Introduction

Self care encompasses the things individuals can do to protect their health and manage illness. The social determinants of health – the conditions in which people are born, grow, live, work and age – influence our resistance to illness and disease, as well as our ability to self care. There is a risk that without easily accessible support and advice the advantages of self care will only be felt by higher socioeconomic groups. To help improve patients’ understanding of self care, the British Medical Association’s (BMA) Patient Liaison Group (PLG) has developed a ‘question and answer’ resource. The resource is not intended to be exhaustive: its purpose is to provide patients with a basic introduction to self care, including what it involves, the risks and benefits, and where it can be accessed.

Contents

- What is self care?
- Are there different types of self care?
- What are the benefits of self care?
- What are the risks of self care?
- Does self care work? How do we know?
- What are my self care options? Where can I access them?
- Are there self care / self help support groups?
- When should I use self care and when should I see a doctor?
- What work has the BMA done on self care?

Self care does not mean that you need to manage on your own without any help from a health professional. This resource identifies the different sources of support available. If you are at all unsure, please seek advice from your GP, nurse or pharmacist.
What is self care?

Self care is about putting people in control of their own health and well being. It involves the things individuals can do to protect their health and manage illness. There is often confusion about the difference between ‘self care’ and ‘self management’. In the past, ‘self management’ referred to the strategies used by people with long term health conditions to deal with their symptoms, treatment, and the physical and/or social consequences of their illness. Today, self care and self management are often used interchangeably. The Department of Health (DH) defines self care as:

"the actions people take for themselves, their children and their families to stay fit and maintain good physical and mental health; meet social and psychological needs; prevent illness or accidents; care for minor ailments and long term conditions; and maintain health and wellbeing after an acute illness or discharge from hospital."

This broad definition allows for a spectrum of self care strategies. These can range from the daily choices we make – such as brushing our teeth, eating well, and exercising – to interventions aimed at managing long term conditions like asthma and diabetes. At the far end of the spectrum are those conditions that require complete professional care, as illustrated in the diagram below.

Are there different types of self care?

There are different types of self care; they vary considerably in terms of overall approach, content, delivery, duration, and target group. Self care may also involve using a combination of techniques, each of which will depend on the nature of the condition or ailment. The diagram below outlines the different types of self care.

Some self care strategies are targeted at the general population and are designed to promote good public health and prevent illness. Motivating people to adopt healthy lifestyles, including stopping smoking, cutting alcohol intake, eating a balanced diet, and taking more exercise, fall into this category. Other self care strategies focus on giving people the confidence and necessary information to self treat minor ailments, such as headaches and nosebleeds.

For the estimated 17.5 million individuals in the UK living with one or more long term condition, approaches to self care tend to be wider ranging. They focus on empowering the patient so that they are informed, active, and fully-engaged in their care.

Self care uses a range of methods and aids to enable people to manage their own health. These include: self monitoring devices, self diagnostic tools, self help and support groups, self management education programmes, patient access to their medical records, care plans, home adaptations, easy access to high quality information on conditions and services, and telecare. Telecare is remote care – in its simplest form it involves a telephone with a connection to a monitoring centre through which the user can raise an alarm.
What are the benefits of self care?

The reported benefits of self care include:

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<tr>
<th>Benefits to the individual</th>
<th>Benefits to the NHS</th>
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<td>Greater self-confidence and control over the ailment / condition</td>
<td>Reduced number of hospital and A&amp;E visits</td>
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<tr>
<td>Improvements in the severity of symptoms</td>
<td>Healthier behaviour</td>
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<td>Reduced number of hospital and Accident &amp; Emergency (A&amp;E) visits</td>
<td>Better planned, coordinated and convenient care</td>
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<td>A better understanding of the condition</td>
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<td>Improved quality of life</td>
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<td>Healthier behaviour</td>
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<td>Better planned, coordinated and convenient care</td>
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What are the risks of self care?

- Self care will not, and does not aim to, eradicate the need for healthcare professionals.
- Self care relies on the patient making correct decisions, in response to the symptoms they are experiencing, about the appropriate use of medical care.
- The risk is that the patient may miss something subtle but important about their symptoms, thereby leading them to misdiagnose themselves. Misdiagnosis could then have knock on effects, such as using an inappropriate treatment.
- Promoting self care may also deter people from visiting their doctor which could lead to delays in diagnosing more serious illnesses. It is important that people wanting to self care have access to quality advice and information, at the right time, together with the right support.

Does self care work? How do we know?

There have been short-term evaluations of self care strategies in general and of the Expert Patient Programme in particular (for more information on the Expert Patient Programme (EPP) please see the section on ‘What are my self care options?’). The Department of Health's evaluation of approximately 600 participants in the Expert Patients Programme indicated that the programme provides significant numbers of people with the confidence and skills to better manage their long term condition on a daily basis, and in reducing their use of services.

A chapter of a Picker Institute Europe review into patient focused interventions concentrated on self care. The review found that a great deal of research had been undertaken into self care, most of which focused on education programmes, but that the majority of trials tended to measure only short term outcomes, typically six months or less. It concluded that there was currently little known about the effectiveness of self care over the long term. The review did find that self management education led to short term improvements in health behaviour and that, while these effects tended to diminish over time, the quality of life effects were more likely to be sustained beyond the intervention period.

The sheer diversity of self care strategies can make drawing cross-study conclusions difficult. Following an examination of 160 systematic reviews, 240 primary research studies, and surveys covering the different types of self care support interventions, the Department of Health concluded in 2007 that:

“[M]any, if not most, of the self care support approaches mentioned have the potential to help build social capital in our communities by informing, skilling, equipping and empowering people in the most effective way.”

There is currently a limited understanding of why some schemes ‘work’ while others do not.
**What are my self care options? Where can I access them?**

The self care options available will vary depending on the nature of the issue, condition, or ailment. It is important that people wanting to self care have access to quality advice and information, at the right time, together with the right support. While there is a vast amount of medical information on the Internet that can help patients make informed decisions about their healthcare, some information is of variable quality and intent. The Royal College of Surgeons of England has compiled a guide on finding reliable sources of health care information on the Internet. It is important to stress that self care does not mean that you need to manage on your own without any help from a health professional. The following links highlight the different types of support available.

**Adopting Healthy lifestyles**

There is lots of information on NHS Choices about how to use self care to stay healthy and adopt healthy behaviours. Here you can read about how to:
- lose weight
- get fit
- stop smoking
- cut down on alcohol
- eat more healthily

NHS Choices also offers simple, interactive tools to help people make the transition towards a healthier lifestyle. You can use them to discover how fit you are, how healthy your diet is, whether you are drinking too much, and whether you are a healthy weight. NHS Choices provides details of immunisation and screening programmes which may help to prevent illness or detect problems at an early stage.

**Treating minor ailments**

Minor ailments include those conditions that do not last long, require little or no medical intervention, and can be treated with medicines bought over the counter from pharmacies or supermarkets. Some examples of minor ailments include: allergies, athlete’s foot, bites and stings, cold and flu like symptoms, conjunctivitis, constipation, cystitis, diarrhoea, head lice, indigestion/heartburn, mouth ulcers, adult vaginal thrush and warts and verrucae.

**NHS Direct**

Accessible online and via the telephone, NHS Direct provides clinically checked, expert health advice, 24 hours a day, 365 days a year. The website offers an online symptom checker which lets you let you select your symptoms and then answer some interactive questions about how you are feeling. NHS Direct then advises you what to do next. This mirrors the service provided via the 0845 4647 telephone helpline. If you are unsure about your symptoms, you can use the ‘interactive body map’ section of the website, which allows you to point your mouse to where it hurts. You will then be given a list of suitable symptom checkers. In Scotland this service is provided by NHS 24 (08454 242424) and in Wales by NHS Direct Wales (0845 4647). Northern Ireland does not have an equivalent service.

**NHS 111**

NHS 111 is a new service that is being introduced to make it easier to access local NHS healthcare services. If you live in County Durham and Darlington, Lancashire (excluding West Lancashire), Lincolnshire, the London boroughs of Croydon and Hillingdon, Luton, North Derbyshire and Nottingham City, or on the Isle of Wight, you can now call 111 when you need medical help fast but it is not a 999 emergency. NHS Choices advises that you should call 111 if:
- you need medical help fast but it is not a 999 emergency
- you think you need to go to A&E or need another NHS urgent care service
- you don’t know who to call or you do not have a GP to call
- you need health information or reassurance about what to do next

It is anticipated that the NHS 111 service will be rolled out more widely in 2013.

**Pharmacies**

Your local pharmacist can also recognise many common health complaints. They can give advice or, where appropriate, medicines that will help to clear up the problem. Some pharmacies also provide leaflets about particular minor ailments, such as athlete’s foot and head lice. Patients can take these leaflets home and refer to them for further information and advice. If your problem is more serious and needs the attention of a GP, your pharmacist should recognise this and advise you to see your GP.
Minor ailments service
Some Primary Care Trusts (PCTs) run a ‘minor ailments service’ through community pharmacies. These offer treatment and/or advice, though often for a limited number of specified ailments. You can check if your pharmacy runs a minor ailment service by using the NHS service search.

Long term conditions
The Department of Health defines a long term condition as one that cannot be cured but which can be managed through medication and/or therapy. Examples include arthritis, asthma, diabetes, epilepsy, heart disease, and multiple sclerosis. A good place to start for advice and information is NHS Choices long-term condition check. This is part of ‘Your health, your way’, the NHS guide to long term conditions and self-care. The short check will assess your situation and give you personalised advice about what help and support you may be entitled to. It will also produce a printable checklist. The checklist can be used to help you discuss your condition with your nurse or GP.

Care Plans
Your GP or nurse may create a care plan. This is an agreement between you and your health professional (and/or social services) to help you manage your health on a day-to-day basis. By talking about the care plan with your GP, nurse or social worker, you can say how you want to manage your health and choose what's best for you. The care plan covers areas including:
- the goals you want to work towards, such as getting out of the house more, returning to work, or starting a hobby;
- the support services you want, who is in charge of providing these services, what the support services have agreed to do and when they will do it;
- emergency numbers, such as who you should contact if you become very unwell and your doctor's surgery is closed;
- medicines;
- an eating plan;
- an exercise plan.

More information on care plans can be accessed via NHS Choices.

Self management programmes
Self management programmes are normally led by lay people and are designed to train people with long term conditions to self manage aspects of their own care more effectively. The courses can be either generic or specific to a particular long term condition. In England, the flagship self care course is the Expert Patient Programme (EPP). The Programme is run over six weekly sessions with each session lasting two-and-a-half hours. The course looks at:
- dealing with pain and extreme tiredness
- coping with feelings of depression
- relaxation techniques and exercise
- healthy eating
- communicating with family, friends and professionals
- planning for the future

A number of condition-specific self care initiatives are provided by Royal Colleges, national organisations, and charities across the UK. Examples include:
- Arthritis Care – offers free workshops and courses to help people with arthritis cope with their condition and get the most out of life.
- Asthma UK – has developed its ‘Be in control’ and ‘My Asthma’ materials to help people self manage and take better control of their asthma.
- Diabetes UK – runs diabetes training and awareness courses for the workplace as well as care events, such as family support weekends.
- National Federation of Multiple Sclerosis (MS) Therapy Centres (covering England, Wales and Northern Ireland) and the Scottish Association of MS Therapy Centres – provides courses and advice for people with multiple sclerosis.
- Royal College of Psychiatrists – provides user-friendly leaflets online about a wide range of mental health problems.

Help with medicines
It is important that you take any medicine the doctor prescribes as instructed and ensure you finish the course. If you want to find out more about your medicine, what it does, what the side effects are, the best time to take it and so forth, you can arrange to see your pharmacist for a free ‘Medicine Use Review’. For further information please see the resource produced by the Patient Liaison Group (PLG) ‘working together for better health’. This resource also features information about your responsibilities as an NHS patient.
**Telehealth**

Telehealth is the provision of healthcare to patients at a distance using a range of telecommunication technologies, such as mobile phones, internet services, digital televisions, video-conferencing and self-monitoring equipment. In the context of self care, self-monitoring equipment is particularly important as it can enable a condition to be monitored remotely. A small electronic unit, about the same size as a telephone, for example, could be connected to the telephone line in your home. Depending on your condition, the device can measure your blood pressure, blood glucose levels, oxygen levels, temperature or your weight. You are taught how to use the unit and the readings are automatically sent to your doctor or nurse, who can then see the information without you having to leave home. If any abnormal readings are identified your health professional will contact you and take necessary action. The unit may also be programmed to ask you questions about your general health and wellbeing. Most patients will use their telehealth system once a day. A major trial of telecare and telehealth was undertaken by the Department of Health between 2008 and 2010. The final results are still forthcoming, though early findings show a 20 per cent reduction in emergency admissions and a 45 per cent reduction in mortality rates.¹²

Health professionals and/or social services may be able to advise whether special health monitoring devices, and other telehealth services, could enable you to live more independently at home.

**First Aid**

Knowledge of first aid can help in a minor situation – such as dealing with cuts and grazes – as well as when something more serious happens, like choking or a suspected heart attack. First aid guides can be found on NHS Local and NHS Choices. NHS Choices also provides links to first aid courses in your area.

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**Are there self care / self help support groups?**

There are self care and self help support groups. Some groups may be for people with the same or similar conditions. Arthritis Care, for example, has branches and groups throughout the UK where people with arthritis can meet up and support others in their area. The groups provide information about the different ways of managing arthritis and the services available locally, as well as a social network. Other types of support groups are more general and open to anyone with a long term condition. The BMA has produced guidance on finding a self help group or patient organisation.

**When should I use self care and when should I see a doctor?**

The ‘Choose Well’ initiative is designed to help people choose the best place to get treatment if they fall ill, freeing up emergency services to help those most in need. The campaign uses a colour coded ‘thermometer’ which runs from blue to red, with blue reflecting minor health problems and red corresponding to a medical emergency. Its aim is to help people associate the severity of their symptoms with a particular NHS service.

Visit Accident and Emergency (A&E) for urgent care in the case of:
- infected wounds and foreign bodies
- head injuries or loss of consciousness
• suspected broken bones or heavy blood loss
• suspected stroke
• persistent chest pain or difficulty breathing
• overdose or poisoning
• serious accidents

If in doubt, NHS Direct can advise whether you should see a health professional or whether you can self care at home.

What work has the British Medical Association done on self care?

Between 2005 and 2007, the BMA examined issues surrounding self care in the context of the EPP. Launched by the NHS in 2002, the EPP is a generic training programme, led by lay people, that helps patients living with long term medical conditions to develop new skills for managing their condition. On 1 April 2007, the EPP became the Expert Patients Programme Community Interest Company (EPP CIC).

In December 2005, the BMAs PLG published ‘The Expert Patients Programme – a discussion paper’ and held an associated conference in November 2006. The paper examined the EPP; its progress and areas where further work was needed. It concluded that the self management of long term conditions was of crucial importance for the NHS and the medical profession, and that the EPP was a key component of the strategy to empower patients to manage their own care.

A policy paper on self care, and an online resource, produced by the PLG for GPs, followed in 2007. The policy paper concluded that:

“[T]he BMA would like to see self care through self management education become central to the patient involvement agenda. Self management education programmes have the potential to improve self care and alter the way that long term conditions are managed in the UK. What is wanted is for people to own and control their condition in order for them to determine how they want to live their life rather than the condition dictating how their life is led.”

References