

Case study pack

To accompany the physical activity and long term conditions resource pack

March 2022



The
Richmond
Group
of Charities



Developing an Active Hospital in Northumbria

As a Trust, Northumbria Healthcare NHS Foundation Trust is a **Better Health at Work Award** ambassador in recognition of its work to support staff wellbeing. The Trust was appointed to be one of four secondary care providers in the country to take part in a two-year Active Hospitals pilot. Phase 1 resulted in the launch of the Moving Medicine [online tool](#) and resources, and phase 2 of the pilot is part of the Moving Healthcare Professionals Programme ([MHPP](#)) to increase Healthcare Professional (HCP) knowledge and skills to support them to have frequent and better quality conversations about physical activity. It aimed to develop the hospital environment to prompt and enable physical activity and support staff to be more active.

The project and steering groups included staff representing all levels and partner organisations.

What the project involved

Active Hospitals built on existing work to promote a culture of health and wellbeing among staff – a Trust public health priority – with a staff wellbeing steering group, a health and wellbeing strategy and staff wellbeing lead. Key to the approach was the development of workforce skills and embedding Making Every Contact Count (MECC) principles at scale, led by a Consultant in Public Health with a designated project lead.

The project and steering groups included staff representing all levels and partner organisations including Active Partnerships. They undertook a needs assessment using the COM-B behaviour change model.

A comprehensive staff wellbeing programme was developed, including a Couch to 5K support group, cycling and walking challenges, and a staff wellbeing portal with financial as well as physical and mental wellbeing advice. COVID-19 was an opportunity to encourage staff to be active in order to reduce risk and enhance resilience.

Staff wellbeing is included in line manager, preceptorship and apprenticeship training sessions and provides an opportunity to recruit to the health advocates network.

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Northumbria Healthcare
NHS Foundation Trust

The team held a physical activity focus group in July 2021. Some barriers identified included:

- **Motivation** – shielding, working from home, no clear start or finish time, tiredness, no-one to go for a walk with, lost team connections.
- **At work** – being desk-bound, patient telephone calls, no travel to patients, lack of inspiring places to walk, using lunchtime for other reasons, virtual meetings.

The focus group suggested:

- Do the activity at the start of the day before or on the way to work, extend lunchtime breaks to allow activity and food/drink.
- Permission to go for a walk at lunchtime or “walk away” from work to mark the end of the working day at home.
- Focus on stress management, mental wellbeing, self-care, mindfulness, managing anxiety, exhaustion and burnout.

The staff wanted social and peer activities, and some virtual activities. Motivators included:

- recording steps as a team or individual;
- screen pop ups as reminders;
- increasing knowledge of the benefits of activity;
- support to recognise barriers and how to make activity a part of the day;
- walk and talk meetings;
- activity ‘snacks’ during the day.

Plans to develop the programme include: recruiting volunteer staff health advocates; identifying priority target groups and physical activity champions; providing further training for HCPs; providing recorded and live movement sessions for staff to access in their own time; creating a wellbeing hub including a gym; and broader communications and engagement for the hospital.

➤ **Northumbria NHS Trust**

➤ **Cycling and walking challenges**

A comprehensive staff wellbeing programme was developed, including a Couch to 5K support group, cycling and walking challenges



Image courtesy of Northumbria Healthcare NHS Trust



Northumbria Healthcare
NHS Foundation Trust

Active Essex working in partnership

Active Essex, Essex County Council Adult Social Care and Sport for Confidence developed a strategic partnership to create opportunities for disabled people and those living with long term health conditions to be active and engage in sport and physical activity within their community. Initially a 12-month test and learn project funded by the Essex Local Delivery Pilot, the Prevention and Enablement Model (PEM) is now in its second year.

The approach involves bringing multiple system stakeholders together to collaborate around a shared vision. Support for PEM has been received from local authorities, health partners, Active Lives, Essex LDP, amongst others.

It's based on the principles of:

- Develop **system**-led opportunities for the audience and to encourage activity in the local community, reconnecting them to their local area.
- **Embed** physical activity and redesign a targeted pathway to achieve this.

- Create practice-based learning opportunities that increase confidence and capability across the **workforce** using physical activity as a tool, specifically Occupational therapists (OT).
- Test and learn the **impact** of this transformation and build a case to scale up.

The survey revealed an OT workforce that has the opportunity, desire and motivation to deliver advice on physical activity to service users, and a workforce that is skilled and capable of doing so, but would benefit from greater resources and support.

Giving OTs more time to deliver and more on-the-job training hours would address their most pressing concerns and positively impact patient/service user satisfaction.

There was a rapid and agile response to COVID-19: training was adapted for on-line delivery, especially useful in the care home setting.

➤ **Active Essex**



Initial findings from the 6-month evaluation report from March 2021:

“From early, indicative data, PEM can lift the wellbeing and activity levels of a disabled person to levels like those reported by non-disabled people.

Of those staff exposed to training, we saw a sixfold increase in the confidence of OTs advising on the impact of inactivity.

PEM can be a socially desirable investment, delivering about £3 of social value per each £1 invested.”



Breast Cancer Now – long term health conditions support group

Staff at the charity Breast Cancer Now started a support group for those in the workforce living with long term health conditions.

A lead for the group was identified, who remembers:

“Sitting at my desk, I was unsure of how much or how little to say to my manager about my condition and the impact it had on me – there was a fear of job loss or the perception not able to work if I said anything.

[I experienced] pain, fatigue and was worried about hospital tests and results which are often unseen, I realised there were probably others at their desk ‘looking fine’ but I didn’t know who they were or how to connect with them.”

The long term health conditions support group was then formed and is a confidential group for staff at Breast Cancer Now who are living with a disability and/or long term health condition, providing an opportunity to connect with others and to share tips and information for managing work and for peer-to-peer support.

It is a private group on a Microsoft Teams channel. There is an optional on-line meeting every six to eight weeks, and people connect one-to-one outside of meetings – they are encouraged to do that if they are having a bad day.

Benefits that have been identified by the group include:

- Support from others living with a long term condition.
- Reduction in feelings of isolation.
- A collective voice if there are things that are affecting people with long-term conditions.
- Raises awareness amongst colleagues, line managers and senior managers that there are people working with long term conditions.
- Reduces additional stress. It’s OK to talk about condition and needs when it’s appropriate to do so, it’s more helpful than keeping quiet and hoping that all will be OK, which can lead to problems e.g. being ‘strong’ for too long can lead to sudden exacerbation of symptoms.

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“This can serve as an example of good practice to other organisations, to elevate and improve the understanding amongst staff, of the impact of long term health conditions on people’s lives and how to use as a space to promote physical activity.”

Sadia Habib, Public Health Manager, Breast Cancer Now

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NOW**

The group's aim is to provide a space for people with long term health conditions to connect and give or gain support. The experiences of staff, in the form of case studies, were featured on the organisation's intranet so that colleagues across the organisation can achieve greater insight of specific long term health conditions and their impact on life from others with lived experiences. We Are Undefeatable resources are also shared where relevant with the group to highlight the importance of physical activity.



Image courtesy of Breast Cancer Now



“Although many of us have very different conditions, there’s a huge overlap in feelings, impact and support needs – our individual diagnosis isn’t nearly as relevant as I had expected and I think that’s why the support aspect works so well as there are many similarities and empathy within the group.”

Lisa French, LTC Support Group Coordinator

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NOW**

Royal College of General Practitioners – Active Practices

Main aims of the project

The Active Practice Charter is a national initiative that supports and encourages GP practices to promote physical activity to staff and patients, and includes a commitment to partnering with a local physical activity provider, as an example of physical activity social prescribing in action.

By signing up to the [Active Practice Charter](#), a GP practice commits to improving patient and staff health through activity; it is free, fun and easy to sign up and it can be led by any member of practice staff. The team provides support through a dedicated website for the growing network of practices and regular blogs and newsletters.

The Charter was inspired by data that one in four people would be more active if it was recommended by a GP or nurse ([Sport England](#)). It builds upon previous collaboration in 2018 between RCGP and parkrun UK to develop the successful [parkrun practice](#) programme.

About Active Practices

Practices can register as an Active Practice by demonstrating steps taken to reduce sedentary behaviour in staff and patients and increasing their levels of physical activity as well partnering with a local physical activity.

The [website](#) is a comprehensive resource that includes suggested activities to meet the criteria. It signposts to wider training including the [Moving Health Professionals clinical champion physical activity training](#) sessions.

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“The initiative does not have to be led by a GP, or even a clinician – any member of the practice team can lead, including medical students, GP trainees, social prescribers, physios, receptionists or one of the Patient Participation Group team.”

Dr Andrew Boyd, Physical Activity Clinical Champion



Impact

- The charter has more than 300 practices signed up (Sept 2021).
- More than 100 practices have met the charter criteria.
- There has been an ongoing appetite during the pandemic.
- Over 1,700 GP practices have signed up with parkrun UK to be a parkrun practice.
- Some practices have set up their own walking groups, fitness classes and websites, others have supplied standing desks.

Examples:

Active Practice in Action: Clarendon Lodge Medical Practice

Clarendon Lodge Medical Practice set up a 'fitness club', which includes walking and running groups, have a series of videos working with local partners to help people be more active from a chair, and informative videos about walking and stretching.

➤ **RCGP Learning website**

This short animation explains why it's important, and how you can become an Active Practice.



Total Wellbeing Luton

Luton in Bedfordshire is primarily urban with a population of over 200,000 and a significant number of people from ethnic minority backgrounds. Life expectancy is lower than the national average and there are low rates of physical activity. It is the 59th most deprived local authority area of 326. Nearly a fifth of the local population – around 37,000 people – have a long term health condition.

Luton previously had a range of different health and wellbeing services for people with multiple long term health conditions including specialist rehab services delivered by Active Luton, whilst lifestyle management support was provided by Live Well Luton. Luton Council and Clinical Commissioning Group wanted to take a more integrated approach. Charity partners included British Lung Foundation, Macmillan Cancer Support, MS Society and Stroke Association.

The project involves the specialist team for people with long term conditions (specialist exercise rehab professionals) who organise tailored programmes to meet client needs including subsidised classes for people with long term conditions. There are 12 weeks of support with ongoing assistance available.

In the first year it supported more than 500 people a year seeing:

- 91% increase in physical activity
- 75% reduction in GP and A&E visits
- 84% improvement in self-efficacy

In the 3 months to January 2022, data showed:

- Increase in physical activity increase more to 96.1%
- Reduction of GP visits jumped to 90.8%
- Improvement of self-efficacy rose to 93.4%

Through lockdown, there was a move to virtual support including:

➤ Total Wellbeing Luton YouTube channel



“Having one point of referral for the different services is easier for patients and health professionals than it was previously. Combining services improves the efficiency of the services and supports with costs as only one administration process is required.”

Sarah Simmonds, Total Wellbeing Luton long term conditions manager



Alzheimer's Society's dementia-friendly guide

Guide for the sports and physical activity sector

While leading a group established in 2012 to develop dementia-friendly communities in various sectors, the Alzheimer's Society recognised the need for sport and physical activity providers to be more inclusive and aware of the impact of dementia, adapt their programming, consider environments and processes to tackle the challenges that their members and employees may face. The charity was awarded funding from Sport England as part of the Movement for All Programme so that people affected by dementia could continue to enjoy activities in their community and keep active for as long as possible.

They produced a practical guide for the sport and physical activity sector to become more dementia-friendly, which aims to inform and educate individuals and organisations to have a better understanding of how dementia affects people. It provides **tools and guidance** so that the sector can help more people affected by dementia lead more active lives.

The impact of dementia and the barriers that people face are very broad. Therefore, the learning and progress towards becoming dementia-friendly tackles several barriers that are associated with a wide range of disabilities and long term health conditions, making the guide a multi-faceted resource.

About the guide

It is targeted at anyone who wants to make their facilities, programmes and workforce more dementia-friendly – National Governing Bodies of sport, Active Partnerships, local authorities and other teams that are considering how their programmes can become more accessible for people affected by dementia, as well as being suitable for those delivering activities.

The guide shares good practice and creative ideas from across the sector including ways for individuals and organisations to make their activities suitable for people who are starting an activity for the first time or after a period of inactivity.

The guide includes checklists with 'key actions' on three main areas: **people** (awareness, training and support), **programme** (planning, adapting and designing activities) and **place** (the physical environment and work in local communities).

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How the guide helps people

The charity asked people with dementia what mattered most to them and what physical activity providers could do to create a more dementia-friendly experience. Feedback included:

- “Make people feel comfortable. You shouldn’t be judged by dementia. Their staff should have training and they should be friendly and supportive.”
- “I would like some sort of physical exercise which is fun but not too hard for me and a place to relax and have a cup of tea afterwards.”
- “I wouldn’t just walk into a gym but if there was an open day for a group that would be good.”

Several benefits can result in making a facility dementia-friendly, and therefore friendly for everyone. The social benefits measured include helping people to **live well with dementia and stay independent, improving accessibility for the whole community and reducing social isolation**, therefore creating a more **accessible and inclusive** environment for everyone.

➔ [**See the guide here**](#)



Dementia-friendly sport and physical activity guide

Supporting people affected by dementia to lead more active lives in their community



The guide was evaluated after 6 months. A survey and focus group of organisations who had used the guide showed that:

- **60% saw an increase in staff or customers talking about dementia.**
- **54% saw an increase in the understanding of the benefits of physical activity in people with dementia.**
- **43% saw an increase in participation among people affected by dementia (carers and people living with dementia).**
- **48% saw an increase in motivation in people with dementia.**



SASP – Moving Miracles in Rural Somerset

West Somerset is a large isolated rural area with only 34,000 people and limited transport links. A third of the population is over 65 years old and two thirds are living with at least one long term condition. Somerset Activity and Sports Partnership (SASP) works with several local and national partners to promote and provide physical activity.

What the project involved

SASP recruited a team of ten local Ambassadors with various long term health conditions, known as “Miracle Makers”, who brought stories to life about how physical activity has made a difference to them, and inspired confidence and optimism. They have amplified messages, engaged in programmes and are now seeking local voluntary roles over and above the Ambassador role to build on their interest and passions.

Key to the success of embedding the work into healthcare was providing **leadership, allyship and support**. SASP attended operational meetings through their relationship with Public Health and the Clinical Commissioning Group during the COVID-19 pandemic. The shared goal of using physical activity for condition specific work and prevention was the driver.

During the first COVID-19 lockdown, SASP undertook a mailout survey for people with long term conditions – those on the shielding list – 27,500 people across Somerset. The significant response to the survey highlighted loneliness and isolation across the region but also provided insight into digital connectedness, physical activity preferences, motivations and barriers, and how the number of long term conditions and number of house occupants closely relates to participation levels.

Recommendations and next steps from the last two years’ work:

- **identifying shared goals across stakeholders is key;**
- **involve experts by experience and target audience in service design;**
- **identify training needs and awareness of those working with long term conditions;**
- **target conduit channels e.g. friends and families as well as direct to the audience;**
- **involve healthcare professionals to test process mechanisms where possible.**

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Impact of the project

The shielded survey was analysed by the University of Exeter and looked at digital engagement and confidence as well as existing and changes to activity levels. This was followed by a small focus group who provided valuable insight and enabled co-design of new programmes for people at home and in the community.

Being flexible, responsive, energetic, resourceful, communicative, knowledgeable and positive was key to relationship building. Linking with the NHS has made SASP a trusted partner for individuals as well as system partners, which allows continuous development of programmes and insight. The healthcare system is now approaching SASP as the physical activity experts – from pre-surgical medicine team pilots, post-covid recovery services, stroke, Integrated Rehab, musculoskeletal physiotherapy, social prescribing and other services across primary and secondary care to understand the support physical activity can provide and how SASP can connect them to these. They seek guidance from SASP on how to build physical activity into care pathways and beyond, understanding and trusting more the role community opportunities can have in prevention, rehabilitation and self-management, and employing Social Prescribers in partnership with Primary Care Networks.

➤ **[Find out more about SASP here](#)**

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“There has been a lot of change in the Integrated Care System (ICS) and local healthcare landscape but having key relationships with existing people in the Clinical Commissioning Group helped with embedding SASP as a strategic partner – stakeholders trust us to work collaboratively to make people’s lives better through physical activity.”

SASP Active Ageing Manager



Image courtesy of SASP

sasp 
Somerset Activity & Sports Partnership

CASE STUDY

STEP tool case study – Boccia England

One in 5 people has a disability or impairment.[†] Activity Alliance is the leading voice for disabled people in sport and activity. The national charity runs programmes that educate and encourage communities to deliver inclusive activities so everyone can join in. To support this work, Activity Alliance released a range of STEP resources to demonstrate how activities can be adapted to meet individuals' needs. The STEP tool is also a focal point of Activity Alliance's Inclusive Activity Programme and Get Out Get Active Programme.

STEP stands for **Space, Task, Equipment, People**. It's a simple way of making changes to activities to make them more inclusive. It's commonly used in the PE and school sport setting so that everyone can join in and take part together and the principles work in all settings, as well as the home. Ideal for disabled people, organisations and activity providers alike, the tips provide more ways to apply the STEP tool to sports and activities.*

[†] <https://www.gov.uk/government/statistics/family-resources-survey-financial-year-2019-to-2020/family-resources-survey-financial-year-2019-to-2020#disability-1>

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Boccia England used STEP to adapt their activities and provide ideas for other games so that people could take part in their virtual competition, The Rainbow Cup, at home during COVID-19 lockdown. This included considering what they would need to be aware of in their home space, giving ideas of tasks within the game that would work at home, equipment ideas for people who don't have balls, and ideas on involving other people in the household. Find out more about boccia at home [here](#).



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“At Boccia England we are proud that boccia is an inclusive sport for everyone. The STEP tool provides us with the support to effectively adapt our activities, ensuring participation in our sport is accessible for everyone, regardless of their needs.”

Kate Moss, Boccia England's Head of Development

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“During the COVID-19 pandemic, my boccia club was forced to close. However this didn't stop me playing boccia, it just stopped me meeting my friends. To continue playing boccia, I made my mum and dad move all of the furniture out of the way in the front room, so that I had a big clear space to ensure I got an approximate size of a boccia court. This was to ensure the accuracy and precision of a boccia game and my shots. I continued to practice my knock on, lay ups and knock off.”

Owen Porter



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“During the lockdown, the Rainbow Cup was an amazing way to stay connected and to share my progress with friends and family which has given them a small insight to what boccia was and how important it is to me. It sparked a spirit that I thought had been lost during isolation and made me more motivated and competitive with every challenge. It allowed me to be creative and use the limited space and resources around me that I never knew could be helpful for training. And it was always so much fun! The different challenges trained me to adapt to the environment which taught me to use different techniques that I will hopefully use in my matches.”

Azhad Fauzi

Images courtesy of Boccia England

**activity
alliance**
disability
inclusion
sport

For more information:
email richmondgroup@macmillan.org.uk
visit richmondgroupofcharities.org.uk/physical-activity

Imagery on pages 1 and 16 courtesy of [We Are Undefeatable](#)

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