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### Physical activity referrals: Areas of unmet need



## **Overview**

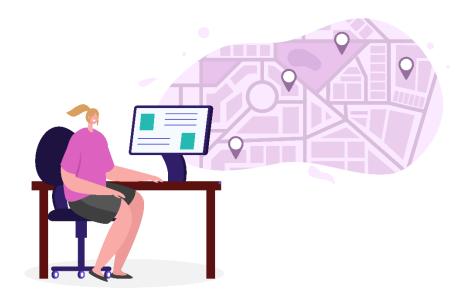
As part of London Sport's <u>Open data in physical activity referrals</u> project, three online workshops were held with 25 link workers from nine different referral services across London to better understand the challenges link workers currently face when referring service users into physical activity.

Each of the three workshops surfaced a number of key insights which evidenced particular issues that were being faced, with these issues being grouped into 11 areas of unmet need.

These 11 areas of unmet need raise potentially relevant issues for activity providers, service commissioners and planners, as well as those working in social prescribing or other referral schemes.

Note – for further information on the referral services involved, see the London Sport interim report.







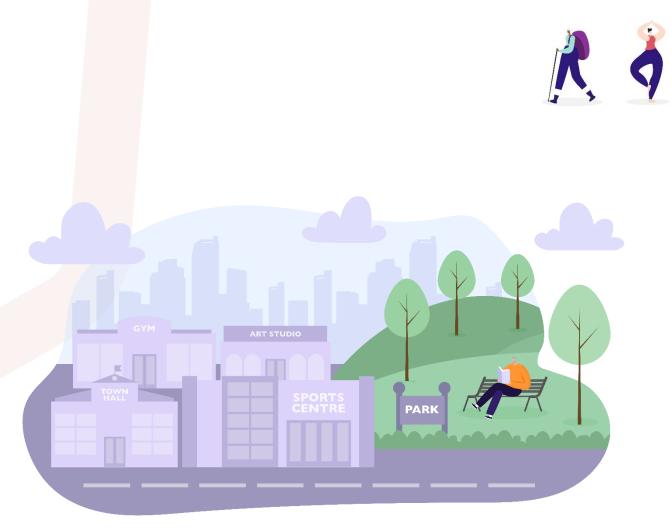
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# **Overview**

### 11 areas of unmet need

- 1. Latest local information
- 2. Matching options to needs
- 3. Virtual taster
- 4. Access and accessibility
- 5. Referral confirmation
- 6. Warm handover
- 7. Physical activity readiness assessments
- 8. Feedback and positive reinforcement
- 9. Social referrals
- 10. Digital exclusion
- 11. Pandemic disruption

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# **1. Latest local information**

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### 1. Latest local information

#### Descriptor

Link workers told us that they have to spend a significant amount of time searching for information about the activities that are happening locally.

They compile this into their own systems in various formats – some referral services may use a directory of activities, some may keep physical posters in a folder, and some may simply write down information in a notepad.

When it comes to referring a service user to a physical activity opportunity, they then have to check whether the activity is still happening or not.

#### **Example Insights**

"Our development worker keeps a database of local activity opportunities / service opportunities"

"Sometimes the group has changed time or day. When it comes to referring I'll double check"

Consider the methodology for finding and collating accurate, up to date information within referrals

# 2. Matching options to needs

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### 2. Matching options to needs

#### Descriptor

Link workers told us that there are a number of key elements that inform them as to whether a local activity class is suitable for a service user. These can include practical considerations such as:

- time of day
- if the venue is accessible
- how far away from their house the venue is

Or related to a users health condition or ability/confidence level:

- suitable for beginners
- suitable for older adults with limited mobility
- specialist class for a health condition

#### **Example Insights**

"Some of our users don't want to go out when it is dark, some are working so can't do during the day"

*"It has to be very convenient to the individual"* 

"How can I get there, what bus routes? What is the exact meeting point?"

*"Referrals to general exercise not always allowed* 

Consider the potential for better matching user needs with appropriate activity opportunities

# 3. Virtual taster



### 3. Virtual taster

#### Descriptor

Link Workers and services users told us that they want to know more about what the actual experience of attending the class would be prior to attending (e.g., who is in the group, what they do, level of activity).

Posters or documents about local activity opportunities (e.g., Join Yoga, Tues 11am at Community Centre) do not do a good job of conveying this

#### Example Insights

"We have folders in a shared drive with details of local groups"

"A Word document doesn't give you a sense of what the activity would really be like to attend"

"I prefer to refer to activities that I've actually been to myself"



Consider how the referral process could support service users to get a better sense of the experience of taking part in an activity

# 4. Access and accessibility



### 4. Access and Accessibility

#### Descriptor

Link Workers told us that they work with many service users who have specific needs that need to be met in order that they can engage and access physical activity opportunities.

These service users need good support and matching to services that are suitable for them, such as being able to access a venue and to actively participate in the classes.

Access ranges from help including navigating to the venue, through to specific accessibility requirements such as wheelchair access or changing rooms.

#### **Example Insights**

"Lots of barriers to overcome - access to toilets, changing rooms, if it is difficult to register for classes or venues are changed (that are not accessible) e.g., often need keys to access disabled toilets meaning exiting and reentering buildings."

"Some with disabilities may be put off going to a sports centre - it doesn't feel worth the amount of effort to make the first session. If first day hard/cancelled it may knock it on the head for them."

*"I help them find a route to an activity session (bus route, landmarks etc)"* 



Consider how venues/activity providers might provide service users with greater assurance of the support available relative to their specific needs/conditions

# **5. Referral confirmation**



### 5. Referral confirmation

#### Descriptor

Link workers told us that giving a service user an official referral letter, voucher or welcome pack is useful in securing their commitment to attend a class.

Service users can feel more confident that they have an "invite" to attend rather than the onus being on them to turn up to an existing group.

#### **Example Insights** *"Welcome pack from the instructor"*

*"I'll print off a referral letter for the user to take with them"* 

"Vouchers for a free tea and coffee at the session."

# 6. Warm handover



### 6. Warm handover

#### Descriptor

Link workers told us that ideally they would like to accompany service users along to their first class, introduce them to the instructor and get them settled in the group, but this isn't always possible.

Service users can be nervous about attending and having contact with the instructor beforehand can be really helpful.

Instructors would also benefit from knowing more about the person joining the class (their health, fitness, any concerns) as there isn't a lot of time right before a class starts.

#### **Example Insights**

*"I introduce the service user to the receptionist at the community centre"* 

"Usually they get to meet Colin (sports therapist) in person for a chat before the class. But that hasn't been possible due to COVID"

*"I'll show the person around the sports centre and introduce them to the instructor"* 



Consider the potential for a more supportive and joined up process for the service user from the referral into an activity

# 7. Physical activity readiness assessment



### 7. Physical activity readiness assessments

#### Descriptor

Link Workers told us that they are constantly assessing whether a service user is ready for the next step towards being active.

Are they ready to talk about physical activity? Ready to discuss joining a class? Ready to commit to attend?

This information is also needed by a class instructor to make sure they welcome and pitch the class correctly.

#### **Example Insights**

"An instructor will want to assess the individuals fitness level and know of any health issues in order to offer suitable exercise options"

*"I do a readiness assessment to guide which class is suitable to join – from both a health and motivational readiness point of view"* 

*"When looking for a class I assess the users health requirements to find a suitable level session"* 

*"I check with them if its still the right option – and am open to changing the plan"* 



Consider how a physical activity readiness assessment might be better integrated into the overall referral process

# 8. Feedback and positive reinforcement



### 8. Feedback and positive reinforcement

#### Descriptor

Link workers told us it would be beneficial to be able to track and receive feedback on a service user's progress and health changes:

Information such as attendance at an activity session, an increase in activity, response to wellbeing questions (such as ONS4) or change in health marker (cholesterol etc).

This could then potentially be passed back to the initial referrer or coded into GP record.

Where they can link workers try to use this kind of feedback as positive reinforcement to empower service users to see the benefit being active is having.

#### Example Insights

*"Pivotal point is that they actually see and feel the benefit of it"* 

"Helping people recognise that they can make a difference in their own lives, they have agency in managing their own health and wellbeing."

*"Whole process of getting a regular activity can take 6 months to a year."* 

"Not necessarily feedback coming back from the activity provider (not necessarily enough time to check in with clients)"



Consider how the tracking and feedback of a service users journey and experience might be more effectively integrated into a referral process

# 9. Social referrals



### 9. Social referrals

#### Descriptor

Link workers told us that a major reported benefit of being referred into, and sticking with, physical activity is the social experience of getting out of the house, joining classes and getting to know the instructor.

This suggests that activity opportunities which prioritise social engagement among participants within and after the class are likely to be favoured by service users.

#### **Example Insights**

"One of our most successful sessions was a female only session online, but we can't take away from the need for socialising."

"A friend from church mentions they have been to a class."

"Could physical activity be added to a befriending service?"



Consider how the social element of physical activity can be better showcased within the referral process

# **10. Digital exclusion**



### **10. Digital exclusion**

#### Descriptor

Link workers told us that many service users, especially older and more disadvantaged groups, do not have the capability for, or access to, digital communications channels, manifesting itself as a marked preference for paper and a suspicion of digital.

#### **Example Insights**

"Many service users are reluctant to use digital. A lot of the people don't have time/have access to IT."

"Many want physical info - most resources online are not easily printable/in user friendly format."

"Because of COVID people don't feel comfortable having someone visit them in person. But it's really difficult to train people up on how to use devices over the phone."

Consider how service users, without access to or not confident with digital channels, can be effectively supported through the referral process

# **11. Pandemic disruption**



### **11. Pandemic disruption**

#### Descriptor

Link workers told us that before COVID-19 link workers might accompany people to sessions, meet them for 1:1 chat, sometimes visit at home. However, since COVID-19, this has had to switch to phone and online.

Whilst this works in some cases, there are many examples where it feels the amount or quality of individual support has been reduced.

#### **Example Insights**

*"How do you help people meet Colin or Alison (sports therapists) before the session if you can't do it in person"* 

"Skype is better than zoom as people can join like a phone call if they can't use a device"

"Longer term effects of COVID. How people access their physical activities, opportunities...how this process will change how things are done."



Consider how methodology and learning from the pandemic can be maintained/integrated, where appropriate, into the future referral process

## Contact

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