

Public Health Strategic Funding Proposal Form

Confidential (once completed)

Proposal Reference: (official use only)

Version 1.0
December 2016

1. Main Details

1.1 Please provide the following details:

Proposal/Project Title	NW London Prevention and Wellbeing
Total Funding Request	£ 78,680.00
Name of Proposing Organisation(s)	NW London Strategy and Transformation on behalf of the NW London Sustainability and Transformation Team
Date of Proposal Submission	4/1/2017
Proposed Date for Commencing Project	April 2017
Estimated Length of Project (Months)	12 months
Proposed End Date of Project	March 2018

2. Provider/Supplier Details

2.1 Please list the following details of all/any parties involved in the provision of the proposal (please make sure you enter full details):

	Please enter the Full Address of Organisation(s)
Lead Organisation	Central London CCG (hosting NW London Strategy and Transformation Team)
Partner Organisation 1	All partners in the NW London STP
Partner Organisation 2	
Partner Organisation 3	

2.2 Who is the Lead Proposer?

(This is the person responsible for the development of the Proposal.)

Name	Title	Email	Telephone
Jane Wheeler	Programme Director, Wellbeing and Prevention	Jane.wheeler2@nhs.net	07875 429 320

2.3 Who is The Project Lead, If different from above?

(This is the person responsible for undertaking the activity that the proposal is funding)

Name	Title	Email	Telephone
Debbie Andrews	Strategic Lead – Mental Health and Wellbeing	Debbie.Andrews@nw.london.nhs.uk	07757 259 939

2.4 Who is The Authorised Signatory?

(This is the person with the authority to sign contracts on behalf of your organisation in relation to this Proposal)

Name	Title	Email	Telephone
Jane Wheeler	Programme Director, Wellbeing and Prevention	Jane.wheeler2@nhs.net	07875 429 320

3. The Proposal

3.1 What is your proposal? (500 Words)

(This is a summary description of your proposal. Please ensure that specialist terminologies, such as abbreviations and acronyms are clearly explained. Please provide a brief introduction and explain the key objectives and how they align to those requirements outlined in the introductory letter. If your proposal relates to the continuation of a programme of work, please provide information on funding received to date and reasons why funding is required). [Ordinarily funding is non-recurrent, however we will consider exceptional proposals on a case by case basis]

Improving access to lifestyle services within NWL - covering the boroughs of Brent, Ealing, Kensington and Chelsea, Westminster, Hammersmith and Fulham, Harrow, Hillingdon and Hounslow - is a plank of North West London's (NWL) Sustainability and Transformation Plan (STP). This proposal outlines a project to deliver Making Every Contact Count (MECC) training in brief and very brief interventions for frontline staff to enable staff to address some of the health inequalities that exist within the area and to enable them to supporting healthy lives of the population. This project supports Delivery Area 1 (DA1): prevention and wellbeing, within the STP.

This project will deliver training in brief and very brief interventions for front line staff filling the gaps identified by the mapping work done already by HEE NWL on MECC implementation across NWL. The project will focus on training non-specialist NHS frontline staff, focussing on practice nurses, receptionists and A&E staff (with ward and outpatient staff as a second line), will train non-NHS frontline staff (including housing, social care and local authority reception) directly and will run two train the trainer MECC courses for non-specialist frontline staff to enable the programme to have further reach within non-NHS services. The project will also look at working cross sector across any public facing office including housing, social care and local authority reception. The project will compliment the work being done on MECC by the Healthy London Partnership (HLP) to support a consistent roll out of training for brief and very brief interventions across North West London (NWL). The courses will be delivered by e-learning followed by 3 hours direct delivery in which participants will have an opportunity to practice the skills they are learning.

This project seeks funding for direct training for 2,260 staff and funding for train the trainer for 16 staff, aligning with function C2 of the Public Health Skills and Knowledge Framework 2016. This project will be sustained by the 16 staff trained in train the trainer for MECC, as well as the work being done by the HLP. Backfill for staff attending training and hosting of the training will be provided by each borough in the form of match funding. This additional focus on MECC will complement work already underway at a borough level.

The scale of this project is significant, working as it does within the footprint of the STP, this project will work at scale across the 8 boroughs that comprise NWL and will work with frontline staff across all public-facing public services within the area, creating a train the trainer resource that will enable further staff to be trained in upcoming years. Additionally, this cross-team and cross-organisational training will help break down barriers between health and non-health professionals, supporting all frontline staff to contribute to the reduction of health inequalities and the support of healthy lifestyles for the citizens with whom they have contact.

3.2 How has your proposal been identified, why is it a priority? (300 Words)

(Please include a description of the current situation to be addressed by your proposal, explain how the start date for this is important and explain how the patient voice will be represented in your project.)

Delivery Area 1 (prevention and wellbeing) of NWL Sustainability and Transformation Plan outlines plans to address health inequalities by radically upgrading prevention and wellbeing interventions.

These interventions are underpinned by embedding the principals of MECC, which currently has patchy implementation across the geographical area, across all services that are commissioned under the STP.

This programme will fill the gaps identified within the DoH Stocktake of MECC in London by creating a trained workforce that has the resources to develop MECC as a core part of service delivery.

The delivery of this project near the beginning of the STP implementation in 2017/18 will allow the maximum time for MECC to be embedded in ways of working and enable the greatest impact in reducing health inequalities between 2017/18 and 2020/21.

Patient voice – as well as the experiences of carers and of citizens - will be represented in this project through the use of service user case studies as part of MECC training delivery, including the e-learning segment that precedes face-to-face training and as part of the train the trainer programme.

3.3 What are the key outcomes of this proposal? (500 Words)

(Please clearly outline what the proposal intends to achieve and deliver. This must include measurable outcomes and benefits. Please note that your proposal will be considered against this and, if approved, you will be performance managed against these. In short, this is different a list of outputs; this is a list of measureable benefits to the workforce, the service, patients and members of the public)

Measurable outcomes:

- Consistent implementation of MECC across front-line NHS staff throughout NWL, addressing patchy implementation of MECC;
- An increase in the capacity of public-facing non-NHS staff to deliver MECC, building on the work already done in individual boroughs;
- Increase in lifestyle services knowledge amongst staff who have attended training;
- Increased training capacity in MECC for public-facing non-NHS staff throughout NWL through train the trainer programme;
- Increased capacity of NHS and public-facing non-NHS workforce in NWL to improve health and wellbeing in communities;
- Health promotion principles and practice embedded into the day to day work of staff across the public, voluntary and community, and private sectors;
- Staff (from all sectors) that are competent and confident in delivering very brief and brief advice, and signposting.

Wider outcomes:

It is recognised that evaluating MECC is challenging, however, evidence from other programmes has demonstrated outcomes that include

- Increased capacity of NHS and public-facing non-NHS workforce in NWL to improve health and wellbeing in communities;
- An increase the number of referrals to lifestyle services such as smoking cessation, alcohol misuse and weight management services, and community activities;
- Increase in number of clients receiving a MECC intervention;
- Positive changes in MECC trained staff's own behaviour;
- Increase in number of staff who access lifestyle services;
- Improved patient outcomes (quicker recovery and reduced risk of readmission);
- Reduced admissions due to lifestyle associated conditions (e.g. cardiovascular disease);
- Improved health and wellbeing of NWL workforce;
- Increased cost savings for trusts.

4. Planning & Organisation

4.1 What are the key outputs, activities and milestones that underpin your proposal. (500 Words)

(Please include a timeline of key activities and milestones with the proposed start and end dates. In addition please provide any details of post project activities, such as impact evaluations and patient surveys)

Outputs

The key outputs from this project are:

- 5 courses (of 30 staff each) delivered in each of the 8 boroughs (40 courses total);
- 1,200 NHS staff - practice nurses, NHS receptionists, A&E staff, ward staff and outpatient staff - trained in brief intervention across NWL;
- Map of non-NHS public facing offices that could be trained in MECC including housing, social care and local authority reception, identifying individuals who might undertake train the trainer
- 4 training courses (for 30 people each) delivered in each of the 8 boroughs for public-facing staff from non-NHS offices (32 courses)
- 960 public-facing non-NHS staff trained
- 2 train the trainer course for public-facing non-NHS staff,
- 16 public-facing non-NHS staff trained in MECC train the trainer

Timeline:

13th January 2017: notified of result

1st April 2017: project starts

by 30th April 2017: training content finalised, first 50% of training courses scheduled, backfill agreed, train the trainer programme finalised

by 30th April 2017: mapping of non-NHS public facing offices and identification of staff for train the trainer

by 1st June 2017: MECC training begins

by 1st September second 50% of training courses scheduled, backfill agreed and train the trainer courses recruited to

by 1st October 2017: train the trainer programme begins

by 28th February 2018: MECC workshops completed

by 31st March 2018: evaluations completed and project finished

Due to its nature as a brief intervention, MECC is difficult to evaluate. This project will dedicate the final 5 weeks of project management to evaluating the training and programme to ensure that individual boroughs have a snapshot of MECC performance to use as a baseline for further development. This will include:

- a map of staff trained within each borough and resources that can be used for further development (this will build on the MECC London stocktake)
- a self-reported quantitative snapshot of how staff (NHS and non-NHS) are using MECC. For staff trained nearer the beginning of the programme this will have a longitudinal element to it with snapshots taken 3 and 9 months after training.

- a qualitative snapshot of how staff (NHS and non-NHS) are using MECC – what they are discussing, with whom and what referrals they are making. Again, for staff trained nearer the beginning of the programme this will have a longitudinal element to it with snapshots taken 3 and 9 months after training.

4.2 Please outline the internal governance framework that will ensure your proposal if successful is delivered. (400 Words)

(Please include all escalation & decision making processes. This could be a management reporting structure and details of proposed governance meetings if the proposal is successful.)

Within the structures put in place for the delivery of the Sustainability and Transformation plan, the Delivery Area 1 Board, reporting to the sector health and care board will oversee the project if it is successful. The Delivery Area 1 Board is co-chaired by a Local Authority Chief Executive and the CCG Chair, reflecting the shared aspects of the prevention agenda. This will support the cross-sector approach of this MECC proposal. The Board also has membership from Healthy London Partnerships, Public Health and Specialised Commissioning.

Below the board, there will be distributed leadership across the North West London Public Health Teams, with leads where appropriate.

A key early action in developing this work (prior to April 2017) will be to ensure engagement all boroughs and alignment with existing programmes of work.

Implementation groups will be formed and chaired by the local Director of Public Health with resources garnered from Sustainability and Transformation project teams. The project manager for the project will sit alongside these teams within the team of the Programme Director for Prevention and Wellbeing.

5. Funding

5.1 Total cost of proposal:

£

5.2 Amount funded from other sources, if applicable:

£

5.3 Amount requested in this submission:

£ 78.680.00

5.4 Breakdown of the Total Cost:

- Please provide a detailed cost breakdown of the intended uses of the total funding;
- Please ensure that the breakdown includes details of other sources of funding too, if applicable
- Please present this information in the table provided.
- If any of the funding surpasses the following thresholds with regards to sub-contracting third party bodies/services., you will need to provide evidence of the appropriate procurement process commensurate with the level of funding required for this. (This must be outlined below if necessary).
- For further information:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/267937/PPN_1013_-_New_Threshold_Levels_for_2014.pdf
- If you have any questions, please email wcdprojects@nwl.hee.nhs.uk

Description	Breakdown (£s x number of sessions)	Total Cost	Comments
Project manager MECC,	12 months, Band 7, 0.95 WTE	£33,250.00	Project manager to deliver programme
Administrator MECC	6 months, Band 4, 0.5 WTE	£12,000.00	Administrator to co-ordinate training for 2,276 trainees
MECC training course design	Finalising training from existing resources	£630	
Train the trainer course design MECC	Tailoring generic train the trainer course for MECC	£1,000	
Delivery of MECC training	Trainer for 4 hours / course (£380 x 72)	£27,360.00	Course delivery for 2,260 participants
Delivery of MECC training	Refreshments / course (£20 x 72)	£1,440.00	
Delivery of train the trainer for MECC	Trainer for 2 days per course for 2 courses	£3,000.00	Course delivery for 16 participants
Rooms for delivering MECC courses	72 rooms	£0.00	Funding in kind
Backfill for training staff	Backfill for 2,260 MECC training and 16 train the trainer	£0.00	Funding in kind
Total		£78,680.00	