

Box 3 Feasibility and acceptability pilot project submitted to the National Institute for Health Research Health Services and Delivery Research funding stream.

General Objective:

To assess the feasibility, acceptability and potential impact of lay CHWs, integrated into primary care services, delivering comprehensive, cradle-to-grave, household-based health promotion advice, to defined micro-areas of around 80 households, and to optimize the role and its evaluation sufficiently to take to full cluster Randomised Controlled Trial.

CHW role:

There will be four CHWs (80 households each) to be employed in the study, integrated into GP practices, and recruited from the area where they will be working. They will have the following role:

- Support adherence to medications and appropriate diet for diabetes and hypertension
- Ensure early identification of symptoms and signs for diabetes and its complications
- Early identification of symptoms and signs of dementia
- Provide smoking cessation and alcohol use reduction advice
- Provide advice on healthy diet and physical exercise across the lifespan
- Identify those eligible for cancer screening (specifically breast, cervical and bowel) and refer for screening
- Encourage influenza immunization uptake
- Encourage retinal screening uptake in diabetic patients
- Provide basic contraceptive and safe sex advice
- Encourage Chlamydia screening uptake in target populations
- Support early booking and referral for new pregnancies
- Provide basic post-pregnancy contraception advice
- Provide basic breast-feeding support
- Monitor the growth and development in the under 2s
- Ensure under-5 and additional immunization schedule completion such as HPV vaccination.

Outcomes:

We will ascertain the acceptability of the lay CHWs from the patient, provider and policy-maker perspectives and the programme theory of what works, for whom and why, based on realist evaluation of the CHWs' role. We will estimate the relative effectiveness of the lay CHWs on uptake of immunization and screening services; detection of chronic diseases; and giving health promotion and lifestyle advice. We will identify whether the CHW role is likely to offer a return on investment sufficient to justify a rigorous trial.

Research partners:

The proposal is a collaboration between researchers and implementers at Imperial College, Bangor University, Betsi Cadwaladr University Health Board, Public Health Wales, and the London School of Hygiene and Tropical Medicine.