



Engaging Communities, Transforming Lives

Invitation to Tender
Integrating Physical Activity Pathways into
Health and Care Systems:
the background context

Active Partnerships & the National Organisation

- A country-wide network of 43 Active Partnerships (APs).
- A system partner of Sport England: working together to deliver system-wide change for their Uniting the Movement strategy.
- Our work informs, influences and shapes national, system and local place approaches to support 'moving more' as drivers for social change.
- APs are independent charitable organisations, focusing on inactive people and under-represented groups to improve health.
- They act as a strategic enabler: work with a range of local cross sector stakeholders, taking a whole system approach.
- The Active Partnerships National Organisation is the independent national charity of the AP Network. As a membership organisation we exist to:

Our collective focus is:

Connect.

We **CONNECT** places, people, organisations, sectors, policies, ideas and tools to make change happen.

Strengthen.

We **STRENGTHEN** people, organisations, sectors, ideas, outcomes and impact.

Enable.

We **ENABLE**. Whether it's enabling others, enabling change or enabling the realisation of our vision.

Improving health through addressing strategic priorities relating to reducing inactivity levels, in areas of need

National Priorities

The Health Context:

- There are significant and increasing pressures within our health and care systems trying to manage 1 in 4 of the population who have multiple Long-term Health Conditions (LTHCs) ¹. Our ageing population will continue to increase to 13 million (22% of the population) in 10 years time ² and two thirds of adults will have multiple LTHCs by 2035, more likely to experience mental health problems ³. Fundamentally, the number of years expected to spend in good health will continue to decline.
- We know that reducing inactivity could prevent up to 40% of LTHCs and physical activity (PA) can help to manage more than 20 of the most common physical and mental health conditions ⁴. Therefore, physical activity should play an essential role in primary and secondary prevention, enabling better self-management of conditions and reduces further deterioration or onset of additional physical and mental health conditions.
- Yet PA remains chronically underutilised within NHS care and population health management. The ambition is for PA to be framed as a core part of our health and care systems, enabling an integrated approach to prioritise PA as part of and alongside routine care, recognising physical inactivity as a key risk factor for poor health.

National Priorities:

To help address this, the National Physical Activity and Healthcare Group (which comprises of key partners including NHS Horizons, Sport England, OHID, RCGP, Richmond Group of Charities, ukactive, etc.) has an over-arching aim: to *make Physical Activity a norm for the prevention and management of Long-Term Conditions in the health system.*

Sport England's Opportunities for change:

Within their [Uniting the Movement](#) ⁵ Strategy this includes their 'health & wellbeing advocacy' which outlines 3 key opportunities for change. One of these focuses on the need to improve the pathway between health and organised activity by removing barriers associated with risk.

National and Local Considerations

Recent National Evidence and Information:

- A [Consensus Statement](#) on the risk of PA for people with LTHCs clearly demonstrates that the benefits of being active fundamentally outweigh the risks (2021)⁵. However, pathways between health and organised activity need to be improved by removing barriers associated with risk.
- The [co-designed Easier To Be Active 5 I's framework](#), based on lived experience, highlights the need to create a seamless **integrated** offer between health and physical activity for people with long-term conditions to be more active and suggests ways for this to be achieved.

The Local Challenge:

- Our Active Partnership network is recognised for its core systemic role it plays, given their place-based expertise and ability to develop trusted relationships with their Integrated Care Systems.
- The network has identified as one of the main areas requiring future support is greater clarity and guidance in enabling physical activity pathways between health and activity to be improved, including barriers associated with risk. This has been a recurring theme since the Consensus statement was published in 2021.
- Personalised frictionless activity pathways need to be in place, to reduce variability and provide consistent quality assured models of delivery, trusted by health and care colleagues and better support those communities in most need.
- Cultural and systemic barriers associated with inaccurate perceptions of risk that exacerbate inequalities, need to be understood and removed, to enable a more personalised pathway between health and physical activity.

Reframing physical activity to improving pathways into health

Ambitions

Therefore, in consideration of:

- The role that PA can play in reducing the time people spend in poor health.....
- How physical activity can critically help to reduce the pressures on our NHS and Primary Care colleagues, particularly in prevention & rehabilitation.....
- How physical activity can also reduce the economic cost for individuals, businesses and the local economy negatively impacted.....

We need to reframe physical activity to recognise its wider contribution as part of health and care systems.

To do this, we need to develop a framework and valid tools to ensure that physical activity and its underpinning infrastructure is fit for purpose and fully supported.

Three ambitions have been identified as outlined on this slide. The first ambition is the focus of this tender opportunity.

1. For the **operational elements of Physical Activity for Health Pathways**, to provide frictionless pathways into health, with consistent QA models.

2. To develop a representative workforce that is customer centric, inclusive and equipped with the right skills & behaviours to provide the specialist support required, trusted by health professionals.

3. To advocate and work in partnership to scale up the quality, quantity and accessibility of physical activity to people with specialist health needs.
Therefore, realising the vast health, economic and social potential reaching the people who need it most.

References

1. [final_rg_mlrc_report_a4_0.pdf \(richmondgroupofcharities.org.uk\)](#)
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3. Canca-Sanchez JC, Garcia-Mayor S, Morales-Asencio JM, et al. Predictors of health service use by family caregivers of persons with multimorbidity. J Clin Nurs 2021 doi: 10.1111/jocn.1581
4. Public Health England, Everybody Active Every Day, 2014
5. <https://www.sportengland.org/about-us/uniting-movement>
6. Hamish, R. et al., Benefits outweigh the risks: a consensus statement on the risks of physical activity for people living with long-term conditions. British Journal of Sports Medicine. 2021.Vol. 56, Issue 8.
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