

The future of leisure and physical activity...

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The future of leisure and physical activity...

That's a BIG ASK!

- What might a future local authority physical activity service look like?
- Changing the workforce culture
- Is flirting with health services good for us?



“People love chopping wood.
In this activity one immediately
sees results”

*“Insanity: doing the same thing
over and over again and
expecting different results”*

The future is bright. The future is already here...

1. The shift towards addressing: Inequalities, Accessibility and 'soon' to become a key focus - Proportionate Universalism

Resulting in the Improved understanding and use of data and information, with a greater focus on evidence
(what works, for what groups & why)

Changing the Workforce - Improving Competencies, Recognition & Collaboration

1. A greater focus on competencies, flexibility & CPD

Resulting in improved recognition from other organisations - leading to greater collaboration & co-production

Is flirting with health services good for us?

1. It's good for the customer...

It's the right thing to do and has actually raised 'our' game

The future is bright. The future is already here...

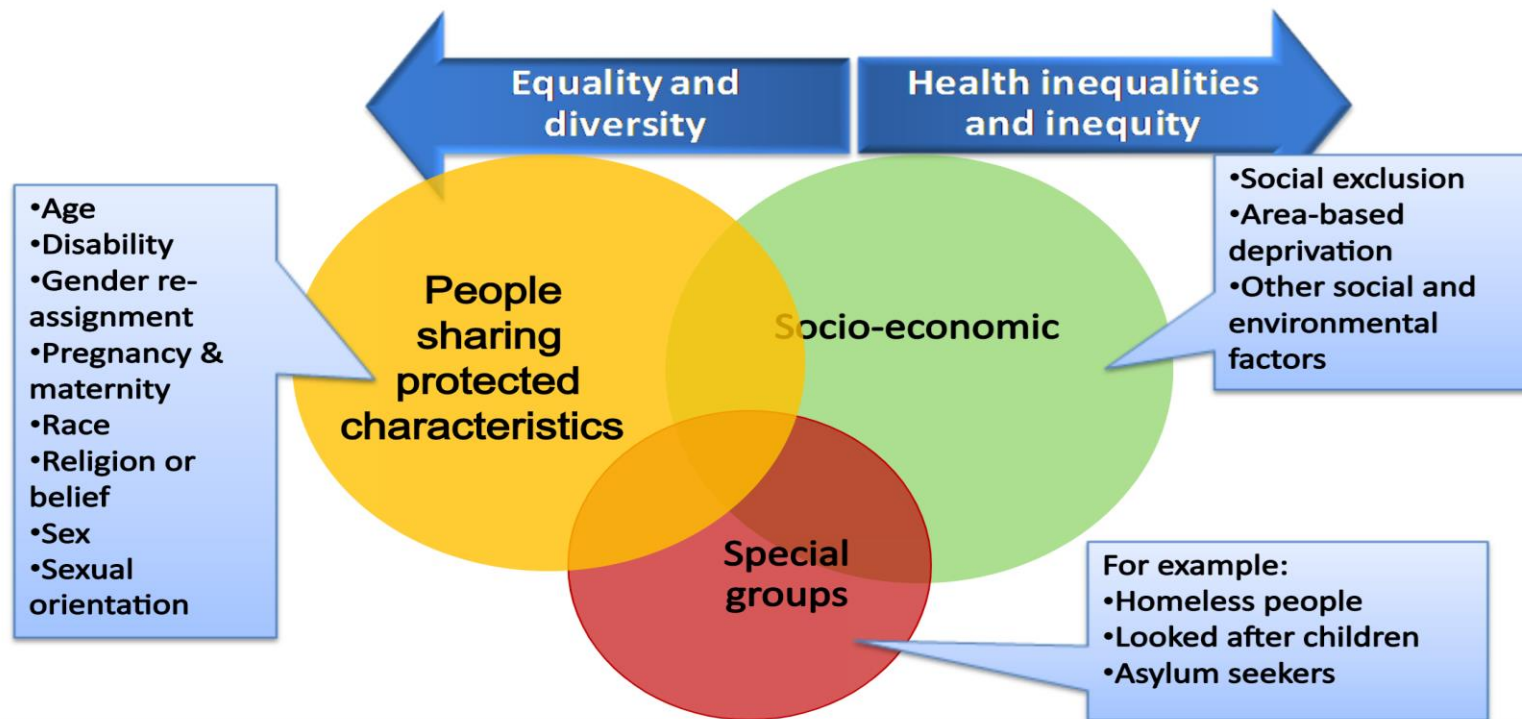
It took a while, probably 20yrs, but there is a greater understanding of Inequalities and Accessibility. However, it's still the 'difficult to do'...

Key Sport Sector 'Players' are already storming ahead on these themes eg Premier League (*Kicks*), English Football League (*Every Player Counts*), Rugby Football Union (*Off Load*) & English Cricket Board (*Chance To Shine*)

Lot's of examples to review, consider & replicate

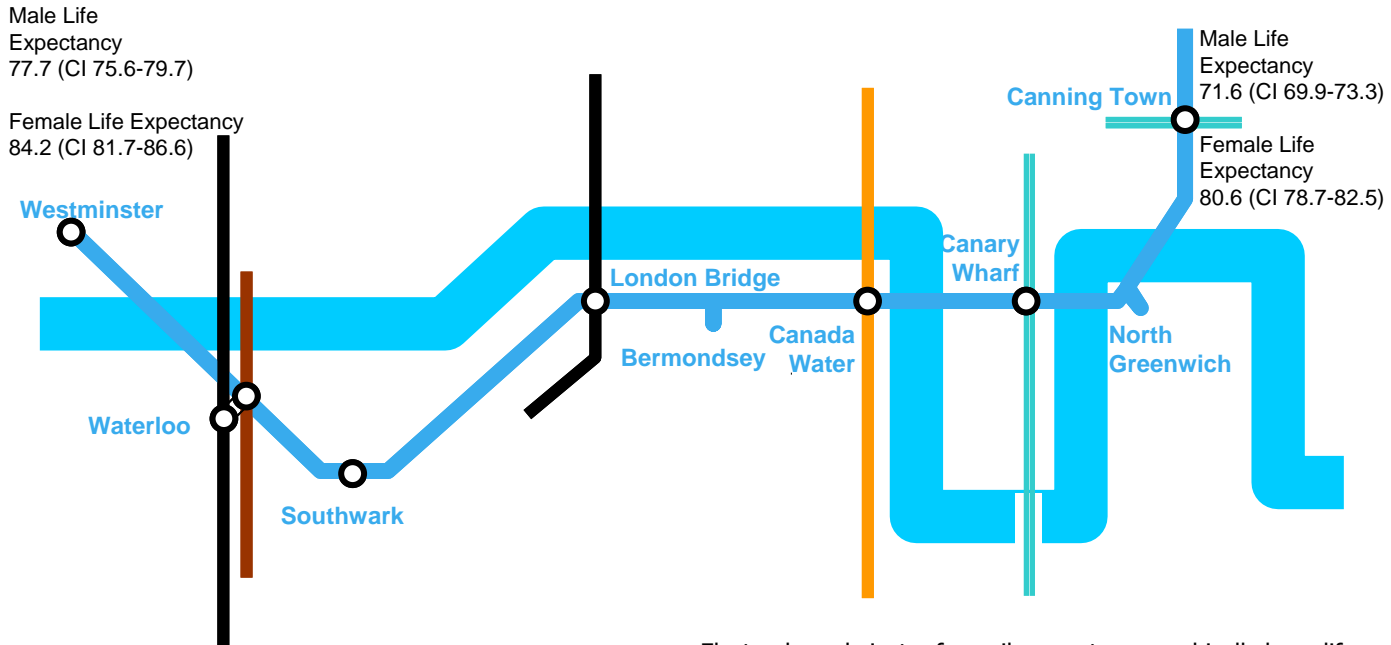
A great resource to seek/ask for support is the Activity Alliance

NICE's approach to equality analysis



Differences in Life Expectancy within a small area in London

Travelling east from Westminster, each tube stop represents nearly one year of life expectancy lost



London Underground Jubilee Line

Electoral wards just a few miles apart geographically have life expectancy spans varying by years. For instance, there are eight stops between Westminster and Canning Town on the Jubilee Line – so as one travels east, each stop, on average, marks nearly a year of shortened lifespan. ¹

¹ Source: Analysis by London Health Observatory using Office for National Statistics data. Diagram produced by Department of Health

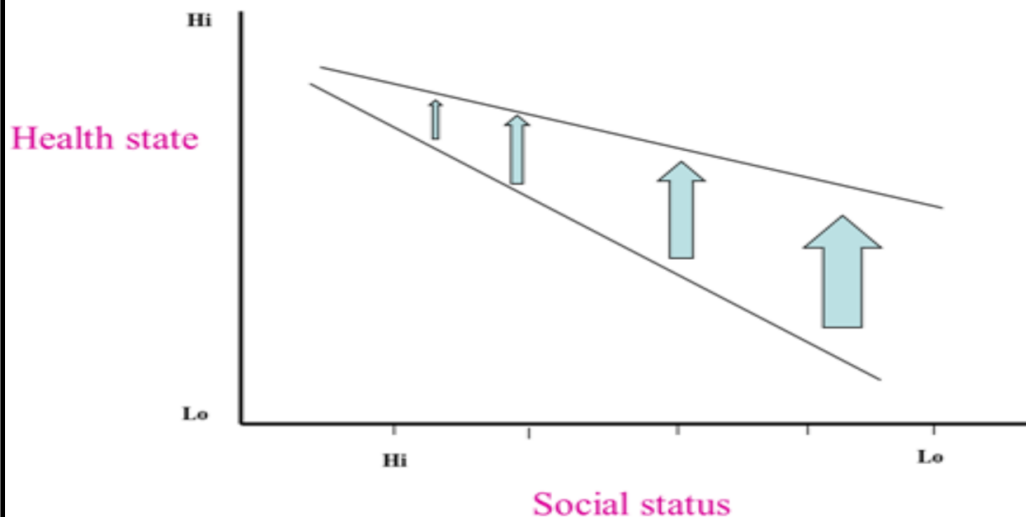
The future is bright. The future is already here...

The introduction of the concept of Proportionate Universalism will be new to some, but it has been around in public health for many years (Marmot Review: Feb 2010)

It's muted that Sport England will have a focus on PU in their next Strategy
- Keep an eye on SE announcements

Proportionate universalism

The health gradient

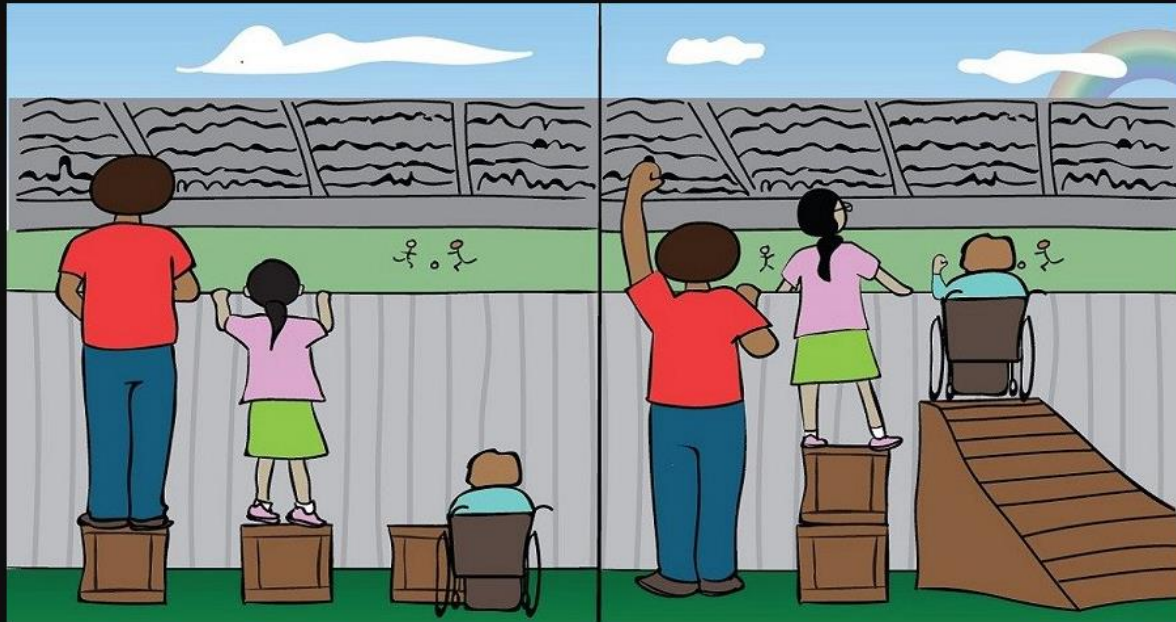


A public health intervention where the intensity of effort is signified by the size of the arrow and determined by the needs of the group...

The gradient flattens and **health inequality** has reduced..

AND

Everyone in the population has had health gains.



An illustration of equality, equity and inclusion*

*Whilst not a perfect example this provides an opportunity to consider the issues

A Challenge I present to all:

Recently I have seen lots of challenges to the evidence presented around Covid-19. What I will say is this; until we have improved our own Health Literacy we must rely on our key partners to inform our response to such issues

Health Literacy has been defined as the cognitive and social skills which determine the motivation and ability of individuals to gain access to, understand and use information in ways which promote and maintain good health. Health Literacy means more than being able to read pamphlets and successfully make appointments. By improving people's access to health information and their capacity to use it effectively, health literacy is critical to empowerment.

The future is bright. The future is already here...

We are now more reliant on data and information than ever before.

However...

Key Q's

Is it Reliable?

Is it Valid?

Is it Current?

I saw it on Google or Facebook
just doesn't cut it...

It's crucial I highlight 'Critical Appraisal'

Critical appraisal is a systematic process used to identify the strengths and weaknesses of a research article in order to assess the usefulness and validity of research findings

Why CA is more important now than ever before

Ensure Data/Information is:

Valid, Current, Reliable, Topic Appropriate and Un-biased

Important

Do Not base decisions on Feelings, Beliefs, Preferences, or, the Status Quo (we've always done it that way...)

Key Traits: Objectivity, Inquisitiveness, Sound Practical Research Techniques & Question Everything!

=

Will result in making Informed Decisions

Changing the Workforce - Improving Competencies, Recognition & Collaboration

There has been a real loss of experience and technical knowledge over the past 5-10yrs. This must be replaced.

CIMSPA has an improved role in providing Competency and CPD recognition. Our partners want assurance that they are dealing with qualified, experienced and competent people - we must all do what we can to improve (prove) our competence and experience

There is a far greater need for people to be multi talented. On top of this they need to have greater understanding of local drivers for change and their individual & collective role in contributing to these

A significant shift is underway related to building leadership skills through the likes of Sport England and the Local Government Association - take a look

Is flirting with health services good for us?

Is this not a 'Must Do' now?

Have we not started to reshape our interventions and programmes to match local health challenges?

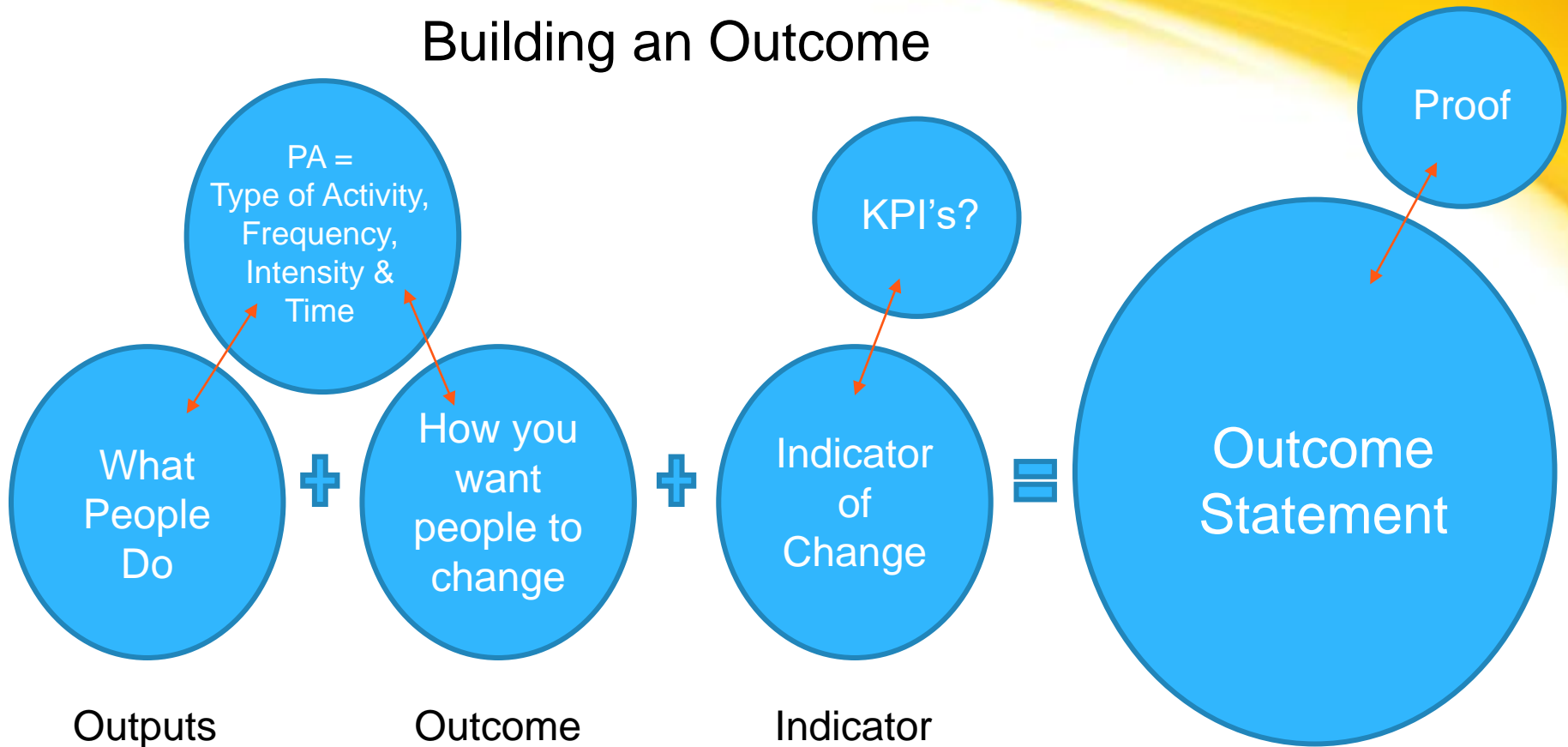
At Least Five Times A Week (*NHS; 1996*) was a definitive moment for the Physical Activity sector - the evidence has been out there for years.

The National Quality Assurance Framework for Exercise Referral Systems (*NHS, 2001*) started the ball rolling

Key to engaging 'Health' effectively is:

The right interventions, targeting the right people, producing the right outcomes

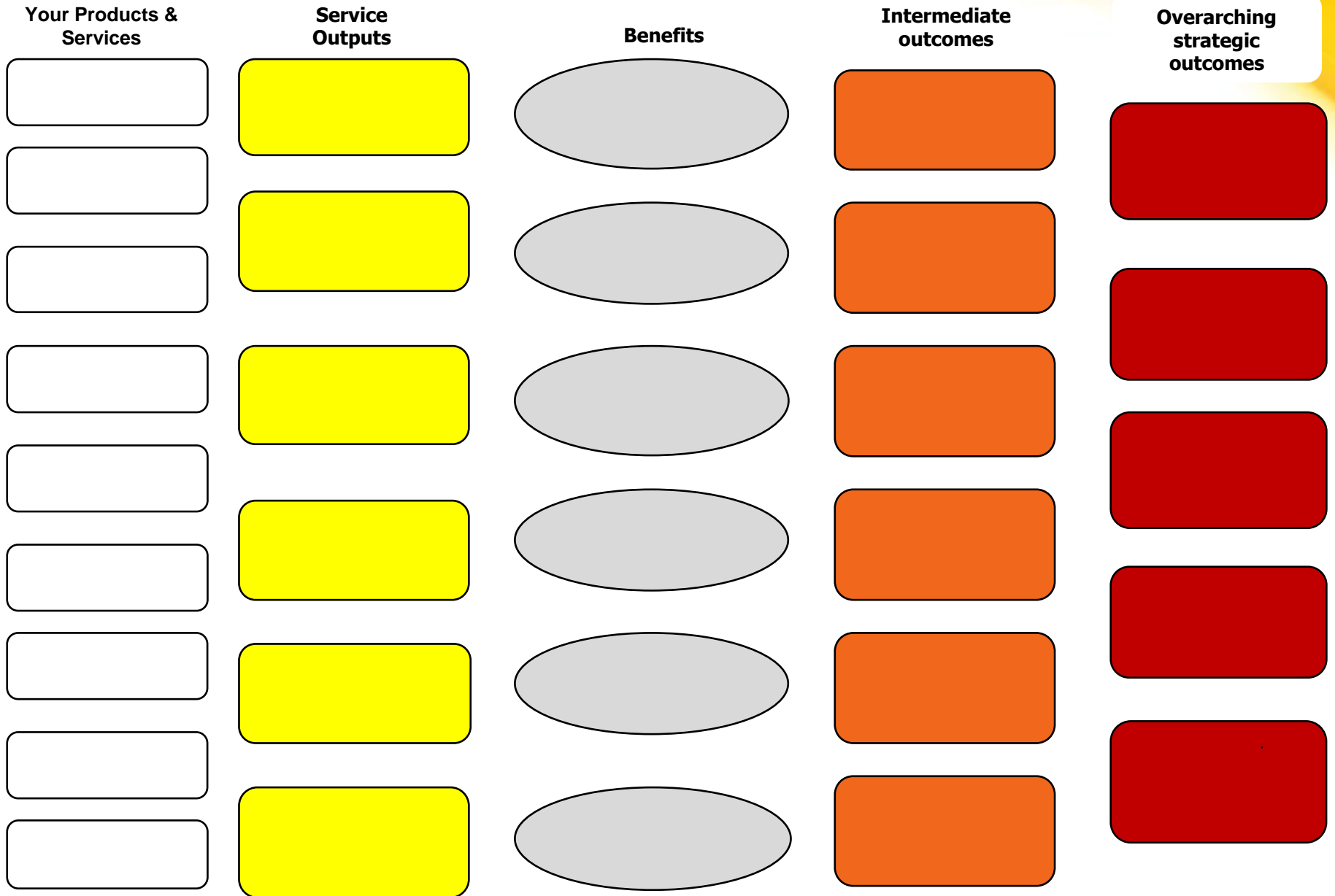
Building an Outcome



Outcome = Benefits and/or changes a person/population demonstrate/achieve during or after their engagement with an intervention

Outcomes might relate to: knowledge, skills, attitude, values, behaviour, condition or status

Logic Model Template – Demonstrating Outcomes



If I can add one last slide...

If you are wanting to engage with Health:

Disease Prevention, Disease Management & Reduction of Ongoing Risk

Especially related to CVD, CHD and Mental Health - which are the major long term conditions affecting all population groups

Sub sets of these will include Obesity, Diabetes, Falls and Pulmonary issues

Top Tip: Identify the local CCG Long Term Conditions Commissioning Lead

Thanks - I hope the content was useful

