WELLNESS -TACKLING OBESITY IN SUNDERLAND & THE NORTHERN REGION

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Context and partners

The Chief Medical Officer's report (2005) evidences that "people from higher socio-economic groups take part in more leisure-time activity than those from lower socio-economic groups". This finding is reflected in Sunderland, where only 26% of the population currently undertakes the recommended amount of physical activity (PA), and so the health implications are significant. So not only do we start from a very poor baseline of general health, but we have a ticking time bomb for the future.

We recognise our residents have limited understanding and awareness that their lifestyle choices - smoking, eating habits and physical inactivity - are detrimental to their health. We additionally have an ageing population, suffering the legacy of our City's industrial heritage of heavy industry - coalmining and shipbuilding - resulting in significant challenges in meeting care requirements for illnesses such as Chronic Obstructive Pulmonary Disease.

The City of Sunderland and its partners believe that a traditional approach to developing policy and delivering services will not deliver the required improvements. Therefore, a **new** service is developing in Sunderland, Wellness, providing exercise and life style opportunities, advice and education, which combines appropriate strengths from Community and Cultural Services with the Primary Care Services of the Sunderland Teaching Primary Care Trust (STPCT), and linking with the City's obesity strategy. We believe this partnership will both provide a step-change in health *and* release cost savings in effective interventions in health, and reduced pressures on mainstream budgets in the long-term as the government requested in the Gershon report (2004). The following case study outlines in detail progress to date.

What and where is Wellness?

This service aims to provide a preventative service to improve the health status of the local community, via targeted programmes and pathways to support individuals and communities suffering from, or likely to suffer from ill health (for example CHD, obesity, stroke, depression, type II diabetes, poor mental health, social isolation, general sedentary life style, pre- and post-surgery support, and health education - including nutrition and general lifestyle advice).

Former fitness suites in the City's Crowtree, Washington and Puma Leisure Centres have been converted into Wellness Centres, enabled through Neighbourhood Renewal Funding in 2003/2004. They now have state-of-the-art Techogym equipment which allows individuals to measure their activities and also enables data to be collected which supports future intervention programmes for both the LA and the STPCT. Further NRF money has also been secured to enable further Wellness Centres to be located within the Seaburn Centre and Houghton Sports Complex in 2004/2005.

There are also schemes co-located with other services. Active England Funding (Sport England and NOF) of £750,000 capital and £150,000 revenue has also been secured for a Wellness Centre to be included within the Sunderland Northwest *peoplefirst* Centre, currently being developed in the City alongside the City Hospitals Minor Surgery and Minor Accidents Unit, Sunderland Teaching Primary Care Trusts NHS Primary Care Centre, Deerness Park Medical Practice which includes Four GP's and a Dispensing Local Retail Pharmacy.

Delivery Plan

A 5-part action plan has been produced, covering

- Evaluation, monitoring and commissioning
- Wellness facility development
- Communication, marketing & branding, and consultation
- Chronic disease management linked to client groups

• Staff development and training.

Strategically at each stage, action groups will obtain 'sign off' from the Wellness Strategy Group which will act as the monitoring agency, and operationally each action group will nominate a responsible chair.

Monitoring and Evaluation

A series of stretching targets are included in the 2nd Generation Local Public Service Agreement (LPSA 2G) between the City and the PCT, to

- Increase levels of PA in 'high risk' groups where the preventative effect of increased exercise amongst people is moderate or strong
- Increase the number of people (aged over 16) in the City participating in exercise and PA, focusing on the inactive population

Further monitoring and evaluation of the Wellness Service will also be undertaken:

- A Lifestyle Survey to measure overall increases in PA & other lifestyle changes
- Wellness Centres' equipment linked to the ICT system to monitor individual performances & improvement
- The GP referral programme will be evaluated using pre- & post- questionnaires & physiological measurements
- Reductions in prescribing costs will be monitored
- Client questionnaires to monitor behaviour change & health improvement.

Communication and Consultation

Community and Cultural Services hosted a Regional Health Conference, on 7 February 2005, at the Sunderland Seaburn Leisure Centre, in order to establish the future direction for Wellenss in relation to the government's white paper for health inequalities (DoH, 2004). This was viewed by the group as an ideal opportunity to collectively bring together key partners from across the region, and to begin developing a regional delivery plan.

A meeting was held between Community and Cultural Services and the Strategic Health Authority, and several key issues were discussed including endorsements (formal, regional) and commissioning (maintenance of quality standards; budget; external evaluation; corporate governance; partnership – joint working upstream).

References

Chief Medical Officer (2004) At least five a week London: Department of Health
Department of Health (2004) Choosing health-making healthier choices easier London: DoH
Gershon, Sir P (2004) Releasing Resources to the Front Line –Independent Review of Public
Sector Efficiency London: Cabinet Office

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