



Public Health  
England



# Physical Activity Clinical Champions (PACC) Programme

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OHID NEY 2023 LIVE WEBINAR



# PACC Programme

Peer to Peer Physical Activity Training

Pilot: 2014 (Slide set v1)

Roll Out: 2015 Selected Locations

Progression 1: Expansion to nurses (Slide set v2)

Progression 2: Expansion to AHPs.

Progression 3: Online (Slide set v3)

Progression 4: Mixed delivery (Slide set v4)

Training approx. over 20K+ working in health care space



# Organisation

- OHID leadership
- PACC regional leadership to national leadership



# Changing behaviour of the health care professional

July 2022

## MHPP Evaluation

Physical Activity Clinical Champions: Final report of findings

Ipsos & National Centre for Sport & Exercise Medicine

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Article

### UK Doctors Delivering Physical Activity Advice: What Are the Challenges and Possible Solutions? A Qualitative Study

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**Abstract:** Despite strategies to enable Health Care Professionals (HCPs) to give physical activity (PA) advice to patients, this appears to be rarely done in consultations. The aims of the present study were to gain an understanding of doctors' awareness of current PA guidelines and to explore their opinions on barriers and solutions. A qualitative approach using semi-structured interviews was adopted. This study included 15 doctors currently working in the UK's National Health Service (NHS). A thematic analysis approach was used to analyse the transcripts. Four themes and twelve sub-themes were deciphered. Intrinsic factors limiting the delivery of PA advice included a lack of knowledge of PA guidelines and PA being an afterthought. Barriers to delivering PA guidance included a lack of PA education, time pressures, and patient engagement. Solutions included staff training, incorporating PA into undergraduate training, and encouraging staff to be physically active. Methods to optimise PA guidance included individualised PA advice, local exercise services and schemes, utilising online and visual resources, and motivational interviewing. This study provides an updated insight into doctors' opinions on barriers and solutions to discussing PA with patients. It is clear that further work is needed to ensure greater awareness of PA guidelines amongst clinicians.

**Keywords:** physical activity; adults; medical education

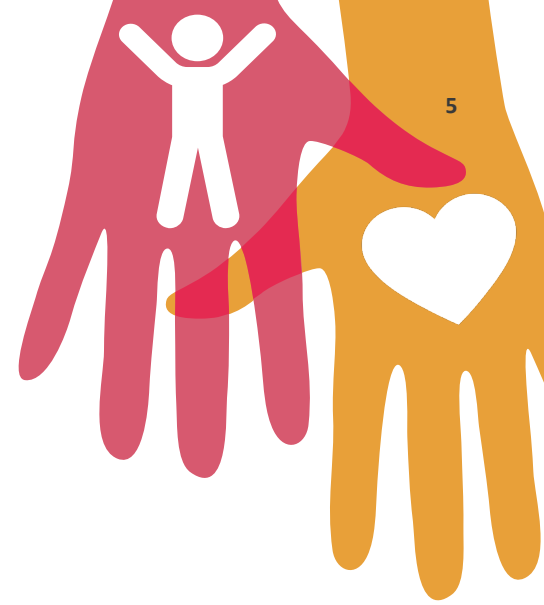
#### 1. Introduction

Despite significant evidence that physical activity (PA) has numerous benefits on physical and mental health and well-being, levels of physical inactivity are increasing [1,2]. In the United Kingdom (UK), the Chief Medical Officer (CMO) recommends that adults aged 19–64 years should complete at least 150 min of moderate activity, or 75 min of vigorous activity, each week, as well as muscle-strengthening activities at least twice per week [3]. Despite the well-documented benefits of PA, most adults globally fail to reach these recommendations [2]. According to the most recent Active Lives Adult Survey, between November 2020 and 2021 in the UK, 61% of adults were receiving at least 150 min of PA per week, with 27% classed as inactive, meaning they engaged in less than 30 min of moderate PA per week [4]. In recent years, physical inactivity and sedentary behaviour have been under increased focus as they have been found to be independent risk factors for mortality and non-communicable diseases [5,6]. With the COVID-19 pandemic and subsequent lockdowns, researchers have found that PA levels in the UK have decreased



# What has worked well?

1. Peer to peer model
2. Access to HCPs
3. Tailored training
4. Resource integration
5. Partnerships and collaborations



# What are our current challenges?

1. Platform
2. Marketing
3. Part-time workforce in PACCs (strength and weakness)
4. Transition from OHID to a 3<sup>rd</sup> party
5. NHS HCP workloads and current challenges
6. Patchy delivery
7. Creating community



# Working with healthcare related partners

1. ICS: Influence, Promote, Collaborate
2. MECC: Who are those professionals?
3. Practitioners that may complement behaviour change
4. Leisure providers
5. National Governing Bodies: Participation focus
6. Facilities
7. Community infrastructure



# Summary/Reflection

1. Important work
2. Hard to measure impact
3. PACC clinicians expertise, local network and knowledge is key

