Exercise by Referral in Derbyshire

Active Derbyshire commissioned Move Consulting to review the Exercise by Referral service in Derbyshire to understand potential for reducing complexity, identifying opportunities to improve and make services more accessible.

Executive Summary

February 2025



1.0 Introduction

Active Derbyshire commissioned Move Consulting to review the Exercise by Referral (EbR) scheme across Derbyshire. The goal was to assess the program's effectiveness, identify opportunities for improvement and explore ways to make it more accessible.

- The review took place between July 2024 and January 2025.
- It examined the broader physical activity ecosystem in Derbyshire and considered programs such as Live Life Better Derbyshire (LLBD) and Falls Prevention initiatives.

2.0 National Context and Best Practices

The report outlines national developments and evidence to consider for future delivery of exercise referral programs:

- Health Impact of Physical Activity: Exercise is effective in preventing and managing chronic conditions like cardiovascular disease, diabetes and mental health disorders.
- **Policy Changes:** The NHS Long-Term Plan emphasises prevention over treatment, highlighting the role of physical activity in health promotion.
- Workforce Challenges: A need for workforce development and policy updates to expand service accessibility.
- Open Data and Integration: National initiatives encourage better data sharing to improve service visibility and efficiency.
- **Behaviour Change Models:** Exercise referral programs should embed behaviour change techniques, such as goal setting and social support, to improve long-term adherence.

3.0 Exercise by Referral in Derbyshire: Key Findings

The review examined the scheme and identified key themes for improvement.

3.1 Thematic Areas Identified:

- **Integration:** Stakeholders support a more unified, seamless referral system connecting health and physical activity services.
- Proportionate Universalism: Programs should cater to different community needs while maintaining service consistency.
- Simplicity: The referral process should be easy to navigate for users and referrers.
- Evaluation & Learning: Enhanced data collection and monitoring are required to measure impact effectively.
- Autonomy: Service users need a variety of options and more control over their activity choices.

3.2 Strategic Considerations:

- Lack of a Unified Vision: The program lacks a singular, clearly defined vision across all stakeholders.
- Need for Clear Principles of Working: Collaboration, equity, person-centeredness, and accessibility should guide service delivery.
- Inconsistency in Service Scope: Different areas offer varying levels of support and activities.
- Data Collection Challenges: Incomplete data hinders evaluation and decisionmaking.
- Varying Staffing Models: Some districts and boroughs have dedicated EbR staff, while others incorporate it into broader roles.
- Exit Strategies Differ: Some districts offer discounted memberships after the 12-week program, while others rely on self-motivation.

4.0 Recommendations

The report suggests two approaches: **Adapting** the existing model and **Adopting** a new, integrated system. Headline recommendations include:

4.1 Adapt: Strengthening the Existing Model

- Develop a unified vision and mission for Exercise by Referral in Derbyshire.
- Improve service delivery consistency across districts.
- Enhance data collection processes and feedback mechanisms.
- Expand activity options beyond gym-based sessions to include community-based activities.
- Provide additional training for staff to improve behaviour change support.

4.2 Adopt: Creating a Unified Physical Activity Pathway

- Integrate EbR with the LLBD program to create a single referral system.
- Expand workforce capacity and introduce a multi-disciplinary team approach.
- Standardise data collection and monitoring to enhance evaluation.
- Improve communications and marketing to raise awareness and increase participation.
- Implement cost-reduction strategies to ensure equitable access.

4.3 Suggested Steps Towards Implementation

- **Pilot the Integrated Model** in select districts/boroughs before full-scale implementation.
- Enhance Training & Capacity Planning to prepare staff for an expanded role.
- Improve Technology & Data Integration to streamline referrals and reporting.

5.0 Conclusion

The report highlights the need for a more cohesive and accessible referral system in Derbyshire. By either strengthening the current system or integrating services into a unified model, Derbyshire can enhance the effectiveness of exercise referral programs and support residents in leading healthier lives.