



Public Health  
England

# Nursing and Midwifery Contribution to Public Health

Improving health and wellbeing



June 2013

# Introduction

The challenges we face in terms of population health and wellbeing are huge. We know the impact of lifestyle factors on health, we understand increasingly the “causes of the causes” and we are learning more about how to support people to make decisions and choices which are positive for their health. We now need to practice in ways which we use this knowledge and our nursing and midwifery skills to make a personal and professional impact to improve health and wellbeing. Specialist public health nurses have specific roles, and every single nurse and midwife can act to make every contact count and become a health promoting practitioner

## **Key points**

Maximising the impact of nursing and midwifery on improving and protecting the public’s health is one of the six key action areas of the national nursing midwifery and care strategy *Compassion in Practice*, launched in December 2012.

A model to underpin practice is being developed.

An engagement exercise will be undertaken with the professions and professional bodies to promote understanding and commitment.

Over the past six months a range of tools have been reviewed and developed in order to assist all nurses and midwives in discharging their responsibilities through the delivery of evidence-based care.

The leaflet summarises progress to date and provides links and contacts for further information

## **Definition of Public Health**

“The science and art of promoting and protecting health, well-being, preventing ill-health and prolonging life through the organised efforts of society”

(The UK’s Faculty of Public Health 2010)

## Public Health England's priorities

Local action will drive sustainable change in the public's health, but PHE is committed to taking action on a national scale where it makes sense, and when it is needed. PHE will focus its energies on five high-level enduring priorities:

1. Helping people to live longer and more healthy lives by reducing preventable deaths and the burden of ill health associated with smoking, high blood pressure, obesity, poor diet, poor mental health, insufficient exercise, and alcohol
2. Reducing the burden of disease and disability in life by focusing on preventing and recovering from the conditions with the greatest impact, including dementia, anxiety, depression and drug dependency
3. Protecting the country from infectious diseases and environmental hazards, including the growing problem of infections that resist treatment with antibiotics
4. Supporting families to give children and young people the best start in life, through working with health visiting and school nursing, family nurse partnerships and the Troubled Families programme
5. Improving health in the workplace by encouraging employers to support their staff, and those moving into and out of the workforce, to lead healthier lives

**To underpin these outcome-focused priorities PHE will:**

6. Promote the development of place-based public health systems
7. Develop its own capacity and capability to provide professional, scientific and delivery expertise to its partners

## Compassion in practice



*Compassion in practice* sets out six values and behaviours which are the centre of excellent care, and six areas for action to concentrate our efforts to improve care experience and health outcomes for individual families and communities.

**Action Area 1:** Helping people to stay independent, maximising wellbeing and improve outcomes.

**Action Area 2:** Working with people to provide a positive experience of care.

**Action Area 3:** Delivering high-quality care and measuring impact.

**Action Area 4:** Building and strengthening leadership.

**Action Area 5:** Ensuring we have the right staff, with the right skills, in the right place.

**Action Area 6:** Supporting positive staff experience.

Nurses, midwives and care staff make significant contributions to improving and protecting the public's health.

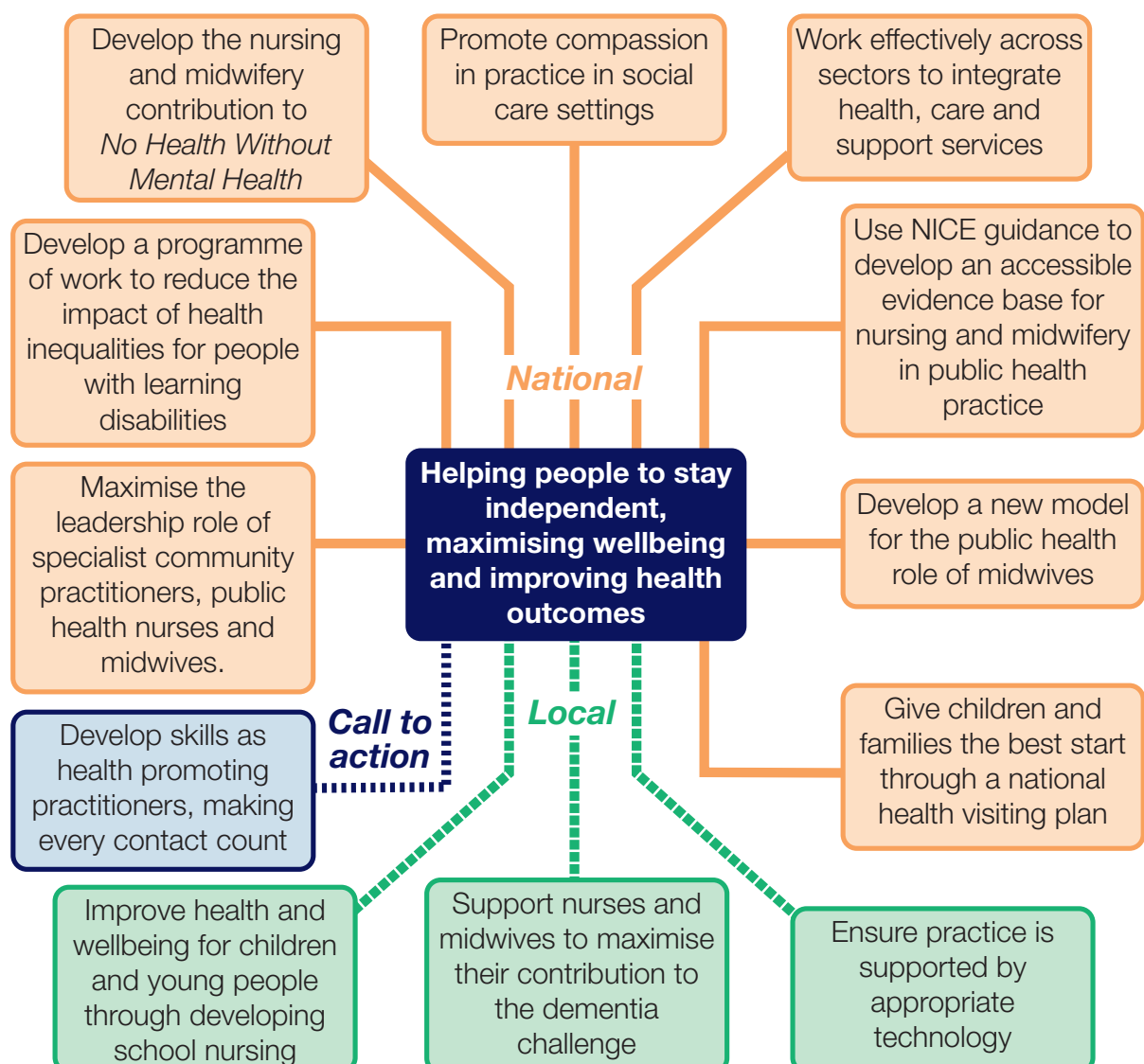
Public health is the business of every nurse and midwife. We set out in the model the levels at which nurses and midwives can impact. Fundamentally it is essential that we take every opportunity to make every contact count so that we not only give the care we specialise in but also help people, families and communities maximise their wellbeing, improve health outcomes and reduce inequalities.



## Action Area 1:

# Helping people to stay independent, maximising wellbeing and improving health outcomes

This area looks at how every practitioner involved in providing care and support can help people manage their health and wellbeing more effectively. It ensures individual needs are identified and that appropriate support is in place. This action area makes every contact count wherever care and support are delivered.



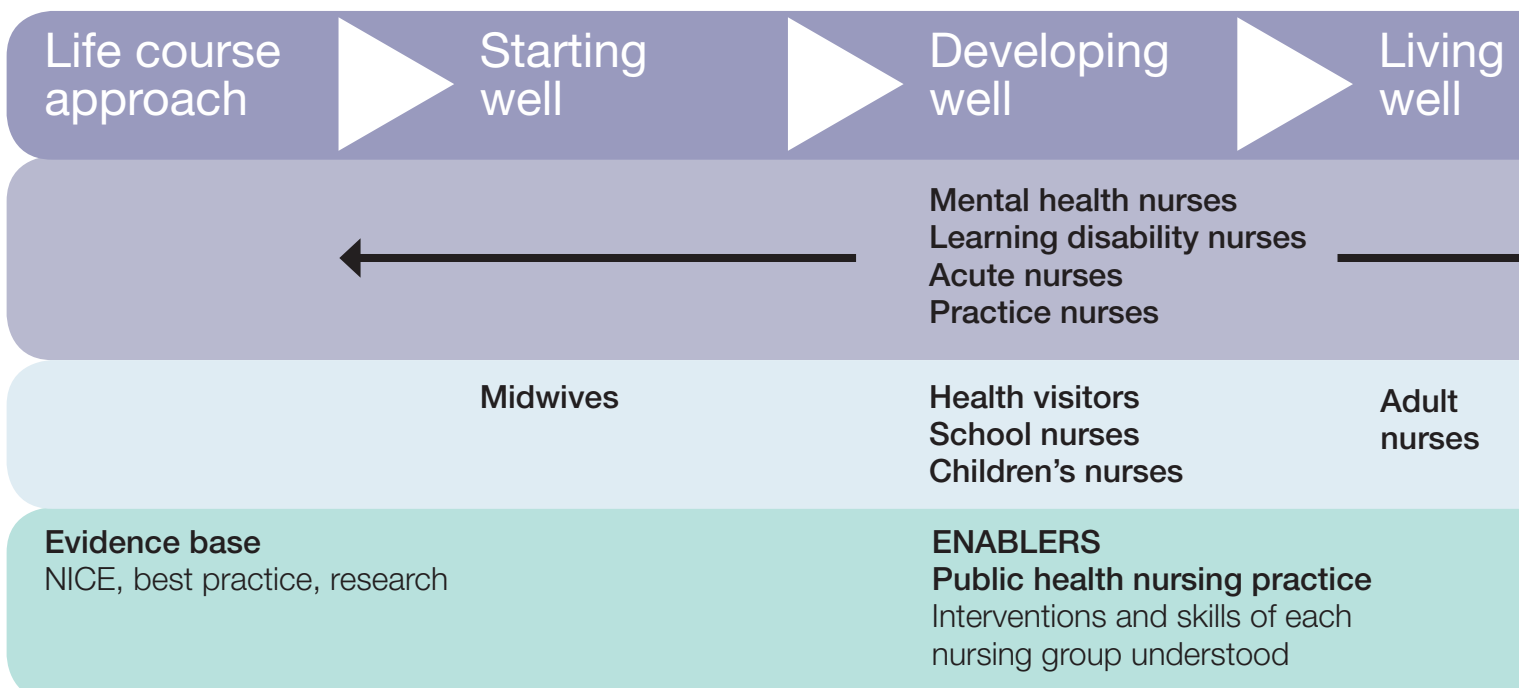
# Actions to maximise the nursing and midwifery contribution to improving health and wellbeing at individual, community and population levels

## Individual

- adopt a holistic approach to the care of individuals, making every contact count
- offer and provide up-to-date evidence-based advice and information on health and wellbeing
- provide advice and support to individuals at risk regarding preventable causes of premature mortality
- signpost individuals to people and agencies that can help them improve their health and wellbeing
- identify realistic and achievable goals when improving health and wellbeing of individuals including actions to achieve improvement
- listen to and support individuals, communicate concerns, refer with consent

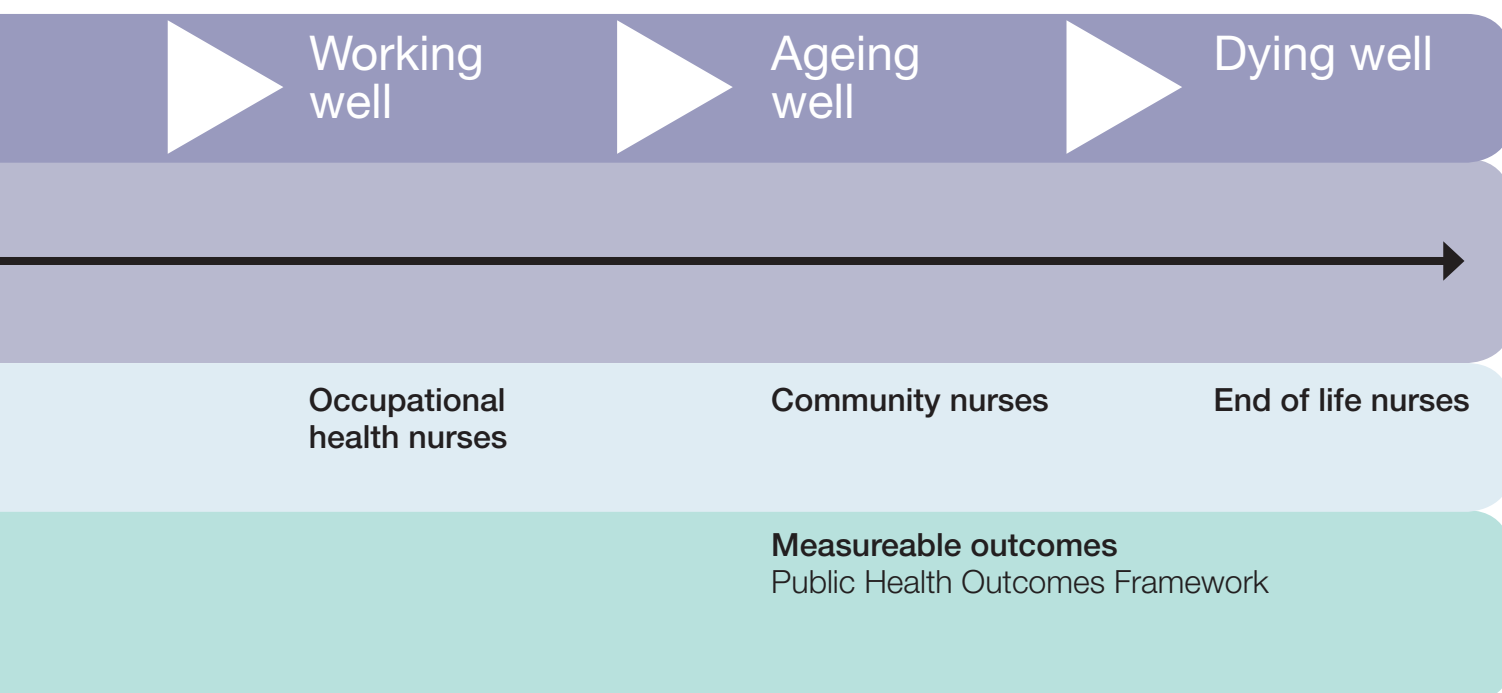
## Community

- assess community needs, plan and provide specific community focused programmes
- access hard to reach groups and those that do not access services through targeted provision of specific programmes responsive to local need
- plan, implement and review health improvement projects through effective engagement with communities and those responsible for the commissioning of services
- work effectively with the public and communities taking opportunities to improve health and wellbeing and reduce inequalities. Developing community resources to support improvement
- articulate the health interests and concerns of individuals and communities to relevant people through population-level data
- provide evidence-based community level health care programmes



## Population

- influence and shape the multi-agency political and policy agenda to maximise opportunities for improving population health and wellbeing and reducing inequalities
- engage with strategic partners in all sectors and the public to establish need, determine goals, priorities, strategies and success criteria
- lead on the commissioning, implementation and evaluation of programmes to improve population health and wellbeing, and reduce inequalities
- build sustainable community capacity and resources for health improvement and the reduction of inequalities
- ensure infrastructure and processes are in place to support regional and national strategies to improve health and wellbeing, and reduce inequalities
- ensure nursing and midwifery staff have the appropriate skill set and training to deliver the services required



# Public Health Outcomes Framework

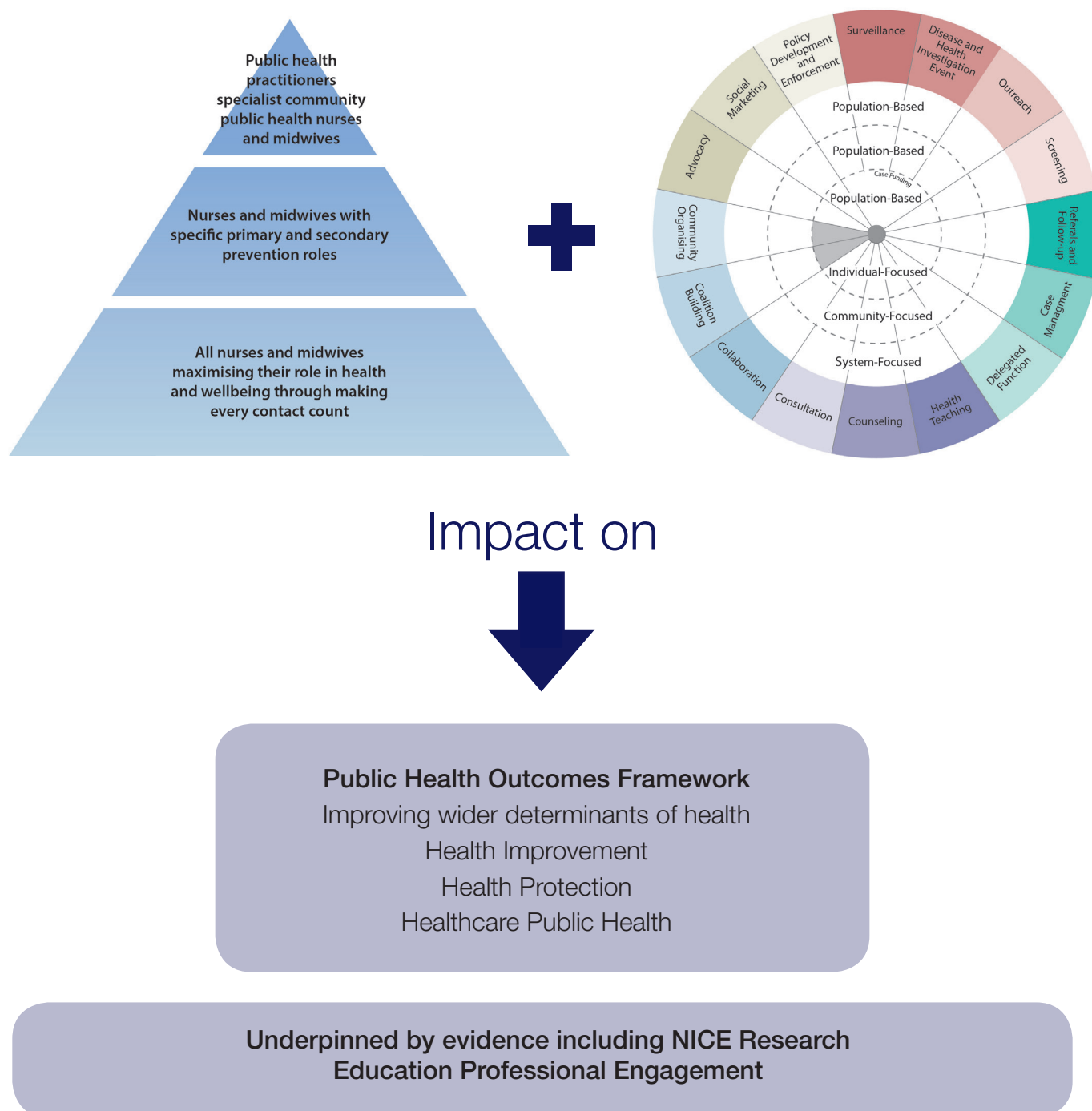
The Public Health Outcomes Framework (PHOF) sets the context for the system, from local to national level. The framework sets out the broad range of opportunities to improve and protect health across the life course and to reduce inequalities in health that still persist.

<b>Context :</b>	A system from local to national level.
<b>Vision:</b>	To improve and protect the nation's health and wellbeing, and improve the health of the poorest fastest
<b>Outcomes:</b>	Increased healthy life expectancy Reduced differences in life expectancy and healthy life expectancy between communities
<b>Domains:</b>	Improving wider determinants of health Health Improvement Health Protection Healthcare Public Health

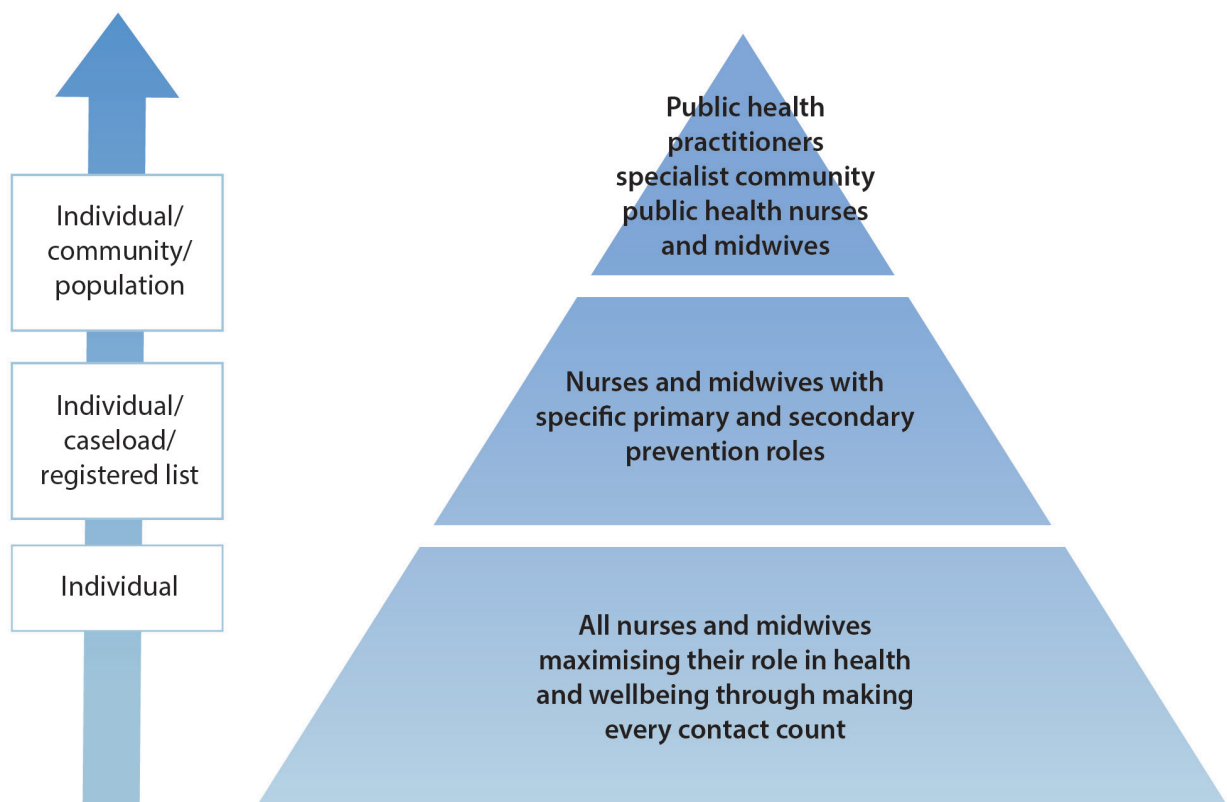
The National Institute for Health and Care Excellence (NICE) has produced a range of guidance on public health. We have worked with NICE to review and summarise the relevant guidance to support nurses and midwives in delivering evidence-based interventions to improve health. This can be found at [www.gov.uk/phe](http://www.gov.uk/phe). Over the coming months we will work with the professions to develop the evidence-base including web interface to access this guidance and support learning and development for health promoting practice.



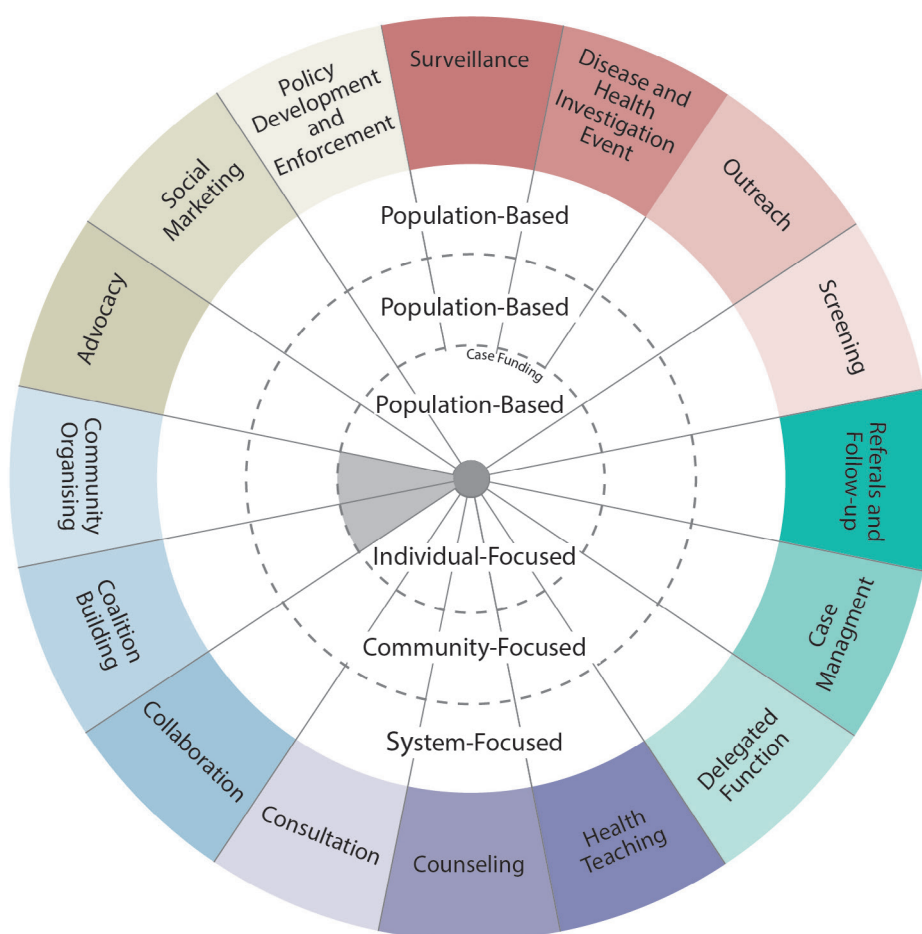
## Components of Public Health Nursing and Midwifery



## Three levels of nursing and midwifery practice: improving and protecting the public's health



# Adapting and adopting the Intervention Wheel



Keller Olsen L., Strohschein S, Lia-Hoagberg B, Schaffer MA. ( 2004). Population based public health interventions: Practice-based and evidence-supported. *Public Health Nursing* 21(5): 453-468.

These elements are reflected in the 17 interventions of the US Intervention Wheel and can be easily adapted to public health activities and interventions in the UK

US	UK
<ul style="list-style-type: none"> <li>1 - Surveillance</li> <li>2 - Disease and health threat investigation</li> <li>3 - Outreach</li> <li>4 - Screening</li> <li>5 - Case finding</li> <li>6 - Referral and follow-up</li> <li>7 - Case management</li> <li>8 - Delegated functions</li> <li>9 - Health teaching</li> <li>10 - Counselling</li> <li>11 - Consultation</li> <li>12 - Collaboration</li> <li>13 - Coalition building</li> <li>14 - Community organising</li> <li>15 - Advocacy</li> <li>16 - Social marketing</li> <li>17 - Policy development and enforcement</li> </ul>	<ul style="list-style-type: none"> <li>1 - Surveillance</li> <li>2 - Disease and health protection</li> <li>3 - Outreach</li> <li>4 - Screening</li> <li>5 - Case finding/health needs assessment</li> <li>6 - Referral, follow and signposting</li> <li>7 - Case management/care planning</li> <li>8 - Delegated functions (skill mix)</li> <li>9 - Health promotion</li> <li>10 - Therapeutic interventions ie CBT, MI</li> <li>11 - Consultation</li> <li>12 - Collaboration</li> <li>13 - Partnership working</li> <li>14 - Building community capacity</li> <li>15 - Advocacy</li> <li>16 - Social marketing</li> <li>17 - Policy development and action</li> </ul>

## Getting involved

### **There are various ways you can get involved:**

1. Join our virtual network

2. Follow us on Twitter:

@vivjbennett – director of nursing, Department of Health

@davidfosterdh – deputy director of nursing, Department of Health

@wendyjnicholson

@BenT\_DH

@paulinwatts

@jenniferwinslad

@helenhxwilliams

@nancybarbs

@PHE\_UK

3. For more information and to follow Viv Bennett's blog go to [www.dh.gov.uk/vivbennett](http://www.dh.gov.uk/vivbennett)

### **Useful websites**

Community Practitioners and Health Visitors Association [www.unitetheunion.org/cphva](http://www.unitetheunion.org/cphva)

Department of Health [www.gov.uk/dh](http://www.gov.uk/dh)

Institute of Health Visiting [www.ihv.org.uk](http://www.ihv.org.uk)

Mental Health Nurses Association [www.unitetheunion.org/mhna](http://www.unitetheunion.org/mhna)

National Institute for Health and Care Excellence [www.nice.org.uk](http://www.nice.org.uk)

Public Health England [www.gov.uk/phe](http://www.gov.uk/phe)

The Royal College of Midwives [www.rcm.org.uk](http://www.rcm.org.uk)

Royal College of Nursing [www.rcn.org.uk](http://www.rcn.org.uk)

School and Public Health Nurses Association [www.jfhc.co.uk/saphna](http://www.jfhc.co.uk/saphna)

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