

04 January 2018**Agenda Item: 6****REPORT OF DIRECTOR OF PUBLIC HEALTH****NOTTINGHAMSHIRE HEALTH AND WELLBEING STRATEGY PHYSICAL
ACTIVITY PRIORITY****Purpose of the Report**

1. The purpose of this report is to obtain Health and Wellbeing Board approval and agreement on the actions that the Board can influence under the Physical Activity Priority of the 2018-2022 Health and Wellbeing Strategy.

Information and Advice**Health Wellbeing Strategy context**

2. The Health and Wellbeing Board endorsed the second Nottinghamshire Health and Wellbeing Strategy on the 6th December 2017. This strategy contains 4 Strategic Ambitions including:
 - To have healthy & sustainable places.

This strategic ambition has 13 priorities for action including increasing physical activity.

What is physical activity and physical inactivity?

3. The World Health Organisation defines physical activity as any bodily movement produced by skeletal muscles that requires energy expenditure – including activities undertaken while working, playing, carrying out household chores, travelling, and engaging in recreational pursuits. The term "physical activity" should not be confused with "exercise", which is a subcategory of physical activity that is planned, structured, repetitive, and aims to improve or maintain one or more components of physical fitness. Beyond exercise, any other physical activity that is done during leisure time, for transport to get to and from places, or as part of a person's work, has a health benefit. Further, both moderate and vigorous-intensity physical activity improve health (World Health Organisation , 2017).
4. The UK has Physical Activity Guidelines (Department of Health, 2011) which recommend how much people should do to benefit their health at different ages and also to limit sedentary behaviour which has been found to be detrimental to health independent of physical activity (summarised in Appendix 1).

Why Addressing Physical Inactivity is important

5. Physical activity is included as a priority for action because physical inactivity is the fourth largest cause of disease and disability in the UK and is estimated to cost the UK £7.4bn a year (Public Health England, 2014).
6. There is strong evidence that investing in physical activity can be cost saving to the health and social care system, and help reduce sickness and absence from work, and increase productivity. Being physically active is also positive for mental wellbeing, and is one of the five ways to wellbeing (New Economics Foundation, 2011). Physical activity can get people outside and connecting with their local environment and community, reducing social isolation and increasing social capital (Public Health England, 2014). Sport is often used as an effective intervention to reduce crime and antisocial behaviour and reduce reoffending (Sport England, 2017). There are broader benefits of cycling and walking as forms of sustainable active travel, which are carbon neutral and do not contribute to pollution and air quality issues.
7. The greatest gains in health and wellbeing and return on investment come from focusing resources on increasing physical activity in those who are the least active (Cabinet Office, 2015). It is therefore important that this is the focus of our local approach.
8. National data suggests that only 21% of boys and 16% of girls aged 5 to 15 years achieve the recommended 60 mins of physical activity per day to benefit their health (Public Health England, 2014). Being physically active is required for healthy child development, can help children maintain a healthy weight, and can be beneficial to academic performance.
9. In Nottinghamshire, 34.8% of adults do not do the recommended 150 mins of moderate physical activity per week to benefit their health; and 22.0% of adults are inactive (Public Health England, 2017) (do less than 30 mins/week). This ranges from 17.4% of inactive adults in Rushcliffe to 27.7% in Mansfield (Public Health England, 2017). Local analysis of data from the Active Lives survey shows that inactivity levels are also higher in Nottinghamshire in people from lower socioeconomic groups and people with limiting illness or a disability.
10. Physical activity levels in the population decline with age in adulthood, and sedentary behaviour increases, but this is not an inevitable effect of aging (McNally, 2017). It is beneficial for people mentally, physically and socially, and the need for social care reduces if people stay active in later life.

Strategic Drivers for Physical Activity

Sporting Futures and Towards an Active Nation

11. The Government's Strategy, Sporting Future (Cabinet Office, 2015) has set five outcomes for sport and physical activity which are being taken forward by Sport England in the Towards An Active Nation Strategy (Sport England, 2016):
 - a. Improved physical health
 - b. Improved mental health

- c. Individual development
- d. Social and community development
- e. Economic development

Cycling and Walking Investment Strategy

12. In April 2017 the Government published a Cycling and Walking Investment Strategy (Department for Transport, 2017) which sets out how the Government will invest to increase cycling and walking by 2040 through:
- Better Safety – A safe and reliable way to travel for short journeys
 - Better Mobility – More people cycling and walking – easy, normal and enjoyable.
 - Better Streets – Places that have cycling and walking at their heart.

Getting Active Together Nottinghamshire Strategy

13. As discussed at the March 2017 Health and Wellbeing Board, Active Notts (formerly Sport Nottinghamshire) has been leading on the development of a Nottinghamshire and Nottingham City Physical Activity and Sport Strategy: - *Getting Active Together Nottinghamshire*. This strategy will be finalised in early 2018 following consultation on the final draft document. The strategy vision and priorities have been developed with a range of partners across the public, private, community and voluntary sector. The final draft vision for the strategy is:

“to make physical activity the norm for the people who live and work in our communities by ensuring everyone can easily take part, volunteer and engage in sport and activity as part of their everyday life”

14. To achieve this vision we need to change the culture and system that exists for physical activity based on insight into the barriers and motivations of people that are the least active in our communities. This should be used to redesign service commissioning and provision so that it enables physical activity in these groups; ensuring the place in which people live provides what is needed to generate sustainable physical activity behaviour change; recruit, develop and retain the physical activity workforce; and attract external funding to develop services, facilities and infrastructure.
15. We will address health inequalities and focus our support on the people who need our help the most. Across Nottinghamshire this is people with a limiting illness or disability. Our insight and analysis identifies differing physical activity behaviours and local needs across Nottinghamshire, hence a local, place based approach to increasing physical activity and reducing inactivity will be required. This is in line with the place based approach in the Health & Wellbeing Strategy.
16. We will give all children and young people a foundation of competence and enjoyment so they can positively engage in physical activity and sport during their childhood and beyond. We also need to keep people involved in physical activity and sport, supporting them through the key transitional stages in their lives.

Local Transport Plan and Cycling Strategy Delivery Plan

17. The Nottinghamshire Local Transport Plan (LTP) sets out the County Council's overarching transport strategy for Nottinghamshire and is supported by a number of more in-depth strategies detailing how the LTP will be delivered (Nottinghamshire County Council, 2017). The County Council has therefore developed the Cycling Strategy Delivery Plan to complement the LTP in the delivery of both local and national objectives. The Delivery Plan is a long-term strategy and sets out how the County Council, working with a number of local and national partners and stakeholders, aim to make cycling improvements that will deliver the LTP's goals and objectives.
18. It is recognised that there are some excellent existing examples of physical activity partnerships and initiatives across Nottinghamshire. This strategy seeks to build on and share this good practice across the county.

Health & Wellbeing Board as a system leader for change

19. The Government's Strategy, Sporting Future (Cabinet Office, 2015) and Sport England strategy: Towards An Active Nation (Sport England, 2016) both recognise the important role that Health and Wellbeing Boards can play in local system change to develop their areas as physically active, healthy and sustainable places.
20. The Board can play an important role in leading on delivery of priorities within the Nottinghamshire physical activity and sport strategy: Getting Active Together.

In order to do this the Board should deliver the following objectives:

- i. Undertake and share "Insight mapping" and utilise behaviour change principles to shape local services and places for physical activity

Although we have some understanding of which groups are the most inactive, analysis of available survey data suggests this varies across the county. The evidence base and national strategies advocate the need to take a place based "customer insight" approach to shaping local services, facilities, infrastructure to enable the least active to be more active.

This can be achieved by Service Areas in each District which contribute to physical activity, working with Active Notts and County Council Public Health, to undertake analysis to identify the most inactive groups and communities. This should then be followed with *action research* working with the identified most inactive groups and communities to further understand barriers and motivations to solutions to increase physical activity levels which will then shape collective plans and services for physical activity. The findings of this work should then be shared and made available to all partners online such as via the Nottinghamshire Insight website. This will also shape and form the Joint Strategic Needs Assessment for Physical Activity.

- ii. Embed the principles of Active Design within policy and local plans for employment and residential development

These principles and guidance developed by Sport England and Public Health England (Sport England, 2015) listed in Appendix A set out practical measures that Planning Authorities and other Public Sector organisations responsible for facilities, can implement to develop the right conditions and environments for individuals and

communities to lead active and healthy lifestyles. District and Borough Councils should ensure that their Planning Departments utilise this guidance working with Public Health to ensure that Planning Policy and Development Management is systematically facilitating improvements that enable physical activity.

iii. Implement physical activity within workplace wellbeing plans and active travel within workplace travel plans

The 'Wellbeing @ Work' programme is currently being refreshed and this will be used as the opportunity to promote physical activity in the workplace. Each Health & Wellbeing Board organisation should take the opportunity to lead by example and actively deliver physical activity in the 'Wellbeing @ Work' programme within its own organisation. Health & Wellbeing Board organisations should also lead on developing active and healthy travel through developing workplace travel plans.

iv. Develop ways to ensure green and open space is used to its full potential to enable people to be active

Having easily accessible parks and open space is associated with meeting physical activity levels and being less likely to be overweight (Public Health England, 2014). It is therefore important that these important assets are used effectively as part of the intervention mix to increase physical activity, especially in areas with lower than average activity levels. This will be achieved by considering the use and role of parks and open spaces in communities for physical activity in line with local community needs.

v. Work together to ensure programmes to get children and young people to be more active are focused on building competence and enjoyment

Evidence indicates (Sport England, 2016), that children and young people are more likely to develop physical activity habits if interventions are focused on building competence and enjoyment in order to develop a positive attitude and build resilient habits. What this is depends on the child and could be winning, spending time with parents or being free to run around with friends. Local Councils and Active Notts, should work with Schools and Academies and Physical Activity Providers to ensure there are opportunities for the most inactive children and young people to be active across the county.

vi. Work together to develop walking and cycling initiatives and infrastructure programmes

Walking and cycling are two of the most accessible and sustainable ways in which people can be physically active. Most, if not all, the HWB Board organisations have aspirations to deliver walking and cycling improvements to encourage residents to be more active, and to help enable them access jobs, services and leisure opportunities. Consequently, many are in the process of developing such improvements both on the highway and as part of leisure activities.

Board organisations should work together on annual basis to plan developments and coordinate funding opportunities to increase levels of cycling and walking in Nottinghamshire. This will be coordinated by County Council Transport Strategy and Public Health.

vii. Deliver physical activity brief intervention and commissioning in health and social care

A report was prepared for the East Midlands Clinical Senate in 2015 (Batt, 2015) which set out the importance of physical activity in treatment as well as being a preventative

measure. NHS and social care commissioners and service leads should take forward these recommendations to deliver physical activity brief intervention, and incorporate physical advice, signposting and provision in service delivery and commissioning, for the least active groups. This will mean NHS commissioners understanding the importance of physical activity in the services they commission, and including physical activity advice and provision in the service specifications for relevant health conditions. This will mean front line staff in relevant services having the skills and mandate to offer physical activity brief intervention, and be able to signpost patients to self-help and local opportunities to be active.

viii. Contribute to a Countywide Programme of physical activity for older people

Falls and fall-related injuries are a common and serious problem for older people. People aged 65 and older have the highest risk of falling, with 30% of people older than 65 and 50% of people older than 80 falling at least once a year. The human cost of falling includes distress, pain, injury, loss of confidence, loss of independence and mortality. Falling also affects the family members and carers of people who fall. Falls are estimated to cost the NHS more than £2.3 billion per year.

Interventions aimed at reducing rates of falls are able to show one of the swiftest returns on investment of any of the public health interventions (Public Health England, 2017). Nottinghamshire Public Health and Adult Social Care are leading the development of a Physical Activity programme aimed at physically inactive older people aligned with Falls Prevention and Musculoskeletal Care Pathways working with Everyone Health the Provider of Obesity Prevention Services, Clinical Commissioning Groups and Local Authorities. This involves engaging community providers of existing exercise provision, offering training opportunities in evidence based strength and balance exercises, disseminating self-help guides, and developing referral pathways. All partners should contribute by linking up all older peoples physical activity initiatives under this programme, ensuring service areas working with older people are aware of this development, and signpost at risk older people into these opportunities.

Monitoring and Governance

21. The intended outcome of this work is a reduction in the proportion of inactive adults in Nottinghamshire below the current 22.0% of adults. This is to be monitored using data from the national Active Lives survey which is a postal and online survey of 500 persons age 16 years and older from each Lower Tier Local Authority. The results are published by Sport England and Public Health and the data is available for local analysis. Work is currently underway to finalise a local targets in the reduction of inactive adults which can be used in the Health and Wellbeing Strategy and other local strategies as required.
22. There is currently no way of monitoring physical activity levels in children under 16 years. A new national survey is in development which should provide local authority level data and statistics which could be used to monitor local prevalence in the future.
23. The achievement of the overall Getting Active Together Nottinghamshire strategy will be monitored by the Active Nott's Board. The Nottinghamshire Health & Wellbeing Board will have a significant role through leading on the actions described in this report.

24. If the Board agrees these actions they will be incorporated into action plans aligned with the Getting Active Together strategy and progress will be reported to the Health & Wellbeing Board via mechanisms to be agreed at the February 2018 Board Workshop.

Other Options Considered

25. These recommendations were developed from the proposed actions set out in the Health & Wellbeing Strategy consultations. These were then refined and developed by the report authors in discussion with District and Borough Council officers with responsible relating to health & wellbeing and physical activity.

Reason/s for Recommendation/s

26. To ensure that the Health & Wellbeing Board is able to effectively lead and influence strategic work in Nottinghamshire to increase physical activity levels.

Financial Considerations

27. Delivery of these priorities will require officer time from all agencies to reshape policy and services. In addition some commissioning and service budgets will need refocusing to prioritise groups and communities with the highest levels of physical inactivity. There will be opportunities through this work programme for all partners to work together to access funding through the health, sport & physical activity, transport and economic development, and charitable sectors, working with local communities to coordinate place based solutions for physical inactivity.

Statutory and Policy Implications

28. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

RECOMMENDATION/S

- 1) To deliver the objectives set out under paragraph 20 which describe areas of policy and service delivery the Health & Wellbeing Board can influence to reduce physical inactivity and develop Nottinghamshire as a more physically active place for health & wellbeing:
 - Undertake and share “Insight mapping” and utilise behaviour change principles to shape local services and places for physical activity.
 - Embed the principles of Active Design within policy and local plans for employment and residential development.

- Implement physical activity within workplace wellbeing plans and active travel within workplace travel plans.
- Develop ways to ensure green and open space is used to its full potential to enable people to be active.
- Work together to ensure programmes to get children and young people to be more active are focused on building competence and enjoyment.
- Work together to develop walking and cycling initiatives and infrastructure programmes.
- Deliver physical activity brief intervention and commissioning in health and social care.
- Contribute to a Countywide Programme of physical activity for older people.

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Constitutional Comments (SLB 20/12/2017)

29. Health and Wellbeing Board is the appropriate body to consider the content of this report.

Financial Comments (DG 20/12/17)

30. The financial implications are contained within paragraph 27 of this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Nottinghamshire Health and Wellbeing Board. 29th March 2017. Excess Weight, Physical Activity and Wellbeing: Current and Future Opportunities for Funding from Sports England – Presentation by Ilana Freestone, Sport Nottinghamshire.

Nottinghamshire Health and Wellbeing Board. 6^h December 2017. Second Nottinghamshire Joint Health & Wellbeing Strategy.

References

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- World Health Organisation . (2017). *Physical Activity factsheet*.

Electoral Division(s) and Member(s) Affected

All.

See also Chair's Report:

Item 13: [Active people, healthy places](#)

Item 14: [Physical Activity: A Social Solution](#)

Appendix 1 Summary of the UK Physical Activity Guidelines

For further information visit <https://www.gov.uk/government/publications/uk-physical-activity-guidelines>

Early Years Under 5 Years

- Children of pre-school age who are capable of walking unaided should be physically active daily for at least 180 minutes (3 hours), spread throughout the day.*
- All under 5s should minimise the amount of time spent being sedentary (being restrained or sitting) for extended periods (except time spent sleeping).

Children and Young People aged 5 to 18 Years

- All children and young people should engage in moderate to vigorous intensity physical activity for at least 60 minutes and up to several hours every day.
- Vigorous intensity activities, including those that strengthen muscle and bone, should be incorporated at least three days a week.
- All children and young people should minimise the amount of time spent being sedentary (sitting) for extended periods.

Adults aged 19 to 64 Years

- Adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more – one way to approach this is to do 30 minutes on at least 5 days a week.
- Alternatively, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or combinations of moderate and vigorous intensity activity.
- Adults should also undertake physical activity to improve muscle strength on at least two days a week.
- All adults should minimise the amount of time spent being sedentary (sitting) for extended periods.

Adults aged 65 years and over

- Physical activity gain some health benefits, including maintenance of good physical and cognitive function. Some physical activity is better than none, and more physical activity provides greater health benefits.
- Older adults should aim to be active daily. Over a week, activity should add up to at least 150 minutes (2½ hours) of moderate intensity activity in bouts of 10 minutes or more – one way to approach this is to do 30 minutes on at least 5 days a week.
- For those who are already regularly active at moderate intensity, comparable benefits can be achieved through 75 minutes of vigorous intensity activity spread across the week or a combination of moderate and vigorous activity.
- Older adults should also undertake physical activity to improve muscle strength on at least two days a week.

- Older adults at risk of falls should incorporate physical activity to improve balance and co-ordination on at least two days a week.
- All older adults should minimise the amount of time spent being sedentary (sitting) for extended periods.

Appendix 2 Ten Principles of Active Design from Sport England Active Design. Planning for health and wellbeing through sport and physical activity (October 2015)

The Ten Principles of Active Design:

1. Activity for all

Neighbourhoods, facilities and open spaces should be accessible to all users and should support sport and physical activity across all ages.

Enabling those who want to be active, whilst encouraging those who are inactive to become active.

2. Walkable communities

Homes, schools, shops, community facilities, workplaces, open spaces and sports facilities should be within easy reach of each other.

Creating the conditions for active travel between all locations.

3. Connected walking & cycling routes

All destinations should be connected by a direct, legible and integrated network of walking and cycling routes. Routes must be safe, well lit, overlooked, welcoming, well-maintained, durable and clearly signposted. Active travel (walking and cycling) should be prioritised over other modes of transport.

Prioritising active travel through safe, integrated walking and cycling routes.

4. Co-location of community facilities

The co-location and concentration of retail, community and associated uses to support linked trips should be promoted. A mix of land uses and activities should be promoted that avoid the uniform zoning of large areas to single uses.

Creating multiple reasons to visit a destination, minimising the number and length of trips and increasing the awareness and convenience of opportunities to participate in sport and physical activity.

5. Network of multifunctional open space

A network of multifunctional open space should be created across all communities to support a range of activities including sport, recreation and play plus other landscape features including Sustainable Drainage Systems (SuDS), woodland, wildlife habitat and productive landscapes (allotments, orchards). Facilities for sport, recreation and play should be of an appropriate scale and positioned in prominent locations.

Providing multifunctional spaces opens up opportunities for sport and physical activity and has numerous wider benefits.

6. High quality streets and spaces

Flexible and durable high quality streets and public spaces should be promoted, employing high quality durable materials, street furniture and signage.

Well designed streets and spaces support and sustain a broader variety of users and community activities.

7. Appropriate infrastructure

Supporting infrastructure to enable sport and physical activity to take place should be provided across all contexts including workplaces, sports facilities and public space, to facilitate all forms of activity.

Providing and facilitating access to facilities and other infrastructure to enable all members of society to take part in sport and physical activity.

8. Active buildings

The internal and external layout, design and use of buildings should promote opportunities for physical activity.

Providing opportunities for activity inside and around buildings.

9. Management, maintenance, monitoring & evaluation

The management, long-term maintenance and viability of sports facilities and public spaces should be considered in their design. Monitoring and evaluation should be used to assess the success of Active Design initiatives and to inform future directions to maximise activity outcomes from design interventions.

A high standard of management, maintenance, monitoring and evaluation is essential to ensure the long-term desired functionality of all spaces.

10. Activity promotion & local champions

Promoting the importance of participation in sport and physical activity as a means of improving health and wellbeing should be supported. Health promotion measures and local champions should be supported to inspire participation in sport and physical activity across neighbourhoods, workplaces and facilities.

Physical measures need to be matched by community and stakeholder ambition, leadership and engagement.

