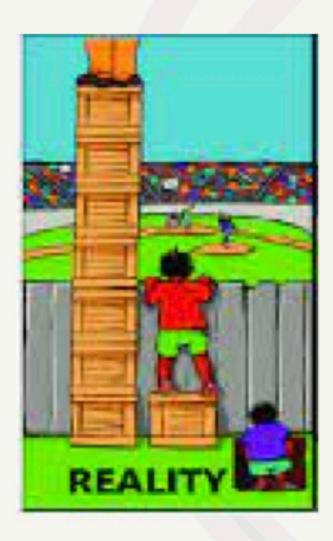
Glasgow's 20 Year Journey from Live Active to Community Referral

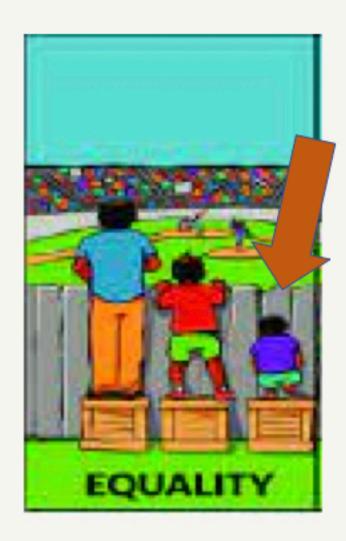


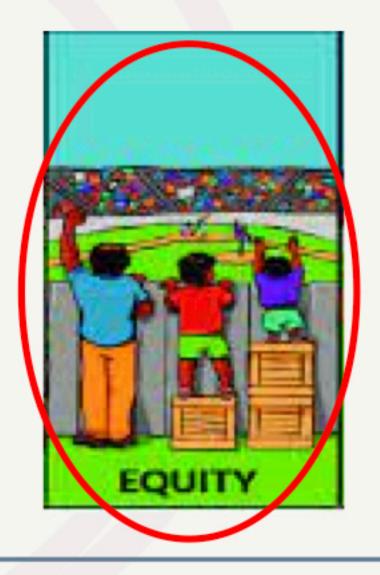
Our strategic priorities

	We strive to:	
1	Advance culture & sport in the city	Core operations
2	Improve physical & mental wellbeing of local communities	Wellbeing
3	Support the vibrant city economy	Destination, Tourism, Events, Conferences
4	Re-invest income to achieve our vision	Commercial operations

Our approach to Improving Wellbeing







Glasgow Context

Average life expectancy 83 years

Least Deprived



Average life expectancy 65.5 years

Most Deprived

What is considered as wellbeing?

It is **NOT** everything we deliver at Glasgow Life

A wellbeing activity/programme/service is one which is **explicitly**:

planned and delivered in a way that seeks to reduce health inequality

AND

- Is able to demonstrate it achieves, as a <u>primary</u> outcome, at least one of the following Glasgow Life impacts:
- Reduce loneliness and isolation
- Improve physical health and/or mental health
- Increase literacy and language skills
- Empower communities



Live Active – Exercise Referral Scheme



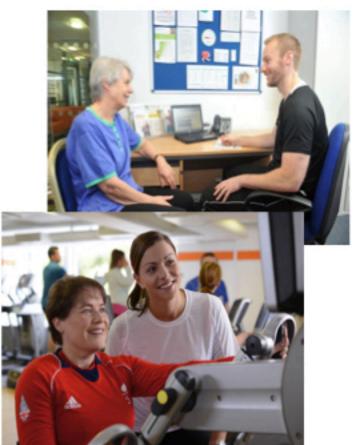
Overview

- Established in 1997 & funded 50% by NHS (173k per year)
- Access by referral from health professional
- Exercise + behaviour change support
- Person centred
- Targets those inactive + living with or at risk of a long term condition
- Support up to 12 months with a 12 week active phase
- Circa 3500 referrals accepted per year
- 8 Live Active Advisors across 11 leisure centres
- Level 3 Exercise Referral qualified & Level 4 Cardiac Specialist



Programme Components

- 1:1 behavioural change support
- Face to face, video, phone, texts & emails
- Personalised goal setting
- Personalised physical activity plan
- Supervised exercise sessions (health walk, LTC classes, gym session)
- Signpost and support into wider activities
 including community classes and home based exercise



Who can refer?

Referral can be made by anyone with access to patients medical notes. No self referral is accepted.

- NHS health professionals e.g. GP's, practice nurses, physios, pharmacists
- NHS services e.g. cardiac rehab, pulmonary rehab, falls prevention, mental health teams
- Community link workers





Benefits to participants

Independent evaluation found:

Independently assessed outcomes

- Significant weight loss within 1st 6 months
- Significant reduction in BMI

Patient Perception outcomes

- Significant increase in amount of Physical Activity taken
- Significant reduction in Depression & Anxiety scale scores
- Significant improvement on health state scale at 6 months

Tom's Journey

- 24 stone (152kg)
- Diagnosed with fatty liver
- At risk of diabetes, hepatitis & cirrhosis
- Supported by Live Active:
- Went on to lose 10 stone (64kg)
- Now a qualified personal trainer
- No longer at increased risk of certain LTC's

Glasgow personal trainer credits GP's gym scheme referral for life-saving weight

loss

Tom O'Brien weighed in at 24 stone when his GP referred him for an NHS gym membership scheme, which led to him losing 10 stone - an ultimately life-saving change as he was diagnosed with a fatty liver at the age of 24.



"I decided to go back to college at 25 to study fitness and now I'm a PT for Glasgow Club. It completely saved my life. If I didn't lose the weight, I'd definitely have diabetes, maybe even heart problems."



Live Well Community Referral*

(*social prescribing scheme)



Feasibility

A new GL structure with a central, dedicated cross-service team

Over 20 years experience delivering Live Active

Usability

Live Well Community Referrals

Ħ

6000 consultations per week for mental health issues in Glasgow

Uniquely placed to act as

both a social prescriber AND activity provider

Extensive expertise in policy & research, data analysis, marketing & Fundraising Support

Evidence

Reductions of 28% in GP services, 24% in attendance at A&E and significantly significant drops in referral to hospital

Framework

Empower Communities

Training

Glasgow Life Activity

Organisational Change Components Relationship Management

Monitor & Evaluate

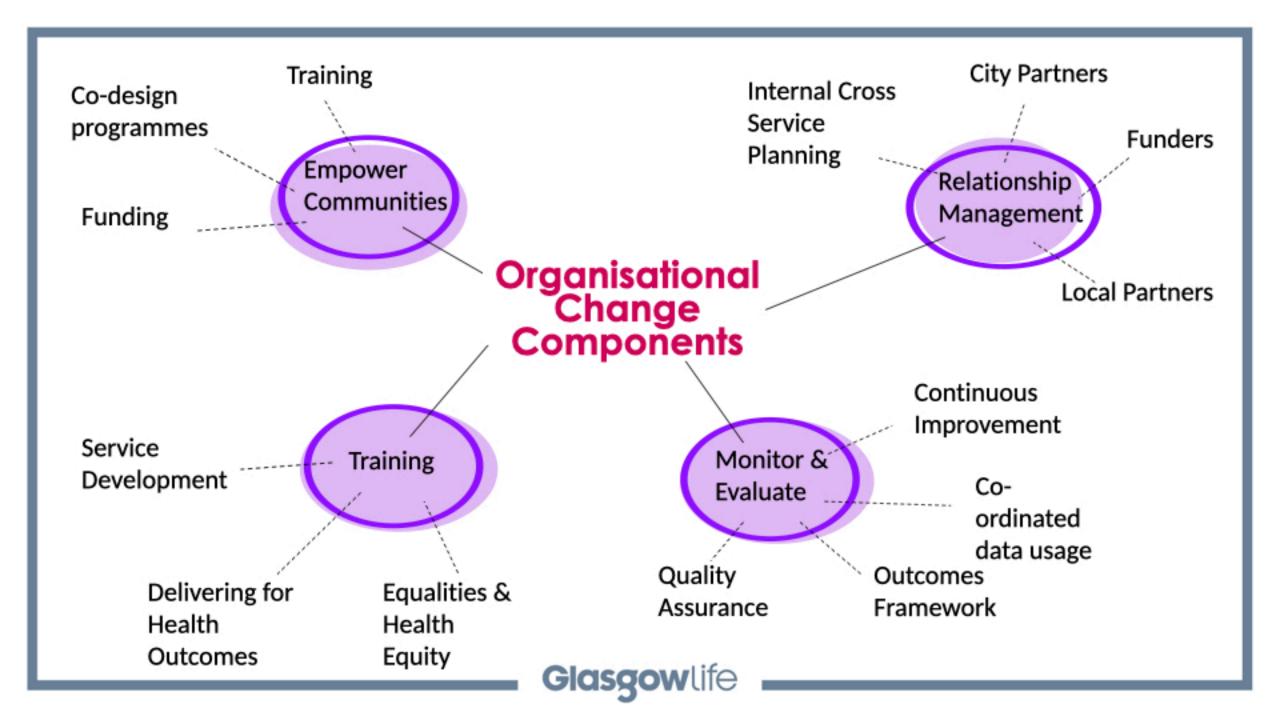
Live Well Community Referral Model

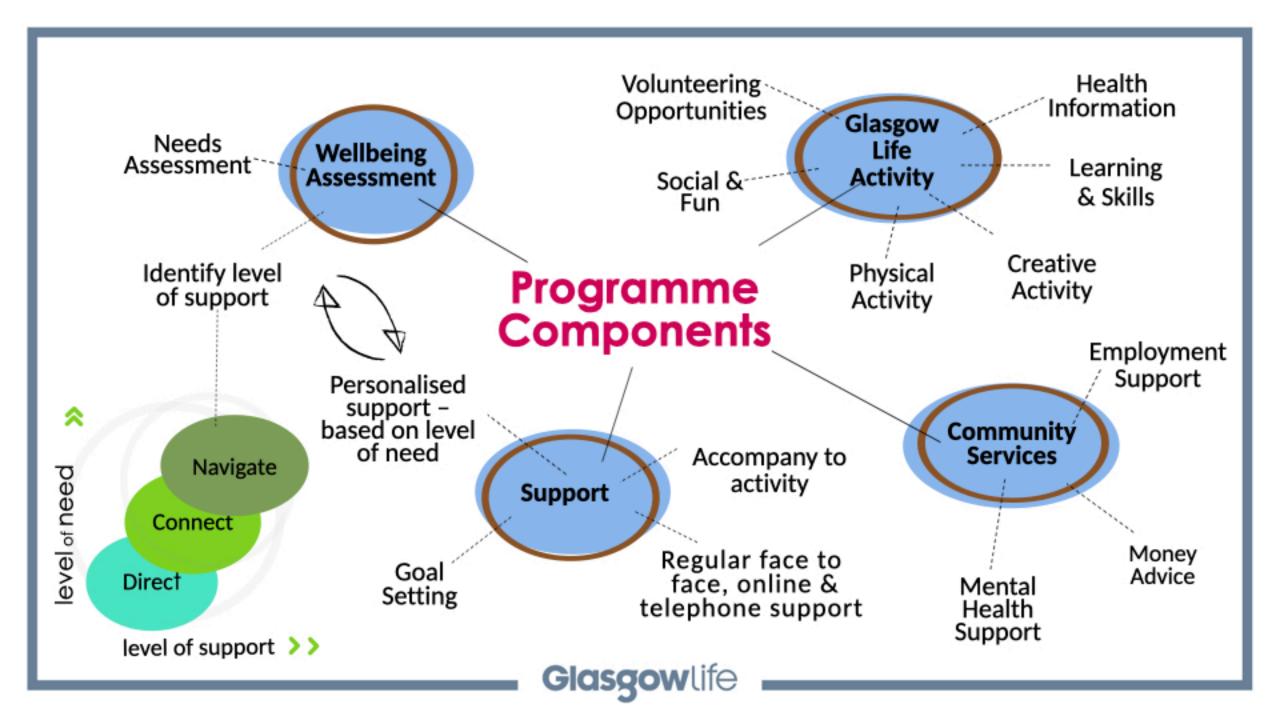
> Wellbeing Assessment

Community Services

Support

Programme Components





Tom's Journey

 Our wellbeing co-Ordinator receives referral and contacts
 Tom for a wellbeing conversation

 wellbeing goals are set and a Live Well Plan is cocreated with Tam. 6. Live Well Team can report to the Referrer that Tam feels less isolated and is more physically active. His scores indicate that his anxiety levels are lower thus reducing his risk of

developing other long-term conditions.



Referrer (social worker) sends a referral to Live Well team for Tom who has been attending his GP regularly with low mood

3. Tom is not confident and will need significant support, so a Live Well Navigator meets with Tom to discuss his needs and start to build a relationship

5. Live Well Navigator meets with Tam for regular support and follow-up over 12 weeks to monitor progress and provide extra support if needed.



Progress to date

- Launched pilot August 2022 (2 Co-ordinators & 1 assistant)
- 3 communities in our most deprived areas of Glasgow
- 220 referrals to date
- Overwhelmingly positive feedback from participants and referrers
- Evaluation partner appointed March Oct 23
- Challenge finding routine measurement tool
- Planning for wider expansion & full city roll out Sept 24

Early Observations & Findings

Primary Reason for Referral

- Connect with community (30%)
- Increase physical activity (20%)
- Low Mood/Mental Health (18%)
- Social Isolation/Loneliness (17%)
- Learning/Literacy/New Skills (15%)

*Low (Direct) (20%)

*Medium (connect) (25%) High (Navigate) (55%)

Referral From

- Self Referral (40%)
- Live Active (20%)
- Link Worker (20%)
- Hospital Discharge (10%)
- Community Organisations (10%)

Interim Evaluation Findings

Interim independent evaluation shows:

- 68% were now taking part in activities.
- 91% felt listened to.
- 92% would not have taken part in the activities without the support.
- 100% improved in confidence, positivity and general happiness.
- 100% felt more physically active
- 100% felt more connected to people.
- 92% felt less lonely.

Paul's Journey

- Paul referred by Glasgow City
 Supported paul to Council
- Met with Paul to discuss the service
- Follow up chats to discuss best hopes

- Fix his bike
- Gain a volunteering role
- Join a community garden
- Join the gym
- Connect with disability organisation
- Speak with his doctor
- Gain a college placement

Programme Comparisons

Live Active

- Clinical Model Referral by health professional only
- Citywide operation 3.5k 4k referrals
- Strict Criteria Inactive + long term condition
- Operates across Sport & Physical Activity service only
- More prescriptive exercise focussed
- Part funded by NHS health improvement team
- 6 month support & 12 month follow up
- Staff have delivery remit (cardiac)

Live Well

- Social Model Anyone can refer, including self referral
- Pilot operation projected 2.5k referrals at scale
- Loose Criteria Anyone who would benefit in connecting with community
- Operates across sport & physical activity AND culture & learning services
- More holistic & person centred
- Funded within existing resource (scale up funding required)
- 12 week intensive support
- No activity delivery remit

