MHPP Phase Two Evaluation findings

Summary slides

November 2022











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Background to the programme

The Moving Healthcare Professionals Programme (MHPP) is a national programme, led by the Office for Health Improvement and Disparities (OHID) in partnership with Sport England, to support healthcare professionals (HCPs) to increase their knowledge, skills and confidence to integrate physical activity within routine care for the prevention and management of long-term conditions.

The programme has evolved over two phases, with Phase 1 (2017-2019) developing and testing new training tools, which informed the planning and design of Phase 2 (2019-2022) and its workstreams as follows:

PACC	A peer-to-peer training programme for HCPs, launched in 2014
Moving Medicine	An online resource developed by the Faculty of Sport and Exercise Medicine (FSEM), launched in 2018
Active Hospitals	Four NHS trusts piloting 'whole hospital' approaches to embedding the promotion of physical activity in secondary care settings, overseen by the NHS Transformation Unit
E-Learning	E-Learning modules on physical activity and health, delivered by HEE, available since 2019. 10 E-Learning modules for GPs also available on the BMJ learning platform
E-Advice	A digital resource to support the use of brief advice for physical activity in primary care, led by OHID's Behavioural and Social Sciences Team
Activating NHS Systems	A whole system approach to the promotion of physical activity, led by NHS Horizons
Undergraduate curriculum	Embedding physical activity promotion into the undergraduate

curriculum for medical students



Background to the evaluation

The National Centre for Sport and Exercise Medicine, working in partnership with Ipsos, were commissioned to conduct an evaluation of Phase Two of the MHPP from April 2019 – late 2022.

Key evaluation objectives

Assess the impact of the programme and its constituent workstreams

Understand the processes behind effective delivery

Enable continuous learning and improvement





Evaluation methods

A pragmatic theory-driven, mixed methods evaluation approach was taken

- Surveys (with over 2,400 HCPs)
- In-depth interviews and discussion groups (with over 140 individuals including programme stakeholders)
- Monitoring and management data
- Underpinned by workstream logic models
- Changes in some workstreams meant the Undergraduate Curriculum and BMJ E-Learning modules were out of scope for the evaluation







Training, education and resources

Phase Two of the MHPP was delivered within a complex and dynamic system, and an unprecedented global pandemic

Approximately 157,400 professionals have accessed a training tool

Each training tool
attracts a different
profile of HCP showing
they meet the needs of
a broad audience

The training tools are highly recommended by HCPs

HCPs report that the training tools have increased their knowledge, skills and confidence to promote physical activity

Some HCPs report their conversations with patients are now higher quality and more effective

HCPs provided examples of patients becoming more active



System change

It is not possible to attribute system change solely to MHPP but stakeholders named a number of positive contributions

The programme has signalled, and facilitated, greater collaboration between the health and physical activity sectors

The programme has contributed positively to whole system change, incl. greater recognition and value associated with physical activity

Greater traction in the conversations and connections across the system in support of physical activity promotion

Broadening of the organisations involved in conversations about the importance of physical activity

The programme has provided a platform that was not in existence previously





PACC

- A team of PACCs have delivered training to 16,640 HCPs during the evaluation (April-19 to Aug-22)
- This is despite the change to hybrid delivery, and the workforce pressures facing HCPs as a result of COVID-19
- The training attracts HCPs who do not regularly promote physical activity to their patients, distinguishing the audience from that of other workstreams
- In September 2022, OHID released more advanced training content in recognition that there are opportunities to further increase the positive impact of the training on HCPs' knowledge, skills and confidence





Physical Activity for the Prevention and Management of Long-Term Conditions

FREE training for healthcare professionals

Expert Physical Activity Clinical Champions are delivering FREE, peer to peer 1-3 hours online training sessions to groups of healthcare professionals at a date and time to suit local needs e.g. Vocational Training Schemes, Protected Learning Time, lunchtime learning, etc.







94%

of PACC attendees said they were very or somewhat confident promoting physical activity following the training (up from 75% before)

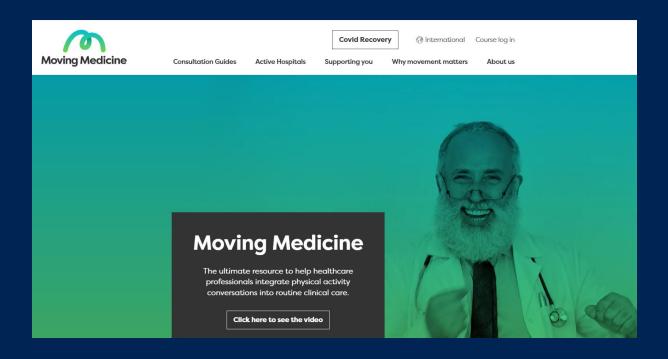
"It's given me more tools to talk to patients and given me more examples to use. And it's made me more confident too..."

PACC attendee



Moving Medicine

- Over 136,500 unique users have engaged with the website in Phase Two (including some non-HCPs)
- The website had a positive impact on HCPs' ability to have brief conversations about physical activity with patients:
 - 96% reported increased confidence
 - 94% reported increased skills
 - 93% reported improved knowledge







73%

of Moving Medicine website users gave advocacy ratings of 9 or 10 out of 10



Based on 70 survey completes

Active Hospitals

- Promotion of physical activity has been incorporated into 18 care pathways across 4 pilot sites
- Over 560 members of staff received formal training on the promotion of physical activity
- Qualitative evidence suggests conversations are happening more routinely with patients, and are better quality and more productive
- The Community of Practice of 24 NHS Trusts has been a successful mechanism for sharing learning and connecting trusts



Balloon tennis on the Active Ward at North Tyneside General







E-Learning

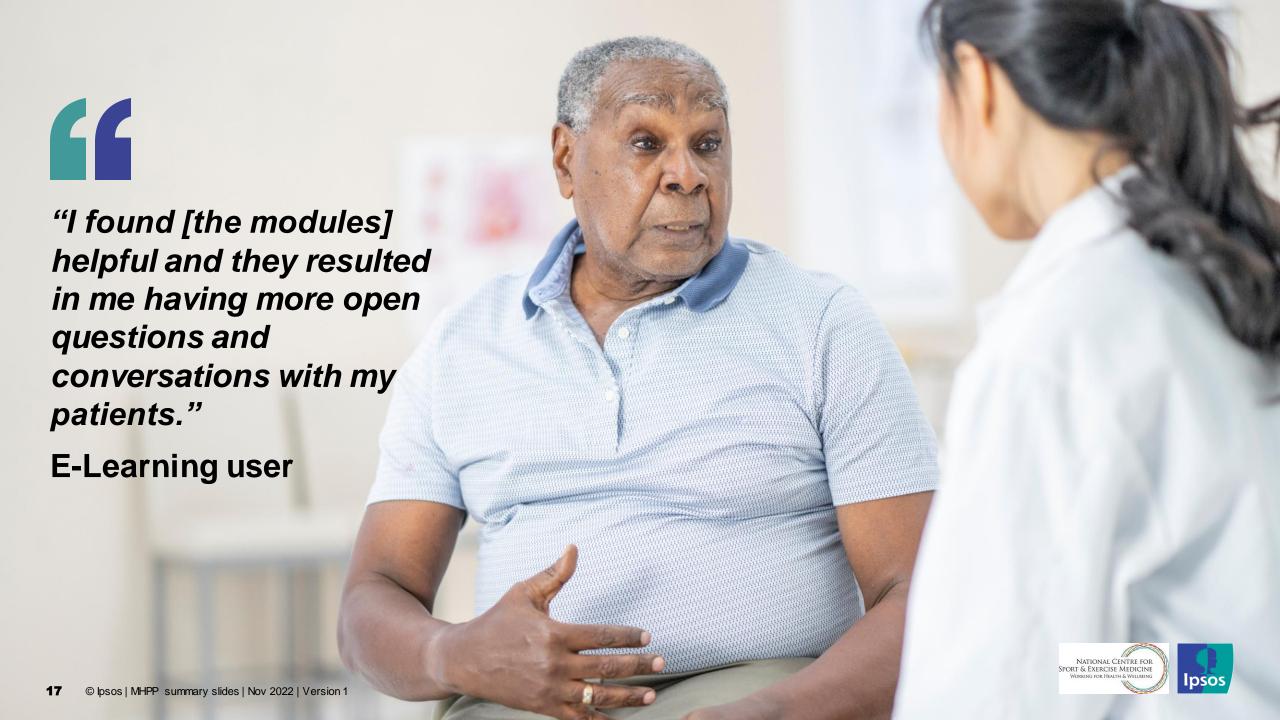
- The 10 Health Education England E-Learning modules have attracted almost 3,600 unique users during Phase Two (including some non-HCPs)
- On average, users score the E-Learning modules 4.4/5, where 5 is 'Excellent'
- The E-Learning resources have increased the capability of HCPs to have brief conversations about physical activity with patients:
 - 89% reported increased confidence
 - 88% reported increased knowledge
 - 86% reported increased skills





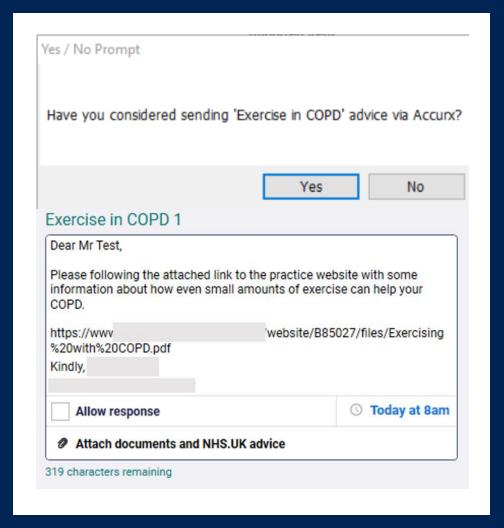


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E-Advice

- The Discovery phase of this workstream reaffirmed the value of a digital intervention to help with the promotion of physical activity
- This workstream provided a better understanding of requirements to embed a digital tool within primary care
- The challenges associated with standardising a digital product for the diversity of GP software systems used within and between localities across England might prove a limiting factor in any future ambitions to scale the intervention







Activating NHS Systems

- Small scale qualitative exercise undertaken as part of the evaluation to primarily examine the barriers and opportunities to whole systems working
- Activating NHS Systems contributed to the impact seen at a systems level and discussed elsewhere – such as the broadening of organisations involved in conversations about the importance of physical activity, and facilitating new conversations with relevant parties
- Some stakeholders commented on the workstream enabling a better understanding of the system and the leverage points within it



Conclusions and Implications NATIONAL CENTRE FOR © Ipsos | MHPP summary slides | Nov 2022 | Version 1

Conclusions and implications for workstreams

PACC

Future delivery may involve curation by a central body with local commissioning of the training and management of PACCs (most likely by ICSs), and adaptation of the content to suit local population needs

Moving Medicine

A more comprehensive promotional strategy would enable greater reach, including HCPs who less regularly promote physical activity

Active Hospitals

A single organisation with responsibility for the curation and development of the Community of Practice would support the spread of Active Hospitals

E-Learning

A greater understanding is required of the modules' place in a nationally coordinated training offer as HEE moves into NHSE

E-Advice

A larger pilot of the E-Advice tool is required to make an informed decision about its progression



Conclusions and implications for the programme (1)

1

More comprehensive promotional activities, including cross-promotion between the assets, would give the programme greater reach

2

Promotional activity should consider how the programme can reach those not already familiar with the benefits of physical activity. This may include widening the target audience to non-HCPs such as social prescribing link workers

3

ICSs, Active
Partnerships, and OHID
regions and places,
have much to offer in
terms of embedding the
promotion of physical
activity and promoting
the MHPP assets

4

Embedding physical activity into the undergraduate curriculum would be an effective means of achieving scale





Conclusions and implications for the programme (2)

5

Some stakeholders emphasised the importance of clear and visible leadership on physical activity, meaning they wanted to see a central body responsible for: convening organisations across the system to a shared agenda; considering the MHPP assets as a whole; and setting a nationally coordinated training offer

6

Efforts to better align the language used around physical activity promotion between the health and physical activity sectors should facilitate future collaboration 7

A concerted effort to review the actual and potential impact of the MHPP on health inequalities, and identify opportunities to lessen such inequalities, is warranted







THANK YOU.

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