

**Report of Head of Sport and Active Lifestyles**

**Report to Scrutiny Board (Sustainable Economy and Culture)**

**Date: 18 March 2014**

**Subject: Leeds Let's Get Active**

Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Is the decision eligible for Call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

**Summary of main issues**

1. Members will recall the Leeds let's get Active project was reported to this Scrutiny Board on July 16<sup>th</sup> 2013. The project officially commenced in September 2013 and followed a sustained period of development prior to "go live". It is still very early days to draw firm conclusions, however, there are positive signs with a larger than expected number of initial sign ups being achieved. The project requires a degree of academic rigour in order to test some of the processes and impact and as such Leeds Metropolitan University is now actively engaged in the project. This report outlines progress to date and specifically responds to questions/requests that this Board agreed to following their meeting in July 2013.

**Recommendations**

2. That Board members note the report and provide feedback on progress to date.

## **1. Purpose of this report**

1.1. The report aims to update the Board on the development, implementation and progress of LLGA to date. The report seeks to provide the Board with additional information following comments made at Scrutiny Board (Sustainable Economy and Culture) on 16 July 2013

## **2. Background information**

2.1. The Sport and Active Lifestyle (S&AL) services offers a valuable contribution to the achievement of health and wellbeing outcomes across the city of Leeds and it is working to secure Leeds' position as the 'most active big city in the UK'.

2.2. The latest national survey (Active People 7) looking at adult participation in sport and active recreation across the country has seen Leeds top the list of England's core cities. Leeds is also the seventh most active local authority area in England out of 326. The survey also shows 31.2 per cent of people in Leeds now take part in sport or active recreation three times a week or more. The figures represent a rise of more than 10 per cent from 2005-6, when 20.6 per cent of residents were taking part. Despite Leeds topping the core cities table, the survey also found that 42.5 per cent of the population said they had done no sport or active recreation during the previous 28 days. Sixty per cent of people in Leeds also said they did not take part in any type of 30 minute sport session in a given week

2.3. Scrutiny Board will recall from the first session in July 2013 that Leeds City Council was successful in applying for £500k of Sport England funding from their "Get healthy get into sport" grant programme. The "Leeds Let's Get Active" project is one of 14 national pilots looking at different ways of increasing the activity levels of those who are currently inactive. Sport England has joint funded LLGA with the City Council, as they estimate the cost of physical inactivity to the city at least £10.4m every year.

2.4. The Sport England £500k was matched by Public Health who also committed funding of £60k, continued from the previous Bodyline Access Scheme project, making total funding for this pilot project £1,060k. This project also contributes towards the Council's Olympic legacy programme "Inspire a Generation" and represents a significant step forward in trying to reach those people who could most benefit from being active.

2.5. Scrutiny Board will be aware of the significant health and life expectancy inequalities which exist within Leeds. This pilot project will contribute towards reducing these inequalities by increasing participation in physical activity, targeted at those who are presently inactive and doing less than 1 x 30 minutes of physical activity per week, and whilst providing a universal free offer, the offer is greatest in those areas with the highest need. The project sees an offer that includes; free, universal access to all City Council Leisure Centres (which includes gym, swim and exercise class provision); and free physical activity opportunities in local parks and community settings. LLGA has been running since September 2013 and is make progress against its Sport England Targets.

2.6. The LLGA offer has been devised based around parameters as set out in targets by Sport England which have been based on the original funding agreement. Despite providing a universal offer, the targets focus on reaching and supporting inactive people. It is important therefore to note that both promotion and marketing strategies and the LLGA offer itself have been targeted and selective in the methods.

## **2.7. Leisure Centre Offer**

2.7.1. The offer in every leisure centre (17 in total) is one free hour every day (off peak) with an additional hour per day for 4 leisure centres that serve the most deprived areas of the city: John Charles Centre for Sport, Armley, Fearnville and Middleton leisure centres.

2.7.2. The timeslots that have been allocated to the leisure centre free offer are mainly during the daytime and are all off-peak sessions. These sessions have been carefully chosen as they have both the capacity to incorporate new users as well as being most appealing to the target market.

## **2.8. Community Offer**

2.8.1. The community offer is designed to provide an alternative route into physical activity in a non-leisure centre setting. A total of 102, 10 week blocks of low intensity activity suitable for inactive people will be delivered over the 18 months of the pilot project and will include: Active Family multi-sport sessions, Social Walks, Beginners Running Groups and fitness classes.

2.8.2. The activities are delivered in community parks, however during the winter months some sessions are being brought into indoor community venues. Locations identified for delivering the community activities are within an LSOA within the 20% most deprived communities (based on Indices of Health deprivation). Areas classed as 'pockets of deprivation' can also be selected if they fall within the 20 – 30% most deprived for health deprivation.

## **2.9. Bodyline Access scheme**

2.9.1. This scheme aims to build on the Bodyline signposting scheme already in place for healthcare professionals, when a patient can receive a Bodyline membership card for 3 months for £5. LLGA aims to test various levels of intervention received throughout the referral process.

## **2.10. LLGA Targets**

2.10.1. LLGA has been live since 30 September 2013 and is due to run until March 2015. As part of the grant condition the project formally reports to Sport England on a 6 monthly basis and seeks to achieve the following targets;

- a) To increase the activity levels and participation in sport of those inactive in Leeds. especially in areas of highest health inequalities
- b) To establish better links with health partners
- c) To better understand the barriers for healthcare professionals in discussing physical activity and how to address them

- d) Development of a universal offer incorporating free gym/swim across a number of leisure centres in areas of highest deprivation and health inequalities
- e) 270,000 new visits
- f) 16,500 new card members
- g) 1350 previously inactive new participants completing 1x30 minutes physical activity per week
- h) Free multi-sport community offer focussing on family participation – 102 10/12 week programmes (840 people)
- i) An increase in the numbers of those accessing the Bodyline Scheme achieving 1x30 physical activity per week

#### 2.11. **Progress to date**

2.12. LLGA has now been live since 30 September 2013 and as of 13 February 2014, has over 16,448 registered members - 100% of the target set by Sport England. Pre and post LLGA physical activity analysis is being completed by Leeds Metropolitan University. Some interesting early information is coming through tells us;

- a) Total registrations are over 16,000
- b) LLGA registered members were predominantly female (60.5%)
- c) 50% of LLGA registered members were aged <35 years. Areas of deprivation were well represented in the cohort. Weekly figures have demonstrated a range between 29% and 43% of LLGA members ranked as living in areas classed as top 20% most deprived.
- d) 6,676 LLGA registered members have attended an LLGA session
- e) Since 30th September 2014 LLGA have seen over 28,000 visits to leisure centres
- f) Initial attendance data from Block 2 of the community programme (20th Jan – March 2014) is showing positive upward trends in relation to numbers registering and attending the available community activities. Already 48 participants have registered and total visits are at 124.
- g) The Bodyline access scheme has received 453 referrals from a variety of health professionals since Monday 30 September 2014 with further analysis considering conversion of inactive to active based on the level of intervention that a referral receives.

2.13. LLGA was also challenged with increasing sport and activity among the most inactive groups across Leeds. At this point in time, follow-up data collection is still in its infancy however early indications are that the project is having success in converting those previously inactive to doing some sustained activity.

2.14. Seven hundred and forty five previously inactive members had attended at least one LLGA session. A further 177 inactive members had attended LLGA sessions weekly for at least four weeks.

2.15. As expected there is a proportion of LLGA members who have not attended an LLGA session. This is not unexpected. The challenge for the project is, having now got contact details, is to identify and break down barriers to making a first visit. Methods include;

- a) Production of a video for first-time users to visualise the unknown environment
- b) Production of a community brochure detailing member stories.

- c) Further training for leisure centre staff to offer a supportive environment to new users.
- d) Working with partners to consider further barriers.

2.16. Remembering that to take part in the project the participants need to sign up and receive an LLGA card in order to capture their details and evidence participation. At this early stage it is not sensible to draw any firm conclusions, however so far progress has been encouraging with the number of people signing up to the scheme being ahead of target. The challenge for the project is to convert the “sign ups” into actual visits and sustained participation.

### **3. Main issues**

3.1. Following a presentation to the Board on 16 July 2013, members made the following comments

3.2. **“We recommend that officers tap into the local knowledge of ward councillors in developing the community offer”.**

3.2.1. Sport and Active Lifestyle Officers have attended meetings such as Neighbourhood Improvement Boards and Ward Briefings in areas where the community offer has been planned to take place. Officers have also engaged with the area support teams to understand the best ways of contacting and working with elected members. Officers wanted to better understand local issues, barriers and needs. These meetings have also included discussions about any community groups that are available to tap into and venues that are suitable and accessible for the target population.

3.3. **“We also recommend that schools be approached as a good way of contacting parents in key target locations, particularly through letters home.”**

3.3.1. LLGA is continuing to target the most inactive people and have therefore engaged with specific schools across the City. To coordinate our approach, we have been working with the schools currently engaged with the change4life demonstration site work. Currently there are four multiagency Change4life partnerships facilitated by Public Health which are engaging around 20 primary schools. The areas were determined as they had high levels of childhood obesity, high levels of deprivation and had an infrastructure deemed positive in supporting such work. They were also selected as they had differing communities in terms of things like green space and ethnicity. Ways of engaging parents have been determined by staff specifically in each site based on insight of the communities and their preferred methods of communication. This has included attendance and sign up at parent’s evenings by leisure centre staff and awareness raising to staff who regularly engage with parents’ groups.

3.3.2. LLGA continues to be presented to a number of teams and partnership groups which include the Active Sport Officers (service representatives whose work specifically focusses on children and young people), Health and Wellbeing Partnerships (which are represented by cluster managers and school reps ) and at the Sport Leeds Board which includes representatives from children’s services.

- 3.3.3. LLGA are making links with the Healthy Schools team and will work to further identify schools to target which may include secondary schools. We have also promoted through the Active Schools Partnership and Breeze.
- 3.4. **“Whilst we are reminded that, as a pilot, the scheme is limited in what it can deliver, we recommend that the transport issue needs to be kept under review as the project progresses and adjustments made if it proves to be a significant barrier.”**
- 3.4.1. The community offer aims to take physical activity opportunities to the local community to support those who may be unable to or do not wish to access leisure facilities.
- 3.4.2. LLGA partners who work directly with communities are key in understanding and feeding back barriers to accessing LLGA sessions. Transport has been identified as a barrier for some families through the Richmond Hill Change4life demonstration site. The partnership have worked to break down this barrier and have both provided local information on public transport access to the LLGA sessions and will be looking at providing transport for families during the summer to access these sessions.
- 3.4.3. LLGA provides a product for which partners may utilise and support in achieving their own targets. In the past some Public Health, Health and Wellbeing contracts have required organisations to support their service users in accessing physical activity within LCC leisure centres which may have incurred cost to either the individual or the organisations. LLGA removes this cost, potentially allowing organisations or individuals to spend money on transport and try to remove further barriers.
- 3.5. **“We really welcome the ambition to use other pots of funding to complement the scheme. Nevertheless we were disappointed by the low targets for the community offer aspect of the scheme itself, and would strongly recommend that officers explore all available options within the requirements of the grant funding to increase this offer as the scheme develops.”**
- 3.5.1. The LLGA community offer is limited by the scope of the original funding bid approved by Sport England which focuses mainly on the leisure centre offer. The criteria for the community offer has been reviewed and enhanced to ensure that pockets of deprivation within the city will be included within the locations selected for future blocks of activity. The number of activities to be delivered in Block 3 has increased slightly from the original proposal to take advantage of the spring / summer weather. If the current programme of activities is deemed successful then additional funding could be diverted from other areas of the LLGA budget to enhance the delivery in future Blocks of the community offer.
- 3.5.2. LLGA is providing the team with learning opportunities on how to best deliver the community offer should further funding become available in the future. The community offer could be expanded in the future should the research findings provide robust evidence of positive impact.
- 3.6. **“We also specifically discussed the facilities at the NHS Quarry Hill site, and agreed that the Chair of the Scrutiny Board would write to ask if the NHS would consider including these facilities in the free offer, given the obvious benefits to**

**the NHS of getting inactive people to be active and the lack of council facilities in the local area.”**

- 3.6.1. LLGA met Quarry Hill (QH) Leisure Facility manager 9 September 2013 to discuss options of including the site in the offer (impact on income and loss of income etc). The manager was keen to show support for improving the health and wellbeing of local communities. Due to limitations of what the facility could offer, based on current provision and stipulations on access, as well as processes that would be needed to monitor LLGA member participation, it is not feasible to incorporate QH as part of the offer. QH are however willing to offer subsidised lower priced options for those deemed in greatest need of low cost physical activity opportunities.
- 3.6.2. Further work needs to be completed to support QH in making an offer appropriate to the most vulnerable communities. The Active Lifestyle Officer covering this area will pick this up and ensure an ongoing relationship is maintained to support communities most in need.
- 3.7. **“We recommend that consideration be given to the needs of other non-geographic communities that are identified as suffering from health deprivation, for example the gypsy and traveller community where life expectancy is among the lowest in the city. “**
- 3.7.1. It is important that LLGA taps into the knowledge and contact/relationships that partner organisations and community groups already have.
- 3.7.2. In relation to migrant communities – the team have been in contact with (through a variety of methods) and promoted the scheme through; The Red Cross, PAFRAS, RETAS, City of Sanctuary, LASSN, The Refugee Forum, Touchstone, GRTAS and the Leeds Refugee Forum. Methods of support have included the provision of marketing materials, attendance at team meetings and provision of briefings for staff to then use to promote with their service users.
- 3.7.3. Our significant engagement plan demonstrates the amount of work taking place to support stakeholders in promoting the project with their users. This has included working with those who support; women, those with disabilities or mental health problems; BME populations etc.
- 3.8. **“We also recommend that some single sex provision is included in the offer, or provided as an additional feature, to meet cultural and faith needs.”**
- 3.8.1. All LLGA sessions have been carefully chosen as they have the capacity to incorporate new users with support from qualified staff, however, the scheme is continuously being developed so times and sessions may change throughout the duration of the scheme. To ensure that lots of people can benefit from the scheme, we have provided the same offer at weekends – this is so that those people with weekday commitments can still take advantage and enjoy the benefits of getting active for free. Following comments from scrutiny related to single sex provision, the LLGA team have approached Sport England for advice; given this was not a feature of the original bid (i.e. a universal offer). Future sessions may be able to be changed to suit the needs of the communities however it is important to note again that we are unable to deviate too much from the original Sport England approved bid of a targeted universal offer.

3.8.2. The current offer is allowing us to learn from members about any particular barriers and is also allowing us to understand the costs associated with particular sessions in terms of income loss. Once the programme has been running for over six months, we will be reviewing the offer and working with community groups to better understand their barriers. This allows us to get a clear picture of attendance patterns and participation rates of the most inactive populations. Programmes can then be discussed in terms of income loss to support those communities in getting and remaining active. Other single sex sessions are available outside the LLGA project.

## **4. Corporate Considerations**

### **4.1. Consultation and Engagement**

4.1.1. The project continues to engage a wide variety of stakeholders as part of the project delivery. Importantly the project team consider community groups already working with key target groups as being essential in ensuring that the project reaches those people who are inactive and based in the highest areas of deprivation as they will have some of the best communication channels. A series of workshops and events have been delivered as part of this holistic approach. In addition to this the project is also engaging directly with, for example, Sport Leeds, West Yorkshire Sport, public health, Children's services, Adult social care, Resources (revenues and benefits).

4.1.2. In addition the Sport and Active Lifestyles service has also conducted two communication audits with Leeds Metropolitan University, with projects very similar to Leeds Let's Get Active. The audits included Leeds Lets Change and Women into Sport and looked to identify the types of messages, images and channels the service should use to communicate and market to these groups. The findings from these audits have been incorporated into the Leeds Let's Get Active programme

### **4.2. Equality and Diversity / Cohesion and Integration**

4.2.1. These proposals have previously been screened for issues on Equality, Diversity, Cohesion and Integration as part of the Executive Board report on the 24 April 2013. In general, such considerations are integral to this whole report as one of the major aims of the proposals is to narrow health inequality, a key council objective. The screening noted:

- a) The pilot project is designed to provide more assistance to get active in more deprived communities.
- b) The free swim and gym offer will be doubled at Armley, Fearnville and the John Charles Centre for Sport – all measured as having the most deprived catchment areas among the council's leisure centres.
- c) The community offer and the pathways to the Bodyline offer will be focused on areas and individuals where the health need is highest.
- d) The free offer will be available to the whole population and across the whole council leisure centre portfolio.
- e) Consider whether some free sessions should be female only.
- f) Consider how access to free sessions is extended to disabled groups as far as possible and practical.



- 4.2.2. As the programme has progressed, the actions above have all been implemented, contributing to the success of the project so far.
- 4.2.3. As well as offers in the community, the proposed 18 month pilot offers free off-peak access to a swim or gym session for at least one hour every day in all leisure centres, two at those in areas of highest deprivation. Those currently unable to afford swimming and gyms should benefit most, wherever in Leeds they live. This may particularly benefit those on low incomes, minority ethnic groups and older people.

### **4.3. Council policies and City Priorities**

- 4.3.1. The proposals aim to narrow health inequality, a major council objective, by encouraging more people to become more physically active, particularly those in areas of higher deprivation where activity levels and life expectancy are lower than the city's average.
- 4.3.2. The overarching vision for 2030 is that Leeds will be the best city in the UK. This means all Leeds' communities will be successful, including those who are currently less active and suffer poorer healthy life expectancy.
- 4.3.3. City Development has as a priority to "Develop the city's cultural events and facilities including changes to sports centres and libraries", and a key performance measure is "To maintain visits to sports centres". This report directly addresses these priorities.

### **4.4. Resources and value for money**

- 4.4.1. Continuing this pilot on the same scale should be neutral to the council's budget in 2014/15. The budgeted cost for 2014/15 of £771k is due to be met with £321k from Sport England, £250k from Public Health, £40k from Public Health and £160k in-kind officer time funded by the Council in its base 2014/15 revenue budget.
- 4.4.2. In terms of value for money, the impact on activity, particularly on the targeted less affluent areas of the city should have long-term benefits in lower health and social care expenditure on a range of physical and mental conditions linked to inactivity. The project is intended to improve our understanding of the level of social and long-term economic return from investing in promoting healthy activity in this way.

### **4.5. Legal Implications, Access to Information and Call In**

- 4.5.1. The provision of sport services by councils and their pricing or subsidy is not subject to statute so the main legal criteria are that these proposals are reasonable.

### **4.6. Risk Management**

- 4.6.1. The main financial risk is that the free offer diverts more paying customers than anticipated, widening the loss of income and reducing the space in pools for previously inactive newcomers. This would increase the cost and reduce the effect of the free swim part of the offer and it might have to be curtailed early to avoid loss

to the council. To manage the risk the income loss and numbers of new participants will be monitored weekly for any disproportionate loss of income.

- 4.6.2. The main policy risk is that this pilot produces an expectation of free access to high cost facilities and activities at a public subsidy that cannot be sustained. To mitigate this risk, efforts will be made to offer additional paid sessions to new customers and to build up evidence of the benefits of the offer, so as to encourage future funding or sponsorship.

## **5. Conclusions**

- 5.1. Modest investment in LLGA has allowed the development and testing of systems and methods to attract inactive people in Leeds to consider increasing their levels of physical activity. LLGA has a functioning online registration process and automated communication to continue to provide and test ways of creating a supportive environment for the target audience. Systems are also in place to capture large data sets which include baseline and follow up data using self-reported 7 day recall. There are currently 17 sites actively involved and a variety of coaches delivering LLGA in the community. LLGA has attracted our target market of inactive people and is supporting with increasing these levels of activity by breaking down the barrier of cost and creating a supportive environment. Insight and market segmentation has created a strong brand and is supported by a large number of partners and stakeholders across the City. LLGA is progressing well against its targets.
- 5.2. LLGA is keen to maximise the opportunities and funding available to continue to support inactive people in becoming active. LLGA is presenting progress to date to the Health and Wellbeing Board (Wednesday 12 March 2014).

## **6. Recommendations**

- 6.1. That Board members note the report and provide feedback on progress to date.

## **7. Background documents<sup>1</sup>**

None

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<sup>1</sup> The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.