

Active Angus 2020 – Evidence Papers 1, 2, 4 and 5



Evidence Paper 1 – Policy & Strategic Context

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THE LANCET – PHYSICAL ACTIVITY JULY 2012

‘In view of the prevalence, global reach and health effect of physical inactivity, the issue should be appropriately described as pandemic with far reaching health, economic, environmental and social consequences’

The series of Comment papers, Articles and Series has been combined to create a Series on physical activity. The work shows that physical inactivity is a major contribution to death and disability from non-communicable diseases (NCD). Therefore the Lancet since 2005 has been part of a world wide effort to implement action on NCD, physical activity being a priority. It is noticed that unlike tobacco diet and alcohol, the importance of physical activity has been slow to be recognised. It is noted that ‘...physical activity has usually been coupled with other public health agendas and is often not a fully recognised standalone public health priority.’ (page 67). Or ‘physical activity has frequently been coupled with diet to address obesity, rather than defined as a standalone public health issue’ page 68.

Evidence has shown that physical inactivity is a significant predictor of cardio vascular disease, type 2 diabetes, obesity, some cancers, poor skeletal health, some aspects of mental health and overall mortality. The global challenge is clear; ‘make physical activity a public health priority throughout the world to improve health and reduce the burden of NCD’s.’

Article - Effect of physical inactivity on major NCD worldwide. I-Min Lee

Findings: Worldwide we estimate that physical inactivity causes 6% of the burden of disease from coronary heart disease, 7% of type 2 diabetes, 10% breast cancer and 10% of colon cancer. Inactivity causes 9% of premature mortality. (Page 9)

Article – Evidence-based intervention in physical activity – lessons from around the world

An assessment of interventions between 2000 and 2011 was assessed the key messages were;

- Interventions more successful with partnerships, co-ordinated efforts including; schools, businesses, policy, advocacy, nutrition, recreations, health, planning and transport agencies
- Initiatives to increase social support within communities, specific neighbourhoods and worksites important
- Comprehensive school based strategies encompassing physical education, afterschool sports, and active transport can increase physical activity in young people
- Whilst individuals need to be informed and motivated, need to ensure that environments are safe and supportive of health and wellbeing.

Comment

This is a highly respected medical journal highlighting the important worldwide impacts that physical inactivity has on non-communicable diseases. The publishing of in July 2012 was planned around the Olympics. It states that reducing physical inactivity should be a standalone public health policy and provides the evidence for the importance to all agencies to be part of the Angus 20:20 Vision.

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SOLACE (SCOTLAND) STRATEGY PAPER 2010

“Future of Public Services in Scotland”

Written prior to the 2012 elections it anticipated the spending reductions that were going to be needed in public expenditure but probably not the overall financial downturn.

It advises a careful approach to achieving savings by dramatic action on Local Authorities. Wide ranging debate is needed throughout public bodies and the “distinctive role of local authorities, as elected and accountable bodies need to be recognised”.

It records that reform must provide for decline with immediate financial pressure and with long term aspirations to achieve sustainable public services.

Comment

These are matters that have become reality and are being dealt with in a pragmatic way. At LA level change is being driven by the reality of lower available budgets for each department.

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START ACTIVE – STAY ACTIVE July 2011

A report on physical activity for health from the four home countries' Chief Medical Officers

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.

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.

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

The relationships are independent of the level of overall physical activity. For example, spending large amounts of time being sedentary may increase the risk of some health outcomes, even among people who are active at the recommended levels.

The guidelines also allow greater flexibility for achieving the recommended levels of physical activity and provide appropriate guidelines for different life stages.

Comment

These guidelines provide a differentiated target that just an increase in participation by 1% each year

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PEOPLE AND SPORT IN SCOTTISH 2010

Scottish householder survey culture and sport 2007/2008

This document is based on data collected from a sample of respondents to the Scottish Household Survey 2007 which included questions relating to culture and sport. These dealt with questions on participation, motivations and barriers to sport, tuition, competitions, club membership and volunteering related to sport.

- 73% participated in sport including walking, (for 30 minutes a day) 43% if walking was excluded
- Participation increases as deprivation decreases (80% participation in the least deprived areas and 63% in the most deprived areas)
- Recreational walking with the most common sport (61% participating), cycling, gym, keep fit (all 8%), golf 7%, football 6%
- Non participation was attributed to poor health (54%) followed by a lack of interest (24%) and no time (16%)
- Of those taking part 22% received tuition, 33% took part in competitive sport and 27% were club members
- 75% had access to some indoor or outdoor facility by foot or bus

Comment

Valuable statistical information for use as base comparison data

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Costing the Burden of ill health related to Physical Inactivity for Scotland August 2012

NHS Scotland

The report details the methodology to estimate the primary and secondary care costs attributable to physical inactivity for Scotland. The 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.

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OBESITY REPORT 2010

Scottish Government

With Scotland having an obesity level only exceeded by USA and Mexico the Scottish Government is attaching great importance to long term plans to improve the position and reduce the 26.8% of adults who are obese (65.1% are overweight) and 15.11% obese children (31.7 % overweight and rising rapidly).

A flourishing economy needs a healthy population and achieving this means tackling obesity. At present it is an increasing burden on the Scottish economy.

Diet and exercise are the means to attack it. The latter is the direct purpose of the Active Angus project to increase physical activity in all parts of life style. Scottish Government's spending includes £102 million on Sport Scotland and £36 million on the Active Schools programme and the whole cost is huge.

Comment

The huge problem of obesity and overweight population makes it important that Active Angus is seen to be tackling the matter by stimulating people to much increased physical activity. We will make this a specific and serious issue in handling this study.

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LET'S MAKE SCOTLAND MORE ACTIVE REVIEW 2010

BHF National Centre, Scottish Physical Activity Research Collaboration (SPAR coll) NHS Scotland and Healthier Scotland (Scottish Government)

This is a four-year review of the document published in 2003 which is a 20 year plan with activity targets for 50% of all adults (over 16) and 80% of all children (up to 16) meeting minimal levels of physical activity by 2012.

The Review found that 39% of adults (46% of men and 35% of women) and 64% of children (72% of boys 56% of girls) had met the recommendations. While this was an upward trend in adult activity there is particular concern about current levels among older adults, women in general and the proportion of girls not meeting the recommendations. These should be a priority.

It recommends that local leaders find ways of linking physical activity outcomes with their “Single Outcome Agreements”.

The Review (2009) recommended that

- attention should be paid to enhancing the recreational environment
- physical activity targets should be included in the National Performance Framework and NHS (HEAT) targets
- key services that impact on physical activity (planning, transport, education, sports/recreation/leisure) should contribute to the task of improving performance
- there should be coordination of the various programmes to promote physical activity (SPAR coll)

Comment

These targets must be a fundamental part of this work in Angus and targets identified with the County Council.

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PROMOTING PHYSICAL ACTIVITY, ACTIVE PLAY AND SPORT FOR PRE SCHOOL AND SCHOOL AGE CHILDREN AND YOUNG PEOPLE IN FAMILY, PRE SCHOOL, SCHOOL AND COMMUNITY SETTINGS. 2009

(NICE Public Health Guidance Document)
(National Incentive for Health and Clinical Excellence)

This is a substantial report setting out NICE's formal guidance on physical activity, active play and sport for children, young people in family, pre school and community settings

It defines vigorous and moderate intensity activity and also opportunities from or competitive sport, and formal exercise, active play and other demanding activities such as dancing, swimming, skateboarding plus those that can be part of every day life, such as walking and cycling. It defines those who should take action.

Comment

It will be interesting to find out how far the findings and proposals of the NICE document have been considered locally by the bodies identified to take action (P9 of the document).

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ON YOUR MARKS A GAMES LEGACY FOR SCOTLAND 2009

Scottish Government Games Legacy Team

The positive and ambitious document sets out the broadly-based outcome and lasting benefits which Scotland is determined to achieve from the Commonwealth Games in 2014.

A main aim is an Active Scotland making faster progress towards a healthier nation. The priority is to get Scotland physically active on the basis that physically active people have a 20%-30% reduced risk of preventive death and 50 % reduced risk of major chronic disease. Legacy planning is being taken seriously and funding identified. The Legacy Trust UK has committed funding to a Scottish project with a multi strand programme.

The Community Sports Hub programme will support increased participation. The agenda provides for an international programme to build lasting links between Scotland and the Commonwealth.

All of the activity generated will be measured and assessed in a document in 2019. Specific targets which are tabulated “What will success look like?” will provide the basis to measuring success.

Comment

There is an agenda which Angus CC will have to join. Has the County Council already a local programme related to the Commonwealth Games?

SPORT SCOTLAND CORPORATE PLAN (2011-15)

Development and Supporting a World Class Sporting System

Five strategic objectives unite all Scotland's public bodies, one of these is "healthier" and Sport Scotland shares the vision that by 2020 people in Scotland will be enjoying the benefits of a more active life as outlined in the "Let's Make Scotland More Active" strategy.

The Council's Plan embraces both formal and informal sport and physical activity. It appreciates the opportunity that will arise in the next few years to build interest and participation through the Commonwealth Games and Ryder Cup and taking advantage of these opportunities are two of its set of "success measures". Others directly important to this work in Angus are

- grow sustainable levels of competent and skilled coaches, officials, administrators and specialists
- develop a greater more integrated role for outdoor and adventure sport maximising Scotland's unique attributes and heritage
- stronger club networks and greater community involvement
- increase opportunities for children and young people through schools

Comment

This is the policy of Scotland's principal sports body and Angus' activity will be well able to reflect the policy.

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SPORTS Scotland

REACHING HIGHER – Building on the success of Sport 21 – 2007

The strategy sets out the long-term aims and objectives for sport until 2020

The strategy for physical activity “let’s make Scotland more active”, locates sport as one element of the wider physical activity spectrum. While the strategy, recognises the wider agenda within which sport operates, it focuses solely on the development of **sport**.

Reaching Higher focuses on the promotion, delivery, playing and enjoyment of sport. 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.

Whilst the focus is primarily on sport, it is recognised that sport contributes to a significant number of wider benefits

two key outcomes:

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

2020 challenge of 60% of Scotland’s adult population participating in sport at least once a week.

The approach of the strategy determines that:

- Quality Facilities
- Strong Organisations
- Well trained People

Leads to increasing participation and then good pathways lead to improved performance

Strategy highlights the roles and responsibilities of partners and the importance of monitoring and evaluation

Comment

Does Angus want to commit to both Participation and Performance as an objective?

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Angus Corporate Plan 2011-2015

Our Vision For Angus

Angus is a place where a first class quality of life can be enjoyed by all

Angus Council Priorities

We are working with our partners to make our communities:

- Prosperous and Fair
- Learning and Supportive
- Safe and Strong
- Caring and Healthy
- Sustainable

Angus Council Values

These values underpin all of our work:

- provide excellent public services that are value for money
- improve public services through partnership working
- actively engage with communities
- promote sustainable growth
- promote fairness and equality

Within 'Communities that are caring and healthy'

Commitments to

- **Promote volunteering**
- **promoting participation in leisure and cultural activities**

COMMENT

Key that the Active Angus strategy demonstrates its alignment to the Angus Corporate plan.

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Single Outcome Agreement 2011 – 2014

Angus Community Planning Partnership leads community planning in Angus

The vision of the Angus Community Planning Partnership is that:

‘Angus is a place where a first class quality of life can be enjoyed by all’.

Communities that are learning and supportive – area of focus is:

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 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 hr physical activity per day to 95% by 2014
- Maintain the % of primary schools providing 2 hr of physical education per week at 80%

HOW:

- Implement the Physical Activity Strategy including the route map for tackling obesity

Communities that are caring and healthy – area of focus

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,

COMMENT

These priorities highlight the outcomes of the Angus 20:20 vision; childhood obesity and working to reduce the number of people with long term conditions.

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ANGUS HEALTH IMPROVEMENT PLAN 2009-2012

This plan is seen as the important step of moving from strategies to actions in the Angus communities and it reflects the efforts of Angus Community Planning Partners. The document covers all aspects of health improvement and it shows that, despite continuing problems, many of the key statistics are better than those for all Scotland.

After “Alcohol” the report identifies “Nutrition and Physical Activity” as the key health improvement priority. The main goal is to help improve health and well-being by promoting and developing physical activities in all its shapes and forms. It directly relates a lack of physical activity to crime, anti-social behaviour and economic activity.

Comment

The Plan further emphasises the need for lifestyle change and the vital role for physical activity in achieving this.

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ANGUS COUNTRYSIDE ACCESS STRATEGY 2007-2012

Prepared by Angus Council in 2007

The Strategy records the progress made (by 2007) in three key elements

- The Eastern Cairngorms Access Project
- Angus Coastal Path
- The Core Paths Plan (early stages)

It was the basis of extensive local consultation on access in areas outwith the Cairngorm National Park.

The report took particular note of the fact that a high proportion of countryside visits are short and local and a prime need is for easy access from settlements. It also recognised the great attraction of the Angus Glens and the Angus Coast and the need to improve access provision.

It deals with rights of access (and those where there are no rights) which are extensive and refers to the Scottish Outdoor Access Code 2004 which is promoted by the Angus Ranger Service.

The Core Paths Plan is a statutory duty of the Council. This is designed to give the public “reasonable Access” throughout the area. There are desired 10 outcomes tabulated. It gives particular attention to access to enclosed agricultural land and envisages this being by the creation of path networks.

Comment

This is an informative document that records the problems of access and the positive measures to be taken to allow the public to enjoy the whole area of Angus. A key issue is the provision of easy access for short walks around where people live, places which often feature enclosed agriculture.

Note: The Council produced an update to the “Core Paths Plan” in 2010.

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ANGUS COMMUNITY SPORT HUBS

Comment

This document was produced in January 2012 and certain of the active proposals may have been implemented if the Community Hub Officer has been appointed and progress made towards achieving the establishment of the 3 Sports Hubs at Arbroath, Montrose and Brechin.

This is clearly an important area of action for the Council and it will be to build the targets into the Active Angus study.

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ANGUS PHYSICAL ACTIVITY DRAFT PLAN 2012-2013

This is a detailed schedule of activity to achieve set Strategic Objectives. It indicates priority action, performance indicators, shows the baseline, sets timed targets with local partners.

This Plan follows the Physical Activity Strategy for Angus 2006 which included a thorough examination of all aspects of physical activity in the County.

Comment

This must be a primary input into the Active Angus Study. It sets out Council action and responsibilities for taking that action.

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ANGUS ACTIVE SCHOOLS 2008

Angus Education Department

Comment

Active Schools programmes feature as important elements of the Scottish physical development initiative. This 4 year report looks back at the working of the scheme in Angus since it began in 2004 and considers what can be achieved in the second phase (2008 -2011). It measured the growth of physical activity in schools including curriculum links, extra curricular activity, playground activity active travel, clubs and community links. It recorded a major contribution by volunteers.

Various recommendations were developed and a current update will show how far the level of activity has been maintained or increased and how far the Active Schools programme has become part of the main school agenda.

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NHS Tayside – Health equality strategy 2010

Main Commitments

Board Policy

- Make “Contributing to achieving health equity within a generation” our most important aim, integrating the ideas in this strategy in all work.

Public Health and Health Strategy

- Support behaviour change more effectively
- Develop and agree measures of progress with our communities and partners including:
 - 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

New culture of co-production and resilience

The strategy’s approach is to change culture and for example ‘exhorting people to exercise without helping them ensure their environments are safe and pleasant is futile’.

We need to ensure our efforts are truly joined up and thought through, without thinking for people. When we consulted about this strategy 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.

Comment

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.

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REGIONAL SPORTING PARTNERSHIP FACILITY REQUIREMENTS SUMMARY 2012

Produced by this partnership of Angus, Dundee, Fife and Perth/Kinross Councils who are working together to improve the provision of facilities for 8 selected sports. The paper considers the requirements, current provision, action required, priority and timescale and indicates progress or lack of it.

Comment

On initial examination it points to a difficult situation with many shortcomings and gaps in provision.

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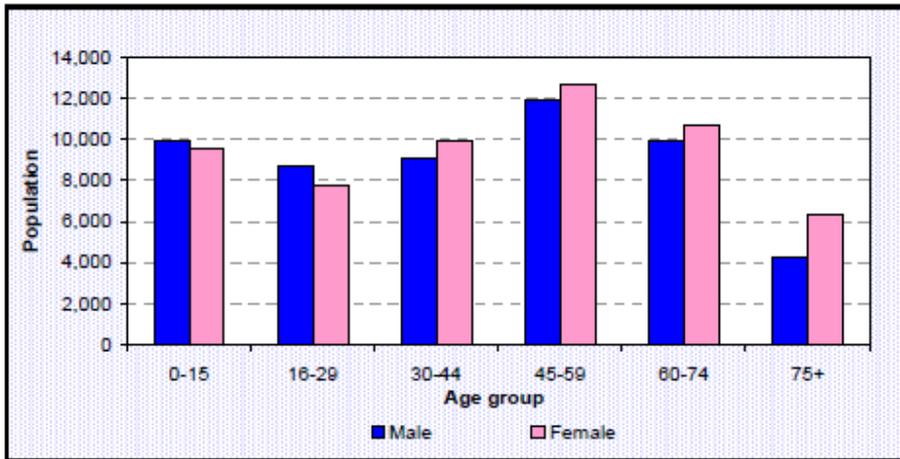
Evidence Paper 2– Angus Context

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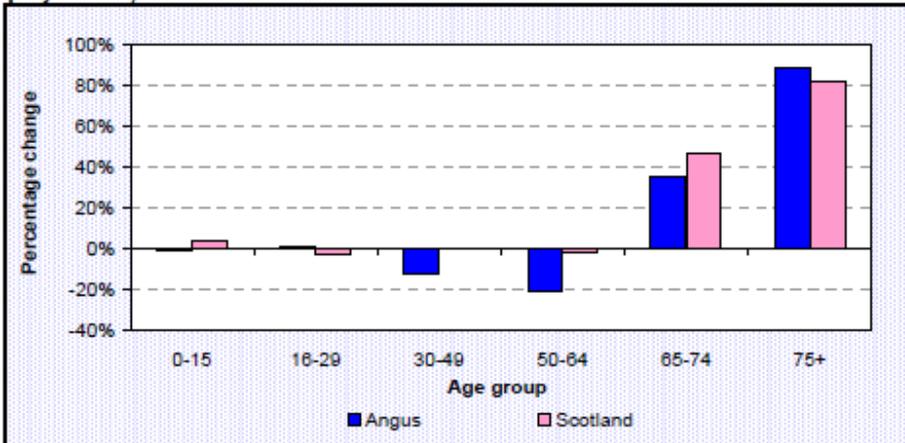
Projected population, by age group, in Angus, 2010-2035

Age group	Base year	Projected years				
	2010	2015	2020	2025	2030	2035
0-15	19,605	19,456	19,649	19,659	19,596	19,478
16-29	16,287	17,190	16,877	16,325	16,255	16,441
30-49	28,339	26,599	23,930	23,813	24,570	24,738
50-64	24,045	24,436	24,948	23,933	20,973	18,996
65-74	11,899	14,021	14,808	14,685	15,925	16,047
75+	10,395	11,710	13,364	16,147	17,858	19,599
All ages	110,570	112,412	113,576	114,562	115,177	115,299

Estimated population of Angus by age and sex, 30 June 2011

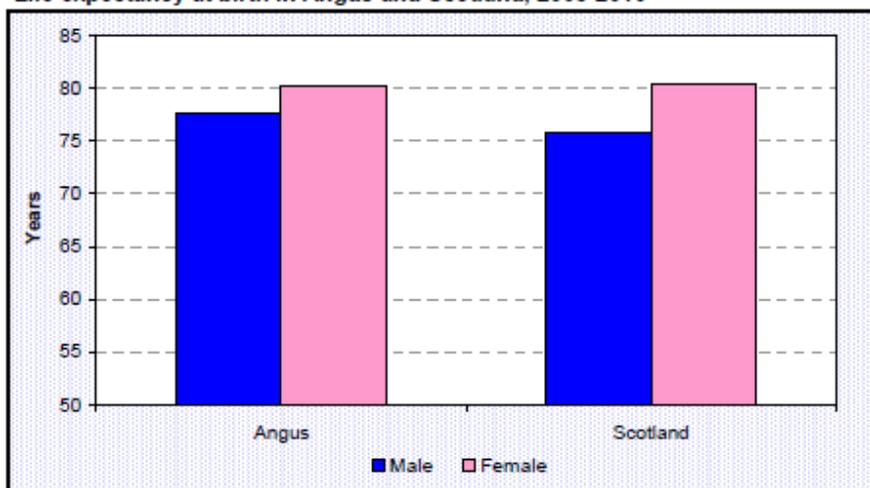


Percentage change in population in Angus and Scotland, 2010-2035 (2010-based projections)



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Life expectancy at birth in Angus and Scotland, 2008-2010



Prevalence of adult obesity in Angus CHP

Disease Register	2006/7	2007/8	2008/9	2009/10	2010/11	2011/12	National Prevalence 2011/12
Obesity	9.52	10.85	10.14	11.41	11.79	11.80	8.63

Gp practice list

size for angus **106,774** **107,337** **107,821** **108,398** **108,731** **109,012**

Data compiled from Annual QMAS data collection.

GP Practice list sizes are taken on 1st January every year.

Prevalence is per 100 patients registered with general practices

**ANGUS
ADULT PARTICIPATION IN SPORT**

sportscotland has produced a factsheet profiling adult participation by sport, geographic area and population group. The data have been taken from the Scottish Omnibus Survey, the main is participation at least once in the last four weeks. The figures cover 2003-06.

Weekly and monthly participation rates for adults in Angus were **33%** and **48%** (Scotland 33% and 46% respectively);

Where figures include walking 2+ miles participation rates were **49%** for weekly and **63%** for monthly participation (Scotland 46% and 59% respectively).

Angus sat in the **third quartile** of Scottish local authorities, in terms of monthly participation in sports.

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 = 40% and 54% respectively).

Age specific data (see Figure 2) shows the following monthly participation rates:

65% for 16-24 year olds (Scotland = 68%).
64% for 25-34 year olds (Scotland = 59%).
48% for 35-54 year olds (Scotland = 49%).
33% for 55+ year olds (Scotland = 28%)

The social class dimension was underlined by the fact that monthly AB participation in Angus (54%) was one and a half times the equivalent rate for the DE group (35%).

Monthly participation rates indicate that:

participation in the AB group (54%) was lower than the national rate of 60%; and participation in the DE group (35%) was higher than the national rate of 32%.

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 only 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) is particularly important for certain sports, whilst for others it was less significant. For example, in Scotland 88% of participants in judo were members of a club compared to only 3% of cyclists.

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, more than three out of ten (32%) adults had undertaken some form of voluntary activity during the previous year; this was a higher proportion than the national rate of 26%.

The rate for sports related voluntary work (16%) was similar to that for the country as a whole (14%).

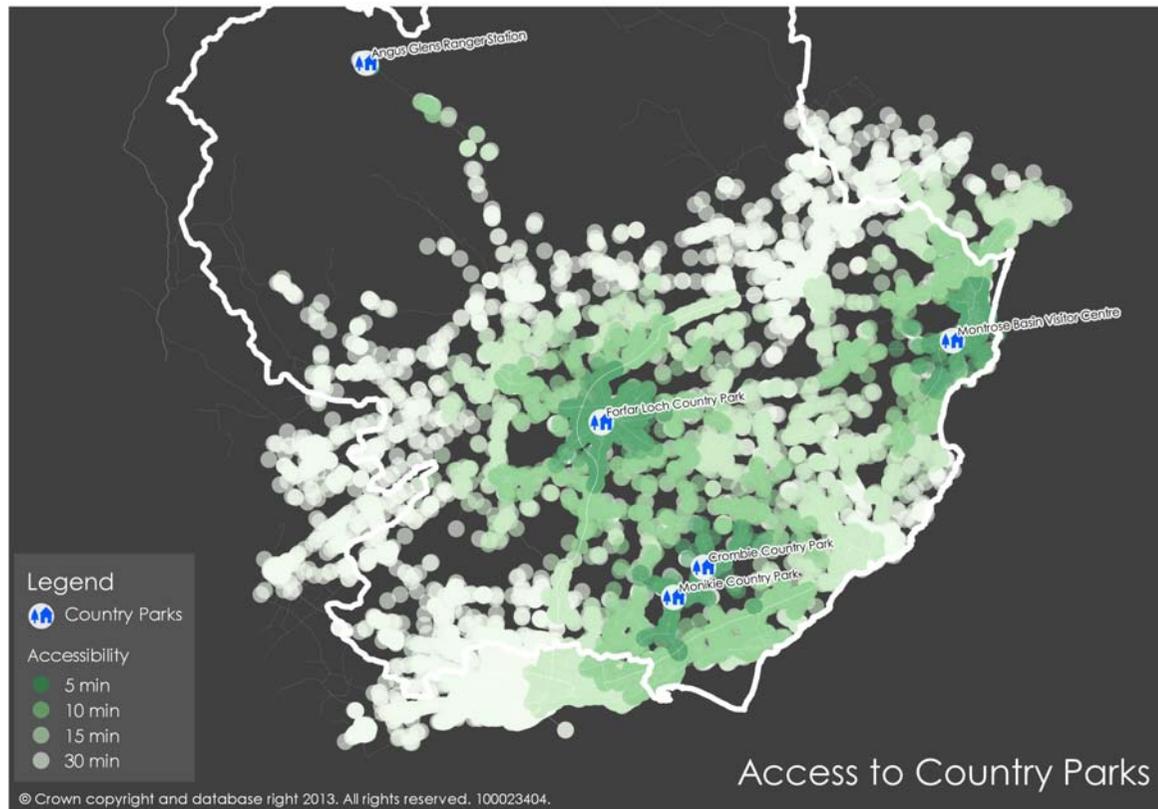
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Evidence Paper 4 – Other Facility Mapping

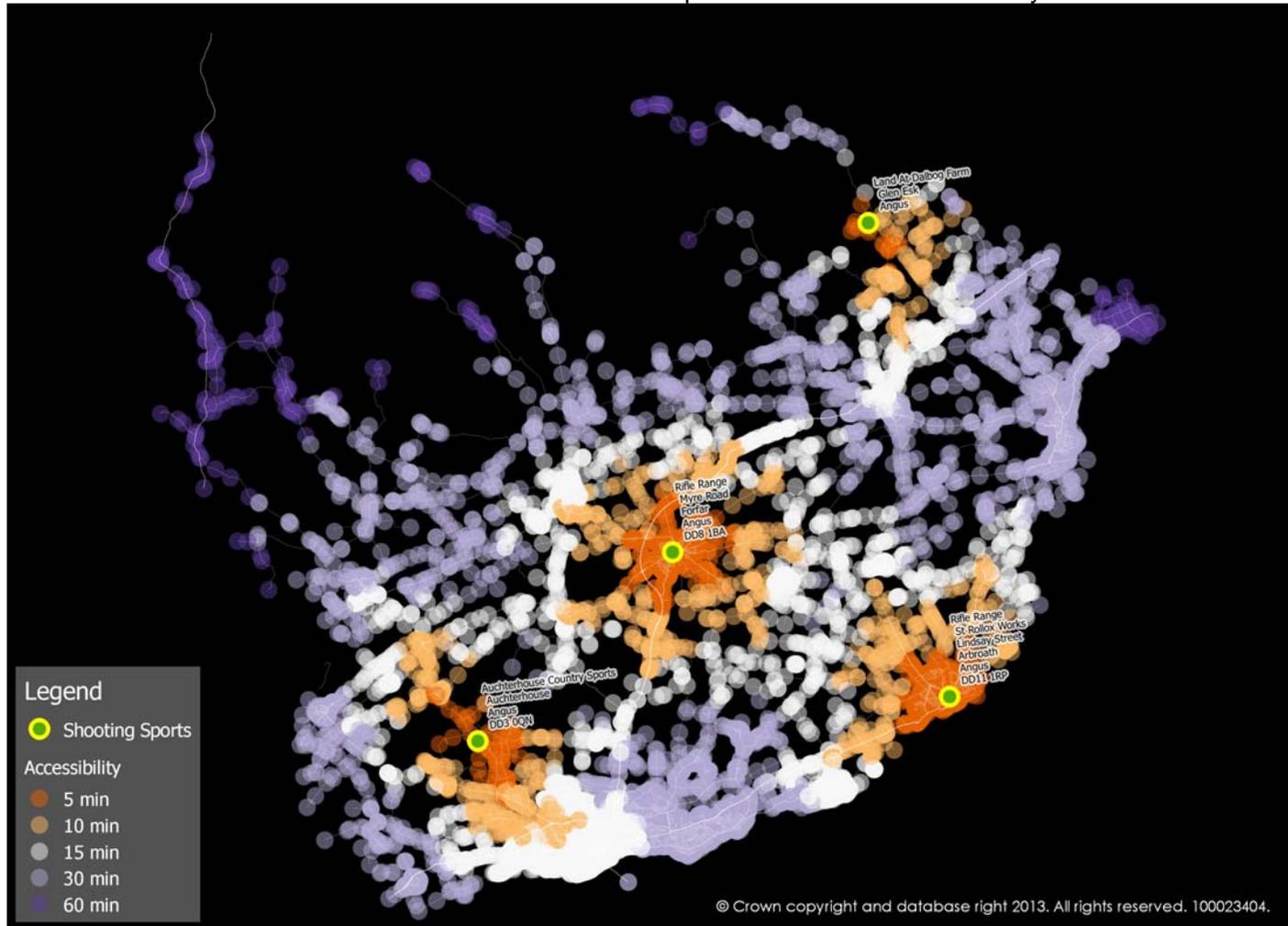
Mapping of other Sports and Physical Activity Facilities

Country Parks – The map below shows Angus 5 country parks. It can be seen that all residents on Angus are within a 30 minute drive time of a Country Park. Many of the conurbations, traditional further away from Country Parks are within 10 minutes due to the locations are Forfar Country Park and the Montrose Basin. There are therefore significant opportunities for Angus residents and visitors to access the Parks.



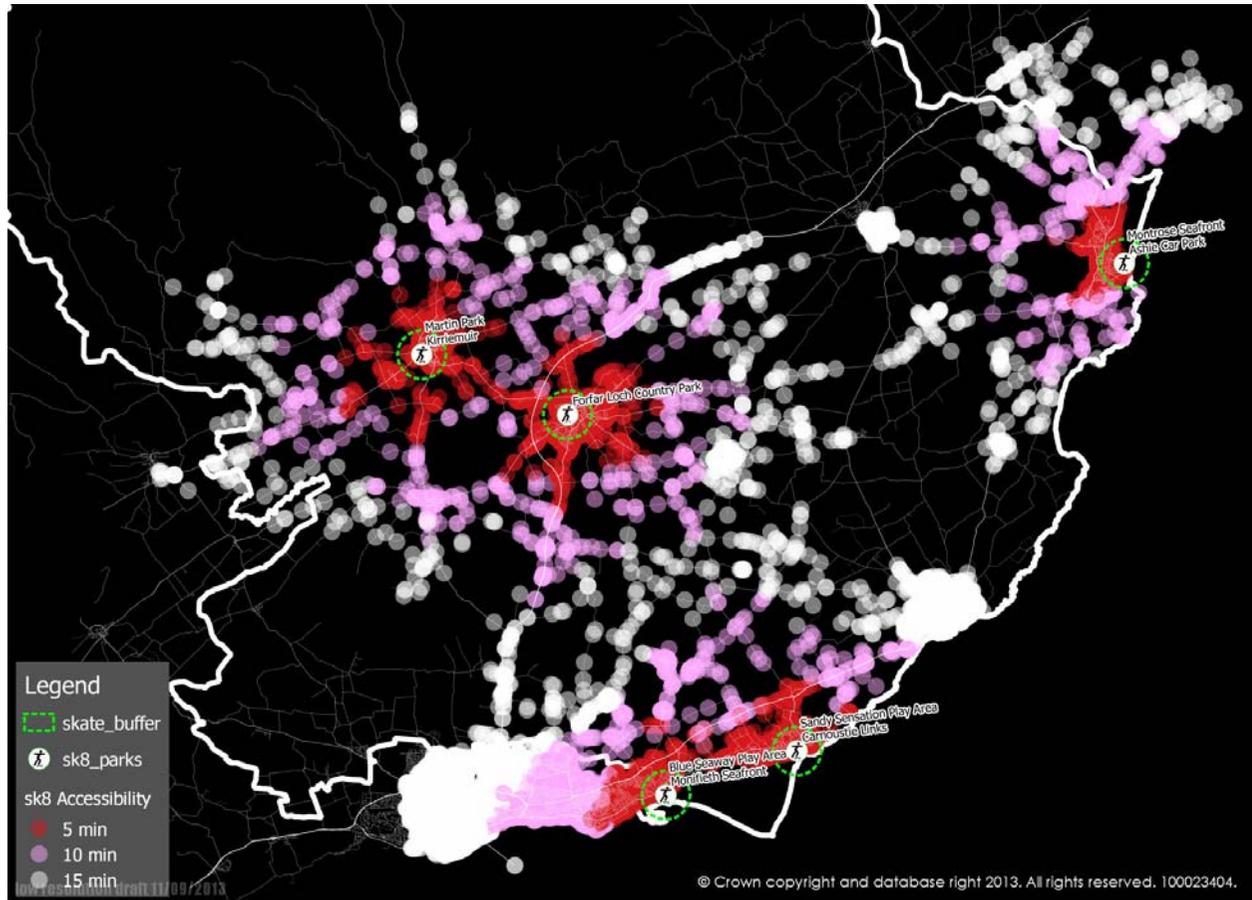
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Shooting / Archery facilities - The four known shooting venues in Angus are mapped below. Shooting is a traditional Scottish pursuit that gives people opportunities to get active. The facilities are spread evenly around the County and the majority of the County is within 30 minutes of a facility. Those residents in the more rural areas do have to travel up to an hour to access a facility.



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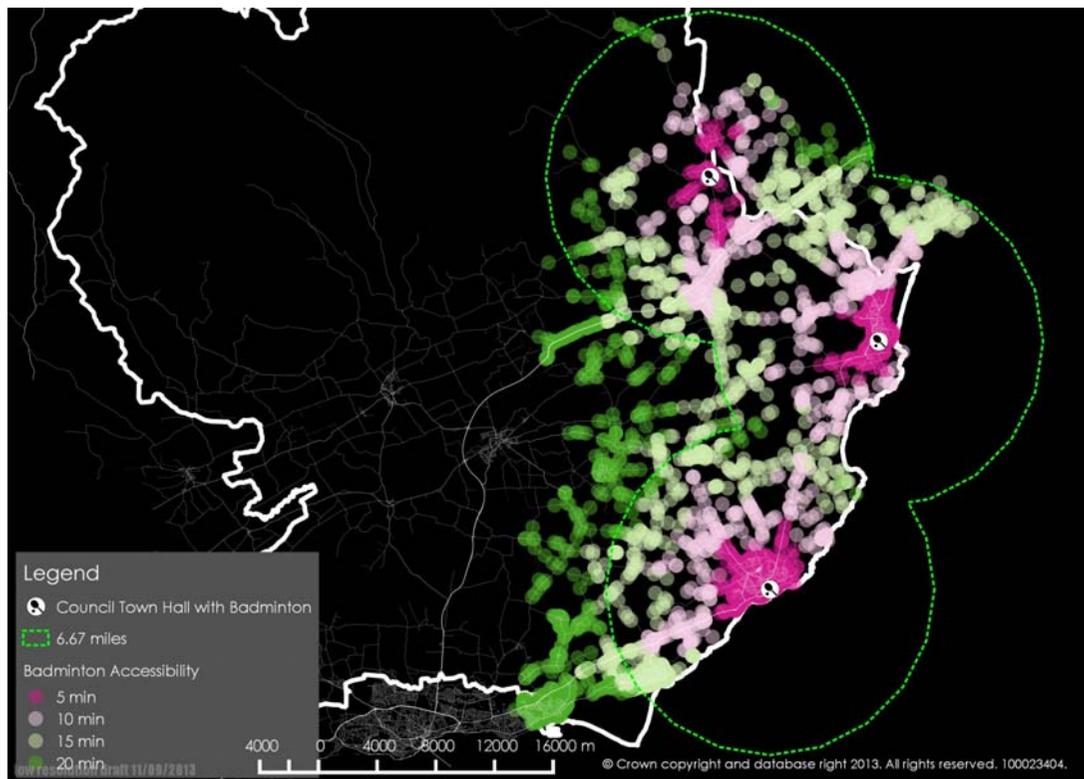
Skate parks - It is known that young people are more likely to access informal open space such as skate parks and parks. However these are more local facilities and it is likely that young people will travel by foot for up to 15 minutes to a park. The map below provides an overview of the skate parks across the County. It can be seen that much of the County is outwith a **15 minute drive time** for a skate park. The green buffer shows a 0.75 mile circumference. Therefore other informal green space networks and activities specifically for young people should be identified within the gaps. Detailed maps for each park showing walk times are also provided.



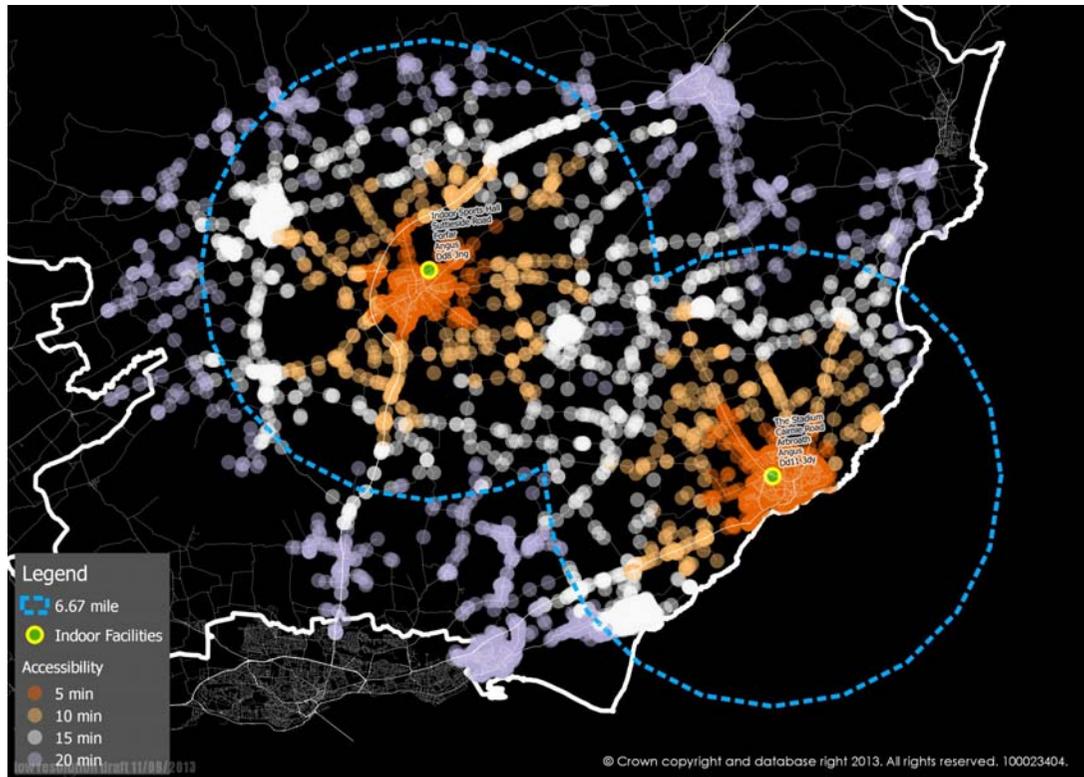
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Town Halls (with Badminton Courts) - It is known that community halls also provide Badminton and other physical activities for communities, particularly those where leisure centres are either a little intimidating or too far away and these facilities can be used to complement activities in leisure centres and provide access routes to them. The map below shows the Councils community hall where Badminton can be played informally. They are over in the east of the Country, but could be used to complement programmes in Arbroath and Montrose Leisure Centres.

- Arbroath Community Centre
- Edzell Inglis Memorial Hall
- Montrose Town Hall



Indoor Bowling Centres – As well as the outdoor bowling facilities discussed within the Playing Pitches Needs Assessments, Angus also has two indoor bowling facilities. They are detailed on the map below. It is noted that the Forfor Centre also has Curling and Skating facilities. It can be seen that the central belt of Angus is covered by these indoor facilities (which provide opportunities for bowlers during the winter.) There could be opportunities for short mat bowls at leisure centres and community halls to complement these centres during the winter.



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Evidence Paper 5 – Consultation

PROFESSIONAL TEAMS STRATEGY WORKSHOP SUMMARY

HOW Focus on those who are **inactive to become active**

❑ Sport and leisure centres

- Child care / cost
- Promotion and marketing
- GP referral schemes
- Make exercise less 'bureaucratic' – why need GP to refer – send the message that those with suitable conditions can attend classes
- Make supported exercise open to more people
- Provide supported visits to venues
- Ensure price is not a barrier – review fees and concession policies so those willing to pay do and those that can't afford it have reductions
- Family friendly facilities / sessions with child care / crèches
- Improve marketing – link with existing groups to find out what people want

❑ Open space and natural heritage

- Improve access to the sites
- Provide supported visits to venues
- Guided walks
- Think about how we let people know what is going on – especially young people

❑ Young People

- Preschool – fully funded nurseries – if attached to schools – similar to school activity – improved health visitor advice
- Schools – increase range of activities available
- Teens – consultation to assess barriers – think about facilities and timetabling and more suitable marketing. Include them in the delivery of programmes and sports – so they are fully involved. Think about role models – important for coaches and instructors. Think about music policies.
- Focus on one afternoon per week for primary schools and secondary schools – teams group, dance, table tennis, badminton, fitness, walks, visits, team sports
- Link with sports clubs in the local community
- Involve coaches / volunteers / parents
- Early intervention for children – primary teachers and PE specialists

❑ Targeted groups

- Should consider women and girls – have specific sessions
- Take sports and activities out into the community – e.g. care homes

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❑ Pathways

Need better working together
Maybe signposting and not pathways for inactive people

❑ Working with partners

Links to Sustrans – Bike It and IBike
Internal council working needs to improve (people in the workshop not know what each other do).
Link up with appropriate groups for funding opportunities
Link with community planning to take forward established groups
Sustainable contracts for staff to carry out good work
More internal communication – so we know what other services are doing

HOW Focus on those who are **active take part more often**

❑ Sport and leisure centres and facilities

Effective use / Shared bookings / Group bookings – improved administration & co-ordination of bookings – for LC's / school facilities
2 for 1 offers or do 5 get 6th free
Incentives for B active members
Programmes to retain more B Active members
Concerned about investment needed into leisure facilities and running leisure centres more like a business not a service.
Although significant funding from NHS at a national level – are there any local opportunities?
Improve existing buildings – more attractive
Improve access to buildings
Sustain and maintain equipment
Review when classes are available
Guidance on intensity / staff knowledge on heart rate training etc
Ask for customer feedback
Ensure we offer people services / facilities that are valued
Maintain variety

❑ Open space and natural heritage

Maintain variety

Incentives for people that log how much they do

Make cycling easy – as can do with young people and families

Think about options for when weather bad... or encourage people to take part as soon as weather good – social media etc

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❑ Young People

Engage pupils more effectively e.g. activities afterschool for 40mins – 1 hour – if mandatory time for activities / clubs or groups
Build confidence / motivation
Keep it current
Social element is important
Consultation

❑ Targeted groups

Target families and parents – set good habits from a young age

❑ Pathways

Priority sports in place
What about for physical activity – need to link and signpost similar activities – e.g activities for young people in leisure centres to country parks (high ropes) or older people on GP ref schemes to free walks in countryside.

❑ Working with partners

Guidance on intensity

WHAT SHOULD WE MEASURE?

Obesity levels
% of Be Active members
% of Be Active members using their cards
Club links – delivering sessions
Sports HUBS – who / age are active within clubs
Against National targets
Primary and secondary school targets for PE each week
Take up rates of current services – how does this relate to national targets?

❑ What is the baseline?

Do we know the baseline? How measure?

❑ What can we measure?

Young people – basic moves and learning outcomes / fun assessments – Rugby
EG Clubs – LTA – adult and junior membership of those that play matches – but not general participation
Leisure Facilities - Headcounts in LC's
Take up rates of current services – how does this relate to national targets?

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Should be joined up with other services to tackle delivering against national targets

Look at non users – those that are not accessing our services

▣ When do we measure?

Annually and quarterly?

Outcomes v outputs v participants v inputs

Focus on participation – as our main priority – annual surveys of Angus residents? Look to measure all service provision – but how does that compare to other Councils?

Meeting with David Bridges, Strathmore Cricket Union on 17 January 2013

1. RB is Secretary of Strathmore Union and of Arbroath United Cricket Club which is the leading club in the area and perhaps the East of Scotland. RB still plays (66) in the Arbroath 3rd team and is very positive on the development of young players and in keeping older players active in the game.
2. After a period in which there was a decline in coaching for young players in Angus there are now active programmes of coaching in Arbroath and at the Forfar Cricket Club There are also several in-school coaching projects in primary and secondary schools
3. A body originating through Cricket Scotland , the Angus Cricket Development Group is designed to organise youth coaching and one of the coaches (working at Forfar CC) is designated Cricket Development Officer
4. Quick Cricket has been a focus of effort in primary school (now up to Primary 6) and Angus schools had a very impressive record at Scottish and UK level. Girls must be included in Quick Cricket teams. Arbroath has girls in its youth teams and one plays in the 3rd team
5. Strathmore Union is now part of the National Cricket League Structure. There are 3 divisions and 30 clubs. Participation and teams have been declining. It also has an U18 (poorly supported) and U15 league with 5 teams and under13 with 7 teams.
6. Indoor cricket is played at Arbroath's Saltire Centre. There is also an indoor facility at Mayfield, Dundee High School premises with involvement of senior and junior players.
7. WIS asked RB what he would do with more resources at Arbroath
 - Arbroath to run a 4th team which needs another pitch
 - Upgrade cub to stage international games; pitch already ok
8. Strathmore Union has now appointed a Junior Convenor to work with U18, U15, U13 age groups with development foci at Dundee, in Angus and in Perthshire
9. Overall position is difficult to assess (talk to CC about cricket) though it is clear that some youth coaching and competitions are operating and there is easy progress to the senior game, this may only be at Arbroath and Forfar. Brechin and Montrose appear to have minimal youth cricket activity.

Meeting with Colin McLeod Carnoustie Links Management 16th Jan 2013

1. Carnoustie Links has 3 golf courses; the Championship (number 2 in the world), Burnside and the Buddon). It also has developed a Golf Leisure complex with pro shop and café but it is not a Golf **Club** in that it has no members and no premises. Various Golf Clubs exist without courses and their members play Carnoustie by having season tickets
2. Carnoustie is, in fact, a public links owned by Angus Council and managed on the Council's behalf by Carnoustie Links Management. There is an annual meeting between the two but the whole operation and finances is in the hands of the Management Company. Angus CC interest is that prices are kept reasonable for local people but also for overseas visitors who are the core of the area's tourism visitors. Colin McLeod's job is largely promoting the courses overseas.
3. Unlike most golf courses today Carnoustie has a waiting list of local players. It is low priced at a season ticket price of just £402 (Angus residents) for unlimited use of all three courses though members begin on the 3rd course, are upgraded to the 2nd course and finally to the Championship course. (This can take along time).
4. Visitors to the Championship course pay £147 per round. They must have a handicap (28/36). Visitors are 80% of Championship players and tee times are allocated between the two categories – visitors and locals.
5. Women are about 100 season ticket holders out of 2,500
6. Junior members are positively encouraged with special prices, free coaching (weekly up to U18). They also avoid the waits and all move through to full membership without delay. They progress thus
 - at under 14 it is £30 pa and they can play the 3rd course
 - between 14/18 it is £130 pa
 - between 19/21 it is £288 paIn fact at U14 a young player, if able, can play all 3 courses. These junior memberships and coaching are promoted around the schools.
7. In fact the membership has 21% at 65 plus (they get a 10% discount – this is new)
8. The wait list (up to 20 years) is caused by the low drop-off with many non-players remaining members at the small fee
9. Discussed trends in golf. CM said he felt that overall golf playing was decreasing.

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Meeting with Colin Brown, Forfar Farmington 16th January 2013

1. CB has been involved in the football scene in the area for many years and he has been responsible for the remarkable emergence of Forfar Farmington largely as a girls' football club. They are now just second to the well-funded Glasgow City teams.
2. CB has been involved with Forfar Athletic FC to develop the pro club pitch as an artificial G3 surface capable of being used without limitation throughout the year. This project followed on the Farmington Club's own move to build a clubhouse for the girls' teams with an adjacent floodlit grass pitch. This is located adjacent to the new G3 facility. It is a large club house with a big hall area
3. Forfar Athletic has a limited role with young people. Apart from the senior side they have an U19 side. The younger ages of boys are dealt with by Forfar Boys' club who have U9 to U18 and have the use of the G3 for their operations.
4. The G3 is fully utilised by the boys and the girls. Farmington girls' club has 143 girls involved with 3 women's sides: 1 at U17, 2 at U15 and 3 at U13 plus younger ages and coaching

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Meeting at Red Lion Caravan Site, Arbroath with Lesley Nicholls on 16th January 2013

1. Red Lion is a private business that operates a large seaside caravan site. It has 289 caravans (and 27 soon to be increased) of which 15 are owned/let by the company and the rest are privately owned and wholly controlled by the owners.
2. The site provides various facilities targeted at the visitors and residents but also have a substantial local clientele. The pool, gym, sauna are popular. There are several private leisure centre operators in Angus: one recently failed (McCogan), another is in Forfar, while the Dave Lloyd Centre at Monifeith is a major venture on the edge of Dundee
3. 80% of the Red Lion's local users are women, mostly in their late 50's. It is felt that they are attracted to the early opening hours, the generally quieter and less busy atmosphere and what the operators feel is probably better equipment. Interestingly there is no big social pull; in summer time there is a café but visits are generally "for purpose" and not social.
4. Teenagers do use the facilities on a pay as you go basis
5. No anti-council opinions

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Meeting with Derek Sim, (Chair) Montrose FC 17th January 2013

1. Montrose has an impressive stadium with a 3G playing surface and modern grandstand and offices. There are 2 Montrose FC youth academy teams who play in National Leagues. However for most of the boys youth football is at Montrose Youth (9-16) who have also involvement with the senior club using the 3G for training
2. The Club has created The Links Charitable Trust to handle the coaching programmes that use the surface throughout the week when the first team is not training. The coaching includes Mini-kickers (age 3-5) and all ages at Youth level. There is a full time coach and a part time General Manager (Peter Davidson). There are 3 paid coaches supplemented by volunteers (5 or 6). There is Adult Coaching on Monday nights and Veterans have 6 a side leagues at over 35 and over 50 (Walking Football!). It is a full week of activity

Sunday	Welfare teams U17 and U19 games
Monday	6a side league (16 teams) and Adult coaching (over 35 and Veterans?)
Tuesday	Local amateur teams and Montrose Youth training until 7pm U17/19 and First team training (local players)
Wed	Local amateur teams and Montrose Youth Training?
Thurs	Local amateur teams until 7pm. U17, U19 and First Team (all players) training
Fri	Midnight football (from 7pm)
Sat	Youth Coaching, Mini Kickers to 12 noon - First Team Game (if no 1st team match - U17 or 19's)

We in addition use our 5 a side pitch for children and birthday parties

During the weekdays the pitch is also used by schools for football and hockey
Fair to say that (excluding first team players and match spectators) you involve about 350 people each week at the ground?

3. Club also provides coaching in schools
4. The Montrose Club uses its charitable trust to use sport as a catalyst to develop young people. A new educational suite is being prepared to deliver educational elements related to football and coaching. The programme works with cluster schools in the area
5. Discussed prices (£180 season ticket for club) re TNS Academy pricing
6. GS sees further development of the Trust concept to embrace all local football interests including the junior and welfare clubs, perhaps the Rugby Club