Improving Care for Patients with Long Term Conditions through Clinical Health Coaching

Clinical Health Coaching: The Empowered Patient Means Transformation of Care
Long Term Health Conditions
The Long Term Impact of Long Term Conditions
A New Way of Managing Long Term Conditions
Self-Care in Action

Sponsored by Totally Health

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Clinical Health Coaching is a tailored approach, delivered by experienced clinicians and designed to empower patients to pro-actively manage their diagnosed conditions. Our award-winning approach balances clinical skills and coaching experience to deliver a more informed and personal support system for patients. This service effectively reduces healthcare reliance, re-admissions and emergency admissions.

Clinical Health Coaching is proven to promote self-care and self-management and improve patient outcomes, as part of this, we offer a full complement of health centric services:

- **Long term condition management**
- **Emergency admission pressures**
- **Hospital discharge support**
- **Wellness**
- **Patient Decision Aids for Shared Decision Making**
- **Successful integration with telehealth services**

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Contact us to find out how we can support you in delivering integrated, high quality, cost effective services to those diagnosed with long term conditions.
Foreword

Modern developed world healthcare systems have had great success managing to reduce or delay for many years deaths from acute medical conditions. However, that has generated an increased number of conditions requiring management over a long period and, with the rising age of populations in developed countries, a cumulative rise in the number of long term medical conditions with which people are living.

Alongside this, poor avoidable health behaviours (alcohol, smoking, obesity…) make growing numbers of people reliant on healthcare services simply to manage their everyday lives. The costs and burden are projected to become unsustainable unless, among other things, a better care delivery model can be implemented.

This Report looks at such a model whose use is growing. Self-care does not abrogate the clinician’s role in supporting a patient but does offer the patient a degree of responsibility for the tasks that constitute care.

In the opening article by Emma-Jane Roberts, Chief Operating Officer of Totally Health, looks at the ways in which individuals can make positive changes in their lives which address long term health conditions and wider wellness issues, such as smoking and obesity. This is achieved by clinical health coaching, working directly with patients to develop understanding of each person’s experiences and their desired outcomes.

We then take a look at long term health conditions, their prevalence and some of the reasons why there has been an explosion of such conditions and consequent significant rise in the numbers of people living with such conditions. Camilla Slade then considers the impact of long term conditions on patients, of course, but also on the other people who find themselves involved, including clinicians and healthcare systems. Next, Peter Dunwell offers a different way of managing long term conditions with the idea that people with the conditions can become partners in their own care plan rather than mute recipients of whatever care procedures the system might offer. Finally, we set out the benefits of a self care model, again on the patient and others, before looking at the need for a proper self-care support structure and considering what skills a patient will need to self-manage their care programme and how they might gain those skills.

John Hancock
Editor

John Hancock has been Editor of Primary Care Reports since launch. A journalist for more than 25 years, John has written and edited articles, papers and books on a range of medical, management and technology topics. Subjects have included management of long-term conditions, elective and non-elective surgery, Schizophrenia, health risks of travel, local health management, and NHS management and reforms.

Clinical Health Coaching: The Empowered Patient Means Transformation of Care

Emma-Jane Roberts, Chief Operating Officer, Totally Health: Clinical Health Coaching

When HealthCare is designed to empower self-management, people with Long Term Conditions and their carers play a more active role in managing their own health and reducing their need for help from the NHS. Our approach at Totally Health is to adapt and reflect each person’s level of knowledge, skills and confidence around managing their condition and to increase their knowledge, to empower them and to provide support and influence behaviour changes.

Totally Health is a national-award-winning specialist provider of Shared Decision Making and Clinical Health Coaching services, the aim of which is to help individuals make positive changes in their lives which address long term health conditions and wider wellness issues (e.g. smoking and obesity). We provide tailored one-to-one clinical health coaching to enable patients to gain the knowledge, skills and confidence to become active participants in their own health and healthcare, reducing their reliance on both primary and secondary healthcare services.

The Totally-Health model is proven to complement and support existing health care pathways. It delivers lasting changes for patients, more effective condition management, better compliance with treatment, and an improved interaction with available health services. Our vision builds on proposals to ‘liberate’ the NHS by putting patients at the centre of decision making about their own care, enabling them to have more control over their condition and therefore co-creating better outcomes for them and for health and care systems.

The Health Foundation has recently published findings suggesting that effective self-management is the key to person centred care i.e. care that is personalised, coordinated and enabling. At Totally Health we achieve this by working directly with patients to develop an understanding of each person’s experiences and their desired outcomes, which enables our Clinical Health Coaches to provide tailored support. Our coaches take into consideration the individual’s quality of life, abilities, aspirations, preferences, disability, emotions, social support, confidence and sense of wellbeing.
What is Clinical Health Coaching?
Clinical Health Coaching helps patients to gain the knowledge, skills, tools and confidence to become active participants in their care so that they can reach their self-identified health goals. At Totally Health our coaches have five principal roles: providing self-management support, facilitating communication between clinician and patient, helping patients to navigate the health care system, offering emotional support, and providing a continuity of support for the patient. Over a quarter of the population of England has a Long Term Condition and an increasing proportion of these people have multiple conditions. The Five Year Forward View notes that “Long Term Conditions are now a central task of the NHS”. We believe caring for these needs requires a partnership with patients over the longer term rather than providing single, unconnected “episodes” of care. Helping patients thrive in the presence of these diseases requires a paradigm shift in health care delivery models: moving from “What’s the matter?” to “What matters to you?”. This means moving away from a paternalistic and dependent consultation model of “fixing”, to one that is empowering and increasing patient activation, confidence, compliance and healthy behaviours, which are all needed to improve outcomes and reduce healthcare costs.

Why Clinical Health Coaching?
The considerable and increasing impact of long term conditions on morbidity, mortality, quality of life and healthcare costs are significant. • 15.4 million people in England are recorded as having a Long Term Condition, and an increasing number of these have multiple conditions (the number with three or more is expected to increase from 1.9 million in 2008 to 2.9 million by 2018). • People with Long Term Conditions use a significant proportion of health care services: 50% of all GP appointments • 70% of days spent in hospital beds, and • 70% of hospital and primary care budgets in England

Clinical Health Coaching is a relatively new concept for the NHS, although it is well established in other parts of the world, where it has been shown to be a highly effective model of care. Our Clinical Health Coaching services are delivered by experienced nurses, specially trained as coaches working through telephone interventions, who provide a powerful means of motivating patients to change thinking patterns and behaviours to drive better health outcomes. Totally Health provides the leading Clinical Health Coaching service in England, those delivered either alone or aligned with other pathway elements, e.g. augmenting Care Planning and Clinician Activation: two elements of the NHS Long Term Condition delivery system “The House of Care”.

Totally Health Clinical Health Coaches act in a non-directive manner to empower patients to take an active and empowered role in managing their health, educating them about their condition, treatment and prevention. The confidential one-to-one telephone dialogue between the patient and their clinical health coach is completely convenient to the patients and without the need for travel, helping them to discuss how lifestyle changes can positively impact their health status, set goals to change behaviours and provide personal encouragement to help patients to be active in their care.

Totally Health Clinical Health Deliverables
Totally Health has an innovative, proven model of medically-driven whole-person clinical health coaching that delivers sustainable behavioural changes. Our first patient was recruited into the service in December 2012 and so far, over 1,200 patients have been referred into the clinical health coaching service across England and results show:

• Over 35,000 coaching sessions have been delivered
• 59% average reduction in GP Appointments (most achieved in a CCG was 70%)

• 48% average reduction in Community Matron appointments (most achieved in a CCG was 57%)
• 72% average reduction in Out of Hours (most achieved in a CCG was 89%)
• 72% average reduction in Unplanned Admissions (most achieved in a CCG was 75%)
• 50% reduction of 50% in MSK referrals for secondary care management

We achieved all this by utilising our Totally Health recruitment model and assigning each patient a personal clinical health coach for the duration of the service. We have dedicated teams to educate patients, listen to their concerns and correct any misunderstandings. The patients are encouraged and supported to reach agreed goals with treatment and lifestyle changes. Examples include smoking cessation, weight reduction, exercise and diet modification. Our Clinical Health Coaching has led to increased patient confidence and condition awareness, empowering patients to take a central role in reaching agreed goals and to take necessary steps to control symptoms and avoid complications.

Following on from our intensive Clinical Health Coaching programme for Chronic Disease Management, patients are offered maintenance coaching so that they can then remain supported and can contact their named clinical health coach if they are anxious about any aspect of their health and wellbeing during a step down management pathway process.

In addition to the Chronic Disease Management, Totally Health also provides other Clinical Health Coaching services, including:

• Admission Pressures: helping to keep people well and reduce the risk of crises in those months that exacerbate conditions, e.g. cold spills that can aggravate respiratory conditions and Ramadan that can exacerbate complications of diabetes.
• Hospital discharge support: our coaches offer telephone support and reassurance, to bridge the clinical gap between hospital and home and so reduce pressure on GPs.
• Wellness: our coaches can help support people in making healthier life choices such as smoking cessation, increasing physical activity and healthier eating and assisting the NHS prevention agenda and supporting employees to remain in employment and at work.
• Patient Decision Aids for Shared Decision Making: Totally Health provides the shared decision making services and support for the national programme in England.

Case Studies

[Case Study 1] Chronic Disease Management (CCG Population)

In the autumn of 2014 we were working with a number of CCGs across England to support their QIPP programmes in the reduction of emergency admissions and increase capacity within the health system to cope with demand. While technology can be an effective way to improve the rate of disease management interventions, these are less effective unless supported through consistent follow-up and inter-personal interaction. Our Clinical Health Coaching is a collaborative process characterised by active involvement of the referred patient and their primary care team in the management of clinical disease and utilization of shared educational tools. Our coaches work with the patient and their GP to co-ordinate the best management approach for their individual condition.

In a highly integrated team model, the patient, GP and coach work together to achieve agreed goals and support the person through treatment. By providing consistent follow-up telephone support and reassurance our coaches have been shown to be successful in reducing the number of people who are readmitted to hospital across the whole disease pathway.

In addition to the role of reducing admissions, the secondary benefits have included a reduction of healthcare staff time. This was achieved through the patients avoidance of hospital admissions, which allowed the trusts to reallocate this resource to other areas of core business.

The Health Foundation has recently published findings suggesting that effective self-management is the key to person centred care i.e. care that is personalised, coordinated and enabling.
Health coaching evidence from the USA confirms that it can improve quality, effectiveness and cost-effectiveness of disease management.

[Case Study 3] Benefits for GP practices
The emergence of long term conditions is the dominant challenge to health and care systems. Moreover, the pattern of long term conditions is changing. Although great strides have been made in tackling individual conditions, increasingly individuals have to cope with multiple conditions. Society has changed and people have different expectations, which means the traditional role of the professional with a patient will need to be transformed. We are currently working with a Midlands GP practice with a population of 15,000 to identify, recruit and provide clinical health coaching across a range of long term conditions and co-morbidities. Our programme is providing support to the practice to free up their clinicians to deliver other core services, emergency care and management of the complex patients requiring diagnostic interventions.

National Recognition
WINNERS; November 2014; Clinical Team of the Year (Respiratory), The General Practice Awards
WINNERS; November 2014; Excellence in Healthcare Collaborations and Partnerships; PMEA
FINAULTS; November 2015; Technology-Enabled Care Services; Innovation in Healthcare Awards; East Midlands Academic Health Science Network

Dr Durairaj Jawahar, GP and COPD clinical lead for the Leicester City Clinical Commissioning Group: “Our patients get the support of managing their own condition at home. We know patients are happier and recover quicker when their care is managed at home. We are really pleased that the service has evidenced the benefits and the programme has enabled patients to avoid an admission.”

Emma-Jane Roberts, Chief Operating Officer Totally Health, said: “Winning three national awards for our service is testament to how services external to the NHS and those within it can be integrated successfully to not only deliver high quality care to patients, but patients get the support of managing their own condition at home.”

Patient Decision Aids for Shared Decision Making
We provide the shared decision making services and support for the national programme in England.

Wellness
Our coaches help support people in making healthier life choices such as smoking cessation, physical activity and healthier eating.

Emergency admission pressures
We help keep people well and reduce the risk of crises in these difficult winter months.

Hospital discharge support
Offering telephonic support and resources to bridge the clinical gap between hospital and home.

Long term condition management
Our coaches help people with long term conditions self-manage.

Health coaching is a tailored approach, delivered by experienced clinicians and designed to empower patients to pro-actively manage their diagnoses and conditions.

Our approach balances clinical skills and coaching experience to deliver a more informed and personal support system for patients. This service effectively reduces healthcare reliance, re-admissions and emergency admissions.

Clinical Health coaching is proven to promote self-care and self-management and improve patient outcomes. As part of this, we offer a full complement of health centeric services.

Totally Health is a leading provider of health coaching services and care management programmes.
Long Term Health Conditions

John Hancock, Editor

What they are, why they are a growing challenge, who have them and the cost

In its 2011 paper, ‘Care Planning: Improving the Lives of People with Long Term conditions’ the Royal College of General Practitioners stated, “Patients with long term conditions do not want to be defined by those conditions and... by working in partnership with their GPs, they do not have to be.” The paper continues, “…when patients self-care and equally feel supported in doing so, they are more likely to have greater confidence and a sense of control, to have better mental health and less depression and to reduce the perceived severity of their symptoms, including experienced pain.” But, perhaps we are running ahead here. Before we even address the topic of this paper it will be instructive to understand what are considered long term conditions, who are affected by them and what changes are occurring in the ways in which long term conditions present and run.

Long Term Health Conditions: A Sign of the Times

The list of long term conditions is lengthy but includes any conditions with which a patient will have to live for an indeterminate time or for the rest of their life. To name but a few more familiar examples, they can range from diabetes and cancers to arthritis, COPD (chronic obstructive pulmonary disease), HIV/AIDS, heart disease, obesity and related conditions, mental health conditions, dementia and the results of other problems such as alcohol and drug misuse and smoking. There are many others but space does not allow for them all to be listed. Chronic diseases have always been with us but a “combination of prevailing lifestyle factors including diet, lack of physical activity and smoking have contributed to the rising incidence of chronic disease in all parts of the globe, accounting for the majority of deaths in all but the lowest income countries.” This statement, from the European Observatory on Health Systems and Policy, continues to draw a link between growing prosperity and chronic disease or long term conditions and to add the worrying prediction that such conditions and the burdens they impose will grow in the years to come.

The potential for growth is perhaps the most worrying aspect of long term health conditions inasmuch as it will expand those parts of society that feel isolated from the mainstream with all the personal consequences to which that can lead. Also, as multiple long term conditions in one patient add to the complexity of their care needs, they might feel an ever increasing sense that their lives are governed not by their own will but by the multiple, though often uncoordinated, scheduling requirements of the healthcare system. The other major consequence affects that healthcare system itself with a growing proportion of its priorities and resources having to be used on simply maintaining those with long term conditions rather than on improving the health management and outlook of the whole population.

Given the above, it is perhaps not surprising that “A key feature of current health policy is the focus on long term conditions…” It is also significant in the terms of this report that the BMC Health Services paper quoted adds that, “Policy concerning the management of long term conditions gives high priority to active patient participation in delivery of health care, and to the importance of self-management.”

The Prevalence and Distribution of Long Term Health Conditions

In England, the Government records that more than 15 million people have long term conditions and these people account for 70% of expenditure on health and social care in the country. The King’s Fund further qualifies those statistics with the information that “Long term conditions are more prevalent in older people (58 per cent of people over 65 compared to 14 per cent under 45) and in more deprived groups (people in the poorest social class have a 60 per cent higher prevalence than those in the richest social class and 30 per cent more severe of disease).” That the conditions that often become long term are most prevalent among the lower socio-economic groups where also, their presentation is often worse, is borne out by UK Department of Health statistics. They suggest that, while 33% of those from professional occupations are likely to suffer a long term condition at some time, that figure rises to 52% among unskilled occupations. It is also the case that people living in deprived areas will have multiple health problems 10-15 years earlier than people living in affluent areas.

Also from the King’s Fund we learn that long term conditions account for 50% of GP appointments, 64% of hospital outpatient appointments and 70% of hospital inpatient bed days. Moreover not only is the number of people with individual conditions increasing, but the numbers of patients with multiple and complex long term conditions is also rising. From these prevalence levels alone it’s easy enough to see why most healthcare professionals believe that there has to be a better way to manage long term conditions than the traditional care model.

Certainly, Dr Martin McShane, NHS England’s national director for people with long term conditions, interviewed in the Guardian in January 2014, expressed the view that, the NHS in its current form is not well set up to look after patients who are medically complicated, especially if they have several long term conditions, such as arthritis, heart failure and the early signs of dementia. While the total number of people with long term conditions is expected to stay at around 15 million, the number with three or more conditions is expected to rise from 1.9 million to 2.9 million by 2018. Professor Gillian Leng, Deputy Chief Executive for NICE, would not disagree: “An estimated 6 million people in England aged 60 and over are living with more than one long term health condition.” As the number of older people in society increases, this figure is expected to rise. A recent report by Age UK warned that a further one million older people in England could be living with multiple long term conditions by 2020.

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The Long Term Impact of Long Term Conditions

Camilla Slade, Staff Writer

As the number of people living with long term health conditions increases, the immediate and cumulative effect on patients and healthcare systems will be enormous.

Long term health conditions affect society at all levels from the patient with the condition through their family, friends and carers to the national healthcare system, both in its structure and in the way it has to allocate resources.

Impact of Long Term Conditions on the Patient

A problem with any long term condition is the co-morbidities that accompany it, sometimes as a direct clinical consequence of the original condition and sometimes because of its lifestyle limiting aspects. Smoking and lack of physical activity, cognitive impairment, and disability.

While there are often medical or surgical procedures that can address aspects of a long-term condition (weight loss surgery, for instance) and might well improve the clinical risk of mortality, it is clear that there is a mental aspect to this in a sense of not being in control of one’s own life plays a significant part. And yet, from an institutional management point of view, there is logic to the traditional care system. The European Observatory on Health Systems and Policy explains it: “Hospitals have the advantage of confining the patient in one place, waiting for a series of investigations or a sequence of treatments to be undertaken. The patient is seen when it is convenient for the healthcare providers. Organizationally, this makes it easy to deliver complex packages of care, but it also brings major disadvantages for the patient, whose liberty is restricted.” (author’s emphasis).

Those ‘major disadvantages might be summed up as a reduction in quality of life and that can be a significantly poor outcome from any system of managing long term conditions that does not have the patient at its centre. And we have to remember that it is not only the individual with the long term condition but also their family, friends and support network who have to take the strain if the care programme is designed to suit the bureaucratic convenience of the healthcare system rather than taking into account the continuing need of all those people to live fulfilling lives.

Impact of Long Term Conditions on Healthcare Services

We’ve already seen in John Hancock’s preceding article that in England the care of people with long term conditions accounts for 70% of the costs of health and social care. But it isn’t only about cost; we’ve also seen that people with long term conditions account for about 50% of all GP appointments (some studies put that as high as 80%). 64% of outpatient appointments and 70% of inpatient bed days. And when patients have multiple conditions, the challenges can multiply; as the European Observatory on Health Systems and Policy (above) puts it, “The implications for health systems and society as a whole are considerable. People with chronic health problems are more likely to utilize healthcare, particularly when they have multiple problems.” But if people with long term conditions can impact the delivery of services, it is within the delivery of those same services that changes could improve the patient experience and, in so doing, reduce the burden of their condition on the healthcare system.

The UK Department of Health paper, Improving the health and well-being of people with long term conditions sets out the challenge: “Effective LTC [long term conditions] management depends on more than just providing information to individuals and their families. It requires a supported process whereby people who live with LTCs work to appraise their current lifestyle choices, think about important goals for them as individuals and work towards gaining the confidence to attain those goals. A multidisciplinary team of health and social care professionals may be involved in this process, depending on the complexity of the individual’s need.”

Impact of Long Term Condition on Healthcare Budgets

Of course, changes like that will require some level of expenditure at the outset but, in the long run, will reduce the costs associated with those statistics (above) of the extent to which people with long term conditions now dominate healthcare time.

We’ve already seen that long term conditions account for 70% of health and social care budgets in England but, in money terms that means £7 in every £10 of budgets totaling some £152bn (King’s Fund) and UK Public spending Review 14, i.e. long term conditions cost the UK over £100bn a year in 2015/16 and rising.

That is clearly not a sustainable model to carry into the future but there are new ways of thinking being considered as alternatives as we’ll see in the following article.
A New Way of Managing Long Term Conditions

Peter Dunwell, Medical Correspondent

Patients can become partners in their care programme rather than recipients of pre-ordered care packages

The Challenge of Long Term Health Conditions

Picking up from where Camilla Slade left off in the preceding article, it is no exaggeration to say that the situation with long term conditions represents a crisis for the UK’s health and social care systems. In January 2014 Dr Martin McKee, who was NCD until January 2016, responsible for long term conditions in the UK NHS, expressed that view in an interview for The Guardian. “The challenges posed by patients with chronic medical conditions are so great that they represent the ‘healthcare equivalent to climate change’ and must form the NHS to undertake a major rethink of how it cares for such patients…” he explained. In the same article, Professor Chris Ham, Chief Executive of the King’s Fund Health think tank, added, “There is now an urgent need to transform how GPs treat people with these conditions, and to support people themselves to take more control over their health.”

The European Observatory on Health Systems and Policies, in its report ‘Managing chronic conditions’ (2010), agrees but with an important caveat: “The anticipated benefits include improved quality of care and, by preventing or delaying complications, reduced (emergency) admissions and long hospital stays, although initial evidence from pilots casts some doubt on whether this can be achieved.” And there, in the last sentence, lies the rub: how to bring about a situation where patients take greater responsibility for the management of their own long term conditions. The King’s fund (2010) suggests a similar caveat in that “Self-management programmes have been shown to reduce unplanned hospital admissions for chronic obstructive pulmonary disease (COPD) and asthma (Purdy 2010) and to improve adherence to treatment and medication (Challs 2010), but evidence that this translated into cost savings is more equivocal. A cost analysis performed in the United States did indicate that expenditure in other parts of the system can be reduced (Stearns et al 2000).” In short, self-care for people having long term conditions is good but tending that good into real cost savings will require more than just good intentions.

Self-Care, a Patient Centred Way of Managing Long Term Conditions

Among other things, it will require that patients with long term conditions understand that self-care will hand them a high degree of control over their own lives, self-determination and self-management if they will undertake some responsibilities such as to take their medicine properly, do some exercise and tackle those lifestyle issues (smoking, alcohol, over eating, lack of exercise) which might have contributed to or now be exacerbating their condition. They also need to understand and be confident that self-care does not mean coping without support. NHS England in its paper ‘Enhancing quality of life’ (2014) sums up as, “The NHS should be supporting people to be as self-sufficient as possible and help them to manage their condition as much as possible. Telehealth and telecare services (which include items like blood pressure monitors and alarms for old people who have fallen over and need help) can be a useful way of doing this.” Moreover, DoH research revealed that use of this self-care involvement reduced death rates by 45%, visits to accident and emergency by 15% and emergency admissions to hospital by 20%.

What is Self-Care?

There are several ways in which that partnership for self-care and responsibility can be achieved but all require that both the patient and the care deliverer understand how this model differs from traditional care models and learn the new techniques required to make it work.

One support system that sits between traditional care models and wholly self-care models is telehealth and telecare of which the UK Department of Health (DoH) explains: “We want to help people to manage their own health condition as much as possible. Telehealth and telecare services (which include items like blood pressure monitors and alarms for old people who have fallen over and need help) are a useful way of doing this.” Moreover, DoH research revealed that use of this self-care involvement reduced death rates by 45%, visits to accident and emergency by 15% and emergency admissions to hospital by 20%.

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Self-Care in Action

John Hancock, Editor

How self-care works, the benefits it offers and who might be ready to be coached for a self-care programme

A self-care programme is not so much an alternative to traditional care models as a collaborative method of delivering care in which the patient is an active and key partner.

The previous articles have laid out the challenge of long term conditions, explaining what it means to live with a long term condition and introduced the idea that new thinking on care models is available for patients who are capable of and willing to participate as partners in their own care programme. This final article will explore the self-care model a little more, consider how it can improve quality of life and outcomes for those who use it and set out what is entailed in selecting a patient for a self-care programme, and, as importantly, preparing them for the programme and supporting them in the programme.

The Self-Care Model

The King’s Fund offers a summary of self-care or self-management to be viewed. “In two ways: as a portfolio of techniques and tools to help patients choose healthy behaviours; and as a fundamental transformation of the patient–caregiver relationship into a collaborative partnership.” Tracy Watts writing for The Health Foundation goes further, “...self-management is complicated. All patients self-manage to some degree already because they have to – most of the time they are not meeting with doctors or nurses and they have to manage their condition at home. Where they are doing this successfully then the challenge is helping them to recognise this, and where they are struggling the challenge is to support them in making behaviour changes.”

Benefits of a Self-Care Programme

Another term used is ‘patient empowerment’, which embodies one of the key benefits of a self-care programme. As early as 2011, BMC Health Services Research stated, “Patient empowerment is viewed by policy makers and health care practitioners as a mechanism to help patients with long term conditions better manage their health and achieve better outcomes.” It certainly seems that the awareness that comes with self-care makes it more likely that patients will be able to act sooner to better control symptoms and avoid complications.

As well as benefits for the patient, there are benefits for the system in self-care models. The Royal College of General Practitioners (RCGP) explains these as, “Giving patients the autonomy to self-manage their condition, with GP and primary care support, saves the NHS time and money and will lead to reduced hospital admissions, reduced A&E attendance and reduced medication expenditure, as well as improved patient satisfaction.” And, according to the same paper, for every £100 spent encouraging self-care, some £150 worth of benefits can be delivered. Beyond patients, their GPs and the healthcare system, family, friends and carers for people with long-term conditions will also enjoy the benefits of a more confident and satisfied patient with less need to make visits to clinical facilities.

Making a Self-Care Model Work

While the idea of people with long term conditions taking responsibility for elements in their own care programme is attractive, it is unlikely to work unless the patient has access to training and support. A self-care programme is not so much an alternative to traditional care models as a collaborative method of delivering care in which the patient is an active and key partner. The benefits are demonstrable, as previous articles have shown, not only in how a patient feels when they are not simply a treatment unit in the healthcare system, but also through real improvements in outcomes. In the same way that any care plans will be regularly visited, self-care plans need to be updated to reflect the changing needs of patients either whose condition is improving, who become affected by multiple comorbidities or whose condition is progressive and therefore bound to change with time. The plan will also need to be tailored to each person so that their ownership of it is natural.

The RCGP (above) again; “…when patients self-care and equally feel supported in doing so, they are more likely to have greater confidence and a sense of control, to have better mental health and less depression, to reduce the perceived severity of their symptoms, including experienced pain. These benefits combined can improve the quality of life for a patient with a Long Term Condition immeasurably.”

The paper also highlights the benefits for GPs who, with less time taken by routine visits, can devote more time and resource to improve their services for all patients which, in turn, will result in further efficiencies and, perhaps, less people developing long term conditions.

Who Would be Right for Self-Care?

Of course, not every patient will be right for a self-care model. To help commissioning practices decide the best plan for a patient, the UK Department of Health (DoH) in its paper, “Improving the health and wellbeing of people with a Long Term Condition immeasurably.” offers a useful set of practical suggestions and ‘Top Tips’.

Summarising the Health Coaching approach, used in the East of England, the UK National Health Executive sets out the stages that a clinician should cover in assessing a patient’s suitability for self-care and the conditions under which it will work best. It also identifies the changes in roles between patient and clinician to support such an approach and describes the role of a coach; “The coach is a healthcare professional trained in behaviour change theory, motivational strategies, and communication techniques, which are used to assist patients to develop intrinsic motivation and obtain skills to create sustainable change for improved health and wellbeing.”

While projections for the numbers of people with long term health conditions might vary, none of them suggest either low or falling numbers and the experience of those working in the field is that the prevalence of such conditions is likely to continue to rise as the population ages and unhealthy lifestyles prevail. So setting a basic model for care of people with long term conditions is sensible for any healthcare system.
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