

Highland Community Planning Partnership

Chief Officers' Group – 19 May 2016

Agenda Item	7.
Report No	COG 13/16

Active Highland Strategy

The COG is asked to:

- endorse the Active Highland strategy and outcomes framework
- support the direction of travel for continued development of the strategy
- support the consultation exercise for the Active Highland strategy
- commit to support implementation of the strategy
- agree that the Active Highland strategy should go the CPP Board meeting on 30 June to ask for sign off

1. Introduction

1.1 This Report presents a brief overview of the development and direction of Active Highland – a refreshed framework of outcomes and commitments for promoting opportunities around physical activity and sport for our population. It replaces Highland Council's Physical Activity and Sport Strategy.

2. Background

2.1 The expiry of Highland Council's Physical Activity and Sport Strategy has provided the impetus to create a new outcomes framework for development and delivery of inclusive, appropriate, physical activity and sporting opportunities for all.

2.2 Based closely on the national Active Scotland outcomes framework, it brings all aspects of physical activity and sport together, in a strategy developed by a broad range of Community Planning Partners and other key stakeholders from the voluntary and statutory sectors.

3. Progress

3.1 Development of this strategy has been undertaken by the Active Highland strategy development group, a sub group of the CPP health inequalities theme group. The draft strategy is attached in Appendix 1. The six key outcomes will form the basis of planning for implementation.

3.2 The strategy has a strong focus on reducing inequalities and improving wellbeing, is underpinned by capacity building at all levels for individuals and

communities, and encourages progression, skills improvement and achievement in chosen physical activity or sport.

3.3 The role of the natural and built environment and of established and new facilities forms a core part of the strategy. This includes making the best use of the natural assets of the Highlands; ensuring access for all and utilising our planning processes, regulations and guidelines to create built environments that encourage physical activity, and increase connectivity.

3.4 The draft strategy is currently out for consultation, with a closing date for comments of Tuesday 7th June. A particular emphasis has been placed on asking stakeholders for comments to help shape the priority areas for development, and agree the most appropriate key performance indicators.

4. Next steps

It is proposed that the final strategy will be brought to the CPP Board on 30th June for approval. Partners will be asked to think about how they can contribute to implement and report on the identified outcomes. Review of the framework will take place through 6-monthly partnership forum events.

4. Recommendations:

4.1 The COG is asked to:

- endorse the Active Highland Outcomes framework
- support the direction of travel for continued development of the strategy
- support the consultation exercise for the Active Highland strategy
- commit to support implementation of the strategy
- agree that the Active Highland strategy should go the CPP Board meeting on 30 June to ask for sign off

12th May 2016

**Authors: Dan Jenkins – Health Promotion Specialist, NHS Highland
Cathy Steer – Head of Health Improvement, NHS Highland**

Active Highland Strategy

Introduction

This Report presents a brief overview of the development and direction of Active Highland – a refreshed framework of outcomes and commitments for promoting opportunities around physical activity and sport in our population. It replaces Highland Council’s Physical Activity and Sport Strategy, and is brought together by a broad range of Community Planning Partners and other key stakeholders from the voluntary and statutory sectors.

With an overarching focus towards reducing inequalities, the agreed framework brings a strong emphasis on improving health and well being, is underpinned by capacity building at all levels for individuals and communities, and encourages progression, skills improvement and achievement in chosen activity or sport.

The role of the natural and built environment, and of established and new facilities, is critical to the success of this strategy. This involves making the best use of the natural assets of the Highlands and ensuring access for all; utilising our planning processes, regulations and guidelines to create built environments that improve health and increase connectivity; and maintaining existing and new facilities to a standard that inspires uptake and ownership among users.

The Active Highland strategy development group (Appendix 1) has developed each of the six priority outcomes to capture: the evidence base; existing and planned activity; gaps; opportunities; and how the outcomes contribute to the Highland CPP priority themes (Appendix 3). These outcomes will form the basis of planning for implementation through the Community Planning Partnership. Different partners are taking the lead in developing and implementing different aspects of the strategy.

Equality: Our commitment to equality directs everything we do		
Capacity Building	1. We encourage and enable the inactive to be more active	3. We develop physical and mental confidence and competence, and personal well-being, from the earliest age and throughout the life course
	4. We maintain and improve our active infrastructure – people and places, including the natural environment.	6. We improve opportunities to participate, progress and achieve in sport
	2. We encourage and enable the active to stay active throughout life	5. We support resilience and wellbeing in communities through physical activity and sport

Key areas to develop for strategy as a whole

- Strengthen the awareness of the importance of regular physical activity and the impact it can have across sectors.
- Seek to maximise health and inclusion through access to opportunities at all levels
- Highlight and facilitate role of all professional contact staff and volunteers (NHS, Highland Council, Third Sector, High Life Highland, private partners) to engage in conversations about physical activity and support people to become more active, and signpost to opportunities as appropriate.

Potential solutions

- Utilise CPP and strategy development group to ensure strong links to associated strategies and action plans - see Appendix 2
- Nurture community capacity and strong volunteering culture
- Continued commitment from all CPP partners to ensure successful implementation

Our strengths

We have a strong foundation of experience, talent and expertise in Highland. We also have a track record of collaboration and commitment within communities and among professional agencies. The combination of these, along with an outstanding natural environment, will allow us to implement this Active Highland strategy and deliver tangible outcomes for our population.



OUTCOME 1: We encourage and enable the inactive to be more active

Context and evidence to support outcome



To increase population levels of physical activity, action is required on multiple fronts in key settings including schools, transport and the environment, health care, the workplace and communities. The development of national and international recommendations (regarding minimum levels and the relevance of 10 minute “chunks” of activity)¹ shows that the greatest proportionate health gains come with moving from no activity to some activity, and then continue to increase up to and beyond the recommended levels.²

In addition, evidence suggests including a social element is important for inactive groups – for example, the potential for social interaction was found to be the main motivator for older people to engage in walking interventions.³ Similarly, a focus on fun and non-competitive provision is cited as important in studies of increasing activity in disabled groups and women and teenage girls.⁴

Key Performance Indicators

This outcome is about reducing inactivity in Scotland. There is no universal agreement about what constitutes low levels of activity for adults or children. Inactivity among adults is currently defined in this framework as less than 30 minutes moderate to vigorous physical activity per week. Globally, in 2013, the WHO developed a new voluntary target for member states to reduce physical inactivity by 10% by 2025.



Suggested indicators		
% of inactive adults	% of inactive children	% who walk for recreation

Development and solutions



Key areas to develop

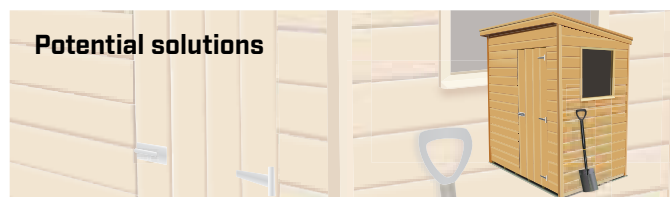
Creation of societal norms of inclusion and participation; and removal of barriers to participation – cultural, environmental, social, personal (ability and confidence), economic,

Communication of opportunities – ensuring everybody knows about appropriate local choices and how to access them.

Support for realistic transitions from inactivity to some / light activity

Reducing/mitigating sedentary behaviours – at home and workplaces

Reducing/mitigating sedentary behaviours – at home and workplaces



Potential solutions

National Walking Strategy Action Plan; increasing access to volunteer-led health walks

Natural Health Service – increased participation in outdoor activities, especially within communities and close to people’s homes

Use of technology to maximise participation

Additional support for traditional non-users of facilities – expansion of ‘Knowing Me Knowing You’ programme through High Life Highland; potential for Community Sports Hubs to address perception of role and broaden reach to non-users

Setting-based programmes to include all – e.g. daily mile in primary schools, workplace walking

OUTCOME 2: We encourage and enable the active to stay active throughout life

Context and evidence to support outcome



An increase in physical fitness will reduce the risk of premature death, and a decrease in physical fitness will increase the risk. The effect appears to be graded, such that even small improvements in physical fitness are associated with a significant reduction in risk. There is evidence of the effectiveness of regular physical activity in the primary and secondary prevention of several chronic diseases, as well as premature death.⁷

There are several known 'drop-off points' for physical activity (particularly transitions from primary to secondary school, and retirement). We also know that physical activity levels generally decrease with age.⁸

Key Performance Indicators

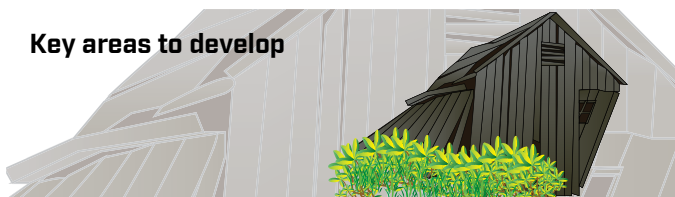
We know that the amount of physical activity we do varies greatly across the lifecourse.

This outcome is about sustaining physical activity habits through key transitions in life and encouraging those who do some physical activity to do some more activity, more often.



Suggested indicators		
% who participate frequently in sport & walking	% of older people who participate in sport & walking	Numbers attending leisure facilities

Development and solutions



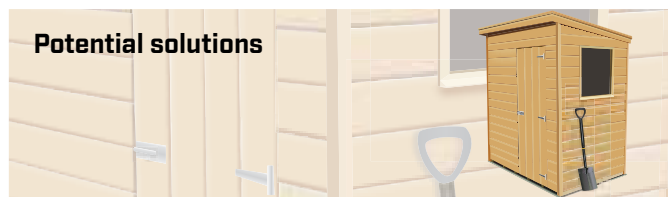
Key areas to develop

Communication of opportunities – ensuring everybody knows about appropriate local choices and how to access them.

Opportunities for family participation

Reducing/mitigating sedentary behaviours – at home and workplaces

Maximise active travel opportunities for everyday journeys



Potential solutions

National Walking Strategy Action Plan; increasing access to volunteer-led health walks

Natural Health Service – increased participation in outdoor activities, especially within communities and close to people's homes

Use of technology to maximise participation

Additional support for traditional non-users of facilities – expansion of 'Knowing Me Knowing You' programme through High Life Highland; potential for Community Sports Hubs to address perception of role and broaden reach to non-users

Buggy walks; promotion of parallel activities for families; supporting volunteering opportunities

Workplace activity initiatives

Links to HITRANS Regional Active Travel Strategy

OUTCOME 3: We develop physical and mental confidence and competence, and personal well-being, from the earliest age and throughout the life course

Context and evidence to support outcome



Physical health is inter-linked with mental health and well-being⁹
 Physical activity is linked with cognition¹⁰. From earliest age physical development goes hand in hand with mental development and well-being¹¹ – “Healthy kids learn better”
 Throughout the early years and beyond, Active Play is a key vehicle to develop the child’s physical, emotional and social development¹². Physical competence and perceptions of physical competence are linked to self esteem¹³

Key Performance Indicators

We want our children and young people to experience the joy of movement and develop positive attitudes to active living. This outcome is about ensuring all Scotland’s children and young people develop the physical confidence and competence required for a foundation of lifelong participation in physical activity and sport. It is also focused on maintaining confidence and participation throughout life transitions.



Suggested indicators			
% of schools achieving target for PE provision (Primary/Secondary)	% of children engaged in active play	% of children who get to school by active travel	% of older people who participate in sport and walking

Development and solutions



Key areas to develop

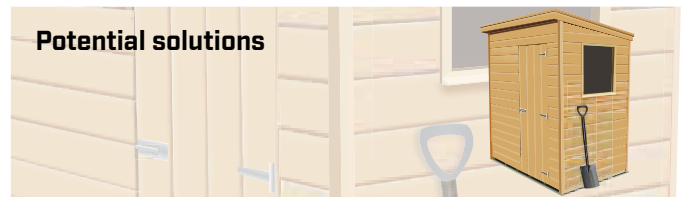
Develop and maximise opportunities for active play and free-play, in line with Highland Play Strategy

Consistency of universal programming in early years and childhood

Physical competency not assessed within School reports

Mental health and wellbeing enhanced through physical activity, especially in quality greenspace

Highlight importance of continued participation in physical activity in preventing risk of falls



Potential solutions

Support actions identified within Highland Council Play Improvement Plan

Universal delivery across Highland of Smart Start (Early years health and wellbeing programme) and High 5 (primary schools health and wellbeing programme)

Stronger links from curriculum time activity to local community opportunities

Natural Health Service – increased participation in outdoor activities, especially within communities and close to people’s homes

Specific additional strength and balance exercises included in Health Walks as standard

Continued roll out and expansion of Branching Out, Green gyms

Setting-based programmes to include all – e.g. daily mile in primary schools, stronger links for physical awareness/understanding/activity within PE teaching; workplace walking

OUTCOME 4: We maintain and improve our active infrastructure – people and places, including the natural environment

Context and evidence to support outcome



There is an ever increasing body of research demonstrating the health benefits of “Green Exercise” including: outdoor therapy, nature and conservation projects, formal and informal outdoor physical activities, etc (e.g. The Horticultural Therapist). The unique appeal of the Highland region also provides opportunities for both residents and visitors to improve health from outdoor recreation activities (visitor expenditure estimated at £2.6 billion in 2012)¹⁴.

The Highland area covers a third of the Scottish landmass. It has an outstanding natural environment. Over the past 10 years the region has experienced population growth at more than double the rate for Scotland as a whole. The region has structural challenges to overcome; but also immense potential with new economic and environmental opportunities to maximise.

Key Performance Indicators

This outcome is about improving the infrastructure in Highland that enables physical activity, i.e. the sports and exercise infrastructure and the built environment through, for example, better cycling and walking infrastructure, and wider planning policy. Critically, it is also about enhancing the people side of Highland’s active infrastructure, the parents, volunteers, teachers, coaches and leaders who play a vital role.



Suggested indicators		
% satisfied with leisure facilities	% with quality greenspace access within 5 minutes of home	Numbers engaged in active volunteering (sports and exercise)

Development and solutions



Key areas to develop

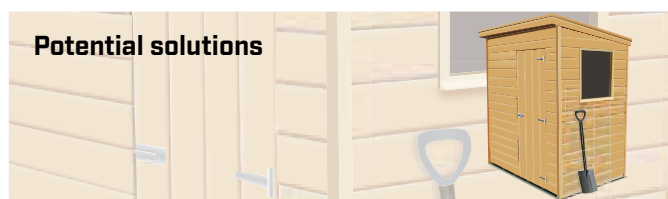
Access to a range of opportunities and quality facilities across the region

Access to and use of local/urban greenspace as well as wider/traditional natural environment

Community involvement in development and management of facilities

Active travel infrastructure and promotion of everyday journeys to include active travel elements

Planning developments are considerate of creating environments that encourage physical activity



Potential solutions

Natural Health Service – increased participation in outdoor activities, especially within communities and close to people’s homes

Review potential for better use of school / community space

Transport schemes / active travel investment / links to national funding opportunities / links to HITRANS Regional Active Travel Strategy

Address long-term needs of pitch sports through appropriate installation of modern synthetic pitch surfaces and floodlighting

Strategic planning for capital investment

OUTCOME 5: We support well-being and resilience in communities through physical activity and sport

Context and evidence to support outcome



Mind and Mental Health Foundation report includes the Five Ways to Wellbeing – point 2 is Be Active. The definition is suitably inclusive – “Go for a walk or run. Step outside. Cycle. Play a game. Garden. Dance. Exercising makes you feel good. Most importantly, discover a physical activity you enjoy and that suits your level of mobility and fitness”¹⁵.

Institute for Volunteering Research literature review investigates social capital and volunteering and there is considerable evidence that volunteering can bring various benefits¹⁶. Highland Third Sector Interface Census shows over 250 Voluntary Sector Organisations providing “sport”¹⁷.

Physical activity and sport provide many routes for volunteer participation – including health walk leader, Active Schools, local clubs, Young Leaders programme, etc. Paths for All has commissioned three Social Return on Investment (SROI) studies in Glasgow, Stirling and the Scottish Borders, which show that for every £1 invested in Health Walks between £8 and £9 worth of social benefits were generated for society¹⁸. Step It Up Highland case studies regularly demonstrate greater sense of community, reduced isolation and improved social networks as a result of participation.

Key Performance Indicators

This outcome is about the development of communities through sport and physical activity, rather than developing sport in communities. Sport and physical activity is often seen as an end in itself, but can also be a means to develop wider social outcomes in communities, for example using sport to address education, employment and crime related issues.



Suggested indicators		
% who perceive their community as safe for play	% who perceive their community as safe for walking	Numbers engaged in active volunteering (sports and exercise)

Development and solutions

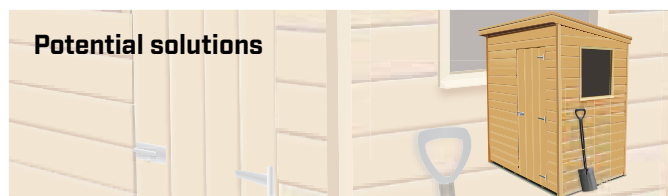


Key areas to develop

Encouraging volunteering, with particular attention to succession planning.

Supporting access to entry level activities.

Infrastructure / opportunity / club development in areas of deprivation.



Potential solutions

Community Development to include physical activity as themes – e.g. women’s cycling and personal confidence projects (currently provided by Velocity), enhanced role for Community Sports Hubs in supporting community capacity building.

Further development of access level community based programming, including Step It Up Highland ‘Step Out’ programme of short walks, walking football, buggy walks, ‘Knowing Me, Knowing You’ supported leisure access scheme through High Life Highland.

Link to community organisations e.g. Men’s Sheds; also greater physical activity development emphasis through networks of Highland Third Sector Interface.

Opportunities presented through Community Empowerment Act to support communities to become more involved in local facilities and services.

OUTCOME 6: We improve opportunities to participate, progress and achieve in sport

Context and evidence to support outcome



Sport may be associated with improved psychosocial health in addition to improvements attributable to participation in physical activity. Specifically, club-based or team-based sport seems to be associated with improved health outcomes compared to individual activities, due to the social nature of the participation. Notwithstanding this, individuals who prefer to participate in sport by themselves can still derive mental health benefits which can enhance the development of true-self-awareness and personal growth which is essential for social health¹⁹.

Sport continues to have a significant impact on the Scottish economy. Sport related industries increased their contribution to the value of the Scottish economy, increasing from 1.9% to 2.0% from 2010 to 2012. This equates to an increase in gross value added from £1.9 billion in 2010 to £2.1 billion in 2012. Employment in sport and associated industries are estimated to account for 52,300 full time equivalent jobs in Scotland which is 2.5% of total employment in 2012²⁰.

Participation in sport has remained fairly static over the last decade²¹. Therefore the improvement of opportunities to participate, progress and achieve remains a priority. Local and national monitoring provides good evidence of participation levels, and supports planning for this outcome.

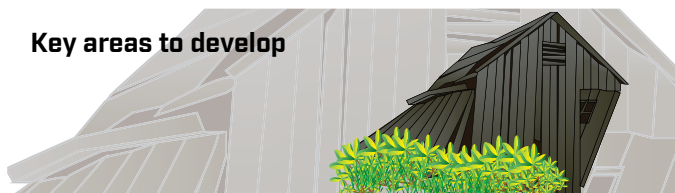
Key Performance Indicators

This outcome is about developing and supporting a world class sporting system at all levels, motivating more organisations and individuals to get involved and enabling the broadest range possible of people to participate, progress and achieve in sport.



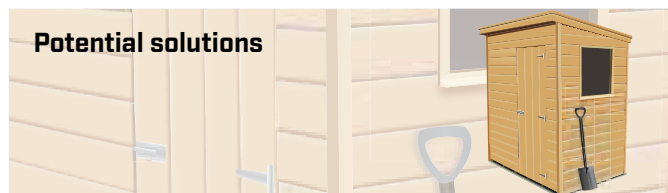
Suggested indicators		
% of adults participating in sport (excludes walking)	% children participating in sport (excludes walking)	Number of Team Scotland members born or living in Highland

Development and solutions



Key areas to develop

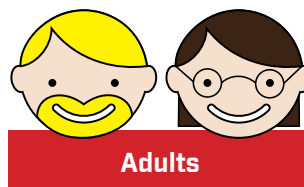
- Disability programmes
- Physical competency not assessed in school reports
- Enhance performance development programme - low numbers of performance coaches
- Improved links: across all sports in Highland; between clubs and Active Schools; between school, after-school and club participation
- Inclusive access to outdoor sports



Potential solutions

- Expansion of role of Community Sports Hubs
- Developing further volunteering opportunities that link directly with sport clubs, including secondary school and Active Schools support
- As facilities are developed, ensure foundations for the development of performance athletes are in place
- Pathway development and improving links across settings and sports
- Use school sports awards and competitions to support performance pathways
- Planned approach to outdoor sport
- Highland Disability Sport

Existing Programmes & Activities



key	Early years	Children & young people	Adults	Older Adults
------------	-------------	-------------------------	--------	--------------

Settings-based activity	Early years	Children & young people	Adults	Older Adults
Smart Start (Health and Wellbeing)				
High 5 (Health and Wellbeing)				
2 hours quality PE for every child				
School Sport competition				
Active Schools Activity Programme (inc. Wide variety of options)				
Leisure facilities (High Life Highland plus other providers)				
Legacy 2014 – Dance Activity				
Cycle 2 Work				
Cycle Friendly Employer status				
Healthy Working Lives				
Walk at Work Programme				
Step Count Challenge				
Residential Care activity programmes				
Health Promoting Health Service				
Facilitated Parent and baby / toddler groups				
Outdoor activity programming				

Social Support and associated skills linked activities	Early years	Children & young people	Adults	Older Adults
Ceilidh nights, dance groups, etc				
Variety of intergenerational activities for older and younger people including Knit & Natter and digital techno sessions				
Engagement with Museums programme with Highland mental health groups				
Bookbug programme throughout libraries and community venues in Highland				
Books on prescription programme in Libraries – self help supported by GP referral				
Work placements and volunteering opportunities including (DoE) for young people				
Saltire Awards				

Walking initiatives	Early years	Children & young people	Adults	Older Adults
Active Travel Programmes				
Walk to school campaigns				
Mile a Day in Primary Schools				
Buggy Walks				
Community Walking Groups				
Step it up Highland				
Cairngorms Walking to Health				
Walking Football				
Legacy 2014 – Health Walks				
General implementation of National Walking Strategy				
‘Wellbeing walks’ (Scottish Waterways Trust)				

Targeted programmes	Early years	Children & young people	Adults	Older Adults
Play @ home				
Implementation of Play Highland Strategy				
Private early years activity groups, e.g. baby yoga, tumble tots				
Greater participation in secondary school years by promotion of participative sport and dance – priority towards girls				
Highland Disability Sport				
Active Travel				
Knowing me, Knowing You				
You Time				
Strength & Balance Classes				
Dementia Friendly Walking Groups				
OTAGO falls prevention classes (including tele-link dementia friendly OTAGO)				
Legacy 2014 bid – increase health walks and dance activity				
Physical Activity support for cardiac rehab, cancer and other specific conditions				
Primary care signposting pilot				
HLH Leadership Programme (12-25)				
Duke of Edinburgh programme				

Existing Programmes & Activities (continued)

Environmental				
Greenspace development – community woods, SSSIs*, coastal environments, etc.				
Branching Out – mental health support				
Green Gyms				
Community Growing spaces				
Core paths development				
Path Grading System				
Community Street Audits				
Adopt a path schemes				
NHS Greenspace development				
John Muir Awards				

Sport / Activity clubs				
Development of Community Sport Hubs				
Range of Activity sessions provided by Leisure facilities				
Volunteers				
High Life Highland Leadership Programme (12-25)				
Jog Scotland groups				
Sport specific regional development groups				

Appendices and references

Appendix 1: Membership of Active Highland Strategy Development Group

NHS Highland

The Highland Council

High Life Highland

sportscotland

Scottish Natural Heritage

Highland Third Sector Interface

University of the Highlands and Islands

Paths for All

Scottish Disability Sport

Cairngorms National Park Authority

Appendix 2: Connecting strategies National

Natural Health Service

Active Scotland

National Walking Strategy

Cycling Plan for Scotland

Community Empowerment Act

Curriculum for Excellence

Health Promoting Health Service

Local

For Highland's Children 4

Play Highland

Outdoor Learning Strategy

NHS Highland Healthy Weight Strategy

Facilities Strategy

Active Cairngorms Strategy

HITRANS Regional Active Travel Strategy

*Sites of Specific Scientific Interest

Appendix 3: Contribution to Highland CPP priority themes

Early Years	Giving our children the best start in life; quality physical education from earliest age.
Older People	Maintaining independent living, reablement, and participation in physical activity and sport through all stages of life Volunteering opportunities. Access to facilities and greenspace improves health outcomes in later life and promotes independent living
Employment	Reduce sickness absence Offering supported, high quality volunteering opportunities that enable individuals to become equipped to enter or re-enter the workplace; e.g. volunteer coach training gives greater skills and can lead to employment. More jobs in the leisure / outdoor sector, and also Physical Education / Active Schools.
Environment	Improving environmental infrastructure and access. Increasing environmental/conservation activities e.g. green gyms Reducing carbon emissions by encouraging cycling/active travel Making the connection between people and the environment and encouraging enjoyment. Quality of local environments is further improved through strengthening community capacity and connectedness and developing stronger sense of ownership.
Economic development	Developing leisure/outdoors opportunities Increasing tourism through activity opportunities Infrastructure improvements provide a key component of economic development Realising the contribution of volunteering to local economies Staging of world class sporting events boosts local economies
Health inequalities	Ensuring opportunities are available in locations and ways which are likely to reduce inequalities in access and make physical activity and sports opportunities available to all Targeting areas of deprivation; build community capacity Providing specialist outreach and targeted services for particularly high risk individuals. Providing and developing resources to support self help initiatives in the community Nurturing strong and visible volunteering cultures to support community involvement
Safer Highland	Developing diversionary activities / things to do for young people. Facilitating stronger community cohesion Continuing to develop safer routes to schools
Community Learning and Development	Encouraging community aspirations and developing community capacity, skills and resilience. Providing informal learning opportunities in community settings, promoting community cohesion and a sense of belonging Encouraging better use of built infrastructure by communities, and encouraging sense of ownership and responsibility for upkeep.

References

1. <https://www.bhf.org.uk/search/all?keyword=physical%20activity%2010%20minutes%20research>
2. Dr Mike Evans – 23 ½ Hours - <https://www.youtube.com/watch?v=aUalnS6HIGo>
3. NICE (2012). Walking and cycling: local measures to promote walking and cycling as forms of travel or recreation. <http://www.nice.org.uk/Guidance/PH41/Evidence>
4. Public Health England (2014) Identifying what works for local physical inactivity interventions. https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/374560/Whatworksv1_2.pdf
5. EFDS (2013) Disabled People's Lifestyle Survey: Understanding disabled people's lifestyles in relation to sport. Defining current participation, preferences and engagement to provide more attractive offers in sport. Report for sportengland.
6. House of Commons; Culture Media and Sport Committee (2014) Women and Sport: First Report of Session 2014-15 (HC 513 [incorporating HC 809, session 2013-14] TSO, London <http://www.publications.parliament.uk/pa/cm201415/cmselect/cmcomeds/513/513.pdf>
7. Warburton D et al (2006), *Health benefits of physical activity: the evidence*
8. and 21. Scottish Health Survey <http://www.gov.scot/Publications/2015/09/6648/318793>
9. Ahn, S., & Fedewa, A. L. (2011). A Meta-analysis of the Relationship Between Children's Physical Activity and Mental Health [English]. *Journal of pediatric psychology*, 36(4), 385-397.
10. Tomporowski, P. D., Davis, C. L., Miller, P. H., & Naglieri, J. A. (2008). Exercise and Children's Intelligence, Cognition, and Academic Achievement, 111.
11. Goswami, U. (2008). *Cognitive Development: The Learning Brain*. Hove: Psychology Press
12. Whitebread, D., Basilio, M., Kovalja, M. & Verma, M. (2012). The importance of play. *Toy Industries of Europe (TIE)*
13. Ekeland, E., Heian, F., Hagen, K., & Coren, E. (2005). Can exercise improve self esteem in children and young people? A systematic review of randomised controlled trials. *British Journal of Sports Medicine*, 39(11), 792
14. <https://thehorticulturaltherapist.wordpress.com/links/research-links/>
15. *Mind and Mental Health Foundation* http://www.local.gov.uk/c/document_library/get_file?uuid=bcd27d1b-8feb-41e5-a1ce-48f9e70ccc3b&groupId=10180
16. Institute for Volunteering Research <http://www.ivr.org.uk/images/stories/Evidence%20Bank/Strong%20Communities%20literature%20review.pdf>
17. Highland Third Sector Interface Census http://www.highlandtsi.org.uk/uploads/1/8/4/9/18493820/highland_third_sector_census_2015_ab_for_circ.pdf
18. Paths for All <http://www.pathsforall.org.uk/pfa/news/health-walks-proven-to-make-people-fitter-healthier-and-happier.html>
19. A systematic review of the psychological and social benefits of participation in sport for adults: Informing development of a conceptual model of health through sport. Eime, Rochelle M.; Young, Janet A.; Harvey, Jack T.; Charity, Melanie J.; Payne, Warren R., **The International Journal of Behavioral Nutrition and Physical Activity**, 2013, 10
20. Economic Importance of Sport in Scotland 1998-2012', written by the Sport Industry Research Centre at Sheffield Hallam University for **sportscotland**; 2014

Active Highland Strategy (Consultation Exercise)

The expiry of Highland Council’s Physical Activity and Sport Strategy has provided the impetus to create a new framework for supporting the health, wellbeing and achievements of the population of the Highland Community Planning Partnership through the development and delivery of inclusive, appropriate, physical activity and sporting opportunities for all.

Based closely on the national Active Scotland outcomes framework, it is a way to bring all aspects of physical activity and sport together, in a strategy developed by a broad range of Community Planning Partners and other key stakeholders from the voluntary and statutory sectors.

We would very much value your views to help shape and finalise the new strategy by taking the time to respond to the following questions;

The vision for Highland is that the health and well-being of people in the area is improved through engaging in physical activity and sport.

1.) Please tell us if you agree or disagree that the six key outcomes set out below will help achieve the vision of a more Active Highland:

Outcome	Agree	Disagree	Comments
1. We encourage and enable the inactive to be more active			
2. We encourage and enable the active to stay active throughout life			
3. We develop physical and mental confidence and competence, and personal well-being, from the earliest age and throughout the life course			
4. We maintain and improve our active infrastructure – people and places, including the natural environment.			
5. We support resilience and wellbeing in communities through physical activity and sport.			
6. We improve opportunities to participate, progress and achieve in sport Encourage and increase volunteering in sport and recreation.			

2.) Which of the above outcomes do you or your organisation relate to the most? (Tick as many as appropriate)

Outcome 1	Outcome 2	Outcome 3	Outcome 4	Outcome 5	Outcome 6

3 The Key Performance Indicators that will capture the progression and achievements under the Active Highland Strategy are still being decided. Please suggest indicators that you feel would most appropriately measure the impact of this work. These should be both relevant and realistically measurable within existing structures and resources.

Outcome	Suggested key performance indicators
1. We encourage and enable the inactive to be more active	
2. We encourage and enable the active to stay active throughout life	
3. We develop physical and mental confidence and competence, and personal well-being, from the earliest age and throughout the life course	
4. We maintain and improve our active infrastructure – people and places, including the natural environment.	
5. We support resilience and wellbeing in communities through physical activity and sport.	
6. We improve opportunities to participate, progress and achieve in sport Encourage and increase volunteering in sport and recreation.	

4. Key areas to develop have been identified within each outcome. If you feel other areas are of higher priority, please identify them here, along with any potential solutions you might think of.

Outcome	Key areas to develop and potential solutions
1. We encourage and enable the inactive to be more active	
2. We encourage and enable the active to stay active throughout life	
3. We develop physical and mental confidence and competence, and	

personal well-being, from the earliest age and throughout the life course	
4. We maintain and improve our active infrastructure – people and places, including the natural environment.	
5. We support resilience and wellbeing in communities through physical activity and sport.	
6. We improve opportunities to participate, progress and achieve in sport Encourage and increase volunteering in sport and recreation.	

5. Please tell us about any other areas of work that you feel would not be addressed under the outcomes set out above and that partners in Highland should be concentrating their effort and resources to in order to achieve?

Any further comments:

Please tick the box of the sector that you represent:

- Council / Trust
- Health / National Agency
- Sports Council / Community Sport Hub
- National Governing Body of Sport
- Voluntary Sector
- Health and Well Being
- School / Child Provision
- Higher or Further Education
- Other

To assist in the understanding of the consultation and to feedback to you, if you are happy to do so please can you provide details of the organisation this response represents with contact details.

Organisation:

Address:

Contact name:

Email:

Tel:

Please return to: dan.jenkins@nhs.net

Or Dan Jenkins, Health Improvement, Assynt House, Beechwood Business Park, Inverness, IV2 3BW