



The NHS Transformation Unit

**Active Hospitals
Final Milestone Report
September 2022**

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The NHS Transformation Unit

Overview

The Active Hospital (AH) programme was launched as part of the national Moving Healthcare Professionals Programme (MHPP) in 2016.

MHPP is a national programme, led by the Office for Health Improvement and Disparities (OHID) and Sport England, to support healthcare professionals to increase their knowledge and skills, and incorporate physical activity within routine care to support quality improvement and better patient outcomes.

The AH programme aimed to embed the promotion of physical activity within the culture and practice of hospital trusts to create models of care that aimed to increase patient physical activity to ultimately improve patient experience, care and outcomes.

The NHS Transformation Unit (NHS TU) has supported Phase Two of the Active Hospitals programme since 2019, exploring new models of delivery and working closely with four pilot sites and OHID over a two year period to develop the programme and implement an AH approach.

Detailed monthly progress reports have been submitted and quarterly milestone reports have been developed through the duration of the programme. This final report therefore presents the achievements that the NHS TU and pilot sites have accomplished across the programme, alongside the lessons learned.

The NHS Transformation Unit has...



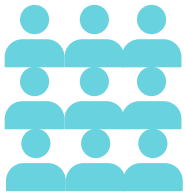
Supported all 4 pilot sites to go live with Active Hospitals approaches in a total of 16 clinical/staff wellbeing pathways



Delivered robust governance and assurance through over 40 programme meetings with OHID and the pilot sites



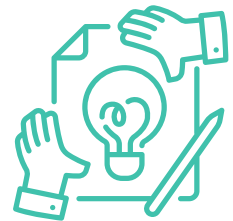
Facilitated 4 Masterclasses from Oxford University Hospital FT to share learning and resources from the first pilot in Phase One of AH



Delivered a programme of extensive communication and engagement activity to promote and recruit Trusts to the Community of Practice



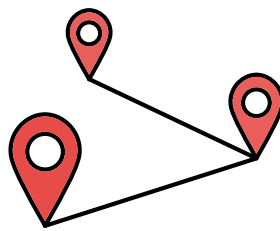
Recruited 15 Trusts initially to the Community of Practice; the members now total 24 through further engagement and promotion. 5 quarterly forums organised and facilitated.



Established, developed and promoted the FutureNHS platform to include resources, good practice and opportunity for discussion



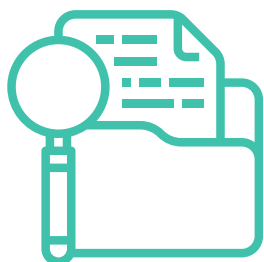
Developed relationships with multiple organisations and other partners across the system to promote sustainability



Produced an interactive map to understand where the Community of Practice sites, Active Partnerships and ICSs are - further development to be undertaken by OHID



Produced and disseminated 7 Newsletters to showcase the work of the pilot sites and promote the Active Hospitals programme



Developed an options appraisal and implementation plan for the further development of the Toolkit



Collated extensive documents from the pilot sites to create a Library of Useful Resources on FutureNHS



Engaged 16 staff from Pilot sites to become Trust PACC trainers as part of a pilot initiative

The Pilot Sites

Overview of the sites and their pathways

Sheffield Children's NHS FT

Sheffield Children's is established as an innovative leader in child health, with a strong ethos of physical activity promotion in many departments already and links to national resources for physical activity. The Active Hospital programme for Sheffield Children's aimed to enable all clinicians to have conversations with families about movement and activity and feel able to make a joint-plan to increase activity levels and signpost families through social prescribing to the existing resource. Sheffield Children's have three pathways live:

- Preoperative Care
- Asthma
- Oncology

Nottingham University Hospitals NHS FT

The overarching objective of Nottingham with the Active Hospitals programme was to improve patient care and keep staff healthy both physically and mentally by creating an environment where the default option is the healthy choice and physical activity is promoted and encouraged. Nottingham worked to achieve this by working directly with clinical pathways to affect change throughout the patient journey and influencing the physical activity culture at the Trust through staff health & wellbeing, training and leadership. Nottingham's 5 pathways of which 4 are live are:

- Paediatric Endocrinology
- Prehab cancer
- Hepatobiliary inpatient
- MSK
- Hepatobiliary outpatient

The Pilot Sites

Overview of the sites and their pathways

Northumbria Healthcare NHS FT

The Active Hospitals pilot utilises the thousands of meaningful interactions the staff have already have every day with patients and builds upon their successful approach of Making Every Contact Count (MECC). Northumbria's activities are underpinned by a public-health model, and in many instances their Active Hospitals work looks to build upon existing initiatives within the Trust, linking them up where appropriate under the 'Active Hospitals' banner.

Northumbria have five pathways live:

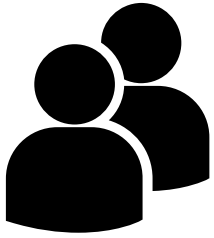
- Pre-assessment
- Staff Wellbeing
- Active Ward
- Maternity
- Cancer Personalised Care

North Tees and Hartlepool NHS FT

North Tees is an integrated hospital and community services organisation serving around 400,000 people in Hartlepool, Stockton and parts of County Durham. North Tees provide bowel and breast screening services as well as community dental services and other community based services to a wider population in Teeside and Durham. Through the programme North Tees focused on actively shifting the culture within the Trust to reframe the model from one of reactive disease management to proactive prevention. North Tees have four pathways live:

- Active Wards
- MSK
- Paediatrics
- Elderly Care

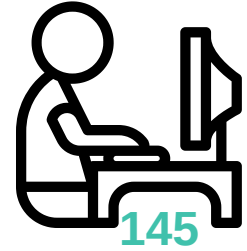
Sheffield Children's Hospital has...



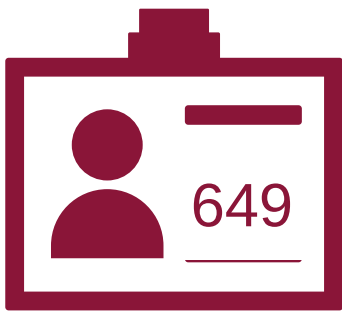
Recruited an Exercise & Sports Therapist in the Trust and a Support Worker for patients in the community



145 patients referred to the sports and exercise therapist



Received 145 referrals to the exercise & PA therapist which require further signposting



649 appointments attended with an exercise & PA therapist



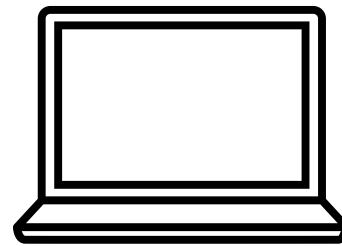
Supported 47 patients to complete the full exercise programme of 8 sessions



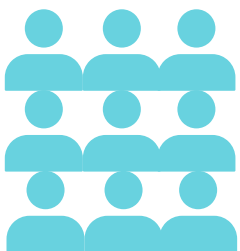
Completed 2 staff surveys to evaluate the programme



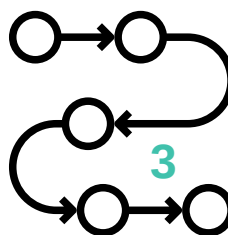
Captured Patient Case Stories on the Sheffield Children's website



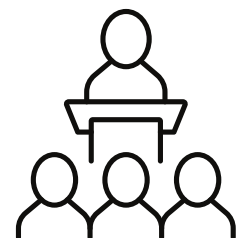
Ensured the Active Hospitals programme is live on the internal staff intranet



Enabled 67 staff to receive PACC training across the Trust and 1 staff member is now an internal PACC trainer



Facilitated referrals going live across 3 specialities



Attended local and national conferences and regular meetings with other children's hospitals to spread the Active Hospitals approach.

Nottingham University Hospital has...



157

Spoken to 157 Patients about physical activity



148

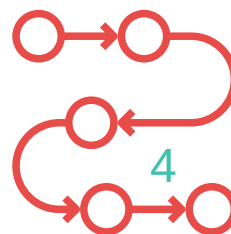
Seen 148 patients referred for physical activity who were assessed and recorded



Secured funding to launch a walking group for Liver outpatients

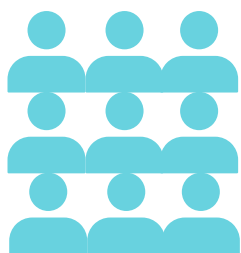


Recruited 1 MSK Link worker



4

Facilitated referrals pathways going live across 4 specialities



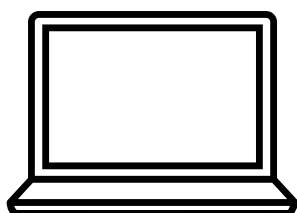
Enabled 79 Advanced Clinical Practitioners to be trained to deliver physical activity conversations



Ensured I-CAN boards are now used for all patients on the inpatient Hepatobiliary ward



Held regular meetings with Active Notts and ongoing engagement with social prescribing leads in Nottingham City.



Developed the staff intranet with information on Active Hospitals



Established a project with Nottingham University to develop a communication strategy and evaluation of impact of project on staff engagement

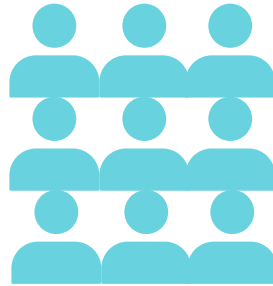


Developed activity walks such as Sunshine Walks and Art Trail walks for patients

Northumbria Healthcare NHS Foundation Trust has...



Added Active Hospitals training to the Trust nurses and AHP preceptorship monthly training for newly qualified staff



Enabled 307 staff members across clinical disciplines to receive PACC training



Embedded PACC training in the annual medical education for undergraduate doctors, F1 and F2 doctors and GP speciality training



Trained 15 midwives in Aqua Natal exercise who now deliver in the community



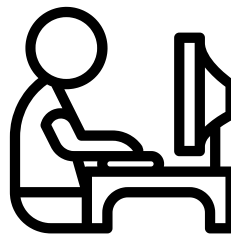
Linked Active Hospitals initiatives with Public Health led staff wellbeing initiatives and programmes across the Trust



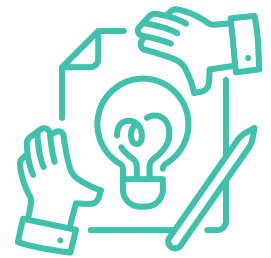
Secured 86 funded places for Active Conversations training



Piloted a Physical Activity Messaging Framework and commissioned it further to be implemented across the Trust



Ensured that Active Hospitals has its own page on the internet and intranet for resources to be used across the Trust



Developed Active Hospitals branding, with guidelines, that is being used across the Trust and wider across other Trusts



Showcased Active Ward success and patient stories on a news feature by Tyne Tees

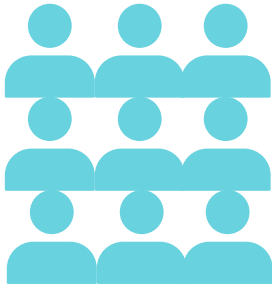


Now uses I-CAN boards for all patients on the Active Ward pathway



Plans to share information and resource pack for Active Wards across other Trust wards

North Tees and Hartlepool NHS Trust has...



Nearly 8000 physical activity questionnaires completed for patients on the MSK pathway



Noted that 4503 of those people wanted to be more active and have received support to improve PA levels, further advice, signposting or onwards referral



Seen 335 people referred to a local authority programme to support activity



Supported 76 people to attend the Movement is Medicine groups in the community across Stockton and Hartlepool



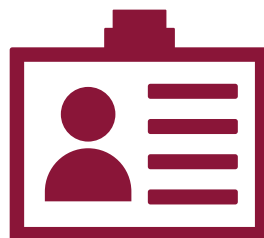
Support from Local Authority partners, who want to continue these groups and will support them in partnership with the Trust



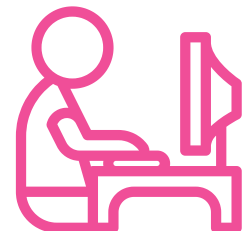
Established referral pathways from other teams to the groups



Shown that 100% of patients who were well enough to be up out of bed, via the latest up and dressed audit for the Active Wards



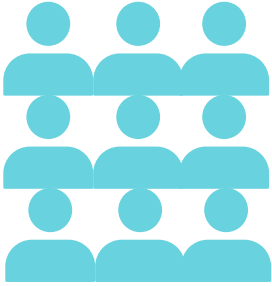
Are using I-CAN boards behind all beds on the two Active Wards



Will be embedding AH workstreams in the Trusts QIA roles to ensure sustainability.

The Community of Practice

The Community of Practice officially launched on the 8th of September 2021 and was established for the Active Hospital pilot sites and other Trusts to come together to share and learn about the work they are doing to promote physical activity at their sites.



24 Acute Trusts joined up as members of the Community of Practice



Held 5 forum meetings with specific themes and opportunity for networking and sharing information



Established regular meetings with regional OHID leads to develop local and regional networks



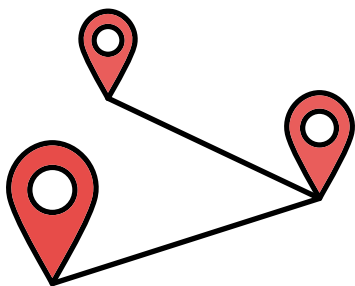
Developed relationships with Active Partnerships and other partners across the system to promote sustainability



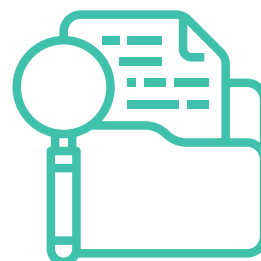
Developed the FutureNHS platform for members to share resources, good practice and opportunities to support their Active Hospital approaches



Distributed 7 newsletters to members, sharing key information and resources from the pilot sites and other key national workstreams



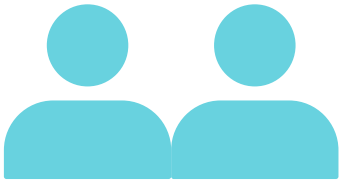
Created an Interactive map, showing where the CoP sites, Active Partnerships and ICSS are to help interaction between the sites, promote in areas where there are no members and encourage wider working



Put in place a Library of Useful Resources with the pilot sites to support Community of Practice members in their Active Hospital programmes



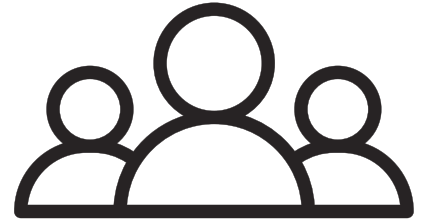
The NHS TU has supported the Ipsos Mori Evaluation by...



Organising for 2 members from the NHS Transformation Unit to be interviewed



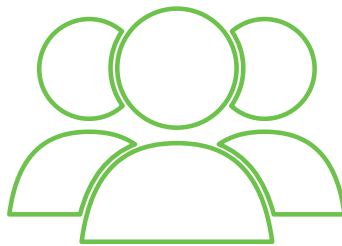
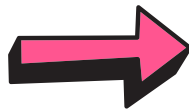
Facilitating 4 Trusts from the Community of Practice to be interviewed



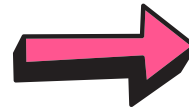
Setting up interviews with pilot site members who had participated in monthly project meetings and regular meetings with the NHS TU



Ensuring all 4 pilot Trusts took part in the evaluation which took part in two stages



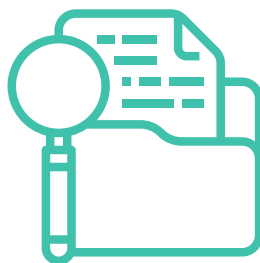
Facilitating 23 HCPs across the 4 pilot sites to be interviewed for stage one of the evaluation



& 33 HCPs to be interviewed in stage two across the 4 pilot sites



Reviewed data collected by each pilot site, including number of HCPs trained, PA discussed with patients, PA assessed for patients and patients signposted or referred to other services



Reviewed documents prepared by Ipsos Mori as a critical friend ahead of them being shared/used.



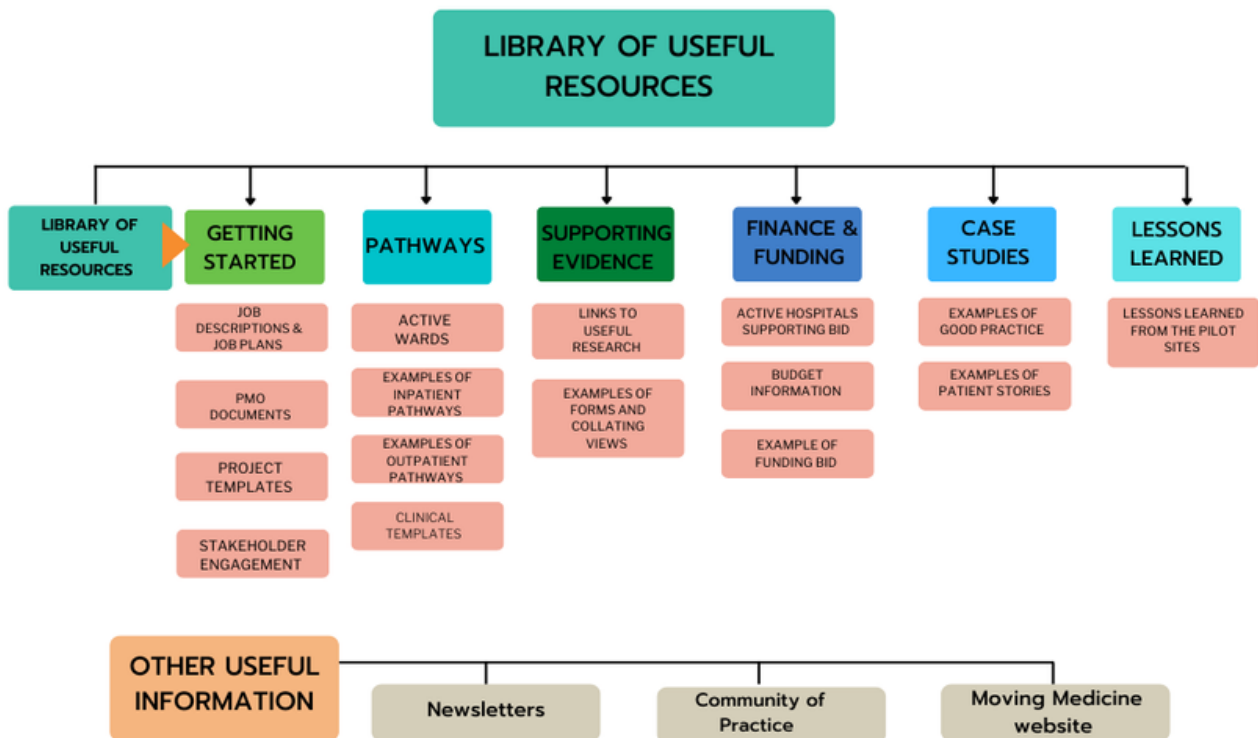
Added documents from Ipsos Mori to the FutureNHS platform

FutureNHS Platform

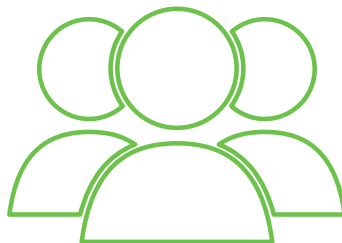
An Active Hospitals Toolkit was developed by Oxford University Hospitals FT (OUHFT) in Phase 1 of the MHPP. It contains a range of materials which can be used to support hospitals embed physical activity into their practices. During Phase Two the FutureNHS platform was developed as a tool for learning, sharing, networking and development of the Active Hospitals approach. It has established a Community of Practice which fosters networking and shared learning through regular events, a Discussion Forum and a Library of Useful Resources which complements the material found on the Active Hospital Toolkit. This platform is a member only site, with members from the pilot Trusts and across the Community of Practice. The platform will continue to be developed by OHID beyond the end of this programme.

ACTIVE HOSPITALS COLLABORATIVE FORUM

Site Map



All 4 pilot Trusts have produced documents and templates that can be used by the Community of Practice sites



Templates and documents have been collated and developed by the NHS TU



The platform has been developed following the decision to host the Library of Resources on the platform. This will continue to be developed by OHID beyond the end of the NHS TU's involvement

Active Hospitals Newsletter

The Active Hospitals Newsletter was developed by the NHS TU as a means for sharing the work the pilot sites were doing with partners from across the health economy, promoting the Community of Practice and building relationships with other organisations who could support this work. Though not a contractual deliverable, it generated a real interest in this work and was an effective way of communication. It was initially cascaded on a bi-monthly basis, however latterly it naturally became a means of communicating the sessions from the Community of Practice meetings and therefore was cascaded quarterly.



Vol 1 - Introduction to the programme and teams



Vol 2 - Partnership working



Vol 3. Launch of the Community of Practice



Vol 4 - Good practice examples



Vol 5 - Updates and good practice examples

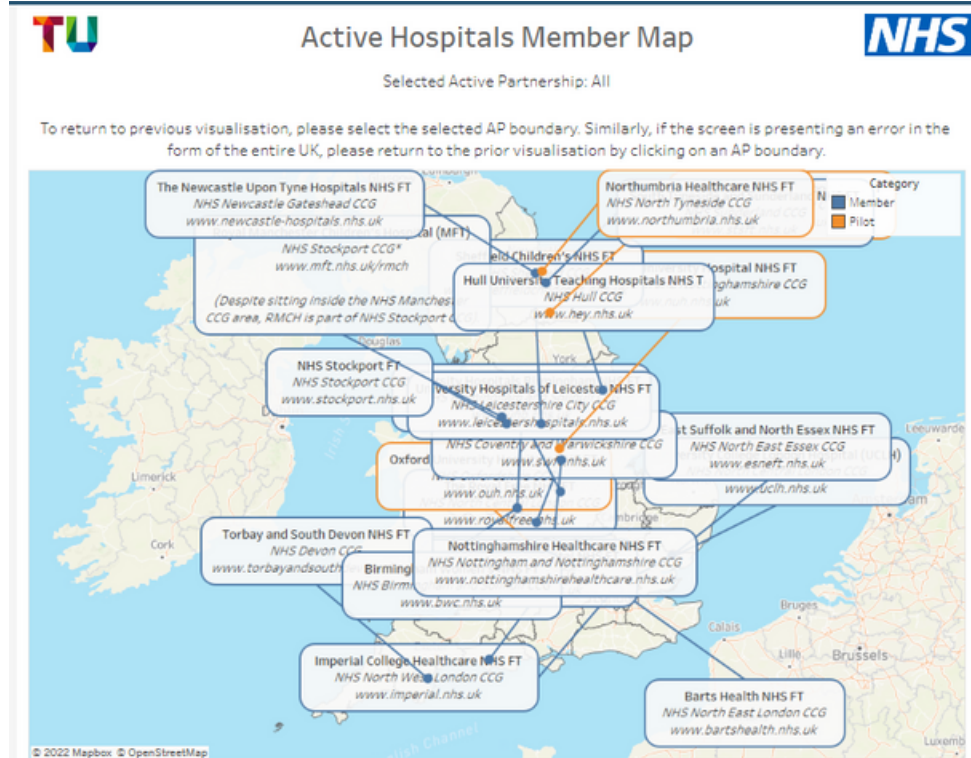
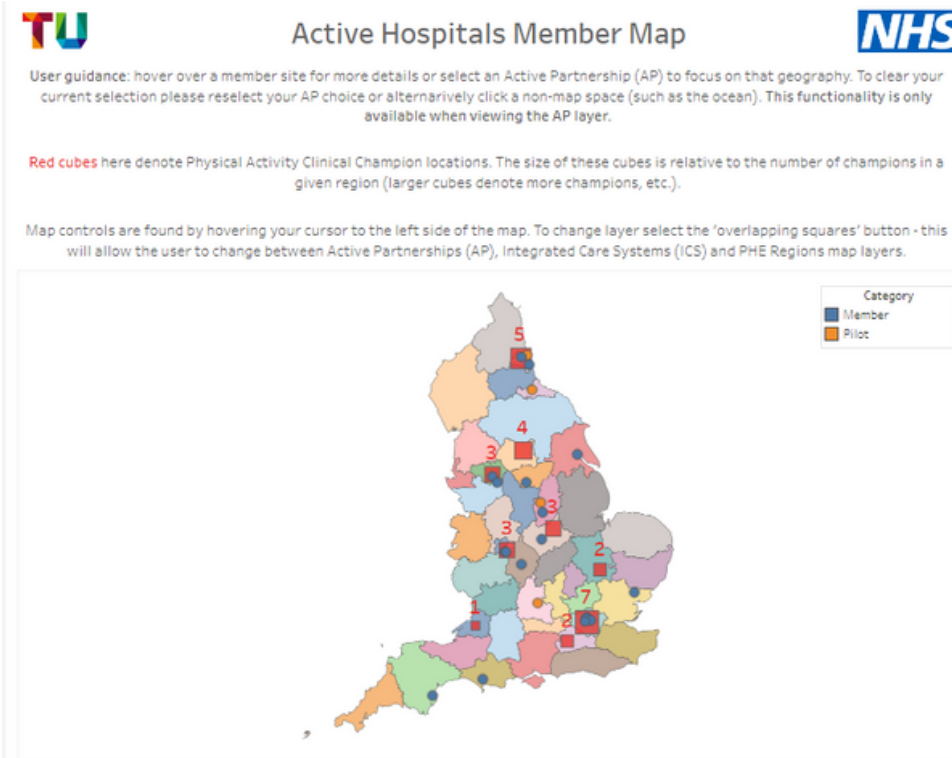


Vol 6 - Lessons Learned

Vol 7 - Cascaded after the final CoP facilitated by the TU and post this report being submitted

Active Hospitals Interactive Map

The Active Hospitals Interactive Map was developed by the NHS TU as a means of visually highlighting the Community of Practice Trust engagement across the UK, whilst highlighting opportunities and gaps for OHID to target potential future Active Hospitals. It also shows where the Active Partnerships and ICSs sit in relation to the CoP members. Though not a contractual deliverable, the map was commissioned separately with various iterations and a succinct handover prepared for hosting the map in the future. The map has been shared at various forums and has been very well-received by key stakeholders.



Lessons Learned: Mobilisation

What went well?

- Phase One was based on a Sports and Exercise Medicine Model but Phase Two proposed different models that could be tested and developed providing opportunities for Trusts to develop individual approaches
- The NHS TU developed a mobilisation check-list which allowed the pilot sites to start the programme consistently, correctly and efficiently. It laid out the fundamentals of what an Active Hospitals programme should include, so the pilot sites had the best chances of starting well
- The NHS TU developed strong working relationships with the pilot sites
- The NHS TU as the leadership provider acted as an independent and supportive facilitator
- Phase Two introduced a Paediatric Trust to the programme providing opportunities for diversity in the AH approach.
- Senior sponsorship was established across the pilot sites which enabled buy in and strengthened the programme
- One of the pilot sites undertook the delivery of the programme on a lesser financial envelope than the other sites with similar levels of success. As the focus of each site was on sustainability, it demonstrated that success can still be achieved with the right planning and support.

What could have been improved?

- The initial proposal was to have a geographical spread of sites, however during the interview the pilot sites chosen were not as geographically spread as originally envisaged
- Closer relationships with the Phase One pilot would have been beneficial, especially for the pilot sites
- A definition as to what constitutes an 'Active Hospital' was developed towards the end of the programme as it was required for the measurement of success for some of the key deliverables. However earlier development of this would have been useful for the Community of Practice members.

Lessons Learned: Programme Oversight

What went well?

- Monthly meetings were arranged with the pilot sites to monitor their progress against the deliverables, highlight risks and issues, identify concerns and provide help, support and guidance when required. Monthly reports were produced by the NHS TU and submitted to OHID.
- Regular meetings with the OHID Project Manager and formerly alongside the Programme Manager were arranged on a monthly basis. These meetings allowed the opportunity to assess progress against the deliverables for each site, monitor risks and barriers, identify the opportunity for developing workstreams and networks and discuss any other issues as they arose.
- Good working relationships between OHID and the NHS TU allowed for regular communication outside of the formal meetings with an emphasis on quality and assurance.
- Monthly meetings with the evaluation partner Ipsos Mori were arranged to ensure full alignment of activity. They were also invited to all site project meetings, masterclasses and CoP events, so they had full visibility of the programme.
- Bi-monthly meetings were arranged by the NHS TU with the regional OHID Leads to facilitate links between them and the sites.
- Quarterly milestone reports were produced and other documents were developed when required such as a paper on sustainability.

What could have been improved?

- It would have been beneficial to the programme to understand how the other MHPP programmes interlinked with Active Hospitals and how progress could have been shared across the workstreams. This could have been achieved by OHID producing a quarterly report outlining key highlights for all the workstreams with reference to any opportunities for joint working or networking.
- On reflection, it would have been valuable for the NHS TU to have received more regular programme level updates throughout this time to ensure they understood the wider context of the programme.
- It would also have been beneficial to the NHS TU to meet and build regular communication with Sport England to provide a greater opportunity for wider networking.

Lessons Learned: AH Toolkit

One of the key deliverables was to update the AH Toolkit produced by OUHFT during Phase One and hosted on the Moving Medicine website. A decision was made by OHID and Sport England that the Active Hospitals Collaborative Forum established on the FutureNHS platform would be developed to be the repository for materials produced by the pilot sites and other COP members during Phase Two. In addition, work is currently underway with the pilot sites to add 4 care pathway case studies to the Phase One AH Toolkit and these are expected to be uploaded by the end of 2022.

What went well?

- The set up and management of the Active Hospital Collaborative Forum using the FutureNHS platform has been straightforward.
- Whilst access to the FutureNHS site requires initial registration by users, this did not hinder uptake; there are now 55 members registered.
- All of the sites responded positively and within the required timeframe to the request for content for the 'Library of Useful Resources', enabling this to be populated for review by the OHID team and the pilot sites.

What could have been improved?

- Decisions around the development of resources and the platform at an earlier stage in Phase Two would have been beneficial, to enable any issues to have been considered and managed. This would have provided more time for the development in Phase Two of resources, to support the pilot sites and other hospitals who wished to develop an Active Hospital approach.
- Being clear on definitions of outputs/deliverables (e.g. case study) is essential across all stakeholders to reduce misunderstanding and delays.

Lessons Learned: Sustainability

What went well?

- The NHS Transformation Unit have been promoting sustainability through several different ways including the:
 1. Community of Practice
 2. Active Hospitals Newsletter
 3. Active Hospitals Collaborative Forum
- The NHS TU proposed a number of recommendations to promote sustainability of the Active Hospital approach in March 2022 and concluded that further work is needed to ensure Active Hospitals develops and spreads across the NHS as part of 'business as usual'. The proposed way of doing this in the most effective way was via a centralised programme management resource to support the ongoing programme post September 2022. This would develop and maintain the collaborative forum, support the ongoing management of the Community of Practice and could explore the feasibility of accreditation to support this work. The envisaged cost of this would be c. £100k /annum.

What could have been improved?

- A good exit strategy and sustainability plan needed to be considered earlier in the programme to ensure sufficient lead time for the development and implementation plan to be realised when the project period ends. During the course of the AH Programme, PHE as an entity ceased to operate, transferring all staff and functions into OHID in Oct 2021. This may have impacted on any exit plan being considered or confirmed for the AH Programme during this period for Sept 2022 and it still remains uncertain.
- Greater and earlier engagement between the central OHID team and the OHID regional leads with the purpose of exploring local opportunities for sustaining the AH approach would have been beneficial to the programme.



The NHS Transformation Unit

Conclusion

The NHS TU has worked across the Active Hospital programme for two years in collaboration with; the OHID project team, 4 pilot sites, 24 community of practice members and regional OHID leads to champion the Active Hospital message of embedding physical activity into clinical and staff wellbeing pathways to ultimately improve patient experience, care and outcomes.

As a best practice approach and to learn from various improvements listed above and the programme as a whole, the NHS TU recommends an internal OHID Lessons Learned session with the key partners including the pilot sites and the NHS TU, building in continuous improvement and development and reflecting on the lessons learned shared herein.

It is a strong recommendation that the work of the Active Hospital programme is not lost, but is sustained through Sport England and OHID exploring ways to continue and develop the programme.

The NHS TU has had the privilege of working with driven, supportive and positive colleagues throughout the Active Hospitals programme and would like to thank the teams from across OHID, the 4 pilot sites, Ipsos Mori and the CoP members.

Thank you and a big well done to a brilliant programme!

Thank you

Safeera Ahmed

Charlotte Griffiths

Sarah Maynard-Walker