

Report of_[x1]: **Health Scrutiny Committee**

To_[x2]: **City Executive Board**

Date_[x3]: **11th June 2008**

Item No

Title of Report _[x4]: **GP Referrals**



Summary and Recommendations



Purpose of report_[x5]: To report to the Executive Board the recommendations of the Health Scrutiny Committee as part of their discussions on GP Referrals

Decision_[x6]: No

Board Member _[x7]: Cllr Bob Timbs

Ward(s) affected_[x8]: All

Report Approved by: Andy Collett – Financial & Asset Management Services
Jeremy Thomas – Legal & Democratic Services
Paul Spencer (Climate Change Officer)

Policy Framework_[x9]: N/A

Recommendations_[x10]: The City Executive Board is asked to respond to the Health Scrutiny Committee's recommendation:



1. That urgent negotiations with the Oxfordshire PCT should be entered into, in order to secure sustainable funding for the GP referral scheme in Oxford



1. Background

- 1.1 The Health Scrutiny requested an update on the new GP Referral scheme, developed in conjunction with Oxfordshire PCT. The Scheme was launched in March 08. (full details of the report to Health Scrutiny and details of the scheme are attached as Appendix 1)
- 1.2 The Committee had received an update on the existing City Council GP referral Scheme in November 07 and was aware that the scheme had a high drop-out rate by participants and only partial participation from GP Surgeries.
- 1.3 The Committee wanted to investigate how the new scheme differed from the existing scheme, particularly how it would overcome some of the problems identified above.
- 1.4 The Committee noted that the scheme was now County-wide and had buy-in from all the District Councils in Oxfordshire.
- 1.5 The new scheme in Oxford would be more extensive with gyms at Temple Cowley, Ferry and Blackbird leys participating. Leisure Services were also looking to extend the scheme to include swimming pool use.
- 1.6 Members of the Committee were concerned about the sustainability of the scheme, particularly if the twelve week scheme was solely subsidised by Oxford City Council. It was noted that Oxfordshire PCT would not make any financial contribution to this subsidy. The Committee recommended that this subsidy should be actively pursued by the City Council.

2. Minutes of Health Scrutiny – 14th April 2008

35. GP REFERRAL SCHEME UPDATE

The Head of City Services submitted a report (previously circulated, now appended) concerning the GP Referral Scheme. Steve Holt (Leisure Operations Manager) presented this report to the Committee.

He explained that The City Council had a GP Referral Scheme for 8 years. It had recently been reviewed with the aim of creating a single scheme to which all partners could agree. Prior to this, GPs within Oxford had been inundated by many different schemes, but, by working with the PCT, it had now been possible to instigate one scheme that involved all partners. The PCT would collate the monitoring information needed to assess the success of the scheme, and would pay the City Council £2,000 per year to collect this information on the PCT's behalf.

Existing City Council fitness instructors, who either were, or soon would be, fully trained to a nationally agreed Quality Assurance (QA) standard, operated the referral scheme. The instructors were already in post and they carried out inductions and personal fitness programmes for sports centre clients, as well as overseeing those people who had been referred by GPs. Most of this work was very straightforward, but should it become too burdensome, it could be

examined again. The facilities used were the gyms at Temple Cowley, Ferry and Blackbird Leys Leisure Centres. It was hoped that the scheme could be extended to cover swimming pools, although swimming could be written into someone's programme if requested. . Advertising was by means of leaflets in GPs surgeries and at leisure facilities.

Mr Holt added that the client paid for an initial consultation with a fitness instructor, and then paid a reduced rate, in line with the SLICE card scheme, for a further 12 weeks. The PCT did not make a financial contribution to this.

Councillor Huzzey observed that this was not sustainable in the long term, and that some outside funding would be needed, especially if the scheme grew in popularity. Councillor Williams agreed that the PCT should put some money into this venture. Councillor Sargent suggested that the scheme should be subject to a trial period - up to 25 referrals per week – whilst the funding issue was discussed with the PCT.

Resolved to:-

- (1) Thank Steve Holt for his work on this scheme, and express general support for the principle of it;
- (2) Recommend to Executive Board that urgent negotiations with the Oxfordshire PCT should be entered into, in order to secure sustainable funding for the GP referral scheme in Oxford;
- (3) Agree that participation in the scheme be limited to a maximum of 25 referrals per week, pending resolution of the funding issue;
- (4) Write to the PCT reminding it of the need for a sustainable level of funding for this scheme.

3. Comments from Board Member - Leisure and Sport

No comments

4. Comments from the Executive Director – City Services

I would recommend that we explore with the PCT how we might secure additional funding to support the scheme in the city.

Contact : Julia Woodman, Scrutiny Officer

Tel: 252318 **E Mail :** jwoodman@oxford.gov.uk

Background papers: None



Report of^[x11]: **The Head of City Services**

To^[x12]: **Health Scrutiny Committee**

Date^[x13]: **14th April 2008**

Item No^[EM14]:

Title of Report ^[x15]: **G. P. Referral Scheme**



Summary and Recommendations



Purpose of report^[x16]: To inform and update members on the Oxford G. P. Referral Scheme, its review and its transition to the new County Wide Scheme

Portfolio Holder^[x17]: Councillor David Rundle

Report Approved by:

Legal Services: James Pownall^[EM18]

Finance: Andy Collett

Policy Framework^[x19]: None

Recommendations^[x20]:



1. To note the content of this report



Background

1. Exercise referral schemes operate on the basis whereby medical General Practitioners (GPs) consider that a patient would obtain health benefits relating to their well-being by undertaking some form of physical activity. In these cases they refer the patient to a facility offering such a service.

National Context

2. These schemes have developed nation wide and have been inherent with legal issues around insurance and methods of good practice on who can and can't be referred. As such the Department of Health and the British Association of Exercise Sciences produced a National Quality Assurance Framework for Exercise Referrals. This document now covers all aspects of good practice in running a scheme to the satisfaction of all stakeholders.

Local Provision

3. The provision of such services enabling GPs to refer patients have been available at Temple Cowley Pools and Blackbird Leys Leisure Centre for approximately the past 8 years. These schemes have operated under their own rules and regulation based upon knowledge obtained from a member of staff undertaking a basic training course. 17 GP practices within the areas of Blackbird Leys and Cowley have participated in the scheme by referring patients. (the referral statistics for the last year are attached as appendix 1)
4. The scheme did not follow the National Quality Assurance Framework on good practice. Staff were insufficiently trained and performance monitoring and evaluation was limited. In addition the schemes operation had not been checked for indemnity cover through the council's insurers. As such the decision was made by the leisure Manager to review the current scheme.

Schemes Review

5. It was in the Leisure Manager's experience that these schemes were being developed by many suppliers and GPs were being approached different scheme operators each with their own version of the scheme.
6. Before reviewing the scheme an approach was made to the local Primary Care Trust (PCT) in an attempt to obtain support. It was suggested that a single GP referral scheme should be created across the Oxfordshire PCT region that was endorsed by the PCT and subsequently marketed to GPs as the only recognised scheme for Oxford.

7. The PCT took this on board and with the co-ordination of partners a new scheme has recently been developed and agreed by all. This has been agreed with all
8. providers.(see Appendix 2 for details of the revised scheme)
9. All documentation has been standardised and mechanisms for the schemes performance is to be monitored by the PCT. To enable effective operation of the monitoring and to provide appropriate information material the PCT have provided 2k
10. Staff providing the GP referral service within the Council's Leisure facilities have been trained to the standard required within the Quality Assurance framework.
11. The schemes new documentation has been approved by the insurers and approved by the Council's legal department.
12. The official launch of the new scheme will be at Blackbird Leys on 19th March 2008.

Recommendation

13. To note the content of this report

Name and contact details of author^[x21]: Steve Holt, Acting Head of Leisure; Sholt@oxford.gov.uk; 467234

Background papers^[x22]:



G.P Referral Statistics
TC Pools & Blackbird Leys
Oct 2007 – present day
(Scheme closed officially 7th Dec 08)

Continuation Phase 1 = has not reached the first 12 weeks but is attending
 End Phase 1 =Reached end of first 12 weeks
 Drop out = Did not reach first 12 week review
 End Phase 2=Completed full 24 weeks on scheme

Temple Cowley Pools

<u>Continuation</u>	<u>End Phase 1</u>	<u>End Phase 2</u>	<u>Drop out</u>
<u>1</u>	<u>2</u>	<u>1</u>	<u>5</u>

Blackbird Leys Leisure Centre

<u>Continuation</u>	<u>End Phase 1</u>	<u>End Phase 2</u>	<u>Drop out</u>
<u>2</u>	<u>1</u>	<u>0</u>	<u>4</u>

G.P Referral Statistics
TC Pools & Blackbird Leys
Nov 2006 - Oct 2007

Continuation Phase 1 = has not reached the first 12 weeks but is attending
 End Phase 1 =Reached end of first 12 weeks
 End Phase 2=Completed full 24 weeks on scheme
 Drop out = Did not reach first 12 week review

Temple Cowley Pools

<u>Continuation</u>	<u>End Phase 1</u>	<u>End Phase 2</u>	<u>Drop out</u>	<u>Total</u>
<u>21</u>	<u>5</u>	<u>0</u>	<u>20</u>	<u>46</u>

Blackbird Leys Leisure Centre

<u>Continuation</u>	<u>End Phase 1</u>	<u>End Phase 2</u>	<u>Drop out</u>	<u>Total</u>
<u>8</u>	<u>6</u>	<u>1</u>	<u>6</u>	<u>21</u>

G.P Referral Statistics
TC Pools & Blackbird Leys
Jan 2005 - October 2006

Phase 1 =Reached end of first 12 weeks

Phase 2=Completed full 24 weeks on scheme

Drop out = Did not reach first 12 week review

Continuation = has not reached the first 12 weeks but is attending

Temple Cowley Pools

<u>Phase 1</u>	<u>Phase 2</u>	<u>Drop out</u>	<u>Continuation</u>	<u>Total</u>
<u>14</u>	<u>11</u>	<u>70</u>	<u>2</u>	<u>97</u>

Blackbird leys

<u>Phase 1</u>	<u>Phase 2</u>	<u>Drop out</u>	<u>Continuation</u>	<u>Total</u>
<u>5</u>	<u>2</u>	<u>16</u>	<u>5</u>	<u>28</u>

GP Surgeries Registered

Hollow Way Medical Centre

The Leys Health Centre

Marston Medical Centre

Woodfarm Health Centre Practice Manager

Summertown Health Centre

South Oxford Health Centre

St. Bartholomews

West Oxford Health Centre & The Jericho Health Centre Practice

St Clements Surgery

Donnington Health Centre

East Oxford Health Centre Practice

Warnford Hospital

Kennington Health Centre

28 Beaumont St

19 Beaumont St

Luther Street medical centre Practice

Physio department Churchill Hospital

Physical Disability Physiotherapy Service

Richards Medical Group

Botley Medical Centre

Bury Knowle Health Centre

OXFORDSHIRE EXERCISE ON REFERRAL SCHEME: A quick reference for Exercise Professionals

The next 3 pages tell you:

- What it is
- Who will be referred
- What you are expected to deliver (p4-5)
- What information you need to provide as part of the scheme

The appendices contain:

- Evaluation form
- Referral forms
- Contact details for all providers included within the scheme
- Extent of clinical & professional liability
- Minimum standards expected from all participating providers

This is a joint scheme between Cherwell District Council, Oxford City Council, West Oxfordshire District Council, South Oxfordshire District Council, Vale of White Horse District Council, Oxfordshire Primary Care Trust and participating local leisure providers



OXFORDSHIRE EXERCISE ON REFERRAL SCHEME A SYNOPSIS FOR EXERCISE PROFESSIONALS

Aim: To provide equitable access to accredited exercise on referral for all eligible patients registered with practices in the Oxfordshire PCT.

Objectives

- To provide patients with maximum choice of location, time and activity
- To provide clinicians with a list of all endorsed schemes across the county, including details of times, cost and potential activities
- To set and monitor minimum standards for all participating leisure providers
- To ensure that referring practitioners are aware of the professional guidelines which Exercise Professionals must comply with when accepting and assessing referrals
- To provide structured evaluation of take up and effectiveness of exercise on referral

Terms & Conditions

- Any patient registered with a GP within the Oxfordshire PCT meeting the clinical criteria is eligible for referral within this scheme
- All GPs within the PCT are eligible to refer patients
- Registered nurses and additional GPs may refer patients within their practice if given consent by the lead GP following and on completion of the practice sign up form (Appendix 1)
- Community physiotherapists and exercise physiologists may refer patients to the scheme if they agree to the terms & conditions specified in the ‘Clinicians sign up form’ (Appendix 2)
- This scheme supersedes all previous exercise on referral schemes run by the participating leisure providers¹
- Patients should only be referred using this scheme if they have been assessed by a referring clinician and are considered to be:
 - sufficiently motivated to access the scheme *and*
 - able to benefit clinically
- Patients should expect to pay the discounted rates advertised by the leisure provider for the period of their referral. Patients on low income or benefits may be eligible for additional/alternative discounts, but ‘Exercise on Referral’ should only be used for clinical reasons and *not* as a financial subsidy
- Participating practitioners are free to signpost patients to alternative exercise schemes and activities, but Oxfordshire PCT only endorses ‘Exercise on Referral’ through this scheme
- Any gym or leisure provider within the PCT boundary may join the scheme, provided they can meet the criteria set out within the supporting guidelines and agree to participate in peer assessment
- Exercise on Referral is delivered by participating providers (and this may be as part of a contract with the local district council) at no additional cost to the NHS. The PCT expects providers to encourage participants to purchase alternative/additional products from them at the end of the referral period and to encourage them to sustain a more active lifestyle
- The PCT will commission district councils to provide the quarterly statistical returns (see attached data sheet) from their contracted leisure providers for evaluation purposes.

SUMMARY REFERRAL CRITERIA²

Patients are eligible for referral if they meet *all* of the following criteria:

¹ In this context the provider refers to the leisure facility where the patient attends the Exercise on Referral Scheme

² Detailed criteria & rationale will be available in a distance learning package, available on request.

1. are 16+ years of age
2. are sedentary, inactive or not participating in regular organised activity (i.e. <30 minutes per day on at least 3 days per week)
3. are sufficiently motivated to access the scheme
4. are physically able³ to access the scheme & complete 3 months gentle activity and
5. present with at least one of the following

Cardiovascular disease

- At least 1 year post myocardial infarction/cardiac surgery/PCI. Patients need to be symptom free or have had a negative exercise tolerance test in the past 12 months
- <1 year post MI/Cardiac surgery/PCI, and having successfully completed a phase 3 cardiac rehabilitation programme (explicitly defined 'low risk' patients may be referred directly to a qualified (BACR) Phase 4 instructor)
- Stable angina
- Controlled hypertension ((provided BP is no higher than 140-180/90-100)
- Cerebral vascular accident
- Peripheral vascular disease (e.g. claudication)
- Recorded as having a 10 year CVD risk of 20% CVD (including any patient with a diagnosis of diabetes)

Obesity

- BMI >30 or central obesity (waist circumference: Caucasian men >102cm; Caucasian women >88cm; Asian men >90cm; Asian women >80cm)

Mental health problems

- Depression or anxiety

Musculoskeletal disease

- Osteo-arthritis, rheumatoid-arthritis, osteopaenia
- Mild to moderate osteoporosis with no history of fractures

Respiratory disease

1. Mild/moderate chronic obstructive pulmonary disease (COPD), having successfully completed a programme of pulmonary rehab
2. Cystic Fibrosis
3. Asthma

Exercise Professionals may refuse to accept referrals not meeting the above criteria or, following initial assessment & in accordance with their professional guidelines, if the patient is at high risk of suffering an adverse event. In all such cases detailed, written rationale will be provided to you

Exclusion Criteria

1. Unstable or poorly controlled diseases (such as diabetes, asthma or angina)
2. Hypertension: resting systolic >180mmHg or diastolic >100mmHg
3. Uncontrolled arrhythmias/tachyarrhythmias resting heart rate >100bpm
4. Ventricular or aortic aneurism
5. Acute injury or sports rehabilitation
6. Neuromuscular pain exacerbated by exercise or not treated by physiotherapy
7. Acute infection

GUIDANCE NOTES FOR ACCEPTING & MANAGING “EXERCISE ON REFERRAL” CLIENTS

Accepting Clients Referred

³ Physical and learning disabilities are NT exclusion criteria. This point refers to acute health problems.

1. Before agreeing to accept clients referred through the Oxfordshire Exercise on Referral Scheme, ensure that you meet the following criteria for Exercise Professionals:
 - meet National Occupational Standards for exercise programming
 - hold an appropriate Wright Foundation (or equivalent) qualification in Exercise on Referral
 - have up to date resuscitation skills: formal training (including regular updates) in Basic Life Support (www.resus.org.uk/pages/bls.pdf) is essential and training in the use of an Automated External Defibrillator is strongly recommended⁴
2. Clients will contact you, or a designated person within your organisation to arrange an appointment for initial assessment. You may wish to request some basic details at booking, but you should also reinforce that it is essential that the client brings their referral form to their initial assessment. This will provide you with all necessary medical information.
3. Referral forms should provide all the information necessary to support your initial risk assessment. If essential information is ambiguous or missing, you should contact the referring practitioner for clarification.
4. If the form has not been signed by both the client and the referring practitioner then the client cannot be accepted onto the scheme. (The client may sign it in your presence.)
5. If the client does not meet the referral criteria or if, in your judgement, the patient falls outside of your professional guidelines/is at unacceptable risk of suffering an adverse event, then you may refuse to accept the referral. However, you should not reject a referral solely on the strength of a single, randomly taken blood pressure reading and you should always ensure that all measuring equipment has been properly calibrated.

Responsibilities of Exercise Professionals administering the scheme

Exercise Professionals providing Exercise on Referral will:

- be responsible for conducting a full risk assessment and physical activity questionnaire before an individual may take part in any activity
- contact the referring practitioner to discuss any potential clinical reasons for exclusion which may be borderline or modifiable
- provide the referring clinician and the PCT with written details of why a client has been declined entry to the scheme, within 5 working days of any such decision being made
- provide all clients with an induction (how to use equipment)
- provide all clients with a written, individual programme
- deliver, monitor and manage the individual's programme of physical activity
- provide continuing help and support to the client
- identify any change in an individual's response to physical activity during the scheme or as highlighted by the participating individual and refer back to the referring primary care practitioner regarding these changes when appropriate
- undertake to maintain client confidentiality and have signed a confidentiality agreement
- identify drop outs and make every reasonable effort to contact them
- provide quarterly user information to the district council/local coordinator on the scheme and its users

⁴ Dec 2007: it is noted that some participating schemes do not currently have exercise on referral instructors who are trained in basic life support. However, at the very minimum a First Aider must be on duty in the building at all times when clients are in the building. The Gold Standard is to have all Exercise on Referral instructors trained & regularly updated in basic life support skills and we will work toward achieving this in 2008.

Evaluation and documentation

1. All clients should be regularly monitored; have their exercise programme modified accordingly and have an initial, intermediate and final assessment.
2. In addition to providing the client with a copy of their initial, intermediate and final assessments, the Exercise Professional must also ensure that a copy of each is posted (or faxed, using a dedicated confidential fax number) to the referring practitioner
3. Exercise Practitioners are also responsible for completing an end of course evaluation, in partnership with the client and providing copies to the District Council/local coordinator and to the client's employer as appropriate (Appendix 3). These questionnaires will be used to evaluate the effectiveness of the scheme and to provide feedback to scheme members and referring practices. All information will remain anonymous at a client and practitioner level and all information will be treated in strictest confidence
4. Exercise professionals are also requested to provide 'Final Assessments' (using the same forms) for all patients who drop out after their initial assessment has been completed.

Clinical Assessment & Follow Up

Clinical follow up and medical measures of health improvement (e.g. blood pressure, HbA1c etc.) remain, at all times, the responsibility of the referring practitioner.

Some Exercise Professionals may carry out blood pressure, heart rate and other 'clinical' measures as part of their risk assessment and to optimise a client's exercise programme. The findings of these may be reported to/discussed with the referring practitioner at the Exercise Professional's discretion, but the limit of their responsibility lies with ensuring that clients exercise within professionally defined limits.

Leisure Provider Responsibility

This is outlined in Appendix 5.

EXERCISE REFERRAL SCHEME – Practice Sign up Form

To register your practice, and each primary care practitioner who will be authorised as a referrer, to the Oxfordshire PCT Exercise Referral Scheme please complete the details below and return to:

Kate King, Health Improvement Practitioner, Oxfordshire PCT, Jubilee House, 5510 John Smith Drive, Business Park South, Cowley, Oxford. OX4 2LH

I/we have read the “New Exercise on Referral: A quick reference for GPs & Nurses” and agree to comply with the stated referral criteria and patient enrolment process.

PRACTICE NAME:

LEAD GP:

SIGNED:

ADDRESS:

.....

TELEPHONE NO:

EMAIL ADDRESS:

	NAME & SURNAME	JOB TITLE	DATE
1			
2			
3			
4			
5			

Please continue on additional sheet, if necessary. New staff may be added, using this form at a later date. Electronic copies of this form and further details can be obtained from:

exerciseonreferral@oxfordshirepct.nhs.uk

EXERCISE REFERRAL SCHEME – Clinician Sign up Form

Registered Community Physiotherapists & Exercise Physiologists employed by Oxford Radcliffe Hospitals Trust, Nuffield Orthopaedic Centre NHS Trust or Community Health Services of Oxfordshire PCT may refer patients to the Countywide Exercise on Referral Scheme if they agree to:

- retain clinical responsibility for patients while they are on the scheme
- complete ALL required information on the Exercise Referral Form (APPENDIX 4)
- be available to the exercise professional to answer queries relating to patients they have referred to the scheme
- inform the patients GP via letter that they have referred a patient for exercise on referral

In addition:

Healthcare professionals referring patients to the Oxfordshire Exercise on Referral scheme must be registered with the relevant professional body and have appropriate qualifications and accreditation for the role they perform.

NHS employed healthcare professionals referring patients to the Exercise on Referral scheme must be professional competent to make referrals and should follow the stated terms and conditions in this document. NHS employees who meet these requirements are covered by vicarious liability.

I have read the “New Countywide Exercise on Referral: A quick reference for GPs & Nurses” and agree to comply with the stated referral criteria, patient enrolment process and accept clinical responsibility for the patients I refer.

Signed:

NAME: _____

DEPARTMENT: _____

WORK ADDRESS: _____

TELEPHONE NO: _____

EMAIL ADDRESS: _____

Please complete, sign and return this form to the address below:

Kate King, Health Improvement Practitioner, Oxfordshire PCT, Jubilee House 5510, John Smith Drive, Business Park South, Cowley, Oxford. OX4 2LH

. Electronic copies of this form and further details can be obtained from:

exercisereferral@oxfordshirepct.nhs.uk

**OXFORDSHIRE EXERCISE ON REFERRAL SCHEME
POST REFERRAL EVALUATION**

This form should be filled in jointly by the Exercise Professional and the Client at the time of the final assessment⁵.

All information contained within this document will be treated in strict confidence. Data will be aggregated to evaluate the scheme. No individual client information will be published and no feedback will be given by the PCT on individual cases.

Patient Profile:

Referrer/GP Practice:

Leisure centre used:

Gender: Male Female Post Code

Age:

Most recent Occupation:

Employment Status:

Employed Unemployed Retired Carer on incapacity benefit

Ethnicity:

White British Any other white background African
 Caribbean White & black Caribbean or African Chinese
 Pakistani Indian Bangladeshi Any other Asian background
 Any other ethnic group (please state): Do not wish to answer

Stated reason for referral:

Height: m Weight on Referral: kg Weight at final assessment: kg

BP on Referral / BP on final assessment /

Agreed activity:

Recommended number of sessions per week:

Average number of sessions per week completed:

Did the client complete the programme? Y/N Number of weeks completed

⁵ If the client has dropped out (missed 4 sessions/2weeks), this form should be completed by the Exercise Professional alone

To be completed by the client:

How would you rate the following aspects of the Exercise on Referral Scheme?

	☺	☹	☹	Didn't use
a) Consultation with your physical activity professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Organisation of the scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Range of activities available	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Timing of activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Enjoyment of activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f) Time from referral to starting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g) Other..... (Please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Which of the following helped you to continue with the scheme? (Tick all that apply)

Consultation with Exercise Professional	<input type="checkbox"/>
Support from people you met at the leisure facility	<input type="checkbox"/>
Information from Health professionals (i.e. GP)	<input type="checkbox"/>
Support from Health professionals (i.e. Practice nurse)	<input type="checkbox"/>
I wanted to get healthy	<input type="checkbox"/>
Was not motivated to continue	<input type="checkbox"/>

What impact has the scheme had on....

	Better	Stayed the same	Worse
a) Your general health?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Your general fitness level?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) How you feel about yourself?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Has your participation in the scheme given you the confidence to exercise independently?

Yes

No

If yes, how do you plan to keep physically active?

Use of Gym	<input type="checkbox"/>
Swimming	<input type="checkbox"/>
Exercise Classes	<input type="checkbox"/>
Health Walks	<input type="checkbox"/>
Sports	<input type="checkbox"/>
Dance	<input type="checkbox"/>
Other (please state)	<input type="checkbox"/>

Where?.....

Before starting the scheme on how many days of the week were you physically active for 30 minutes or more? (This may have been cumulative over the day)

- Never
- One or Two
- Three or Four
- Five or more

Now on how many days of the week are you physically active for 30 minutes or more?

- Never
- One or Two
- Three or Four
- Five or more

Do you think the Exercise on Referral Scheme can be improved?

- Yes
- No

If yes, what changes would you like to see?

Any other comments?

Thank you for your time
Your feedback is important to us!

EXERCISE REFERRAL FORM

This form should be completed and signed by the referring practitioner and then handed to the patient. You may be asked to fax this form to the chosen provider. It is the responsibility of the patient to contact the chosen provider and arrange a mutually convenient time and date for an initial assessment. **This form MUST be given to the Exercise Professional at the initial assessment.**

Selected Gym/Leisure provider:

Contact: _____ **Address:** _____

Telephone number: _____

Email address: _____

Web site: _____

CLIENT DETAILS: Please provide all of the information below. (PLEASE PRINT)

Surname
 First Name
 Address

 Post Code NHS Number

Tel.....

Sex: Male Female Other D.O.B

Height m Weight kg BMI BP /

Ethnicity:

<input type="checkbox"/> White British	<input type="checkbox"/> White other	<input type="checkbox"/> African
<input type="checkbox"/> Caribbean	<input type="checkbox"/> White & black Caribbean or African	<input type="checkbox"/> Chinese
<input type="checkbox"/> Pakistani	<input type="checkbox"/> Indian	<input type="checkbox"/> Bangladeshi
<input type="checkbox"/> Any other Asian background		
<input type="checkbox"/> Do not wish to answer		

Employment Status: Employed Unemployed Retired Carer on incapacity benefit

The patient has given consent to share medical, weight and fitness details between their GP and Fitness instructor

The patient has given consent for their anonymised data to be shared for evaluation purposes Yes No

Patient signature

Reason for Referral

- High cholesterol (5.5 or above)
- Controlled Hypertension (provided BP is between 140-180/90-100)
- Cerebrovascular accident

- Controlled metabolic disorder; Diabetes; Thyroid disorders
- Obesity (BMI >30); Increased waist circumference
- General anxiety disorder; Depression
- Impaired mobility/strength: Osteo-arthritis; Osteoporosis;
 Osteopaenia; Rheumatoid arthritis
- Neurological Disorders: Multiple Sclerosis; Chronic fatigue Syndrome (ME)
- PVD; Varicose Veins; Intermittent Claudication
- Mild/moderate COPD (following Pulmonary rehab) – Asthma, (Inhaler px) Cystic Fibrosis
- CHD (please specify) - Myocardial Infarction, Post PCI, Stable Angina, Post other cardiac surgery (GTN prescribed). Post Coronary Artery Bypass Graft (*Please see summary referral criteria*)

Any other medical condition:.....
.....

Medication:.....
.....

Cautions/Additional comments:.....
.....

Referrer Details:

I confirm that a full client history has been taken and they have assessed to ensure the inclusion/exclusion criterion has been met.

Referral Site (GP Practice).....
.....

Name of Referring Practitioner (please *print*):
.....

Signature.....

Contact number..... **Date**.....

PARTICIPATING PROVIDERS

Location	Organisation	Contact	Times of sessions	Inclusive Activities Available	Maximum visits per week	Cost and Duration
ABINGDON: White Horse Leisure and Tennis Centre Abingdon Oxon	Community Leisure Services	Post Referrals to: Health and Fitness Manager, White Horse Leisure & Tennis Centre, Audlett Drive, Abingdon , Oxon, OX14 3PJ 01235 540715	N/A	Gym (Creche available at extra charge) Multi Sport Sessions. Phase IV Cardiac Rehabilitation	No Max	Initial Consultation free. £3.75 per session or £26 per month
BANBURY: Spiceball Leisure Centre Banbury Oxon		Fax referrals to: Exercise physiologists (Horton Hospital): 01295 229373 Fax: 01295 229754 Darren Whittle 01295 257522	Kinetica Gym Monday to Friday 6.15am to 5.00pm	Gym (Creche available at extra charge)	2 sessions per week	20 sessions @ £2.30 per session
BERINSFIELD: Abbey Sports Centre Green Furlong Berinsfield Oxon OX10 7NR	Soll Leisure	01865 341035	Monday to Friday 7am to 5.00pm Sat/Sun 9am – 5pm	Gym Swimming	N/A	Initial consultation free £22 month thereafter

<p><u>BICESTER:</u> Bicester & Ploughley Queens Avenue Bicester OX26 2NR</p>	<p>Cherwell District Council</p>	<p>Fax referrals to: Exercise physiologists (Horton Hospital): 01295 229373 Fax: 01295 229754 Eileen Ford 01869 253914 Ext: 640</p>	<p>Gym Monday & Wednesday 9am-6pm Swimming Tuesdays 1pm-2pm</p>	<p>Gym Swimming (Creche available at extra cost)</p>		<p>20 sessions @ £2.70 per session</p>
<p><u>CARTERTON:</u> Carterton Leisure Centre Broadshires Way Carterton Oxon OX18 1AA</p>	<p>Wycombe Leisure Ltd</p>	<p>Trish Cowie 07825670421</p>	<p>Gym 6.30am – 10.00pm Studio Sessions As programme Swimming</p>	<p>Gym Studio Sessions Swimming</p>	<p>No Max</p>	<p>20 sessions @ £2.50 per session Swimming at normal rates £1.50 OAP £1.60 concessions £3.50 adults</p>
<p><u>CHIPPING NORTON:</u> Chipping Norton Leisure Centre Burford Rd Chipping Norton Oxon OX7 5DY</p>	<p>Wycombe Leisure Ltd</p>	<p>Trish Cowie 07825670421</p>	<p>Gym 6.30am – 10.00pm Studio Sessions As programme Swimming</p>	<p>Gym Studio Sessions Swimming</p>	<p>No Max</p>	<p>20 sessions @ £2.50 per session Swimming at normal rates £1.50 OAP £1.60 concessions £3.50 adults</p>
<p><u>DIDCOT:</u> Willowbrook Leisure Centre, Bowmont Water, Off Avon Way, Didcot The Wave Leisure Centre Newlands Avenue Didcot 01235 819888</p>	<p>Soll Leisure</p>	<p>Scheme due to be available from early January Please contact Neil Morris for more details 01367 241755</p>				

<u>FARINGDON:</u> Faringdon Leisure Centre, Fernham Road, Faringdon, Oxon, SN7 7LB	Soll Leisure	Neil Morris 01367 241755	Monday to Friday 7am to 5.00pm Sat/Sun 9am – 5pm	Gym Swimming Studio Classes	N/A	Initial consultation free £22 month thereafter Casual Session Rate £4.20
<u>KIDLINGTON:</u> Kidlington & Gosford Sports Centre Oxford Rd Kidlington OX5 2NU	Cherwell District Council	Fax referrals to: Exercise physiologists (Horton Hospital): 01295 229373 Fax: 01295 229754 Robin Faulkes 01865 847244	Tues & Thursday 9-6p.m.	Gym & Swimming		20 sessions @ £2.70 per session
<u>OXFORD;</u> <u>SUMMERTOWN</u> Ferry Sports Centre Diamond Place Summertown Oxford	Oxford City Council	Pierre Lefort (01865) 467065	Aspires Fitness Suite Mon – Fri 8am – 5pm Sat & Sun 9am – 8pm	Aspires Fitness Suite Swimming	3 sessions per week	£1.20 per session £4.90 Consultation Fee
<u>OXFORD CITY:</u> Blackbird Leys Leisure Centre Pegasus Rd Oxford Ox46JL	Oxford City Council	Pierre Lefort (01865) 467065	Aspires Fitness Suite Mon – Fri 9am – 9pm Sat 9am – 8pm	Aspires Fitness Suite	3 sessions per week	£1.20 per session £4.90 Consultation Fee
<u>OXFORD:COWLEY</u> Temple Cowley Pools Temple Rd. Cowley Oxford OX42EZ	Oxford City Council	Pierre Lefort (01865) 467065	Fitness Room Mon – Fri 8am – 9pm Sat 9am – 1pm	Fitness Room Swimming	3 sessions per week	£1.20 per session £4.90 Consultation Fee

<p><u>WANTAGE:</u> Wantage Leisure Centre, Portway, Wantage, Oxon OX12 9BY</p>	<p>Soll Leisure</p>	<p>Neil Morris 01235 766201</p>	<p>Monday to Friday 7am to 5.00pm Sat/Sun 9am – 5pm</p>	<p>Gym Swimming</p>	<p>N/A</p>	<p>Initial consultation free £22 month thereafter</p>
<p><u>WITNEY:</u> Windrush Leisure Centre Witan Way Witney Oxon OX28 4YA</p>	<p>Wycombe Leisure Ltd</p>	<p>Trish Cowie 07825670421</p>	<p>Gym Mon – Wed 8.30am – 5.00pm Thurs – Fri 8.00am – 8.00pm Studio Sessions As programme Specialist cardiac Rehab Class Swimming</p>	<p>Gym Studio Sessions Swimming</p>	<p>No Max</p>	<p>20 sessions @ £2.50 per session Initial consultation £5.00 Swimming at normal rates £1.50 OAP £1.60 concessions £3.50 adults</p>

Liability

‘The Medical Protection Society (MPS) endorses the provision of supervised exercise sessions for patients and appreciates that the GP’s have an important role in facilitating the use of exercise programmes. In order to encourage GP’s to become involved in referring patients for exercise it is important that the guidelines are simple and GP’s do not feel they are being asked to take on responsibilities for which they are ill equipped. It would be helpful for there to be either national or local guidelines which set out specific conditions for which referral for a structured exercise programme is appropriate.

The introduction of the exercise professional who will be registered with a national body and have indemnity in respect of his work is welcomed. We see no difficulty in GP’s providing the exercise professional with details of the patients past medical history with the consent of the patient for a planned programme of exercise, the content of which would be his responsibility. It would be expected that the exercise professional would feed back to the GP any problems that are encountered and the progress that is made through the programme.

With this framework we would see the GP’s involvement as forming part of his responsibilities as a general practitioner and provided he was paying the appropriate subscription then he could look to the society for advice and an indemnity in respect of this part of his practice’

(Medical Protection Society, 29/3/2000)

Community Physiotherapist & Exercise Physiologists employed by ORH or Community Health Services of Oxfordshire Primary Care Trust

Healthcare professionals referring patients to the Exercise on Referral scheme must be registered with the relevant professional body and have appropriate qualifications and accreditation for the role they perform.

All patient records should be kept in accordance with national and local protocols and policies and any transfer of patient information should be done in accordance with Caldicott regulations and comply with the NHS Confidentiality Code of Practice

The Provider should undertake to facilitate the appropriate continuing professional development and training for healthcare professionals providing the service to ensure that they meet the minimum competency standards

NHS employed healthcare professionals referring patients to the Exercise on Referral scheme must be professional competent to make referrals and should follow the stated terms and conditions in this document. NHS employees who meet these requirements are covered by vicarious liability.

QUALITY STANDARDS FOR EXERCISE ON REFERRAL PROVIDERS

Organisations signing up to provide exercise on referral through this scheme agree to provide evidence to the PCT, on request, that they and their employees providing the service meet or exceed the standards outlined below. Further, they agree to participate in annual peer review of their service by other providers within the scheme and disclosure of findings to the PCT.

Organisations providing Exercise on Referral must ensure that:

- clients are assessed, managed and followed up by appropriately trained staff (minimum level 3, see page 4 point 1)
- clients are given verbal advice and access to written instructions pertaining to the safe use of all appropriate equipment
- the organisation has a standard procedure for initial, intermediate and final assessment of clients and that all staff taking clients 'on referral' are adequately trained in its use
- copies of client's initial, intermediate and final assessments are given, in writing, to the client and a copy sent to their referring practitioner
- an end of course evaluation is completed by the Exercise Professional and client for all clients and returned to the PCT
- an end of course evaluation is completed by the Exercise Professional and returned to the PCT for all clients who have completed an initial assessment, but have subsequently dropped out
- a full risk assessment has been completed prior to providing the scheme⁶
- documented procedures are in place for health & safety checks in the exercise area
- all electrical equipment has been PAT tested
- all client sessions are adequately supervised by appropriately trained personnel (minimum level 2 although wherever possible the exercise referral trained instructor should supervise or be present during the sessions)
- evidence of either company or personal liability insurance can be produced on request

⁶ A full risk assessment should be undertaken for all participants of the exercise on referral scheme which requires consideration of: Risk assessment (PARQ), Risk stratification, current functional capacity, age, gender, ethnicity, co-existing co pathologies, orthopaedic limitation, the participants' objectives, beliefs knowledge and interests, leisure and occupational activities, current medication. All providers of Exercise on Referral should also be compliant with Health and Safety regulations having emergency operating procedure, normal operating procedures in addition to risk assessments for each area.