LETS GET MOVING PHYSICAL ACTIVITY PROGRAMME UPDATE

То:	Health Committee			
Meeting Date:	May 23 rd 2019			
From:	Director of Public Health			
Electoral division(s):	All			
Forward Plan ref:	n/a	Key decision:	Νο	
Purpose:	The purpose of this paper is to provide further information regarding the Lets Get Moving physical activity Programme funded by the Health Committee from Public Health Reserves.			
Recommendation:	The Committee is asked to review the progress report and support the following recommendations.			
	positive prog b) Acknowledg to the establ	e that Let's Get M	V Let's Get Moving. oving is contributing nable physical activity	

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1. BACKGROUND

- 1.1 In 2016 Health Committee approved £513,000 to fund over two years the countywide physical activity programme, Let's Get Moving from Public Health Reserves. The funding was scheduled to end in April 2019. However in December 2018 the Health Committee approved additional funding that would enable to Programme to run until June 2020.
- 1.2 The Programme is being closely monitored to provide evidence of its impact, effectiveness and its potential for cost benefits. This report provides an update on its ongoing development and progress to date along with information about its sustainability across the County.
- 1.3 The Lets Get Moving Programme proposal was developed as a collaborative initiative between the district councils, their partners and County Sports Partnership Living Sport, to provide a countywide physical activity that would increase levels of physical activity programme especially in areas of and groups with lower levels with high needs. It has a key role in the delivery of the Cambridgeshire Healthy Weight Strategy with its central themes of collaboration across the system to support healthy behavioural change and communities taking responsibility for their health and wellbeing. These themes and objectives are reflected in the Lets Get Moving Programme which focuses upon increasing levels of physical activity through engaging local communities in the use of the district council facilities to a level that will enable them to become self-sustaining.

2. MAIN ISSUES

- 2.1 The Health Committee received a paper in December 2018 that described the impact, innovation, increased opportunities and engagement of individuals and communities in physical activity through the LGM Programme. However demonstrating the impact of behaviour change programmes presents challenges. The data for the first year of the Programme was promising but it is difficult to capture behavioural change outputs from initiatives. The recommendation was to extend funding but to use the learning from the first period of the Programme to inform its ongoing development and more effective data capture that would provide a more robust analysis of the impact of LGM.
- 2.2 The attached supporting paper (Appendix 1) describes the impacts and outputs of the first eighteen months of the Programme. However it also describes the challenges that the Programme has faced and how the programme has evolved to increase participation and importantly the steps that have been taken to improve the collection of more robust data to evidence its impact. The LGM Programme is a new way of working in Cambridgeshire and its development has been an iterative process. Consequently this first period has acted as a pilot Programme. The extension of the funding is enabling this learning to be applied so that its positive impacts can be robustly demonstrated.
- 2.3 The supporting LGM paper presents evidence that offer support for the Programme's achievement of its objectives

Let's Get Moving Key Objectives and Outputs

- Fewer inactive people in Cambridgeshire: 51% of participants increased their physical activity levels.
- More adults achieving Chief Medical Officer (CMO) guidelines for physical activity: 37% of participants were achieving CMO recommended levels of physical activity 3 months after joining the Programme.
- More opportunities to be physically active in deprived areas: 85 new programmes developed, over half of which are in the most deprived areas in each district.
- **Communities taking ownership of their health and wellbeing**: 45% of new programmes developed are sustained, without ongoing support from LGM, 6 months after initiation through community ownership.

3. ALIGNMENT WITH CORPORATE PRIORITIES

3.1 A good quality of life for everyone

The report above sets out the implications for this priority in 2.3

3.2 Thriving places for people to live

The report above sets out the implications for this priority in 2.3

3.3 The best start for Cambridgeshire's children

The following bullet points set out details of implications identified by officers:

- The LGM Programme aims to increase the levels of physical activity in population especially amongst those individuals, families and children who are more inactive.
- Supporting children to become physically active is associated with physical and mental health benefits along with improvements in attainment.

4. SIGNIFICANT IMPLICATIONS

4.1 **Resource Implications**

The report above sets out details of significant implications in 1.1

4.2 Procurement/Contractual/Council Contract Procedure Rules Implications

There is no significant implications within this category in this paper. Any implications regarding it were addressed in an earlier when the funding was awarded.

4.3 Statutory, Legal and Risk Implications

The following bullet points set out details of significant implications identified by officers:

- Physical inactivity can have a wide ranging negative impact on the health and wellbeing of the population. In the past 20 years rates have increased dramatically
- If this increase is not addressed there is very high risk that there will be an increased burden of related disease that ill impact heavily upon health and social care services.

4.4 Equality and Diversity Implications

The following bullet point set out details of significant implications identified by officers:

• LGM is a universal programme but it includes targeted approaches in areas and with population groups that have the greatest needs.

4.5 Engagement and Communications Implications

The following bullet points set out details of significant implications identified by officers:

• Central to LGM is the engagement of individuals and communities in the Programme, enabling them to take responsibility for their health

4.6 Localism and Local Member Involvement

The following bullet points set out details of significant implications identified by officers:

• LGM works with individuals and communities across the whole of Cambridgeshire to support their engagement with the Programme.

4.7 Public Health Implications

The following bullet points set out details of significant implications identified by officers:

- Physical inactivity is a major public health issue due to its substantial impact of health.
- It requires a wide range of interventions that address the varying needs of different communities
- These will need to include targeted actions that will address the inequalities associated with unhealthy weight and are indicated in the Strategy

Implications	Officer Clearance	
•		
Have the resource implications been	Yes : 15 May 2019	
cleared by Finance?	Name of Financial Officer: Clare Andrews	
Have the procurement/contractual/	Yes : 15 May 2019	
Council Contract Procedure Rules	Name of Officer: Gus de Silva	
implications been cleared by the LGSS Head of Procurement?		
Has the impact on statutory, legal and	Yes : 15 May 2019	
risk implications been cleared by LGSS Law?	Name of Legal Officer: Fiona McMillan	
Have the equality and diversity	Yes	
implications been cleared by your Service Contact?	Liz Robin	
Have any engagement and	Yes : 15 May 2019	
communication implications been cleared by Communications?	Name of Officer: Matthew Hall	
Have any localism and Local Member	Yes	
involvement issues been cleared by your Service Contact?	Liz Robin	
Have any Public Health implications been	Yes	
cleared by Public Health	Liz Robin	

Source Documents	Location
Physical activity: applying All Our Health: Public Health England 2018	https://www.gov.uk/gove rnment/publications/phys ical-activity-applying-all- our-health/physical- activity-applying-all-our- health
Start Active Stay Active: Chief Medical Officer's Physical Activity Guidance 2011. Department of Health and Social Care	https://assets.publishing. service.gov.uk/governm ent/uploads/system/uplo ads/attachment_data/file /216370/dh_128210.pdf