

**TO: ENVIRONMENT, CULTURE & COMMUNITIES OVERVIEW & SCRUTINY PANEL  
30 APRIL 2013**

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**ACTIVATE HEALTH SCHEME  
Director of Environment, Culture and Communities**

**1 PURPOSE OF REPORT**

- 1.1 At its meeting on 22<sup>nd</sup> January 2013, the Panel received a report highlighting the contribution that the Environment, Culture and Communities Department make to public health. One of the contributions detailed was the “Activate GP Referral Scheme”. The Chairman of the Panel has asked that in order for Members to be able to increase awareness of this particular initiative, the scheme’s annual report should be considered

**2 RECOMMENDATIONS**

It is recommended that:-

- 2.1 **The Panel notes the Annual Report of the Activate Health Scheme: and**
- 2.2 **The Panel congratulates all Activate team members in delivering a successful GP referral scheme.**

**3 REASONS FOR RECOMMENDATIONS**

- 3.1 The majority of council functions will have a role to play in helping the council meet its objectives with public health. For these to be delivered in a manner that is accessible to the public it is important to optimise the use of universal public facing services where this is possible. It is equally vital that relevant council staff rise to the challenge of promoting healthy lifestyles and the Activate team is a positive example of that.

**4 ALTERNATIVE OPTIONS CONSIDERED**

Not applicable – the Chairman asked that the report be presented.

**5 SUPPORTING INFORMATION**

- 5.1 In January 2013, the panel was advised that “health improvement” is one of 4 domains within which local government is expected to work in order to improve the health of the population. One of the current services provided by the Council which contributes to this is the Activate GP Referral Scheme which has been operational since the year 2000.
- 5.2 The Annexe to this report provides the annual report of the Activate Health Scheme and this covering report will not duplicate the detail contained in that.

However, important details include that there were just under 400 participants in the scheme; the scheme is provided by working in partnership with local GP's and other health agencies; it is successful in encouraging a large number of participants in maintaining a healthy lifestyle; and it operates successfully within the universal health and fitness service provided by the Bodyworks gym within very limited resources..

- 5.3 Members are asked to note the report and congratulate staff involved for their efforts.

## **6 ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS**

### Borough Solicitor

- 6.1 Not sought

### Borough Treasurer

- 6.2 There are no financial implications as a consequence of this report.

### Public Health Consultant

- 6.3 The Activate Scheme is directly relevant to several elements of the new Public Health Outcomes Framework, including those within Domain 3 (Health Improvement) and Domain 5 (Healthcare & Premature Mortality). The scheme also represents a significant contribution in relation to a number of priorities within the Health & Well-Being Strategy.

### Equalities Impact Assessment

- 6.4 The Activate Health Scheme makes a positive contribution to the public at large and can particularly be of benefit to those with either a physical or mental disability.

## **7 CONSULTATION**

### Principal Groups Consulted

- 7.1 None

### Background Papers

None

### Contact for further information

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### Doc. Ref

O&S Report Activate Health Scheme



## **ANNUAL REPORT**

### **2012-2013**

#### **COMPILED BY;**

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## 1. A BRIEF HISTORY AND OVERVIEW OF THE ACTIVATE HEALTH SCHEME

The Activate Health scheme has developed from partnership working between Bracknell Forest Borough Council (BFBC) and Bracknell PCT. In 1999 as part of the local Health Improvement Plan it was decided that a focussed effort to promote physical activity in Bracknell Forest was required. A Health Improvement Officer post for Physical Activity was created in December 1999 and the Activate Health Scheme began in June 2000. In 2006 the PCT withdrew its funding but in recognition of the Council's role in improving health and well being, it was decided that the Council would continue to work with local GPs as well as others and manage the scheme under the Bodyworks 'umbrella'. Also included under the "umbrella" are twice weekly ran Cardiac Phase IV Classes, with the aim of improving/maintaining the individuals Cardiovascular fitness following heart surgery. These classes are based at Crown Wood Community Centre and are self funded.

The scheme helps to raise awareness of, and promote, the health benefits of long-term regular participation in moderate physical activity to the residents of Bracknell Forest with a view to reducing Coronary Heart Disease and other sedentary related illnesses within the area. It also aims to change individuals' negative attitudes toward regular physical activity - encouraging participation in those not normally active.

Over 12 weeks the scheme focuses on giving participants the help, support information and guidance which will enable them to monitor their own levels of activity and progression. Participants are reviewed at 6 weeks and then at the end of the scheme. They are also supported up to a year afterwards.

The Activate Health Scheme runs from Bodyworks Fitness room, Bracknell Leisure Centre and Be Active Fitness room at Edgbarrow Sports Centre. Clearly, the instructor team needs to be suitably qualified and the current expertise in the team is:-

- 9 qualified GP Referral Exercise specialist
- 4 Phase IV Cardiac Instructors
- 1 Pulmonary Rehab instructor
- 1 part time health scheme co-ordinator

Activate structure & price guide:

- 1<sup>st</sup> Consultation – Free
- 1<sup>st</sup> Fitness Room - £4.30
- Fitness Room sessions - £4.30
- 6 Week Review - £4.30
- 12 Week Review – Free
- Post scheme follow ups - Free

## Unrestricted

In April 2008 King Edward Department of Nutrition and Dietetic set up a Weight Management service alongside the Activate Health scheme. They now have two clinics that run from Bracknell Leisure Centre.

In June 2011 the Activate Home start programme was launched. This was designed for participants who are not yet ready to use the fitness room and/or financially unable to afford the scheme. Following the 1<sup>st</sup> consultation with one of the Activate team the 'Home Start' users are then booked in for a 1<sup>st</sup> fitness Room, within the gym environment. During this session instead of taking them through a program to follow within the gym they are given a program that they can follow at home once the instructor is happy they can follow the program with safe technique. They will then come back into the gym for their reviews at 6 and 12 weeks, with the Activate team following up as normal. The aim of this is that by coming into the gym environment the participants will realise that it is not as threatening as they first thought and will start attending regularly.

There are referrals from all 16 local GP surgeries which stretch from Ascot to Sandhurst. Cardiac Rehab referrals come from Windsor, King Edward and Frimley Hospitals and other local Phase III teams.

Activate works closely with King Edward Pulmonary Rehabilitation Clinic,

Physiotherapy Departments based at Great Hollands surgery, local hospitals and with the new Thames Way Physiotherapy services based at 2 local surgeries.

We also work with the Bracknell Stroke Association and the MS society based at Royal Berkshire Hospital.

The Activate Scheme has always had a relatively high % of participants who are still active after 12 months and paying for the use of our facilities. Given that these people were inactive and therefore not using our services previously, it is evident that the new income collected was directly related to the Activate Scheme. This was the factor behind the Council being able to absorb most of the cost of continuing to run the scheme after funding was withdrawn.

## **2. Activate exercise referral scheme report for 2012/13**

Activate is considered to be running smoothly with appointments being made to any of the three daytime sessions (Wednesday afternoon 1-5, Thursday afternoon 12-4 and Friday morning 9 – 12) for GP appointments only. This availability has helped reduce the waiting time, which is currently 3/4 weeks from receiving referral.

### **2.1 Breakdown of referrals and numbers seen on the scheme**

- There have been 394 referrals to Activate this year:
  - 317 received 2012/13 against 309 received 2011/12
  - 77 Referrals for the Dietician 2012/13 against 88 received 2011/12

As can be seen, the number of referrals to Activate has increased, although there has been a slight decrease in the number for the dietician. Within current resources it is considered that the GP Referral Scheme is nearing capacity (instructors are heavily called upon to support and advise “non-referral” customers) but it is intended to promote the dietician more at local GP surgeries.

Some other statistics which may be of interest:

- 35% of referrals did not actually start the scheme. Of this, 43% did not respond to our attempts to book appointments (mainly via phone), 16% developed a new illness or their condition worsened, 11% stated they no longer needed / wanted help and the remaining we could not contact. The new Referral forms include asking participants for their e-mail with the aim to reduce the number of participants we are unable to make contact with.
- The number of people completing the scheme in relation to the number of referrals we received decreased slightly from 37% last year to 36% this year. This is accounted for because there is a larger than normal number of participants termed “suspended” due to worsened or new illness. However, the drop out rate of those that started the programme was lower this year which in itself is a positive thing, although this is probably also related to our inability to contact some participants and is why we are seeking e-mails as an important contact method.

### **2.2 Breakdown of referred patients.**

#### **Age groups**

- |   |      |
|---|------|
| • 18 - 25 age group = 19 for 2012/13 (30 for 2011/12) | - 11 |
| • 26 - 35 age group = 30 for 2012/13 (35 for 2011/12) | - 5  |
| • 36 - 45 age group = 35 for 2012/13 (56 for 2011/12) | -21  |
| • 45 - 55 age group = 52 for 2012/13 (35 for 2011/12) | +3   |
| • 56 - 65 age group = 57 for 2012/13 (40 for 2011/12) | +17  |
| • 66 - 75 age group = 44 for 2012/13 (32 for 2011/12) | +12  |
| • 76 + age group = 13 for 2012/13 (7 for 2011/12)     | + 6  |

## Gender

- As for all previous years – there are more women using the scheme than men.

2012/13      Males: 116  
 Females: 132

While the gender ratio's are quite similar, it should be noted that these figures are not in our control since it depends who the referring professionals choose to send through to us.

### **2.3 Main Conditions for referral**

There are 2 main reasons for referral:

63% of participants being referred for overweight/obesity  
 38% for Inactive/sedentary

Of interest is that the referral rate for Cardiac/ heart related problems this year is higher than previously and it has found its way into our top 6 reasons for referral for the 1st time. It is unclear at this stage why this is the case but it could be that GP's are acting differently than previously, or this may be related in the growing confidence of the scheme by GP's.

	2011/2012			2012/2013	
1	Overweight/ Obesity	172	1	Overweight/obesity	157
2	Inactive/Sedentary	81	2	Inactive/sedentary	94
3	Chronic back pain	62	3	Hypertension	70
4	Mental Illness	60	4	Other Joint Problems	68
5	Other joint problems	54	5	Mental Illness	53
6	Hypertension	53	6	Cardiac	50

### **2.4 Post Scheme follow up**

There is post scheme monitoring of Activate participants who completed their 12 weeks and this continues to show that most are continuing to regularly exercise/stay active for at least a year after completing the scheme. This is a considered a great achievement since most came to the scheme as inactive / sedentary individuals and it is questionable whether without the support of Activate that they would have changed this behaviour. There is still a high % of participants we are unable to contact but hopefully this will decrease with the increasing use of e-mails.

Patients are surveyed post scheme at 6, 9 and 12 months.

- At six months                      50% Still Active  
    49% Unable to contact potentially Active  
    1% Not Active
- At nine months                      78% Still Active  
    22% Unable to contact potentially Active
- At twelve months                      63% Still Active  
    37% Unable to contact potentially Active

These long-term figures strongly indicate that Activate works in the long term and the twelve month rate is amongst the highest of other schemes we are aware of. Activate introduces participants to regular exercise and the ongoing encouragement, support and contact they receive from the Activate team helps them to keep going with their physical activity. This can only benefit their health positively in the long run since it is universally accepted that active people usually have better cardiovascular health – other benefits relate positively to blood pressure, weight control, blood sugar levels and cholesterol. Participants are also likely to have better musculoskeletal health with more flexible joints, helping to prevent problems of frailty, falls and weaknesses as they approach old age.

While it is possible to measure and track improvements in the physical condition of participants, it is equally important to note that they also report improvements in their overall wellbeing.

## **2.5 Activate summary**

Activate continues to maintain good success rates in terms of numbers of participants taking up regular exercise and continuing after 12 weeks of completing the scheme. We have modified the scheme to accommodate participants who need more than 12 weeks and also decreased to 6 wks for those participants who are used to regular exercise but may have a new illness or injury. The inclusion of the 'Home Start Programme' has helped increase the number of participants activate is available to.

## **2.6 Looking ahead**

Next year we will take steps to at least maintain but hopefully increase the % of those completing the scheme by more fully understanding the reasons for drop out. It will also be important to increase the number of participants who start the scheme by working with GP's to get more channels of communication (especially e-mail addresses) in order that we can effectively contact them in the first place. While this is obviously a good thing, the limited capacity of the existing resource available to deliver Activate may lead to longer waiting times for the first appointment which, from previous experience, can be a de-motivating factor in itself.

We intend to improve the referral process by producing a new referral form that can be easily completed on a computer enabling details to be sent by e-mail.

## **3 Phase IV Classes**

Phase IV Classes are run at Crown Wood Community Centre on Monday and Friday Mornings at 10am. The first consultation is free and there is then a modest charge of £4 per session of £35 for 10 sessions if paid up front. This income normally covers the cost of providing the service.

The classes are 1 hour in duration and consist of a thorough 10-15 min warm-up, followed by 30 minutes of cardiovascular based circuit exercises with a 15 minute cool-down at the end. Before starting the classes, the participants would have their 1<sup>st</sup> consultation (with one of our Phase IV instructors) to ensure their suitability to start.

## Unrestricted

These classes are for all CHD (Coronary Heart Disease) patients being referred through Phase III and from the GP if 6/12months have elapsed since acute cardiac event or those with a CHD history but no recent acute event.

We currently have 24 participants on the phase IV scheme, 23 of whom regularly attend the classes with the other 1 attending when their work allows. 5 of these have started the Phase IV classes this year. The phase 3 classes have had another good year with the number of participants increasing year on year.

Year	Average number of people attending each class.
2009-2010	8.9
2010-2011	10
2011-2012	10.73
2012-2013	10.78

Out of the 50 referral forms we had through for Cardiac reasons only 5 decided to take up the class environment with the others preferring the flexibility (of time and equipment) the fitness room offers. If participants do not attend for a little while we do give them a follow up call to ensure everything is OK and this usually has the desired effect of getting them back along to the classes.

### 4 Contact details

If you have any questions concerning the Activate Health Scheme please direct them to;

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