. Through PHOET, we aimed to build trust, improve health literacy, and increase confidence so residents could make informed everyday choices about their health and wellbeing. The initiative focused on helping people understand what information to trust, how to apply it in daily life, and when to seek further help. This supports a preventative, community-based approach aligned with the NHS 10 Year Plan and Fit for the Future.

Please enter at most 1200 characters

8. Outline your initiative, explain your planning and execution of the project. (1200 characters max) *

PHOET delivered interactive self-care outreach in familiar community settings. Sessions included talks, pop-up stalls, themed prevention sessions, wellbeing and lifestyle conversations, cancer awareness and screening advice, smoking and alcohol brief advice, and signposting. Delivery was shaped with local partners, who helped identify priority groups, barriers to engagement and venues. The team took sessions into businesses, workplaces, tower blocks, flats and other harder-to-reach settings, including evening and late-night sessions for care home staff who could not attend during the day. Sessions were practical, informal, and inclusive, using plain language, conversation-based activities, trusted resources, and tailored signposting to support people who may be digitally excluded or speak English as an additional language. Planning included agreeing partners and venues, adapting materials for each audience, promoting sessions through trusted routes, and gathering feedback after delivery to improve future sessions. Returning regularly to the same places helped PHOET become a familiar and trusted presence, enabling more honest conversations, and ongoing learning about what works.

Please enter at most 1200 characters

9. What were the challenges and how did you overcome these? (1200 characters max) *

Challenges included reaching residents who may not engage with health messages, overcoming mistrust or low confidence, making information accessible across literacy, language, and digital needs. PHOET responded by going to trusted venues, working with partners, using interactive, face-to-face conversations instead of online information. Materials were practical, clear, and relevant. Sessions were adapted using feedback and insight, flexing the approach rather than one-size-fits-all. Accessibility was improved through visual and interactive resources, including easy-read materials, UV bands/keyrings, tar jar aids, and quizzes for people with complex need or lower literacy. Language, reading, writing and educational barriers were addressed by adapting how information was shared and supporting different learning styles. For people in low-paid or shift work, PHOET went to them, including workplace sessions as late as 11pm. In workplaces, the team encouraged employers to make space for preventative health conversations. Mental health was embedded through visits to mental health charities and staff training, including suicide awareness and Connect 5, supporting safer conversations.

Please enter at most 1200 characters

10. Did you collaborate with other local partners, if so, who and why were they chosen? *

PHOET collaborated with local community organisations, voluntary sector partners, council and public health colleagues, and venues already trusted by residents. Partners were chosen because they had existing relationships with priority groups and understood local barriers, needs, and opportunities for engagement. PHOET also identified trusted community voices and equipped them with evidence-based self-care messages that could be cascaded locally, covering cancer, cardiovascular health, NHS screening, mental wellbeing, healthy eating, blood pressure checks, and diabetes prevention. Partners included cancer screening improvement leads, Age UK, Stockport Race Equality Partnership, Olive Branch community cafe, Stockport County Community Trust, Friendly Fridays, Signpost for Carers, Life Leisure, libraries, GPs, pharmacies, Stockport Homes, local employers, and care providers.

11. Would you describe your initiative as "innovative", if "yes" please tell us why. (800 characters max) *

PHOET moved self-care from formal health settings into everyday community spaces, including pubs, pantries, faith and voluntary sector venues and workplaces. Instead of relying on leaflets/online information, we made self-care practical, personals & face-to-face for residents affected by digital exclusion, health inequalities, language barriers or low confidence with services. Simple tools such as UV bands, keyrings, yes/no prompts and translated WhatsApp messages helped people understand trusted prevention advice and act on evidence based health messages. Blood pressure checks opened wider conversations about cancer prevention, wellbeing, screening, lifestyle & signposting. By linking prevention with physical & mental health, PHOET made self-care feel relevant, achievable & local.

Please enter at most 800 characters

12. Did you use any of the Self-Care Forum's free resources as part of your initiative? Provide details *

We used/adapted Self-Care Forum resources to support consistent messaging around everyday self-care, prevention, lifestyle choices and knowing when to seek help. Resources used included The Power of Self-Care leaflet, winter checklist, summer self-care materials and fact sheets, adapted where needed to make them accessible and relevant for different groups.

Impact, outcomes, and evidence

13. Who was the initiative directed at and what were the benefits to the targeted group or individuals? (1200 characters max)

The initiative targeted residents facing barriers to health and wellbeing support, including underserved communities, digitally excluded residents, people whose first language is not English, and groups less likely to use traditional services. The team targeted older residents, men, people affected by drug and alcohol issues, homelessness, residents in deprived areas, ethnically diverse communities, and those with complex needs. Benefits included greater confidence, better understanding of trusted health information, increased prevention awareness, and clearer knowledge of when and where to seek support. Partnership working enabled trusted health conversations in familiar places. At one community session, a resident initially declined a blood pressure check but agreed before the team left. His readings indicated a medical emergency. Although asymptomatic, he contacted his GP, was referred to hospital that evening, received treatment and later reported feeling “like a new man.” A hospital doctor said the check may have prevented a life-threatening event, showing how trusted outreach can identify hidden risk and support urgent care.

Please enter at most 1200 characters

14. Please quantify the impact of your initiative. (e.g. cost improvement, numbers of people helped, time saved) ((1200 characters max))

Since launch, PHOET has delivered 251 sessions and events across around 90 community locations, reaching approximately 4,198 residents. Sessions covered cancer awareness, heart health, immunisation, diabetes, and other prevention topics, providing practical self-care advice, signposting, and support. The initiative helped reduce barriers to accessing information by engaging people face-to-face in trusted settings. It also supported earlier conversations about prevention, healthy lifestyle choices, and appropriate use of services. Recorded impact includes 180 signposts or referrals, 100% satisfaction from feedback received, and an average feedback score of 5/5. The initiative reached a wide range of communities, including areas experiencing socioeconomic deprivation and communities affected by language, literacy, digital access, and wider health inequalities

Please enter at most 1200 characters

15. Do you have formal or anecdotal evidence of success? (e.g. qualitative, quantitative, informal feedback?) (1200 characters max)

Feedback and engagement data showed sessions were accessible, relevant, and easy to understand. Residents valued asking questions in a safe, informal setting, while partners said outreach reached people less likely to engage with traditional health information. Residents and partners described the team as informative, understanding, professional, engaging, thorough and passionate. One partner said the informal style "allowed space for discussion." Quantitative evidence includes 647 people reached through targeted activity, alongside wider reach, referrals, signposting, and consistently positive feedback. Outreach identified previously undiagnosed high blood pressure and supported follow-up care. Across nine care homes, 135 staff received checks; many said they rarely prioritised their own health and were unaware of NHS Health Checks or pharmacy blood pressure services. Workplace sessions also identified several high blood pressure cases, with advice and GP referrals provided where needed. One Healthy Heart check led to treatment for high blood pressure and cholesterol and healthier lifestyle changes, showing how outreach supports early detection and behaviour change.

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Learning and sustainability

16. What was the cost of this initiative in time, money, and other resources? Please be as specific as you can. (1200 characters max) *

The initiative was delivered using existing PHOET staff time, partner support, and community venues where possible. Costs included staff planning and delivery time, preparation of materials, travel, translation/adaptation where needed, and printing. Estimated cost: £90,000 Staff time: 2 full-time equivalent posts for one year Funding source: a mix of recurrent and non-recurrent internal and external funding. The model was designed to be low-cost by using existing relationships, community assets, and trusted local spaces, and by using free materials provided by national partners such as Cancer Research UK, the British Heart Foundation and Diabetes UK.

Please enter at most 1200 characters

17. Were there any learnings from the initiative, if so what were they? (1200 characters max) *

A key learning was that self-care information has greatest impact when it is practical, conversational, and delivered in trusted settings. Making information available is not enough; people often need support to understand it, trust it, and feel confident applying it to everyday life. We also learned that flexibility is essential. Sessions were most effective when tailored to the audience, with time for questions, discussion, and reassurance. Partner insight helped identify the right venues, language needs, and engagement methods, while feedback helped shape future communications by showing which language, fears, misconceptions, and barriers mattered most to residents. The work reinforced the continuing value of face-to-face outreach, particularly for people who are digitally excluded, less confident with services, or more likely to act after a trusted conversation. People responded well to immediate, practical actions, visual resources with impact, and real stories that felt relevant to their own lives.

Please enter at most 1200 characters

18. Are you continuing to implement the initiative, please give details. (1200 characters max) *

PHOET is continuing to implement the initiative as part of its community outreach approach, subject to ongoing capacity and funding. Learning from early delivery has been used to refine session content, strengthen partner relationships, improve targeting, and identify further opportunities to reach priority groups. The initiative is becoming part of business as usual by embedding self-care messaging into ongoing outreach, community engagement, and prevention work. Feedback from target populations has highlighted continued demand for cancer awareness, cardiovascular health checks, and wider long-term condition prevention, demonstrating the need for further direct engagement across Stockport. Future plans include continuing to build trusted community relationships, working with employers to deliver awareness sessions in local workplaces, sharing key messages through local social media groups, supporting GP practices to follow up with patients who miss screening appointments, and developing more local ambassadors and champions, including signposting to Answer Cancer for additional support and training.

Please enter at most 1200 characters

And finally .....

19. How easy will it be to replicate your initiative and do you have top tips to share? (1200 characters max)

The initiative is easy to replicate because it is based on simple principles: go where people are, work with trusted partners, use clear language and make self-care practical. To implement elsewhere, organisations need local insight, community venues, staff confident in engagement, accessible materials, and a feedback process. Top tips: start with the community need, not the service offer; involve trusted local partners early; keep messages simple and relevant; avoid relying only on digital information; and collect feedback from the start to show impact and improve delivery.

Please enter at most 1200 characters

20. Please let us know the social media addresses of those involved in the initiative.

www.stockport.gov.uk www.healthystockport.co.uk

21. Why do you think this initiative deserves to win the award? (800 characters max)

PHOET highlights self-care at its best: practical, inclusive, preventative, and delivered where people are. We took trusted health and wellbeing messages into everyday community spaces, reaching residents who may otherwise miss out. It turns self-care from information into conversation, confidence, and action. By working with trusted partners, using familiar venues, and adapting messages to different communities, the initiative tackles inequalities, supports earlier prevention conversations and helps people know when and where to seek support. It is a simple, low-cost, and sustainable model with clear evidence of reach, learning and impact, and strong potential to be replicated elsewhere.

Please enter at most 800 characters

22. Do you have an image, materials or weblinks to supplement your application? Please supply no more than 2 images which may also be used to promote your application if successful. Ensure images are square (ie height and width dimensions are the same). Please email information to selfcare@selfcareforum.org including the name title of your initiative (as in Q1).

No answer provided.

23. Your application may be chosen to be uploaded to the "best practise" page of the Self-Care Forum website to share self-care excellence with others who might want to use the learnings in your application. We will also include your email address so that people may get in touch with you. Please confirm your preference below. *

- (●) I am happy for the Self-Care Forum to add our entry to the website **with** my email address
- ( ) I am happy for the Self-Care Forum to add our entry to the website **without** my email address
- ( ) I would rather our entry was not included on the Self-Care Forum website

24. Would you consider becoming a self-care champion? *

- ( ) Yes
- ( ) No
- (●) Maybe, I'd like to know more