

One You Leeds Extension Review

June 2020

Adults and Health Directorate

Authors: Eleanor Clark, Commissioning Manager

Liz Boniface, Health Improvement Principal (Healthy Living)



Contents

1. Purpose and Background	3
2. About One You Leeds	3
2.1 Overview	3
2.2 Model of Delivery	4
2.3 Challenges and Developments	4
2.4 Contract Management.....	5
3. Service Review	6
3.1 Well-Led	6
3.2 Performance	6
3.3 Safe	10
3.4 Effective.....	11
3.5 Client Involvement.....	13
3.6 Case Studies	14
4. The Service in Context	16
4.1 The Position in Leeds.....	16
4.2 Covid-19.....	17
4.3 Best Practice	17
4.4 Value for Money	19
5. Conclusions	19

1. Purpose and Background

In 2017 it was decided to commission a new service to reduce levels of lifestyle-related illness, mortality and health inequality across Leeds by supporting people to choose healthy lifestyles. The core principles were:

- A person-centred holistic approach focussed on prevention and early intervention addressing multiple lifestyle behaviours, as opposed to focussing on single lifestyle behaviour issues
- A universal equitable service with a focus on people living in deprived areas of Leeds
- Interventions and activities underpinned by strength based approaches
- Creativity, innovation and flexibility
- Build on the assets in individuals and families, recognising the contribution that clients make to improve their own health and wellbeing
- Co-production and co-design with clients and potential clients at the heart of service development and delivery
- Development and delivery grounded in existing / emerging intelligence and evidence of need as well as being flexible and responsive to meet emerging need in the future.

The resulting new service, branded as One You Leeds, started in October 2017. The contract value was £1,619,221.00 per annum. The contract is for 3 years with an option to extend for up to 30 months. The initial contract period therefore expires in March 2021.

This review provides an overview of the work and progress of One You Leeds and considers whether to recommend extending the existing contract. It is structured around the themes of the framework used to monitor quality of our services, namely well-led, performance, safe, effective and client involvement, as well as contextual considerations such as the position in Leeds, best practice and value for money.

2. About One You Leeds

2.1 Overview

One You Leeds is the brand name of the city's primary healthy living service and is delivered by Reed Wellbeing and Zest. Since October 2017, One You Leeds has been commissioned to provide an integrated service to support people to make behaviour changes around smoking, weight management, healthy eating and physical activity. It is delivered from community venues across the city, with a focus on deprived areas. On average, the service receives approximately 2,500 referrals per quarter.

2.2 Model of Delivery

The service has different elements which make up the integrated model that supports someone depending on their need. These are:

- *Be Smoke Free*
Support to stop smoking, mostly one to one, but with some group sessions. Abstinence is monitored at four weeks following their quit day, which is validated by taking carbon monoxide readings. Participants have the option of following a Cut Down 2 Quit Programme. Outcomes are broken down into those who are and are not pregnant.
- *Manage Your Weight*
A 12-week programme delivered mainly in groups, but with the option of one to one support.
- *Eat Well*
Looks at ways to change behaviours to achieve long-term healthier eating and drinking.
- *Move More*
Designed to help those who are inactive to become active. An initial assessment determines how this could be achieved, such as joining physical activity sessions or a walking group, or through a referral to Active Leeds if this is more appropriate.
- *Cook Well*
One-off taster sessions and 8-week courses that sit under the banner of Jamie Oliver's Ministry of Food. The courses teach a full range of cooking skills to be able to prepare quick, healthy and cost-effective meals, along with simple nutrition and healthy eating information.
- *Your Support*
This is an additional option for additional support with any of the above if someone has specific vulnerabilities which could impact their access to or engagement with the programme.

2.3 Challenges and Developments

The following are some examples of current challenges and recent developments showing how the service reacts quickly and appropriately to changing circumstances.

- *Covid-19*
One You Leeds is delivered in community settings and was therefore unable to continue in its original form once social distancing and restrictions on movement were implemented. The service quickly developed a remote delivery model, whereby group and individual support could be provided either via Microsoft Teams or telephone. This was available to smoking, weight management and healthy eating clients before the end of March. Alongside this, resources including

exercise videos, motivational posts and information booklets were developed for physical activity and went live on a closed Facebook page in early April. The biggest challenge was to redesign the cooking courses. This began with trialling an online taster session that people could join from their own homes. This worked well and became part of the service offer in early May. The service is now developing a full online course. The initial indications are that although referrals are lower than normal, engagement has increased and feedback has generally been positive. Remote provision is therefore likely to remain in some form even when in-person delivery is possible again.

- *E-Cigarette Pilot*

Evidence suggests that e-cigarettes can help people to stop smoking, with a number of services across the country reporting good results. It was therefore decided to pilot this approach with One You Leeds. The six month scheme would see clients offered a maximum of 3 vouchers over 3 months to purchase an e-cigarette device and accompanying maintenance items. Vouchers would be only valid in the seven shops who had signed up to the scheme. Independent vape shops were chosen over other retailers such as supermarkets because they are much more likely to possess accurate knowledge and have built up useful experience in supporting smokers to switch to vaping. The pilot was due to start in April, but has had to be put on hold for the time being because of Covid-19.

- *Respiratory Pathway*

A new high risk respiratory pathway for participants using oxygen has been introduced. This includes providing home visits (for only a small number of people) as well as support at clinics.

- *Obesity Pathway Network*

One You Leeds is working with other Tier 2 and Tier 3 services via the locally developed Obesity Network to increase peer support between services, share best practice and improve relationships. The network has been established to ensure the effectiveness of the end to end care pathway and improve experiences of people accessing services.

2.4 Contract Management

There is a robust contract management process in place which involves regular meetings and communication between LCC and managers from across the One You Leeds consortium. Examples include:

- Quarterly contract meetings take place to oversee performance and service development.
- Quarterly quality meetings to look more in-depth at a particularly area of focus in line with the Quality Management Framework.
- Informal service development meetings as needed
- Bi-annual meetings with Ministry with Food.
- Yearly review of overall performance and target setting.

3. Service Review

3.1 Well Led

The service is overseen by a Board which comprises of people with a range of experience. There is a clear governance framework in place defining routes of information and decision-making powers. The service has well-structured management team overseeing key functions of the service; an overarching operational manager, 2 health and wellbeing coach managers, a partnership manager, and a programme support manager. The Leeds operational manager reports to their national operations manager who works across multiple contracts. Furthermore, they have a clinical lead who is mostly funded via this contract. The clinical lead has responsibility for overseeing staff development/ competencies and programme development.

As the lead contract provider, Reed Wellbeing holds sub contract reviews on a quarterly basis with Zest which feeds into the contract management meeting. There is wide variety of training and CPD opportunities for staff, including clinical support and shadowing colleagues. Staff received regular feedback regarding performance via observations and competency development framework.

The management team attend local partnership meetings/ forums in order to build working relationships with other services/ health professionals. This aims to improve pathways for clients moving between services and minimise duplication.

3.2 Performance

Throughout the life of the contract there has been close working between the LCC contract management team and One You Leeds to manage, understand and analyse performance and trends. This began with a review of the performance framework contained with the specification once the delivery model was in place, which resulted in changes to measures and / or targets. This is reviewed on an annual basis to ensure that it is still fit for purpose and accurately represents the work and outcomes of the service.

One You Leeds is proactive about using their data to analyse performance and identifying areas for improvement, implementing changes to address these and reviewing the effects. Examples include:

- Reviewing performance at team meetings so that staff can work together to reflect on practice
- Trialling a fixed-date adult weight management course rather than a rolling programme, to see whether this approach sees improved engagement and outcomes
- Monthly review of client feedback
- Introducing 'Change for the Better' health awareness sessions as part of the outreach offer
- Improving the integration of service elements, making it easier for clients to access different types of support

- Creating action plans where specific measures need improvement.

The following data provides an overview of the key performance area up to the end of March 2020. This does not include the first six months of service, since changes to the recording system and indicators preclude direct comparisons. Engagement and completion data is recorded under the quarter in which the individual starts with the service, so the period measured in 2019/20 varies for each indicator. Periods other than the full year are noted where appropriate. The service dashboard, which includes all measures, is included at Appendix 1.

Key Performance Indicators

One You Leeds performs consistently well, with most targets being met. KPI 13 is not yet a full year's worth of data although (it is unlikely to meet target for the year due to courses cancelled in quarter 4 due to COVID 19). KPI 12 has seen a recent decrease because of staff turnover but is expected to improve in the coming months.

Indicator		Target	Threshold	18/19	19/20
KPI 1a	No. of clients booking a first appointment	5,000	4,500	-	6,852
KPI 1b	% who are new clients	60%	n/a	-	75%
KPI 2	% of clients who are booked an appointment and attend a first appointment	70%	67%	71%	77%
KPI 3	% of clients attending a first appointment who live in within target deprived areas	55%	n/a	-	59%
KPI 7a	% of clients who attend smoking cessation and set a quit day (non-pregnant)	60%	55%	58%	61%
KPI 7b	% of clients who attend smoking cessation and set a quit day (pregnant)	40%	35%	47%	50%
KPI 8a	% of clients who have quit at 4 weeks following quit day (non-pregnant)	60%	55%	66%	65%
KPI 8b	% of clients who have quit at 4 weeks following quit day (pregnant)	45%	40%	64%	50%
KPI 9a	% of clients who have quit at 4 weeks following quit day which is validated by CO monitor (non-pregnant)	85%	n/a	90%	89%
KPI 9b	% of clients who have quit at 4 weeks following quit day which is validated by CO monitor (pregnant)	85%	n/a	92%	89%
KPI 10	% of clients who complete a weight management intervention and have achieved some weight loss	80%	70%	84%	87%
KPI 11	Average overall weight loss achieved for AWM completers	3%	2.7%	3%	3.1%
KPI 12	% of clients who complete a weight management intervention and have achieved 5% weight loss	30%	25%	26%	24%
KPI 13	No. of adult cooking courses completed	62	n/a	70	41

19/20 Note:

KPI 7 / 8 / 9 / 13 = Q1-3

KPI 10 / 11/12 = Q1-2

Measuring Impact

Participants complete questionnaires at the start and end of their course to measure change. The service also makes follow up calls after 6 months and 12 months to see whether this change has been maintained. It is often very difficult to measure the impact of our services, so it is a key strength of One You Leeds that they are able to do this so well.

KPI 4: Pre-& post-questionnaires completed Target: 90% / Threshold: 80%	%	No.	Time Period
Your Support	100%	63	18/19 Q3 - 19/20 Q3
Manage Your Weight	72%	742	18/19 Q2 - 19/20 Q2
Move More	100%	352	18/19 Q3 - 19/20 Q3
Eat Well	96%	209	18/19 Q3 - 19/20 Q3
Cook Well	95%	309	18/19 Q3 - 19/20 Q3

KPI5 - Attempted follow-ups at 6 months Target: 90% / Threshold: 80%	%	Successful Contacts		Time Period
Your Support	97%	71	76%	18/19 Q1 - 19/20 Q2
Be Smoke Free	89%	992	74%	18/19 Q1 - 19/20 Q2
Manage Your Weight	100%	351	51%	18/19 Q1 - Q4
Move More	100%	316	79%	18/19 Q1 - 19/20 Q2
Eat Well	97%	197	67%	18/19 Q1 - 19/20 Q2
Cook Well	90%	229	54%	18/19 Q1 - 19/20 Q2

KPI6 - Attempted follow-ups at 12 months Target: 100% / Threshold: 90%	%	Successful Contacts		Time Period
Your Support	100%	48	53%	17/18 Q4 - 18/19 Q4
Be Smoke Free	100%	749	62%	17/18 Q4 - 18/19 Q4
Manage Your Weight	98%	214	66%	18/19 Q1 - Q2
Move More	100%	168	69%	17/18 Q4 - 18/19 Q4
Eat Well	100%	115	51%	17/18 Q4 - 18/19 Q4
Cook Well	98%	137	42%	18/19 Q1 - Q4

It has been more difficult to achieve the target in the weight management category as there is a less clearly defined end point given that it is a rolling programme. This figure has improved considerably recently following the introduction of a new reporting system, which makes it easier to identify where questionnaires are missing.

Below are some of the behaviour changes that have been achieved by One You Leeds participants. This shows that a significant proportion of people are able to maintain the changes they have made.

		After 6 months	After 12 months
Your Support	Increased wellbeing	83%	91%
Be Smoke Free	Abstinent (non-pregnant)	59%	48%
	Abstinent (pregnant)	66%	46%
Manage Your Weight	Reduced weight	84%	83%
Move More	Increased walking	55%	31%
	Increased IPAQ score	77%	63%
Eat Well	Increased fruit and veg intake	53%	71%
Cook Well	Maintained cooking changes	94%	95%
	Maintained eating changes	96%	97%

Note that it is not the same people in both columns

Benchmarking

One You Leeds compares very well against similar services in other areas. For context, Dorset has a similar population size of 800,000 and is averaging at 6,500 new referrals per year. One You Leeds averaged 9,783 referrals over the last two years. Salford saw 1,300 clients in a year, with a budget of just over £1m for a population of 237,000, while Leeds see an average of 5,609 people per year with a budget of £1.6m.

- **Access**

Clients living in Quintile 1		Clients living in Quintile 1 and 2	
OYL	Dorset	OYL	Salford, Suffolk, Bolton, Blackburn & Darwen, Hounslow
52%	25%	65%	50-60%

An evaluation of services in the north east of England (Cheetham et al, 2018) noted that access was higher for more deprived target groups, for women and older people. This is repeated in Leeds, where in 2019/20 65% were women and the most common age group was 55-64 (22%).

- **Outcomes**

The figures for OYL and Dorset are from 12-month follow ups for those who started in 2018/19. The north east figures come from the service evaluation noted above which were post intervention but please note these were not long term follow up figures.

OYL	Dorset	North East
67% had still increased physical activity	67%	63% achieved physical activity goals
83% had lost weight since start (on average 6% weight loss)	57% maintained target weight	40% achieved weight management goals
40% were still not smoking	42%	37% achieved stopping smoking goals

Particularly notable are the smoking abstinence figures. Studies that have collected follow up data from 52 UK stop smoking services have mixed results ranging from 6% - 56% for 1 year abstinence. Therefore it is encouraging to see that 40% of Leeds' large sample were still abstaining from smoking after 12 months.

The PHE guideline recommends a KPI regarding 75% of completers having any weight loss. One You Leeds are consistently above this, averaging 85.5%. As regards to retention, 60% is considered to be an acceptable measure for weight management interventions. Manage Your Weight currently has a 62% retention rate, while Eat Well stands at 63%, Move More is 69% and Cook Well is 67%. All these interventions therefore have a retention rate above the recommended 60%.

With regards to follow ups, PHE recommend this should be a minimum of 35% for 6 months and 20% for 12 months of people completing the programme. One You Leeds have achieved 52% for 6 month- and 64.5% for 12-month follow ups. Both of these averages are much higher than the minimum recommendation. On the 12-month follow ups an average 6% weight loss from initial baseline to the follow up point is being seen so far. This is therefore showing an effective long term impact on people who have attended 8 or more sessions, which we can be fairly confident about considering the high follow up rate.

3.3 Safe

One You Leeds place great importance in ensuring the safety and wellbeing of both clients and staff. There are a range of processes and practices in place that demonstrate good practice in this area.

The needs of each client are identified both at referral stage by the PSS team, and in more detail by the coach when they attend their first appointment. This may identify support needs that mean they are placed under the Your Support strand, or a physical condition of which the Move More coach needs to be aware.

All staff have completed Level 2 Safeguarding Training and undertake online training every year. Managers are also trained as Level 3 Designated Safeguarding Officers so that there is always coverage. A monthly safeguarding bulletin is distributed that highlights various elements of safeguarding and how to prevent, identify and respond to certain situations. Staff are encouraged to discuss safeguarding issues at their team meetings to share best practice with colleagues and learn from and issues / concerns experienced. To ensure understanding and identify any training needs, staff took part in a "quick-fire" anonymous survey asking, "do you read the safeguarding bulletin?"

and “do you understand the difference between a safeguarding concern and an incident?”. The latter got a 100% response, while the former was 50%. As a result, the service is taking steps to raise the issues in each bulletin in different ways, such as using it as the basis of the safeguarding item on the team meeting agenda. Taking this discussion route also gives people the chance to learn from the wider team, especially the PSS team who handle safeguarding concerns over the telephone.

Lone working, venue risk assessments and policies are updated annually and are completed once a member of coaching staff starts delivering the service. The lone worker assessment looks at the risk to staff members and participants and the control measures that have been put in place, for example a panic alarm and texting their manager if working later than 6pm. Safety guidance is given when the coach submits their assessment and has a discussion with their line manager about their responses, for example, travelling to and from venues via public transport. Risk assessment information is available for all members of staff to view within the shared files. Risks are rates Low-High and are re-visited every 12 months or when something at that venue changes, e.g. new coach / change of key contact / new risk identified.

Although not a contract requirement, the service is currently working towards achieving the Domestic Violence Quality Mark Level 1.

Information about incidents is communicated appropriately both within the service, for example to managers, Safeguarding Lead and HR business partner as required for review and implementation of new actions, and with LCC.

3.4 Effective

The QMF process has been put on temporary hold because of the Covid-19 response and so One You Leeds has not yet been able to complete this theme. However, observation of the service’s activities and ways of working highlights key strengths in this area. In particular, outcomes data evidences that behaviour change is achieved and has demonstrable results for participants. There is also a great deal of follow-up monitoring, from which we can see that these behaviour changes continue to have an impact after people leave the service, which is our key aim.

The strong focus on outreach and partnership working means that One You Leeds joins with a range of organisations and networks to be able to reach new clients and address their needs, such as holding joint ‘A Change for the Better’ sessions, working within the Obesity Care Pathway or keeping up to date with services in order to signpost effectively. There is a culture within the team for continuous improvement in order to provide the best service possible, including new training and the shadowing of colleagues.

Healthier Living Services Evaluation

An extensive service evaluation was conducted in 2019 to explore how well the One You Leeds model has been working so far, and assess what improvements could be made. There was also an additional aspect of looking at the broader healthy living system in which it operates. Social Marketing Gateway were commissioned by Public

Health to conduct the consultation to ensure neutrality to the enquiries. The consultation engaged a number of key stakeholders – service users, One You Leeds staff and health professionals (referrers and partners). The key findings for each stakeholder group were:

Health care professionals

- Having an integrated service with one referral route was thought to be much easier to navigate.
- OYL was the most well-known of the healthy living services and the service they said they make most referrals to.
- Weight management (ranked number 1) and smoking cessation (ranked number 3) were both ranked in the top 3 healthy living areas needing support.
- It was generally felt that the referral process was straight forward with the majority referring weekly / daily.

Service Users

- The majority of service users said they would recommend the service and rated both their experience and perceptions of staff highly.
- Where OYL were praised by service users, this was consistently due to a good experience and feeling strongly supported by the staff.
- The variety of options within the service enables accessibility for those with learning and physical disabilities. This was particularly highlighted through the Cook Well, Eat Well and Your Support service strands.

One You Leeds Staff

- OYL staff also rated the service highly, thinking that most elements of the service were either somewhat or highly effective.
- They provided some very insightful, detailed and valuable feedback regarding the service. They highlighted many strengths of the service such as the team ethos and internal communication, their service user engagement methods, how the service supports maintenance through ongoing follow up / support and also the amount of knowledge and skill within the team.
- Overall, they have said they think it does support positive and sustainable behaviour change, particularly for participants living in the more deprived areas of Leeds. They commented that it is strongest at helping those who are ready to change, older people (over 50 years), those who are less educated on healthy living, and people who can be flexible with their time.

There was agreement across all stakeholders that the main challenge was that the service needed more capacity for the volume of people needing support for healthier living in Leeds but also particularly where there are complex needs (mental health, dietetic and language in particular). This was thought to be an issue across the system, however One You Leeds was sometimes seen as the only answer. It was also felt that there was a need to improve awareness and understanding across health professionals of the system, how it interconnects and what each service offers.

There were a number of recommendations and ideas around service improvement specific to OYL. Many of these have been actioned by Reed Wellbeing where possible or are in stages of development and further discussion.

3.5 Client Involvement

Clients are fully involved in the setting of their plans and goals, which can be adapted as needs change. There are a number of ways of engaging with the service, depending on the needs of the client, such as one-to-one, group sessions, paired one-to-one, drop ins, and by phone, email or video calling. Clients can change method if they feel it would be more beneficial to them. All decisions are made collaboratively between the coach and the client, for example engagement route or nicotine replacement treatment options.

Participants are able to provide feedback via:

- *Feedback forms*

These are distributed when someone completes their course. It covers topics including venue suitability, session times and course content. Examples of changes made in response are increased evening sessions and the introduction of weight management drop-in sessions, which people could access after completing the course.

- *Service Evaluation*

The evaluation undertaken in 2019 (described in 3.4) included 328 client surveys and 16 client interviews, as well as the regular feedback forms.

- *Evaluation of Service*

This is a quarterly survey that is sent by email to all participants, thereby including people who have not completed their course and so missed the feedback forms. The questions mirror those used during the 2019 survey to enable consistent and ongoing analysis. Results from the first survey included:

- Overall satisfaction – 82%
- Adviser being friendly and welcoming – 98%
- Understanding your needs – 89%
- Support with helping to plan next steps – 77%
- Help with finding other support for you from other services – 66%. In response, a segment of the team meeting was dedicated to the importance of effective signposting and onwards planning, and the signposting data capture process was updated to more accurately record the work going into this.
- Booking on to the programme was timely and easy – 90%

Compared with the broader service evaluation, results are either the same or improved, demonstrating that learning from the evaluation is embedded in service delivery.

- *Ad hoc consultation*

The service also seeks client input on specific issues. Views on the remote delivery mechanism are currently being sought from participants, as well as asking people why they did not engage with this approach, to see how this can be improved or adapted to meet more needs.

3.6 Case Studies

Stephen

Stephen joined One You Leeds in June 2018. He contacted the service because he was overweight, with type 2 diabetes and high blood pressure. Stephen joined three of the programmes: Move More, Adult Weight Management and Cook Well as he had the challenging target of losing 18kg (2st 11lb) in only 12 weeks. The plan created for him included attending a walking group and an exercise class each week, changing his eating habits and cooking more nutritious meals.



The result was a dramatic weight loss that exceeded his own expectations. Having set a target of 18kg, Stephen actually lost 33kg (5st 2lb). Consequently, his BMI moved into the healthy range (18.5 and 24.9), having previously been considered obese (with a BMI of 35.3). Stephen no longer needs his diabetes medicine and has had his blood pressure medication reduced. He can also now walk much further without pain or shortness of breath.

Stephen is still active, going to the gym 2-3 times a week, and two One You Leeds Move More classes a week. He has implemented long-term healthier choices, rather than a short-term fix. Stephen intends to continue his current physical activity and lifestyle changes and has joined a men's social group since he found the friends he made on the One You programmes incredibly motivating.

Grace

Grace wanted to stop smoking and stay quit, both to improve her physical health and because she had had enough of smoking. Grace used Champix as a treatment and had regular face to face and then telephone contact with the service over 12 weeks. She says that the coaches are good at listening, are non-judgemental and give good, solid, sound advice. This was great alongside support from family. The current Covid-19 situation has been stressful, but she has been able to use quitting as a motivation to maintain healthy behaviours.



Grace has now been quit for 3 months. Her carbon monoxide reading started at 22ppm and fell to 1ppm. The benefits have been saving money, improved breathing (no wheezing), no smokers' cough anymore, improved senses of taste and smell, softer hair and improved complexion.

Julie

Julie had tried weight loss clubs before but had not managed to either lose weight or keep it off. Julie lost 12.2kg with One You Leeds.

“Well what can I say, every part of the course has been exceptional. I cannot thank One You Leeds enough, especially Claire. She has been a true support during the course and also after at my weigh-ins. Claire is a very motivated person in everything she does which she cascades down to the people in her class. I have suffered with my weight over many years, previously losing weight then putting it back on but this program has taught me how to maintain a healthy lifestyle in a positive way making changes in my eating habits and having a positive relationship with food and wine! I would highly recommend this course to others. Once again, thank you so much”.



Krzysztof

Krzysztof wanted to attend the service to get a better idea of healthy eating because of health complications linked to type 2 diabetes. He hoped to lose weight, reduce snacking and improve the regularity of meals. Krzysztof found the resources very clear to understand and well presented. He mentioned that this is the first healthy eating service that he has attended that provided a translator who was very clear and high quality.

Whilst on the programme Krzysztof reduced his weight by 7kg in 5 weeks. He achieved this by swimming and attending the gym, reducing snacking, changing ingredients and making meals himself, and reducing portion sizes. Krzysztof has found daily activities such as walking around easier, and said it was down to losing the 7kg. He said he felt very happy with the entire programme and quality of service.

4. The Service in Context

4.1 The Position in Leeds

Supporting healthier living remains a key priority for both health systems and government. Recently published documents such as the NHS Long Term Plan and the prevention Green Paper “Advancing our Health: Prevention in the 2020s” clearly emphasise that ‘Prevention is better than Cure’. As these plans take shape and develop over time, integrated healthier living (or health and wellbeing) services will be vital for supporting the delivery of these plans. In terms of local strategy, Leeds has an ambition to be the ‘Best City for Health and Wellbeing’ and a vision to ‘be a healthy

and caring city for all ages, where people who are the poorest improve their health the fastest' (Leeds Health and Wellbeing Strategy, 2016-2021).

Since the launch of One You Leeds there have been some significant changes to the local infrastructure. The three CCGs have merged into one, Local Care Partnerships were developed with primary care at the heart and we have seen the introduction of Primary Care Networks (PCNs). As part of this, there have been changes to GP contracts and NHS commissioning. PCNs have budgets for additional staffing roles within their teams which could include various health and wellbeing-focused roles such as social prescribing, health and wellbeing coaches, dietitians, podiatrists, and occupational health. The CCG launched a new tier 3 adult weight management specialist service in April 2019, as well re-commissioning third sector-delivered social prescribing services. Both of these services are key parts of the healthier living broader system. Furthermore, there have been suggestions of new NHS funding for targeted services for weight management (hypertension and diabetes-associated obesity) in primary care, and hospital-based stop smoking services. Leeds Teaching Hospitals Trust have submitted a bid to deliver an in-house service that increases the raising of stopping smoking conversations. Finally, there are many CCG (Health Inequalities Fund) and PH priorities (NHS Health Checks) that clearly link with and depend on the provision of healthier living services.

It will be important to have the infrastructure locally to support developments that may result from the Long Term Plan. Leeds will need to retain a specialist healthier living service for these plans to work. One You Leeds is well positioned to support plans to increase capability in the NHS workforce around healthier living. The service will need to continue to adapt as the national and local context changes. With the NHS increasing its focus on preventative interventions which connect closely with healthier living services, it will also be possible to potentially increase the effectiveness and efficiency of how these providers inter connect and complement one another. Commissioners and providers will need to be flexible as the plans and systems evolve. The various PH led forums and networks developed over the past 12 months will help to support this (commissioner forum, provider networks etc.).

In terms of population health priorities, tobacco and dietary risks have been identified as the two highest risk factors for total deaths whilst a high BMI and tobacco use have been identified as the two leading risk factors for years lived with disability (Institute for Health metrics and evaluation, 2017). Tobacco is still the leading cause of total deaths, whereas high BMI has now overtaken tobacco for causing an increase in years living with disability. Dietary risks have increased in their contribution to total deaths. Leeds is showing the same order of rankings as England, but has a slightly higher percentage of total deaths caused by both tobacco and dietary risks (Tobacco: Leeds 16.8% / England 15.3%; Diet: Leeds 15.4% / England 14.6%). It is conclusive from this that tackling obesity, dietary factors and smoking will have a significant contribution to reducing both years living with a disability and total deaths in Leeds.

4.2 Covid-19

There has been evidence emerging that being older, having a health condition, a high BMI and / or smoking could contribute to an increased risk of both complications and / or death from this new infectious disease. Furthermore, people with a BMI over 40

have been identified in government guidelines as being in a vulnerable group from Covid-19.

The impact of the outbreak is having a significant impact on how people live their lives. There are reports from people living with obesity saying they are struggling more to control eating due to increased anxiety, and depression. In one study, 70% reported more difficulty in achieving weight loss goals and 61% reported stress eating (Almandoz et al, 2020). It is known that obesity can sometimes stem from mental health issues such as depression, which may increase in the pandemic. Both smoking and obesity rates are significantly higher in more deprived areas where there are greater health inequalities.

One You Leeds is therefore vital to the city's response to the pandemic, since it addresses key risk factors, targets people living in deprived areas, supports many people with chronic health conditions and the average age of people attending tends to be older.

4.3 Best Practice

In March 2018, The King's Fund published "Tackling multiple unhealthy risk factors", which discusses current practice and evidence relating to tackling multiple unhealthy risk factors (Evans & Buck, 2018). The research builds on a previous report (Buck & Forsini, 2012) that showed significant co-occurrence of smoking, physical inactivity and poor diet in England. The co-occurrence further impacts on life expectancy. For example, an adult in mid-life who smokes, drinks in excess, is inactive and eats unhealthily is **4 times more likely** to die in the next 10 years than someone who does none of these things (Khaw et al, 2008). This research relating to co-occurrence of multiple risk factors has been quoted frequently as a strong rationale for having integrated healthier living services, particularly when focusing on more deprived populations. PHE specifically recommends that stop smoking services are delivered as part of an integrated model.

Two types of integrated health and wellbeing service (IHWS) models have been identified. One You Leeds represents a single-behaviour change IHWS which was quoted as the most common approach taken for urban IHWS designs. This is because it retains specialist service elements within an integrated design.

It is recommended in NICE guidelines to adopt an integrated approach to weight management;

'Local authorities, working with other local service providers, clinical commissioning groups and health and wellbeing boards, should ensure there is an integrated approach to preventing and managing obesity and its associated conditions. Systems should be in place to allow people to be referred to, or receive support from (or across) the different service tiers of an obesity pathway, as necessary. This includes referrals to and from lifestyle weight management programmes.' (NICE, PH53)

In order to do this an obesity network has been developed by Public Health and the CCG, to which key representatives from all services, particularly One You Leeds, are

invited. This has been very effective with high attendance across all the services and very positive feedback has been received. It has helped to ensure the services work in partnership and share best practice.

Furthermore, multi-component weight management interventions are recommended in order to address various aspects of lifestyle that could impact on health and weight. It is a strength that One You Leeds can provide structured group courses as well as physical activity sessions, one to one support where needed and cooking courses. All of these support weight management as well as individual factors relating to diet and physical activity. Interestingly there are some signs that obesity may be starting to reduce in Leeds as recent data relating to hospital admissions shows a different trend to England. Obesity related hospital admissions have been falling since 2018 whilst other areas are increasing. This could be an early indicator that the joint efforts to reduce obesity in Leeds are starting to have an effect (including strategic work on the healthy weight declaration).

There is some emerging debate over whether weight loss targets are really appropriate as a service performance measure. This is considering the rising complexity of obesity connected with mental health, the increase in numbers of people accessing the service being at higher BMI categories, and the barriers reported in consultations mostly related to individual / environmental factors. For example people experiencing great difficulty with changing entrenched and challenging relationships with food. This is an area that is in discussion with One You Leeds around how these kinds of barriers could be addressed through the programme and whether any changes could be introduced.

It is less common to commission a Ministry of Food branded service as part of an integrated model design, although Jamie Oliver Group have commented that a few local authorities are looking to consider this more. The Leeds service has been referenced by Jamie Oliver Group recently as their 'flagship service'. The learning of cooking skills is very important as an aid to support development of practical skills that are often needed for healthier living and weight management.

4.4 Value for Money

The annual budget for One You Leeds is £1,619,221. This represented a saving of 12.2% on the cost of the previous services. Furthermore, it is relatively inexpensive in comparison with other areas. A Health Needs Assessment carried out prior to the commissioning of One You Leeds found that the cost per head of population spent on healthy living services around the country ranged from £3 to £7. One You Leeds' budget means that it costs an estimated £2.03 per head. Although it is not possible to directly compare with other services given variations in model and capacity, it seems fair to conclude that the service is cost effective for Leeds, given the uptake and outcomes achieved to date, combined with the low cost per head in relation to population.

It is also important to note that the service has an impact beyond those who sign up for formal support, since the website and social media channels provide self-help tools and links to the national One You and other campaigns. For example, One You Leeds recently took part in the Healthy Heart campaign. The table below shows the video

views and reach. Interestingly, be smoke free, eat more healthily and manage your weight were the most highly viewed, but manage your weight had the highest clicks and reach. Over the period of the campaign, the heart age tool (this has been added to the OYL website) had the 2nd highest number of landing page views.

	Link Clicks	Video views	Reach
Be Smoke Free	100	18,396	11,240
Reduce Alcohol	696	9,624	20,032
Be More Active	567	10,370	23,097
Eat More Healthily	791	19,435	30,760
Manage Your Weight	880	17,218	35,903

5. Conclusions

This review has determined that:

- One You Leeds is a high quality, well performing and proactive service that addresses need, is well led and has a committed staff team.
- It continues to fulfil the city’s ambitions around providing an integrated preventative health service that targets those with the greatest need.
- The service has proved to be flexible and innovative and is well placed to work within a changing health environment.
- One You Leeds is embedded across the city and works very constructively in a multi-agency way to deliver the best possible outcomes for its clients, and has played a key role in a number of initiatives.
- This service is good value for money.
- There is a clear and demonstrable need for this type of provision to continue, particularly in response to Covid-19.

Therefore, the recommendation is to extend the contract. Although 30 months are available, it is recommended that 24 months be taken at this time, taking the contract up to the end of the 2022/23 financial year. This will provide a good level of stability for the service, clients and staff, whilst being mindful of the financial challenges that the council is facing.