

Changing the Physical Activity Landscape Project

Interim Report: Quarter 2 April – June 2010

Prepared on behalf of **County Durham
Sport** by:

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people, partnerships, performance

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1. Introduction

The NHS County Durham and Darlington investment for the Changing the Physical Activity Landscape (CPAL) project is targeted at increasing participation in physical activity in County Durham and requires robust planning, monitoring and evaluation in order to deliver the expected outcomes. A Theory of change methodology was chosen as it supported the project management team to define shared outcomes, set clear and unambiguous indicators to monitor progress, measure overall achievement and capture the learning to inform service efficiency improvements.

A performance management and evaluation framework has been developed to collect the data and evidence from services, programmes and projects against their agreed performance indicators. The framework will provide County Durham Sport and NHS County Durham and Darlington with information on each element of the delivery against the project outcomes.

The purpose of this report is to provide the steering group with a detailed picture of the progress against the project outcomes to date. It was felt that a detailed report was relevant for this period given the significance of this initial delivery phase. This should only be seen as an indication of the progress at the time of writing, as the continual development and delivery work being driven by the projects means that the level of progress in the programme is constantly changing.

In January 2010, 23 projects were supported through to stage two of the application process (six small, 12 medium and five large projects). County Durham Sport and HelmePark have provided advice and guidance to the projects through a series of workshops in January 2010 and face to face support. In adhering to the principles of world class commissioning those projects who were not put through to stage two were also supported with a series of half day workshops designed to ensure that they had the best opportunity to access subsequent funding, either through CPAL or other sources. In March 2010, the successful projects received their funding agreements from County Durham Sport and begin the delivery of the physical activity interventions.

2. Progress from previous report

The previous interim reported completed in March 2010, highlighted a number of challenges moving forward, that were required to be addressed to support the effective delivery of CPAL project. This section details the recommendations from that report and then sets out the actions that have resulted. Any recommendations that are still to be addressed are detailed in section six of this report.

In response to the recommendations, the CPAL management team have undertaken a number of actions to address the recommendations.

Recommendation 1: Increased awareness and engagement of GP's.

An important issue raised by the projects and partners highlighted the need to ensure an increased awareness level by health professionals, partners and other agencies of the projects commissioned within the CPAL project. It was felt that this was vital in supporting projects to engage participants from the referral pathways to projects and activities.

In response, County Durham Sport (CDS) have delivered a CPAL networking session to widen project and partner awareness of the CPAL funded work. The project manager has undertaken a series of presentations with practitioners to address any lack of clarity about the CPAL project and how it can

support the referral pathway. In addition a joint marketing strategy for the CPAL project has been proposed and agreed between NHS County Durham and County Durham Sport. A high level campaign to promote the funding, the physical activity opportunities available and the CPAL brand was felt to be important particularly with regard to supporting projects with recruitment.

Recommendation 2: Clear and detailed timeframes for applying for future funding.

The management team have worked to put into place a clear and detailed timeline for phase two. This timeline clearly detailed the deadlines for each stage in the commissioning process. In response to suggestions raised during the initial evaluation, potential applicants have a specified period of time to develop applications ahead of the submission date. The management team have also responded to concerns on the length of time available and have extended the timeframe to allow large projects to carry out and demonstrate full engagement of the relevant networks, partnerships and service users.

Recommendation 3: The documentation used in the application process needed to be consistent and provide clear guidance to applicants.

The documentation provided for applicants in phase one has been adjusted to reflect a need for more information to be passed to potential applicants in the initial stages. The application form, guidance information and the operational plan required in stage two have been aligned to ensure that the information required at each stage builds into a comprehensive planning document without duplication or contradictions. This action will allow potential applicants to have clear guidance and awareness of the requirements for CPAL funding at each stage of the process.

Recommendation 4: Clear guidance provided at the briefing sessions to ensure a greater clarity regarding the full process and level of detail needed by applicants.

Briefing sessions have been changed to reflect an emphasis on the process applicants will be expected to go through. Detailed information will be provided to potential applicants on:

- The outcomes and priorities for this phase of CPAL funding;
- What is meant by the CPAL target groups and the NHS risk register;
- The timescales and deadlines associated with phase two;
- The support available to successful projects;
- The scoring criteria and expectations of the selection panel.

It is clear from the data gathered to inform this report, that there are two issues which need to be addressed and action taken, as current actions have had limited impact for the commissioned projects. The two issues will be outlined further subsequent sections of the report:

- GP engagement with projects to identify CVD risk participants;
- Understanding by the projects of, and access to the CVD and health referral pathways.

3. Projects commissioned by CPAL

Through the two stage commissioning process, 19 projects were successful in securing a funding award from County Durham Sport. This has allowed £2,310,862 to be allocated to a range of organisations across County Durham to provide further opportunities to deliver physical activity to a targeted audience. The matched funding that has been provided by those projects to support the delivery of the CPAL projects is £988, 658.

The planning process for CPAL was initiated by representatives of NHS County Durham choosing the Theory of Change (TOC) as the planning and methodology. It was felt the robustness required through causal modelling would ensure focus on project outcomes rather than on the delivery of outputs.

A Steering Group comprising representatives from County Durham Sport and NHS County Durham supported by HelmePark used TOC to identify the long term outcome for the project and detailed the evidence which demonstrated the way in which it would contribute to the strategic outcomes of partners. Following ratification by the LSP Health and Wellbeing Partnership the long term outcome was developed further to provide a detailed outcomes pathway, relevant performance indicators, actions and evidence base.

This rigorous process was then used to establish the project delivery plan, performance management framework and evaluation framework. In addition it was the basis for preparing the commissioning templates and project application forms.

The assessment process that has been used to underpin the decision making process has been applied consistently across all the submissions received by the steering group. Each application to the CPAL funding has been individually considered by a panel, against a scoring criterion, which was independently devised to reflect the guidance presented in the pre application material. A number of conditions were adhered to throughout the assessment panels to ensure that no bias could be assigned to any individual application.

By adhering to the conditions above, any variances in the scoring were generally very low and allowed for the panel to debate each section in detail and develop a sound rationale for the recorded scores. These conditions included:

- Minimum of 4 independent panel members attended each assessment session:
- Each panel was supported by key partners and representatives from across County Durham:
- Attendance by CPAL management team (at all sessions to ensure consistency of scoring:
- Each panel session was externally chaired:
- The feedback and scoring for each projects was recorded by an external organisation:
- Panel reviewed application documents in full – each application received reading and scoring time which was consistently applied:
- Robust and consistent scoring charts used to evaluate each application and provide a rigorous basis for comparison:
- Final meeting of management team to agree the successful applications based on recorded scoring and panel comments.

Table one provides an overview of the projects commissioned in round one. This information relates to those projects who have received CPAL funding and is accurate at the time of writing this report. Changes to this data are however likely subject to future reporting processes and project success against their individual outcomes.

Table 1: Project overview CPAL round one

Organisation name	Project outline	Funding classification and project value		
		Classification	CPAL Funding	Match Funding
Durham Amateur Rowing Club	Delivery of an 'Explore Rowing' programme, provision of learn to row courses, mentoring and ongoing participation in rowing.	Medium	£48,234	£27,966
Durham County Council	Community outreach exercise referral support and delivery, incorporating the provision of motivational interviewing and development of physical activity opportunities in target SOA areas, delivered in partnership with NHS Darlington – links to Leisureworks project below.	Large	£489,320	£80,651
Leisureworks	Targeted community outreach exercise referral provision covering the Derwentside area only.	Medium	£143,852	£40,635
Durham County	Expansion of the DCC Wellness on Wheels project incorporating the development of legacy gyms in target delivery areas.	Large	£467,492	£395,318
Mobex North East	Delivery of adventurous activity, introducing outdoor physical activity in local areas, combining low and medium challenge outdoor and arts activity e.g. walking, biking, scrambling, flag walks and creative adventures.	Small	£17,616	-
Gateshead Thunder Rugby Football League Club	Development Officer and Player delivery and support of 'Thunder walks' progression to fitness activities through to touch rugby aimed at unemployed target groups.	Medium	£44,000	£9,000
Rugby Football Union	Encouraging community involvement in Rugby officiating, provision of qualifications and fitness conditioning sessions for those who demonstrate an interest.	Medium	£37,500	£22,000
Tantobie Community Association	Extension of community based activity programme specifically focussed on Tantobie.	Medium	£27,574	£42,506
County Durham and Darlington Health Improvement Service	County-wide expansion of the Get Active Get Cycling, developing supported community cycling opportunities and independent cycle clubs in the long term.	Large	£343,382	£123,161
County Durham and Darlington Health Improvement Service	An extension of the Get Active Exercise Referral Programme with community based exercise sessions being developed for participants exiting the referral programme.	Medium	£43,130	£45,150

Age Concern Durham County	Extension of the over 50's community exercise programme delivered in partnership with Durham County Council and Leisureworks to be re-focussed around CVD risk target groups.	Large	£390,170	£151,084
Nouveau Dance CIC	The DanceFit programme aims to engage adults (50+ years) with low activity levels into fun and social dance activity.	Small	£11,896	-
Platinum Physiotherapy and Personal Training	Specialist support and exercise delivery to groups with low back pain issues that have resulted in a decrease in physical activity participation.	Medium	£76,750	£17,197
Community Gems CIC	Extension of the 'Strictly Dancing' project to deliver sixty dancing and fitness taster sessions over a 5 week period, culminating in eight week courses leading toward an annual dancing and fitness festival each summer.	Medium	£55,425	£16,020
Peterlee Town Council	Delivery of social physical activity sessions from the Pavilion sport and community facility in Peterlee. Mixing physical activity sessions with social activities in the form of bingo, quizzes, pool, darts etc.	Medium	£61,499	-
Durham Wildcats Basketball Club	Workplace physical activity programme, developing five-a-side style basketball coaching and leagues with workplaces in Aycliffe Business Park.	Medium	£24,610	£4,350
Derwentside Community Tennis Partnership	Tennis based activity to change the behaviour and skills of people aged 40 to 60 and their families at Shotley and Benfieldside Tennis Club.	Small	£8,120	£2,540
North East Keep Fit Association	Development of an increased KFA trained workforce to deliver sustainable community fitness sessions in target areas.	Medium	£14,560	£6,000
Sedgefield 75 Swim Club	Structured and semi-structured lightweight coaching aimed at supporting adults to reach a standard of swimming competency to encourage take up of the current free swimming initiative in County Durham.	Small	£5,732	£5,080

4. Performance summary up to 30 June 2010

Section four of this report provides information with regard to the progression of the CPAL project against the agreed key performance indicators and evaluation framework. Table two provides an overall summary of how the commissioned projects are collectively achieving against the CPAL long term outcome of: "people (and their households) aged 40 – 74 with an estimated and actual risk calculation of CVD greater than 20% increase their level of participation in physical activity" and the supporting outcomes. The data gathered is representative of the recruitment and delivery that has been achieved by the commissioned projects between the period of February 2010 and the 30th June 2010.

The majority of projects received their funding agreements and sign off during March 2010 after undertaking a period of supported work to complete their operational plan and outcome pathways. 95% (18 out of 19) of the commissioned projects have returned the quarterly reporting form. In addition a number of additional requests have been made to projects following the analysis of the data they have submitted, to gather additional information and to undertake a verification process on the information supplied.

Table 2: Performance Summary

KPIs	CPAL Project target	Milestone (year 1)	Progress to 30.06.2010
1. The number of participants with an estimated or actual risk of CVD greater than 20% recruited to the project.	3300	1100	133
2. Number of participants with an estimated or actual risk greater than 20% of CVD increasing participation at 6 months.	2040 (58%)	680 (58%)	n/a
3. Number of participants reporting a completed health check.	n/a	n/a	8
4. Number of participants from family members of the CVD risk target group recruited to the programme.	1500	500	16
5. Number of family members of the CVD risk target group increasing participation at 6 months.	1200 (80%)	400 (80%)	N/A
6. Number of participants from other group recruited to the programme.	1000	1000	409
7. Number of the other group increasing participation at 6 months.	2400 (80%)	640 (80%)	35
8. Number of participants with an estimated or actual risk of CVD referred by their GP to the project.	6600	2200	3
9. Number of participants referred to the project by Health trainers, pharmacists, exercise referral programmes and other health providers.	750	200	44
10. Number of participants that have self referred to the project	1200	300	281

The performance data has shown that a total of 558 people have been recruited by the projects (CVD risk, family members and other categories). Of this figure over 50% (281) of the participants have self referred into the projects, suggesting that the public awareness of the physical activity opportunities that

are available is increasing and individuals have a strong understanding of how to access the projects or sessions.

Recruitment of the CVD risk group category to the CPAL projects

133 participants from the CVD risk group have been recruited in the period to the end of June 2010. This reporting period covers the first quarterly delivery period for the stage 1 projects. In the first 3 months of delivery the recruitment figure is 12.1% of the year one target (1100 participants). The recruitment figure is therefore below, where it might be expected to be at this stage. This highlights an area of significant concern about the lack of recruitment activity and data supplied, in particular by the large projects (projects receiving more than £80,000 funding), with only three of the five projects reporting any progress towards their recruitment target. While progress has been made against other elements of the individual projects outcomes pathway, it is imperative that these large projects work effectively in quarter two to recruit the target population.

By end of the next reporting period, which will cover approximately 6 months of delivery for the stage 1 projects, it is expected approximately 550 participants will need to have been recruited for the project to be on track – approximately half of the overall year 1 milestone. This presents a significant challenge for the strategic manager, the steering group and the large projects.

Recruitment of participants from the family members and other category to the CPAL projects

Those projects, focused on recruiting family members of the CVD risk group and the 'other' categories have made significant progress towards the target for year one, with 85% (425 participants) of the year one target achieved. It is important that the projects work to sustain these participants in the next reporting period to contribute to the CPAL performance measures with regard to sustained participation.

Sustaining increased participation

The performance measures relating to an increase in physical activity have not been applied at this stage as the evaluation framework determined that the evidence would be collected at the six month stage of participants' recruitment. As most of the projects have only been active for between three and four months, this data is not yet available. However two of the projects have been able to provide initial information relating to the retention of participants, and increases in their levels of physical activity. The initial analysis of this information suggests that these projects are well placed to sustain an increase in participation at six months for participants and meet the long term outcome.

Worth particular note in this regard is Cardi Back. This project is aimed at supporting participants between 40 - 74 with a past history of lower back pain, who have low levels of physical activity to increase and maintain their level of physical activity following participation in an eight week intervention programme. The intervention aims to address the underlying back pain, while concurrently providing physical therapy support and activity programmes to gradually increase level of physical activity. This project has successfully delivered their first programme to 16 participants (the course maximum). This has resulted in 87.5% of people increasing their levels of physical activity over eight weeks, on average moving from approximately five hours of moderate exercise to ten hours of moderate exercise per week throughout the duration of the eight week cardi back programme. In addition the Cardi-Back team have been able to collect evidence to demonstrate changes in health factors over the course of the programme, with participants on average achieving a 1.75kg reduction in weight; 4.43cm reduction in waist size and a reduction in blood pressure.

Similarly, Nouveau Dance has also reported a strong retention rate for their community dance programme, with 92.1% (35 from a group of 38) remaining engaged in the programme since delivery began in March 2010. This provides a strong platform in which participants are more likely to adhere to sustaining their physical activity at six months. This project has provided an intervention that has been well received by the local population, with the year one recruitment target already being achieved (64 participants).

Engaging with health care professionals

The importance of establishing strong and sustained partnerships with health care professionals (i.e. GPs, health trainers and pharmacists) had been identified and described as a pre condition to the CPAL long term outcome. Of the 11 projects that are currently targeting the CVD risk group, 45% (5) have reported a lack of engagement with GP's despite a range of approaches such as individual approaches to GP practices, letters via email correspondence and working with health improvement agencies to establish a coherent targeted approach, being tried to develop partnerships with and increase the awareness of GP's of the CPAL projects as an appropriate referral route for those patients needing to increase physical activity levels.

The projects have also reported an initial difficulty in getting individuals recruited to their projects to access the health check service. This is supported by projects also reporting that participants are not clear on the role of the health check and have reported that the NHS Health Check leaflets are confusing and provide mixed messages on how to access a health check.

Monitoring and evaluation

The majority of the round one projects have been able to complete the monitoring requirements of the CPAL project and the evaluation team have provided individual support to address any concerns or issues. There have however been some reported issues regarding projects ability to engage participants in completing the 7 day recall questionnaire. This is used by the CPAL project to assess any increases in participation levels of individuals. Some of the difficulties are related to the individuals that are recruited and their needs in terms of additional support with the paperwork. An additional factor appears to be reluctance by some of the individuals recruited to complete the questionnaire on a regular basis. Where projects have been successful in completing the data however the information has been largely provided in a clear and detailed manner.

As noted earlier in the report, the majority of projects returned the reporting template on time. While many of the projects reported no activity within the recruitment element of the reporting, progress had been made against the supporting outcomes detailed in their unique performance management framework. Through further examination some projects should have begun recruiting while others were still in the development stage with an intention to recruit in subsequent months. This has provided an interesting challenge regarding the monitoring process and gaining a clear understanding of when projects should be recruiting participants to their programmes. A change to the monitoring process would support the evaluation in providing a clear progress report for individual projects.

Awareness of the CPAL project

The importance of ensuring that individuals and organisations are aware of the CPAL project had been identified as a pre condition to the CPAL long term outcome, as increasing public awareness of CPAL provides a greater opportunity for participants to be engaged. 281 participants have self referred to the projects within this quarter, suggesting that this area of work is effective and delivering the required

outcome. It is important that this work continues to reduce the possibility of any drop off in future funding rounds. Further detail against this outcome is provided in section five.

Those projects which have been able to demonstrate recruitment to their projects have utilised face-to-face contact with potential participants effectively. The process of providing new participants with a person to relate to appears to have been particularly successful in ensuring the people attend the sessions.

Value of CPAL to local organisations and to participants

The CPAL project has to date allocated £2,310,862 to a range of organisations across County Durham to provide further opportunities to deliver physical activity to a targeted audience. This funding has provided local organisations with the opportunity to generate additional funding directly benefitting the county residents and the successful round one projects have provided £988,658 of match funding to support the delivery of the CPAL project. This equates to 43% of the CPAL funding award. If this level of matched investment were to continue along similar levels throughout the duration of future funding rounds, this would turn a £5 million investment from NHS County Durham and Darlington into approximately a £7.15 million resource for County Durham.

Strong partnerships have also started to be developed throughout the period January to June 2010, with some projects reporting that partnerships have been built between health practitioners, exercise referral projects and local organisations, indicating a shared understanding the potential value of the CPAL project, however this needs to be consistent across all projects rather than the sporadic success indicated by the projects. Participants are also providing a strong indication that they value the opportunities that are available to undertake more physical activity.

Worth noting in this section is the work of the Community Gems project. The project delivered the final CPAL funded session on the 19th July 2010 to a group at Blackhall Community Centre. The group have enjoyed the activity so much that they are intending to take a short break for summer, reforming in September 2010, with the costs to hire the room and instructor being covered by the participants to allow the activity and session to be sustained beyond the CPAL intervention.

5. Impact against the outcome framework

This section of the report summarises how key achievements against the outcome pathway will be addressed. These outcomes were agreed by the steering group and commissioners but not all have been addressed at this stage as the necessary data collection timeframes have not yet elapsed.

Projects and programmes are commissioned and solicited

The CPAL project was set a clear outcome related to the engagement of the target group and was required to ensure that the geographical coverage of the commissioned projects related to the distribution of the CVD risk groups. All the projects commissioned in round one, were therefore required to identify a targeted delivery area across County Durham, which has enabled the steering group to analyse the distribution of the projects. The information has been analysed and has subsequently been used to direct the distribution of round two CPAL funding. Within round two applicants have been asked to focus upon the CVD target group; delivery with a distinct geographical location (south and west of the County) and activities that are seen as readily sustainable such as walking, swimming, cycling and jogging. The assessment process has been developed to ensure that scoring process is reflective of these additional requirements and supports the identification of projects to achieve the CPAL project long term outcome.

The projects commissioned in round one cover a number of private, public and voluntary sectors organisations. The range and size of organisations accessing the funding has provided a depth of ideas, delivery strategies and activities such as a Local Authority exercise programme, health based cycling, private physiotherapy practitioner delivering rehabilitation and exercise sessions to local sports clubs encouraging more people into locally based activities. The role of the Community Sport Networks (CSN) has been an integral to the commissioning process. The CSNs have provided support to applicants during the development of the project bids and the CPAL project has received considerable support from the officers during the assessment panels and project operational planning process to ensure that no project is commissioned which duplicates current provision.

In commissioning the projects, the strategic manager required projects to complete a detailed operational plan. However some of the round one projects have highlighted this process as a challenge to commencing delivery due to their perception of a series of unrealistic timescales, with delivery of their recruitment and activities beginning during April to May 2010.

The original timescales for the implementation of the CPAL funding were:

- September 2009 – The CPAL programme was launched through a series of briefing sessions across the County:
- October 2009 – the deadline for applications to the round of funding:
- November 2009 – Successful projects received their funding awards:
- January 2010 - Projects begin to develop and deliver their projects.

The perception of unrealistic timescales being reported by the projects, may well have emerged as the original timescales, were not fully adhered to and the majority of the projects did not begin the operational planning process until early January 2010, with a series of workshops and one to one support meetings. Projects did not receive confirmation of their successful application and subsequent funding awards until late February and March of 2010. This may have contributed to projects feeling that the development time that was built into the original timeframe between November and February, that they felt was required to get the projects successfully functioning, had been reduced significantly especially for those projects that received their funding awards towards the end March 2010, to a 4 week window leading to delivery in May 2010.

It should be noted that the issues regarding the clarity of the timescales and requirements from projects through the operational planning process, that this process highlighted, have already been addressed by the steering group and recommendations have been implemented to support projects commissioned in round two.

Practitioners and professionals understand the purpose and long term outcome of the project

Letters have been sent to all the GP practices by the Strategic Manager in March 2010 explaining the CPAL project, its focus and directing to a specific section of the County Durham Sport website for further information. This outcome will as previously indicated continue to require a significant amount of focused work to ensure that practitioners are aware of the activities that the commissioned projects are delivering and fully value the role the CPAL projects can have in supporting people to access physical activity in their local areas. Additional interventions have also been initiated in order to widen the awareness and understanding of health practitioners regarding the CPAL projects and activities. Please see the following outcomes for further information.

Steering Group members know what works and does not work from current practice

The assessment process has been conducted in a rigorous manner with a transparent assessment process. The contribution of the CSN has provided invaluable support in identifying projects which might duplicate current provision. An analysis of successful round one funding awards has also been carried out, and which has informed the round two funding scope and focus.

GP Practices refer appropriate patients

A number of activities have occurred in order to raise the awareness of GP practices with regard to CPAL and increase the number of patients being referred to CPAL activities:

- Bi-monthly newsletter sent to all professionals and physical activity providers since first project launched in Feb 2010;
- Presentations have been delivered during March to July to professionals at Get Active Get Cycling launch (March) County Durham Practice Based Commissioning Cluster Managers meeting (April) Sedgefield Practice Managers meeting (May) Derwentside PBC Cluster Reference Group (June) Easington CPAL/Lets Get Moving Launch (July).

However from the evaluation conducted in this period, there is still a significant amount of work that is required to achieve this outcome. The referral data gathered from the commissioned projects highlights two considerable factors, which are impacting on projects:

- Projects have received a very limited number of referrals by GPs (see table 2)
- Only a limited number of projects have reported that they have developed partnerships with their local GP practitioners.

The public are aware of the opportunities available

Through individual marketing and advertising by projects, there has been a significant uptake in physical activity opportunities in the county. This has been supported by County Durham Sport and NHS County Durham with a joint marketing strategy. Individual projects have also accessed support with designing and developing their promotional material to a professional standard to ensure clarity of message to the wider public.

6. Conclusions

The interim monitoring and evaluation has identified a number of successes and challenges, which require consideration by the strategic manager and the steering group.

Recruitment of participants from the CVD risk category

It is imperative that individuals from the CVD risk category are identified and recruited to the CPAL projects. This has been highlighted as an area of concern, in particular in relation to the performance of the large projects within the first quarter. The large projects are the significant contributors to the recruitment of this particular group. A significant shift in the recruitment figures should be expected in the next quarter.

Engagement with GPs

The outcome pathway for CPAL placed the engagement of GPs as a strong pre-condition to the achievement of the recruitment of the CVD risk target group. Currently only one project has reported being able to engage with GP practices to identify people who would be suitable to be referred into the

CPAL programme. This perceived 'block' from the GP practices has a strong potential to limit the impact of the CPAL projects ability to meet recruitment target specifically for the CVD risk group.

Through the Marketing work that has been commissioned, it is important that the issue regarding GP engagement should be thoroughly explored with each project and the individual marketing approaches are identified and examined closely to provide clarity on best practice moving forward.

The CVD referral pathway

The CVD referral criteria and pathway has also contributed to the projects being unable to identify participants' within the CVD risk group. Attempts have been made by individual projects however it does appear that the literature supporting projects has been confusing and unclear. The Strategic Manager should therefore investigate the issues regarding the leaflets with local health check leads and raise the challenges being experienced by the projects. This requires urgent attention to resolve these issues as it appears to be a significant recruitment barrier for those projects wanting to engage the CVD risk category

This work needs to be placed as a high priority moving forward and efforts also need to be directed towards practitioners to support projects to address this challenge in recruitment.

Monitoring and evaluation

The evaluation process itself will need to ensure that individual projects are contacted in good time to ensure the requirements for monitoring are clear and projects understand the importance of accurate data.

Consideration should be given to reviewing the reporting template utilised in this period and for subsequent funding rounds to get accurate timescales on the recruitment period for projects. This will support future judgement on progress and recruitment concerns of individual projects. The template should support projects to profile recruitment targets each quarter to provide clearer progress towards overall target.

In addition to the recommendations to the project monitoring processes, the project management group and the PCT commissioners should give consideration to examining the profiling of the milestones outlined in the performance management framework, to reflect the current project timescales and operational delivery within the CPAL project. This would support the identification of progress clearly towards the overall targets, whilst reflecting the project commissioner timeframes.

Project successes

The interim monitoring process has however also identified a number of early successes for the CPAL project:

- A significant level of additional match funding has been brought into the CPAL project;
- A number of small and medium projects are delivering successfully;
- A number of new posts have been created and people recruited to projects;
- A positive two way dialogue has been established between delivery organisations, the Strategic manager and the evaluation team;
- A responsive process and project delivery has been established which has allowed adaptations to be made to meet the needs of individual projects and CPAL.