Briefing for NHS England Prevention Programme on Making Every Contact Count (MECC) and the NHS Long Term Plan: Healthcare workforce skills and capabilities

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Brief: Outline of MECC related plans and aims for 2019/20 with reference to how curriculum, training and education will support embedding change and strengthen the role of MECC. Detail of where accountability for curriculum sits, the roles of different organisations regarding curriculum and CPD, delivery and results so far, and what is planned.

Please note, this briefing does not detail planned support for the Tobacco and Alcohol CQUIN, as a separate briefing on this has been developed.

1. Background

- Making Every Contact Count (MECC) is the opportunistic delivery of consistent and concise healthy lifestyle information via brief or very brief behaviour change interventions, enabling individuals to engage in conversations about their health at scale across organisations and populations. MECC provides an effective point for initiating pathways to enable behaviour change for key risk factors including smoking, alcohol, obesity, and also providing opportunity to link to local social prescribing offers. Additionally, the workforce behaviour-change skills acquired via MECC will be useful as organisations implement the NHS Long Term Plan, particularly regarding commitments around 'making the NHS a great place to work' which will require some behaviour change.

- System-level leadership for MECC was established in 2015 via the national MECC advisory group led by Public Health England (PHE), NHS England, Health Education England (HEE) and key partners including the Royal College of Nurses, the Royal Society for Public Health and the Association of Directors, to increase uptake of brief and very brief interventions within routine health and care contacts. As signatories to the MECC Consensus statement in 2016, NHS England, HEE, PHE and partners confirmed system level support for this approach.

- The publication of the Behavioural support - behavioural and social sciences strategy in 2018 provides opportunity to explore synergies for the delivery of MECC as part of comprehensive local approaches to enable population behaviour change.

- Delivery to date has included MECC practical tools: a Consensus statement, Implementation guide, Evaluation Framework and Training Quality Marker Checklist, and a national website at www.makingeverycontactcount.co.uk and a community of practice with over 500 members. In addition, delivery has included the MECC requirement SC8 within the NHS Standard Contract and the provision of free e-learning modules (2017: 12,394 people passed the module, and 27,472 sessions were launched).

Local and regional MECC implementation work around the country has been resourced, including Behavioural Insights Masterclasses in the North East, Healthy Living Pharmacy Champions sessions in the Midlands and East and the Thames Valley development of a digital 'MEEC Train the Trainers' Kick Start resource.
Recent delivery

- MECC discussions continue with partners to support implementation of the prevention ambitions within the NHS Long Term Plan, particularly those regarding tobacco, alcohol, obesity and social prescribing activity. The MECC advisory group recently met with PHE social prescribing leads to identify and map links and programme synergies, and to discuss plans for upcoming resources and strategy. The MECC programme regularly meets with PHE leads for the Alcohol and Tobacco CQUIN.

- A workforce Behavioural Analysis is underway, led by PHE, this academic resource is exploring workforce behavioural levers and barriers for the delivery of MECC brief interventions and the Alcohol and Tobacco CQUIN. Publication pending.

- HEE Digital Public Health work underway will provide a single platform for behaviour change resources (including MECC)


- MECC input to the progress report for *Fit for future: public health people review of the public health workforce (2016)*

- Development of a MECC resource with NICE for ICSs/STPs

- **Promoting a healthier weight**, resources to support messaging (incl. MECC)

- Across England, there are now over 9400 Healthy Living Pharmacies with at least 9400 qualified health champions, reaching out to the wide and diverse communities that they serve, using every interaction in the pharmacy setting and in the community as an opportunity to make health promoting interventions.

- The **Healthy Living Pharmacy** (HLP) is a framework (Levels 1 to 3) aimed at achieving consistent delivery of a broad range of health improvement interventions through community pharmacies. Public Health England has published *Quality Criteria for Healthy Living Pharmacy Level 1* underpinned by a profession-led self-assessment process.

- MECC in mental health provider Trust settings: initial survey helped establish a baseline for workforce skills and capabilities, led by PHE. Commissioning of a pilot project to deliver tailored MECC training to mental health workforce, led by HEE.

- Dental: Smoking cessation VBA in dental module http://www.ncsct.co.uk/publication_dental_vba.php

- E-learning Obesity module https://www.e-lfh.org.uk/programmes/obesity/

- All Our Health: Adult obesity resource for applying AOH
2. Activity planned for 2019-2020

2.1 HEE Population Health and Prevention Programme Business Plan 2019/2020 deliverables relevant to MECC

- **Health Improvement/behaviour change and MECC**
  Supporting and complementing national action on obesity, smoking, alcohol and other major health risks through supporting the implementation of Making Every Contact Count (MECC) and other behaviour change approaches across the system. This is likely to include funding innovative approaches to implementing behaviour change/MECC training and education.

- **Public Health in Curricula**
  Health Education England (HEE) is commissioning a project to develop guidance and other products to enhance education and training, ensuring population health and prevention education is consistently delivered in all undergraduate and postgraduate curricula. This will include behaviour change.

- **Nutrition and Obesity Competency Framework**
  HEE are also commissioning a framework to ensure workforces are equipped with the knowledge and skills to support the population to improve their health and wellbeing and prevent ill health through nutrition education, understanding of obesity and behaviour change. The framework will help learners and educators to assess learning needs and signpost them to the resources. As well as developing a competency framework, the successful partner will also map existing learning resources hosted on the HEE e-Learning for Healthcare (e-LfH) Population Wellbeing Portal to this.

2.2 PHE Business Plan 2019/2020 deliverables relevant to MECC

- **MECC is included within actions to engage General Practice Nursing with All Our Health (AOH). This includes community pharmacy, dentistry, ophthalmology and allied health professionals.**

- **AOH Web learning platform: MECC principles to be linked and enabled across topics**


- **Initial explorations are underway with Skills for Care regarding the role of social care in prevention, which would include MECC.**

- **Advanced Clinical Practice Curricula: Generic public health modules including MECC, are being developed. This will support public health leadership within clinical services.**

- **A new UK wide public health strategy for Allied Health Professionals (AHP) is being finalised. This aims to ensure public health is embedded into the role of all AHPs.**

- **A social prescribing All Our Health e-learning module will be launched in April**

- **A social prescribing framework for AHPs is being developed (July 19) to articulate the different ways AHPs engage in social prescribing, from active signposting through to provision of social prescriptions.**
Everyday interactions: a toolkit to support health care professionals record and measure the impact of MECC conversations (PHE and RSPH) is currently being refreshed. Embedding the impact pathways from this toolkit into electronic records would provide a means to help increase the recording of behaviour change interventions delivered https://www.rsph.org.uk/our-work/policy/wider-public-health-workforce/measuring-public-health-impact.html

PHE’s Diet and Obesity team will be providing support for the obesity elements of the NHS LTP, including support around brief advice. Last year this work included scoping for development of a potential practice network indicator relating to brief advice and obesity.

PHE are supporting nutrition and obesity and Medical school curricula see section 3.2.

CVD Prevention: PHE North East (lisa.davies@phe.gov.uk, Kerry.lynch@phe.gov.uk) and Yorkshire and Humber (Karen.Pearson@phe.gov.uk) Centres have worked on the addition of a CVD prevention component to MECC training, with secured funding.

The Applying all our health CVD prevention e-learning module has been developed using the AOH: CVD prevention content which is published on the .gov site.

Further practical tools to support MECC delivery:
MECC Link https://mecclink.co.uk/ a simple online website that helps health and care workforce to raise awareness, motivate and refer and signpost people to help them to improve their health and wellbeing. The General Practice Nursing Board for the North has funded further development of MECC Link to enable it’s use across multiple-regions, to support a radical upgrade in prevention (Action Point 6 of the GPN 10 Point Plan).

MECC Link sub-regional rollout is underway: a new home page allowing users to select their region. Functionality enables each regional area to add own logos, sub headings and content tailored to local systems and needs http://staging.mecclink.offroadcode.com/

PHE’s Campaign Resource Centre provides a high-quality repository of resources and case studies to support delivery of MECC

2.3 NHS England Community Nursing/Primary care Nursing and Personalised Care Business Plan 2019/2020 deliverables relevant to MECC

There is a commitment to deliver the national ambition of 75,000 staff trained to deliver personalised care by 2023/24. This would include Motivational Interviewing, Teach-Back and Health Coaching. Many of the staff receiving this training would also be responsible for having MECC conversations.

Long Term Plan deliverables to embed the personalisation agenda as part of the population health management approach will incorporate MECC.

The focus of many of the LTP workstreams is on prevention, support and early identification and Community and Primary care nursing staff are often being identified as the key workforce for training and development requirements. Such as in the Stroke and Ageing Well, End of life programme.

The NHS Long Term Plan ‘good place to work’ program may also have synergies with staff well-being that would be relevant to MECC programme. (awaiting the lead name)
Other key areas
- Sustainable development General Practice 10-point plan (to develop confidence, capability and capacity within general practice nursing)
- Development of Primary care networks (includes focus on prevention and self-care)

Long term Plan integrated care
- Community Teams Preventative Care Programmes - moderate frailty, older people and their carers. Outcome: Supporting people to stay well at home for as long as possible
- Enhanced health in care homes – all care home residents receiving holistic/integrated care.
- Urgent Community Response - includes meeting the needs of people at the end of their life.

3. Levers and Accountability

3.1 Key contacts
NHS England contacts:
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3.2 Curricula levers
- Healthcare regulatory bodies have responsibility for setting standards for the educational requirements for their prospective registrants. Each will have in place quality assurance (accreditation) processes for determining the extent to which education providers are meeting those requirements. The regulators are informed by various stakeholders including the Arm’s length bodies, government, employers, registrants, educators and professional bodies on what should be included in the standards based on current and evolving practice. The role of the regulators is summarised succinctly in this document
• **Example:** UK-wide curricula guidance on incorporating public health into Allied Health Professionals pre-registration training co-produced by PHE, HEE, HCPC, Council of Deans for Health, NHSI and the professional bodies. This includes MECC.  

• The Association for Nutrition (AfN) assumed responsibility for the UK Undergraduate Curriculum in Nutrition for newly qualified doctors from the Academy of Medical Royal Colleges (AoMRC) in May 2018. AfN has since set up an inter-professional group to lead the development and implementation of the Undergraduate Curriculum in Nutrition. The group is currently looking at revisions to the current curriculum and how it can be implemented more widely by Medical Schools.

• The body that oversees the health care regulatory bodies and is accountable to parliament is the Professional Standards Authority.

• Health Education England has a role in that it has developed a quality framework which sets standards for quality within the **workplace learning environment**, available from https://www.hee.nhs.uk/our-work/quality. The framework describes the domains, standards and expectations to demonstrate a high-quality learning environment. Domain 5 of the framework relates to the delivery of curricula and assessments, both of which must be delivered so that learners are enabled to achieve the learning outcomes required by their curriculum or professional standards.

• HEE has developed a national core set of metrics, supported by a National Education and Training Survey (NETS), administered at local level to support insights into the quality of learner placements.

### 3.3 Contracting levers

• The MECC requirement within the NHS Standard Contract provides a route to supporting the embedding of MECC within local planning and contracting. To date there has been no monitoring or review of this requirement. The MECC advisory group explored this with the NHS Contracts team and at an advisory group meeting, where examples of where the MECC requirement SC8 had been included in local contracts were presented, this included commissioning of integrated services in Essex. Examples can be provided.

**Appendix overleaf**
4. Appendix

Workforce development: PHE and HEE roles

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