

REPORT TO HEALTH & WELLBEING BOARD

4th June 2019

IMPLEMENTING THE PHYSICAL ACTIVITY PLAN

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1. Purpose of Report

1.1 To provide an opportunity for Health & Wellbeing Board to discuss the Active in Barnsley partnership approach to implement the Physical Activity Plan and improve physical activity levels in Barnsley.

2. Recommendations

2.1 Health & Wellbeing Board members are asked to:-

- Provide feedback on the content of the paper and the Physical Activity Plan 2018-21
- Agree next steps for action and communication by Health & Wellbeing Board and its member organisations.

3. Background

3.1 Physical Activity has been one of our public health strategic priorities for the past 3 years delivered by the Sport & Active Lifestyle Strategy (2015-2018). Our new Public Health Strategy (2018-2021) supports this continued priority. To deliver this, a Physical Activity Plan has been developed by Barnsley Physical Activity Partnership to achieve the vision, priorities and actions as outlined in the document (Appendix one).

3.2 The Physical Activity plan is closely aligned and supports the Barnsley Active Travel Strategy (2019-2033) by implementing ways to enable people to walk and/or cycle to work or school, hence building physical activity into daily life.

3.3 Physical activity includes any form of movement which raises the heart rate and has a positive impact on mental and physical wellbeing. It can include daily living tasks such as house work and gardening, transport such as cycling, walking and scooting, as well as more organised activities such as using the gym, park run or playing team sport.

- 3.4 Physical activity and exercise can improve health and reduce the risk of developing several diseases such as type 2 diabetes, cancer and cardiovascular disease. Physical activity and exercise can have immediate and long-term health benefits. Most importantly, regular activity can improve mental wellbeing and overall quality of life.
- 3.5 In Barnsley, there are low rates of physical activity amongst adults. According to the latest Active Lives Survey, 54.4% of adults are classified as active (150 mins/week), 14.5% are fairly active (30-149 mins) and 31.2% are inactive (less than 30 mins/week). These figures are significantly worse than the national and regional figures. Barnsley ranks 5th highest for levels of inactivity compared with 17 statistical neighbours.
- 3.6 37% of Barnsley children are currently meeting the Chief Medical Officer guidelines and are active each day, or on average, achieving 60 mins a day across the week. This is broadly similar to the England rate for being active each day, or on average across the week (40%).
- 3.7 However, 43% of children achieve less than 30 mins per day or as an average of 30 mins per day across the week. The England rate in comparison is 33%¹.
- 3.8 At least 30 minutes (of the CMO Guidelines) should be delivered in school every day through active break times, PE, extra-curricular clubs, active lessons, or other sport and physical activity events, with the remaining 30 minutes supported by parents and carers outside of school time².
- 3.9 Barnsley scores low on the National Child Weight measure at reception and at Year 6³ against our statistical neighbours. However, the percentage increase from reception to year 6 is higher than the majority of our neighbours which is showing an increase in sedentary behaviour during primary school age.
- 3.10 The National Institute for Health Care Excellence (NICE) guidelines⁴ state that physical activity should be one of the first interventions recommended by doctors for mild to moderate depression. Being physically active is especially important for people with severe and long-lasting mental health problems (such as bipolar disorder or schizophrenia), because they are:
- Twice as likely to die from heart disease.
 - Four times as likely to die from respiratory disease.

¹ Source: Active Lives Children's Survey 2017/18 – 517 responses from Barnsley

² Childhood Obesity – A Plan for Action 2016

³ NHS Digital, National Child Measurement Programme 2017/18

⁴ Stated in Get Set to Go Programme Evaluation Summary, MIND

- Likely to die between 10 and 17 years earlier on average than the general population, driven in large part by poor physical health.

3.11 Across Barnsley, 23,992 adults have been diagnosed with depression at their GP practise, 11.3% of the adult population.⁵ On the register of all GP practises in Barnsley, 0.77% of patients are diagnosed with SMI. This equates to 2056 people. Of the 33 GP practises in Barnsley, there are four that have over 100 patients with SMI. These are; Ashville Medical Centre (109), Huddersfield Road Surgery (111), Park Grove Surgery (109), and the Kakoty Practise (112).⁶

4. Tackling inactivity in Barnsley

4.1 The Physical Activity Plan demonstrates a collaborative approach with the Council and partners, to tackle levels of inactivity and obesity amongst adults, young people and children across the borough. The plan proposes how we all contribute locally to improving physical activity levels and the associated health outcomes for our residents.

4.2 The Plan seeks to achieve our vision of a “healthy and proud Barnsley where active living is part of everyday life for everyone” and identifies five priorities;

- Active Schools and Colleges - work with our schools and colleges to create hubs of physical activity
- Active Workplaces - increase physical activity opportunities in our places of work.
- Active Spaces - make it easier for people to build activity into daily lives
- Active Communities - use physical activity to help communities achieve their potential
- Professional and Volunteer Networks - develop physical activity skills and knowledge across a variety of networks.

4.3 The high level implementation plan outlines key actions and timescales, including the development of a partnership flagship project to tackle adult mental wellbeing through physical activity provision.

4.4 The Barnsley Physical Activity Partnership has co-designed branding and a collaborative communication plan will be launched. The partnership will publicly celebrate successes in Barnsley, contributing to the “Town Spirit” ethos.

5. Conclusion/ Next Steps

5.1 To review progress with the implementation of the Physical Activity Plan 2018-21 and agree next steps for action.

⁵ <https://fingertips.phe.org.uk/profile-group/mentalhealth>

⁶ <https://files.digital.nhs.uk/90/C5FE40/qof-1718-prev-ach-exc-neu-prac.xlsx>

6. Financial Implications

- 6.1 There are no strategic financial implications. Any finance implications for subsequent projects will be submitted for Council & partnership approval .

7. Consultation with stakeholders

- 7.1 The Physical Activity Plan has been prepared by Barnsley Physical Activity Partnership involving Barnsley Council, Barnsley Premier Leisure, Yorkshire Sport Foundation, Barnsley College, Schools Alliance, Barnsley CCG, Barnsley NHS Foundation Trust and community & voluntary sector organisations.

8. Appendices

- 8.1 Appendix 1 – Active in Barnsley: Barnsley Physical Activity Plan 2018-21

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