



Public Health  
England

# Making Every Contact Count (MECC) - the public health role

15th November 2017

Nigel Smith  
Public Health England

With thanks to Mandy Harling and Simon How (PHE)



# How we defined MECC

**Core definition:** Making Every Contact Count is an approach to behaviour change that utilises the millions of day to day interactions that organisations and people have with other people to support them in making positive changes to their physical and mental health and wellbeing. MECC enables the opportunistic delivery of consistent and concise healthy lifestyle information and enables individuals to engage in conversations about their health at scale across organisations and populations.



# How we defined MECC

- Brief or very brief interventions in **routine appointments**
- Enables individuals to **engage in healthy conversations**
- Supports individuals in making positive changes to physical health and emotional wellbeing
- Provides opportunity for the delivery of consistent and concise healthy lifestyle information
- Enables conversations about health to take place **at scale** across populations and organisations



# MECC at different levels

- For organisations, MECC means providing their staff with the leadership, environment, training and information that they need to deliver the MECC approach
- For staff, MECC means having the competence and confidence to deliver healthy lifestyle messages, to help encourage people to change their behaviour and to direct them to local services that can support them
- For individuals, MECC means seeking support and taking action to improve their own lifestyle by eating well, maintaining a healthy weight, drinking alcohol sensibly, exercising regularly, not smoking and looking after their wellbeing and mental health.



# MECC and the Workforce

## Contact is powerful

- The size of the public sector workforce means there are many opportunities on a daily basis to engage the population in healthy conversations



- 1.2 million health-related visits a day to community pharmacies
- the NHS deals with over 1 million patients every 36 hours
- As public health people we have an opportunity to reach those workforces



# MECC and the Workforce

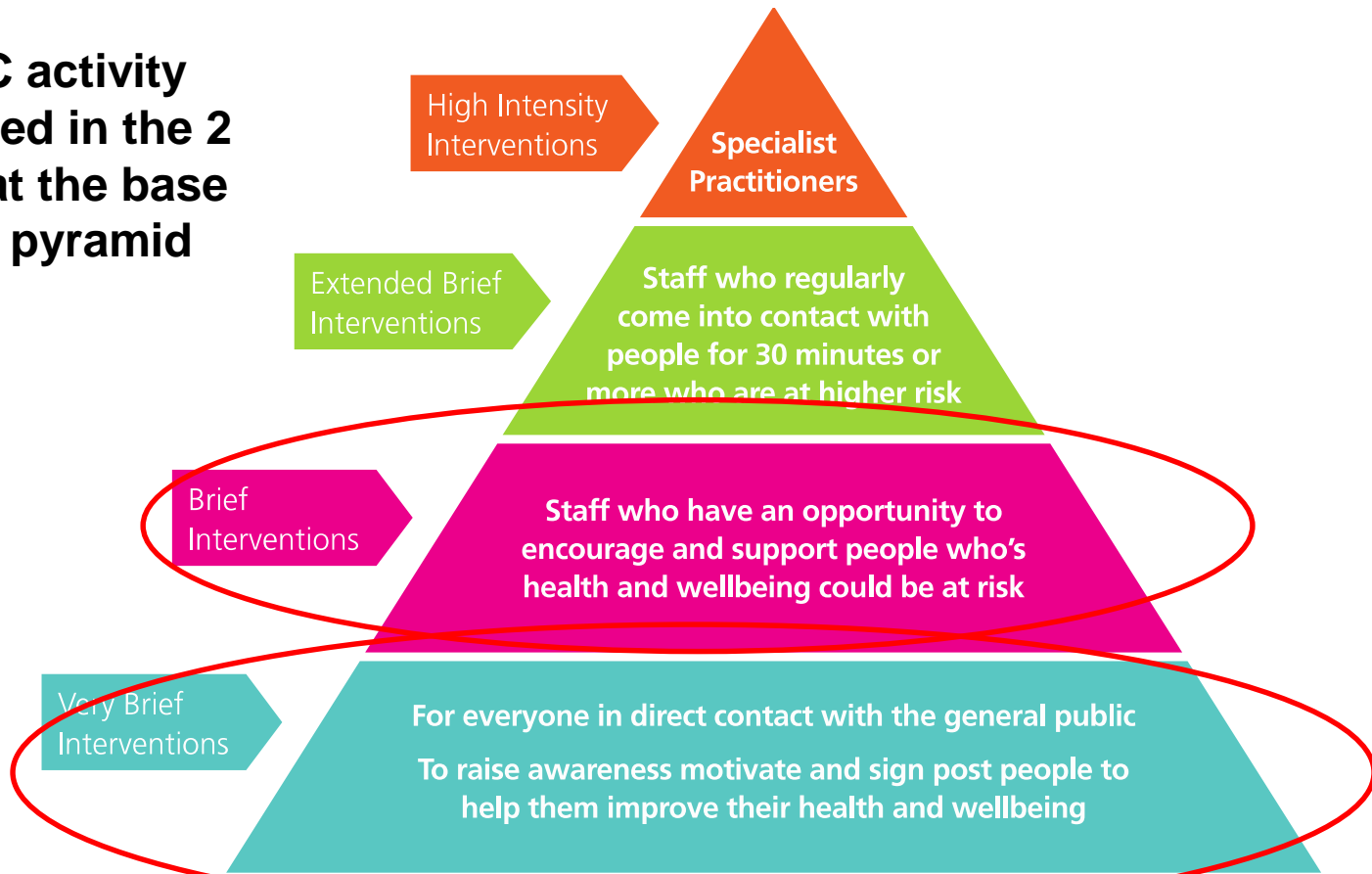
## MECC fits with many different specialities

- radiotherapy appointments, within dental assessments – colleagues in Yorkshire and Humber MECC e-learning package developed for dentists.
- Supporting conversations at scale across populations - Allied Health Professionals e.g. physiotherapists using MECC as fits with their role to prevent ill health.
- Wider workforce – in UK 15 million people, includes Fire and Rescue services. Example: Hertfordshire Fire / West Midlands services are incorporating MECC into Home Safety checks of vulnerable older people.



# MECC Model

**MECC activity  
illustrated in the 2  
layers at the base  
of the pyramid**



Behaviour change interventions mapped to NICE Behaviour Change: Individual Approaches

<https://www.nice.org.uk/Guidance/PH49>



Public Health  
England

# Why is it important?





# In England

**30% of  
adults are  
inactive<sup>1</sup>**

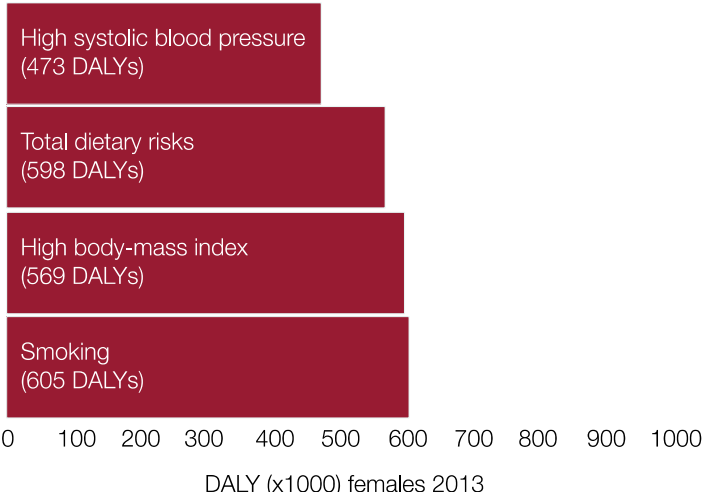
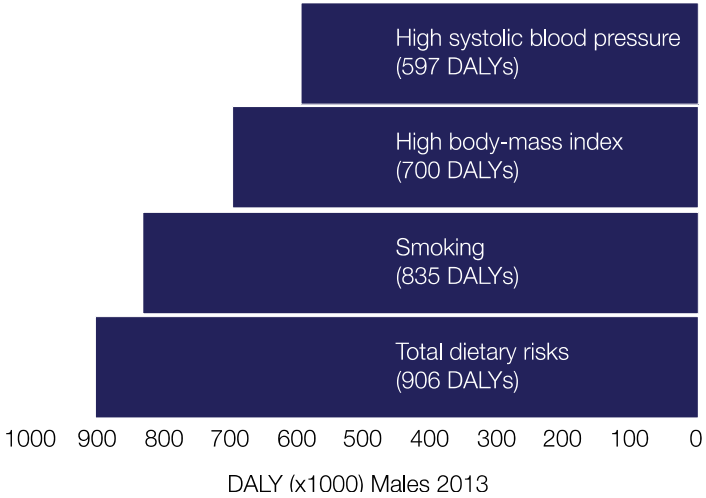
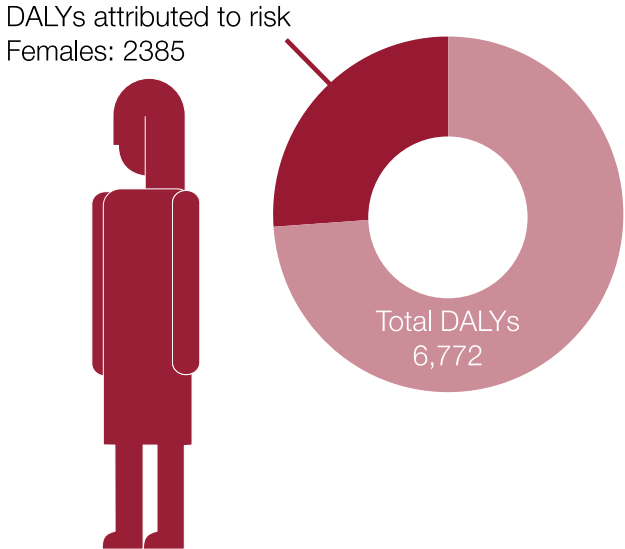
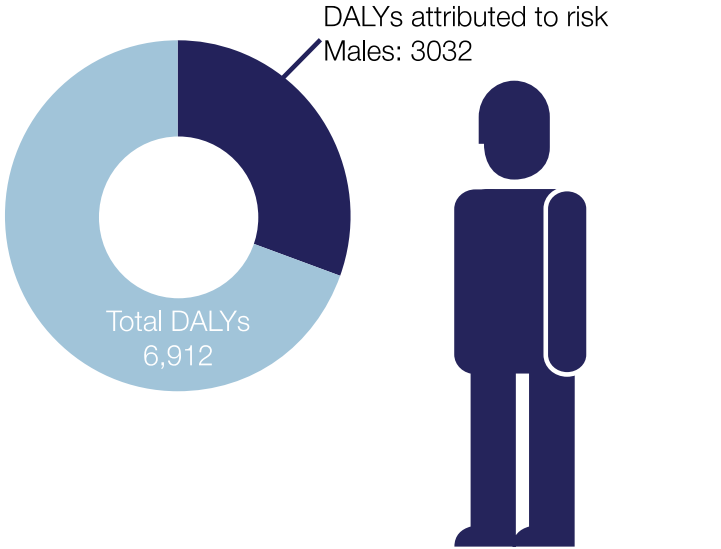
**65% of adults  
are either  
overweight or  
obese<sup>1</sup>**

**1 in 4 people  
affected by a  
mental health  
condition in  
their lifetime<sup>2</sup>**

**17% of  
adults still  
smoke<sup>1</sup>**

**9 million drink above  
the recommended  
daily limits<sup>3</sup>**

# DALYs attributed to largest risk factors, by gender, 2013

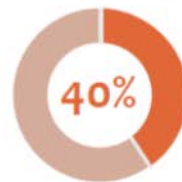


**40% of the UK's disability adjusted life years lost are attributable to the use of tobacco, hypertension, alcohol, being overweight or being physically inactive**



# The evidence base

- **NICE PH49: Behaviour change individual approaches guidance**  
Recommendation 9: use a brief (or very brief) intervention to motivate people to change behaviours that may damage their health.
- **BWeL trial: Testing a brief intervention for weight management**  
in primary care; delivered at a population level
- **Implementing ‘Making Every Contact Count’: a scoping review.** London South Bank University. Key barriers and levers identified.
- **Wessex MECC Pilot:** Primary Care & Population Sciences, University of Southampton; identified organisational and staff readiness factors.



**BWeL Trial results  
summary:  
University of  
Oxford**

**SECONDS**  
to carry out  
this brief  
opportunistic  
intervention.

**ATTENDED**  
the weight-loss  
programme  
they were  
referred to.

**WEIGHT LOSS**  
on average after  
1 year compared  
with 1.04kg in the  
control group.

**LOST 5%**  
of their  
bodyweight  
over 12 months.

**PATIENTS AGREED**  
that the conversation  
with their doctor  
was appropriate  
and helpful.



Public Health  
England

# Case study

## Lancashire Care NHS FT

- 56% of their 6,800 staff undertook a level one e-learning package + supplementary face to face training
- Reporting system to record 'health chats' established
- Supporting communication plan to engage staff
- Second stage of the project saw trust staff developing 5 level 2 specialist e-learning modules on subjects including domestic abuse and ACE's

## Staff reported outcomes:

- Improvements in knowledge about behaviour change, alcohol, health eating, physical activity and smoking
- Increased confidence around delivering 'healthy chats'
- Increased self awareness about their own behaviours
- Still some confusion about how MECC related to their role

<http://www.nhsemployers.org/case-studies-and-resources/2016/09/making-every-contact-count-to-improve-staff-wellbeing-case-study>



Public Health  
England

# National action



# National MECC advisory group

- Includes: NHS England Nursing and Medical Directorates; HEE local teams; RCN; RSPH; ADPH; local authority and acute trust leads; Southampton and South Bank Universities; PHE Nursing, Centre Health & Wellbeing, Dental, Pharmacy, Allied Health and Workforce leads.
- Provides advice, information sharing, evidence, suite of tools, national advocacy for MECC
- MECC e-learning resources on HEE's national e-Learning for Health platform
- MECC Community of Practice 300+ members - shared online facility accessible from all devices via app for the network to discuss, share and network ideas on all things related to MECC (now on Facebook)
- 5 Nations MECC network
- If you would like to join the community please e-mail: [hee.mecc@nhs.net](mailto:hee.mecc@nhs.net)



Public Health  
England

# Products

- Definition
- Consensus Statement
- Implementation Guide
- Training Quality Marker Checklist
- Evaluation Framework
- MECC in NHS Standard Contract
- National conference

<http://makeeverycontactcount.co.uk>



# Consensus statement

**Purpose:** to articulate the **What, Who, Why** and **How** of MECC and provide clarity of purpose

- **What** is meant by MECC, clear definition
- **Who:** which organisations are included
- **Why:** alignment with key national strategies and objectives
- **How:** What MECC can help to deliver (Implementation guide, Training Quality marker, case studies etc.)





# Implementation guide

- **Purpose:** Supports organisational readiness and whole system approach
- **8 step model:** supporting implementation of local MECC delivery
- Questions and prompts support MECC review and action planning
- Activities and tools that have been useful for others



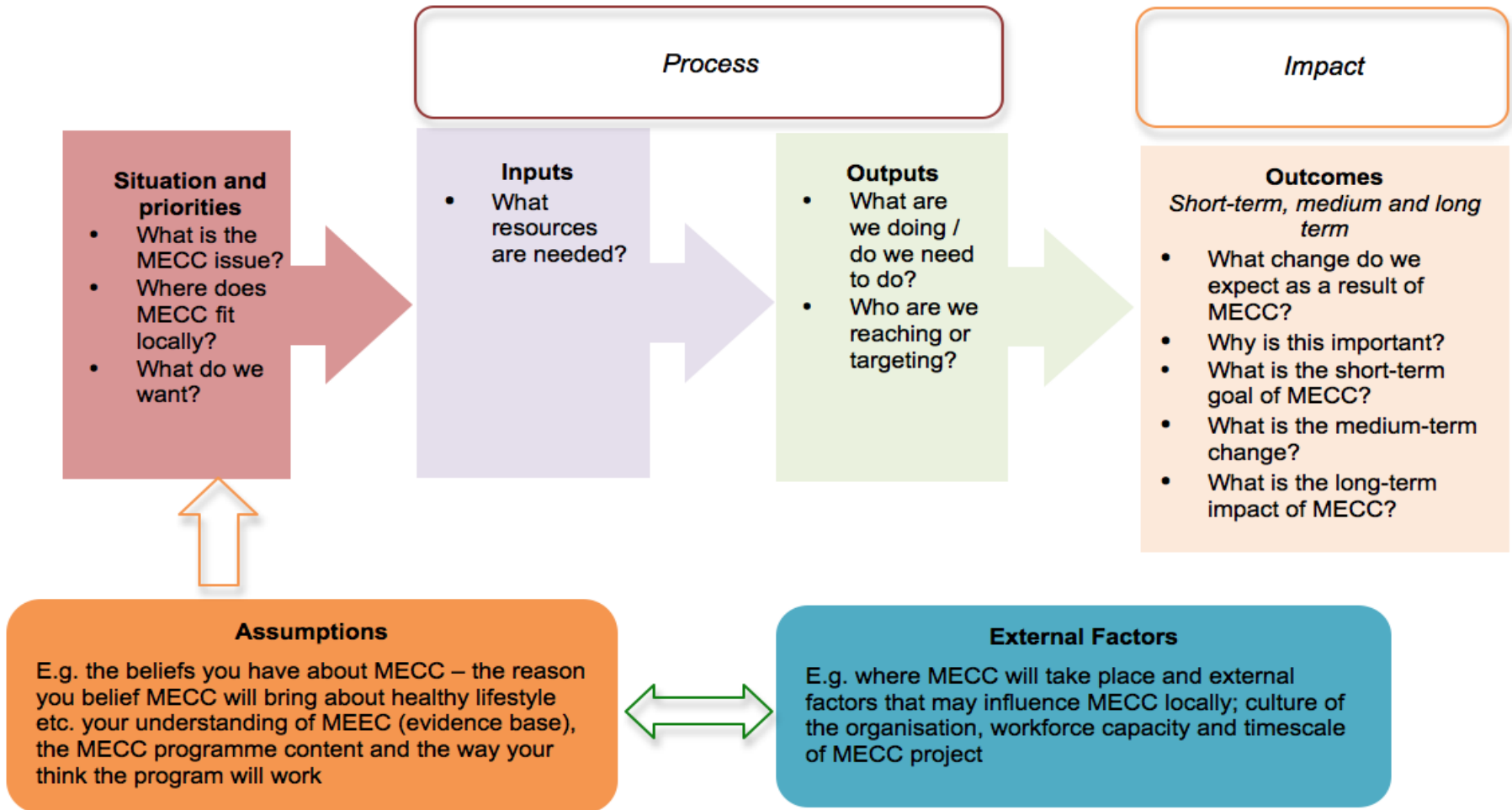
# Training quality marker checklist

## 10 Quality Markers in 3 sections

- Context of the training – Why MECC
  - Skills and Knowledge – How to deliver MECC
  - Evaluation – Is it working
- 
- Each quality marker has a set of indicators of what needs to be in place.
  - Self Assessment indicators: **Fully Met, Partially Met, In Development or Not Met**
  - Action plan to meet quality marker
  - Useful links to supporting resources



# Evaluation Framework





# e-learning platforms

A wide variety of tools are available ranging from generic tools to specific issue based learning

Alcohol IBA in Primary Care

Alcohol IBA in Community Pharmacy

Alcohol IBA in Hospital Settings

Alcohol



# MECC

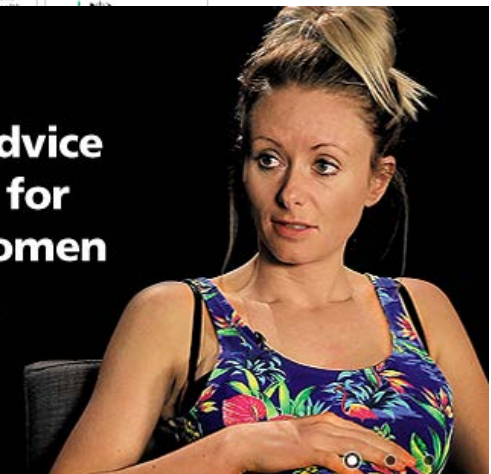
Making Every Contact Count

Welcome to Sandwell and West Birmingham Hospitals NHS Trust's short online training module on how to give Very Brief Advice (VBA) on Smoking, Weight, Alcohol, and Physical activity – SWAP.



## Very Brief Advice on Smoking for Pregnant Women

New online course  
now available





# More evidence

- NICE Behaviour change: general approaches, Public health guideline 6  
<https://www.nice.org.uk/Guidance/ph6>
- Clustering of unhealthy behaviours over time Implications for policy and practice, Kings Fund <https://www.kingsfund.org.uk/publications/clustering-unhealthy-behaviours-over-time>
- Making Every Contact Count: an evaluation; Journal of Public Health (2013)  
[http://www.publichealthjrn.com/article/S0033-3506\(13\)00128-5/abstract](http://www.publichealthjrn.com/article/S0033-3506(13)00128-5/abstract)
- Making every contact count': Evaluation of the impact of an intervention to train health and social care practitioners in skills to support health behaviour change - Journal of Health Psychology (2016) <http://journals.sagepub.com/doi/abs/10.1177/1359105314523304>
- Wessex making every contact count pilot evaluation report, Southampton University 2015  
<http://www.wessexphnetwork.org.uk/media/22802/Wessex-MECC-Evaluation-Report-Final-110615.pdf>



Public Health  
England

**What are the challenges to implementing MECC in your organisation?**

**What are the opportunities?**

**What do you need?**