



# Out of sight, out of mind! Getting genuine social value from discretionary pricing/leisure card





















#### Questions....

- Are we asking for enough from leisure card schemes, and operators?
- What do we measure…if anything?
- What outcomes should we aim for & expect?
- The social model of leisure provision?



## Are we asking enough....?

#### **NO...**

National templates for:

- ■Procuring new leisure centres
- ■Procuring a new leisure management contractor
- Community use of schools...
- ■PPS/open spaces/indoor & built facilities planning
- ■Quest....offers some 'surround sound'

If they are not 'earners' & paying £30+ on a monthly DD – we don't know what is going on...

.....and there is no template or strong guidance



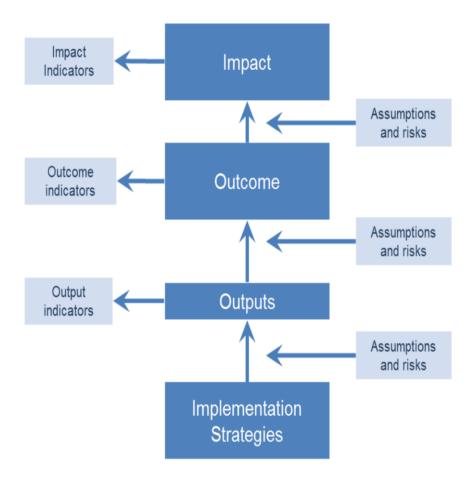
Do we (with any consistency)

measure?

- **■**Numbers
- ■Demographic
- **■**Transition
- √'Source'
- ■Retention/attrition

#### Value

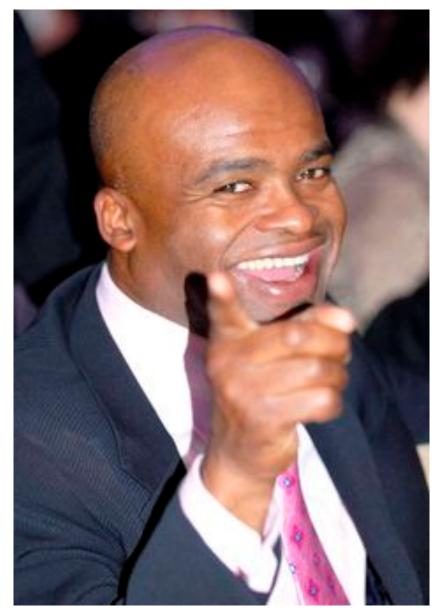
- ■Physical health
- ■Mental health
- ■Weight management
- ■Pre-op / post-op etc.





# Realistically...

"What gets measured gets done"





#### Current models

#### **VARIABLE 'SOCIAL' CATEGORIES**

- Low income/unemployment
- Housing benefit
- Children/young people
- Student
- Carer (in-family) & young carers
- Disability (as relevant)
- Age (Over 60 / Over 70 etc.)
- Armed forces
- Jobseekers Allowance
- On Government training schemes
- Asylum seeker
- · Looked after young people
- Talented athlete

Plus GP referral

#### 'PASSIVE' OPERATOR

Not normally well-published options Thorough (sometimes off-putting) eligibility vetting

Limited discounting (10-30% would be typical)

Time-limited access; peak/off-peak

Various exclusions; 'group-booked activity (I.e 5-a-side), swimming lessons etc.

Unaware/ and not fully trained and 'receipt-ready' staff

Few, if any specific programme allocations for taught/led options

Individual pricing doesn't cover group activity

- thus normally excluded



#### Ideal leisure card model

# LOCALLY 'AUTHORISED' AGENCIES

- GP practices
- Health centres
- Adult/social services
- C&YP Services
- Housing associations
- Schools
- Community agencies
- Health visitors
- Police

MECC SOCIAL PRESCRIBING LOCALLY- CONTRACT DEFINED/AGREED 'INDIVIDUAL NEED'

#### **Basis**

- Overweight/obese
- Social isolation
- Post-operative
- Pre-operative
- Independent living
- At risk (lifestyle)
- Carer support/longevity
- Other...

Clients are recruited and 'transferred' to the leisure

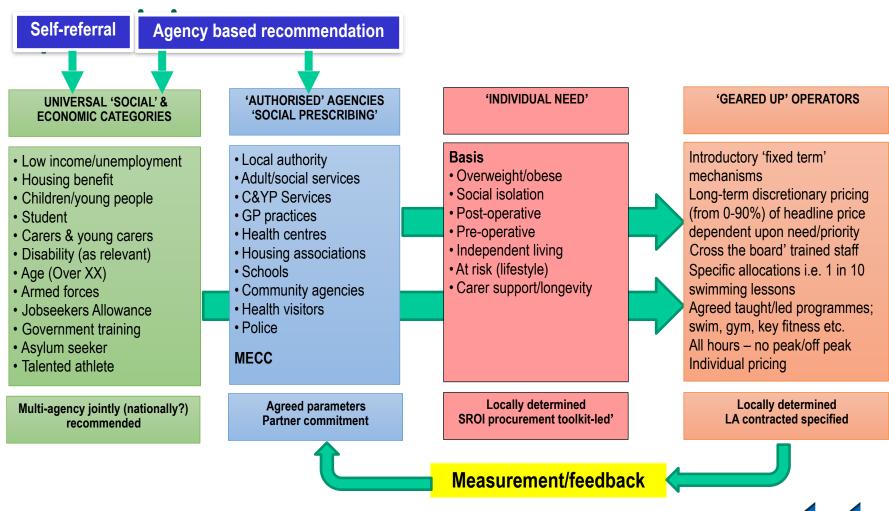
operator

#### OPERATORS FULLY 'GEARED UP' TO RECEIVE

- Intro. 'fixed term' mechanisms
- Long-term discretionary pricing (from 0-90%) of headline price
- 'Cross the board' trained staff
- Specific programme allocations i.e. 1 in 10 swimming lessons
- Menu of taught/led swim, gym, key fitness etc. programmes
- All hours no peak/off peak
- Individual pricing
- Opportunity cost appraised
- SROI measures in place



#### Overall model of leisure



Why Sports 2018: Delivering Positive Outcomes john.eady@kkp.co.uk



## Arguably....

It is **not** the job of the operator to 'find' hard to reach clients/ customers. It **should be** its job to:

- ■Be completely ready to receive and cater for a wider range of non-standard customers
- ■Have pre-agreed pricing mechanisms in place which make this process realistic for clients
- Assign these (all) clients the **same 'value'** as our £30+ per month DD customers
- ■Measure attrition/retention be judged on performance with these clients
- ■Measure/record 'value' of provision made & 'opportunity cost'



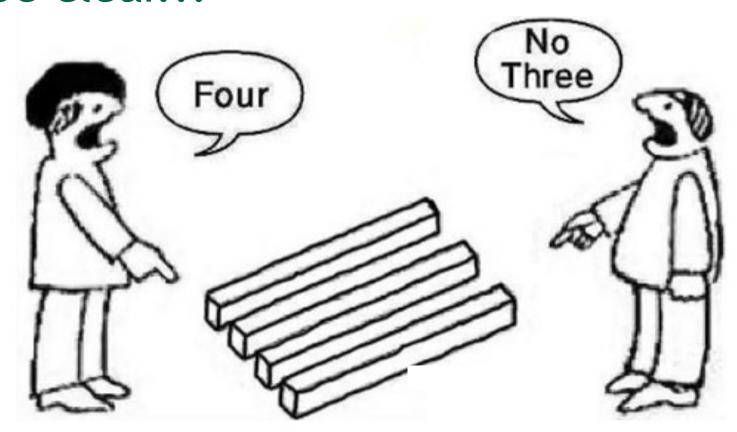
#### At the same time....

It **is** the job of involved external agencies to 'find' and 'deliver' hard to reach clients/customers:

- ■Based on pre-agreed (preferably contractually underpinned) social and costbased **criteria**
- With all-agency clarity about outcomes being sought from physical activity based interventions
- In numbers/proportions that is reasonable for the contractor to work with...and in an organised, systematic way
- ■Having collaborated (with each other and the contractor) to create reliable offsite client identification and 'sign-up' processes
- ■Measure (and work jointly) to enhance retention/tackle attrition
- ■Acknowledge (and value) the contractor's SROI return



# LA, partners & contractor must all be clear...





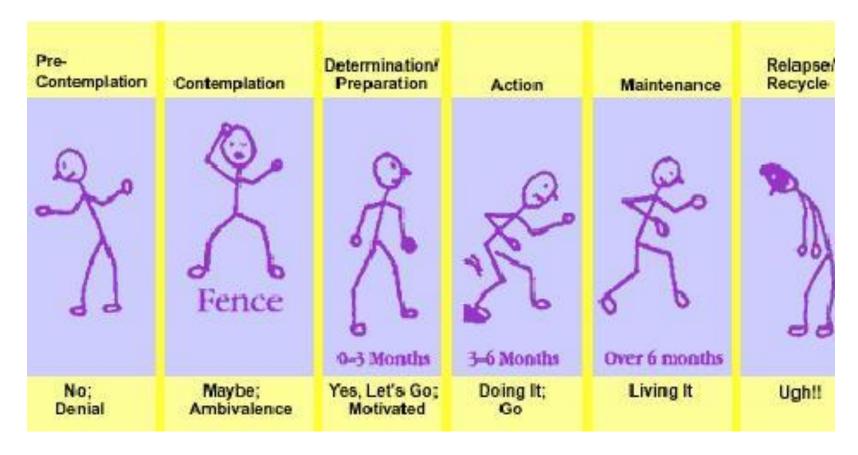
## Outcomes not obscured by inputs/







## Agreed key measures





## Needs to be consistent & comparable







## Who should be driving this?

- Sport England (Inactive → Active!)
- Public Health
- **LGA**
- UK Active

In collaboration with...

■ Responsible trusts, contractors & in-house operators



## If not now, when?

