Ref:		



Activity for Health Referral Form

Patient/Client Age Tel no. (hom	e)(Mobile)
	Next of Kin:
Surname	Name
Forename	Tel(s)
Address	Relationship
	G.P's Address
G.P. Dr	S. 3 / Na. 355 /
Primary Reason(s) for referral: (as listed in crite	ria)
·	•
Other relevant current other health problems (hat may impact upon intervention):
1	
2	
Other comments and aims:	
Medication: 1	2
3	4
0	7
Possible effects of current medication and/or of	liagnoses on patient's ability to exercise:
☐ Heart rate not an indicator of exercise level	□ Suppression of pain
□ Possible psychological resistance to exercise	
I refer this patient/client in accordance with the	ER scheme guidelines as agreed with the PCT
Referrer's SignatureRefe	errer's Name & details
<u> </u>	
The ED coheme has been explained to me and	I have had an apparturity to ack guartians.
The ER scheme has been explained to me and understand I may withdraw at any time. I give	my consent for relevant medical information to
be passed onto the scheme personnel and sto	
Client signature	Date
Client signature	Date
Optional addition: Are you willing to be contacted	•
sent a one page exercise enquiry at the start of the	scheme, at 12 weeks, 24 weeks and 52 weeks.
Client signature	Date

Background to the Exercise for Health Referral Scheme

Evidence suggests that structured and supervised physical activity/exercise can be effective for those with a number of illnesses and conditions. The primary purpose of the Activity for Health (AfH) exercise referral scheme is to increase the opportunity of those with existing co-morbidities to access and take part in a structured and supervised physical activity/exercise programme.

The AfH exercise referral scheme is a gym-based programme where your exercise referral instructor will tailor an exercise programme to your needs and preferences. You will be able to attend up to two sessions per week at a concessionary rate of £2.50 per session (£1.25 for those on benefits) for 12 weeks, 24 sessions in total, in a supported, motivated and reassured environment.

Who can take part?

who can take part?			
Primary referral conditions			
Condition	Range or scope		
Overweight	BMI 25.0 to 29.9		
*Obese	BMI 30.0 to 39.9		
High Normal Blood Pressure	130-139 / 85-89 mmHg (unmedicated – seated)		
*Hypertension	Less than 179/99 mmHg (stable – medicated)		
*Type 2 Diabetes	Diet controlled or orally medicated and no Coronary Heart Disease.		
Bowel Cancer	In complete remission flowing primary treatments		
Secondary referral conditions			
High Waist Circumference	Males >94 cm; Females > 80 cm (increased risk)		
	Males >102 cm; Females > 88cm (Caucasian) (Substantial risk)		
	Males > 90 cm; Females > 80 cm (Asian)		
*Cardio Vascular Disease	Stable angina		
High Cholesterol	Medicated		
*Asthma	Stable and controlled		
*Osteoarthritis	Mild enough for physical activity to provide symptomatic relief		
*Rheumatoid arthritis	Medication controlled, not during flare ups or active infection		
*Chronic low back pain	In the absence of Red flag s ²		
*Type 1 Diabetes	Stable and controlled		
Inactive >3 months	As identified by GPPAQ		
*Muscular-skeletal pain	In absence of red flags and/or impending surgical intervention		
*Mild to moderate anxiety	HAD Score between 8 - 15		
and/or depression	PHQ9 Score between 5 - 14		
*Risk factors for CVD	Framingham score of >15% but <30%		
*Previous Myocardial	> 6 months post event or completion of Phase III, a clinical		
Infarction	assessment has been completed, the patient is stable .		

Carers are recognised as eligible for referral, were marked with an *

Who cannot take part (Exclusion criteria?

- Body Mass Index < 18.5 kg/m² or >40.0 kg/m²
- Any unstable condition
- Resting blood pressure ≥ 180/100 mmHg
- Red flags symptoms: internationally recognised as precluding a patient/client from
 exercise referral in the case of Chronic Lower Back Pain as they indicate the likely need
 for higher level care / intervention or further information prior to referral: (Thoracic pain;
 Fever; Unexplained weight loss; III health or presence of other medical illness;
 Bladder or bowel dysfunction: Progressive neurological deficit, disturbed gait).

Why can increasing your physical activity levels help?

For general health gains, current recommendations are that adults should accumulate at least 30 minutes of moderate intensity physical activity on 5 days or more of the week. Evidence suggests those who move from an inactive level to low to moderately active levels will maximise health whilst minimising the risk of disease. This general recommendation is in itself sufficient to have a beneficial effect on cardiovascular disease, type 2 diabetes, mental health, muscular disorders and certain types of cancer such as bowel and breast cancer. Evidence shows that this general recommendation may need to be modified to meet the needs of preventing or treating other specific disease.

How are you referred into your local AfH exercise referral scheme?

Your GP, Practice Nurse or other identified health professional should confirmed that regular exercise would be beneficial, that you meet the inclusion criteria and your in a stage of readiness for change, they shall complete an AfH exercise referral form which both you and your GP, Practice Nurse or other identified health professional will sign. You then take to your nearest or most convenient AfH exercise referral delivery site.

What activities can you do?

The Activity for Health exercise referral scheme is predominately a gym-based programme. However, you may have the opportunity to access other activities such as swimming at the discretion of your exercise referral instructor and/or health walks which can be assessed in your local community setting.

Where is your local AfH exercise referral scheme?

The AfH exercise referral scheme runs across the County of Bedfordshire. In South Bedfordshire, the AfH exercise referral scheme is a joint physical activity intervention between Bedfordshire Community Health Services and Leisure Connection at the following sites (Dunstable – Dunstable Leisure Centre, Leighton Buzzard – Tiddenfoot Leisure Centre)

Activity for Health Exercise Referral Scheme – Delivery Sites

Paula Radcliffe Sharnbrook Community Sports Centre, Odell Road, Sharnbrook. Bedfordshire. MK44 1JL

Lead ERI: Lisa Holloway, Tel: 01234 783801, Iholloway@radcliffecentre.co.uk

Oasis Beach Pool, Images Fitness Suite, Cardington Road, Bedford, MK42 0BZ Lead ERI: Sean Betts, Tel: 01234 272100, oasis@bedford.gov.uk

Robinson Pool, Bedford Park, Bedford, MK40 2JS

Lead ERI: Simon Pettifer, Tel: 01234 357157, Work email yet to be created.

Kempston Pool, Hillgrounds Road, Kempston, MK41 9SA

Lead ERI: James Housden, Tel: 01234 843777, Kempstonpool@bedford.gov.uk

Saxon Pool & Leisure Centre, Saxon Drive, Biggleswade, Bedfordshire, SG18 8SU Lead ERI: Natalie Darnell, tel:01462 611 595: natalie.darnell@stevenage-leisure.co.uk

Sandy Sports Centre, Engayne Avenue, Sandy, Bedfordshire, SG19 1BL **Lead ERI:** Tina Jeeves, Tel: 01767 681872, tina.jeeves@stevenage-leisure.co.uk

Flitwick Leisure Centre, Steppingely Road, Flitwick, Bedfordshire, MK45 1TH Lead ERI: Jacqui Ryan, Tel: 01462611575, jacqui.ryan@stevenage-leisure.co.uk

Leisurelines Fitness Suite, Queensbury School, Langsdale Rd, Dunstable Bedfordshire LU6 3BU.

Lead ERI: Tricia Jones, Tel: 01582 884946, JonesT@queensbury.beds.sch.uk

Dunstable Leisure Centre, Court Drive, Dunstable, Bedfordshire, LU5 4JDLead ERI: Carmen Langlais, Tel: 01582 604307 DMdunstable@leisureconnection.co.uk

Tiddenfoot Leisure Centre, Linslade, Leighton Buzzard, Bedfordshire, LU7 2AF **Lead ERI:** Pete Forder, Tel: 01525 375765 : Tiddenfoot@leisureconnection.co.uk