Research summary:
Evaluating the Health Precinct

About the Health Precinct
Based in Colwyn Bay, North Wales, the Health Precinct is a partnership between Conwy County Borough Council, Betsi Cadwaladr University Health Board (BCUHB), and Public Health Wales. People with chronic conditions are referred to the Health Precinct through social prescribing. A treatment plan will be developed after a multi-disciplinary assessment is undertaken. Plans are typically 16 weeks long and may include exercise goals, physiotherapy, occupational therapy, and other advice. The theory is that removing barriers to exercise, such as offering services in a community setting rather than hospital or clinic, will promote a collaborative approach between patients and professionals.

To date the Health Precinct has mainly been used by older people and the most frequent reasons for referral are issues with mobility and balance, musculoskeletal conditions e.g. arthritis and joint stiffness, heart conditions, weight loss, COPD and asthma. The Health Precinct is intended to benefit individuals and communities through a number of strategies, including promoting social participation and encouraging independence and self-management of conditions.

What was the study about?
Researchers at Bangor University were interested in three aspects of the Health Precinct:
1. Exploring the social value of the Health Precinct
2. Exploring patterns of attendance at the Health Precinct
3. Exploring what works about the Health Precinct, for whom, why and in what circumstances?

For more information about the study please contact Dr Carys Jones at Bangor University:
Email: c.l.jones@bangor.ac.uk
1. Exploring the social value of the Health Precinct

What did the research aim to find out?

We wanted to explore the social value generated by the Health Precinct.

What is social value?

Social value is a term which describes a wider concept of value than the market price of a good or service. It can include social, environmental and economic aspects; for example people attending the Health Precinct may benefit through increased confidence and more social connection to their community—attributes that would not be included in a simple market price.

What is Social Return on Investment (SROI) analysis?

Initiatives such as the Health Precinct aim to generate both health and social outcomes, benefiting multiple sectors e.g. the NHS, social care, and local government. To explore the social value that the Health Precinct brings to these stakeholder groups we chose to do a Social Return on Investment (SROI) analysis, a form of cost-benefit analysis where all inputs and outputs are converted into monetary values.

How we think the Health Precinct benefits people: the theory of change

Inputs: attendance fees, staffing, equipment, overheads

The Health Precinct encourages older people with chronic health conditions to engage in a 16-week physical activity programme.

Participants experience improved physical health, mental wellbeing and social connectivity.

Family members worry less about their loved ones and may increase their own physical activity levels.

The NHS saves money as a result of a reduced demand for health and social care services.

The Local Authority receives revenue from increased leisure centre membership uptake.
How was the research done?

Between October 2017 and May 2019, Health Precinct clients aged 55 and over were invited to complete a health and well-being questionnaire pack at their initial consultation and at the end of their 16-week programme. We also sent questionnaires to family members of Health Precinct clients at the 16-week point to see how their loved one taking part had affected them.

We spoke to staff involved with the organisation and delivery of the Health Precinct to find out what impact the programmes had on their activities, and to find out information on the cost of running the Health Precinct.

What changes were we interested in measuring?

For Health Precinct clients:
- Increased physical activity
- Improvement in health status
- Improvement in confidence
- Increased social connections

For their families:
- Improvement in health status

For the NHS:
- Reduction in the number of GP appointments

For the local government:
- Increase in leisure centre membership

“We’re going more every week, becoming more of a group and it’s more of a social thing, as well. So that’s nice, because, as you know, the social thing is very important when you get older, isn’t it? That you’re not isolated.”

Quote from a Health Precinct client

“I look forward to this every week. I know it’s doing me good. [The staff] encourage everybody, not just me. They do come to you to make sure that you’re using the machines properly, as well, which is very, very good. Hands-on, they’re brilliant.”

- Quote from a Health Precinct client
What were the main findings?

We collected data for 159 Health Precinct clients at their initial consultation, and 66 at the 16-week end of programme point. Family member information was provided by 38 people. The average age of people taking part in the research was 72 years old, and more women (97) than men took part (62).

We calculated the cost of running the Health Precinct for 1 year to be £55,389, including staffing, equipment, attendance fees and overheads.

When we assigned a monetary value to the benefits experienced by all stakeholders (people who took part, their families, savings to the NHS and the local government) the social value generated by the Health Precinct was estimated to be £281,010.

This leads to a social return on investment ratio of £5.07 of social value being generated for every £1 invested in the Health Precinct. We conducted sensitivity analyses to test the robustness of the data and underlying research assumptions and found the range of social value generated was between £3.98 and £5.16 for every £1 invested.

“You can do what you want in the gym. You’re in control. Want to stay an hour, I’ll stay an hour. If I want to stay an hour-and-a-half, I’ll stay an hour-and-a-half. If I want to use this apparatus, I’ll use this apparatus. I’m in full control of what I want to do.”

Quote from a Health Precinct client
2. Exploring patterns of attendance at the Health Precinct

What did the research aim to find out?
We wanted to explore patterns of attendance at the Health Precinct, and compare activity types for Health Precinct clients and members of the general public aged over 55.

What data did we use?
Following ethical approval from Bangor University, anonymised information was extracted from the Eirias Park leisure centre records about the frequency of attendance and types of activities done by the general public for a 7 month period (February—August 2017). During this period, 2,794 people aged 55+ attended the leisure centre a total of 56,967 times.

We also received anonymised information about 171 Health Precinct referrals for the same period, including clients’ age, gender, reason for referral, and health status.

What were the main findings for Health Precinct clients aged 55+?
The average age of people attending an initial consultation was 70. More women (103) than men (68) attended. The most common reason for referral was general (e.g. musculoskeletal), followed by falls, and cardiac reasons. At the start of their programme, most clients had high blood pressure and a BMI that indicated they were overweight.

Health Precinct clients attended an average of 19 sessions across a 16-week programme. Over half of those who completed a 16-week programme lowered their BMI, and a third improved their blood pressure score. Health-related quality of life improved in programme completers, with improvements seen in mobility, self-care and the ability to do usual activities.

“You know that once you’ve been, you’re going to come back feeling better. It’s just that feelgood. I’ve achieved it. I’ve done it.”
Quote from a Health Precinct client
What were the main findings for the general public aged 55+?

As with Health Precinct clients, more women (1,638) than men (1,156) attended the leisure centre. The average age was 68. Over the 30 week period that the data covered, the average number of attendances was 20 per person. The most popular activity types were individual cardiovascular sessions e.g. the gym (20,118 attendances), aerobic classes (12,195 attendances) and swimming (10,885 attendances).

Gender differences were observed for the activity types, with men favouring individual cardiovascular activities and women favouring aerobic classes. Swimming attracted a similar proportion of men and women.

What differences were there between Health Precinct clients and the general public?

A fifth of the general public had also attended at least one Health Precinct activity. Health Precinct clients accounted for over half of the gym attendances in the study period. The most popular activities for Health Precinct clients to do outside of their exercise plan were Pilates, over 50s aerobics, aqua aerobics and Yoga.

“I want to stay as active as I can. I don’t want to be reliant on other people to do things for me. I want to stay as active as I can and that’s my motivation.”

Quote from a Health Precinct client

“Aerobic class 22%  
Individual cardiovascular e.g. gym 35%  
Swimming 19%  
Other 24%”

Most popular activities

“It is quite nice to meet the friendly faces you’ve seen the week before. So from that aspect, it is probably an encouragement.”

Quote from a Health Precinct client
3. Exploring what works about the Health Precinct, for whom, why and in what circumstances?

What did the research aim to find out?
All too often research findings are focused on the results. We wanted to better understand what mechanisms cause the results that we have observed. To do this we undertook a realist evaluation to explore what works about the Health Precinct, for whom, why and in what circumstances.

How was the research done?
Two focus groups were held in the Summer of 2017 with people involved with the organisation and delivery of Health Precinct activities. Attendees were asked to discuss factors that lead to successful client engagement with the Health Precinct, and what hinders programme delivery. After the focus groups we developed a set of theories about the mechanisms, contexts and outcomes that underpin what works about the Health Precinct. Individual interviews were then held with 16 Health Precinct clients to test and refine the theories that had been developed.

What were the main findings?
Five key areas were found to be important for the successful implementation of the Health Precinct: organisational environment, client mentorship, structured groupwork, social environment and self-care and independence.

“That...de-medicalised, de-stigmatised environment where contact with medical professionals and other social service professionals is possible, but in a maybe less threatening, pleasant environment.”
Quote from a Health Precinct staff member

1. Organisational environment
Where accessible community assets provide self-care opportunities within a supportive environment, Health Precinct clients feel safe, valued, in control. They feel responsible for their health, which motivates them to engage with active healthy behaviour.
2. Client mentorship
Where taught healthy behaviour is relevant, co-produced and tailored within a trusting environment that provides positive feedback, the client’s confidence is supported, and their self-belief to perform a task is enhanced, which motivates engagement in healthy behaviour.

“"You watch people doing things and you think ‘I can do that. I can try that.’”"
Quote from a Health Precinct client

3. Structured groupwork
Where knowledge and skill gains are improved by being amongst people with similar conditions, clients are able to observe and learn through groupwork. Relatable behaviour is reinforced and the perception of activity complexity is reduced, which regulates behavioural ability and self-control.

“"We put them in an environment where they are likely to meet people who are in a similar situation and if they enjoy that social interaction then the likelihood is that they’re going to stay.”"
Quote from a Health Precinct staff member

4. Social environment
Where opportunities for informal development of social networks exist, Health Precinct clients felt socially connected and supported by shared values, beliefs and trust. This instils a sense of belonging, motivating clients to adopt long-term healthy social and physical behaviours.

“"It’s something that I can do at home that isn’t gonna do me any damage because I’ve done it at the gym and I know what to do.”"
Quote from a Health Precinct client

5. Self-care and independence
Where new knowledge, skills and taught healthy behaviour are transferrable, clients feel empowered and have ownership of their continued health, which facilitates a self-regulated and sustained change in healthy behaviour and independence.

“"You accept their knowledge and that they weren’t going to push you over the edge. They’re going to push you to where they think you can reach. I like that very much."
Quote from a Health Precinct client

Acknowledgements
This project was funded by the Welsh Government through Health and Care Research Wales. We thank all of the Health Precinct participants, staff and local partners for their support and willingness to take part in this research.

Research team: