Health (& Mental Health): No Patients Left Behind

Mark Duman
Service Champion/ Founder, Diabetes UK/ Patient Information Forum

@ MarkDuman
“A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.“ (1948)
“We see things as we are, not as they are”

Talmud Berachot 55b
Learning & Teaching

Our vast range of clips and other content make great teaching & training resources

Related:
- Licensing our content for use in teaching
- Create your own clip playlist
- Teaching resources
- Trigger films for service improvement

Patient Stories

healthtalk.org and the importance of patient stories

How to use our new "Scrapbooks" tool

China Mills talks about using healthtalk.org from a lecturer's perspective

Learning & Teaching

On healthtalk.org there are around 30,000 video clips of people talking about their experiences of more than 100 different health issues. The interviews are conducted by researchers from The University of Oxford and are a great resource for teaching and training on a wide range of topics.
Co-creation: “IN their SHOES”

# FlywithIBD matters.

IBD, is a chronic condition of the gastrointestinal tract. Around 3.7 million people live with IBD in Europe (most common forms being Crohn’s disease and ulcerative colitis). IBD is a chronic gastrointestinal disease that affects more than 10 million Europeans.

IBD and IBS are very different diseases but have some similar symptoms.

In terms of flying, improved menu options & better toilet-access especially for long haul flights, stand to benefit all persons living with gastrointestinal diseases.

www.youtube.com/watch?v=0am-07XlZJi
Pharmako
(φάρμακο)
PERSONALISED MEDICINE

Past medical history and Current medication
Ethnicity/ communication Preferences
Health literacy
Medication beliefs
Health beliefs

BEYOND HEALTH

‘POISON’
‘A MIRACLE CURE’

‘TOUCH OF SUGAR’
‘LIFE-THREATENING DISEASE’

MOTIVATION
## The Four Levels of Patient Activation

<table>
<thead>
<tr>
<th>Level 1</th>
<th>Level 2</th>
<th>Level 3</th>
<th>Level 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Predisposed to be passive</strong></td>
<td><strong>Building knowledge and confidence</strong></td>
<td><strong>Taking action</strong></td>
<td><strong>Maintaining behaviors, pushing further</strong></td>
</tr>
<tr>
<td>Patients lack the confidence to play an active role in their health.</td>
<td>Patients have some knowledge but large gaps remain. They can set simple goals.</td>
<td>Patients have the key facts and are building skills. They are goal-oriented.</td>
<td>Patients have adopted new behaviors but may struggle in times of stress or change. Healthy lifestyle is a key focus.</td>
</tr>
<tr>
<td>‘My doctor is in charge of my health.’</td>
<td>‘I could be doing more.’</td>
<td>‘I’m part of my healthcare team.’</td>
<td>‘I’m my own advocate.’</td>
</tr>
</tbody>
</table>
Many studies show that activated' patients have better health outcomes at lower costs. Patients with lower activation scores cost 8% to 21% more.

<table>
<thead>
<tr>
<th>2010 patient activation level</th>
<th>Predicted per capita billed costs ($)</th>
<th>Ratio of predicted costs relative to level 4 Patient Activation Measure (PAM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1 (lowest)</td>
<td>966</td>
<td>1.21</td>
</tr>
<tr>
<td>Level 2</td>
<td>840</td>
<td>1.05</td>
</tr>
<tr>
<td>Level 3</td>
<td>783</td>
<td>0.97</td>
</tr>
<tr>
<td>Level 4 (highest)</td>
<td>799</td>
<td>1.00</td>
</tr>
</tbody>
</table>

Source: Hibbard J H, Greene J, Overton V (2013) ‘Patients with lower activation associated with higher costs; delivery systems should know their patients’ “scores.”’ Health Affairs, 32, no (2013): 216-22. (Quoted in KPMG, ‘Creating new value with patients, carers and communities’)
Care & Coach

PASSIVE
- All faith in our doctor
- Passive behaviours
- Helplessness
- Isolation

ACTIVATED
- Take action
- Find information
- Organise our questions
- Map our options and choices

Information about personal health situation
Self care support
Decision making
Being connected

Health literacy
Communication skills
“Information (as a) Therapy”

1. Asset Based Community Development
2. Care Planning
3. Health Coaching
4. Information Prescriptions/ Bibliotherapy
5. Medicines Optimisation
6. Patient Activation/ Health Literacy Measure(s)
7. Patient Decision Aids/ Shared Decision Making
8. Peer Support
9. Personal Health Budgets
10. Records Access/ Patient Online
11. Structured Patient Education
12. Telehealthcare

Source: Salford's Primary Care Commissioning Strategy 2007/08 – 2017/18

Patient Information Forum
Raising the Standard of Consumer Health Information
Whole people not body parts...
Long-term conditions and mental health

The cost of co-morbidities

- Costs to the health care system are also significant – by interacting with and exacerbating physical illness, co-morbid mental health problems raise total health care costs by at least 45 per cent for each person with a long-term condition and co-morbid mental health problem.

- This suggests that between 12 per cent and 18 per cent of all NHS expenditure on long-term conditions is linked to poor mental health and wellbeing – between £8 billion and £13 billion in England each year. The more conservative of these figures equates to around £1 in every £8 spent on long-term conditions.

- People with long-term conditions and co-morbid mental health problems disproportionately live in deprived areas and have access to fewer resources of all kinds. The interaction between co-morbidities and deprivation makes a significant contribution to generating and maintaining inequalities.
'Parity of esteem' is defined as 'valuing mental health equally with physical health', which would result in those with mental health problems benefitting from:

- equal access to the most effective and safest care and treatment
- equal efforts to improve the quality of care
- the allocation of time, effort and resources on a basis commensurate with need
- equal status within healthcare education and practice
- equally high aspirations for service users
- equal status in the measurement of health outcomes.
Mental Health First Aid

Our vision
Our vision is to normalise society’s attitudes and behaviours around mental health, by developing the skills we need to look after our own and others' wellbeing.

Our mission
We're on a mission to train one in ten of the population in England in Mental Health First Aid (MHFA) skills – because we all have mental health.

Mental health education empowers people to care for themselves and others. By reducing stigma through understanding, we hope to break down barriers to the support that people may need to stay well, recover, or manage their symptoms – to thrive in learning, work and life.

https://en.wikipedia.org/wiki/Mental_health_first_aid
Digital Health: Converge or Collide?
Current imbalance in supply/demand so we need to change demand.

*head, heart & hand* orientated solutions for SELF-MANAGEMENT can REBALANCE the EQUILIBRIUM

**Co-create** self-management tools enabling interventions which:

- Improve patient & staff experience
- Are clinically & cost effective
- Don’t compromise patient safety indeed enhance where possible
PEOPLE ARE THE AGENTS OF DIGITAL TRANSFORMATION & HEALTH CARE
Thank you!

Mark Duman
Service Champion/ Founder, Diabetes UK/ Patient Information Forum

@MarkDuman