



**SPORT
ENGLAND**

Healthier communities

Improving health and reducing
health inequalities through sport

Shaping places through sport

How sport benefits every community

“Sports participation creates so many opportunities – not only providing obvious health benefits, but also less tangible benefits associated with community cohesion and personal achievement, through, for example, helping to develop community networks, providing positive activities for young people and creating competitive opportunities. Above all, it is also an enjoyable pastime!”

Will Tuckley, Chief Executive of the London Borough of Bexley

Introduction

This paper is one of a series of five papers aimed at policymakers and practitioners who are looking to use the ‘power of sport’ to help shape their local areas and to advocate the value of sport with partners to deliver local objectives.

In focussing on the role sporting organisations and related projects can play in improving health and reducing health inequalities the paper will be valuable to you because it:

- highlights key national policy announcements, programmes and initiatives impacting on the environment within which community sport can be sustained, can grow and can contribute to the development of talented players;
- presents the evidence to justify why community sport can contribute to a range of other shared priorities; and
- shares case studies to bring to life the benefits to local communities and the enjoyment that people can get from being involved in sport.

Context

In June 2008 the Government launched *Playing to win: A New Era for Sport* which sets out its answers to the complex questions that sports development in England faces in the run up to the 2012 Olympic and Paralympic Games. The Department for Culture, Media and Sport (DCMS) Secretary, Rt. Hon Andy Burnham MP, says in his introduction:

“Sport is ultimately about people... We want to liberate sport’s experts and elite performers to inspire more people to get off the couch and back in to sport, to sustain their enthusiasm and provide a quality experience which will allow individuals to excel”.

Playing to win: A New Era for Sport, DCMS, 2008

In announcing a new partnership between Sport England and National Governing Bodies of sport (NGBs), the Secretary of State made it clear that he expects governing bodies “will be challenged to expand participation and provide more quality coaching for more people” and “to build a modern club structure welcoming and accessible to all”. He went on to say that he believes “we should value sport because it is good in and of itself” and that “sport is often at the heart of a community, helping places live and thrive”.

The Government has also recognised the need to link Sport England’s work on sport with other Government Departments’ work on physical activity, such as the Department of Health and the Department of Transport, not least because of the significant contribution sport makes to getting people more active and improving health outcomes. The Department of Health is leading the development of a new plan for physical activity, which will address this wider agenda and the Government’s ‘free swimming’ initiative and the ‘Change4Life’ campaign are examples of this way of working.

In this context, *Playing to win* recognises that local authorities “are best placed to know the needs of local populations, and are directly accountable for meeting them. Each area will have their own targets for participation, set locally, not by central diktat, as an extra way of ensuring no group or community is left behind”.

Local authorities can take a lead role in the local delivery of sport and active recreation, working with local sport and physical activity networks and other strategic partnerships.



In response to this new era for sport, Sport England has simultaneously launched its own strategy for 2008-11. It highlights the need for a world-leading community sport system:

- to grow participation in sport and to lower drop-out rates amongst 16 to 19-year-olds;
- to sustain participation through better quality sporting experiences; and
- to increase the size and widen the diversity of the pool of talented English sports players helping them to excel.

The new strategy recognises the need for Sport England to add value to the sports sector and to deliver this by:

- working with and through NGBs, commissioning them to achieve the key outcomes identified in the strategy;
- working with local authorities to support, sustain and secure investment in community sport;
- working with the Further Education and Higher Education sectors to grow and sustain participation amongst young adults;
- engaging with other partners to influence their investment in sport or to draw on their specialist expertise (e.g. equality groups and the voluntary sector); and
- creating new partnerships with the private sector to lever investment and new skills for community sport.

Sporting organisations and NGBs will need to work with local authorities in order to ensure that sport benefits from being included in Local Area Agreements (LAAs), Sustainable Community Strategies, Comprehensive Area Assessments and the Living Places Partnership programme.

Sport England is determined to build on the strong working relationship with local authorities and their local partners that has seen sport emerge as one of the 'top 20 priorities' in the new LAAs announced in June 2008, with more than half of these LAAs including adult participation in sport and active recreation as a key priority.

Sport England Chief Executive, Jennie Price, has confirmed that:

"We are committed to working in partnership with local authorities, supporting their work around sports and sharing our expertise to ensure that local government's considerable investment in sport delivers the maximum possible value".

[Sport England press release on LAAs, July 2008](#)

And part of that maximum value is the role sporting organisations can play in helping to shape places through sport. Sport can make a contribution to many of the shared priorities with local government, local strategic partnerships, and the other local and regional partnership structures.

This paper on *Healthier communities* is one of five papers which advocate the value of sport in shaping places. The other four papers contain similar information on sport's role in addressing:

- *Building communities: Developing strong, sustainable and cohesive communities through sport;*
- *Increased prosperity: Increasing skills, employment and economic prosperity through sport;*
- *Creating safer communities: Reducing anti-social behaviour and the fear of crime through sport; and*
- *Transforming lives: Improving the life chances and focussing the energies of children and young people through sport.*

All are available as pdf documents on the Sport England website, together with an *Executive summary*.

Do you want healthier communities and to enable older people to live independent lives?

Headlines

How will this paper help?

People and partnerships that plan and prioritise the health needs of local communities can use the power of sport as a positive tool to help realise their places' potential and to deliver their goals and outcomes. Sport helps to deliver health outcomes in:

- Local Area Agreements (LAAs);
 - Sustainable Community Strategies;
 - Strategic Commissioning Strategies;
 - Primary Care Trust Local Delivery Plans;
 - Health and Well-being Strategies; as well as
 - Public Service Agreements (PSAs).
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What outcomes can sport achieve?

Evidence demonstrates that regular involvement in sport and physical activity helps to:

- Reduce the specific risk factors that contribute to poor health e.g. obesity, diabetes, cardio-vascular disease and some types of cancer – helping reduce the health costs to local communities;
 - Increase life expectancy and reduce health inequalities;
 - Improve quality of life and increase independence, including among older people and people with health conditions – helping reduce social services costs to the local community; and
 - Create a healthier workforce, with less absenteeism – helping to improve productivity and economic output.
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Where's the evidence?

The connection between participation in sport and improved health is supported by key research and evidence reviews including:

- The Chief Medical Officer's report *At least five a week*, 2004, identifies sport and physical activity as a key determinant of health;
 - The Government Strategy *Healthy Weight, Healthy Lives*, 2008; and
 - The Foresight report *Tackling Obesities: Future Choices*, 2007, highlights physical activity levels as a key determinant of obesity.
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Making it happen

Sports interventions to develop healthier communities can be planned and delivered with sports organisations within the area, including County Sports Partnerships, National Governing Bodies of sport and School Sport Partnerships, working with local authorities, community groups, Primary Care Trusts (PCTs), GP practices and social services.

Strategic needs assessments and the development of targeted interventions for healthier communities and care agencies can be informed by data on participation in sport from the Active People Survey – see page 12.

Improving health and reducing health inequalities through sport

The evidence on the positive impact of regular participation in sport on the health of individuals and communities is unequivocal. The table on the following page summarises the impact that regular involvement, participation and engagement in sport can have on individuals and communities and how that in turn contributes to four key health outcomes.

“There are few public health initiatives that have greater potential for improving health and well-being than increasing the activity levels of the population of England”.

Chief Medical Officer, Department of Health, 2004

“By 2050, 60% of males and 50% of females could be obese, adding between £5.5 and £6.5 billion to the annual total cost of the NHS by 2050, with wider costs to society and business reaching £45.5 billion”.

Tackling Obesities: Future Choices – Project Report,
Government Office for Science/Foresight, 2007

Improving health and reducing health inequalities through sport

Regular involvement in sport

Sports:

- Activities and events
- Clubs and groups
- Coaching
- Competition
- Courses and skills programmes
- Facilities
- Leadership
- Mentoring
- Training and employment schemes
- Volunteering

Individual and community benefits

- Increased knowledge of health and healthy lifestyle issues
- Adoption of healthier and more active lifestyles
- Improved physical fitness, health and mobility
- Improved mental health and feeling of well-being
- Increased confidence and self-esteem
- Increased sense of personal achievement
- Increased social interaction and new relationships and role models
- Improved skills and confidence to contribute to local decisions
- Increased knowledge of local services and engagement with community issues
- Stronger identification with local community and sense of place

Key outcomes

- Reduces the specific risk factors that contribute to poor health e.g. obesity, diabetes, cardio-vascular disease and some types of cancer
- Increases life expectancy and reduces health inequalities
- Improves quality of life and increases independence, including among older people and people with health conditions
- Creates a healthier workforce, with less absenteeism

Sport can also contribute to the following Public Service Agreements relating to healthier communities:

- Improve the health and well-being of children and young people (PSA 12)
- Tackle poverty and promote greater independence and well-being in later life (PSA 17)
- Promote better health and well-being for all (PSA 18)

What are the key drivers for sport and healthier communities?

8.5m

adults participate in 30 minutes of moderate intensity sport each week

“Improving public health is pivotal to our assault upon health inequalities, because lifestyle differences – such as smoking, diet and exercise – are responsible for as much as half of the gap”.

Rt. Hon Alan Johnson MP, Secretary of State for Health, 2007

“The future of our health system depends on encouraging people to take better care of themselves. Government simply can’t afford to be the passive observers of unhealthy lifestyles, only intervening when chronic diseases such as diabetes, heart disease or lung cancer are already well established. Public health issues must be elevated to the top of the national agenda”.

Speech by **Rt. Hon Alan Johnson MP**, Secretary of State for Health: *The Healthy Society*, September, 2007

The Government has recognised that an important legacy from the 2012 Olympic and Paralympic Games (London 2012) will be increased levels of sport and physical activity. It has set an aim “to engage a million more people in regular sport participation” as part of an overall ambition to get two million more people physically active by 2012.

Playing to win: A New Era for Sport, DCMS, 2008

There is a growing acceptance that prevention and early intervention, along with the environment we live in, have an important part to play in improving health and reducing health inequalities.

Home, education, community and workplace environments that encourage healthy and active lifestyles can make a significant and positive impact.

Raising awareness of what it means to be active and providing a diverse choice of sports opportunities to meet different interests and needs brings real benefit.

Encouraging people who are sedentary or occasional participants to increase their levels of sport and physical activity will have a substantial positive impact on health.



Evidence from the 2005/06 Active People Survey shows that:

- over 8.5 million people, 21% of the population, 16 years and over, currently participate in moderate intensity sport and active recreation for at least 30 minutes, at least three times a week;
- a further 11.5 million people currently participate at least once or twice a week; however
- just over half of the population, 20.6 million people, do not participate at all.

“Physical activity and diet are both areas where greater population engagement is required to halt the rising prevalence of obesity and combat other ill health effects of sedentary lifestyles”.

Our Future Health Secured? A review of NHS funding and performance, Wanless/Kings Fund, 2007

What are the key drivers for sport and healthier communities?

“NICE fully endorses the importance of physical activity as a means of promoting good health and preventing disease, and the consequent need to develop comprehensive, multi-sectoral strategies (including innovative approaches) to promote physical activity as part of daily life”.

National Institute for Health and Clinical Excellence, 2006



Insights

Sport can contribute to the following health PSAs:

- Improve the health and well-being of children and young people (PSA 12);
- Tackle poverty and promote greater independence and well-being in later life (PSA 17); and
- Promote better health and well-being for all (PSA 18).

Sport can contribute to the following Departmental Service Objectives (DSOs):

- Ensure better health and well-being for all; helping you stay healthy and well, empowering you to live independently and tackling health inequalities (DH); and
- Secure the well-being and health of children and young people (DCSF).

Sport can contribute to the following health-related National Indicators:

- Adult participation in sport and active recreation (NI18);
- Self reported measure of peoples' overall health and well-being (NI119);
- All-age all cause mortality rate (NI120);
- Mortality rate from all circulatory diseases at ages under 75 (NI121);
- Mortality from all cancers at ages under 75 (NI122);
- Healthy life expectancy at age 65 (NI137);
- Obesity among primary school age children in reception year (NI55); and
- Obesity among primary school age children in Year 6 (NI56).

What are the key drivers for sport and healthier communities?

“The scientific evidence is compelling. Physical activity not only contributes to well-being, but is also essential for good health. People who are physically active reduce their risk of developing major chronic diseases by up to 50%, and the risk of premature death by about 20-30%”.

Chief Medical Officer, Department of Health, 2004

The national health improvement agenda is set out in the Governments' strategy *Our health, our care, our say* and other key strategies and policies. The new *Health and Social Care Outcomes Framework* will bring greater partnership working between local authorities and Primary Care Trusts (PCTs) through joint commissioning. *Healthy Weight, Healthy Lives* – a cross government strategy for England sets out government plans to reverse the rising tide of obesity in the population.

The 2007 Comprehensive Spending Review and PSA targets, identify improving health and well-being, including tackling obesity, as priority outcomes and this is further reflected in the new National Indicator Set for local authorities and local authority partnerships.

At a local level improving health and tackling health inequalities are key issues within Sustainable Community Strategies, Local Area Agreements, Strategic Health Authority Commissioning Plans and Primary Care Trust Local Delivery Plans.

The next few years, including the lifetime of the new LAAs, present a unique opportunity to promote a step change in the culture of sport, embedding sport into the fabric of daily life of local communities and delivering huge socio-economic and health benefits linked to the specific National Indicators identified on the previous page.



The challenge will now be to ensure that the local delivery plans are robust enough to meet the targets set for these Indicators within the LAAs. In addition, if the full benefits of regular participation in sport are to be delivered, it will be important to ensure that the plans embrace sport and active recreation as well as broader physical activity initiatives.

Many local authorities have now established sport and physical activity networks or alliances. These will be important partners in ensuring that the delivery of sport and physical activity can be coordinated locally, particularly for those areas which have included N18 in their LAA.

What is the evidence on the impact of sport?

“With sickness absence costing the economy over £13bn a year – and lower productivity while at work due to common mental health problems alone estimated to cost in excess of £15bn a year – all of us have a crucial role to play in securing the health of the working population”.

Dame Carol Black, National Director for Health and Work, DWP.

Over the past few years unequivocal research evidence has become available that demonstrates the impact of sport and physical activity on health:

- *At least five a week – evidence on the impact of physical activity and its relationship to health*, published in 2004 by the Chief Medical Officer, Department of Health confirms the positive benefits that a physically active lifestyle can realise and strongly advocates the need for a significant culture shift to ensure that everyone becomes more active; and
- *Tackling Obesities: Future Choices*, Foresight/Department of Science report published in 2007 highlights levels of physical activity as one of four key determinants of obesity and recognises that interventions to increase physical activity levels for individuals can be effective.

However the Foresight report concludes that to really have an impact on obesity will require far greater change than anything tried so far. It advocates that action must be taken at multiple levels: personal, family, community and national, to prevent more people becoming obese in the future.

One of the recommended key principles to underpin the future approach is the prevention of health problems and sporting organisations can be part of the wide ranging partnership needed to tackle obesity.

Research also demonstrates that the economy can benefit from a more active population:

- the Foresight report highlights the escalating cost to the National Health Service of obesity and predicts that by 2025 the cost to the NHS of obesity could rise to £5.3bn;
- the Local Exercise Action Pilot projects (LEAP), demonstrated that physical activity interventions can be cost effective and that there are potential cost savings to the NHS from increasing people’s involvement in physical activity; and



– *Healthy Weight, Healthy Lives* and the *Well @ Work* pilot projects highlight that health and well-being at work are essential to business improvement and increase productivity for employers.

“They (the LEAP interventions) also offer cost savings to the NHS through reducing the likelihood that physically active individuals will suffer adverse health states in the future”.

Learning from LEAP – a report on the Local Exercise Action Pilots, Sport England/ Department of Health/Natural England, 2007

“Employers have a lot to gain by investing in a healthier workforce... it makes good business sense”.

British Heart Foundation, Well @ Work, 2007

“Most people in employment spend 60% of their waking hours in work... the workplace is a great place to promote the benefits of enjoying a healthy, active lifestyle”.

Working for a healthier tomorrow, The Stationery Office (TSO), 2008

Employers can support their staff in a number of ways: making healthy options available in staff canteens, providing fitness facilities and investing in facilities for cyclists. Employers will reap the benefits in improved productivity, high staff morale and retention, and reduced sickness absence costs.

Healthy Weight, Healthy Lives – Across Government strategy for England DH/DCFS, 2008

Working with partners

As set out in Sport England's *Strategy for 2008-11*, significantly increasing sporting opportunities requires a world-leading community sports system of sports facilities, people, activities and events with the capacity to engage and retain adults and young people in sport. This requires effective partnerships and an approach to commissioning that recognises the role of public, private and community organisations as deliverers within different settings.

“Based on the published evidence to date it seems that a multilevel approach to promoting physical activity, combining school based interventions with family or community involvement and educational interventions with policy and environmental changes, is likely to be effective among adolescents and should be promoted”.

Effectiveness of interventions to promote physical activity in children and adolescents: systematic review of controlled trials, British Medical Journal, 2007

London 2012 provides a unique opportunity over the next few years to enthuse people throughout England about sport and to increase participation. London 2012 will inspire and motivate many people to take part in sport. Over 100,000 adults and young people will have the opportunity to be involved as a volunteer or as a paid employee and an estimated 9.4 million spectators are expected to attend.

Playing to win, puts a new focus on all of the sporting landscape partners (Sport England, UKSport, Youth Sport Trust and sportscoach UK) collaborating to deliver key outcomes.

The new Sport England strategy sets out how “We will engage other partners – such as Local Authorities, equality groups and the Third Sector – to influence their investment in sport or to draw on their expertise”. In addition, Sport England will “also engage with Local Government via the Improvement Agenda, Sustainable Development Strategies and Comprehensive Area Assessment”.

Sport England Strategy 2008-11, Sport England, 2008



PCTs, local authorities, Foundation Hospitals and the new Local Involvement Networks should all engage with sports organisations who can help them:

- consult on, and understand, the needs of the area;
- share and interpret data; and
- develop programmes and activity to meet mutually beneficial outcomes.

Shared data

To support the planned provision of sport and ensure it tackles local priorities accurate data is now available on participation for every local authority and PCT area from the Active People Survey as set out on the following page.

The Active People Survey, carried out by Sport England in 2005/06 is the largest, most comprehensive survey of participation in sport and active recreation ever undertaken in England, involving 363,724 adults, age 16 and over (a minimum of 1,000 adults in every local authority in England).

The Active People Survey

The Active People Survey is continuing on an annual basis over the next three years starting 2007/08. Active People Survey 2 is being conducted from October 2007 to October 2008; Active People Survey 3 will be conducted between October 2008 to October 2009; and Active People Survey 4 will be conducted between October 2009 and October 2010. Active People Survey 2, 3, and 4 are based on an annual local authority sample size of 500 adults.

Data from the 2005/06 Active People Survey are available for every local authority area in England on:

- the type, frequency, duration and intensity of people's participation in different types of sport and active recreation;
- volunteering;
- club membership;
- receiving tuition from an instructor or coach;
- participation in competitive sport; and
- satisfaction with local sports provision.

This data provides valuable information for the population as a whole and for specific priority groups, including disabled people and people from black and minority ethnic communities and those in lower socio-economic groups. For example it provides information on:

- the participation rates for the area and how often e.g: one, two, or three times a week moderate intensity for 30 minutes;
- participation levels for different age groups; and
- the number of people doing no activity.

The Active People Survey provides the source data for National Indicator 8 at a local level.

The Taking Part Survey

The Taking Part Survey is the national survey of culture, leisure and sport commissioned by DCMS with a sample size of around 29,000 households each year from July 2005. The sporting questions include information on participation, levers and barriers to participation and spectatorship of sport.



Market Segmentations

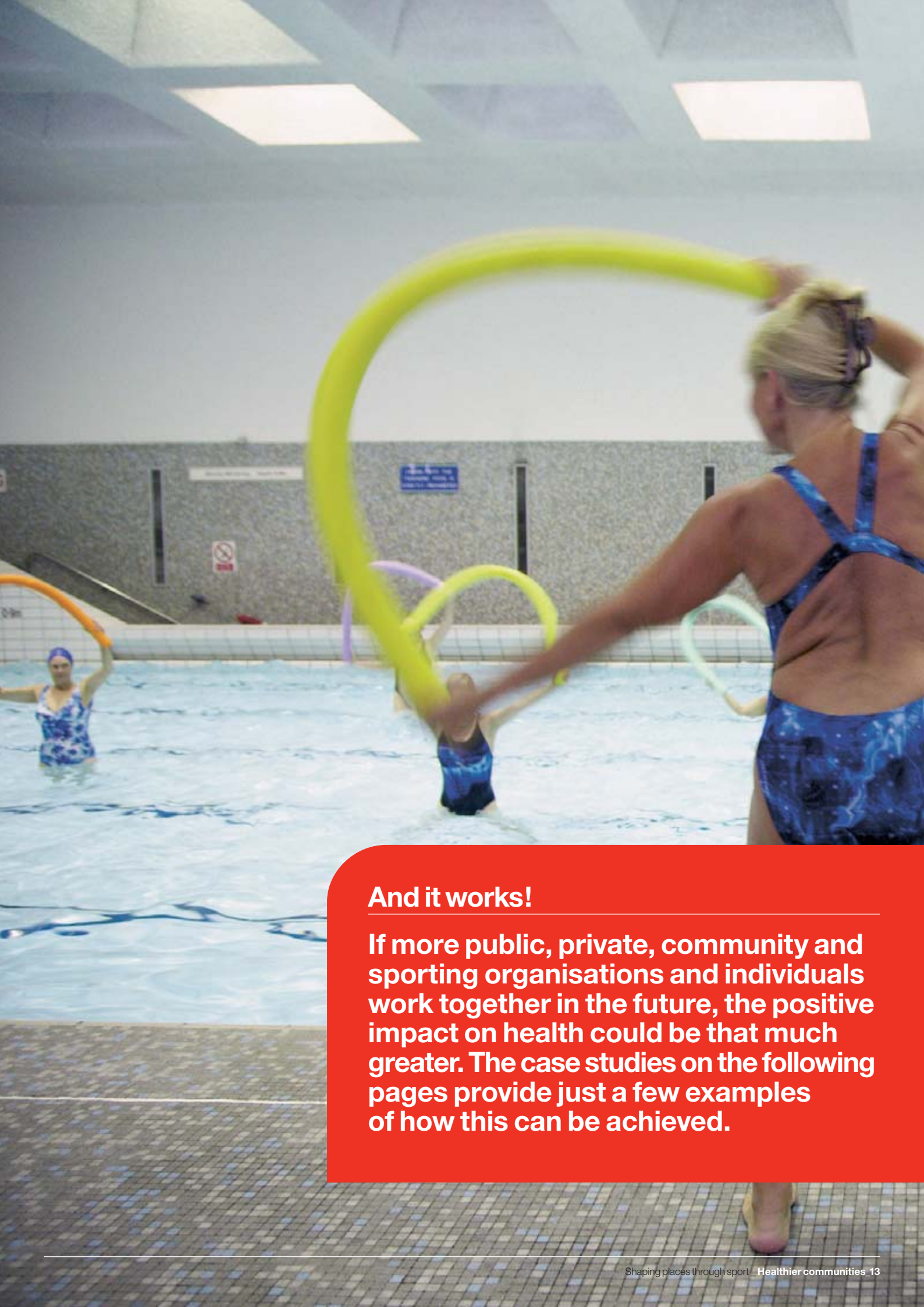
Sport England's analysis of market segmentation can also help with future targeting of investment, initiatives and marketing. By combining the Active People and Taking Part Surveys, with other data sources the segmentation provides a more detailed understanding of the sporting market, and potential participants. It provides information on 19 distinct segments which highlight participation behaviours in the context of lifestyles and total lifecycle. This will enable initiatives to be developed and promoted that are most likely to succeed in increasing participation.

The Active Places database

Active Places identifies where sports facilities are located across England. It includes information on a wide range of local authority, club and commercial facilities, including sports halls, swimming pools, golf clubs, health and fitness centres, community sports centres and ski-slopes.

To access Active People and Active Places data, and information on market segmentation, visit the following websites:

www.sportengland.org
www.sportengland.org/research
www.activeplaces.com



And it works!

If more public, private, community and sporting organisations and individuals work together in the future, the positive impact on health could be that much greater. The case studies on the following pages provide just a few examples of how this can be achieved.

Active Lifestyles in Rural Areas – Wellness on Wheels, Wear Valley

Case Study

Wellness on Wheels, a mobile wellness centre, has contributed to the health and well-being of residents living in rural and disadvantaged areas by engaging them in sport and active recreation and raising awareness of healthier lifestyles.

Background

Wellness on Wheels (WOW!) is a partnership project that promotes the benefits of physical activity and encourages key lifestyle changes within local communities by delivering innovative activity opportunities to isolated and socially deprived areas. The 44ft mobile unit is equipped with fitness equipment and can accommodate up to 16 people exercising at a time, as well as providing other sports and wellness support. The WOW! trailer is an accredited Inclusive Fitness Initiative Site providing full access for disabled people.

How it works

To get the project going and raise awareness of the WOW! project a number of one off events were held around the Wear Valley. Since then the trailer has moved around the district and stays in one place for 10 weeks at a time. This enables people to see the difference that active recreation can make to their lives. People attend the centre voluntarily although some are referred as part of an exercise referral scheme. Once “hooked” into activity people are signposted to other sport and active recreation opportunities. WOW! complements other local initiatives e.g. the locally funded community physical activity coordinators, local sports facilities programmes and walking the way to health projects.

Key outcomes

WOW! has a monitoring and motivation system in place that helps track who is attending and the progress of users.

Up to June 2008:

- there were a total of 7,154 participants;
- at each location an average of 2,000 and 2,600 visits were made to the trailer and between 200-550 members were signed up over a 10-week period; and
- the majority of participants were aged between 30-70 years, although it has also been very popular with schools.

The initial project has also spawned WOW! legacy gyms. The mobile gym acts as a consultation tool to establish the demand and potential locations for permanent local facilities, which volunteers are trained to run themselves. The project provides £15,000 worth of equipment to the host community who have 12 months to pay the money back.

One example of such a legacy is the Wolsingham Community Fitness Suite which was launched in May 2006. This centre is now managed by the community and has successfully recruited ten volunteers. To date it has attracted 150 members and £1,000 of income and introduced a weekly GP referral scheme.



Five other legacy community fitness suites have also been established, one of them in a workplace setting, and two more are coming on board during 2008, with the aim to establish a total of 12 by the end of 2009.

And on a personal note

One participant said:

“Wellness on Wheels has changed my life. I’d never really thought about getting fit until the trailer turned up, but now I’m a confirmed fitness freak! I feel a million times better thanks to the facilities, and hope the plan becomes more widespread”.

Resources and partners

Funding has been provided by Wear Valley District Council, Durham Dales Primary Care Trust, Wear Valley Sport Action Zone, Technogym and through an Active England grant from Sport England/ Big Lottery Fund, and a further Active England capital and revenue award of £132,125 in 2006 for legacy projects.

For further information contact Natalie Drew:

n.drew@wearvalley.gov.uk

Improving the quality of life and independence amongst older people – The Fishnets Project, Northumberland

Case Study

The Northumberland Fishnets project is delivering key outcomes, including increasing the number of people helped to continue to live at home, reducing emergency hospital admissions by older people and reducing the number of falls leading to fractures and hospital treatment.

Background

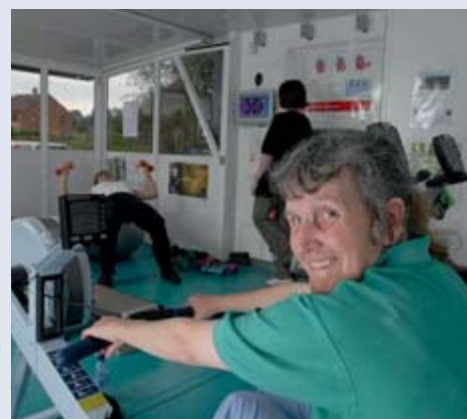
The Department of Health 'Partnerships for Older People' pilots are testing new ways to improve the health and quality of life of older people which will give them greater personal control over their physical and emotional health, enable them to remain independent wherever possible and helping them to feel good and to participate fully in their community. The Northumberland Fitness, Involvement, Safety and Health Networks (Fishnets) project is one of the 30 pilot sites.

How it works

The projects two main physical activity interventions are:

- Young at Heart sessions, hosted in the leisure centres in Northumberland; and
- The Fishnets Falls Prevention Exercise Program – a 12-week incremental exercise schedule.

The Young at Heart sessions provide an opportunity for older people to try out a range of sporting activities during a fun, free, non-committal event as well as providing information about health education and about local services. Participants can engage in carpet bowls, short tennis, badminton, health walks, Tai Chi, yoga, new age curling, indoor bowls and aqua-based exercises.



The taster sessions enable older people to identify the activities they would like to participate in locally. The leisure centre managers are able to ascertain the demand for particular activities so that they can be confident that they will be sustainable in the future. In response to the Young at Heart events leisure centres have now implemented new programmes in centres across the County.

Participants of the Fishnets Falls Prevention Exercise Program engage in a 12-week incremental exercise schedule. Participants are referred to the program either because they have already had a fall or because they are at risk of falling.

Following engagement in the falls prevention program, participants are then encouraged to become involved in regular sport and physical activity.

Improving the quality of life and independence amongst older people – The Fishnets Project, Northumberland



The falls prevention programme improves the physical fitness and mobility of participants, reduces the likelihood of future falls and increases their confidence to go out and to engage socially.

Key outcomes

Since the start of Fishnets:

- over 3,000 older people have accessed Fishnets related physical activity;
- 1,200 plus older people have attended Young at Heart and falls fair events;
- 50 new exercise leaders have been trained to work with older people;
- Leisure centre staff across Northumberland have been trained and are providing specialist fall services.

A website has been developed with information and links about services to keep older people fit, healthy, safe and involved. The web address is: www.northumberlandfishnets.org

In terms of wider objectives early project evaluation indicates that:

- there has been a 12% reduction in hip fractures in year one;
- Care homes are reporting up to 30% reduction in falls;
- Emergency services have reported a significant reduction in call outs for fallers;
- local evaluations of quality of life amongst older people identify positive responses; and
- initial indications are that there has been a positive impact on hospital admissions and emergency bed days, with a subsequent reduction in costs to PCTs.

Resources and partners

Fishnets is overseen by a partnership board accountable to the Northumberland Care Trust Board and reporting to the Northumberland Strategic Partnership. Membership of the board consists of eight community older people's representatives, primarily local users of services, as well as representatives of a local housing agency, Northumberland Care Trust and the Mental Health Trust.

A wide range of other partners are also involved including Northumberland County Council and the District Council's in the county, Age Concern and other community organisations, local leisure centres and residential homes. Funding has come from Northumberland Care Trust and through the Department of Health Partnerships for Older People grants.

For further information contact Helen Prytherch, Health Improvement and Practitioner Specialist, Northumberland Care Trust:

Helen.Prytherch@northumberlandcaretrust.nhs.uk

Case Study

70% of the workforce at Ginsters in Cornwall are now engaged in more active lifestyles as a result of an Active Workplace project that has introduced a broad range of sports activities within and outside of the work place.

Background

Ginsters is a food manufacturer based in Callington, South East Cornwall. Callington is a small rural town with a low wage economy and a worse than national average rating on the Index of Health Deprivation and Disability, 2004. With 520 employees, Ginsters is typical of the manufacturing industry, operating seven days a week, 24 hours a day, in 12-hour shifts. Over the past year the company has implemented a project to promote health and the benefits of physical activity within the workplace.

How it works

The project aims to encourage and promote physical activity and positive health choices as an integral part of the lives of both the employees and their families. Ginsters have employed an Active Workplace Co-ordinator to deliver the project and employees who are currently inactive have particularly been encouraged to take part.

Activities set up to date include a slow running club, walking club, badminton, tennis, jive, table tennis, trampolining, yoga, martial arts and self defence. There are 10 mountain bikes available to borrow, together with subsidised skiing and snow boarding taster sessions. There have been 11-a-side inter-departmental football matches between shifts throughout the summer.

Ginsters have also installed a free on-site gym with over 400 sessions a week. The Active Workplace Co-ordinator works closely with the Occupational Health Nurse who refers people onto an exercise referral programme in the on-site gym. There are opportunities for staff to have health assessments and free chiropractor assessments. There is also a weekly NHS Stop Smoking Clinic and they have organised discounts at local sports facilities to encourage people to be more active. Ginsters are the first company in Britain to have a corporate membership with Slimming World.

The project also works with the company restaurant to improve healthy food options and staff are offered free fruit every day.

Key outcomes

Ginsters have engaged in the scheme because they recognise that supporting increased activity in the workforce can lead to a reduction in sickness, stress-related illness, incidences of chronic illness and injuries, accidents at work and staff turnover.

To date out of a workforce of 520, 85% (440) have participated in at least one activity and many are now engaged in activities on a regular basis. In addition other family members of many of the workforce have also participated.



Resources and partners

The project is run by Ginsters in association with Carodon District Council and a £160,000 grant from Sport England.

And on a personal note

Comments from participants include:

“I have been going out power walking in the evenings. I know this whole healthy at work thing is really rubbing off!”

Karen

“Since the fun run, my 3-year-old son has been asking if he can join me every time I get ready to go for a run, and wonders why there aren't hundreds of other people running too”.

Phil

For further information contact Steve Smeeth, Active Workplace Coordinator:

Steve.smeeth@ginsters.co.uk or jabraham@caradon.gov.uk

Improving health and reducing health inequalities through sport

Sources

Key sources of evidence

Please click on the links below for further information:

- *At least five a week – evidence on the impact of physical activity and its relationship to health*, Chief Medical Officer, Department of Health, 2004;
- *Effectiveness of interventions to promote physical activity in children and adolescents: systematic review of controlled trials*, British Medical Journal, 2007;
- *Learning from LEAP – a report on the Local Exercise Action Pilots*, Department of Health/ Sport England/Natural England, 2007;
- National Institute of Clinical Excellence (NICE) website and reports on physical activity
- *Tackling Obesities: Future Choices – Project Report*, Government Office for Science/ Foresight, 2007;
- *The Value of Sport Monitor* – Categories ‘Physical Fitness and Health’ and ‘Psychological Health and Well-being’ – Various UK and international research reports, 2001-07;
- Active@work website; and
- Active People Survey data on participation in sport and active recreation, including analysis by geographic areas and market segmentation, Sport England (2006 onwards).

Other sources of information

- *Challenge England – Next Steps for Choosing Health*, Department of Health, 2006;
- *Choosing Activity: a physical activity action plan*, Department of Health and Department of Culture, Media and Sport, 2005;
- *Health and Social Care Outcomes Framework*, Department of Health, 2007;
- *Our Future Health Secured? A Review of NHS funding and performance*, Wanless, Kings Fund, 2007;
- *Our Health, Our Care, Our Say* – a new direction for community services, Department of Health, 2006;
- *Securing Good Health for the Whole Population – Final Report*, Wanless, Department of Health/HM Treasury, 2004;
- *Sport for development toolkit*, United Nations, 2007;
- *Summary Report and Call to Action – Well@Work*, British Heart Foundation, Feb 2008;
- *The World Health Report: Reducing Risks, Promoting Healthy Life*, World Health Organisation, 2002;
- *Working for a healthier tomorrow*, The Stationery Office (TSO), 2008;
- *Playing to win: A New Era for Sport*, DCMS, 2008; and
- *Sport England Strategy 2008-11*, Sport England, 2008.

This document can be provided in alternative languages, or alternative formats such as large print, Braille, tape and on disk upon request. Call the Sport England switchboard on 08458 508 508 for more details.

Further information

To find out more about Sport England's strategy for 2008-11; the other *Shaping places through sport* papers, and to get the latest news and information about our various initiatives and programmes, please go to:

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Sport England

3rd Floor
Victoria House
Bloomsbury Square
London
WC1B 4SE
T 08458 508 508

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