Prevention and Enablement Model (PEM)

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PEM: An Introduction

- A 2 year test and learn initiative which took place across Basildon, Colchester and Tendring (Essex Local Delivery Pilot Areas) started in May 2020
- The model was formed through a strategic partnership between Active Essex, Essex County Council Adult Social Care and Sport for Confidence CIC
- The overarching theme was to encourage and support individuals living with disabilities and/or long term health conditions to be more active by using a whole systems approach

Objectives

SYSTEM To develop system-led opportunities for disabled people and those with longterm health conditions and to encourage them to be active in their local community, reconnecting them to their local area.



EMBED To embed physical activity in the system, and to redesign a targeted pathway to achieve this.



To create practice-based learning opportunities that transform ways of working by increasing the confidence and capability across the integrated workforce in using physical activity as a tool for health.



To test and learn the impact of this transformation and build a case to scale up across Essex.

Key Milestones of PEM



from workforce development

evidence for the model.

The Workstreams of PEM

PEM was delivered by a system of unique partners in the Adult Social Care Sector and focused on four interrelated workstreams to achieve the objectives. These were:



Workstream: Community Partnerships

Aims:

- Delivery of inclusive activity sessions by a Sports Coach and Occupational Therapist which supports individuals, to receive bespoke support and reach their goals.
- •Co-design timetable of activities with individuals accessing the sessions and support access to the leisure centre.

• No labels' approach to sessions where all conditions and/or disabilities are welcome.

Doing something that I used to do a long time ago but haven't done since being disabled, has really kind of made me realise that there's this whole world of sport and things I can do that. It has made a huge difference to my life, a huge difference. I am happy and I didn't know I could feel this happiness. I always thought I was going to feel sad.

PEM service user



Workstream: Community Partnerships

Key Findings:



For every £1 invested, this model created a £58.71 return of Social Value



Significantly increased physical activity levels. Levels were similar to Sport England 'Active Lives' activity levels for those living without a health condition/disability



Increased levels of happiness, self-efficacy and life satisfaction. The Life satisfaction monetary value estimated at £22,230 pp per year



Self-reported increases in confidence, social connections, learning of new skills and feelings of being more independent



Slight decrease in Selfreported service-use across social care and health services (GP appointments, day care etc)

Evaluation







The Value of PEM - WELLBY

- Pioneering use of latest (2021) HM Treasury economic guidance on wellbeing
- Wellbeing, life satisfaction improves from 5 to 7 out of 10
- Economic value of £22,000 per person, per year
- Sport for Confidence prevention could be up to 12 times more cost effective than NHS treatment

Table 4. Health and wellbeing outcomes in PEM service users as a function of length of involvement and comparisons to Active Lives (AL) data.

| Outcome | About to start | Less than a month | Up to a year | More than a year | AL data: no disability | AL: limiting disability |
|-------------------|-------------------|-------------------------|-----------------|---------------------|---------------------------|----------------------------|
| Sample size | 21 | 32 | 57 | 68 | 107621 | 22091 |
| Life satisfaction | 4.84 | 6.7 | 7.24 | 7.93 | 7.48 | 5.86 |
| Happiness | 5.05 | 6.88 | 6.96 | 7.52 | 7.5 | 6.02 |
| Anxiety | 6.47 | 4.67 | 4.93 | 4.48 | 2.95 | 4.28 |
| Worthwhile | 5.16 | 6.86 | 7.63 | 7.73 | 7.67 | 6.39 |
| General health | 2.6 | 2.68 | 3.12 | 3.01 | 4.19* | 2.93* |
| Self-efficacy | 3.1 | 3.26 | 3.73 | 3.92 | 3.91 | 3.32 |
| Trust locals | 3.4 | 3.7 | 3.53 | 3.25 | 3.43 | 3.2 |
| Loneliness | 1.84 | 1.9 | 1.71 | 1.7 | 1.48 | 1.82 |

Notes: AL - Active Lives Survey (2015-2019)

* Different answer options are used in this survey for this question: Active Lives has 5 - Very Good; 4 - Good; 3 - Fair; 2 - Bad; 1 - Very Bad; The PEM survey follows the Understanding Society scale: 5 - Excellent; 4 - Very Good; 3 - Good; 2 - Fair; 1 - Poor. Higher numeric scores are expected on the Active Lives scale as a consequence; someone with good health would yield a value of 4 in Active Lives and 3 in the PEM survey.

Reduced Care Needs and Service Use

- Moderate self reported reduction by patients of day care (important in context of it being very unlikely to be able to reduce a fixed care package in the time frame)
- Significant reduction in informal support where patient has ability to reduce their care
- Reported reduction in emergency care

 Table 8. Self-reported changes in service use by PEM participants and associated cost savings.

| Service | Average level now | % using a lot less – (minus) % a lot more | % using a bit less – (minus) % a bit more | Reduction per person* | Unit cost** | Savings per person |
|---|----------------------|---|--|-----------------------------|----------------|-----------------------|
| Day care (sessions/month) | 9.97 | -3% | -3.00% | -0.105 | £74.05 | -£93.02 |
| Formal support (hours/week) | 61.86 | 0.00% | 4.50% | 0.278 | £17.71 | £256.36 |
| Informal support (hours/week) | 41.81 | -6.50% | 19.60% | 0.140 | £17.71 | £128.99 |
| Hospital admission (instances/6 mo.) | 2.62 | 0.00% | 6.80% | 0.018 | £1,854 | £66.06 |
| GP visit (instances/month) | 2.35 | 0.00% | 4.10% | 0.010 | £39 | £4.51 |
| Ambulance call-out (instances/month) | 1.56 | 2.20% | -4.50% | 0.002 | £125 | £2.34 |
| Total | | | | | | £365.23 |

*Based on the (arbitrary) assumption that 'a bit less' is a 10% reduction in service use and 'a lot less' is a 25% reduction in service use

**Sources: Information from the finance department of the Essex County Council on the average cost of a day care session and an hour of domiciliary care; PSSRU Unit Costs of Health and Social Care for hospital admissions, GP visits and ambulance call-outs.

Recommendations

- Apply learning from PEM to other preventative and early help programmes
- Embed physical activity into systems in a targeted and sustainable manner
- Understand needs and resources within systems
- Co-design, co-fund, and adopt whole-systems, evidence-based, place-based and preventative approaches
- Extend educational approaches, along with ongoing mentorship/support
- Track changes in system, workforce and individuals over time and integrate additional objective measures to more fully understand impact



The Future

Public Health and Adult Social Care have committed £1.35 million (subject to governance) to procure a 3-year Essex-wide service that takes the learnings from PEM.

Vision: To provide early help and preventative support to adults living with physical disabilities, learning disabilities and/or long-term health conditions, through the use of physical activity.



