“Frontline-friendly guidance will help make every contact count”

We are all aware of the challenges we face in improving and protecting health. We know we need to do more to prevent illness and reduce complications to enable people to live more years in good health. The social determinants of health and illness have a significant impact and we need to address “the causes of the causes” – good health is about more than an absence of illness, and emphasis needs to be placed on the importance of care that promotes and enhances wellbeing.

Nurses and midwives can make a huge difference to individuals, families and communities, but many feel that their role in increasing health is invisible. They often feel that with the right support, they can do more, using new evidence to promote health in new ways and settings.

Our national nursing, midwifery and care staff strategy, Compassion in Practice, states our shared purpose is to maximise our contribution to high-quality compassionate care and to achieve excellent health and wellbeing outcomes at individual, family and community levels. One of our six action areas is about helping people stay independent. The Department of Health and Public Health England are committed to supporting nurses and midwives at the front line to achieve these ambitions.

Nurses and midwives are enthusiastic about being “health promoting practitioners”. Many nurses in acute settings want to know more about how and when to talk to people about improving their long-term health as well as providing care for immediate needs. Nurses and midwives have asked for information for evidence-based practice and for opportunities to develop the skills to make “every contact count”. We have started this work by developing “frontline-friendly”, accessible guidance. This will be published in June and will draw from the 41 guidelines on public health interventions set out by the National Institute for Health and Care Excellence.

Next week the DH and PHE will be holding the first national conference on “Improving the Public’s Health: the Key Roles of Nurses and Midwives”. This is an opportunity to raise the profile of our work, present some of the emerging evidence and provide some of the tools and guidance nurses and midwives have told us would help them. We will also set out evidence and a model that nurses and midwives can use to demonstrate the impact of their work in this field. Most importantly, 300 nurses and midwives from a range of specialist services, as well as public health, will be contributing to developing policy for public health nursing and midwifery, and identifying priorities for further action.

We are expanding opportunities to contribute to individual wellbeing and population health outcomes through a range of interventions, from individual patient care to working with new partners in local government and communities. As the professional lead for nurses and midwives in public health, I am delighted by the positive response we have received to the opportunities this new focus on the public’s health presents for nurses and midwives.

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**Social media can be source of support**

Social media is great at helping old friends to keep in contact and for making new ones. It can also bring together people with the same long-term condition who find the contact informative and supportive.

Our practice discussion on page 20 explores the benefits of social media for mental health service users.

Blogging and tweeting can bring people together, for example, thedepressedmoose.com is a blog about a man’s experience of depression. The author is clear that blogging is therapy for himself but also is “hoping that people will learn something about depression by reading this or even recognise the symptoms in themselves or a loved one”.

If you want to become more familiar with twitter, join our twitch at 1pm each Wednesday using the hashtag #NTtwitchat.

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**HIGHLIGHTS**

- Measure change using impact analysis
- Recognise and support trafficked women
- Reducing use of emergency care