



# Making Every Contact Count

## Making Every Contact Count (MECC) Celebrating Success Event March 1st 2013: Kettering Conference Centre

The MECC celebrating Success event was held on 1<sup>st</sup> March 2013. Delegates heard from leaders of the new Health and Care system about how 'Making Every Contact Count' (MECC) will continue to support improving health and wellbeing after the health reforms in April 2013. During the event case studies were shared and a selection of workshops were available for delegates to find out more about specific areas of MECC implementation.



### The MECC Ambition

Sir Neil McKay welcomed those attending the conference and started by asking people to think back to 2011 when the NHS Midlands and East ambitions were launched. The audience were reminded that MECC was not a new concept, but built on previous work across the cluster, which provided the foundation of the successes seen today. 110 NHS Midlands and East organisations now had MECC leads, over 10,000 NHS staff had been trained in MECC and in excess of 100,000 promotional items had been distributed. Neil advised that the momentum of the ambition work needed to be protected and maintained throughout the NHS reforms and how he welcomed the keynote speakers' views on how MECC would be embedded in the new system and their organisations.

### The Future of MECC with Public Health England

Professor Kevin Fenton, Director of Health and Wellbeing, Public Health England (PHE), gave a presentation on the vision and priorities of Public Health England. Kevin discussed how PHE hoped to accelerate PH outcomes by using an integrated approach and educating and empowering the public to take better control of their health. The Health and Wellbeing Directorate of PHE will promote 'Innovation for impact' to support delivery of evidence based prevention interventions. This will include the use of new technologies such as digital and social media, but also build additional capacity in important areas such as mental health and population healthcare.



While maintaining a focus on all areas of the Public Health outcomes framework, the Health and Wellbeing Directorate will provide enhanced focus on the major drivers of mortality and morbidity: Wellbeing and Mental Health; Diet, Obesity

and Physical Exercise; Tobacco Control and Smoking Cessation; Alcohol Moderation and Drug Recovery; and HIV and sexual health. There is a significant overlap of where brief healthy lifestyle advice can support these priorities and Kevin identified MECC as a critical strategy to encourage more health promoting environments.

Kevin concluded his presentation by reaffirming that PHE remains keen to support MECC, identifying opportunities to learn from, and promote, promising practices across the entire system.

Kevin's slides can be found on the [MECC WebPages](#)

### The Future of MECC with the National Commissioning Board

Professor Robert Harris gave an overview of the National Commissioning Board (NCB) priorities and how important it is for the NCB



to drive a significant financial shift to support prevention (currently under 5% of NHS spending). Robert said that the NCB will need to look at the architecture of the health system, ensuring that the best possible care is available through centres of clinical excellence and through looking at new ways of delivering different services. He said it would be important to look at the behaviours of those using the health service, with currently 10% of people using 67% of healthcare spend, and ways in which illness can be deferred, delayed and prevented to ensure that people live longer and live with a better quality of life.

Robert highlighted that the NCB will move forward in a transformational way and in doing so will work with PHE to optimise the millions of contacts made to help people change their lifestyles and live better.

# Making Every Contact Count

## The Future of MECC with Health Education England

Dr Lisa Bayliss-Pratt, the Director of Nursing at Health Education England (HEE), began her presentation by setting out that 'HEE will provide leadership for the new education and training system. HEE will ensure that the shape and skills of the future health and public health workforce evolve to sustain high quality outcomes for patients in the face of demographic and technological change'. With a link to the Francis report, Lisa set out that HEE has a clear vision to build core values and behaviours in to the workforce by ensuring recruitment and training is built around essential core values for healthcare professionals.



Lisa set out the vision for MECC within education and training saying that **'every healthcare professional will use every contact with an individual to maintain or improve their mental and physical health and wellbeing where possible, whatever their specialty or the purpose of contact'**.

HEE will support this by:

- Embedding MECC within widening participation and core training standards for healthcare support workers (Band 1 -4)
- Maximising benefits of MECC on staff health and wellbeing
- Sustainable roll out of MECC and prevention training for current and future health and social care workforces.

Lisa's slides can be found on the [MECC WebPages](#)

## The Future of MECC with the Department of Health

Pauline Watts, Professional Officer - Health Visiting and Dementia Care, Department of Health (DH), set out a clear DH nursing policy vision to help people stay independent, maximise well-being and improve health outcomes. MECC is a clear core intervention for nurses and Pauline emphasised the importance of building confidence in to the profession to deliver this. Pauline said that all nurses and midwives had the opportunity and responsibility to maximise their role in health and wellbeing by making every contact count.

Pauline concluded her presentation by emphasising that nurses need to return to being pioneers of public health and in doing so embrace 'wellness and make every contact count'.



Pauline's slides can be found on the [MECC WebPages](#)



## The Future of MECC with Local Authorities

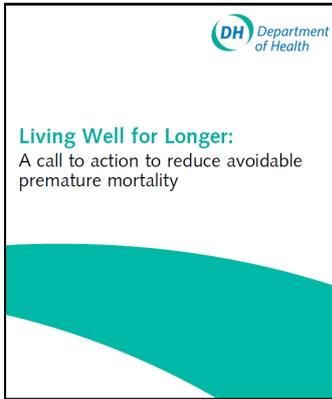
Martin Reeves, president of the Society of Local Authority Chief Executives (SOLACE), gave an overview of how he saw Local Authorities moving forward. He welcomed the move of Public Health in to Local Authorities and the opportunity this presents to truly engage with individuals and communities by embedding prevention messages across the board. He felt that now was the time to create diffuse and diverse leadership across the system, to build on community assets and really enable change and in doing this widen the opportunity for MECC adding value to every contact made with the local authority.



## Case Study Presentations

It was fantastic to hear case studies from NHS Coventry, NHS Lincolnshire, The West Midlands Fire Service and NHS Hertfordshire where Making Every Contact Count is going from strength to strength. It was good to hear about the successes in these areas, but perhaps even more helpful was listening to how these organisations have overcome some of the challenges and identified key learning points along the way.

The slides from the case study presentations are available alongside the MECC Examples of Practice booklet on the MECC WebPages on [NHS Local Learning](http://www.nhs.uk/locallearning).



## Call to Action on reducing avoidable premature mortality

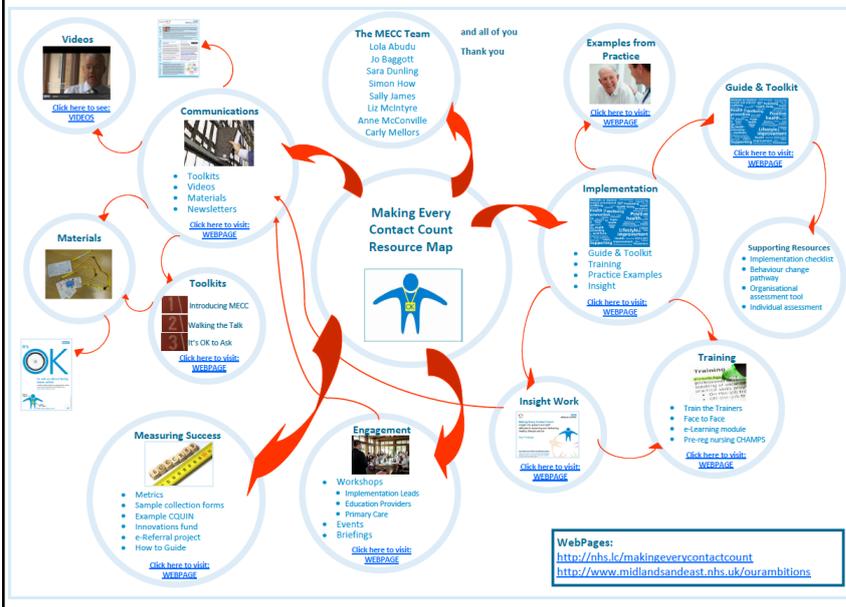
Shortly after the MECC 'Celebrating Success' event, Jeremy Hunt, Secretary of State for Health, launched 'a call to action' to cut avoidable deaths from the five major causes – Cancer; Stroke; Heart; Respiratory; and Liver disease – and to make life expectancy in England among the best in Europe. The 'call to action' states that the National Commissioning Board should make measurable progress towards reducing the level of premature mortality by 2016. It says that in meeting this objective the board could make significant progress in Making Every Contact Count.

The Call to Action can be found at:

<http://www.dh.gov.uk/health/2013/03/mortality/>

## The MECC Resource Map

Simon How, MECC Programme Lead at NHS Midlands and East, gave a very engaging overview of the support available to organisations and individuals implementing MECC. The MECC resource map which Simon worked through matches the layout of the [MECC WebPages on NHS Local Learning](http://www.nhs.uk/locallearning).



## MECC Video Clips available



The MECC Video clips are available via the following websites:

NHS Local:

<http://nhs.uk/makeeverycontactcount>

YouTube:

<http://www.youtube.com/user/NHSMidlandsandEast?feature=watch>



## MECC Resources

All of the MECC resources will continue to be available at <http://nhs.uk/makeeverycontactcount>. These resources include the MECC Guide and Toolkit, updated and interactive training resources, and information and templates to support measuring MECC success.

Documents summarising the work undertaken as part of the NHS Midlands and East ambition and capturing the learning throughout this work are also available on the [NHS Local Learning web pages](http://www.nhs.uk/locallearning).

If you have any difficulty accessing these WebPages please contact your local IT team.

## MECC in Primary Care



Craig Lister from NHS Bedfordshire gave an overview of how the public health team has helped to embed MECC in to Primary Care services. Craig introduced delegates to a new 'Lifestyle Hub' App which is currently being developed and will support people to access local lifestyle improvement services. Craig's presentation can be found on the [MECC WebPages](#)

## MECC in Secondary Care



Delegates were introduced to two very different approaches to MECC with presentations delivered by Lynn Moakes from South Warwickshire Foundation Trust and Jennie Negus from East and North Hertfordshire NHS Trust (Slides on [MECC WebPages](#))

One approach focussed on getting MECC training into the mandatory training programme and also looked at the benefits of using a CQUIN whilst the other looked at delivering MECC with staff who had volunteered for the training and to be champions within the organisation for the ambition.

## MECC in the Voluntary Sector

Voluntary groups have masses of contacts every day with the public and there are organisations such as RAWM (Regional Action, West Midlands - funded by DH) which work collectively across the UK (Regional Voices for Better Health). They work through national policies and strategies with the aim of providing short briefings summarising the action voluntary organisations need to take. These briefings are then sent to their database of 8,500 organisations i.e. they have capacity to cascade messages quickly to large volumes of staff.

MECC fits exactly with their agenda of looking at the person as a whole. With the welfare reforms they are concerned that more people will go into crisis and there will be even more demands on voluntary sector.

The slides from the Voluntary Sector workshop can be found on the [MECC WebPages](#)

## MECC Celebrating Success Event

Dr Anne McConville, Acting Regional Director of Public Health (East of England), summarised all of the messages from the day in a very motivating closing statement. Delegates left encouraged that the tremendous achievement of the MECC programme would provide a firm foundation for future developments within the new Health and Care Architecture.

## Measuring MECC Success

People were interested in the data collection option presented by NHS Walsall. Particularly for its simplicity and the scope to expand as needed whilst maintaining the ability to easily track numbers of referrals from each team. The presentation from Catherine Boneham, NHS Walsall, can be found on the [MECC WebPages](#)



## Commissioning MECC

Lynda Bradford from NHS Suffolk gave a brief overview of how MECC commissioning and CQUIN arrangements have supported roll out across the county.

Key points from the commissioning workshop were:

- The need to get MECC onto the CCG agenda – the CCG authorisation documentation and plans provide a route in
- CQUINs appear to be more effective than quality standards
- Nursing and quality team engagement is helpful in monitoring
- Successful CQUINs should be collated so that people don't have to reinvent the wheel (CQUINs will be available on the NHS Institute website: [http://www.institute.nhs.uk/commissioning/pct\\_portal/cquin.html](http://www.institute.nhs.uk/commissioning/pct_portal/cquin.html))

Lynda's slides can be found on the [MECC WebPages](#)