

LONDON BOROUGH OF CAMDEN	WARDS: All
REPORT TITLE Camden's Get Active Programme (GAP)	
REPORT OF Director of Recreation and Public Safety Director of Health & Wellbeing	
FOR SUBMISSION TO Culture and Environment Scrutiny Committee	12th January 2026
SUMMARY OF REPORT <p>There is clear and compelling evidence that being regularly active improves health, wellbeing and social connections, yet many people aren't gaining all these benefits. There is also very strong evidence that exercise is a vital part of treatment and recovery for a range of long-term health conditions, yet effective programmes that support people with long term conditions are generally not in place across the country.</p> <p>The Get Active Programme was set up and piloted to meet these key needs in 2021. The programme enables personalised care and support through a series of appointments and contacts over six months with exercise and behaviour change specialists. Eligible individuals are identified by healthcare professionals and supported into community based physical activity opportunities.</p> <p>Ongoing evaluation shows that the programme is accessible to people from a range of demographic backgrounds and, crucially, supports inactive residents to increase and maintain their physical activity levels, which then positively impacts on their wellbeing and quality of life. From our findings, we can expect nearly three quarters (73%) of people with long term conditions who were inactive when they started the programme to significantly increase their physical activity levels by 3 months, meeting physical activity recommendations: Nearly half (44%) of those who were inactive when starting the service were meeting the physical activity guidelines by 3 months (150+ minutes of physical activity a month), while 29% became fairly-active (between 30 and 149 minutes of activity a week). This is a major outcome, especially as the programme works with people who may need extensive support to gain an active habit.</p> <p>The Get Active Programme is linked to the We Make Camden ambition of supporting "good health, wellbeing, and connection for everyone so that they can start well, live well, and age well", as well as the shared priority for the NHS and the Council on addressing inequalities in health.</p> <p>The Get Active Programme is jointly led by Camden's Leisure Service and Health & Wellbeing Department. It has recently extended into more general practices and funding is being sought through the NHS to enable the programme to reach further.</p>	

Local Government Act 1972 – Access to Information

The following documents have been used in the preparation of this report:

We Make Camden (2022)

Office for National Statistics (ONS) Well-being Survey

Active Lives Survey/data

A validated quality of life & wellbeing questionnaire (EuroQol EQ-5D-5L)

Camden Joint Strategic Needs Assessment

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RECOMMENDATIONS

The Culture and Environment Scrutiny Committee is asked to note and comment on the service update report.

Signed:

Oliver Jones

Date: 22/12/2025



Kirsten Watters

Date: 19/12/2025



1. Purpose of Report

1.1 This report introduces and provides an update on the progress of the Get Active Programme by outlining the service aims, objectives, outcomes and the resident pathway. The Get Active Programme focuses on:

- Building and maintaining relationships with primary care surgeries to triage patients who are inactive and living with a long-term medical condition.
- The use of behaviour change and motivational interviewing techniques to improve physical and mental wellbeing over a 6-month period.
- Technical behaviour change support for the Get Active Specialists provided through Professor Angel Chater at the Centre for Behaviour Change, University College London
- Signposting referred patients to a variety of physical activity options, with structured one-to-one appointments, along with the flexibility to provide additional support as and when required.
- Collecting data to evidence physical activity and health outcomes of Camden residents.

1.2 This report evidences the effectiveness of The Get Active Programme as a physical activity/behaviour change intervention that supports residents living with long term health conditions to increase their levels of physical activity into a longer-term habit.

2. Context

2.1 The Council's Leisure Service work jointly with the Health and Wellbeing Department to lead and develop Camden's physical activity system. The physical activity system consists of "all organisations, people and actions which contribute to promoting, restoring or maintaining physical activity behaviours" (World Health Organisation). The system requires a range of universally accessible physical activity opportunities, such as those available through our leisure centres or parks and green spaces. It also needs targeted services to support inactive residents and address inequalities especially for those facing additional barriers to participation such as long-term medical conditions which is where Get Active is placed.

2.2 The Royal College of Physicians identified physical activity as the "miracle cure" for its strong and consistent treatment impact on conditions including type 2 diabetes, cardiovascular disease, musculoskeletal conditions, obesity and mental health. Although Camden has comparatively high levels of physical activity participation (74% of adults meet the national physical activity recommendations), significant numbers of residents are inactive, meaning they are missing out on these positive benefits.

3. Background to the report

3.1 The most common long-term health conditions in Camden are depression, hypertension, asthma and diabetes. Increasing physical activity levels through the Get Active Programme can assist with preventing and managing a range of long-term health conditions.

3.2 We consulted with local GPs and other health professionals in 2021 to ensure that physical activity programmes met residents physical and mental health needs. Responses came from 77 clinicians. The survey found that:

- 71% of clinicians were confident in exploring ways to be active with their patients, but time was the biggest barrier to providing this support.
- Patients need support to find suitable activities, and to find their motivation to be active.
- 87% of clinical professionals agreed that a service based on behaviour change principles leading to increased physical activity would meet the needs of most patients.

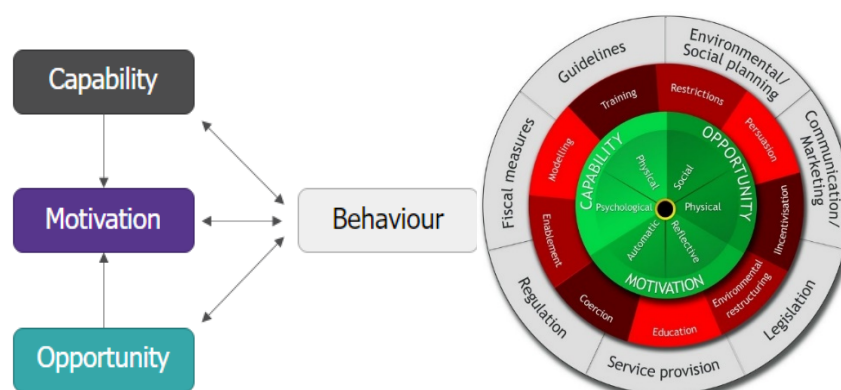
3.3 In response to these findings, the Get Active Programme was developed with the use of a proven behaviour change approach that was piloted in Hertfordshire and promoted as a good practice example by the [Local Government Association](#), with findings published in a research journal. A member of the Health and Wellbeing department developed this approach in Hertfordshire and used learnings to develop a behaviourally informed physical activity approach for the Camden context.

3.4 The aim of the Get Active Programme is to encourage inactive residents to be more physically active, in line with the Chief Medical Officer's recommendations on weekly physical activity targets.

3.5 A key feature of the Get Active Programme is the use of behaviour change principles, specifically the COM-B Model (Figure 1) which focuses on three main components that lead to a change in behaviour (Capability, Motivation, and Opportunities to be active). The Get Active Specialists draw on this model, alongside evidence based behaviour change techniques. In addition, residents are supported to address any barriers or challenges they face to being physically active, with the use of tailored motivational interviewing, and health coaching.

3.6 Figure 1- COM-B Model

The COM-B model:



3.7 The Get Active Programme was developed and piloted from April 2022 in partnership with local general practices to support inactive residents with a long term health condition who were inactive. The behavioural component of Get Active is provided by Dr. Angel Chater, a Professor of behavioural science, who jointly led the development of this approach in Hertfordshire. Dr.

Chater provides quarterly training to the Get Active specialists on their use of the COM-B model and motivational interviewing. As a part of this training, the Get Active Specialists record consultations with residents, with consent. These recordings are then listened to during the training sessions, and the Specialists are given the opportunity to identify any issues they may have faced, and are provided with advice to ensure effective behavioural support for service users.

4. The Get Active Programme

4.1 The Get Active Programme works across 9 primary care centres (GP surgeries) in Camden, and the eligibility criteria is as follows:

- Aged over 18 years
- Camden resident and/or registered with a Camden GP
- Currently inactive (doing less than 30 minutes physical activity per week)
- Living with a long-term health condition(s)
- Expressed a willingness and motivation to increase their levels of physical activity

4.2 Health professionals at participating GP surgeries refer eligible residents to a Get Active Specialist (GAS) based within their surgery team. Their role is to:

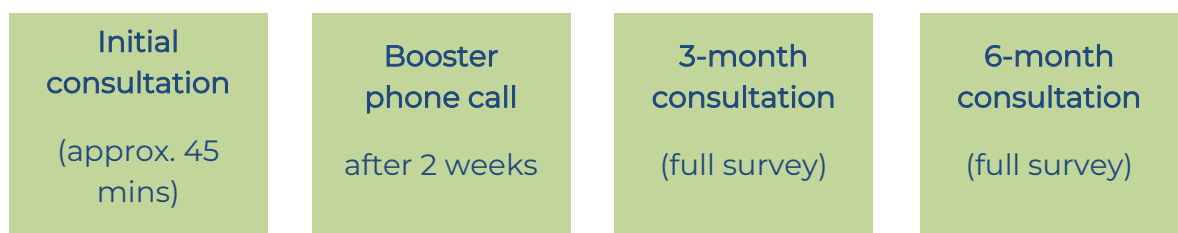
- Arrange and deliver one-to-one brief interventions with patients who have been referred by GPs and practice nurses.
- Engage with patients to understand their capability, motivation, and opportunities to be active, with the use of a range of tailored behaviour change techniques, motivational interviewing and health coaching.
- Support participating residents to set physical activity goals, achieve those goals, and maintain new physical activity behaviours.
- Signpost and support patients to find suitable and appropriate opportunities to be active locally, with a focus on connecting residents to free and low-cost physical activity opportunities across the borough.
- Work with practice staff to promote the service, tailor the approach for patients, provide feedback on patient progress, and offer advice and guidance to staff as required.

4.3 Photo of Participant and Get Active Participant during consultation



4.4 The resident journey through The Get Active Programme is set out in Figure 2. The Get Active Specialists provide additional meetings or phone calls for residents who require extra support to keep them motivated and to help them problem solve issues around continued participation. This ensures that each resident gets tailored individual support.

4.5 Figure 2- Get Active patient journey:



5. Team Structure

5.1 The Get Active Programme is funded by the Health and Wellbeing Department and delivered by members of the Leisure team. The Get Active team is comprised of 7 Camden members of staff:

- One Healthy Living Contract Manager
- One Service Officer
- Five 'Get Active Specialists (3 full time equivalent posts)

5.2 The Get Active team manager and service officer regularly meet and engage with members of the Health and Wellbeing department to monitor the service and make continuous improvements.

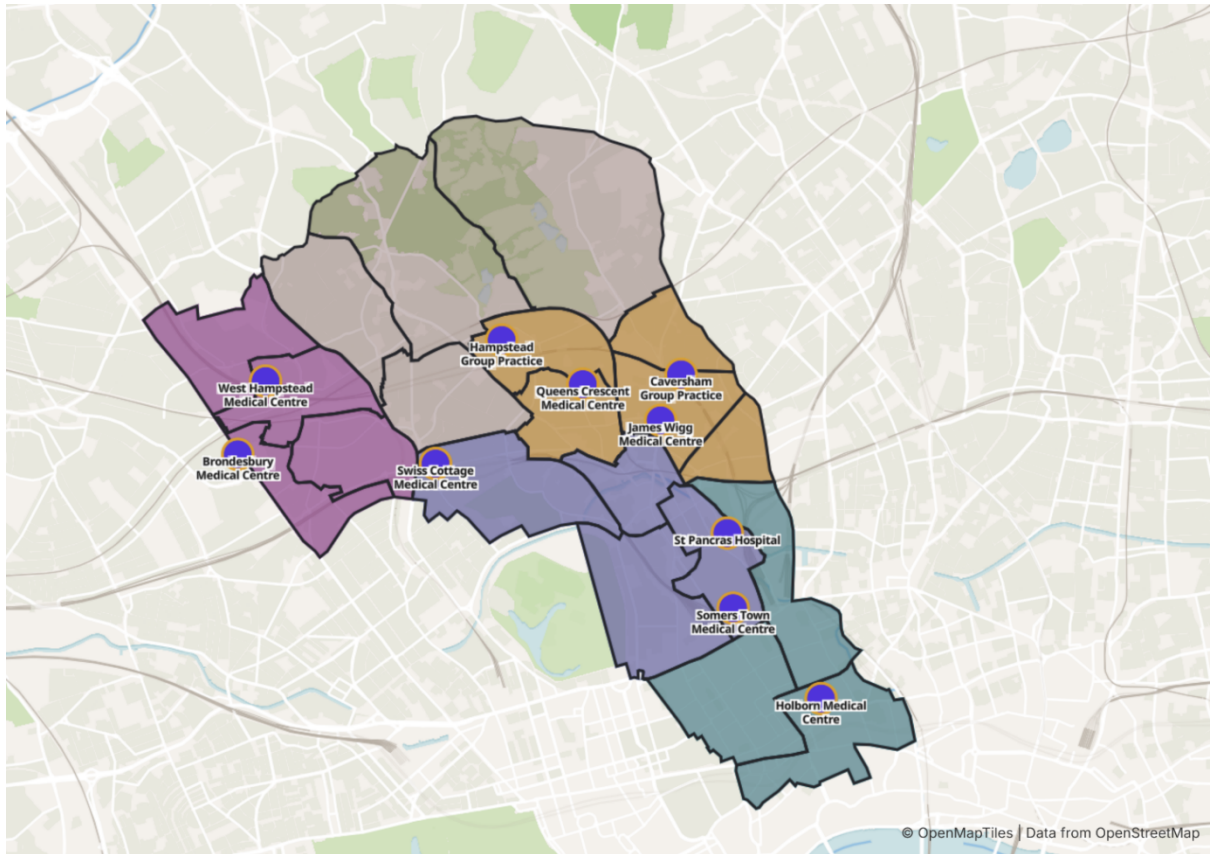
6. Get Active locations across Camden

6.1 Camden has 32 GP surgeries, split across 8 Primary Care Networks (PCN's), of which each PCN varies in the number of surgeries and registered patient numbers. The following 9 general practices have the Get Active Programme embedded in their core services. – see map below in Figure 2. Alongside this standard offer, the Get Active Programme can link with specific initiatives to strengthen their physical activity offer. A good example of this is the proposed partnership with St. Pancras Hospital around supporting people with long Covid to be supported to be more active. This is a test and learn initiative and we will review implications for future practice as this develops.

Caversham Group Practice	Brondesbury Medical Centre
James Wigg Medical Centre	Queens Crescent Medical Centre
West Hampstead Medical Centre	Hampstead Group Practice
Holborn Medical Centre	Swiss Cottage Medical Centre
Somers Town Medical Centre	St Pancras Hospital (Long Covid-TBC)

6.2 The initial 4 GP practices involved in the 2022 pilot of the Get Active Programme were selected on the basis of their strong interest and clinical leadership in physical activity. Members of the Health and Wellbeing Department and Leisure team worked closely with these practices to establish proof of delivery concept. Following the strong findings in the evaluation of the pilot, the service extended into five more general practices (one more general practice to follow in 2026-2027). Future plans can be found in the section on next steps.

Figure 2- Map of GAP locations across Camden



7. Get Active Programme – process evaluation methods

7.1 Outcomes are collected by the Get Active Specialists to facilitate monitoring and evaluation processes. These outcomes include physical activity levels (primary outcome), wellbeing, and quality of life (secondary reinforcing outcomes). Questionnaires are used to collect quantitative data on physical activity and wellbeing outcomes when a resident has consultations at baseline, three months, and six months. Additional qualitative data is periodically collected from surveys and interviews to understand more about resident, staff, and health professional experiences of Get Active, and to identify recommendations for ongoing service improvement. Data are reviewed regularly to ensure that the service runs effectively and continues to benefit residents.

8. Programme Outcomes

8.1 An in-depth evaluation of The Get Active Programme across Camden & Islington was carried out in April 2024. At the time of the evaluation the service had engaged 810 residents, 473 of which had reached the 3-month consultation, and 244 had reached the 6 months consultation. Future evaluations will focus solely on the experiences of Camden residents, but we

have no evidence to suggest differences in outcomes between boroughs. The 2024 evaluation findings showed that:

8.1.1 The Get Active Programme reaches residents from a range of demographic backgrounds:

- 71% of participants were female and 29% were male. This reflects the gender split among similar health and wellbeing services. Although this gender split is expected, the Get Active team work to actively engage more male residents.
- 44% of participants identified as Black, Asian, Mixed or belonging to a non-white ethnic group.
- 55% of participants lived in the 40% most deprived areas. When looking at areas of mid to high deprivation (60% most deprived areas) this represented 86% of the participants.

8.1.2 The Get Active Programme effectively supports residents to be more active – this is the primary outcome for the service, as the research is clear that people who move from being inactive improve their health and wellbeing. Updated physical activity data analysis was carried out in December 2025. This data analysis was carried out on the records of 1285 participants at baseline, 797 at 3 months, and 433 at the 6-month consultation (69 records were excluded because of missing data). The results showed that:

- Nearly three quarters (73%) of residents who are inactive when starting the service increased their physical activity levels significantly by 3 months, with 44% doing 150+ minutes of activity a week. Physical activity levels at 3 months are a strong marker that new behaviours are becoming a habit.
- The above summary data can be broken down as follows: when first referred into the service all participants were inactive (less than 30 minutes of activity a week). By the time residents reached the 3-month mark, 29% became fairly active (between 30 and 149 minutes of activity a week) and nearly half (44%) met the national recommended levels of physical activity per week (150+ minutes of activity a week).
- Participants maintained increases in physical activity by the 6-month consultation. For those participants that had a scheduled follow up appointment at 6 months, their average minutes of physical activity at baseline was 32 minutes of physical activity per week, rising to 190 minutes of activity a week by 3 months, and then 216 minutes of physical activity a week by 6 months. While the most benefit comes from inactive people moving more, further benefits continue as people reach and pass the national recommendations.

8.1.3 The Get Active Programme also evaluated the secondary benefits for participants in terms of wellbeing and quality of life:

- Participants reported improvements across several quality-of-life domains. For example at 3 months the number of participants reporting no problems from mobility rose from 41% at baseline to 50%. Participants with no pain or discomfort increased from 17% at baseline to 26% at 3 months.
- Participation helps improve life satisfaction, rising from 33% at baseline to 45% at 3 months.
- The positive impact of the service on the mental health of participants is reflected consistently in feedback from participants:

Get Active Programme – Participant Feedback on Mental Health

“GAP has helped me a lot with my mental health as well with my physical health. I suffer from long time anxiety, and I always knew I needed exercise but it was this Programme that got me starting with physical activity and the gym regularly. The GAS was very helpful and encouraging, and through the Get Active sessions they helped me to stay on track of my overall health and maintain consistent activity. I am very happy that I was referred to this program.”

8.1.4 Qualitative data collected from residents supports the finding that Get Active is an effective service that residents value:

- The consensus was that participants felt the service helped them build confidence leading to sustained engagement in physical activity they preferred, enjoyed and was local to them. The options available ranged in cost (free – low cost – standard prices) and in the type of activity, the most popular being the free walking groups, activity classes and cycling.
- Get Active also tackles social isolation and loneliness. The majority of signposted physical activity options are in a community group setting, enjoyed through repeated attendance.
- Insights from three participants are included below to highlight the benefits they experienced in their own words:

Get Active Programme – Participant Feedback

“Before I started the programme, I was getting some exercise, but I was beginning to lose confidence particularly about my balance. Since I have been taking your weekly exercise class my balance has improved markedly”- Participant who takes part in a pilot exercise class delivered by one of the GAS.

“The routines I was guided to helped me to avoid faintness, build my capacity to do aerobic exercise and consequently gain fitness and lose

weight in a managed way over the period of a year. This process has greatly enhanced my self-confidence”

“They have helped me to keep things in perspective and focus on continuity, and little and often, and to break down the bigger goals into SMART targets, which has prevented me from stressing when I am struggling to stay motivated and keep on track”

8.1.5 Qualitative data collected from GPs and other health professionals indicated that The Get Active Programme operates effectively in a primary care setting:

- Health professionals shared that they were pleased with the service since it was easy to explain, has broad eligibility, and supports patients to become physically active.
- Several GPs explained that the Get Active Specialists had become a valued part of the primary care team. Health professionals responded positively to the Get Active Specialists attending practice meetings, sharing information regularly via email, and embedding themselves into the primary care team.

9. Challenges

9.1 The Get Active Programme has a strong track record of improving residents' physical activity levels and mental wellbeing/health. However, along with the positive outcomes and success stories, there are barriers faced by the team. All efforts are made to reduce and mitigate the challenges associated with the programme; these include:

- Working closely with clinical colleagues to ensure good quality referrals for people that are motivated and ready to start in the Get Active Programme.
- Maintaining and developing relationships with clinical colleagues to ensure that the Get Active Programme continues to effectively operate in each participating GP surgery.
- Investing in our Get Active Specialists, who are level 4 qualified specialist instructors (i.e. trained to lead exercise for people with different long term conditions) and are in short supply. We work with them to give them access to interesting work “outside usual practice” in the exercise industry, as well as training to ensure they are up to date with training needs and requirements e.g. behaviour change (COM-B) refresher courses 3 time per year, Making Every Contact Count (MECC) and Mental Health First Aid.

10. Conclusion and next Steps

10.1 The evaluation and service data shows that the Get Active Programme effectively engages residents from a range of demographic backgrounds. The programme effectively supports inactive residents with long term conditions to increase and maintain their physical activity levels, which also has positive

impacts on their wellbeing and quality of life. This service helps to meet needs that would not otherwise be met.

10.2 Following these positive outcomes, the Get Active team is exploring ways to support the further expansion of the service. In 2025-26 the Get Active Programme doubled its reach, expanding from 4 to 9 GP surgeries, with the aim to work in 10 surgeries by the end of the financial year. Additionally, in early 2026, we will work with a new Get Active pilot group at St Pancras Hospital. This pilot will provide support to residents with Long Covid who are inactive and will provide valuable learnings on how to continue serving those living with this health condition.

10.3 The Health and Wellbeing Department are currently engaging with clinical leaders to discuss the feasibility of piloting a further extension of this in additional GP surgeries, with the possibility of shared funding (from the ICB) to underpin the service. A challenge that we face is the current major reorganisation of the NHS, which may limit our ability to secure significant funding in the short term. However, the team is working closely with clinical leads to explore the feasibility of joint funding of the Get Active Programme moving forward.

11. Finance Comments of the Director of Finance

11.1 The Get Active Programme is funded recurrently from the Public Health Grant.

12. Legal Comments of the Borough Solicitor

12.1 Legal Services have been consulted on the report and have no specific comments.

13. Appendices

N/A

REPORT ENDS