

# A 20:20 VISION

FOR AN

ACTIVE  
ANGUS

DRAFT

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## 1. EXECUTIVE SUMMARY

### 1.1 Links between sport, physical activity and health and well-being

- 1.1.1 There is much documented evidence across the UK that demonstrates the benefit sport and physical activity have on health.
- 1.1.2 Living a healthy life is important and has a real benefit in terms of life expectancy, quality of life and cost to the Nation. There are still too many premature deaths as a result of unhealthy life styles.
- 1.1.3 Increasingly, sedentary life-style living is leading to health issues and increasing participation levels in sport and physical activity is recognised as one of the best way to improve this.
- 1.1.4 A study in The Lancet, published in 2012, highlighted how **inactivity** is responsible for **17 per cent of premature deaths in the UK** every year and shortens the lifespan by three to five years.
- 1.1.5 The January 2014 report 'Turning the Tide of Inactivity' published by UK-Active stated that 'We can reveal that in some parts of the UK more than 40 per cent of the adult population is classed as inactive'<sup>1</sup>
- 1.1.6 The 'Costing the burden of ill health related to physical inactivity for Scotland' report (2012) details the methodology used to estimate the primary and secondary care costs attributable to physical inactivity for Scotland. With the projected population at 115,300 in **2035, the annual cost in Angus will be over £2m.**
- 1.1.7 Due to the importance of Sport and Physical Activity on health and well-being, Angus Council has developed this Active Angus 20:20 Strategy.
- 1.1.8 The Strategy has been developed with a number of key partners including NHS Tayside, Angus Community Health Care Partnership and **sportscotland** and is set within the local and national context of Sport and Physical Activity. The Strategy provides both recommendations in respect to our indoor and outdoor leisure facilities as well as increasing participation in sport and physical activity for all people in Angus.
- 1.1.9 The Strategy is aligned to the Council's Single Outcome Agreement with the outcomes influencing current and future SOA priorities.

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<sup>1</sup> Chief Medical Officer defines inactivity as 'participation in less than 30 minutes of moderate intensity physical activity per week'.

#### 1.1.10 Outcomes - linked to Angus Single Outcome agreement

- **Local outcome 3** - Our children and young people are confident individuals, effective contributors, successful learners and responsible citizens
- **Local Outcome 7:** Our communities are safe, secure and vibrant -
- **Local Outcome 8** - We have improved the health and wellbeing of our people and inequalities are reduced
- **Local Outcome 11:** Our natural and built environment is protected and enjoyed
- **Local Outcome 12:** Our carbon footprint is reduced

1.1.11 The Strategy takes into account of the future changing profile of Angus and recognises that over the next 25 years the older people's sector (65 – 75 years old) is projected to increase by 25%, and that the over 75 years olds increase by 89%, with the working and under 16 population reducing by 3% and 1% respectively.

1.1.12 In terms of health indicators; around 40% of deaths in Angus are due to circulatory and respiratory diseases. Angus has a rising and higher than national prevalence of obesity in adults. Obesity as measure for Primary 1 children is 3.6, slightly higher than the national average.

1.1.13 In terms of participation the Scottish Health Survey 2013 found that;

- In 2012, 70% of children aged 2-15 were active for at least 60 minutes a day (*including* school-based activity).
- 62% of adults (aged 16 and over) were active at the recommended level (150 minutes of moderate activity or 75 minutes of vigorous activity per week). However there has been no change in the proportion of adults meeting the moderate/vigorous physical activity (MVPA) guideline since 2008.

1.1.14 The targets within the Strategy are aligned to national targets and the key targets are;

- **70% of adults & 80% of children reach recommended levels of physical activity by 2020**
- **Reduction in the levels of adult 'inactivity' in Angus**
- **Reduction in the rate of children with BMI out with the healthy range by 2020**

1.1.15 Our **Vision** for Active Angus 20:20 is;

**More People, More Active, More Often**

1.1.16 Our **Mission** for Active Angus 20:20 is that:

**Angus residents are made aware of the dangers of inactivity. They are inspired to participate and be active with access to a range of facilities & opportunities.**

1.1.17 Our **Key Focus** is to reduce inactivity and increase activity.

**More People -** Focus on those who are inactive to become active.  
**More Active -** Those who are active, achieve recommended intensity of activity.  
**More Often -** Those who are active, achieve recommended frequency of activity.

1.1.18 To deliver our Vision, Mission and Key Focus areas a number of Strategic Priorities have been developed together with Key Actions, Outcomes and Targets.

1.1.19 Our Strategic Priorities are;

- 1. Provide first class sporting & leisure facilities which are accessible for all**
- 2. Maximize opportunities in Angus' natural heritage and open space to facilitate outdoor sport & physical activity**
- 3. Create clear sport & physical activity pathways**
- 4. Inspire children & young people**
- 5. Provide intervention for targeted groups**
- 6. Work in partnership with people & organisations who share our vision and goals**

1.1.20 The delivery and review of the Strategy is to be monitored by the Active Angus Project Board.

Purpose

- to communicate aims of the strategy to the wider network
- Complete a mapping exercise to understand who delivers what programme and activities aimed at who.
- Influence delivery work of partners to work towards the objective of the 20:20 Vision and Strategy
- Sign off annual work programmes
- Share information
- Joint Marketing
- Measurement of key outcomes
- Annual review

Active Angus 20:20 Project Board			
Active Angus 20:20 Network			
<b>Angus Council</b> <ul style="list-style-type: none"><li>•Communities</li><li>•People</li><li>•Resources</li></ul>	<b>Voluntary &amp; Private Sector</b> <ul style="list-style-type: none"><li>•Clubs</li><li>•LTC group</li><li>•Community Groups</li><li>•Commercial leisure</li></ul>	<b>sportscotland</b> <ul style="list-style-type: none"><li>•Regional Sports Partnership</li><li>•Facilities Planning</li><li>•Funding</li></ul>	<b>Health</b> <ul style="list-style-type: none"><li>•PCT's</li><li>•GP's</li></ul>

#### 1.1.21 Action Plans

1.1.22 An Action Plan will be developed for each of our **Strategic Priorities**, each plan will provide annual Actions; will detail who is responsible for delivery, the level of projected outputs and outcomes will also be provided.

1.1.23 It is anticipated that in many cases base line data may not be available, therefore in year 1, measuring methodologies will be agreed and base line data collected for future benchmarks.

1.1.24 Existing consultation methods will be utilised where possible.

#### 1.1.25 Measuring Success

1.1.26 Each Action Plan will be reviewed on a quarterly basis and fully assessed annually.

1.1.27 The officer responsible for each action plan will report back to the Project Board on a quarterly basis.

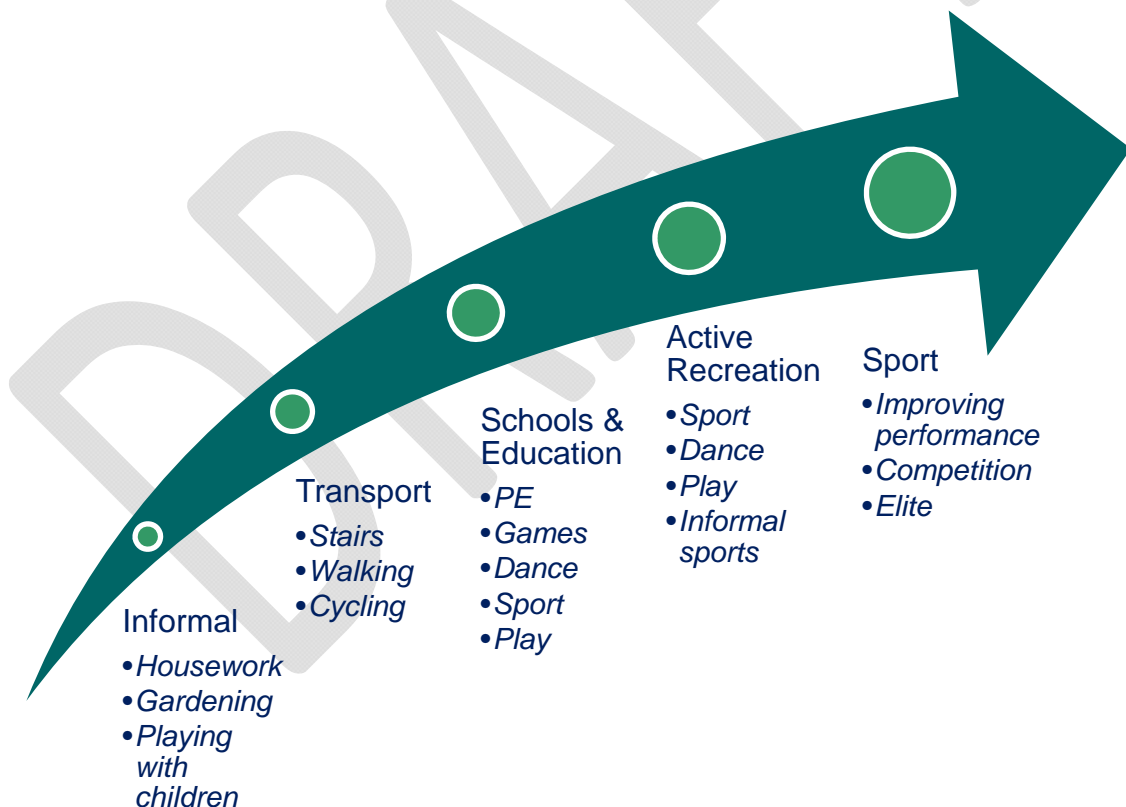
## 2. INTRODUCTION

2.1 This section sets out our definition of Sport, Physical Activity and Play, asks why we have a Strategy, determines the scope and structure of the Strategy and who we involved and consulted with to develop the Strategy.

### 2.2 What is Sport, Physical Activity and Play?

2.2.1 Our definition of sport, physical activity and play includes all forms of activity, such as walking and cycling for everyday journeys, active play, school PE, work-related activity, active recreation such as working out in a gym, dancing, gardening or competitive sport.

2.2.2 The diagram below shows the different types and examples of sport and physical activity from informal physical activity to performance sport.



2.2.3 It is recognised that the people of Angus will access sport and physical activity in a variety of ways as detailed above and that there are different recommended amounts of participation levels during each life stage.





### 2.3 Play

2.3.1 Play may mean different things to different people; parents, carers, volunteers and other service providers such as local authority staff.

A definition of play:-

***“Play is freely chosen, personally directed, intrinsically motivated behaviour that actively engages the child. Play can be fun or serious. Through play children explore social, material and imaginary worlds and their relationships with them, elaborating all the while a flexible range of responses to the challenges they encounter. By playing, children learn and develop as individuals, and as members of the community.”***

*(Play Scotland, 2008)*

2.3.2 It is widely acknowledged that play is essential to every area of children's development and to their health, well-being and happiness. Play brings about important benefits to children as individuals and as a group but also to families, communities and society as a whole.

### 2.4 Why have an Active Angus 20:20 Strategy?

2.4.1 The Active Angus 20:20 Strategy is seen as a pivotal strategy document for Angus Council to link our built facility needs assessment, our playing pitch strategy, our play strategy to drive forward increased physical activity participation across the Council. Specifically the Strategy;

- Provides an evidence base to demonstrate the need for Angus Council, in conjunction with other partners, to provide sport and physical activity opportunities that will contribute to the health and well-being of the residents of Angus.

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- Provides a demand and supply analysis for indoor and outdoor built sport facilities to demonstrate the local standards of required provision and thus direct resources to meet local needs to 2020 and beyond.
- Ensures the legacies from the Glasgow Commonwealth Games 2014 and the Ryder Cup 2014 will inspire people in Angus to get involved or more actively involved in sport and physical activity.
- Ensures that officers and stakeholders work across Angus to deliver the Priority areas highlighted in this Strategy.
- Influences the future Single Outcome Agreements (SOA) and priority areas for Angus.

### 2.5 Who has been involved?

2.5.1 The Active Angus 20:20 Steering Group has included representatives from Angus Council's Leisure, Education, Community Planning, Planning & Transport and Environmental Management sectors, NHS Tayside and the Angus Community Health Care Partnership, **sportscotland**, Dundee & Angus College and Scottish Natural Heritage.

2.5.2 Consultation involving the steering group organisations, local sports clubs, governing bodies of sport, and members of the public.

### 2.6 Scope of Active Angus 20:20

2.6.1 The scope of Active Angus 20:20 covers

#### (a) A range of indoor and outdoor facilities including

- Indoor And Outdoor Sports Facilities
- Pitches
- Country Parks, the Glens, Pathways and Cycleways
- Play Areas

and

#### (b) Service delivery areas such as

- Sports/Leisure Centres
- Sports Development
- Active Schools
- Countryside Ranger Service

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- The Voluntary sector
- The NHS/Community Health Care Partnership
- The Regional Sports Partnership

2.6.2 This Strategy will also complement the Open Space strategy also being developed by the Council.

### 2.7 How the Strategy is structured

2.7.1 Active Angus 20:20 is a wide ranging Sport, Physical Activity, Facility and Pitch Strategy that also incorporates information on Play and Open Space.

2.7.2 The strategy document endeavours to show the linkage between local policy and strategies with those at a national and regional level in relation to both inactivity and levels of physical activity and the health and well-being impacts.

2.7.3 The Strategy provides the overall Vision, Key Focus areas and Strategic Priorities.

2.7.4 These are supported by a number of Evidence Papers which helped to formulate the Strategic Priorities. These included;

- **Paper 1 - Policy and Strategy Context** – demonstrating the key linkages between physical activity and health and well-being
- **Paper 2 - Angus Context** – which sets out the demographic profile of Angus, its current physical activity levels and health and well-being indicators
- **Paper 3 - Assessment of need of Indoor and Outdoor Sports Facilities** – this provides a detailed assessment of need in respect to indoor and outdoor sports facilities. Indoor facilities include sports halls and swimming pools. Outdoor facilities include football, cricket, rugby union, hockey and artificial grass pitches. The study also includes bowling greens, tennis courts and athletics tracks. The facility, pitch, and play equipment audits assessed the adequacy of the existing provision of sports halls, swimming pools, outdoor pitches and play areas to meet long-term needs. The playing pitch Strategy has followed the methodology as set out in sportscotland's 'Guide to the Preparation of Pitch Sports Strategies'.
- **Paper 4 - Other Facility mapping** – this maps the accessibility the other facilities included within the scope; country parks, shooting grounds, indoor bowls facilities.
- **Paper 5 – Consultation** – This paper details the consultation undertaken to develop the strategy.

### 3. ANGUS CONTEXT

(Please also refer to further detail in evidence paper 2)

#### 3.1 Demographics, health and wellbeing, and sports participation

#### 3.2 Demographics

3.2.1 Between the 2001 and the 2011 Census Angus's population increased from 108,400 to 115,978. This 7.0% increase resulted largely from an increase in the 65+ population (+17.8%) followed by an increase in working age population (+6%). Furthermore, it also indicates a 0.5% decrease in child population as a whole and a 4.5% increase in under 5s in the same time period.

3.2.2 In addition, based on Mid-2010 Population Estimates, it was projected that in 2035, the Angus population will reach 115,299<sup>2</sup>, which would be an increase of ~4.3% (4.27%). However, according to the 2011 Census, this predicted population increase was already exceeded as at 2011.

3.2.3 Figure 1 below shows a comparative percentage population change across, Angus, Tayside and Scotland, based on the 2010 population. It was also projected that the total population change in Angus will be continuously lower than in Tayside and Scotland.

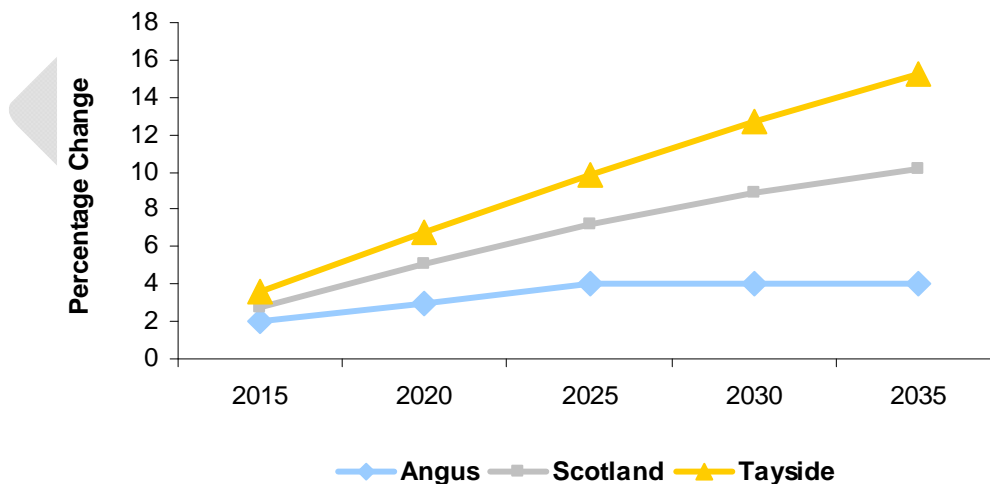


Figure 1:

Source: General Register Office of Scotland (GROS); Mid-2010 Population Estimates-based

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3.2.4 Age Structure - According to the 2011 *Census*, 27.4% of Angus population were aged 60 and over, which was higher than in Tayside (25.6%) and Scotland (23.2%).

3.2.5 Figure 2 below shows the structure of the population by broad age range comparison (Percentage) across Angus, Tayside and Scotland.

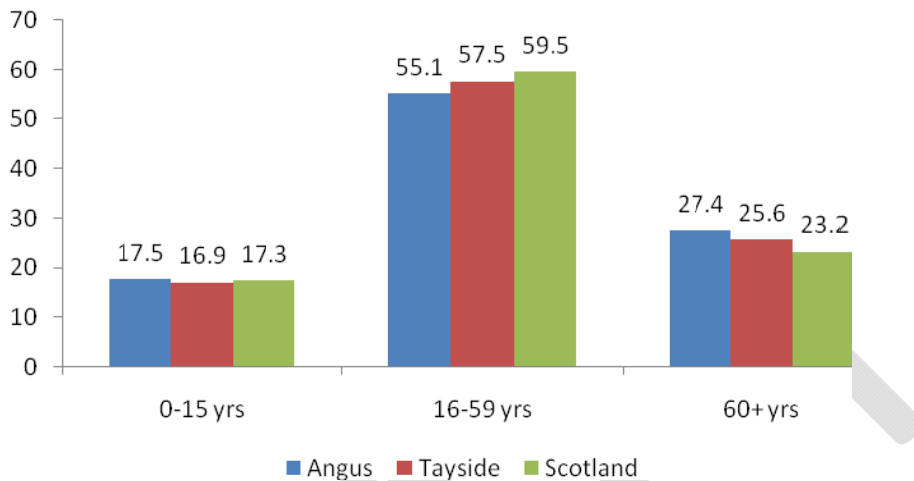


Figure 2 (Source: Census 2011)

3.2.6 In 2011, 31,797 of Angus's residents were aged 60 and over.

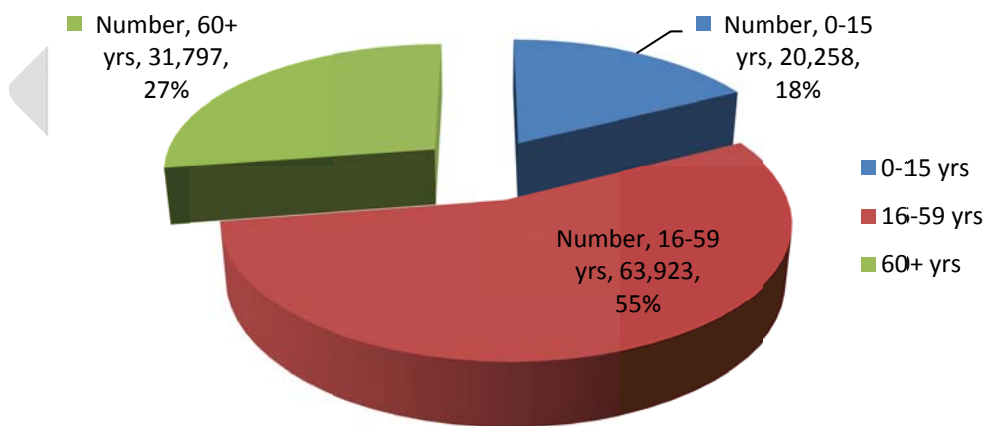


Figure 3 (Source: Census 2011)

3.2.7 Figure 3 below shows the Angus population structure by age (Number). 2011. There is an upward trend in the age distribution from 0 to 59 years, which is followed by a downward trend in the 60+ age groups. The highest proportion of people is found in the 45-59 age group (21.7%) followed by 30-

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44 (18.3%) and 60-74 (18.1%) age groups. There are a considerably high proportion of older people aged 75+ (9.3%).

3.2.8 Figure 4 below shows the structure of the Angus population in 2011 by age.

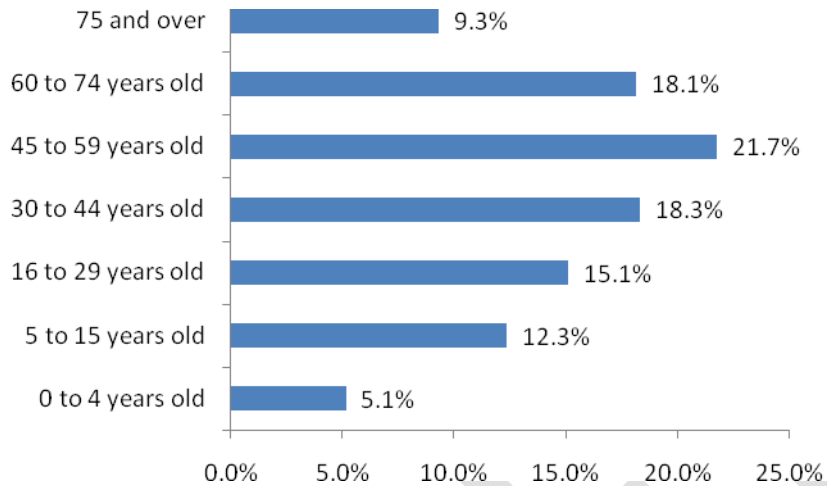


Figure 4 (Source: Census 2011)

3.2.9 According to the 2011 *Census*, Angus has a greater proportion of older people aged 60-74 (18.1%) and 75+ (9.3%) than Tayside (16.6% and 9% respectively) and Scotland (15.5% and 7.7% respectively).

### 3.3 Population Projections

3.3.1 Based on *Mid-2010 Population Estimates*, a major increase was projected for the next 25 years in the older people's sector of the population (25% change) with the 75+ age group expected to increase in size most (89% change). By comparison, the working age population was projected to decrease by 3% and the under 16 population by 1% over the same period.

3.3.2 The increase in the 75+ population in Angus (89%) was expected to be even greater than in Tayside (73%) and Scotland (82%). In addition, Angus was expected to be the only one of the compared areas with a negative percentage change in the working age population and child population.

3.3.3 Figure 5 below shows the projected percentage population change, by broad age group in Angus, Tayside and Scotland, by 2035.

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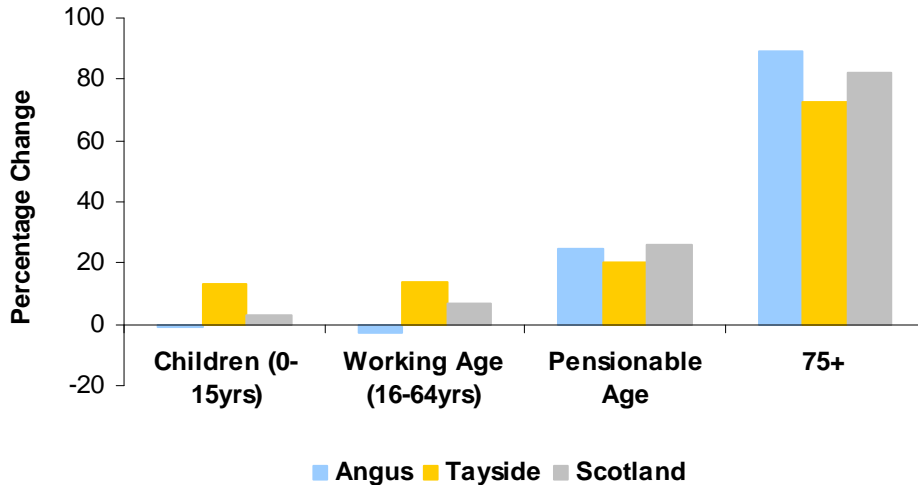


Figure 5 (Source: GROS, 2010)

3.3.4 Table 1 below indicates the projected % population change by broad age group in Angus 2010 – 2035.

Table 1

Broad age group	Projected % change				
	2015	2020	2025	2030	2035
Children (0-15yrs)	-1	0	0	0	-1
Working Ag (16-64yrs)	1	2	1	-1	-3
Pensionable Age*	4	6	12	21	25
75+	13	29	55	72	89
All ages	2	3	4	4	4

Source: GROS, 2010 - based population projections for Scottish areas

\*Pensionable age is 65 for men, 60 for women until 2010; between 2010 and 2020 pensionable age for women increases to 65. Between 2024 and 2046, state pension age will increase from 65 years to 68 years for both sexes.

3.3.5 **The Active Angus 20:20 Strategy will take into account the changing demographic profile within Angus.**



### 3.4 Health Indicators

#### 3.4.1 Life Expectancy

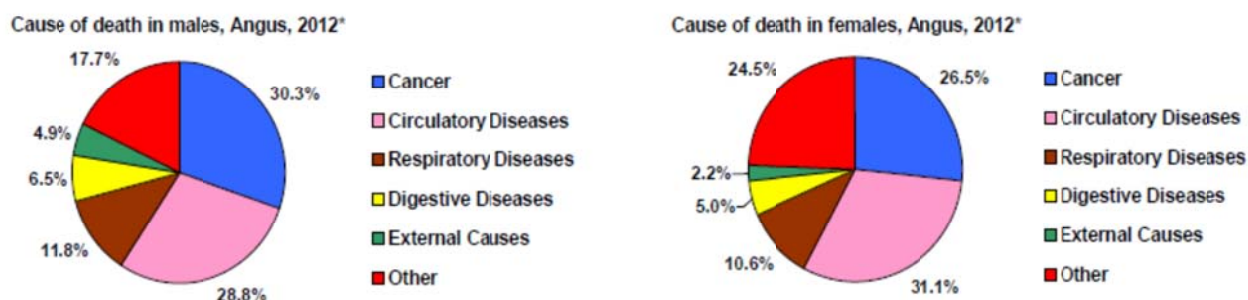
3.4.1.1 According to General Register Office for Scotland (GROS), Angus' females have higher life expectancy (LE) than Angus' males. Whilst Angus's female LE is comparable to LE among Scotland's females, Angus's male LE is considerably higher than LE among Scotland's male population.

3.4.1.2 Gender inequality gap in LE in Angus equals 2.7 years and is the lowest of all compared areas (Dundee: 5.3 years; Scotland: 4.6 years; Perth and Kinross: 3.2 years).

#### 3.4.2 Related Mortality Incidence Rates

3.4.2.1 The causes of death in Angus for predominantly Cancer, Circulatory and Respiratory diseases. See Table 2 below.

Table 2



\* Due to rounding these figures may differ slightly from those published in Vital Events Reference Tables. See 'Data sources' for link to this data.

#### 3.4.3 Prevalence of Obesity

3.4.3.1 Being overweight or obese can be defined as having abnormal or excessive fat accumulation in the body that may impair health.

3.4.3.2 Body Mass Index (BMI) is a simple index of weight-for-height that is commonly used to classify overweight and obesity in adults. It is defined as a person's weight in kilograms divided by the square of his height in meters (kg/m<sup>2</sup>).



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3.4.3.3 The World Health Organisation (WHO) definitions are:

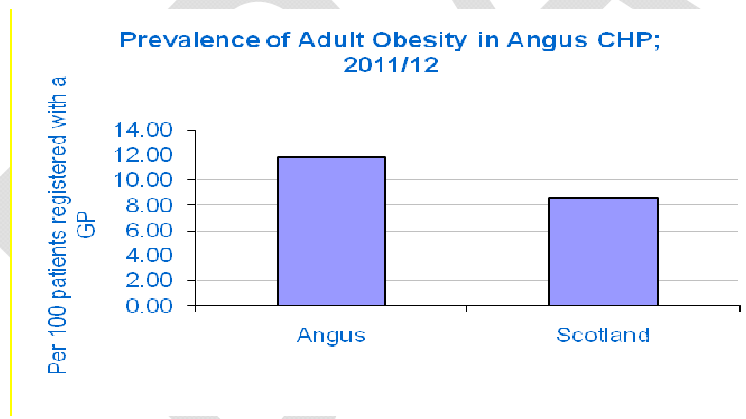
- a BMI greater than or equal to 25 is classed as being overweight
- a BMI greater than or equal to 30 is classed as being obese.

3.4.3.4 'Preventing Obesity and Overweight in Scotland', published by the Scottish Government in 2010, identified that Scotland had an obesity level only exceeded by USA and Mexico. The Scottish Government attached great importance to long term plans to improve the position and reduce the number of adults who were obese (26.8%) (65.1% were overweight) and the number of obese children (15.11%) (31.7 % overweight and rising rapidly).

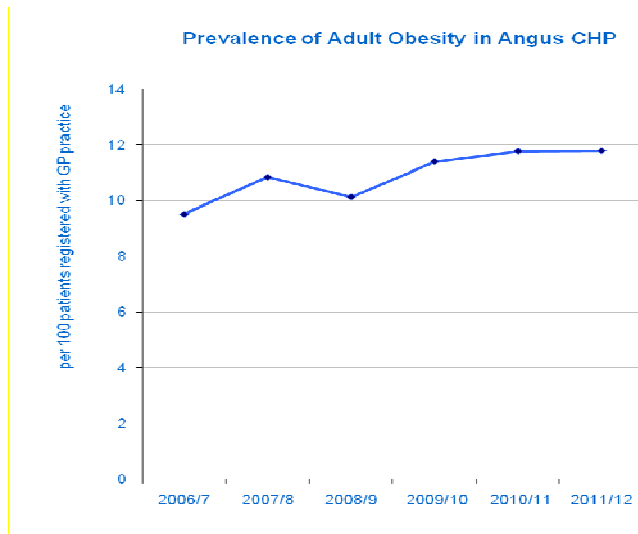
3.4.3.5 The prevalence of Obesity in Angus is higher than the National Average measured per 100 patients registered with general practices in the County (see Table 3). It has been increasing in the last 6 years, being 9.52 in 2006/07 and 11.8 in 2011/12 (see Table 4).

3.4.3.6 The Adult population (16-64 years) in Angus equates to 68,421 (GRO 2012 mid-year population estimates). 61.9% of adults (42,353) are either overweight or obese (BMI>25) and 26.1% (17,858) are obese (BMI>30)

Table 3

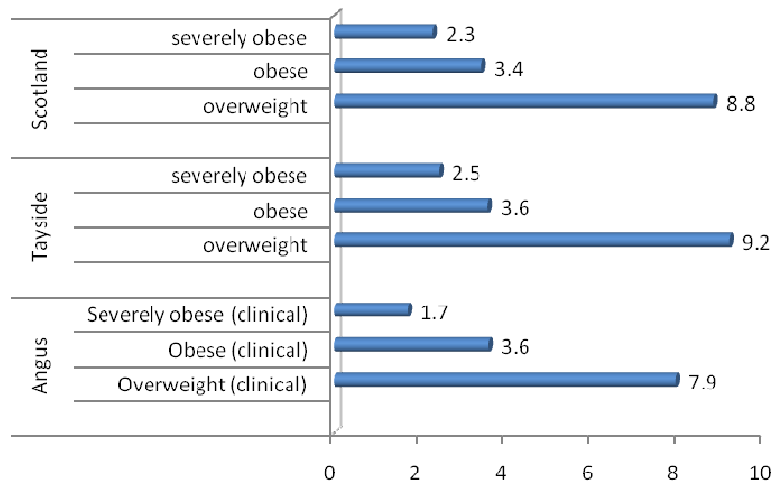


**Table 4**



3.4.3.7 Recent comparative information based on 2012/13 figures indicate that the percentage of school age children in Primary 1 (P1) in Angus when compared to the national average shows that those in Angus in the severely obese and overweight categories are below the national average. Those in the obese category are slightly above the national average. See Table 5 below BMI distribution (%) in P1 children, Angus and other areas comparison, 2012/13

**Table 5**



### 3.4.4 Long term conditions

3.4.4.1 Long term conditions are health conditions that last a year or longer, impact on a person's life, and may require ongoing care and support. The definition does not relate to any one condition, care-group or age category. Around two million people, 40 per cent of the Scottish population, have at least one long term condition and one in four adults over 16 report some form of long term illness, health problem or disability.

3.4.4.2 Long term conditions become more prevalent with age. According to Audit Scotland, the number of people aged 75 and over will rise by 60 per cent between 2004 and 2031. By the age of 65, nearly two-thirds of people will have developed a long term condition.

3.4.4.3 Older people are also more likely to have more than one long term condition: 27 per cent of people aged 75-84 have two or more. There is a predicted rise of 38 per cent in the number of people who will be over 85 in the population by 2016, and a 144 per cent rise in the over 85s by 2031.

3.4.4.4 The human costs and the economic burden for health and social care are profound. 60 per cent of all deaths are attributable to long term conditions and they account for 80 per cent of all GP consultations.

**3.4.5 The 20:20 Vision recognises that sport and physical activity can make a major, positive contribution to reducing obesity levels and other long term health issues in the Angus area.**

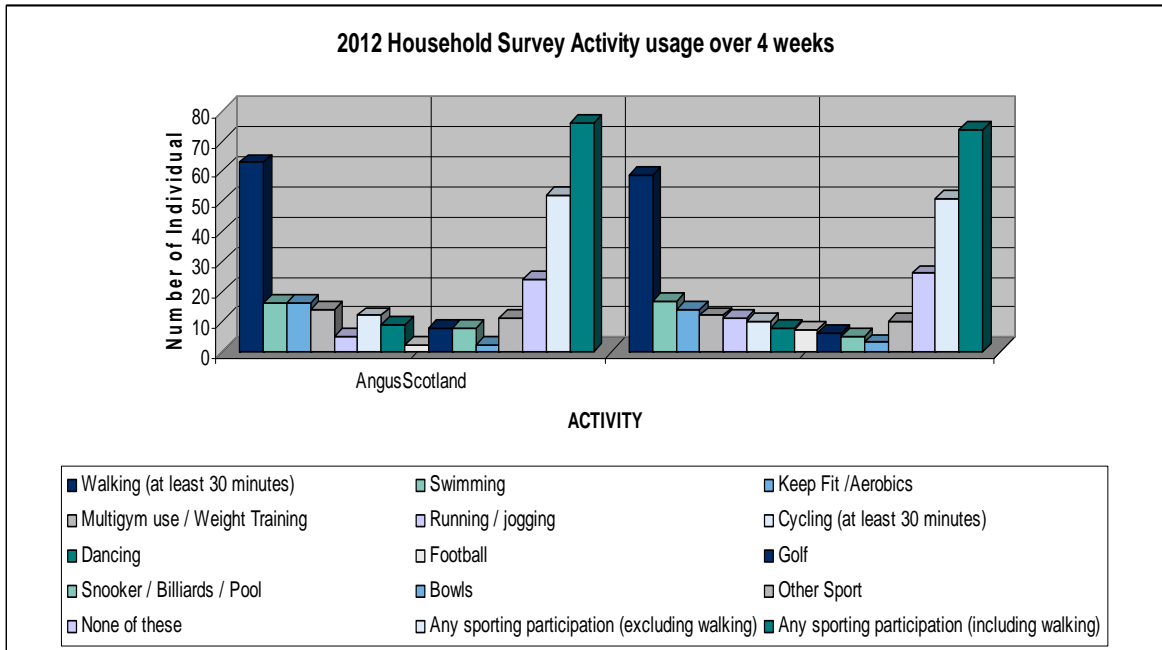
### 3.5 Sport, Physical Activity and Participation Levels

3.5.1 In 2012, 62% of adults aged 16 and over met the current moderate/vigorous physical activity (MVPA) guideline. Men were more likely to meet the MVPA guideline than women (67% compared to 58%). There has been no significant change since 2008 in the proportion of adults meeting the latest MVPA guideline, nor the guidelines in place until 2011. Between 1998 and 2008, the proportion of adults aged 16-74 meeting the (then-applicable) guideline increased by 6% Extract - Health of Scotland's Population

3.5.2 In 2012, 70% of children (73% of boys and 68% of girls) met the physical activity recommendations (including school-based activity). This difference between the genders was statistically significant. Prior to 2008, data were only collected excluding school-based activity. Using this measure, the proportion of children meeting the recommendations has been broadly similar in the 2008-2012 period (62-65%) to the results for 1998 (65%). Extract - Health of Scotland's Population

3.6 Angus

3.6.1 Table 6 below highlights information extracted from the Scottish Household Survey, 2012.



3.6.2 This identifies that swimming / fitness and dance are popular indoor activities that people undertake and outdoor activities are walking, running and cycling.

3.6.3 Formal sports such as football, golf, etc. have lower participation rates, due to equipment that is needed (sometimes quite expensive), level of skill required and the organisation of teams into leagues and the number of matches required to take place.

3.6.4 A **Sportscotland** factsheet (October 2013) profiling adult participation by sport, geographic area and population group ascertained that :-

- Weekly and monthly participation rates for adults in Angus were **33%** and **48%** respectively (Scottish average 33% and 46%);
- Where figures include walking 2+ miles, participation rates were **49%** for weekly and **63%** for monthly participation (Scottish average 46% and 59%).
- **The impact of gender** on participation, whilst less significant than some other factors, was such that monthly participation for women was 42% compared to 54% for men (Scotland wide 40% and 54% respectively).

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- **Age specific data** shows the following monthly participation rates:
  - 65% for 16-24 year olds (Scottish average - 68%).
  - 64% for 25-34 year olds (Scottish average - 59%).
  - 48% for 35-54 year olds (Scottish average 49%).
  - 33% for 55+ year olds (Scottish average 28%)
- **The social class dimension** was underlined by the fact that monthly AB (Upper middle class – higher managerial, administrative or professional) participation in Angus (54%) was one and a half times the equivalent rate for the DE (Working class – semi and unskilled manual workers) group (35%).
- **Limiting long-term illness and/or disability (LLTI)** impacts on participation to the extent that the monthly rate for adults without an LLTI in Angus was 54% compared to 29% for those with a limiting long-term illness and/or disability. The equivalent figures for Scotland were 53% and 25% respectively.
- **Club membership (participants only)** – in Angus 39% of participants were members of a sports club for at least one of their sports, compared to the national figure of 40%.
- **Volunteer activity** - in Angus, the volunteering rate for sports related voluntary work (16%) was similar to that for the country as a whole (14%).

sportscotland Factsheet Angus 2013

3.6.5 **The delivery of the Active Angus 20:20 Strategy will help people to become more aware of the need to have an active lifestyle thereby increasing participation levels within the Angus population. It will be necessary to implement methods to measure participation**

## 4. POLICY

### 4.1 National, Regional and Local Dimensions

### 4.2 Links between sport, physical activity and health and well-being

4.2.1 There is much documented evidence across the UK that demonstrates the benefit sport and physical activity have on health.

4.2.2 Living a healthy life is important and has a real benefit in terms of life expectancy, quality of life and cost to the Nation. There are still too many premature deaths as a result of unhealthy life styles.

4.2.3 Increasingly, sedentary life-style living is leading to health issues and increasing participation levels in sport and physical activity is recognised as one of the best way to improve this.

4.2.4 A study in The Lancet, published in 2012, highlighted how **inactivity** is responsible for **17 per cent of premature deaths in the UK** every year and shortens the lifespan by three to five years.

4.2.5 The January 2014 report 'Turning the Tide of Inactivity' published by UK-Active stated that 'We can reveal that in some parts of the UK more than 40 per cent of the adult population is classed as inactive<sup>3</sup>'

4.2.6 Their overall findings concluded;

- 'There is a disproportionately low spend on programmes to tackle physical inactivity by local authorities compared to other top tier public health concerns.'
- 'Reducing physical inactivity by just one per cent a year over a five year period would save local authorities £1.2 billion.'
- 'The most inactive local authorities have on average a third fewer facilities than the least inactive areas.'
- 'The utilisation of green space, rather than its volume, is the determining factor in reducing levels of physical inactivity. '

4.2.7 The 'Costing the burden of ill health related to physical inactivity for Scotland' report (2012) details the methodology used to estimate the primary and secondary care costs attributable to physical inactivity for Scotland. The

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<sup>3</sup> Chief Medical Officer defines inactivity as 'participation in less than 30 minutes of moderate intensity physical activity per week'.

results show a range of estimated primary and secondary care costs for five disease areas associated with physical inactivity. Results at a national level were calculated at £91.8 - £96.4m (2010-2011). This equates to a mean cost of £18 per Scottish resident per year. With the projected population at 115,300 in **2035, the annual cost in Angus will be over £2m.**

### 4.3 National

4.3.1 There are two key strategy documents at a national level that have framed policy activity for a number of years:

- Sports Strategy - “Reaching Higher: building on the success of Sport21” (Scottish Executive, 2007)
- Physical Activity Strategy - “Let’s Make Scotland More Active: a strategy for physical activity” (Scottish Executive, 2003) and its update a Five Year Review published in February 2009.

### 4.3.2 Reaching Higher

4.3.2.1 Reaching Higher (Scottish Executive, 2007) sets out the aims and objectives for sport in Scotland until 2020, including plans for its delivery and evaluation. Reaching Higher maintains the overarching objective set out in Sport 21 of increasing adult participation in sport, while also setting out two outcomes of (1) increasing participation and (2) improving performance.

4.3.2.2 Reaching Higher focuses on the promotion, delivery, playing and enjoyment of sport. The key to this is developing a culture where sport is valued for the pleasure and quality it brings to people’s lives and for the pride and recognition it brings to our nation. This means:

- everyone having access to affordable, high quality community sport facilities and advice and guidance;
- children enjoying sport in and out of school and staying involved throughout their lives;
- individuals being able to move from sport to sport according to their changing lives, ability and capacity; talent being recognised early and developed to its full potential;
- a world-wide reputation as a successful sporting nation; and
- a world class reputation for hosting a range of sporting events

4.3.2.3 Whilst the focus is primarily on sport, it is recognised that sport contributes to a significant number of wider benefits such as the prevention of several chronic diseases, including: cardiovascular disease, diabetes, cancer, hypertension, obesity, depression and osteoporosis. Studies also show that



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sport has a positive influence on mental health. Physical self-worth and physical self-perception, including body image, has been linked to improved self-esteem.

4.3.2.4 Two key outcomes need to be achieved:

- **Increasing participation**
- **Improving performance**

4.3.2.5 This will result in a **2020 challenge** of 60% of Scotland's adult population participating in sport at least once a week.

4.3.2.6 The approach of the strategy also determines that:

- Quality Facilities
- Strong Organisations
- Well trained People

4.3.2.7 This will lead to increasing participation and then good pathways will lead to improved performance.

### 4.3.3 Let's Make Scotland More Active (LMSMA) 2003

4.3.3.1 LMSMA set out a twenty year strategy: "To increase and maintain the proportion of physically active people in Scotland". The targets, monitored through the Scottish Health Survey, are:

**"50% of all adults aged over 16 and 80% of all children aged 16 and under are meeting the minimum recommended levels of physical activity by 2022."**

4.3.3.2 The minimum recommended levels of physical activity set out in this strategy, and which have been re-stated in Scottish Government policy since then are that:

- **Adults** (aged over 16) should *accumulate* (build up) at least 30 minutes of moderate activity most days of the week (i.e. a minimum of 5 days a week),
- **Children** (16 and under) should *accumulate* (build up) at least one hour of moderate activity daily

4.3.3.3 A five year review of LMSMA was published in 2009.

- It indicated that there is still the need to meet the needs of older people, woman of all ages, particularly girls, in raising levels of physical activity.



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- A larger percentage of the male population was more active than females.
- More concentration should be given to those groups within society that were inactive or needed
- to be more active

4.3.3.4 There is now a Scottish Government National Indicator in the National Performance Framework to “increase the proportion of adults completing 30 minutes of at least moderate exercise five days a week”.

4.3.3.5 Since the introduction of this indicator in the baseline year (2008), there has been no rise in the proportion of adults meeting this physical activity recommendation – the figure was 39 per cent in both 2008 and 2010.

4.3.3.6 A significantly higher proportion of men than women meet the physical activity recommendations. Physical activity is highly associated with age and deprivation, with activity levels declining as age and deprivation increase.

4.3.4 A more recent report, **The START ACTIVE – STAY ACTIVE (July 2011), is a physical activity for health report from the four home countries’ Chief Medical Officers.**

4.3.4.1 The report provides evidence that regular physical activity can reduce the risk of many chronic conditions including coronary heart disease, stroke, type 2 diabetes, cancer, obesity, mental health problems and musculoskeletal conditions. Even relatively small increases in physical activity are associated with some protection against chronic diseases and an improved quality of life.

4.3.4.2 These benefits can deliver cost savings for health and social care services. However, the benefits of physical activity extend further to improved productivity in the workplace, reduced congestion and pollution through active travel, and healthy development of children and young people.

4.3.4.3 This report emphasises for the first time the importance of physical activity for people of all ages. In addition, the report also highlights the risks of sedentary behaviour for all age groups.

### 4.3.5 Scottish Health Survey 2013

4.3.5.1 The key findings of the Scottish Health Survey 2013 in relation to physical activity included;

- In 2012, 70% of children aged 2-15 were active for at least 60 minutes a day (*including* school-based activity).

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- The proportion of children meeting the physical activity guideline has not changed significantly since 2008 (71%).
- Boys were significantly more likely than girls to meet the physical activity guideline in 2012. (73% compared with 68%).
- In 2012, 62% of adults (aged 16 and over) were active at the recommended level (150 minutes of moderate activity or 75 minutes of vigorous activity per week). However there has been no change in the proportion of adults meeting the moderate/vigorous physical activity (MVPA) guideline since 2008.
- Men were more likely than women to meet the MVPA guideline (67% versus 58%).
- The proportion of men who were active at the recommended level declined fairly steadily from 83% at age 16-24 to 56% for those aged 65-74, and then to 31%, at age 75 and over. For women, 64%-68% of those aged 16-54 were active at the recommended level. Adherence dropped to 52%-53% at age 55-74 and then halved to 21% among those aged 75 and over.
- In 2012, just over half (55%) of adults had participated in sport in the previous month (60% of men and 50% of women). There was a fairly linear decline in sports participation with age, from 81% of men and 77% of women aged 16-24, to 30% of men and 19% of women aged 75 and over.
- The four most popular sporting activities in 2012 were working out at a gym (15%), swimming (14%), exercises (13%) and running (12%).
- Sports participation tended to peak at age 16-34 and decline thereafter. This was particularly the case with the more vigorous activities such as football/rugby and running. Golf, hill-walking and bowls participation levels remained broadly steady – or increased – as age increased.
- Reported sedentary leisure time was broadly similar for men and women (5.5 and 5.4 weekday mean hours, respectively, and 6.1 and 5.9 weekend day mean hours).

### 4.3.6 Commonwealth Games

4.3.6.1 In addition, the focus of sport in Scotland was centred on the Glasgow 2014 Commonwealth Games and more recently, the Ryder Cup. With the former in particular, there was a need to ensure that the Games left a legacy for the people of Scotland. From an Angus perspective this was and is considered to be very important given that the county hosted one of the sports (Shooting at Barry Buddon, Carnoustie)

4.3.6.2 In terms of a legacy framework Angus will;

- Develop new sports facilities and activity areas that will enhance the opportunity for people to participate in sport and physical activity on a long term basis.
- Promote greater use of the outdoors encouraging a wide range of activities that encourage people to be active on a regular basis.
- Continue to support athletes through the provision of appropriate player pathways and the council's national athlete support programme.
- Continue to support coaches and volunteers through the provision of coach education and coach support programmes.
- Promote and develop links between local sports club, community groups and schools through the creation of Community Sport Hubs and the work undertaken by the Active Schools programme.
- Ensure that equality of opportunity is central to the services delivered to Angus residents.
- Ensure excellent service delivery by investing in time and other resources toward the continued professional development of staff.
- Assist in the desire to provide the local community and visitors to the county with world-class customer service and facilities.

### 4.4 Regional

#### 4.4.1 NHS Tayside – Health Equity Strategy 2010 - Communities in Control

4.4.2 The main commitments are to make:-

- **“Contributing to achieving health equity within a generation”** the most important aim, integrating the ideas in the strategy to all aspects of health service related work done at a local level through the Angus Community Care and Health Partnership
- **Support behaviour change more effectively** - Develop and agree measures of progress with our communities and partners including:

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- progress on integrated measures of improved mental health and well-being, less long term ill health and less early death
- social capital and childhood development
- replacing targets that seek average improvements with targets on closing the inequalities gap
- improving our evaluation capacity

4.4.3 The strategy's approach is to change culture and as well as 'exhorting people to exercise' ensuring their environments are safe and pleasant.

4.4.4 The strategy recognises that they have to ensure efforts are truly joined up and thought through, without thinking for people. During consultation it was striking that people could describe the solutions more clearly than many policies. Young people for instance described that they need places to enjoy sports and activities together. Where they do not, and where they lack social support to make better choices, they hang about street corners which scares people, they turn to drugs, alcohol and smoking for lack of anything else to do, leave school with no ambitions and are more likely to become teenage parents as a result. In this context helping young people get what they need, whether it is a pool table or a father figure, is a bigger priority than more traditional approaches to public health.

4.4.5 **The Active Angus 20:20 Strategy recognises that there is a key benefit to a joined up approach to delivering sporting and physical activities for those who are likely to suffer from health inequalities.**

### 4.5 LOCAL

#### 4.5.1 Angus Strategic Priorities

#### 4.5.2 Angus Community Plan and Single Outcome Agreement 2013-16

4.5.2.1 Physical Activity is a national priority and this is recognised within the above plan. It is a key component and will play an important part at a local level within all Angus communities. It links in to all the key priorities and values (see section 3.2). It is acknowledged that involving children, young people and adults in physical activity on a regular basis can help improve health and well-being and economic activity. It can also make a major contribution to reducing crime and anti-social behaviour.

4.5.2.2 The current key areas from the SOA that the Angus 20:20 vision can influence are detailed below.

### **Communities that are learning and supportive**

One of the three areas where Angus is failing to meet local targets and which will be prioritised: **childhood obesity which has been increasing over the past few years**

#### **Getting it Right by Improving Health**

- Improve the physical, mental and sexual health of all **children and young people**
- Maintain (or improve on) the proportion of P1 children with a BMI within a healthy range at the 2008/09 level
- Increase the % of P6/7 children achieving 1 hour physical activity per day to 95% (or more) by 2014
- Maintain (or improve on) the % of primary schools providing 2 hours of physical education per week at 80%

#### **Communities that are caring and healthy**

- We have improved the health and wellbeing of our people and inequalities are reduced.

#### **Improved Health and Well-Being**

Male and female life expectancy in Angus is above the Scottish average and mortality rates (under 75s) from heart disease and cancer are significantly better than the Scottish average. However, it is estimated that **24% of the population have long-term conditions such as coronary heart disease, chronic obstructive pulmonary disease, asthma etc.**

The pensionable age population in Angus is expected to see a rise of 31.4% by 2033, most notably in the over 75 age group,

On a partnership basis, involving as many partner groups as possible, there is a need to promote and develop a wide range of programmes that cater for people with long term conditions and are based on encouraging them to be active in their day to day living.

#### 4.5.3 Angus Corporate Plan 2011-2015

4.5.3.1 This aims to create a Vision For Angus where a first class quality of life can be enjoyed by all.

4.5.4 **The Active Angus 20:20 Strategy demonstrates its alignment to the Angus Corporate plan.**

4.5.5 The National Targets linked to sport and physical activity are:

##### **National Physical Activity Strategy**

- 50% of adults & 80% of children reach recommended levels **of physical activity by 2022**
- In 2008 39% adults and 65% children reached recommended levels of physical activity
- The target led to the 1% increase per year target
- Priorities are girls, women, older adults, areas of deprivation

##### **sportscotland**

- 60% of adults take part in Sport at least 1 x week by 2020

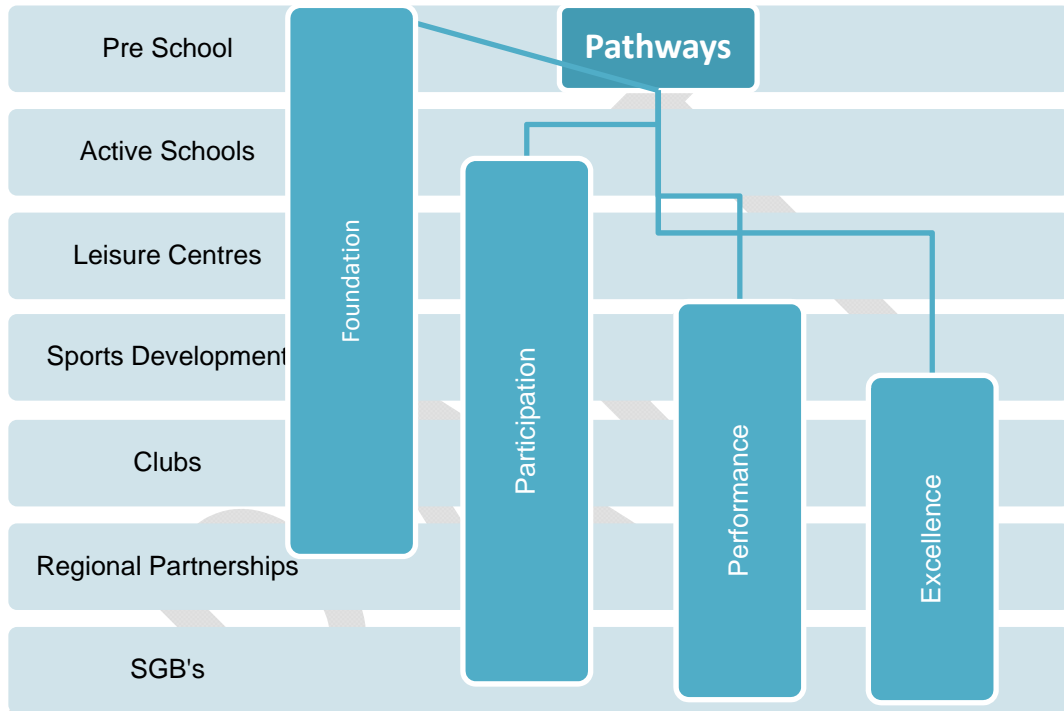
##### **Obesity**

Reduce the rate of increase in the proportion of children with BMI out with the healthy range by 2018

**5. Supporting Sporting Pathways**

5.1 Co-ordinated pathways exist for individuals to develop their interests and abilities. These range from catering for those who wish to participate at a recreational level to those who eventually want to compete at a very high level nationally and internationally. It is about creating pathways and setting up structures that enable sports performers to get started, keep going, get better and be the best! Table 6 below indicates how this works.

Table 6



**5.2 The importance of early years and Play**

5.2.1 Being active, whether it is being involved in sport or some other activity that entails expending energy, can range from minimal exercise to the other extreme whereby enormous demands can be put on one's body. Types of activity are highlighted in section 2.1 and one's involvement is dependent on personal interest. When considering a child or a young person's formative years, it is recognised that they can be influenced in a major way particularly through parental guidance and what happens at school. This can then be further developed through involvement in community based clubs and youth organisations. With regard to sport the bulk of this work is undertaken through the sports clubs/youth organisations and development programmes organised through the local authority. However, a number of programmes also involve working with colleagues in other in-house council services, other local authorities and the private sector. Further major work is carried out with



partner agencies such as governing bodies of sport, national organisations such as sportscotland, NHS Tayside and SNH.

- 5.2.2 As far as Play is concerned, it is not confined to designated play areas. It happens in numerous locations for instance in the home, the street, playgrounds, waste grounds, parks, open spaces, the front doorstep, leisure and cultural facilities and school. However, key findings suggest there is a lack of free play, unstructured play and a lack of children 'playing outside'. **There is a definite need for safe spaces for children to explore and play.**
- 5.2.3 The benefits of ensuring that children have access to play opportunities cross and link a number of local authority services and areas such as education, health, social work, leisure, social relationships, family and community and voluntary and private services.
- 5.2.4 Play experiences at home and indoors also requires attention, in particular parent and child interaction at home. Parents often do not have enough time to play with their children and some do not understand the importance of play. Therefore information and targeted support for parents is important.
- 5.2.5 Play is crucial to children's development. For children to get the maximum developmental benefits from their play, they need to play in a variety of ways and be involved in different types of play.
- 5.2.6 Play provides a fundamental developmental process for children, allowing them to expand their skills, knowledge and understanding of the world. It allows them to test their abilities, use initiative, make mistakes and take risks without fear of failure.
- 5.2.7 Play promotes increasing levels of flexibility in children, problem solving, new combinations of thoughts and ideas, adaptability and creativity. It also helps in reducing crime, anti-social behaviour and social exclusion.
- 5.2.8 Quality play provision has the potential to significantly improve social inclusion and promote social and community development. This is particularly relevant with problems such as youth crime, school-failure, teen pregnancy and drug and alcohol abuse.
- 5.2.9 There is evidence to suggest that access to play opportunities is a significant compensatory factor in alleviating the effects of disadvantage on young people's well-being. In addition, evidence indicates that good local play and sports and leisure facilities can be effectively utilised by service providers to steer 'hard to reach' young people away from crime and social exclusion.



- 5.2.10 Children, parents and families should be able to make a contribution to the development of play provision, both indoor and outdoor, including strategic decisions.
- 5.2.11 The standard for play area provision in Angus is, and has been, based in the past on the “6 Acre Standard” last published in 2001 by Fields In Trust (FIT) (formerly National Playing Fields Association). It sets standards for outdoor play and sports provision in the UK. Updated in 2008, it is now called “Planning and Design for Outdoor Sport and Play” and is widely used across the country.
- 5.2.12 However, local standards should take local needs into consideration e.g. mainly rural rather than urban areas. With this in mind, a review of the standards set for play area provision in the county was completed and implemented in 2013. For information the range of play areas were categorized as Local Areas for Play (LAPs), Local Equipped Areas for Play (LEAPs), Neighbourhood Equipped Areas for Play (NEAPs) and Destination Play Areas.
- 5.2.13 A long-term Play Strategy for Angus should be developed in conjunction with partner agencies.

### 5.3 Education

- 5.3.1 In conjunction with the provision of co-ordinated pathways, it is essential that children, young people and adults are given the opportunity to develop their skills, techniques and fitness. To this end, there must be a commitment to offering opportunities for them to learn.
- 5.3.2 The council wishes to promote and develop player and coaching pathways. These are seen as intrinsic components to the successful delivery of programmes that will increase opportunities for residents of Angus to achieve greater participation levels. This will have an impact on their health and well-being.
- 5.3.3 Angus is very proactive in encouraging youngsters to develop their skills. The further education and tertiary sectors cater for the sports industry with young people being able to attend vocational and professional training courses that are linked to sport. These lead to coaching qualifications, leader awards and degrees in sports specific areas. Added to this is the commitment of those who are involved in the voluntary sector. Young people are being encouraged to put something back into sport after they are finished with being involved at a competitive level or who never had the ability to achieve a high standard in

their sport. They can become involved in coaching, teaching and administration.

### 5.4 Volunteering

5.4.1 Recognition must be given to those from the voluntary sector, whose input is immense and without whom the level of provision could not be attained.

*Are there enough volunteers to support sport in Angus ?*

- No, there is never enough. Many clubs do not have the capacity in terms of the number of volunteers to allow school club links to be made and to maximise the opportunities within junior sections
- There is a need to engage more with parents and increase parental involvement in clubs/teams.

### 5.5 Barriers

5.5.1 *What are the barriers to more people coaching and volunteering to support sport? These have to be considered with the Strategy for it to be successful.*

- Modern lifestyles and a lack of time.
- Lack of payment for coaching, Coaching is often seen as a vocation rather than a profession with the exception of elite sport.
- A broader range of individual pursuits are now available to people and more leisure time is spent on these activities rather than in a club or social environment. People have limited leisure time and often it is easier to join the local gym and exercise alone three times a week than join the local athletics club/hockey club etc. Individuals are spending more time looking after their own activity and health than volunteering to help others. An increasingly broad range of sports face more competition for members and players time and commitment.
- There needs to be a culture change for coaching numbers to increase - what incentives are there for people to volunteer and coach ? Do they feel they are contributing to their local community? Do they feel they are contributing to the country's success at international level?
- Lack of community spirit across some areas does not encourage people to volunteer.

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- There is a need to look at how people are retained and kept involved after they stop playing their sport. Should older athletes for instance be encouraged to work with the novices/improvers within the club set up and obtain basic qualifications as part of their development?

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**6. Vision and Mission**

6.1 Taking into account the research conducted as part of the Strategy, our **Vision** for Active Angus 20:20 is;

**More People, More Active, More Often**

6.2 Our **Mission** for Active Angus 20:20 is that:

**Angus residents are made aware of the dangers of inactivity. They are inspired to participate and be active with access to a range of facilities & opportunities.**

6.3 Our **Key Focus** is to reduce inactivity and increase activity.

**More People** - Focus on those who are inactive to become active.

**More Active** - Those who are active, achieve recommended intensity of activity.

**More Often** - Those who are active, achieve recommended frequency of activity.

6.3.1 To deliver our Vision, Mission and Key Focus areas a number of Strategic Priorities have been developed together with Key Actions, Outcome and Targets.

6.3.2 These are detailed in the diagramme and tables below.

6.3.3 Our headline targets that mirror national targets include;

- **70% of adults & 80% of children reach recommended levels of physical activity by 2020**
- **Reduction in the levels of adult 'inactivity' in Angus**
- **Reduction in the rate of children with BMI out with the healthy range by 2020**

6.4 Strategic Priorities



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### 6.5 How will we deliver our Strategic Priorities?

6.5.1 The table below details six Strategic Priorities and provides a number of Key Actions that, it is believed, will effectively deliver on these priorities. Outcomes and targets for each of the Key Actions are also provided.

STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
<p><b>1. Provide first class sporting &amp; leisure facilities which are accessible for all</b></p>	<p><b>Facilities</b></p> <ul style="list-style-type: none"> <li>• Implement recommendations of the indoor facility and pitch strategy (Evidence Paper 3) re number, quality and type .</li> <li>• Create and develop community sports facilities in Community Campus' at Brechin and Forfar.</li> <li>• Investigate and assess the need for an athletics arena in Angus. (Evidence Paper 3)</li> <li>• Develop sport hubs in all burgh towns</li> </ul> <p><b>Programmes and Pricing</b></p> <ul style="list-style-type: none"> <li>• Review programmes to ensure programmes are provided for target groups; particular consultation for young people and older people.</li> <li>• Review of pricing to ensure that price is not a barrier to participation.</li> <li>• Explore ways to ensure flexible use of schools / college and leisure centre usage so more space is used for sport and physical activity.</li> <li>• Make greater use of town and community halls.</li> <li>• Co-ordinate bookings between all Angus managed facilities</li> <li>• Management / review of the B:Active card to measure use of members and casual users across all leisure centres</li> </ul>	<p><b>Facilities</b></p> <ul style="list-style-type: none"> <li>• Recommendations of facility strategy and playing pitch strategy delivered.</li> <li>• The opening and operation of the Brechin and Forfar Community Campus' by 2016/17</li> <li>• Facilities accessible to people from the wider community</li> <li>• Develop community sport hubs in all of the burgh towns by 2020</li> </ul> <p><b>Usage of Leisure Centres</b></p> <ul style="list-style-type: none"> <li>• Baseline measurement of Leisure Centres:               <ul style="list-style-type: none"> <li>• Attendances</li> <li>• Unique users</li> <li>• Average visits per week of each user</li> </ul> </li> <li>• Attendances increased by 1% on average each year of the strategy –               <ul style="list-style-type: none"> <li>• Development of local leisure centre targets</li> <li>• Average visits per week per user measured year 1 and targets set for year 2 onwards</li> </ul> </li> </ul>

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STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
	<p><b>Quality</b></p> <ul style="list-style-type: none"> <li>Establish customer satisfaction measures in sports centres and countryside venues.</li> </ul> <p><b>Staffing – training and development</b></p> <ul style="list-style-type: none"> <li>Angus Improvement Model (links to ‘How good is Culture and Sport’)</li> </ul>	<ul style="list-style-type: none"> <li>Assessment of usage by the following groups as compared to demographics of the county as a whole :-               <ul style="list-style-type: none"> <li>Young people</li> <li>Women</li> <li>Older people</li> <li>People with long term conditions</li> </ul> </li> <li>Introduce a customer satisfaction survey system to measure Net Promoter Scores of facilities (NPS).</li> <li>Improvement in department AIM scores</li> </ul>

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STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
<p><b>2. Maximize opportunities in Angus' natural heritage and open space to facilitate outdoor sport &amp; physical activity</b></p>	<p><b>Focus on elements we can influence;</b></p> <p><b>Delivery of the actions of the following Strategies;</b></p> <ul style="list-style-type: none"> <li>• Angus Countryside Access Strategy 2007-2012</li> <li>• Core Paths Plan</li> </ul> <p><b>Complete Open Space and Play Strategies</b></p> <ul style="list-style-type: none"> <li>• Attractive / usable / accessible / hierarchy of space - parks and open spaces so people feel safe and able to walk and cycle</li> <li>• Provision of Green Gyms</li> </ul> <p><b>Countryside Ranger Service</b></p> <ul style="list-style-type: none"> <li>• Delivery of services against Cairngorms National Park Annual plans</li> <li>• Countryside Programme to include events aimed at inactive people and target groups and marketing with other partners</li> <li>• Country Parks – delivery an annual programme of activities and events including Outdoor activities and Watersports</li> </ul>	<ul style="list-style-type: none"> <li>• Successful implementation of proposals 1-16</li> <li>• Undertake a follow up review of strategy by 2016</li> <li>• Open Space and Play Strategies completed by the end of 2015.</li> </ul> <p><b>Countryside</b> More people being active outdoors and enjoying a healthier lifestyle.</p> <ul style="list-style-type: none"> <li>• Increase the numbers of people that visit the Country Parks, Montrose Wildlife Centre and the Glens area and take part in sport and physical activity</li> <li>• Increase the numbers of people that take part in Countryside Programmes (sport and physical activity)</li> <li>• Number of <b>new</b> people visiting the Country Parks each year and take part in sport and physical activity</li> <li>• Number of regular visitors taking part in sport and</li> </ul>



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STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
	<p><b>Green networks</b></p> <ul style="list-style-type: none"> <li>• Support formal and informal cycling and mountain biking – NR1, roads / off road</li> <li>• Path networks and delivery of the Core Paths Plan provide increased opportunities to participate in walking and cycling, at a range of levels.</li> <li>• Support the 'Walk the path to 2014 programme' Rambler Scotland</li> </ul> <p><b>Active Travel</b> – in planning and design of all built environments and between communities – cycle routes</p>	<p>physical activity (more than 2 x a month) in the Countryside</p> <ul style="list-style-type: none"> <li>• Delivery of annual events programme – events linked to sport and physical activity</li> <li>• Support clubs and activities linked to countryside sites</li> <li>• Establish the base and increase the number of people being active through participating in water and other outdoor sports</li> <li>• Establish the base and increase the number of people (coaches and volunteers) improving their skill level of outdoor activities and sports</li> </ul> <ul style="list-style-type: none"> <li>• Development of wheeled sports facilities</li> <li>• Completion of the Core Path Network within Angus</li> <li>• Majority of core paths signposted and accessible by 2015.</li> <li>• Use of national cycle route – NR1</li> </ul> <ul style="list-style-type: none"> <li>• Numbers of children and young people undertaking cycle training at primary school age</li> <li>• Number of pupils who actively travel to school</li> <li>• Number of adults who actively travel to work</li> </ul>

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STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
<p><b>3. Create clear sport &amp; physical activity pathways</b></p>	<p><b>Pathways</b></p> <p><b>Sport Pathways from foundation to excellence are well defined through;</b></p> <ul style="list-style-type: none"> <li>• Active Schools, Sports Development &amp; Leisure Centres</li> <li>• Clubs, SGB whole sport plans Sports HUBS</li> <li>• Priority Sports</li> <li>• Regional Sports Partnership</li> <li>• Regional Manager – SGB, Clubs (important for pathways for priority sports)</li> <li>• Encourage other Clubs and organisations to be quality assured</li> </ul> <p><b>Signposting</b></p> <ul style="list-style-type: none"> <li>• The Council and partners involved in Active Angus 20:20 work together to signpost opportunities and pathways in a co-ordinated way</li> <li>• There is clarity on pathways for all for sport and</li> </ul>	<p><b>Sport Hubs</b></p> <ul style="list-style-type: none"> <li>• Effective engagement with communities</li> <li>• Creation of effective local management groups</li> <li>• Creation of a programme of education and training support for hub members.</li> <li>• Working with the hub and local partners such as Clubs, Leisure Services and Active Schools to implement a programme of activities to encourage an increase in club membership.</li> <li>• Creation of an operational / development plan to ensure clubs work together to achieve the joint outcomes of the clubs, Angus Council and <b>Sportscotland</b>.</li> <li>• Safer, secure well-structured clubs that are attractive to children and young people</li> <li>• Use the ACE accreditation system to encourage the development of the club framework so that it is more attractive, secure and safe for children and young people.</li> <li>• Record the number of clubs achieving the various standards</li> <li>• Targets in sports development plans / active schools plans / regional manager plans</li> </ul> <ul style="list-style-type: none"> <li>• Angus directory of sports &amp; physical activities opportunities is up to date with links to other relevant partner web sites.</li> <li>• Leisure Centres are key HUBS for information dissemination</li> <li>• Other key Council partners are involved and</li> </ul>

## A 20:20 Vision for an Active Angus

STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
	<p>physical activity for all life stages</p> <ul style="list-style-type: none"> <li>• People and families can easily access opportunities whether participating for the first time or starting again after a break.</li> </ul>	<p>trained in providing information to take part in sports and physical activities; GP surgeries, libraries, education</p> <ul style="list-style-type: none"> <li>• Council departments (through this strategy) co-ordinate the information available to people in respect to opportunities to take part in physical activities</li> </ul>

## A 20:20 Vision for an Active Angus

STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
<p><b>4. Inspire children &amp; young people</b></p>	<p><b>Maximise legacy of Olympic Games 2012, Commonwealth Games 2014 and Ryder Cup 2014</b></p> <ul style="list-style-type: none"> <li>• Develop Sports and Events programme 2014 working with schools, clubs and other groups</li> <li>• Celebrate local role models</li> <li>• Past and present Games participants</li> <li>• Angus Sports Awards</li> <li>• Angus Achievers Award</li> <li>• Young ambassadors programme</li> </ul> <p><b>Commitment to Active Schools programme</b></p> <ul style="list-style-type: none"> <li>• Consult with young people to develop suitable activities and programme, focus on transition from formal education to leisure centres, clubs and informal recreation</li> <li>• Leisure centre programmes</li> <li>• Open Spaces activities</li> <li>• Active Schools develop school / club links</li> <li>• Community campus (and where a sports HUB is based)</li> </ul> <p>POST for Tayside (young people obesity programme)</p> <p><b>Provide programme volunteering and training opportunities for young people</b></p> <ul style="list-style-type: none"> <li>• Work with higher education to match students seeking work experience and employment to schools, leisure centres and clubs</li> </ul>	<ul style="list-style-type: none"> <li>• Implementation of events programme.</li> <li>• Number of organisations taking part in the events programme</li> <li>• Number of Angus people participating in the events programme</li> <li>• Number of volunteers at each 2014 event from Angus</li> <li>• Targets from - On Your Marks – A Games Legacy for Scotland 2009</li> </ul> <p><b>Active school targets;</b></p> <ul style="list-style-type: none"> <li>• Increase young people taking part in sport at primary and secondary schools</li> <li>• Increase in young people taking part in sport out of school</li> <li>• Number of young people who are disengaged from school taking part in sport</li> <li>• Primary school obesity levels</li> <li>• Number of young people volunteering in sport / gaining qualifications in sports related courses.</li> </ul> <ul style="list-style-type: none"> <li>• Numbers of work experience students at leisure centres, countryside</li> <li>• Number of young volunteers actively involved in sport and physical activity in Angus.</li> </ul>



## A 20:20 Vision for an Active Angus

STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
<p><b>5. Provide intervention for targeted groups;</b></p> <p><b>Young women and teenage girls</b></p> <p><b>People with disabilities</b></p> <p><b>Older people</b></p> <p><b>People with long term conditions</b></p> <p><b>Young people with anti-social behavioural problems</b></p>	<p><b>Develop appropriate programmes for each of the target groups via consultation with current providers and the target groups themselves. Programmes both within and outwith built facilities; for example parks, open spaces, country parks and leisure centres</b></p> <p><b>Develop inclusive opportunities and programmes to increase participation by groups with low participation rates</b></p> <ul style="list-style-type: none"> <li>• Review the current leisure centre programmes to provide more inclusive programmes or targeted programmes as required</li> </ul> <p><b>Support existing programmes that target sedentary people</b></p> <ul style="list-style-type: none"> <li>• Long term condition programmes</li> <li>• Referral to exercise</li> <li>• Link with NHS Tayside – Pilot surgeries (Get Active... Your Way, Every Day)</li> <li>• LMART team – diversionary activities including sport and physical activity aged 10-16</li> </ul> <p><b>Support and access continued funding resources to develop LTC programmes – (as it is currently a voluntary programme and the Council &amp; NHS Tayside supports it)</b></p> <p><b>Community Campus HUBS provide innovative programmes of physical activity and sports for target groups (e.g. dance and zumba to teenage girls)</b></p>	<ul style="list-style-type: none"> <li>• Consultation process takes place</li> <li>• Programmes across the key facility areas are reviewed and developed</li> </ul> <p><b>Measurement methodology for programmes agreed;</b></p> <ul style="list-style-type: none"> <li>• Total Participants</li> <li>• Participants that complete the programme</li> <li>• Participants that continue to participate after the end of programmes</li> </ul> <p><b>Participation by young women, people with disabilities and older people in;</b></p> <ul style="list-style-type: none"> <li>• leisure centres</li> <li>• countryside parks</li> <li>• managed spaces</li> <li>• After school activities</li> </ul> <p><b>People with disabilities, participation measured;</b></p> <ul style="list-style-type: none"> <li>• Athletes with disabilities taking part / competing</li> <li>• People with special needs taking part / competing</li> </ul> <p><b>Future targets set given the base levels of participation</b></p>

## A 20:20 Vision for an Active Angus

STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
<p><b>6. Work in partnership with people &amp; organisations who share our vision and goals</b></p> <p><b>Increasing the number of active partnerships</b></p> <p><b>Extending the work with active partners</b></p>	<p><b>Partnerships</b></p> <ul style="list-style-type: none"> <li>• Use the Active Angus Board and network to develop active partnerships for sport and physical activity; both internal and external to the Council</li> <li>• Work with regional partners and SGB's</li> <li>• Support Volunteers in Angus – 'Voluntary Action Angus'; understand untapped volunteer resources</li> <li>• Develop a programme of skills training for volunteers and staff depending on needs analysis</li> <li>• Provide co-ordinated approach of (paid) coach development / training opportunities particularly to under-represented sectors of Angus</li> <li>• Work with the NHS and Angus CHP to train volunteers to deliver health related programmes</li> </ul> <p><b>Clubs</b></p> <ul style="list-style-type: none"> <li>• Provide a support system for Clubs depending on their needs</li> <li>• Develop leadership and coaching pathways for progression</li> </ul>	<p>Number of active partnership organisations involved with Active Angus.</p> <p>Amount of volunteers actively involved with:</p> <ul style="list-style-type: none"> <li>• Countryside service</li> <li>• Leisure Centres</li> <li>• Sports Development</li> <li>• Active Schools</li> <li>• Clubs</li> </ul> <ul style="list-style-type: none"> <li>• Total volunteer days across the service per year</li> <li>• Number of qualified coaches in Angus, those who are active</li> <li>• No. of courses delivered and participants and then those that are involved</li> <li>• Number of clubs that we are involved with – variety of clubs across a wide number of sports</li> <li>• Number of clubs actively participating in Angus Club Excellence) <b>ACE</b></li> </ul>



## A 20:20 Vision for an Active Angus

STRATEGIC PRIORITIES	Key Actions	Outcomes and Targets
	<p><b>Raise awareness of benefits of physical activity and use innovative and exciting approaches to communicate and get people engaged and motivated</b></p> <ul style="list-style-type: none"> <li>• Raise the profile of Active Angus via the community planning framework</li> <li>• Organise an Active Angus Week – linked to Glens Walking Festival</li> </ul>	<ul style="list-style-type: none"> <li>• Influence the Themes ; Communities are Caring and Healthy</li> <li>• Delivery of an Active Angus week – participants / events</li> </ul>

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**7. How the Active Angus 20:20 Strategy will achieve against current SOA 2013 - 2016**

**7.1 Outcomes - linked to Angus Single Outcome agreement**

- **Local outcome 3** - Our children and young people are confident individuals, effective contributors, successful learners and responsible citizens - **% of P1 pupils within a BMI healthy range**
- **Local Outcome 7:** Our communities are safe, secure and vibrant - Number of youth nuisance calls
- **Local Outcome 8** - We have improved the health and wellbeing of our people and inequalities are reduced
- **Local Outcome 11: Our natural and built environment is protected and enjoyed** - The proportion of adults making one or more visits to the outdoors per week
- **Local Outcome 12: Our carbon footprint is reduced** – % of journeys to work made by public or active transport and % of children walking or cycling to school

**7.1.1 How Active Angus 20:20 will influence priorities within future SOA's**

7.1.2 The objective of the Active Angus Strategy is to influence communities and future SOA targets to include targets directly in relation to adult and young peoples levels of sport and physical activity and inactivity.

**8. Delivery Framework**

**8.1 Active Angus 20:20 Project Board**

- Purpose
  - to communicate aims of the strategy to the wider network
  - Complete a mapping exercise to understand who delivers what programme and activities aimed at who.
  - Influence delivery work of partners to work towards the objective of the 20:20 Vision and Strategy
  - Sign off annual work programmes
  - Share information
  - Joint Marketing
  - Measurement of key outcomes
  - Annual review

## Active Angus 20:20 Project Board Active Angus 20:20 Network

<b>Angus Council</b> <ul style="list-style-type: none"><li>•Communities</li><li>•People</li><li>•Resources</li></ul>	<b>Voluntary &amp; Private Sector</b> <ul style="list-style-type: none"><li>•Clubs</li><li>•LTC group</li><li>•Community Groups</li><li>•Commercial leisure</li></ul>	<b>sportscotland</b> <ul style="list-style-type: none"><li>•Regional Sports Partnership</li><li>•Facilities Planning</li><li>•Funding</li></ul>	<b>Health</b> <ul style="list-style-type: none"><li>•PCT's</li><li>•GP's</li></ul>
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### 9. Action Plans

9.1 An Action Plan will be developed for each of our **Strategic Priorities**, each plan will provide annual Actions; will detail who is responsible for delivery, the level of projected outputs and outcomes will also be provided.

9.2 It is anticipated that in many cases base line data may not be available, therefore in year 1, measuring methodologies will be agreed and base line data collected for future benchmarks.

9.3 Existing consultation methods will be utilised where possible.

#### 9.4 Measuring Success

9.5 Each Action Plan will be reviewed on a quarterly basis and fully assessed annually.

9.6 The officer responsible for each action plan will report back to the Project Board on a quarterly basis.

#### 9.7 Action Plan Template

9.8 The Action Plan templates are detailed over.

## A 20:20 Vision for an Active Angus

### ANNUAL ACTION PLAN TEMPLATE

STRATEGIC OBJECTIVE					
1. Provide first class sporting & leisure facilities which are accessible for all					
	ACTION	BASELINE	TARGET – YEAR 1	PERIOD OF REVIEW – Annual or Quarterly	WHO – Officer Responsible
1	Implement recommendations of the indoor facility and pitch strategy			A	
2	Create and develop community sports facilities in Community Campus' at Brechin and Forfar		Opening and operation of the Brechin and Forfar Community Campus' by 2016/17	A	
3	Investigate and assess the need for an athletics arena in Angus			A	
4	Develop sport hubs in all burgh towns			A	
5	Review programmes in sport centres to ensure programmes are provided for target groups; particular consultation for young people and older people.	Assessment of usage by the following groups as compared to demographics of the county as a whole :- <ul style="list-style-type: none"> <li>• Young people</li> <li>• Women</li> <li>• Older people</li> <li>• People with long term conditions</li> </ul>		Q	
6	Review of pricing within leisure centres to ensure that price is not a barrier to participation.			A	

## A 20:20 Vision for an Active Angus

<b>STRATEGIC OBJECTIVE</b>					
<b>1. Provide first class sporting &amp; leisure facilities which are accessible for all</b>					
	ACTION	BASELINE	TARGET – YEAR 1	PERIOD OF REVIEW – Annual or Quarterly	WHO – Officer Responsible
7	Explore ways to ensure flexible use of schools / colleges and leisure centre usage so more space is used for sport and physical activity	Current community access of facilities		A	
8	Review opportunities to use town and community halls for sports and physical activity	Current community access of facilities		A	
9	Co-ordinate bookings between all Angus managed facilities			A	
10	Management / review of the B:Active card to measure use of members and casual users across all leisure centres	<ul style="list-style-type: none"> <li>• Baseline measurement of Leisure Centres:                             <ul style="list-style-type: none"> <li>• Attendances</li> <li>• Unique users</li> <li>• Average visits per week of each user</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Attendances increased by 1% on average each year of the strategy                             <ul style="list-style-type: none"> <li>• Development of local leisure centre targets</li> <li>• Average visits per week per user measured year 1 and targets set for year 2 onwards</li> </ul> </li> </ul>	Q	
11	Establish customer satisfaction measures in sports centres and countryside venues. Introduce a customer satisfaction survey system to measure Net Promoter Scores of facilities (NPS)			A	
12	Staffing - Use Angus Improvement Model (links to 'How good is Culture and Sport')	Current AIM scores	Improvement in department AIM scores	A	

EVIDENCE PAPERS AND CONSULTATION

	EVIDENCE
Evidence Paper 1 – Policy	<p><b>STRATEGIC DOCUMENT REVIEW</b></p> <p><b>Relevant evidence from:</b></p> <ul style="list-style-type: none"> <li>• The Lancet – Physical Activity report July 2012</li> <li>• Start Active – Stay Active – July 2011</li> <li>• People and Sport in Scotland 2010</li> <li>• Obesity Report 2010 – Scottish Government</li> <li>• Lets Make Scotland More Active 2010</li> <li>• Sport Scotland Corporate Plan (2011-215)</li> <li>• SportScotland – Reaching Higher (Scottish Executive, 2007)</li> <li>• Angus Corporate Plan 2011-15</li> <li>• SOA – 2011-2014</li> <li>• Angus Health Improvement Plan 2009-2012</li> <li>• NHS Tayside – Health Inequality Strategy 2010</li> <li>• Sport Tayside and Fife Key Performance Indicators</li> </ul>
Evidence Paper 2- Angus Context	<ul style="list-style-type: none"> <li>• Demographic Analysis</li> </ul>
Evidence Paper 3– Needs Assessment of indoor and outdoor sports facilities.	<ul style="list-style-type: none"> <li>• Mapping of all facilities with catchments to assess geographical gaps</li> <li>• Demand and supply analysis of indoor and outdoor facilities</li> <li>• sportscotland – Audit of Facilities 2006, Sports Hall Study 2003, STP user Survey.</li> <li>• HUB Facility developments taken into consideration</li> </ul>
Evidence Paper 4 - Mapping	<ul style="list-style-type: none"> <li>• Accessibility of other Sporting and Physical Activity Facilities</li> </ul>
Evidence Paper 5 – Consultation	<ul style="list-style-type: none"> <li>• Steering Group feedback</li> <li>• Professional team workshop and questionnaire</li> </ul>
	<ul style="list-style-type: none"> <li>• Schools questionnaires</li> <li>• Clubs questionnaires</li> <li>• Pitch quality assessments</li> <li>• Euan Lowe – sportscotland</li> <li>• Red Lion Caravan Site, Arbroath - Lesley Nicholls</li> </ul>
	<ul style="list-style-type: none"> <li>• Ranger Service</li> <li>• Mountain Biking clubs</li> <li>• Cycling Touring Club - Linda Gaston</li> </ul>
	<ul style="list-style-type: none"> <li>• Strathmore Cricket Club David Bridges,</li> <li>• Montrose Football Club - Derek Sim, (Chair)</li> </ul>

## A 20:20 Vision for an Active Angus

	Montrose FC <ul style="list-style-type: none"><li>• Forfar Farmington Club - Colin Brown</li><li>• Carnoustie Golf - Colin McLeod Carnoustie Links Management</li></ul>

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