Bromley-by-Bow: DIY Health

A co-produced health education delivery model to empower parents in managing children’s health

Region: Bromley
Geography: Urban

Background

It was noted that parents of children under the age of 5 were frequently re-attending St Andrew’s Health Centre (one of three surgeries run by BBBHP) for support with managing self-limiting childhood problems. These group learning sessions aimed to empower the parents with knowledge, confidence and skills to manage minor ailments at home.

Aims

To place health promotion in a learning environment, using participatory action surrounding key child health messages underpinned by principles of co-production

Target groups

Parents of children under the age of 5 who were frequently re-attending St Andrew’s Health Centre (one of three surgeries run by BBBHP) for support with managing self-limiting childhood problems.

The service model

Group learning sessions for parents, which provide an opportunity to practice skills in a peer-led environment.

Support from local Children’s Centre ensures that parents are able to attend the sessions in the absence of childcare arrangements for children under 5.

The initial phase of the project involved asking local parents of children under the age of 5 about managing children’s health at home. This phase was led by Emma Cassells, who holds a unique role as a ‘Patient First Manager’ within BBBHP.

Six core topics identified locally:

- Cold and flu
- Diarrhoea and vomiting
Children and young people's: Out-of-hospital models of care

- Fever
- Feeding
- Eczema
- Ear pain

Opening times

- St Andrews Health Centre - 8am to 8pm 7 days a week
- DIY Health 2 hours a week for 12 weeks

Staffing

Group sessions are facilitated by a Health Visitor (HV) and Adult Learning Specialist.

Who can refer

Anyone, including self-referral

Who is accountable for patients?

The host GP surgery

Resources

A community venue, learning materials

Funding organisation

Bromley by Bow Health Partnership

This model was originally funded as a six-month pilot as part of the Tower Hamlets CCG Innovation Bursary Fund. The purpose of a multi-disciplinary team approach was partly to facilitate the journey of DIY Health being shared across a wide range of external organisations to generate interest around different ways of delivering health education, one of which was with the Children and Young People Programme Board at UCL Partners (UCLP). The innovative method of delivery led to a collaboration between the participating organisations to upscale and evaluate the original DIY Health model pilot, with a rigorous academic steer from UCLP led by Professor Monica Lakhanpaul, underpinned by funding from the North East London Foundation Trust. The second phase of the pilot project received funding from Health Education North Central and East London

Level of patient/family involvement*

DIY Health employs a co-produced methodology in which parents and families are involved in the design, delivery and evaluation of the service. The core content of each of the sessions is based on parent experiences and stories.

Level of integration in the system**

DIY Health aims to work horizontally across a range of stakeholders including local people, primary care, HV Services, Children’s Centres and community and voluntary sector
organisations. DIY Health also integrates across the population, offering preventative advice and health promotion to families and children.

**Evaluation**

The second phase of the pilot project was evaluated in partnership with the Anna Freud Centre and colleagues from the University of Sheffield. Qualitative analysis showed an increase in knowledge, confidence and skills to manage a wide range of health issues for all parents involved, and high levels of co-production throughout the programmes. Preliminary quantitative results showed a reduction in GP attendances for parents who attended DIY Health sessions.

[http://uclpstorneuprod.blob.core.windows.net/cmsassets/DIY%20Health%20Toolkit%20October%202015.pdf](http://uclpstorneuprod.blob.core.windows.net/cmsassets/DIY%20Health%20Toolkit%20October%202015.pdf)

**Challenges, successes, lessons learned and advice**

Work with stakeholders, including local people, from the beginning to define, articulate and design a program that addresses a need

- Be flexible and open to problem solving in the sessions
- Ensure that all those involved share the same project ethos and values
- Measure what matters – do not place all the emphasis on reducing service use. Increases in resilience, confidence and skills are just as important
- If you want to measure health service use, do so across the health service (ED, primary care, HV) to get a true picture of what is happening for parents. Economic evaluation should include measures such as QALYs (quality adjusted life years) and SROIs (social return on investment).

Co-production takes time – for local people to develop as facilitators themselves or be involved in community organising, be prepared for this to happen outside the lifetime of structured sessions. More longer term funding will support this and should be considered when applications for funding are made.

**Downloads**

DIY Health evaluation report.pdf

**Contact for more information**

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