Health Improvement Service - Active Lives Healthy Weight Summary (Appendices B and C refer)

Context

The existing contract value for delivery of Active Lives, Healthy Weight services is £2m per annum and started on 1 April 2016, on the basis of an initial three month period, with options to extend by up to a further two years. The first year extension has been exercised to 31 March 2020.

The current contract is delivered by five providers across the 12 Lancashire districts.

The split of funding was originally weighted to take account of levels of obesity in children and adults, physical activity levels, population size and levels of deprivation.

Contract specification was identical for every provider, to:

- Improve physical activity levels towards the National Institute for Health and Care Excellence guidance target of 30 minutes of exercise on five days every week, targeting those currently doing less than 3 days per week.
- Address potential obesity through a programme of Healthy Weight. This is aimed at anyone with body mass index in the range 25 34.9 (overweight).

Delivery is currently free of charge for participants over a 12 week programme.

Consultation

The consultation asked for views on the proposal to cease the Active Lives, Health Weight contract on 31 March 2020, replacing it with a new service designed to maximise the use of public open spaces, using digital technology where possible. Budget reduction from £2m to £0.5m.

The consultation ran for eight weeks between 18 February 2019 and 15 April 2019. In total, 1,625 completed questionnaires were returned for the service users/general public consultation (1,496 online questionnaires and 129 paper questionnaires). For the organisation consultation 135 completed questionnaires were returned.

Consultation workshops with service users, service providers and partner organisations were held between 11 March 2019 and 20 March 2019. There were four workshops:

- 1. Health and Wellbeing Partnerships
- 2. District Council Health Leads
- 3. Clinical Commissioning Groups
- 4. Active Lives, Healthy Weight Service Providers

The consultation questionnaire was also available online via the county council's website with hard copies also available.



Findings - Public/Service Users

- About three-quarters of respondents (74%) said that they have used one of the Active Lives, Healthy Weight services.
- Respondents who have used an Active Lives, Healthy Weight service said they used it to achieve a healthier life style and get fit (41%), to lose weight (32%) and to help with an ongoing medical condition (18%).
- Of those respondents who have used an Active Lives, Health Weight service, over nine-tenths (92%) said that they found the service very helpful.
- A third of respondents (33%) said that they currently use digital technology to improve their activity levels, a quarter of respondents (25%) said that they would consider using digital technology to improve their activity levels. However, about a third of respondents (36%) said that they would not consider using digital technology and about one in twenty respondents (6%) said that they don't know if they would use it.
- Respondents who said that they wouldn't consider, or don't know if they would consider, using digital technology to help improve their activity levels were then asked why they say this. The most common responses to this question were that they prefer human interaction for this type of help (44%) and they don't know how to use digital technology and they don't want to learn (25%).
- About three-tenths of respondents (28%) agree with our proposal for Active Lives, Healthy Weight services and about three-fifths of respondents (60%) disagree with it.
- The most common reasons for agreeing or disagreeing with the proposal were some people won't use, or be able to use, the proposed service (27%) and they like the mentorship and group atmosphere (23%).
- The most common responses to how this proposal will affect respondents were that they will exercise less or go back to old habits (27%) and it wouldn't affect them (12%).
- Respondents were then asked if there is anything else they think we need to consider or that we could do differently. The most common response to this question was don't change the service (23%).

Findings – Partner Organisations

- About a sixth of respondents (16%) said that they agree with our proposal for Active Lives, Healthy Weight services and about three-quarters of respondents (74%) disagree with it.
- The most common reasons for agreeing or disagreeing with the proposal were that they don't think that targeted users will attend the proposed service (35%) and the current service works well (27%) and changing the criteria will lower uptake of the service (26%).
- Respondents were then asked how our proposal would affect their services and the people they support. In response to this question respondents were most likely to highlight how the service helps people with their own health management (33%) and that it will have a negative impact the physical and mental health of service users (26%).
- Respondents were then asked if there is anything else they think we need to consider or that we could do differently. The most common responses were:

rather than a catch all, tailor individual needs (18%), this is a false economy (16%), reconsider proposal (15%), consolidate existing similar services into one (15%) and change will have a negative impact on vulnerable people (15%).

Findings – Consultation Workshops

- Existing Active Lives, Healthy Weight providers have developed expertise that will be lost and the services may become unviable.
- The longer term benefits of the programme (which are not always immediately felt) have not been fully recognised and there will be long term cost implications to the authority in terms of increased Social Care need in future.
- The proposal to utilise public open spaces may not be practical because such spaces are not always seen to be safe or accessible to all.

Workshop responses were more around the loss of expertise, and the perceived lack of recognition by Lancashire County Council of the longer term benefits of the service, and the cost implications down the line if it is stopped. There was also consensus that the use of public open spaces may not be practical because such spaces are not always seen to be safe or accessible to all.

Summary

There has been a high response to the consultation, with a majority disagreeing with the proposal. However, in order to contribute to Lancashire County Council's commitment to achieving a balanced budget, the proposal is recommended, bearing in mind the following mitigation:

- There is an opportunity to utilise the remaining budget (£500k) to support
 physical activity by promoting use of the environmental assets of the county,
 working with partner agencies and the voluntary, community and faith sector.
 Similarly it is planned to develop a more strategic approach to tackling obesity
 and promoting good physical and mental health across all ages by working with
 partner agencies.
- It is also proposed to promote the use of digital technology to support people to exercise and maintain healthy weight, through use of digital apps and social media platforms.
- There is also an opportunity to work with the NHS to deliver the ambitions identified in the NHS Long Term Plan, including a focus on locality based service delivery, by promoting physical activity and weight management as part of the wider agenda to prevent ill health.
- It is proposed to improve the skills of the wider workforce by developing the 'Make Every Contact Count' approach to multi agency workforce development, building skills in relation to signposting and provision of lifestyle advice.