



# Introducing QuickChange

## A hop, skip and a jump into inclusion

**How a four page thank you letter from a patient enabled a new partnership to take a more preventative approach aiming to reduce inequity across our health system.**

The RIC Hub have caught up with QuickChange: A collaborative project pilot between Cardiff & Vale UHB Paediatric Podiatry Services and Local Public Health Team. The pilot has just won the UK Public Health Register (UKPHR) award for Improving Public Health Practice to Reduce Health Inequalities, with the judges commenting on how it was a well-planned and evaluated pilot project to increase physical activity in children and that good partnership working was demonstrated in developing the initiative.

### Interview with Martha-Jane and Stephen

#### What is QuickChange?

**Martha-Jane:** QuickChange is a short animation, available in English and Welsh language, aimed at increasing daily physical activity for 4-6 year olds. Ten different characters demonstrate ten different exercises that enable children to perform a series of strengthening and stretching exercises in the classroom without the need for any additional resources or a change of clothes. In the Move More, Eat Well plan, one of the physical activity actions under the educational settings priority talks about having alternatives to the Daily Mile Cymru, and the idea was to produce something where there are limited to no barriers to taking part. The longevity of this is that we're getting children doing things that they want to do. It's about getting them excited, physically active, wanting to hop, skip, jump, run when they have the opportunity to. We know that with children who experience negative physical activity or exercise situations when they're younger, it then tailspins up until they're an adult. It is about building confidence and knowledge in children, knowing that they can do things.



Stephen Coombs, Podiatry  
Professional Lead, Cardiff and  
Vale University Health Board



Martha-Jane-Jane Powell,  
Senior Health Promotion  
Practitioner, Local Public Health  
Team, Cardiff and Vale  
University Health Board



Not every child wants to run. Not every child likes walking. Not every child enjoys doing stuff with other children. So, the idea is to make movement fun from a young age so they don't notice they're doing it.

**Stephen:** The good thing about this, it can be done indoors, you can say probably 40% of the time you can't do the Daily Mile because it's raining. It's an alternative. The Daily Mile has been brilliant and has helped with stamina etc but this focusses on core stability, movement and fun.

#### What does the name mean?

**Martha-Jane:** QuickChange is about the characters changing, but also it's a quick win.

**Stephen:** We have to change quickly. I look at the figures every day and each year the levels of people being diagnosed and living with diabetes increases. We've got to try and turn the corner to reduce ill health which can be preventable. The only way I can see to turn that corner is through encouraging children to be keen to get involved in exercise, for them to be willing to participate and want to be take part to help their own health.

#### How did the project come about?

**Martha-Jane:** There is a long history to where we have got to today. We talk about prevention in public health every day, and when Stephen came to us and said "actually we are seeing too many people in clinics. We need to do something before they get here"- we said yes let's do something together. A lot of our work is around increasing preventative methods, but this was also about key collaborations and the clinical staff being able to say actually we now have something that we would find the most helpful and then us finding a way of how to do that the easiest way possible together. Which is how QuickChange as a product came about because it's something practical and something that we can see happening and doing.

**"It's been quite a long road to get to this bit. We had a little bit of money at the end of one of the financial year and that gave us the little bit of money we needed to get this going."**

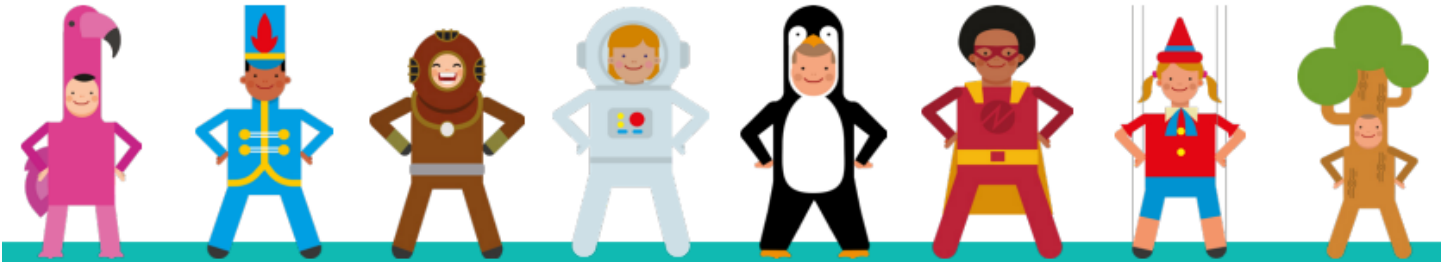


**Watch the Quick Change Animations!**



English

Welsh



**Martha-Jane:** **Stephen** was seeing more and more children with issues around the age of 6 years old in clinics. So, we thought, if we take it back down a few years and focus on strengthening foot and ankle muscles in 4-6 year olds we should start seeing a difference. But I know that there are of course multiple other factors which come into play here too in order to reduce these health problems.

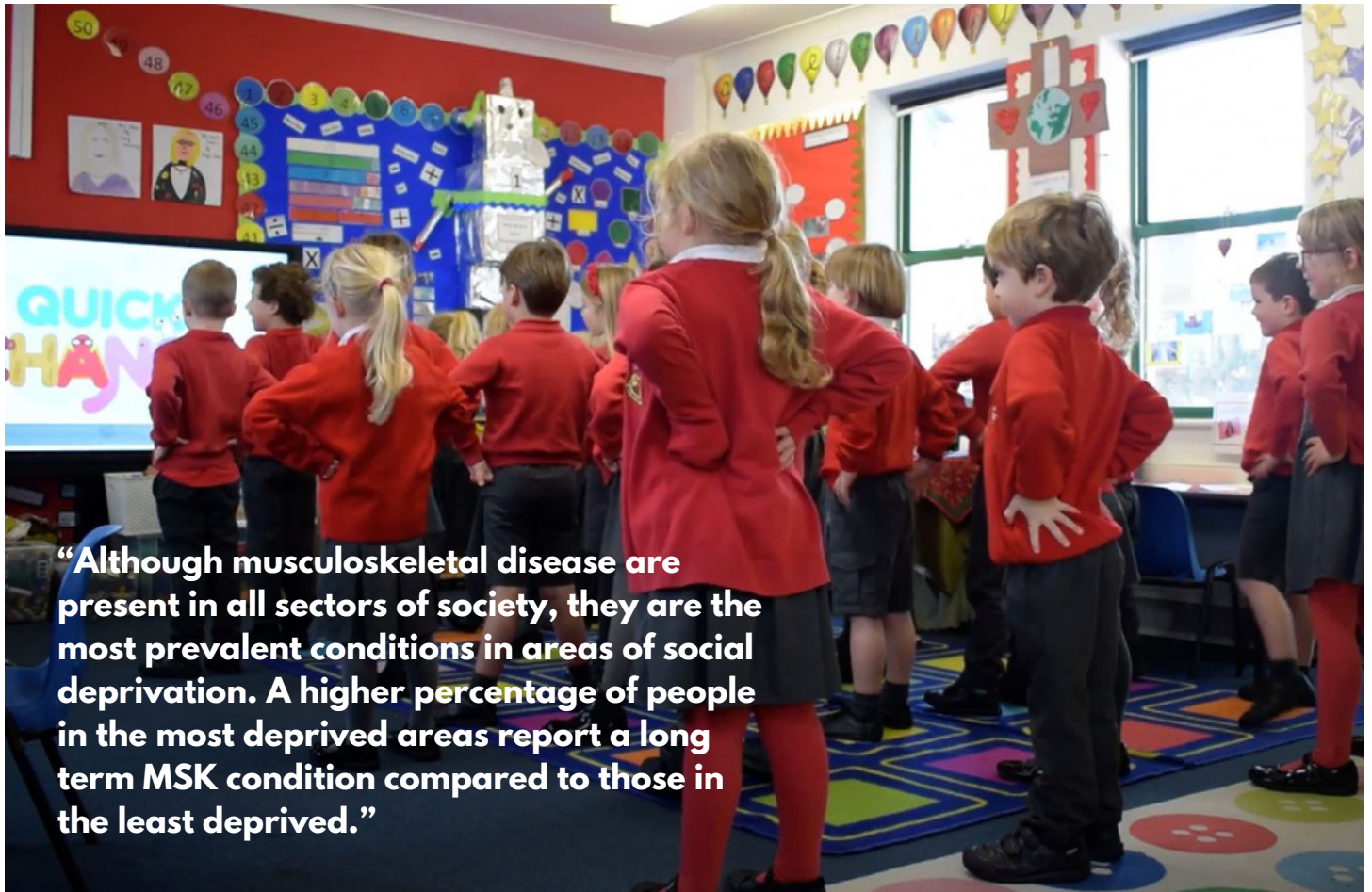
**Stephen:** The other thing that inspired me was a four page thank you letter from an adult who I used to treat. She was overweight and had diabetes, she couldn't walk because she had mid foot arthritis and it was making her quite unwell. Our treatment got her walking without pain which in turn improved her health. She put at the top of the letter "This may well have saved my life". The patient got fitter and her blood pressure went down, her diabetes was better managed, everything was getting better. But it was when she said "Oh, I did mention my foot pain when I was younger and no one took any notice, it was just ignored". I thought what would have happened if we intervened earlier? She wouldn't have been like this. And with the explosion of diabetes, obesity, getting worse year on year and year and in Podiatry, a lot of our resources are spent with people with diabetic ulceration wounds, we've got to reverse and treat at the beginning, we just can't keep treating the end product of disease.

### Who's been involved?

**Martha-Jane:** There's been a lot of input from different teams. The core team has been Cardiff and Vale UHB Podiatry Services and Cardiff and Vale UHB Local Public Health Team and then we have had a lot of support from the Healthy Schools and Pre-Schools Team across Cardiff and the Vale, the Pilot Schools involved, Move More Eat Well physical activity partners including Cardiff Move More team and Vale of Glamorgan Healthy Living Team.

## "MSK conditions constitute the third largest NHS programme budget"

**Stephen:** And the team keeps growing. We have just taken on two paediatric physios and we are hoping other professions will join us at a later date where there is interest. A lot of people say why is a podiatrist getting involved in something like this well, I think it is part of our job. It's not just public health's job to do it because they're not seeing the patients where the problems are coming in. So, with the teamwork that we have got, it really complements one another. This all came about because we had a study day and I invited someone from the local public health team because sometimes we don't interact enough.



### How did you ensure you were tackling inequality/inclusion/inequity?

**Martha-Jane:** This is something that we are constantly looking at. Increasing opportunities and making things equitable for our populations. A lot of collaboration was involved, so making sure that you are doing it FOR people and not TO them. We started looking at the evidence between exercise and feet in the Child Measurement Programme and the Welsh Health Survey and there is a gap between the most and least deprived communities in terms of self-reported weight (in obese and overweight) categories. (See [child measurement programme](#)). We also looked at reducing and removing barriers so that interventions can be used by anyone and everyone should they wish to participate.

The digital element means that anyone will hopefully more or less have access it, so it's a wider initiative and not just restricted to schools, there's no licence cost, it's very self-explanatory.

So, the idea is that this is as simple as possible. You don't necessarily have to listen to someone explaining it, you just follow so that there are less barriers for people, for a wider amount of the population to be able to take part should they wish to.

**Stephen:** I played the Welsh version to a room full of Medical /AHP specialists where probably only about 20% of them understood Welsh, but people still followed it because it's a character you just follow.

## What's next?

**Martha-Jane:** The idea is to now promote and implement the animation into classrooms across the Cardiff and Vale locality and then after that maybe further animations which focus in on exercise progressions, and make it fully inclusive for all children.

**Stephen:** We've got to come up with more exercises, which we're working on, because once people have done these for a bit, they'll get stale.

So, can we get children in nurseries and preschool settings doing some of this stuff even earlier than school age children. So, it's all about just widening it out and making sure that everyone has that opportunity to take part. So, you're reducing that inequity across the population, really. And the idea of doing things like the add-ons like Stephen was saying in terms of the disability work. Someone's mentioned Makaton as well to make it even simpler again.



**“Musculoskeletal conditions are one of the biggest threats to the health of people who are obese. Obesity directly damages weight-bearing joints such as knees and hips because of the abnormally high loads they have to carry.”**

Then the bolt-on bits would be to create animations for wheelchair users or ones for people that can't do the exercises as they currently are demonstrated. We'd also like to bring in things like maybe these characters could be eating healthily too.

**Martha-Jane:** We're also doing some work with Preschool teams at the moment around how can we take this to an even younger age.

**Stephen:** COVID has made inequalities worse and we are expecting obesity rates in children to rise even higher. We're also hoping that there will be a sort of ripple effect where the children will start spreading the message to their parents, who may well also be in the overweight category and you don't have to have money to do these exercises because they are just there, available for all.