### **ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS**

1.	Meeting:	Health Select Commission
2.	Date:	23 <sup>th</sup> October 2014
3.	Title:	Making Every Contact Count (MECC)
4.	Directorate:	Public Health

## 5. Summary

The report provides an overview of the Making Every Contact Count (MECC) initiative. The development and implementation of MECC has been supported by the Health & Wellbeing Strategy.

### 6. Recommendations

6.1 That HSC receives and accepts the report.

#### 7. Proposals and Details

The opportunity to garner a wider public health workforce brings with it the need for robust, inclusive systems that ensure everyone understands how to influence and communicate behaviour change messages effectively and make every contact count.

The Prevention and Lifestyle Behaviour Change Competence Framework provides a mechanism to ensure systematic, measurable and evidenced development of workforces to meet the challenge.

The framework is informed by NICE guidance, the KSF (Knowledge and Skills Framework), staff reviews, National Workforce Competences (NWC) and National Occupational Standards (NOS).

Whilst these clearly define the need and the competencies, the framework also acknowledges the complexity and the challenging factors effecting health and wellbeing behaviour and therefore operates from the premise of 'starting from where the person is' and considers behaviour change in the context of the wider and social determinants of heath.

The framework provides the architecture to facilitate workforce strategies that deliver the public health agenda and embed behaviour change into strategies and relative Outcomes Frameworks designed to improve the health and wellbeing of individuals and populations.

As well as the clear benefits for commissioning, service provision and improving the capacity of the workforce, the Framework also provides a barometer for organisations' investment in staff health and wellbeing and associated improvements in productivity.

Making Every Contact Count has been discussed at the Rotherham Health and Wellbeing Board. Though Partners agree in principle with the concept, actual engagement with and tangible implementation of MECC has been disappointing.

We are currently reviewing the approach to MECC and looking at alternative strategies to engage partnership organisations.

### 8. Finance

There is no dedicated funding for the development and implementation of MECC. There are costs incurred by the delivery of training and resources to support the signposting of the public to behaviour change services. There is limited dedicated officer time within the Public Health team to support partner organisations in developing and implementing their MECC proposals.

#### 9. Risks and Uncertainties

Partner organisations have indicated that a "one size fits all" approach is not what they would wish to see. Individual organisations are being encouraged to propose

their preferred approach, and this will lead to variation in the focus and impact of the programme.

# 10. Policy and Performance Agenda Implications

Resulting numbers of referrals to behaviour change services can be monitored, though the actual impact of the MECC programme may be difficult to measure unless it is embraced in the context of staff performance and development.

## 11. Background Papers and Consultation

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