

Systems, Process, Evaluation | exploring what is possible in EoR

Stu Stokes | @ReferAll



"Exercise referral doesn't work!"

"The benefits of exercise referral are not as large as hoped."

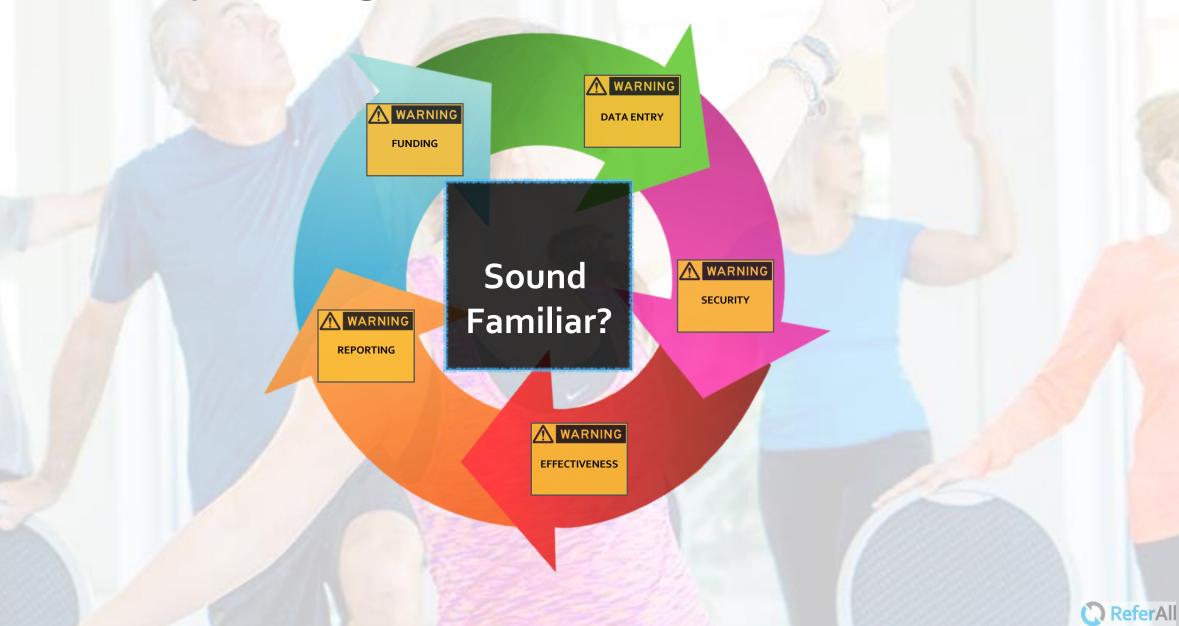
"This has saved my life!" "I never knew I could achieve so much!"

Review of evidence

Even with large numbers the story for EoR is not as hoped

- \circ There are positives
- There are challenges
- $\circ~$ There is work to do
- Everyone has a part to play

Today's Challenges



What we do



OUTCOME REPORTING AT A GLANCE

| Select Your Scheme | Filter Your Data | Save as a Template | Report or Export | | | | | | | |
|---|------------------|--------------------|------------------|--|--|--|--|--|--|--|
| Contact Stuart or the sales team on 0845 465 1052 or visit: refer-all.net | | | | | | | | | | |
| | C) R | ReferAll | | | | | | | | |

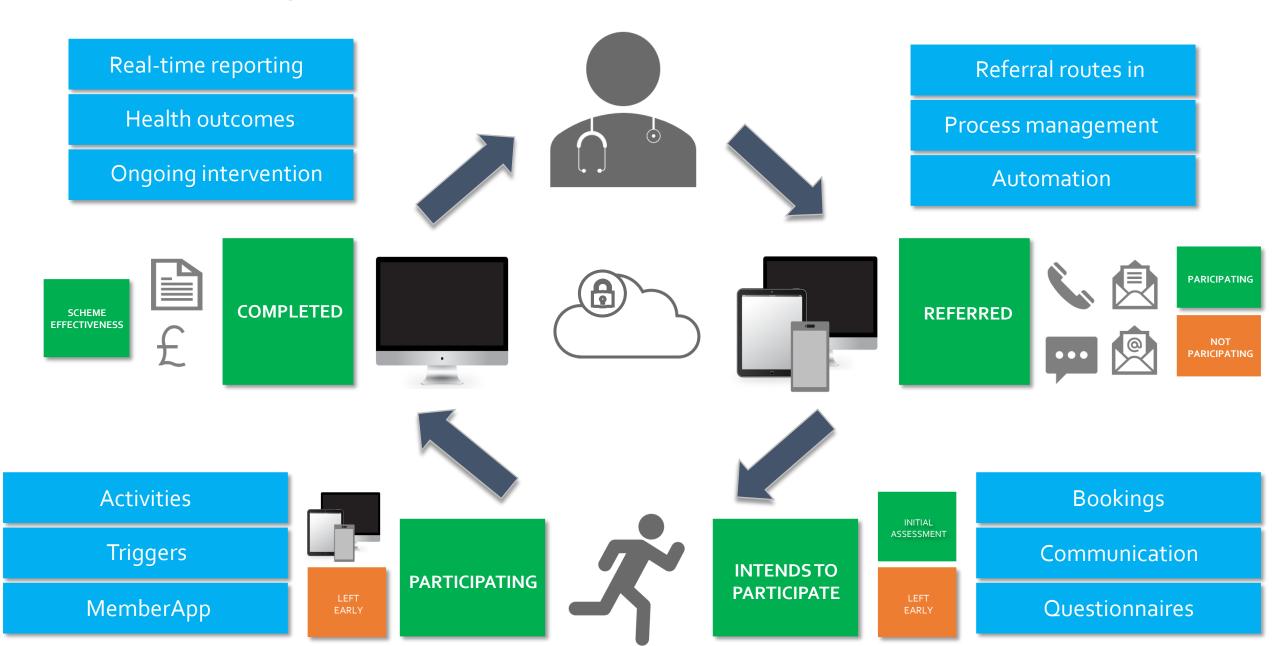
ReferAll is a data management platform for the safe and efficient provisioning of lifestyle services.

We help organisations involved in the commissioning and provisioning of lifestyle services such as exercise on referral (EoR), weight management and specialist referral services for chronic conditions by providing access to our digital platform that enables quick and easy yet secure online referrals, reduce the administrative burden on scheme administrators which frees up their capacity for improved delivery, while at the same time allowing for real-time monitoring and evidence-based evaluation of outcomes by healthcare commissioners.

Today our secure online software is used by Public Health Teams, Local Authorities, Leisure Trusts and NHS organisations across the UK.

Client Journey

NEW REFERRAL



Data Collected



Reason for referral

medical conditions, medications, biometrics

referring organisation, referrer, origin, referrer type

Referral source

Key demographics

gender, age, ethnicity, nationality, religion, sexual orientation, education status, employment status, disability status



Location status

postcode district, postcode area, IMD, QOD, LSOA, CCG, Locality, Electoral ward

It's all about the A to the B

Once a process has been enabled

- Recruitment is key
- Knowing what works is important
- Communication is a key driver
 - \circ $\,$ To increase take up $\,$
 - \circ $\,$ To increase levels of completion
- $\circ~$ Once the A to B happens
 - \circ Data will be available
 - Ongoing behavior will be cemented
 - Potential for further opportunities

What happens when...



| Measure | Initial | | Mid Point | | | | End Point | | | | | | | |
|---------------------------------|---------|-----------|--------------|-----------|----------------|------|-----------|------|--------------|-----------|----------------|------|------|------|
| | Avg | Referrals | Avg | Referrals | Avg Change (%) | < | = | > | Avg | Referrals | Avg Change (%) | < | = | > |
| IPAQ score | 1.3 Low | 7395 | 2.0 Moderate | 2368 | 0.7 (53.8%) | 87 | 918 | 1363 | 2.1 Moderate | 2499 | 0.8 (61.5%) | 71 | 758 | 1670 |
| Weight (kg) | 91.6 | 6653 | 88.4 | 2084 | -3.2 (-3.5%) | 1483 | 236 | 278 | 86.9 | 2346 | -4.7 (-5.1%) | 1771 | 186 | 261 |
| BMI | 32.9 | 6253 | 31.4 | 1989 | -1.5 (-4.6%) | 1395 | 244 | 266 | 30.9 | 2315 | -2.0 (-6.1%) | 1705 | 186 | 251 |
| Short Warwick & Edinburgh score | 46.7 | 7126 | 53.0 | 2260 | 6.3 (13.5%) | 469 | 233 | 1528 | 55.4 | 2383 | 8.7 (18.6%) | 401 | 156 | 1769 |
| Best imaginable health state | 54.0 | 7394 | 68.7 | 2368 | 14.7 (27.2%) | 333 | 368 | 1667 | 73.6 | 2499 | 19.6 (36.3%) | 306 | 218 | 1974 |
| Mobility | 1.5 | 7395 | 1.4 | 2368 | -0.1 (-6.7%) | 400 | 1802 | 166 | 1.4 | 2499 | -0.1 (-6.7%) | 485 | 1851 | 163 |
| Self-Care | 1.2 | 7395 | 1.1 | 2368 | -0.1 (-8.3%) | 195 | 2068 | 105 | 1.1 | 2499 | -0.1 (-8.3%) | 241 | 2153 | 105 |
| Usual Activities | 1.6 | 7395 | 1.4 | 2368 | -0.2 (-12.5%) | 498 | 1683 | 187 | 1.3 | 2499 | -0.3 (-18.8%) | 620 | 1659 | 220 |
| Pain/Discomfort | 1.8 | 7395 | 1.6 | 2368 | -0.2 (-11.1%) | 567 | 1601 | 200 | 1.6 | 2499 | -0.2 (-11.1%) | 720 | 1561 | 218 |
| Anxiety/Depression | 1.6 | 7395 | 1.4 | 2368 | -0.2 (-12.5%) | 537 | 1667 | 164 | 1.3 | 2499 | -0.3 (-18.8%) | 702 | 1642 | 155 |

Don't just take our word for it.....

"We all know exercise works; what I love is that ReferAll allows us to prove it. We can demonstrate that physical activity does all the things the evidence says it should do, from reducing weight or BMI and improving mental health to helping mobility or pain issues.

We have quarterly meetings with the commissioners from Stockport Council and produce an annual report at the end of the year, using the data to show how much the scheme has grown and what we're giving back."

| Year 1 st Oct – 20 th Sept | Number of referrals | Take up | Completion | |
|--|---------------------|-----------------------------|-------------------|-----------------------|
| 2015/2016 | 1,869 | 1,302 (69.7%) | 577 (44%) | |
| 2016/2017 | 1,587 | 1,183 (74.5 <mark>%)</mark> | 663 (56%) | |
| 2017/2018 | 2,146 | 1,511 (70.4%) | 795 (53%) | RESEARCH INSTITUTE |
| 2018/2019 | 2,332 | 1,656 (71%) | 717 (43% ongoing) | |

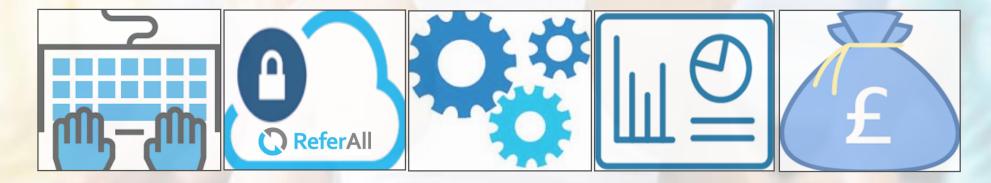
ReferAll

Who We Work With





ReferAll Summary



DATA ENTRY

SECURITY

EFFECTIVENESS

FUNDING

REPORTING





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