

A Physical Activity and  
Sport Strategy for Bury  
2015-2020



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## Foreword

I am delighted to present the Physical Activity and Sport Strategy for Bury 2015-2020, a partnership strategy which sets out our vision *to increase participation in physical activity and sport and act as a lever for change to improve the health and wellbeing and quality of life for individuals, their families and the wider community.*

This is a vision we feel passionately about in Bury Council because we recognise the benefits that participation in physical activity and sport can create for local people and contribute towards making Bury a great place in which to live, work, visit and study.

We need this strategy because around one in two women and a third of men in England are damaging their health through a lack of physical activity. Evidence also shows that physical inactivity directly contributes to one in six deaths in the UK the same number as smoking. Unfortunately Bury is no different; the estimated health cost of inactivity each year is over £4.5m, with a cost per 100,000 people greatly in excess of regional and national figures.

However, it is clear that increased levels of physical activity and sport can contribute to an improved quality of life at all stages. Regular participation in physical activity and sport can make a significant contribution towards reducing the risk of diseases including coronary heart disease, stroke, cancer, type 2 diabetes and obesity, and can also improve mental health and wellbeing.

Whilst there have been encouraging increases in participation in Bury over recent years, this strategy argues that we need to achieve greater and more sustained growth across all age groups if we are to improve the long term health and wellbeing of local people.

We also know that being physically active brings with it a number of other positive benefits. We know that active workplaces do better and help to drive a stronger economy. We know that sport generates £62.6m per annum in Gross Value Added to the local economy with £45.5m alone generated from people participating in sport. Alongside over 1,500 local jobs in the sector, we know that the value of volunteering to the local economy is also significant, at over £14m per annum.

So what are we going to do differently to bring change? This strategy outlines how we will work smarter to understand our communities and influence peoples attitudes and behaviours towards physical activity and sport; how we will maximise the power of collaboration, not just within Bury but across Greater Manchester; how we will embed physical activity and sport into local policy; how we will develop a mixed economy market of opportunities and ensure a high quality experience for all participating; and, how we will be ambitious in our approach in focussing on areas of real opportunity, for example those related to workplaces, or active travel.

There is already lots of good work to build on such as the I Will If You Will women and girls project which we are delighted has received an additional £2m National Lottery investment from Sport England through to the end of 2016. We are also fortunate to have so many committed partners sharing our participation ambitions – it is clear that Bury Council cannot achieve this vision alone; these organisations in the public, private and voluntary sectors all have a valued and important role to play.

Our aims are twofold, we need to look at the specific support required to help change behaviours of the inactive helping them to become active, whilst at the same time ensuring that we don't lose sight

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of what we need to do is sustain and increase participation for those already active. The message is simple everybody active, more often, across the lifecourse.

Underpinning our aims we have identified three key areas that will support growth - how we influence *social perceptions* regarding physical activity and sport to stimulate demand; how we ensure there is choice and create targeted *physical activity and sport opportunities* where needed; and how we influence the *physical environment* including open space, built provision for physical activity and sport, and infrastructure that enables or improves accessibility of activity.

Our plans are laid out in our delivery framework and action plan, which set out our objectives and priority actions. The Bury Health and Wellbeing Board will ensure that we are accountable for delivering these plans, supporting the formation of a new Active Bury partnership that will oversee the on-going implementation across the borough and champion effective collaboration between partners.

The evidence is compelling that increasing participation in physical activity and sport can make a real difference to people's lives. I look forward to you joining us on that journey.

**Councillor Andrea Simpson**

**Chair of Bury's Health & Wellbeing Board**

# 1. Our Vision and why this is important

## a. Introduction

- 1.1. This document sets out the strategy for Bury Council and partners to develop a borough wide approach for physical activity and sport. This is a partnership strategy; Bury wants to create a model of good practice in developing a holistic, multi agency approach to addressing the challenges caused by a lack of physical activity, and contribute positively to improving the lives of local people.
- 1.2. In developing this strategy it is argued that physical activity and sport have a vitally important role to play in contributing to the overall vision for Bury, *'to make Bury a great place in which to live, work, visit and study.'*<sup>1</sup> Indeed as the evidence presented as part of this strategy shows, the time for action is now as this contribution is only likely to become increasingly significant in future years.

- 1.3. The challenge is succinctly summed up by Everybody active, every day: An evidence-based approach to physical activity, published by Public Health England in October 2014:

*Around one in two women and a third of men in England are damaging their health through a lack of physical activity. This is unsustainable and costing the UK an estimated £7.4bn a year. If current trends continue, the increasing costs of health and social care will destabilise public services and take a toll on quality of life for individuals and communities.*<sup>2</sup>

- 1.4. The evidence base is undisputable linking increased levels of physical activity and sport to improved quality of life at all stages. Regular participation in physical activity and sport can be seen to make a significant contribution towards reducing the risk of diseases including coronary heart disease, stroke, cancer, type 2 diabetes and obesity, and can improve mental health and well being.
- 1.5. The current picture in Bury will present a story showing some growth in participation levels over recent years. However, this strategy argues that just being better than a national average, which is deemed by most industry experts as unacceptable, is not a vision that Bury should strive for, we need to be bolder in building high and sustained levels of participation. Current participation levels are not enough to make a sustained difference on our population, and greater participation impacts can be achieved as evidenced elsewhere in Europe.<sup>3</sup>
- 1.6. Whilst participation increases are encouraging in isolation, based on the evidence in this strategy the stark reality is that the prevalence of diseases linked to physical inactivity are also increasing in Bury and the current participation increases are not sufficient to turn the curve in terms of improved health and wellbeing. Figure 1.1 below highlights the curves we are trying to turn in terms of activity levels, inactivity levels, and health related indicators. The graph highlights the actual position against each measure, the forecasted position based on the

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<sup>1</sup> Bury's Community Strategy 2008-2018

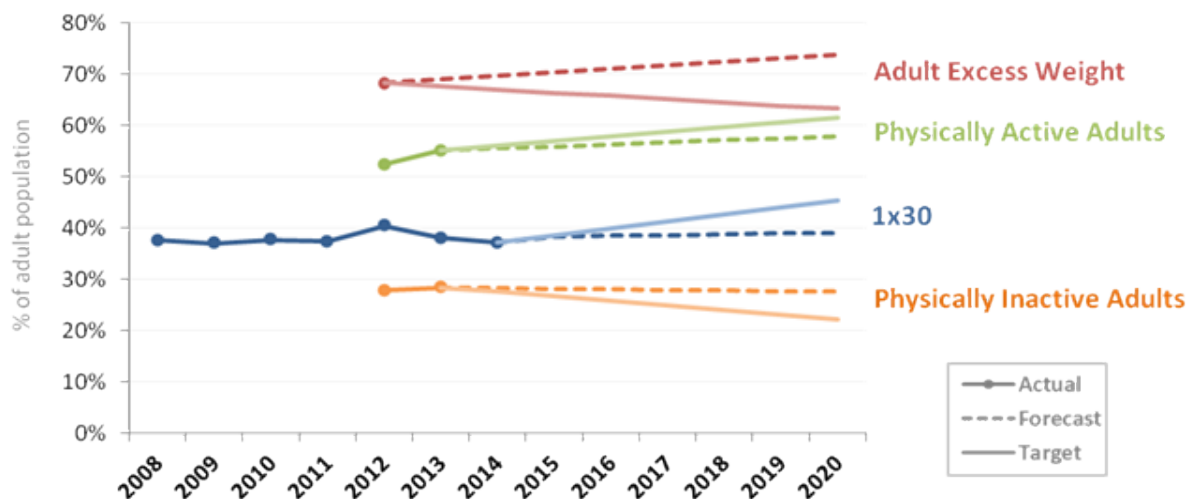
<sup>2</sup> Everybody active, every day: An evidence-based approach to physical activity. Public Health England, October 2014

<sup>3</sup> The example of Finland is cited in much of the latest research. Finland has taken a long term approach to embedding health enhancing physical activity for all into national and local policy over a period of more than two decades. This is not just sport and health policy but also transport and multisectoral. Repeated surveys indicate that participation in recreational physical activity has increased in Finland among young, working aged, and elderly people during the past two decades. (Physical Activity Policy and Program Development: The Experience in Finland, Vuori et al 2004)

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following the status quo, and the targeted change by 2020. Excess weight has been used in this instance as a proxy measure but the same would also apply to a number of other indicators.<sup>4</sup>

**Figure 1.1 – turning the curve in terms of participation in physical activity and sport, and health related indicators<sup>5</sup>**



- 1.7. Achieving the changes illustrated in figure 1.1 will not be easy, but that is why a concerted and coordinated effort is required from stakeholders across Bury to make this sustainable change and improve quality of life for local residents.
- 1.8. Whilst reducing health inequalities is clearly a significant strategic driver this strategy also recognises the important positive contribution that physical activity and sport can make towards improving quality of life in a wider perspective, such as through spurring economic growth, energising community engagement, educational attainment and helping to raise aspirations of local people.

## b. Our vision

*"To increase participation in physical activity and sport and act as a lever for change to improve the health and wellbeing and quality of life for individuals, their families and the wider community"*

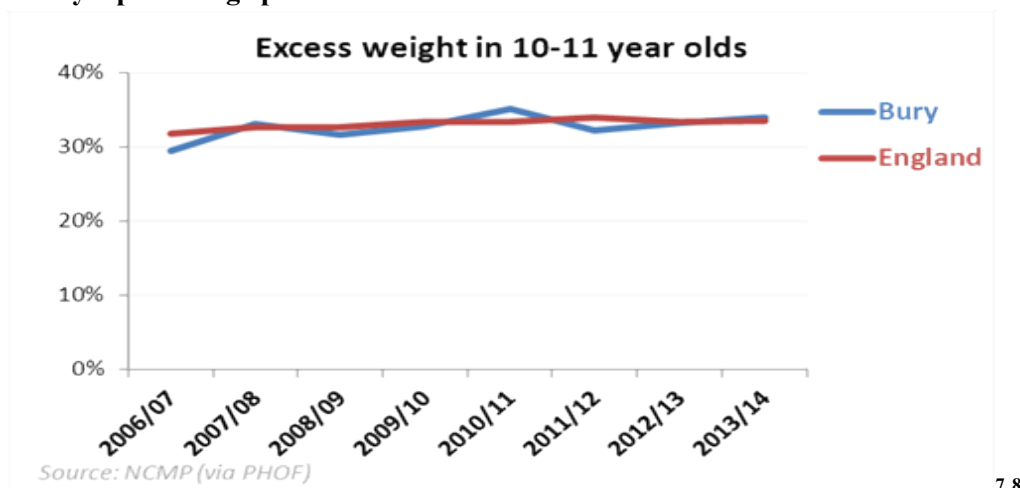
- 1.9. Increasing participation in physical activity and sport will generate significant societal benefits across Bury, improving not just the lives of the individuals engaged but also impacting upon their families and the wider community.
- 1.10. Our vision is underpinned by the fundamental premise that we want to see everybody in Bury more active, more often, and for this to be habit forming so that participation in physical activity and sport is continued throughout the life course.
- 1.11. Success in achieving the vision will see in 2020:

<sup>4</sup> Excess weight has been used as a proxy measure. It is acknowledged that overweight people can be physically active.

<sup>5</sup> Forecasts are based upon linear trend lines of figures for Bury or nationally, where historic data does not exist for Bury, e.g. excess weight forecasts are based on Health Survey England trends. The activity and inactivity targets are based on the actual targets set for the strategy, as listed under 1.1.

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- **Over 65% of adults (16+) in Bury undertaking 150 minutes of moderate intensity physical activity per week. This equates to a sustained increase of 10 percentage points from 2013 and aims to put Bury above the 75<sup>th</sup> percentile for participation nationally.<sup>6</sup>**
- **A projected reduction of 10,000 adults (16+) who are classed as inactive, a decrease of nearly 7 percentage points from 2013.**



7 8

- **A 1.5 percentage point increase per annum of adults (16+) taking part in sport at least once a week.<sup>9 10 11</sup>**

1.12. Figure 1.2 below outlines the targeted outcomes from this strategy. These are articulated in further detail in Appendix B, alongside the key indicators of success.

## Figure 1.2 – Vision and Outcomes

<sup>6</sup> This relates to Public Health Outcomes Framework (PHOF) measure 2.13i. A target of 65.1% would mean there would be an estimated 94,721 adults aged 16+ active for 150 minutes per week, a projected increase of 14,550.

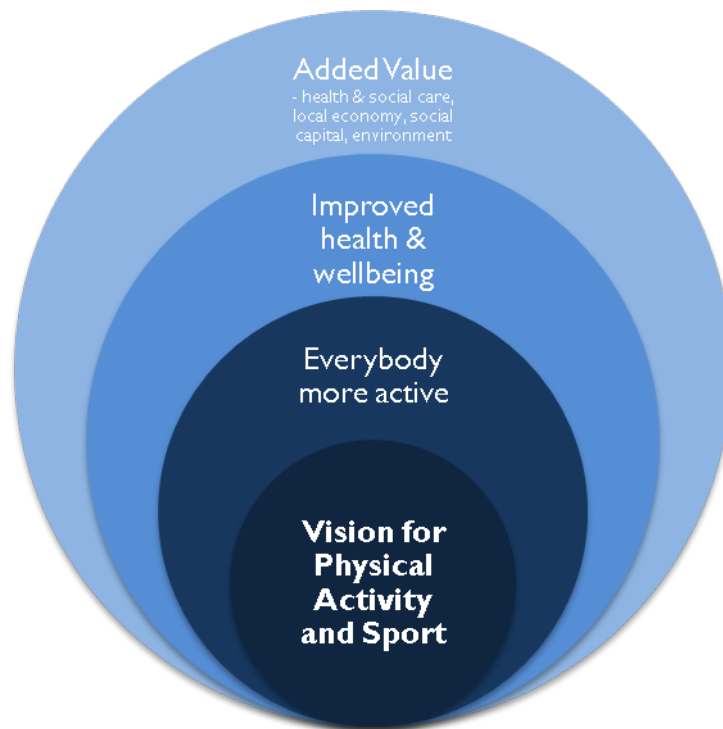
<sup>7</sup> This equates to 21.5% of the population classed as inactive, and is projected to put Bury in the upper 75<sup>th</sup> percentile nationally.

<sup>8</sup> The target for active adults is larger than inactive adults as there is a proportion of the population (c16.5%) who do some activity but do not yet reach the recommended 150 minutes of moderate intensity physical activity per week. The aim is to get everybody doing more and it is acknowledged that to move from less than 30 minutes to 150 minutes per week is a big change for an individual to make.

<sup>9</sup> The I Will If You Will (IWYW) women and girls participation project is aiming to get 10,675 more women/girls in Bury taking part in sport and physical activity once a week for 30 minutes, an increase of over 14 % points from April 2014. Whilst this is an ambitious target the investment behind IWYW provides a real opportunity to make this change.

<sup>10</sup> Whilst these targets are measuring those aged 16+ it is important that a lifecourse approach is adopted. Specific targets will be adopted for those aged under 16.

<sup>11</sup> In adopting these targets the latest available data sets have been used as 2015 baselines are not yet available. Forecasts have been made as to where we expect to be in 2015 based on the status quo. It is acknowledged that whilst there may have been some positive movement the scale of the task year on year from 2015 is likely to be larger than presented in these targets.



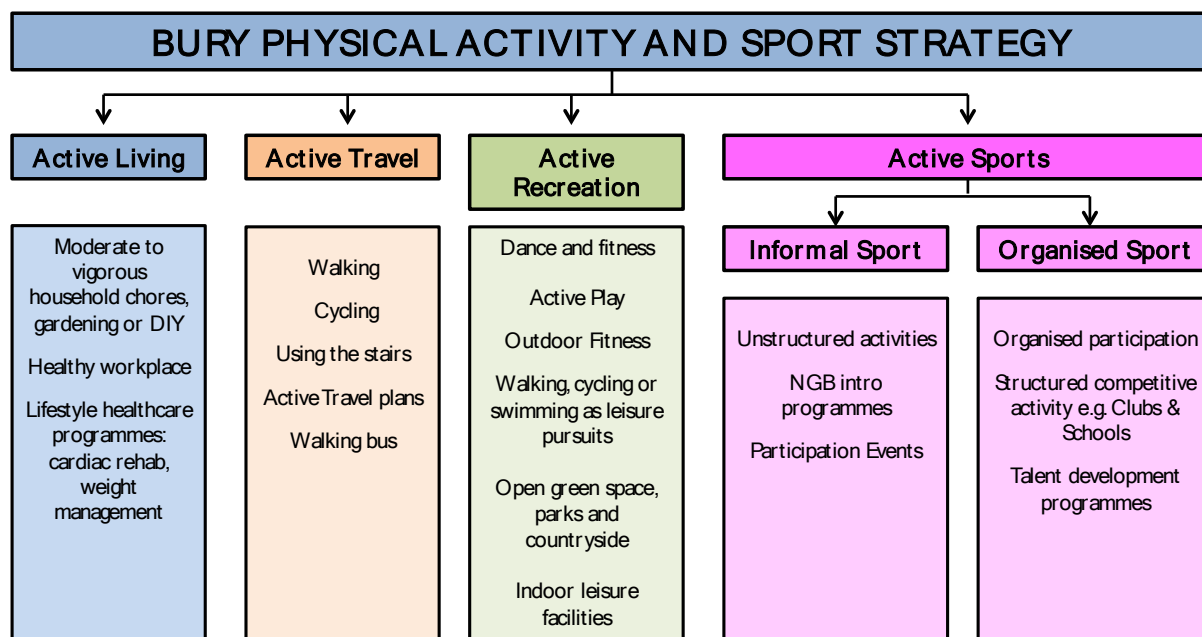
- 1.13. This strategy will outline what Bury Council and partners need to do differently in order to achieve these outcomes and make the sustained change in participation levels across the borough. This will include how we work smarter to gather and apply insight into understanding our population and influencing their attitudes and behaviours towards physical activity and sport; how we maximise the power of collaboration, not just within Bury but across Greater Manchester; how we try to embed physical activity and sport into local policy; how we look to develop a mixed economy marketplace and ensure a quality experience for participants; and, how we are ambitious in our approach in focussing on areas of real opportunity, for example those related to workplaces, or active travel.

### **c. Defining Physical Activity and Sport**

- 1.14. In order to achieve the vision outlined a holistic interpretation is required when defining what we mean by ‘physical activity and sport’. This is because the lines between what is defined as ‘sport’ and ‘physical activity’ are often blurred and serve to create a false distinction. By adopting a broader definition it is intended to engender a more joined up, multi agency approach to addressing the challenges faced.
- 1.15. Figure 1.3 highlights the breadth of the remit of activity covered under this strategy.

**Figure 1.3 – defining sport and physical activity**





- 1.16. Physical activity should be encouraged across all ages and populations. The risks of engaging in physical activity are low for most people, but the risks of poor health resulting from inactivity are high. Moving from a sedentary lifestyle to an active lifestyle is a challenge in itself and therefore the message which is promoted should focus upon behaviour change and encourage any activity as a positive move forward however big or small and thus building activity into our daily lives.
- 1.17. The Chief Medical Officer's (CMO) current guidelines<sup>12</sup> allow more flexibility in achieving the recommended levels of physical activity. The main elements of the guidelines focus on:
- more emphasis vigorous intensity and muscle strengthening activity;
  - the inclusion of early years guidelines;
  - bespoke guidelines for older adults;
  - encouragement of a life course approach to physical activity;
  - recommendations for minimising sedentary behaviour.
- 1.18. Appendix C includes references for the full detail of the recommendations for the appropriate age groups.
- 1.19. It is important to consider the role and contribution of sport to overall physical activity levels. This is an area currently being explored by Sport England and research to date shows that sport has a strong role in helping individuals to reach the 150-minute per week target set by the CMO.
- 1.20. Furthermore the proportion of people who achieve their 150 minutes in sport alone appears to be a significant proportion of those who achieve the target at all. This is reinforced by the high level of minutes taking part in sport amongst those who meet the guidelines.
- 1.21. The counter to this argument is the recognition that 'sport' can carry with it negative connotations for many less active people, and would not be the appropriate vehicle to use to

<sup>12</sup> Start Active Stay Active: A report on physical activity from the four home countries' Chief Medical Officers, 2011

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help all people become more active. The positive is that this strategy will provide a clear direction for those seeking an alternative route other than sport. Strong offer for those not turned on by sport, including informal sporting opportunities.

1.22. These reasons provide the rationale for why this is a physical activity *and* sport strategy, with its remit covering the breadth of activities highlighted in figure 1.3.

## d. Why is it important

### The evidence base

1.23. In 2011, Start Active Stay Active: A report on physical activity from the four home countries' Chief Medical Officers underlined the urgent need for a concerted action on physical activity across the UK. Physical inactivity directly contributes to one in six deaths in the UK the same number as smoking.<sup>13</sup>

1.24. Further evidence regarding the health related risks and costs of inactivity are presented in Section 2. However, information about physical activity is often presented in the form of warnings about the negative impacts of not doing it, but it is just as important to also focus on the positive benefits of participating in physical activity and sport. The benefits are felt across the life course:

- Physically active children are more likely to do better academically – physical activity is essential for healthy growth and development, and increases cognitive outcomes and school attainment.<sup>14</sup>
- Sport England estimate a £7.35 return on investment for every £1 spent on sports for at risk youth through, for example, reducing crime and anti social behavior.
- Participating in sport has been shown to have a positive effect on employability: National research conducted on behalf of BUCS shows that:
  - Graduates who participated in sport at university earn an average £5,824 (18 per cent) more per year than their non-sporting counterparts. The current average salary of graduates who engaged with sport at university is £32,552, compared with £26,728 for those who did not.
  - The positive effects of sports participation go beyond earning power with more than half (51 per cent) of graduates say sporting involvement has helped them develop team work skills and leadership qualities in the workplace.<sup>15</sup>
- Active workplaces do better. Physical activity programmes in the workplace have resulted in reductions of absenteeism between 30% and 50%.<sup>16</sup> Active workers are also happier, cited as better team players and are visibly more productive.
- An active population drives a stronger economy. UK Active estimates that just a 1% reduction in the rates of inactivity each year for five years would save the UK around £1.2 billion.<sup>17</sup>

<sup>13</sup> Lee I-M, et al, 2012, Wen CP, 2012, Health and Social Care Information Centre 2014

<sup>14</sup> Department of Health, 2014, Moving More, Living More: Olympic and Paralympic Games Legacy, <https://www.gov.uk/government/publications/moving-more-living-more-olympic-and-paralympic-games-legacy>

<sup>15</sup> The Impact of Engagement in Sport on Graduate Employability, Sport Industry Research Centre, 2013.

<sup>16</sup> Davis, Adrian, Jones, Marcus (2007) Physical activity, absenteeism and productivity: An Evidence Review

<http://www.tfl.gov.uk/assets/downloads/businessandpartners/Physical-activity-absenteeism-and-productivity-evidence-review.pdf>

<sup>17</sup> UK Active, (2014), Turning the tide of inactivity, [http://ukactive.com/downloads/managed/Turning\\_the\\_tide\\_of\\_inactivity.pdf](http://ukactive.com/downloads/managed/Turning_the_tide_of_inactivity.pdf)

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1.25. All of these benefits apply to Bury. In terms of some specific evidence for Bury Sport England estimate:

- Sport generates £62.6m in Gross Value Added to the local economy
- £45.5m is generated from people participating in sport
- There are 1,676 in jobs in the sector
- £14.4m is the value of volunteering to the local economy
- £80.1m is the economic value of improved quality and length of life plus health care costs avoided.

1.26. The argument is compelling with the weight of evidence that now exists. As this strategy will outline, whilst the health benefits are clearly a significant drive behind getting people more active, the social and economic benefits should also not be lost, as they present an opportunity to support growth as well as the reform of public services agenda.

### **The strategic context**

1.27. It is important to set the strategy within the strategic context to ensure it is aligned to relevant local, city-regional, and national policy directions.

1.28. In summary the key points to note are:

- The strategy contributes directly to a number of priorities of **Team Bury**, the Local Strategic Partnership, as highlighted through the **Bury Community Strategy 2008-18** and the stated vision for Bury to be '*a great place in which to live, work, visit and study*'. This specifically includes an aspiration to be the '*healthiest borough in the North West*' and a focus on the principle on '*targeting resources towards areas of greatest need*', something that will be critical for this strategy to achieve in terms of identifying and engaging with the inactive.
- It will be important to exert a greater influence on delivery linked to the **Bury Joint Health and Wellbeing Strategy 2013-18** with the role that physical activity and sport can play in contributing to a number of the identified priorities.
- Bury has recently been awarded a further £2 million from Sport England for the **I Will If You Will** national women and girls sport participation pilot. This focuses on addressing the gender gap in participation and will see the project build on the original £2.3million award in 2013 to deliver the project through to the end of 2016.
- The **Greater Manchester Strategy 2013-2020: Stronger Together**, which guides the work of the Greater Manchester Combined Authority (GMCA), will also help inform wider public policy across the city region including plans for economic growth and reforming public services. This recognises the proportion of public funds are spent on reactive and unplanned 'crisis' interventions, rather than targeted, planned and preventative measures and public services. Physical activity and sport can be one of those preventative measures.
- The **Greater Manchester Devolution Agreement** has laid the foundations for the recent announcement of plans around the future of health and social care with a signed memorandum agreeing to bring together health and social care budgets in Greater Manchester – a combined sum of £6 billion. As above a strong emphasis is placed on prevention of ill health and promotion of wellbeing.

- Greater Sport, on behalf of partners across Greater Manchester, is currently developing a **Greater Manchester Sport and Physical Activity Strategy** (to be completed summer 2015). The alignment between these two strategies will be important to ensure a strong consistency in message and help advocate for Bury's work locally.
- Nationally, in addition to CMO guidelines on physical activity, the policy context is set by '**Everybody Active, every day: a framework to embed physical activity into everyday life**', published by Public Health England in October 2014. Much of the evidence within that framework has informed the development of this strategy.
- In the context of sport, by 2017 **Sport England** wants to have transformed sport so that it becomes a habit for life for more people and a regular choice for the majority. There is a particular focus on 14-25 years including reducing the number of people dropping out of sport. This further reinforces, that whilst the measures of success might be slightly different to Public Health England, the overarching ambition nationally is to increase participation in physical activity and sport, and to ensure that this becomes a habit retained over the life course.

## 2. Where are we now?

2.1. This section outlines the current position in Bury in terms of:

- a. How active Bury currently is
- b. What people in Bury are currently engaged in
- c. What we know about the barriers and motivations to get involved in physical activity and sport
- d. The risks and costs of inactivity
- e. Some evidence about what we know works.

### a. Activity and inactivity levels

#### Inactivity levels

2.2. At a population level the evidence is not encouraging, but this is heightened with common inequalities relating to economic grouping, age, disability, gender, race, and sexual orientation.

- Over one in four women and one in five men in England do less than 30 minutes of physical activity a week, so are classified as ‘inactive’. One third of men and nearly half of women are not active enough for good health.
- Only 21% of boys and 16% of girls aged 5-15 achieve the recommended levels of physical activity. By the age of 13-15 only 8% of girls meet the recommended levels.
- There are socio demographic challenges; 47% of boys and 49% of girls in the lowest economic group are inactive compared to 26% and 35% in the highest.
- Only 18% of disabled adults regularly take part in sport, compared to 39% of non-disabled adults.<sup>18</sup>
- In comparison to 1961 levels, we are now 24% less active. If we don’t act now, we will be 35% less active by 2030.<sup>19</sup> There are a number of factors relating to the physical environment and social attitudes that can be attributed to these changes and will need to be addressed for the curve to be turned on activity levels.

2.3. In 2013, 28.4% of the adult population in Bury were reported as inactive compared to the England figure of 28.3%.<sup>20</sup> This represents a slight negative trend in Bury from 2012. The position however is relatively favourable in comparison to the North West which stands at 31.7%.

2.4. The evidence presented on the current performance in terms of inactivity in Bury compared to the national figure doesn’t tell the full story. It is important to acknowledge that the England average is not considered acceptable relative to European comparators and there is an opportunity for Bury to take ambitious steps towards increasing levels of activity, reducing levels of inactivity, decreasing levels of excess weight in children and adults, and improving overall health and wellbeing across all life courses.

<sup>18</sup> Everybody active, every day: An evidence-based approach to physical activity. Public Health England, October 2014

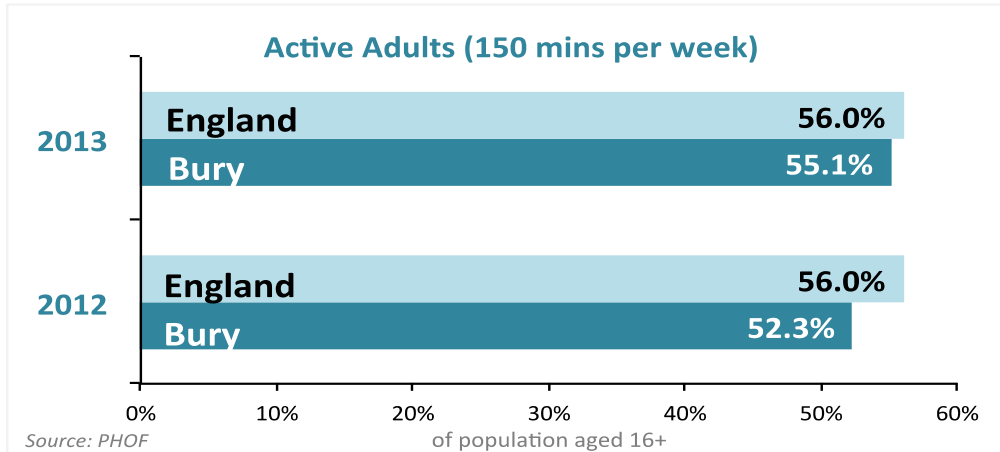
<sup>19</sup> Designed to Move, (2013), Designed to Move: A physical activity agenda, <http://www.designedtomove.org/>

<sup>20</sup> This indicator is defined as the ‘percentage of respondents aged 16 and over, with valid responses to questions on physical activity, doing less than 30 “equivalent” minutes of at least moderate intensity physical activity per week in bouts of 10 minutes or more in the previous 28 days.

**Activity Levels**

2.5. In 2012 52.3% of the adult population were reported as being active for 150 minutes per week (as per the CMO recommendations) compared to England figure of 56.0%. However in 2013 this figure in Bury rose to 55.1% whereas the figure for England has stayed the same.<sup>21</sup>

**Figure 2.1 – Active Adults (Bury and England comparison)**

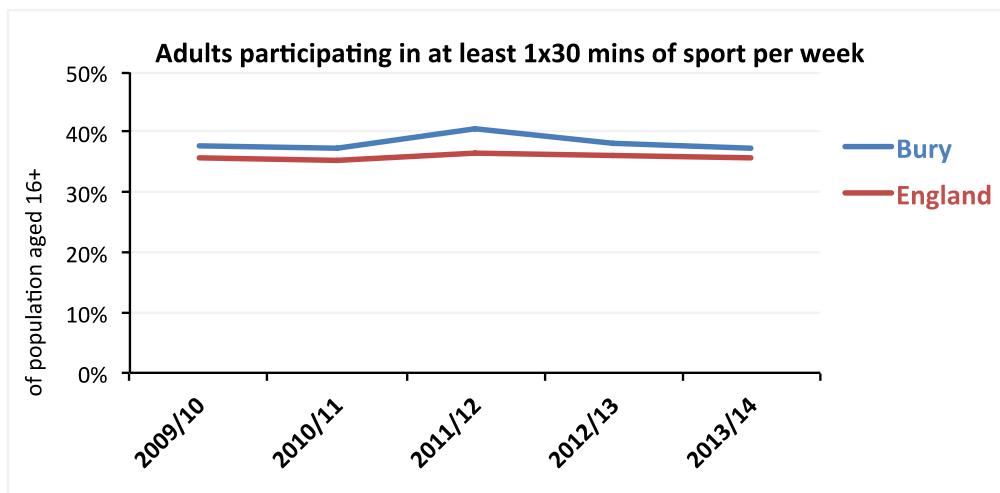


**1x30 minutes per week (sport)**

2.6. Nationally there is a trend of increasing participation in sport with 1.63 million taking part in sport in 2013/14 compared to 2005/06 (Active People Survey 1).

2.7. Encouragingly participation in sport has grown quicker and is above average in Bury compared to both Greater Manchester and England. In 2005/06 (APS1) Bury were below the national and city region average with 32.9% of the adult population taking part in at least one session of sport per week. By 2013/14 this figure had increased to 37.2%, compared to a current figure of 36.5% across Greater Manchester.

**Figure 2.2:**



<sup>21</sup> This indicator is defined as the ‘percentage of adults achieving at least 150 minutes of physical activity per week in accordance with UK Chief Medical Officer (CMO) recommended guidelines on physical activity.’ The Chief Medical Officer currently recommends that adults undertake 150 minutes (2.5 hours) of moderate activity per week, in bouts of 10 minutes or more

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2.8. Latest national analysis also highlights that:

- More than three quarters of 14-15 year olds play sport at least once a week.
- Participation in sport decreases with age. This points to a need to consider key points of transition in people's lives, i.e. from school to college, to the workplace etc, and also the appropriate 'touch points' in people's lives at different life stages to be able to try and influence behaviours.
- Over 40% of males play sport once a week, whilst only 31% of females played sport once a week. Growth in men's participation is faster than women's.<sup>22</sup>
- Since APS1 the rate of participation amongst people aged 16 years and over is greater amongst people from higher socio-economic groups than those from lower socioeconomic groups. It also shows that rates of participation have risen across the highest socioeconomic groups but fallen across the lowest socio-economic groups.

2.9. In Bury, IWYIW has helped to contribute towards a recent growth in female participation. In the 12 months to October 2014 Bury's participation rate for women is 32.4% which is 1.4% higher than the England average for women and 3.2% higher than the baseline measured in Bury (24 months to April 2013). This means that there are 25,000 women in Bury playing sport at least once a week and 2,500 more women playing sport since the pilot was announced and when compared to the England trend line, Bury grows faster and now sees a higher percentage of women playing sport.

### ***3x30 minutes per week (sport and active recreation<sup>23</sup>)***

2.10. In 2005/6 20.8% of all adults in Bury reported undertaking 3x30 minutes of moderate intensity activity per week compared to 21.3% nationally and 20.2% across Greater Manchester. By the period October 2012-October 2014 this figure had increased to 25.7% in Bury, compared to the slight increase to 24.7% in England and 24.5% in Greater Manchester.

2.11. Encouragingly Bury has made improvements over recent years in the levels of activity undertaken at 1x30, 3x30 and 150 minutes. However it still only ranks 123<sup>rd</sup> of all local authorities in England against the 1x30 measure and 166<sup>th</sup> against the 3x30 minutes measure. Fundamentally, as outlined in section 1 it is argued that the relative position is still not where it needs to be in terms of turning the curve for the long-term health of the population. The physical activity and sport strategy provides a vehicle to ensure that opportunities to be active and sustain an active lifestyle become part of everyday life.

### **Latent Demand**

2.12. Furthermore, evidence through the Active People Survey indicates there is a demand for people in Bury to be more active.

2.13. Overall latent demand shows that in 2013/14 55.9% of the population in Bury would like to do more sport than they currently do. Interestingly given their lower participation rate over 59% of women want to do more sport than at present, and, in the knowledge that participation decreases with age, more than 45% of 55-64 year olds want to take part more. Figure 2.3

<sup>22</sup> Sport England Active People Survey 8

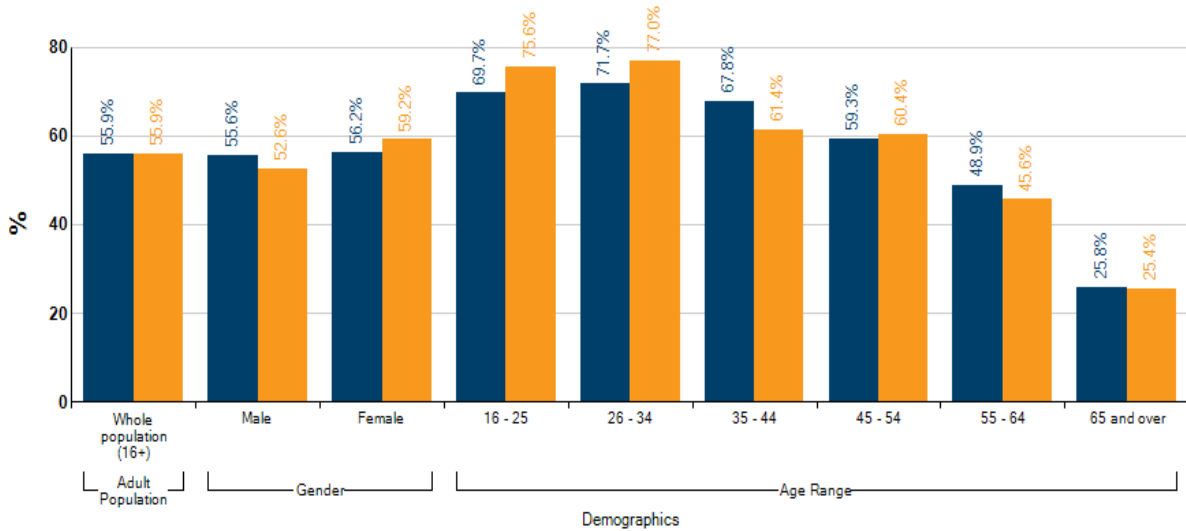
<sup>23</sup> The 3x30 minutes participation measure (N18) differs from Sport England's 1x30 sports participation indicator, including a wider range of activities (than specified for 1x30) such as recreational walking and cycling

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highlights the latent demand for Bury compared to the national average by adult population, gender and age group.

**Figure 2.3 – latent demand to undertake more sport than at present<sup>24</sup>**

*England = Blue; Bury = yellow*



2.14. When analysed specifically against those who are already active, 28% of this group would like to do more sport.

2.15. Most significantly, of those currently inactive 27.9% also said they would like to do more sport.<sup>25</sup> Within this group there is higher than national average demand amongst women, and also amongst males and females in the 45-54 year old category.

2.16. A key challenge for the strategy is to understand how to translate these positive intentions into commitment and action.

**b. What activity are people undertaking?**

2.17. Walking and cycling are seen as key areas of focus nationally. Improved walking and cycling infrastructures can encourage more people to be active and support people with long term chronic diseases. For example, across a town of 150,000 people, if everyone walked an extra 10 minutes a day, evidence shows that 31 lives per year can be saved.<sup>26</sup>

2.18. Figure 2.4 below shows the changing travel trends since 1995 and highlights a significant 30% decrease in the number of walking trips over the period.

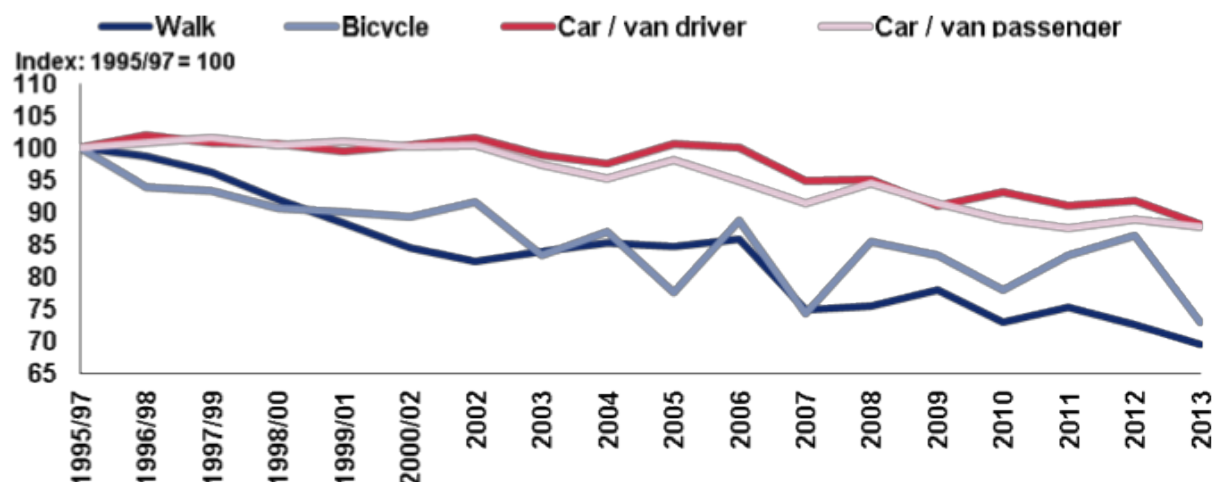
<sup>24</sup> Source: Active People Interactive, based on APSS data.

<sup>25</sup> The proportion/number of adults (aged 16 and over) who would like to do more (of the) sport over the next 12 months than they currently do AND have not participated in any sessions of (the) sport, at any intensity or duration, in the last 28 days. Respondents select one sport they would most like to do/do more of.

<sup>26</sup> World Health Organisation (2011) Health economic assessment tools (HEAT) for walking and cycling: WHO.



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**Figure 2.4 – Average number of trips by selected private transport modes: England, 1995/97 to 2013<sup>27</sup>**

- 2.19. Nationally swimming, athletics, cycling, and football are amongst the most popular sports in 2013/14.
- 2.20. However the biggest changes in participation in sport over recent years has been the growth of individual and more informal sports participation activities such as going to the gym, cycling, running, or fitness classes. The market is evolving and becoming more mature and it is important that the physical activity and sport market is supported to develop and evolve to meet customers demands.

**Figure 2.5 – type of activity undertaken**

	Bury (No's)	Bury (%)	England
Any organised sport <sup>28</sup>	52,600	35.4%	33.9%
Club membership	37,500	25.2%	21.6%
Coaching or tuition	23,600	15.9%	16.4%
Competition	20,200	13.7%	13.3%

- 2.21. Figure 2.5 above highlights the type of activity people are involved in as measured by the Active People Survey. This highlights that organised sport makes an important contribution to activity levels, but this should again be understood alongside the changing trends of undertaking organised sport, e.g. club membership levels remaining static, whilst alternative forms of sport have been developed often targeted to different market segments, e.g. back to netball, walking football etc.
- 2.22. However, whilst this is important insight in terms of what people are doing what this doesn't show is what activities are most appropriate to engaging the inactive and this is where the sector needs to challenge itself to tailor the offer to address specific barriers and motivations of these groups.

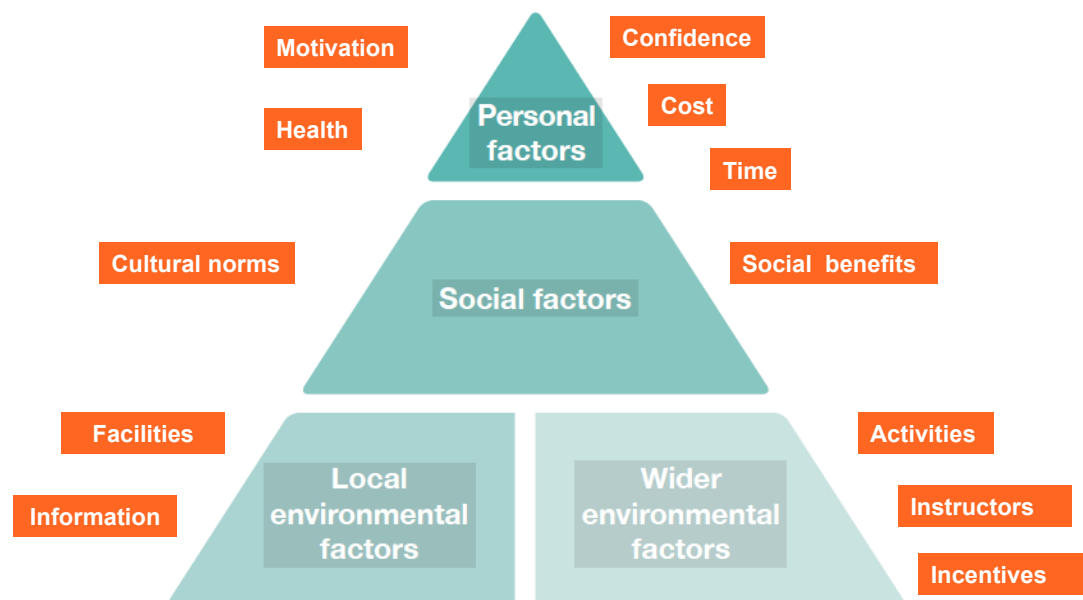
<sup>27</sup> National Travel Survey, England, 2013

<sup>28</sup> This includes anyone who is in one or more of the sub categories

### c. Barriers and Motivations

- 2.23. In order to come up with an achievable plan to change activity levels it is important to understand the barriers and motivations to getting active. This builds on the premise that a significant element in creating the enablers for growth is about addressing social perceptions, influencing attitudes and stimulating demand.
- 2.24. Bury is well placed in this regard because of IWIYW, which is focussed upon changing women and girls' behaviours to take part in sport and physical activity with the aim of getting more women and girls being more active, more often. IWIYW applies the framework set out in The Government Communication Service (GCS) guide to behaviour change, 2014,<sup>29</sup> clustering insights regarding behavioural influences across the three broad categories of personal, social and environmental. The key influencing factors to support a more active lifestyle are summarised below.

**Figure 2.6 – behavioural influences on participation in physical activity and sport**



- 2.25. The mix of behavioural influences (barriers and motivators) set out above will of course differ according to different target groups of people and the stage of their journey to increased physical activity. This does however provide the framework under which these barriers and motivations can be understood and addressed across different target groups.
- 2.26. Appendix C provides a link to the latest insight into key influences on participation of different groups.

<sup>29</sup> Click [here](#) for a link to the Government Communication Service guide to behaviour change

## d. Risks and costs of inactivity

2.27. As noted in section 1, the weight of the evidence base regarding the risks and costs of inactivity is compelling:

- Physical inactivity directly contributes to one in six deaths in the UK the same number as smoking.<sup>30</sup>
- Physical inactivity is the fourth largest cause of disease and disability in the UK.<sup>31</sup>
- ‘Physical inactivity poses a serious and growing danger to society; it damages health, economy and the environment and limits the educational attainment and future lives of children.’<sup>32</sup>
- Physical inactivity leads to around 37,000 premature deaths a year.<sup>33</sup>
- Evidence highlights that active people are less likely to suffer from heart disease, stroke, cancer, diabetes and may consequently live 5 years longer.<sup>34</sup>
- Lack of physical activity is estimated to double the rate of absenteeism at work.<sup>35</sup>

### Excess Weight

2.28. Excess weight and obesity is one of the many risks associated with inactivity in both adults and children. The evidence available highlights:

- In 2012 approximately 68.2% of adults in Bury were classified as overweight or obese. That is an extremely concerning statistic in terms of the health of the population.
- Excess weight in children aged 4-5yrs has been seen to fluctuate over the years and in 2013/14 the percentage of children measured overweight or obese was 19.4%, marginally below the regional and national trends.
- Evidence in terms of physical activity participation in schools and how this is collected needs further progress enabling robust analysis of activity and weight management in children.

### Figure 2.7:

<sup>30</sup> Lee I-M, et al, 2012, Wen CP, 2012, Health and Social Care Information Centre 2014

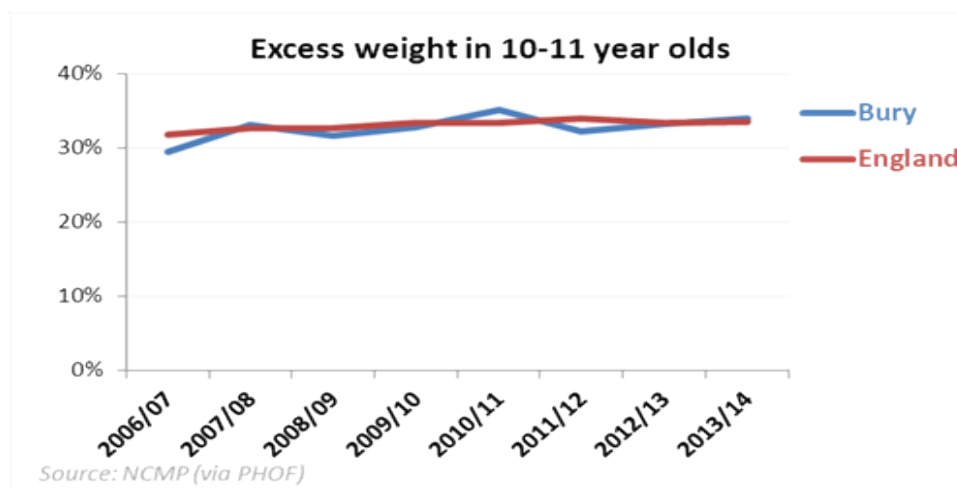
<sup>31</sup> Murray et al. (2013) UK health performance: findings of the Global Burden of Disease Study 2010. The Lancet 381: 997-1020

<sup>32</sup> Tackling Physical Inactivity – A coordinated approach, All Party Commission on Physical Activity, 2014

<sup>33</sup> Network of Public Health Observatories, (2013), Health Impact of Physical Inactivity, <http://www.apho.org.uk/resource/view.aspx?RID=123459>

<sup>34</sup> Designed to Move, (2013), Designed to Move: A physical activity agenda, <http://www.designedtomove.org/>

<sup>35</sup> Tackling Physical Inactivity – A coordinated approach, All Party Commission on Physical Activity, 2014



- In terms of children aged 10-11 years figure 2.7 above highlights an increase in the percentage of children with excess weight greater than the national increase. In 2013/14 34% of 10-11 year children in Bury are classed as overweight, a growth of 4.5% since 2006-07. Additional work needs to be developed around the offer for this age group, which should include regular physical activity in and out of the school and improved guidance on healthier foods and soft drink as part of the curriculum. This will be further developed through the Healthy Weight commissioning intentions.

## Health Costs

- 2.29. Estimates of the health costs vary. Whilst Public Health England have highlighted the net cost in the UK to be £7.4 billion per annum, the All Party Commission on Physical Activity, inactivity cited evidence that the cost to the UK economy is approximately £20 billion every year.<sup>36 37</sup>
- 2.30. Apart from the obvious costs to individuals and their families in terms of ill health and reduced life expectancy, other costs associated with physical inactivity include:
- treatment of disease including prescribing costs (such as heart disease, diabetes, cancer , obesity, depression and dementia)
  - injuries from falls
  - social care arising from loss of functional capacity and mobility in the community
  - sickness absence from work and school
  - loss of work skills through premature death or incapacity
  - lower quality of life and mental wellbeing for individuals and carers.
- 2.31. Figure 2.8 below highlights the comparative health costs of physical inactivity for Bury against the North West, and England. The total health cost of inactivity per year in Bury is over £4.5 million. Perhaps more worryingly the cost per 100,000 populations in Bury is significantly higher than against both North West and England benchmarks.

### Figure 2.8 - Health Costs for Physical Inactivity<sup>38</sup>

<sup>36</sup> Designed to Move, (2013), Designed to Move: A physical activity agenda, <http://www.designedtomove.org/>

<sup>37</sup> A more detailed breakdown of some of the specific risks of inactivity is included in Section 2.

<sup>38</sup> Source: Sport England commissioned data from British Heart Foundation Health Promotion Research Group for PCTs, reworked into estimates for LAs by TBR. Year: 2009/10, Measure: Health costs for physical inactivity, split by disease type.

Disease Category	Bury	North West	England
Cancer lower GL e.g. bowel cancer	£321,760	£10,000,041	£67,816,189
Breast Cancer	£367,730	£7,919,863	£60,357,887
Diabetes	£636,300	£29,733,783	£190,660,420
Coronary heart disease	£2,744,130	£81,670,410	£491,095,943
Cerebrovascular disease e.g. stroke	£470,400	£20,181,189	£134,359,285
<b>Total Cost</b>	<b>£4,540,320</b>	<b>£149,505,285</b>	<b>£944,289,723</b>
<b>Cost per 100,000 population</b>	<b>£2,453,984</b>	<b>£2,145,919</b>	<b>£1,817,285</b>

2.32. The Illustration provides a snap shot with a range of health conditions associated with levels of sedentary behaviour and inactivity. Regular physical activity can help avert many of the conditions which have been referenced, and therefore many of these diseases are manageable and preventable.

### e. Summary of what evidence tells us works

2.33. In developing the strategy it has been important to understand what evidence tells us works in terms of increasing participation, both from national guidance and also with what we know works in Bury.

2.34. Public Health England through ‘Everybody active, every day’ has also produced a ‘What works – the evidence’ document.<sup>39</sup> Much of this is taken from NICE evidence based guidance (see appendix C). A brief summary of evidence highlights:

- Implementation across settings:
  - Physical environment – NICE guidance on physical activity and the environment emphasises that local authorities prioritise the creation and maintenance of environments that encourage people to be active, with features that have an impact on physical activity including location, density and mix of land use, physical access to public services, open and green space, and transport.
  - Social environment – people are more likely to be active if it is seen as ‘normal’, and if their friends and peers are also active.
  - Community-wide – increasing social support for physical activity within communities, specific neighbourhoods, and worksites can effectively promote physical activity. This can include town wide programmes in which successful marketing is reinforced by community level action.
  - Group – evidence suggests that the social element behind physical activity aids enjoyment and that social support encourages sustained behaviour change.
  - One to one – there is strong evidence for the effectiveness of counselling and brief advice in primary care to increase an individual’s physical activity.
- Implementation across the life course – with the acknowledgement that benefits of being more active can accrue across the life course:

<sup>39</sup> Everybody active, every day: what works – the evidence. Public Health England, October 2014.

- Starting well – research suggests that campaigns to improve children’s health should be directed to whole families. The school is also clearly a critical setting with evidence supporting a ‘whole school approach’, including physical education, classroom activities, after-school sports, and promoting active travel to and from school. Evidence also suggests that managing the transition periods between stages in education and through to employment is important as it can lead to drop off in participation.
- Living well – with 70% of the population in employment the workplace is clearly important, but consideration also needs to consider wider physical and social settings.
- Aging well – with an aging population, and 24% of the total population aged over 60 by 2030, this group is an important focus. Evidence suggests that physical activity can tackle the growing problem of social isolation, as well as giving health benefits such as a reduction in falls, which is aligned to the priority to reduce non elective hospital admissions.

2.35. Underpinning this are four key principles:

- Positive change needs to be long term and large-scale
- Interventions must be based on community needs
- Research and co-design will mean initiatives are workable and effective
- It is not about new investment– it is more about maximising existing assets.

2.36. At a local level there are a number of activities in Bury that have shown a level of success in terms of increasing participation.

### ***IWIYW – I Will If You Will***

2.37. This national pilot programme aims to get more women and girls active and playing more sport. Significant learning has been developed through phase one of the programme which has helped to inform this strategy. For instance:

- Bringing innovative behaviour change thinking to traditional sports development is challenging – but necessary and productive.
- Stakeholder and commercial engagement should be considered priorities to ensure the sustainability of the project beyond the initial funding period. The benefits to the partner of getting involved must be clear and explicit.
- The need for learning and insight to be at the core of projects of this nature.
- The central role of marketing and communications in driving behaviour change should not be underestimated.
- Monitoring and Evaluation frameworks must be tightly aligned with programme objectives.
- Retention is as important a challenge as participation and should be a focus from the outset, with a better understanding of the target audience’s journeys. Instructors can play a vital role here.
- Behaviour change takes time. Although early indicators can be tracked sooner, one year is too short a period to expect to measure sustained increases in physical activity and associated benefits.
- Getting a good mix of delivery providers involved is important, with as many different points of supply as possible in a ‘whole market’ approach.

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- A diverse range of activities should be offered for women and girls, including traditional sports, dance based and innovative new activities – recognising this group’s various needs and motivations.
  - Convenience in terms of timing and location is key to overcome practical barriers to participation. Hyper local, community based activities offer many advantages.<sup>40</sup>
- 2.38. This learning has informed the development of phase two of the project supported with an additional £2m of lottery funding from Sport England through to the end of 2016.

### ***GP Exercise Referral***

- 2.39. Bury’s GP referral scheme provides people who have a Long Term Condition’s (LTC) with a structured exercise programme which encourages and promotes behaviour change through regular physical activity participation with the main focus on better health management and increased physical activity as an outcome. Success has been observed through the increased levels of retention by clients accessing and staying active within the programme. Significant health improvements have been reported, reduced usage of medication, less visits to GP’s, increased mobility, more energy and an overall sense of wellbeing. Continued work in this area will provide those identified by health care professionals a pathway in which they can access physical activity in a safe and structured environment.

### ***Open Green Space***

- 2.40. Bury sees a wide range of activities to the whole community located in local parks and green space; Green Gyms, Healthy Walks, Buggy Boot camps, cycling routes provide an opportunity to exercise outside of the traditional facility setting. Open Green Space provides an opportunity for communities to come together building on improved community cohesion and creating stronger communities.

### ***Capitalising on the range of providers in the market***

- 2.41. This area is highlighted because, whilst there is some good partnership work in the borough, the breadth of providers and the consideration of non-traditional providers are often overlooked despite the critical role they play in a mixed economy of physical activity and sporting opportunities. This market is sizeable given we know that £45.5m is generated per annum in Bury from people participating in sport.
- 2.42. The integration of physical activity and sport into mainstream services also offers non-traditional routes into physical activity and sport. Together this range of providers offers market choice to help meet the demands and specific needs of different sectors of the community. This list of providers includes private sector providers (small and larger scale operators), Bury Leisure, Bury FC Community Trust, Pennine Care Trust, Education providers, Community groups, Charities, voluntary sports clubs, slimming groups.

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<sup>40</sup> Adopted from the draft Sport England IWYIW Phase One Evaluation Report

### 3. Our Aims and Objectives

3.1. Having outlined a clear vision and rationale for increasing participation in physical activity and sport, and understood where we are now, Section 3 outlines our delivery framework for what we propose to do including our aims, objectives and the enablers for growth.

#### a. Aims

Aim	Rationale
<p><b>1. Adopt a targeted approach to supporting the inactive become active</b></p>	<ul style="list-style-type: none"> <li>- We will only address the health challenges caused by inactivity if we get those who are currently inactive to be more active. All the evidence suggests this is a really challenging area and needs specific tailored interventions to support the behaviour change process (see Section 2).</li> <li>- The focus on the targeting is to utilise available insight to identify who the inactive groups are and put in place appropriate support.</li> <li>- We will apply the market segmentation approach adopted by IWYIW<sup>41</sup> to define who the inactive are. This recognises that even those who do something may not be doing the required levels for good health. The focus for this aim is on:               <ul style="list-style-type: none"> <li>- Low active (1 to 3 sessions of 30 mins / month)</li> <li>- Inactive (less than 1 session per month but doing some form of activity)</li> <li>- ‘Profoundly inactive’ (no physical activity at all).</li> </ul> </li> <li>- This aim recognises that many can access the ‘universal offer’ for physical activity and sport directly with the right support to do so. However, for many in this group tailored physical activity interventions will be required to put people on the pathway into the ‘universal offer’ and sustained physical activity habits.</li> <li>- The importance of integration of physical activity and sport into the mainstream is key through identification of the different ‘touch points’ into people’s lives.</li> </ul>
<p><b>2. To sustain and increase participation for those already active</b></p>	<ul style="list-style-type: none"> <li>- It is critical that this strategy doesn’t ignore those already active for a number of reasons, most particularly the only way to sustain high participation levels is to get those inactive being more active, <i>and</i> also to retain those already active in physical activity and sport.</li> <li>- A focus under this aim is to consider the ‘safety nets’ that are required to ensure that people don’t drop out of activity.</li> <li>- This aim primarily deals with the ‘universal offer’ for physical activity</li> </ul>

<sup>41</sup> Insight into women (aged 16+) in Bury at the start of IWYIW in 2013 showed that over 70% of women fell into these three categories.



Aim	Rationale
	<p>and sport that can be accessed by the whole population. This will also consider the pathways that need to be put in place (within Bury and linking into the wider Greater Manchester infrastructure) to allow local people with talent to fulfil their potential in sport.</p> <p>– Key features that will underpin the retention in activity include market development of opportunities to meet local demands, and ensuring the quality of the experience.</p>

- 3.2. **The message is simple, everybody active, more often** – for those who do nothing it is about getting them onto the pathway, for those already active it is about doing a little more (frequency and/or intensity), and/or sustaining existing high levels of participation over the life course.

## b. Objectives

- 3.3. Ten key objectives have been identified to help deliver the aims of this strategy. They are listed in table 3.1 below and consider the different ways in which we can create an environment for growth including:

- Stimulating demand for physical activity and sport, and sustaining (and re-prompting interest).
- Influencing market development and the supply of physical activity and sport opportunities.
- How we can influence the system in terms of creating capacity and enhancing capability to deliver effectively.

- 3.4. The priority actions that determine how we will deliver these objectives are listed in our **Action Plan** (see appendix A). Section 4 outlines how this Action Plan will be utilised as a live document that is updated annually to ensure we deliver our stated ambitions.

- 3.5. Alongside the aims and objectives are two other key features of our delivery framework; the enablers for growth, and the importance of adopting a life course approach.

## c. Enablers for growth

- 3.6. Three enablers for growth have been identified that cut across many of the objectives for the strategy. They are:

- **Social Perceptions** – stimulating demand in the market place, and helping to sustain (re-prompt) interest.
- **Physical Activity and Sport Opportunities** – the supply of programmes and activities to ensure market choice and create targeted opportunities. The scope of physical activity and sport opportunities is defined in figure 1.3 in Section 1.
- **Physical Environment** – including open space, built infrastructure for sport and physical activity, and infrastructure that enables activity/improves accessibility of activity (e.g. enabling travel arrangements, cycle parks, showers in workplaces etc).

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#### **d. A life course approach**

- 3.7. The benefits of regular physical activity have been clearly set out across the life course with the strength of the relationship between physical activity and sport and health outcomes persisting throughout people's lives.
- 3.8. As a result of age we get less active, however, the good news is it's never too late to adopt a more physically active lifestyle. There is good evidence that the benefits of physical activity apply even to older people who have previously been inactive. With a greater proportion of older adults in Bury than nationally, and lower participation levels with age this presents a particular challenge locally in terms of increasing participation.
- 3.9. It is important to start early though. Trends in terms of remaining active from a young age are considered a challenge with only 23% of girls aged 5-7 nationally meeting the recommended levels of daily physical activity, declining to only 8% by the age of 13-15.
- 3.10. The importance of adopting a life course approach to increasing participation in physical activity and sport is therefore a key underpinning principle within the strategy. In designing the delivery framework we have therefore considered how our objectives will impact upon people in different stages of life.

#### **e. Delivery Framework**

- 3.11. The Delivery Framework is presented in table 3.1 below. This outlines the 10 key objectives, and illustrates their contribution to the strategic aims of getting people active and maintaining this for the lifecourse. In order to achieve this they are considered alongside the key enablers.

##### ***Active Travel example***

- Active Travel can be part of the 'universal offer' helping to achieve both aims, having relevance to both engaging the inactive, and also supporting on-going active lifestyles.
- It impacts across the life course from children going to school right through to older people.
- To achieve the objective will require:
  - Work to change social perceptions around Active Travel, e.g. that it isn't safe to cycle to work, and also to promote this as a 'normal' way to travel
  - It will require opportunities to be put in place by schools and workplaces for instance to facilitate people's engagement
  - It will require changes to the physical environment, for example, provision of bicycle racks, or showers in workplaces, or development of cycle lanes.

- 3.12. For a detailed outline of the priority actions that we will address to achieve these objectives please refer to the Action Plan in appendix A.

**Table 3.1 - Delivery Framework**

OBJECTIVE	AIMS		LIFE COURSE					ENABLERS		
	1. Adopt a targeted approach to support the inactive become active	2. To sustain and increase participation for those already active	Early Years (0-5)	Children (6-13)	Young People (14-25)	Adults (26-64)	Older Adults (65+)	Social Perception	Physical activity & Sport Opportunities	Physical Environment
1. <u>Influence commissioning and policy making</u> to incorporate physical activity and sport	✓	✓						✓	✓	✓
2. <u>Influence attitudes and behaviours to stimulate (re-prompt) demand</u> for physical activity and sport	✓	✓						✓		
3. Make the <u>workplaces</u> of Bury amongst the most active in the country	✓	✓						✓	✓	✓
4. Ensure people who have <u>long term conditions</u> (LTCs) access physical activity and sport	✓							✓	✓	✓
5. Increase the number of people undertaking <u>Active Travel</u>	✓	✓						✓	✓	✓
6. <u>Build intelligence and insight</u> to help create the right environment for growth	✓	✓						✓	✓	✓
7. Improve the <u>skills and capacity of the sport and physical activity workforce</u>	✓	✓						✓	✓	
8. Deliver high quality sport, physical activity and physical education opportunities for <u>children and young people</u>	✓	✓						✓	✓	✓
9. <u>Develop the physical activity and sport market</u> to ensure it is high quality, accessible, and reflects local demands across the life course, all abilities and backgrounds	✓	✓						✓	✓	
10. Develop our <u>physical assets and places</u> to ensure they are accessible, high quality, and reflects local demands across the life course, all abilities and backgrounds	✓	✓						✓	✓	✓

## **4. Delivering our ambitions**

### **a. Action Plan**

- 4.1. The Action Plan in appendix A outlines 43 priority actions to be addressed in order to ensure that the key objectives are on track to be delivered.
- 4.2. This is the key document that will drive the implementation of the Strategy and will be overseen through the governance arrangements outlined below.
- 4.3. As a live document it is proposed that the Action Plan is updated on an annual basis to ensure that the priority actions remain current. Many of these are time limited and will require refreshing as partners work towards achieving the objectives.

### **b. Resourcing**

- 4.4. This strategy subscribes to the key principle outlined in ‘Everybody active, every day’ which notes that to deliver change is not necessarily about new investment – it is more about maximising the potential of existing assets and resources. This relates to both existing investment and also our assets such as open spaces, streets, parks, leisure facilities, community halls, schools and workplaces.
- 4.5. Bury is fortunate that between 2013-16 will have received £4.3m (including £2m from 2015-16) from Sport England to help address the challenges of inactivity from 50% of the population through the IWIIYW women and girls project. The learning from phase one of this project has helped to inform much of the development of this strategy.
- 4.6. The Action Plan also makes reference to the existing products and services we have in place in Bury aligned to different priority actions. We are starting from a position that there is already a lot happening to try and increase participation. The challenge is that the status quo will not achieve the aims, we need to consider how we bring this together to really maximise the investment to achieve a sustained change in participation habits.
- 4.7. In addition, it will be important to consider Bury’s role within the city-region, through the Greater Manchester Devolution Agreement, the Greater Manchester Strategy, and the new Greater Manchester Sport and Physical Activity Strategy. The recent announcement regarding bringing together health and social care budgets across the city-region – a combined sum of £6 billion presents some interesting opportunities for physical activity and sport particularly with a focus on the prevention of ill health and the promotion of wellbeing.

### **c. Governance**

- 4.8. This is a strategy for the population of Bury as a whole; it is not a Council Strategy. Whilst the Council clearly have a leading role to play the ambitions will only be achieved through a multi agency approach to addressing the challenges of physical inactivity, and helping to sustain active lifestyles.
- 4.9. The proposed governance model is shown in figure 4.1 below.

**Figure 4.1 – proposed Governance model**



- 4.10. The Strategy is owned by the Bury Health and Wellbeing Board who will provide strategic direction and oversight.
- 4.11. There will also be a reporting line to Team Bury, recognising that the outcomes of this strategy contribute to a number of areas of the Community Strategy and will not just be relating to health and wellbeing.
- 4.12. Operational oversight of the strategy will sit with a re-constituted Active Bury (sport and physical activity alliance), which is a partnership group of the key strategic agencies engaged in physical activity and sport and who will be responsible for driving forwards the objectives and priority actions. It will be responsible for owning, updating and ensuring delivery against the Action Plan.
- 4.13. Active Bury will be accountable to and will report directly to the Health and Wellbeing Board. As such this will help to give the group legitimacy and empower the stakeholders involvement to be able to make a difference.

## Appendix A – Action Plan<sup>42</sup>

PRIORITY ACTIONS	CONTRIBUTION TO AIMS		ALIGNMENT OF EXISTING PRODUCTS / SERVICES	TIMESCALES	RESOURCING	PARTNERS (Proposed Lead) <sup>43</sup>
	1. Adopt a targeted approach to support the inactive become active	2. To sustain and increase participation for those already active				
<b>1. INFLUENCE COMMISSIONING AND POLICY MAKING TO INCORPORATE PHYSICAL ACTIVITY AND SPORT</b>						
1.1 Develop a physical activity assessment process into planning policy utilising existing models of best practice	✓	✓	TBC	TBC	TBC	Stefan Taylor, Health Improvement Specialist
1.2 Incorporate physical activity and sport into relevant policy's across the borough	✓	✓	Policy & Planning	2015	Internal	Bury Workforce Strategy Group, DPH
1.3. Ensure that commissioners have a long term plan for addressing physical inactivity including building it into existing commissions and contracts	✓		TBC	TBC	TBC	Julie Gonda, Commissioning & Procurement Stefan Taylor
1.4 Influence policy making at a Greater Manchester level, particularly in the context of Greater Manchester Devolution	✓	✓	GreaterSport	TBC	TBC	Lesley Jones, Public Health Pat Jones-Greenhalgh Harry Downie
<b>2. INFLUENCE ATTITUDES AND BEHAVIOURS TO STIMULATE (RE-PROMPT) DEMAND FOR PHYSICAL ACTIVITY AND SPORT</b>						
2.1 Building from the insight developed from IWIYW, to develop a marketing and communications campaign aimed at addressing known barriers for inactive groups, in particular challenging existing 'norms' to re-position being physically active as positive, fun and rewarding and something open to all	✓		IWIYW	2015 - 2016	Internal	Gill Long, Communications Donna Campbell, IWIYW Marcomms
2.2 Develop and implement learning from IWIYW regarding approaches to encourage retention		✓	IWIYW	Dependant on new	Internal	John Mclean, IWIYW Insight

<sup>42</sup> This is a 12 month Action Plan that will be reviewed on an annual basis

<sup>43</sup> The proposed leads are for agreement with the new Active Bury partnership

PRIORITY ACTIONS	CONTRIBUTION TO AIMS		ALIGNMENT OF EXISTING PRODUCTS / SERVICES	TIMESCALES	RESOURCING	PARTNERS (Proposed Lead) <sup>43</sup>
	1. Adopt a targeted approach to support the inactive become active	2. To sustain and increase participation for those already active				
				CRM system		
2.3 Work in partnership to develop effective approaches to intelligently signpost people towards physical activity and sport opportunities	✓	✓	IWIYW	Dependant on new CRM system	Internal	Donna Campbell, IWIYW Marcomms
2.4 Ensure physical activity and sport is integrated into existing public health campaigns	✓			2015	TBC	Heather Crozier Social & Development Team Stefan Taylor
2.5 Utilise learning from IWIYW to develop a plan for engaging with the ‘touch points’ around an individual’s life to support in changing behaviours, raising awareness of the benefits of physical activity and sport, and signposting people to relevant opportunities (see also 6.1)	✓	✓	IWIYW	Dependant on new CRM system	Internal	IWIYW workforce
<b>3. MAKE THE WORKPLACES OF BURY AMONGST THE MOST ACTIVE IN THE COUNTRY</b>						
3.1 For Bury Council to take a lead in improving activity levels of its own workforce	✓	✓	IWIYW	2015	TBC	Bury Workforce Strategy Group
3.2 To work with local employers to understand what is important in establishing the Active Travel Plan for the borough (see 5.2) and how they can become physically active employers	✓	✓	TfGM Sustrans	2015	TBC	Chris Wilkinson Jackie Veal Bury Council
<b>4. ENSURE PEOPLE WHO HAVE LONG TERM CONDITIONS (LTCS) ACCESS PHYSICAL ACTIVITY AND SPORT</b>						
4.1 Extend the existing GP Referral programme to include people with a BMI of 25 and above	✓		BEATS; YOLO; BEATS/IWIYW	May 2015	Internal	Lee Buggie, BEATS, Sport & Physical Activity Service

PRIORITY ACTIONS	CONTRIBUTION TO AIMS		ALIGNMENT OF EXISTING PRODUCTS / SERVICES	TIMESCALES	RESOURCING	PARTNERS (Proposed Lead) <sup>43</sup>
	1. Adopt a targeted approach to support the inactive become active	2. To sustain and increase participation for those already active				
4.2 Develop a falls prevention intervention pathway	✓		Falls Service	2015	TBC	Stefan Taylor Lee Buggie
4.3 Commission a longitudinal study regarding the participation / retention rates of LTC interventions	✓			2016	TBC	Stefan Taylor
4.4 Build physical activity guidance in as part of mainstream assessment processes, e.g. to adults having their NHS Health Check; to parents / carers of children during their child's Healthy Child Programme 2-year review; to parents or carers of children as part of the National Child Measurement Programme (NCMP)	✓		NHS Health Check, Healthy Child Programme, National Child Measurement Programme	2015 Ongoing	Internal	Lindsey Mooney Steph Mitchell Stefan Taylor
<b>5. INCREASE THE NUMBER OF PEOPLE UNDERTAKING ACTIVE TRAVEL</b>						
5.1 Establish an Active Travel partnership to increase Active Travel	✓	✓	SPAS, Cycling & Walking groups, Planning, TfGM, Parks, Engineering	July 2015	TBC	Chris Wilkinson Stefan Taylor
5.2 Develop an Active Travel Plan by assessing supply and demand helping to establish a set of commissioning intentions	✓	✓	TBC – Bury Active Travel Group	Oct 2015	TBC	Chris Wilkinson Stefan Taylor
<b>6. BUILD INTELLIGENCE AND INSIGHT TO HELP CREATE THE RIGHT ENVIRONMENT FOR GROWTH</b>						
6.1 Develop the IWIYW Blueprint to evidence how intelligence and insight can underpin successful approaches to increasing physical activity and sport	✓	✓	IWIYW	Dependant on new CRM system	Internal	John Mclean, IWIYW Sport England Jane McPherson SE
6.2 Test the IWIYW CRM system to explore its value to this strategy beyond IWIYW in gathering market insight	✓	✓	IWIYW	2015	Internal	John Mclean, IWIYW Insight
6.3 Develop profiles of inactive and active people in Bury to inform delivery of the objectives of the strategy	✓	✓	IWIYW / internal Intelligence	2015	Internal	John Mclean, IWIYW Insight



PRIORITY ACTIONS	CONTRIBUTION TO AIMS		ALIGNMENT OF EXISTING PRODUCTS / SERVICES	TIMESCALES	RESOURCING	PARTNERS (Proposed Lead) <sup>43</sup>
	1. Adopt a targeted approach to support the inactive become active	2. To sustain and increase participation for those already active				
<b>7. IMPROVE THE SKILLS AND CAPACITY OF THE SPORT AND PHYSICAL ACTIVITY WORKFORCE</b>						
7.1 Establish coaching and officiating pathways	✓	✓	SAPAS	2015	Internal	Jackie Veal Carly Heselwood Sport & Physical Activity Service
7.2. Provide a training and capacity building programme to support delivery of activity to women and girls (IWIYW)	✓	✓	IWIYW	2015	Internal	Pritesh Patel, (IWIYW Sport & Active Lifestyles)
7.3. Develop a coordinated plan to ensure that we adequately value our Volunteers	✓	✓	SAPAS	2015	Internal	Jackie Veal Carly Heselwood Sport & Physical Activity Service
7.4. Deliver a ‘Champions’ volunteering programme supporting women and girls to become more active	✓	✓	IWIYW	2015	Internal	(IWIYW Communities Lead) new officer in post June 2015
7.5 Improve skills of the workforce to supporting the inactive to become active, for e.g. integration of key skills around physical activity for older adults amongst health and social care staff, support coaches, Bury Leisure staff with training and guidance on integration of behaviour change	✓		IWIYW	2015	Internal	Pritesh Patel Simon Wesolowski, IWIYW Training Development Officer
7.6 To ensure that health care professionals have sufficient and appropriate training and competencies to deliver against the actions around physical activity	✓		TBC	TBC	TBC	Stefan Taylor
7.7 Develop a plan for the recruitment of more volunteers, including engagement with employers	✓	✓	SAPAS	2015	Internal	Jackie Veal Carly Heselwood Sport & Physical Activity Service

PRIORITY ACTIONS	CONTRIBUTION TO AIMS		ALIGNMENT OF EXISTING PRODUCTS / SERVICES	TIMESCALES	RESOURCING	PARTNERS (Proposed Lead) <sup>43</sup>
	1. Adopt a targeted approach to support the inactive become active	2. To sustain and increase participation for those already active				
<b>8. DELIVER HIGH QUALITY SPORT, PHYSICAL ACTIVITY AND PHYSICAL EDUCATION OPPORTUNITIES FOR <u>CHILDREN AND YOUNG PEOPLE</u></b>						
8.1 Help give people the best start in life by improving physical literacy levels of 0-5s	✓		Lets Play	TBC	TBC	(Tbc)
8.2 Ensure that the PE and Sport premium for Primary Schools improves the quality of the PE and sport activities they offer their pupils	✓	✓	PE and Sport Premium Private Providers	2015 Ongoing	External	Gill Molloy Naomi Williams Gareth Oliver Broadoak Sports College
8.3 Ensure that Bury Schools are actively engaged in competition opportunities via the School Games, in particular: <ul style="list-style-type: none"> <li>• Level 1 – Intra school (in school)</li> <li>• Level 2 – Inter school (between schools)</li> <li>• Level 3 – County/ area festivals</li> </ul>		✓	School Games Greatersport	2015 2 Games per year Winter and Summer	External	Gill Molloy Naomi Williams Gareth Oliver Broadoak Sports College
8.4 Every college student in Bury is encouraged, supported and has the opportunity to participate in physical activity and sport as an integrated part of their college experience (contributing to learning, progression to employment and the development of active and sporting habits for life)	✓	✓	Active Colleges (including College Sportmaker), Sportivate, IWYIW	TBC	TBC	Scott Carnegie, College Sport Maker, Bury College
8.5 Ensure that schools physical activity and sport provision helps to engage inactive children, and those with excess weight	✓		Sportivate	TBC	TBC	School link Lee Buggie
8.6 Fully integrate physical activity and sport as part of the Healthy Schools Programme	✓		Schools	TBC	TBC	Public Health Steph Mitchell
8.7 Ensure there are pathways in place to continue to participate in organised sport and for those with talent to		✓	Satellite Clubs, Club Matters, Sportivate	TBC	TBC	Jackie Veal Carly Heselwood Sport & Physical

PRIORITY ACTIONS	CONTRIBUTION TO AIMS		ALIGNMENT OF EXISTING PRODUCTS / SERVICES	TIMESCALES	RESOURCING	PARTNERS (Proposed Lead) <sup>43</sup>
	1. Adopt a targeted approach to support the inactive become active	2. To sustain and increase participation for those already active				
fulfil their potential						Activity Service
8.8 Support the growth of a strong and vibrant sports club infrastructure across Bury		✓	Doorstep Clubs, Club Matters	TBC	Internal	Carly Heselwood
<b>9. DEVELOP THE PHYSICAL ACTIVITY AND SPORT MARKET TO ENSURE IT IS HIGH QUALITY, ACCESSIBLE AND REFLECTS LOCAL DEMANDS ACROSS THE LIFECOURSE AND ALL ABILITIES AND BACKGROUNDS</b>						
9.1 Audit the market to understand the current supply of physical activity and sport opportunities (across different providers) in Bury	✓	✓	IWIYW	TBC	Internal	Pritesh Patel, IWIYW
9.2 Encourage market development to meet the identified needs of local people across the lifecourse, and all abilities and backgrounds (linked to 9.1 and 3.3)	✓	✓	IWIYW	TBC	Internal	Jackie Veal Pritesh Patel, IWIYW Sport & Physical Activity Service
9.3 Identify where specialist interventions will need to be commissioned to meet the needs of targeted inactive groups	✓		BEATS, BEATS/IWIYW, YOLO, New Sport England disability project	TBC	Internal/external	Public Health Stefan Taylor
<b>10. DEVELOP OUR PHYSICAL ASSETS AND PLACES TO ENSURE THEY ARE ACCESSIBLE, HIGH QUALITY AND REFLECT LOCAL DEMANDS ACROSS THE LIFECOURSE AND ALL ABILITIES AND BACKGROUNDS<sup>44</sup></b>						
10.1 To develop an indoor leisure facilities strategy which is aligned to the outcomes and priorities of the Physical Activity and Sport Strategy. This strategy should consider the requirement for and/or long term	✓	✓	Leisure Facilities including Parks and open Spaces	TBC	Internal	Neil Long

<sup>44</sup> Note, there is some cross over with the Active Travel objective but this has been highlighted as an explicit objective because of the important opportunity it presents

PRIORITY ACTIONS	CONTRIBUTION TO AIMS		ALIGNMENT OF EXISTING PRODUCTS / SERVICES	TIMESCALES	RESOURCING	PARTNERS (Proposed Lead) <sup>43</sup>
	1. Adopt a targeted approach to support the inactive become active	2. To sustain and increase participation for those already active				
replacement of capital assets, co-location of services, alongside the Council's on-going revenue model						
10.2 To develop an up-to-date Playing Pitch Strategy in line with Sport England Playing Pitch Strategy Guidance		✓	Leisure Facilities	TBC	Internal	(Neil Long)
10.3 Maximise the potential of Bury in Bloom and the borough's open green spaces in supporting people to become active	✓	✓	Parks and Open Green Space	TBC	Internal	(Neil Long)
10.4 Identify opportunities for more innovative approaches to the provision of places to undertake physical activity and sport, e.g. housing and health care settings	✓	✓	Six Town Housing	TBC	TBC	(John Campbell)
10.5 Support the opening of school and college facilities for greater levels of community use.	✓	✓	Education	TBC	TBC	TBC (Children's Services)

## Appendix B – strategy outcomes

Outcome	Primary Indicators <sup>45</sup>	Rationale	Where are we now and targets <sup>46</sup>
<b>EVERYBODY MORE ACTIVE</b>	<b>PHOF<sup>47</sup> 2.13i - Percentage of physically active and inactive adults - active adults (i.e. 150 minutes per week)</b>	This is the measure where the evidence base is strongest in terms of health improvement  Through achieving this strong inference can be made as to the longer term health improvements within Bury.	54.1% active adults in 2013 compared to a national average of 55.6%  <b>TARGET:</b> <b>More than 61.5% of adults (16+) in Bury undertaking 150 minutes of moderate intensity physical activity per week, a sustained increase of 1.5% per annum<sup>48</sup></b>
	<b>PHOF 2.13ii - Percentage of active and inactive adults - inactive adults</b>	Considered the absolute baseline level – with an aspiration to get everybody (more) active this will highlight positive progression from those currently inactive.	29.5% inactive adults in 2013 compared to a national average of 28.9%  <b>TARGET:</b> <b>A reduction of 8,100 adults (16+) who are inactive and not reaching the guidelines of 150 minutes per week, a decrease of 1.5% per annum over the lifetime of the strategy<sup>49</sup></b>
	<b>Number of adults playing sport once a week (1x30)<sup>50</sup></b>	It is evidenced that sport makes a significant contribution towards achieving CMO guidelines on recommended levels of physical activity.  Allied to this it is vital to measure this, as it is the primary performance measure used for community sport.	37.2% (as measured through APS8 in October 2014)  <b>TARGET:</b> <b>An increase of 14,644 adults (16+) taking part in sport at least once a week</b>
	Number of adults taking part in sport and active recreation 12 times in the last 30 days (equivalent to 3x30 per week) <sup>51</sup>	Secondary measure to evaluate whether adults are becoming progressively more active through sport and active recreation	25.7% (APS8)
	Number of adults maintaining participation in sport	Forming sustained habits is critical to the success of the strategy	Not currently measured
Number of adults aged 16+ who are not reaching 150 mins to that level (NB: over 17k of them do something already)	an increase of 8,100 (1,620 pa)	Public Health England's measure is about the "equivalent minutes" (MEMs) of activity done per week and has three categories – active (150 or more MEMs), moderate intensity (less than 150 MEMs per week) and inactive (less than 30 MEMs per week). Within these measures are components of intensity and frequency of activity.	at least 1 session of sport a week
Satisfaction with physical activity and sports participation indicator includes a narrower range of activities and does not include recreational walking and sport offer	This is an important enabling measure as it strongly supports retention aspirations.	This is measured for sport as part of APS but a more holistic measurement is required	

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	Increased awareness of the benefits of being active	As part of the process of engaging the inactive it is important to ensure that the benefits of being active are clearly communicated and understood.	Not currently measured
<b>IMPROVED HEALTH AND WELLBEING<sup>52</sup></b>	Reduced need on NHS resources	To be measured through a reduction in Non Elective admissions	
	PHOF 2.12 - Excess weight in adults Reduction in obesity levels (whole population)	Given the well-established link between physical inactivity and obesity this is a primary measure to infer a positive impact made through increased participation levels.	Currently 68.2%, bordering the lowest 25 <sup>th</sup> percentile in the country
	PHOF 2.06i – Excess weight in 4-5 year olds		19.4%, slightly above the national average
	PHOF 2.06II – Excess weight in 10-11 year olds		34%, which worryingly drops below the national average
	PHOF 4.03 – Mortality rate from causes considered preventable	Whilst a long-term indicator, with many other determinants, the evidence highlights that physical inactivity directly contributes to one in six deaths in the UK. <sup>53</sup>	214 per 100,000, in the lowest quartile nationally
<b>ADDED VALUE TO SOCIETY AS A WHOLE WITHIN BURY<sup>54</sup></b> <i>Health &amp; Social Care (linking to Public Sector Reform)</i>	PHOF 2.24i – Injuries due to falls in people aged 65 and over	Physical activity has been identified as one means of being able to help prevent falls	1,906 per 100,000
	Improved mental wellbeing (self reported)	Being active has been evidenced to be central to good mental health <sup>55</sup>	Not currently measured
<i>The Local Economy</i>	PHOF 1.09ii – The percentage of working days lost due to sickness absence	Related to targeted workplace interventions, based upon the strong evidence showing that businesses with active workforces are more productive, have lower sickness rates and lower staff turnover.	Currently 2.3%, in the bottom 25 <sup>th</sup> percentile in England
	Number of people offered a traineeship and supported into employment	Recognising the opportunities for employment through the sector.  Also an important contribution to be made in building confidence / work readiness.	Currently estimated that 1,676 jobs in sport in Bury
	Gross Value Added from Sports	A healthy position in terms of increased participation levels is also	Currently £45.5m per annum

Physical activity and sport has a positive impact on NHS Resources and Obesity indicators these will also be impacted by other factors. An evidence-based approach to physical activity. Public Health England, October 2014

55 Everybody active, every day: An evidence-based approach to physical activity. Public Health England, October 2014

	Participation <sup>56</sup>	shown to generate a wider economic benefit for the local economy.	
<i>Social Capital</i>	Increased levels of volunteering and value to the local economy	Participation in physical activity and sport can help to energise the local community	Sports volunteering levels are measured through APS Estimated economic value of £14.4m to Bury
	Multi faith / ethnicity opportunities	Physical activity and sport can help to foster community cohesion and break down barriers to engagement	
<i>Environment</i>	Increased levels of sustainable travel (walking, cycling)		Nationally we know that 64% of trips are made by car

<sup>56</sup> Available from the Economic Value of Sport [local model](#).

## Appendix C – Useful resources

### – Chief Medical Officers physical activity guidelines

Start Active Stay Active: A report on physical activity from the four home countries' Chief Medical Officers, 2011. <https://www.gov.uk/government/publications/start-active-stay-active-a-report-on-physical-activity-from-the-four-home-countries-chief-medical-officers>

### – Insight into key influences on participation of different groups

Sport England research to understand factors which influence sporting behaviour, such as age, gender and economic conditions. This includes insights and understanding into what affects and impacts specific population groups.

<https://www.sportengland.org/research/encouraging-take-up/key-influences/>

### – Existing NICE guidelines regarding physical activity

- PH6 2007 Behaviour change: the principles for effective interventions
- PH8 2008 Physical activity and the environment
- PH13 2008 Promoting physical activity in the workplace
- PH17 2009 Promoting physical activity for children and young people
- PH41 2012 Walking and cycling: local measures to promote walking and cycling as forms of travel or recreation
- PH42 2012 Obesity: working with local communities
- PH44 2013 Physical activity: brief advice for adults in primary care
- PH49 2014 Behaviour change; individual approaches
- PH54 2014 Exercise referral schemes to promote physical activity

Please see [www.nice.org.uk/guidance](http://www.nice.org.uk/guidance) for more information.

### – Everybody active, every day: a framework to embed physical activity into daily life, Public Health England, 2014

<https://www.gov.uk/government/publications/everybody-active-every-day-a-framework-to-embed-physical-activity-into-daily-life>