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Evaluation of an Integrated Lifestyle Service for Exercise Referral

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Public Health Intervention Responsiveness Teams (PHIRST)

- Evaluations of public health interventions funded through the National Institute of Health Research (NIHR)
- PHIRST Elevate research team based at University of Edinburgh
- 10 teams across the UK

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Hub models

Single point of access and data collection

Improve access and referral to services

Facilitate connection between local/national health provision

Hub models in the UK

28 (of 317) Local Governments in England use a hub model

79% deliver physical activity (for weight management)

64% are community-based

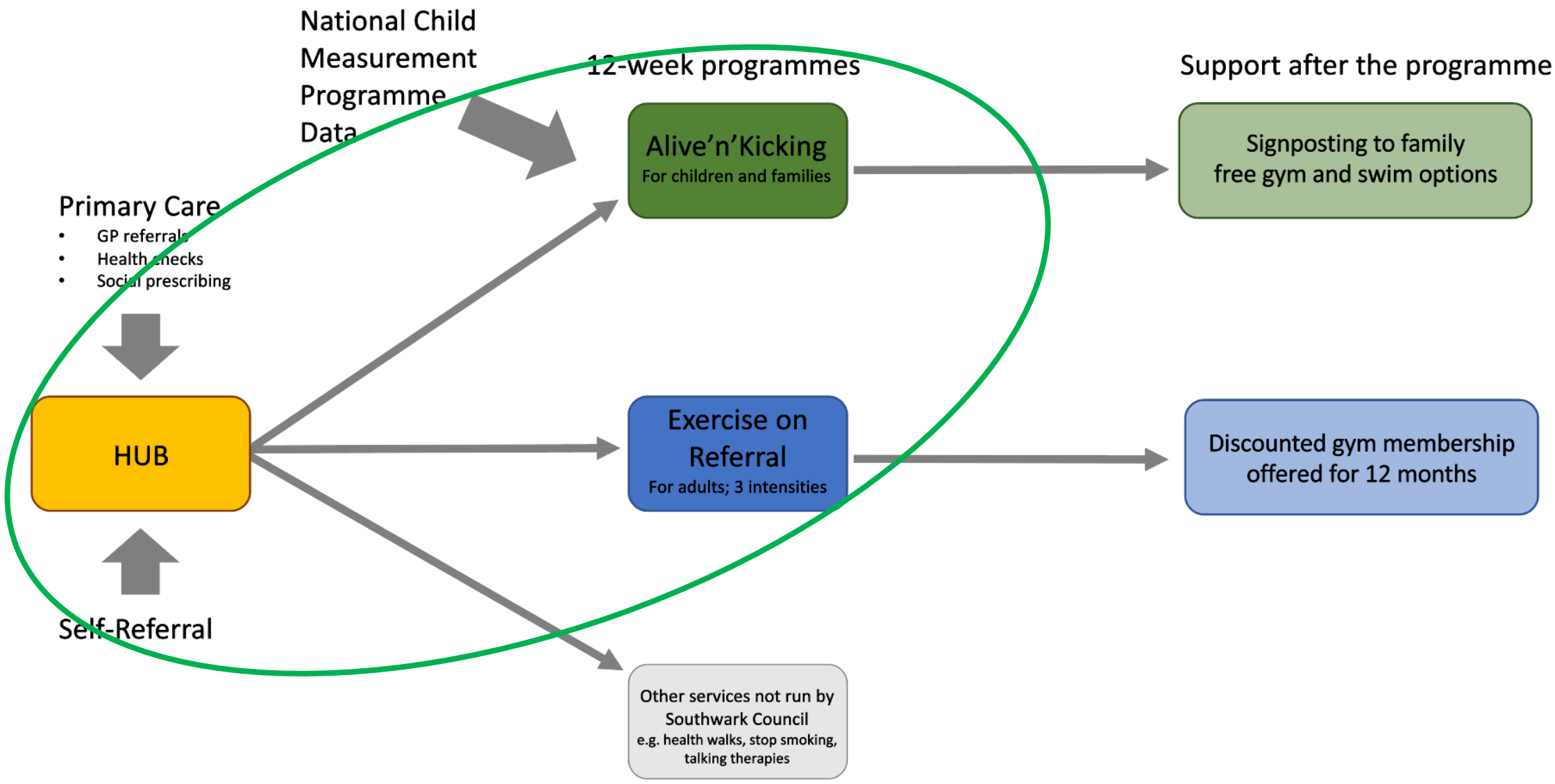
First hub-based model in the UK to be formally evaluated

Evaluation Timeline: May 2024 to May 2025

Borough of Southwark

- London Borough (1 of 32) with ∽307,000 residents)
    - Diverse ethnicity; **25%** born out with UK
    - **51%** of households experience at least one disadvantage (housing, employment, disability, health, education)
- Physical Inactivity in adults **31.1%**
- Obesity rates adults **51.1%**

Outline of the Intervention



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What we planned

in collaboration with

- council (staff + embedded researcher)
- residents- members of public (PPI)
- current and past service users

Evaluation Aims and Objectives

Aim: To understand how the Healthy Lifestyle Hub (HLH) influences referral to and engagement in Exercise on Referral (EoR).

Objectives:

1. Assess whether Healthy Lifestyle Hub facilitates **appropriate and equitable** access to health improvement services (primarily Exercise on Referral);
2. Assess whether referral from the HLH to EoR improves health behaviours and outcomes.

Evaluation Plan

- ✓ **Process and outcome** evaluation components

- ✓ **Mixed method (qualitative and quantitative)** approach:
  1. Analysis of existing data
  2. Online survey of HLH service users
  3. Focus groups and interviews with service users Everyone Health staff and non-initiators

- ✓ Establish a **public involvement group** to support the evaluation

Data collection

- all available data from 2020-2024 (from leisure centre and service provider)
- survey (n=163) and focus groups (n=36) with service users
- interviews with service delivery staff (n=10)

What we found……

1. The Healthy Lifestyle Hub

Benefit

Some users believe the Healthy Lifestyle Hub (HLH) improves access

Challenges	Recommendations
Inconsistency in waiting time and how the Hub engages with service users	Streamline access times and clarify inclusion criteria for the HLH/EoR
Service users are confused about the role of the Hub and different programme teams, leading to unmet user expectations	Communicate more clearly with service users (e.g. programme details, wait times)

2. Exercise on Referral programmes

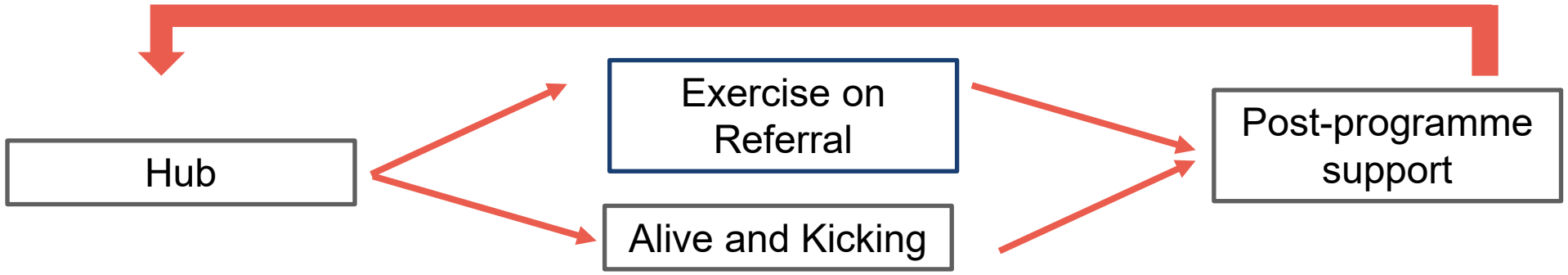
Benefit

Service users experienced benefits (e.g. weight loss, improved fitness, improved mental health, increased physical activity, healthier eating behaviours)

Challenges	Recommendations
The 12-week programme length for EoR is seen as too short	Utilise post-programme options for continued behaviour change support
Post-programme options appear insufficient and poorly promoted	Expand and promote post-programme options - e.g. involve existing community groups/VSCEs

3. Data (collection /availability /linkage)

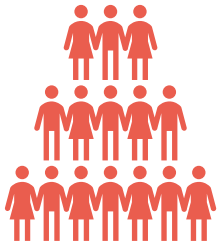
Challenges	Recommendations
There are inconsistencies in data collection	More consistent data collection (especially for health metrics)
There is no system for linking referral, attendance, and outcome data between these services and the leisure centre.	Link data collection Monitoring and integration of post-programme uptake



Impact of our evaluation

New service specifications (Aug 2025)
Informed recommissioning process

Improved data collection templates
Demographic characteristics
Referral route
Outcome/follow-up data



Established Public Involvement
Can be drawn upon for ongoing feedback of the service(s)

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Full report available online

https://phirst.nihr.ac.uk/wp-content/uploads/2025/07/PHIRST-Elevate-IHLS-Report-Final_with-appendices.pdf

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