



# Essex Local Delivery Pilot

*Tackling the issues of physical inactivity in Essex head on*

**Chapter One**  
*Getting ready for system change*



November 2018

## Vision

**“Our vision is to tackle the issues of inactivity in Essex head on and for our county to become a beacon for best practice in reducing inactivity.”**

## Mission

**“Our mission is to learn what works and deliver sustainable, whole system change.”**

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### **Chapter One Research**

The full research reports are available to view online:

1. [Tackling Physical Activity in Essex: Readiness for Systems Change, Collaborate CIC, October 2018](#)
2. [A Review of Physical Activity Data and Insight in Essex, Intelligent Health, October 2018](#)
3. [Essex Local Delivery Pilot: Action Research Initial Evaluation, University of Essex, October 2018](#)

# Welcome to the Chapter One Report



## Councillor John Spence CBE, Chair, Essex Health & Wellbeing Board and Chair, Essex LDP Strategic Sponsors Group

In July 2018 Essex County Council dedicated a Motion on the importance of physical exercise. To give this unequivocal message is massively significant and we need to engage the local authorities in addressing it.

In the roots of so many health conditions is the lack of physical activity and to tackle it we need to crack whole system change.

Whole system change is about focusing on the outcomes and not the service provision – it's about health, justice, education, transport and a wide range of public, community and voluntary organisations working collaboratively on a single cohesive plan which delivers our vision for the county; The Future of Essex.

It's got to be embedded across the county to make a real difference. For example, creating spaces for walking is not just about a Section 106 agreement in planning – it needs to be co-produced with the local community to ensure pathways link up communities and make walking easy and safe.

This first period of the Local Delivery Pilot (Nov 17 – Nov 18) has been an essential period of learning about Essex's readiness for whole system change and understanding what works and what doesn't and what needs to be done. We have learnt more about the lives of the individual people most in need from our three main target groups of families, older people, and people with poor mental health. However, there is a lot more to learn and share.

I am very encouraged to see the pace and momentum which the Local Delivery Pilot has achieved, including its ability to mobilise different organisations and sectors. It's important we continue the positive progress and deliver a successful LDP that is innovative, gets thousands of people most in need more active, and brings communities together through a system that works for everyone.

The Essex Local Delivery Pilot (LDP) is a once in a generation opportunity to make a difference to the people of Essex, addressing the high levels of inactivity in our most deprived communities. It will supercharge the delivery of Active Essex's strategy to get 1 million people active by 2021.

This is transformational change and Chapter One of the Essex LDP has been about finding out the strengths and weaknesses of different systems that impact on individuals and communities.

We have been thinking about long term sustainability in our system and how to work in fundamentally different ways. This is out of the box thinking – who would have thought, for example, that a local pub in Jaywick would be part of the plan?

I hope you will enjoy reading the story of our journey so far, including the findings of three important strands of research undertaken by Collaborate CIC, Intelligent Health and the University of Essex.

The findings have helped shape our strategic priorities for Chapter Two 'Delivering system change'. We are working with our partners in Basildon, Colchester and Tendring to run a series of local implementation and community engagement events to get as many people and organisations as possible involved in the delivery of Chapter Two.

Finally, I would like to thank all the stakeholders in the Local Delivery Pilot Project Group who have come together to make Chapter One happen.

I look forward to working together going forward.

**Jason Fergus, Head of Essex LDP and Active Essex**



## Essex County Council Motion on the importance of physical exercise

Proposed by Councillor Gooding and seconded by Councillor Spence:

'This Council recognises the importance of physical exercise in avoiding social isolation, safeguarding physical & mental health and tackling obesity and associated diseases such as diabetes.

This Council therefore commits, in line with our "health in all policies" approach, to work with all Councillors and staff of Essex County Council to encourage physical exercise.

### This Council also calls upon all partners to:

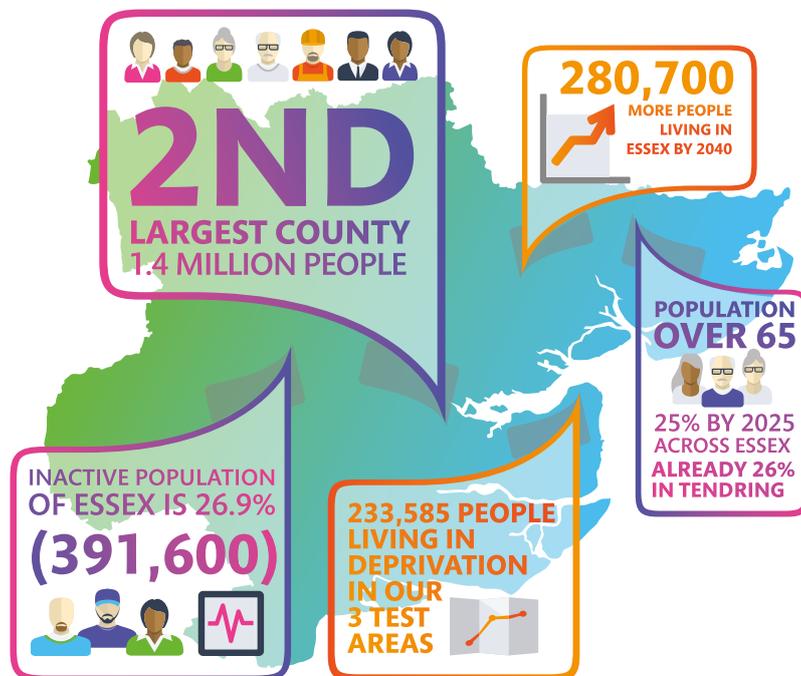
1. Work in collaboration to ensure the success of the Active Essex programme; in particular to translate the lessons of the Sport England pilot in Basildon, Colchester and Tendring across the county.
2. Promote a whole system approach through the emerging joint health and wellbeing strategy.
3. Recognise that education starts young and therefore promote school participation in physical exercise, particularly the "daily mile".

**Approved by full Council  
on 10 July 2018**

# “An inactive society is a dying society.”

Dr William Bird, CEO of Intelligent Health and Expert Adviser for Essex LDP

## Executive Summary



Essex was chosen by Sport England as one of 12 areas in England to undertake this ground breaking work because of the range of significant problems and opportunities which exist in the county of Essex.

There are high levels of physical inactivity, particularly in the areas of greatest need and deprivation. The size and structure make Essex complex, with two tiers of local authority. There are unique problems of poor urban planning, as well as long term and stubborn deprivation in many coastal communities. Alongside these issues are the significant pressures on existing services and communities brought about by an explosion in new housing developments.

In spite of these significant systemic problems, the bid put forward by Essex to Sport England offered real hope and opportunity for innovative and sustainable solutions.

Essex is already fully committed to whole system change at the highest level through the Essex Assembly and the shared vision 'The Future of Essex' and the LDP has become an integral part of this broader whole system change ambition.

Our work in Chapter One, including the three strands of research with Collaborate CIC, Intelligent Health and the University of Essex, has culminated in the development of seven strategic priorities. These priorities are focused on what we need to do to achieve 'whole system change' and reduce inactivity.

During the Chapter One period we have confirmed our priority to focus on using physical activity to tackle the worst social and health inequalities in Essex. During 2018, the LDP Project Group agreed three clear outcomes and three priority target groups (see page 17), with a focus on testing new approaches in the 224 Lower Super Output Areas (LSOAs) in Basildon, Colchester and Tendring that represent the most deprived communities. A total of 233,585 people are living in deprivation in our three test areas.

We believe it is important to strike a balance between targeted interventions and a universal offer if we want to change levels of physical activity across the population. We need all of our communities to see physical activity as a way of life and to have access to the facilities and opportunities to be active, which is where our work on whole system change and active environments will be vital.

Focusing solely on the most disadvantaged will not reduce the levels of physical inactivity and health inequalities sufficiently. To reduce the steepness of the social gradient in physical inactivity, actions must be universal, but with a scale and intensity that is proportionate to the level of disadvantage. The needs and characteristics of our target audiences must be designed into our universal offer. This is called proportionate universalism and will be a key value that we hold when delivering the LDP.

### Seven strategic priorities

#### 1. A whole system approach

There was an overwhelming feeling that the LDP represents a great opportunity to not only change the way we address physical activity but to test and embed a fundamental shift in the way that systems operate and set the principles and methodologies for future collaboration in Essex. Through the LDP our systems leadership partners, Collaborate and Intelligent Health, will work with us to develop new tools, techniques, and a more skilled and collaborative workforce.

#### 2. Increase community engagement and cohesion through new social movements, networks and communications

The findings of our research show how important community engagement will be in our Chapter Two.

We need to develop a two way relationship with residents and community groups. This is the only way we can begin to engage the unusual suspects that are so important to enable us to engage new audiences. Many public sector organisations partner with and fund a small amount of trusted voluntary and community organisations known as 'usual suspects'. A new way of thinking is to find and empower hundreds of 'unusual suspects', who are often small formal and informal groups that usually operate at a very local level and have never before received money or support from the public sector.

This approach removes silos, encouraging the "unusual groups and unusual leaders" to come forward and create a space for their ideas, giving them a voice and a role in the system.

It is critical to ensure that the least heard voices are not being left behind and that we are providing a positive environment for change in the challenging circumstances of our most deprived communities.

A key component of this will be changing our language from seeing residents as passive recipients of services to engaged co-producers and deliverers of local led activities and we will support the creation of new social movements around physical activity.

In Chapter Two we will work with our communications partner to help us create shared visions at a local level that build on current strengths and assets and make full use of local passionate people who want to make a difference to their community. As part of this work we will engage with local employers. Effective communication is at the heart of this work, and we will create communication channels that reach the right audiences.

### 3. Test and learn, scaling up and replication

We will embrace innovation and risk to undertake large amounts of test and learn, with a clear view to scale up and replicate successful practices across Essex. In Chapter One we have learnt that there are multiple factors that create the conditions for the success of initiatives to increase physical activity and engage with communities most in need.

We want to continue to develop our understanding through a large scale test and learn programme. We will look to disseminate findings across the system, enabling the replication of good practice and we will invest in projects that show potential to be scaled and grown and that impact on our target audiences. Projects such as the test and learn case studies which are on Pages 26-29.

### 4. Community capacity and development

There is untapped potential within our local communities and the Collaborate reports have identified that there is a desire for more locally led initiatives reflective of local needs.

The public sector systems in Essex need to strike a balance between providing a supporting infrastructure and letting local initiatives develop organically within communities.

Our focus on community capacity will provide seed funding for new local initiatives, capital funding for community hubs, and workforce training and capacity building to ensure sustainability and the ability for organisations and projects to grow.

At a local level we will look to establish active networks with co-ordinators supporting communities to develop and plan their own activities and co-produce solutions to local challenges.

### 5. Effective use of data and insight

The Chapter One research showed that Essex is committed to developing a strong data and insight capability and building links with leading insight organisations. It is essential that the LDP taps into this capability to develop our understanding of the needs of local communities, what works, and where to target particular interventions.

There is some good practice we can build upon and our Chapter Two plan will see us significantly develop new systems to capture and use data and insight at all levels of the system, including a live dashboard showing levels of activity in local areas and the positive impact that the LDP is having on local communities.

### 6. Create active environments

An important finding of the research was how strong an influence the built environment can have and the need to make better use of our physical assets. Essex is 72% rural, has over 350 miles of coastline and huge amounts of green spaces available for physical activity. However poor transport links, feeling unsafe and past planning issues can contribute to poor usage of these assets.

We need to drive greater use of the principles of active design and the Essex Design Guide to ensure these challenges do not continue into the future and look at what we can address now.

Through the LDP we will establish a funding pot for tier two authorities and community organisations to make changes to the physical environment that encourage and enable people to be more physically active. This could range from seating on walking routes for older people to street lighting in areas where people feel unsafe. We propose to put in place an Active Environment/Design worker at tier one who will be responsible for influencing strategic infrastructure work. To assist them in this role they will have a budget to co-fund work with other teams and organisations and help unlock further funding.

### 7. Evaluation, learning and sustainability

A key component of the work is to establish what works, what hasn't, and share and embed learning locally and nationally. We will ensure the overall programme is evaluated robustly and establish regular learning events and platforms to share our learning across the system. We will establish an evaluation consortium of partners to bring the widest range of evaluation skills and techniques to the LDP.

**In Chapter Two, 'The Essex LDP Strategic Investment Plan', we will clarify our theory of change and what we will do to achieve our outcomes. We explain what kind of system changes we need to make, how we will increase community engagement and establish new social movements, the scale and type of our test and learn activities, how we will upskill the workforce of different sectors, how data and insight will be so important to provide a more informed understanding of our audiences and what kind of active environments we want to create.**

**Chapter Two will also set out our innovative plans to evaluate the work of the LDP so we know what has worked well, what not so well, what can be replicated and scaled up, and provide the rich learning to share across the country. Our findings from Chapter One provide us with a strong foundation and starting position - in Chapter Two we will follow the journey to wherever it takes us. It promises to be an exciting journey!**

## Launch of Active Essex 1 million lives strategy

(L-R) Jason Fergus (Head of Essex LDP and Active Essex), Dr Zoe Williams, Azeem Akhtar (Chair, Active Essex) and Ed Sandham (Sport England)



# The prologue

## The successful building blocks for the LDP

Prior to Essex being selected for the Local Delivery Pilot (LDP) in November 2017, it's important to recognise that some successful building blocks had been put in place which laid the foundations on which the LDP's story could begin:

1. The 'Future of Essex', a united vision to shape the future of Essex, was launched in 2017 by Councillor David Finch, Leader of Essex County Council and Chair, Essex Partners. Essex Partners made the whole system approach to promoting physical activity one of the eight Essex Vision Projects - providing the permission to try radical new ways of working. It created excitement, optimism and curiosity across leaders in Essex, particularly in the public sector and voluntary sector.
2. Councillor John Spence was appointed Chair of the Essex Health and Wellbeing Board in May 2017. He would become the leading champion and ambassador for our LDP. The Health and Wellbeing Board submitted the LDP application and rallied the political and senior support to make the assessment visit by Sport England on September 25th 2017 such a resounding success.
3. The new partnership working between Active Essex and Essex County Council Public Health Team during 2016 and 2017 was showing early signs of making an impact at local levels. New partnerships were being formed, new forms of physical activity public health commissioning began being tested, and new Active Networks were introduced in each local authority in Essex. These stronger relationships were crucial in securing the support of Basildon Borough Council, Colchester Borough Council and Tendring District Council to be the focus of our testing for our LDP plans.
4. The North East Essex Partnership was formed in 2016 to provide place based solutions across Colchester and Tendring and will be a valuable partner for the LDP through their commitment to whole system ways of working.
5. Active Essex County Sport Partnership, led by Jason Fergus, became fully embedded in the County Council public health team in 2017, led by Dr Mike Gogarty.
6. Active Essex's 2017-2021 strategy 'Changing 1 million lives to get Essex Active' was published in summer 2017 making inactive people the top priority and giving a crucial link to the ambitions of the LDP.

doing with  
and not to

co-production

civic engagement

resilient communities

The language which  
supports our new ways  
of thinking and working

disruption



Members of the Essex LDP Strategic Sponsors Group with (front row, 4th and 5th from left), Councillor John Spence CBE, Chair, Essex Health & Wellbeing Board and Chair, Essex LDP Strategic Sponsors Group and Nick Bitel (Chair, Sport England).

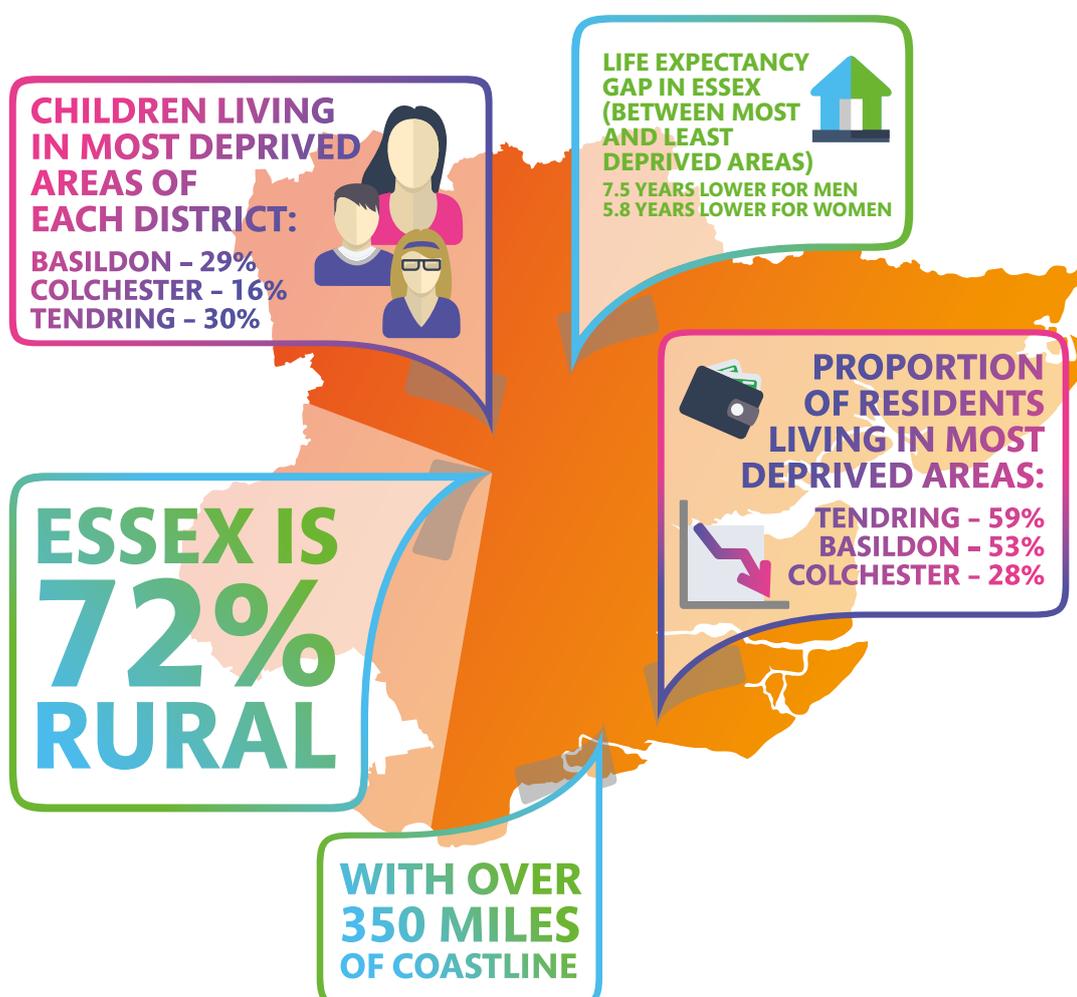


# The biography of the bid

Essex had already fully committed to whole system change at the highest level and the successful bid to Sport England was based on the premise that the LDP would become an integral part of this broader whole system change ambition.

## The main elements of our bid were as follows:

- Led by Essex Health and Wellbeing Board, Essex County Council, and Active Essex. Each of these three entities work across Essex, with a very broad range of local partners and stakeholders, including 12 district local authorities, two unitary local authorities, five Clinical Commissioning Groups and three Strategic Transformation Partnerships.
- To test how a two-tier structure in a large county can successfully tackle population levels of physical inactivity.
- To only focus on the needs and aspirations of deprived communities where inactivity is highest.
- Three clear target groups, which were prioritised following detailed analysis by Essex County Council and Active Essex:
  - older people
  - families with dependent children
  - people with poor mental health
- To focus the testing of what does and doesn't work in tackling inactivity on deprived communities in Basildon, Colchester, and Tendring, with a view to scaling up and replicating what we find works across other parts of the county.
- We made it clear we have problems and blockages
  - Insufficient insight and behaviour change approaches to tackle inactivity and build more resilient communities
  - A lack of an established evidence base of what works and what doesn't.
  - The culture of distributed leadership and co-production with local communities is not well developed in Essex, and we were aware that the LDP would be a trailblazer for this way of working in the county.

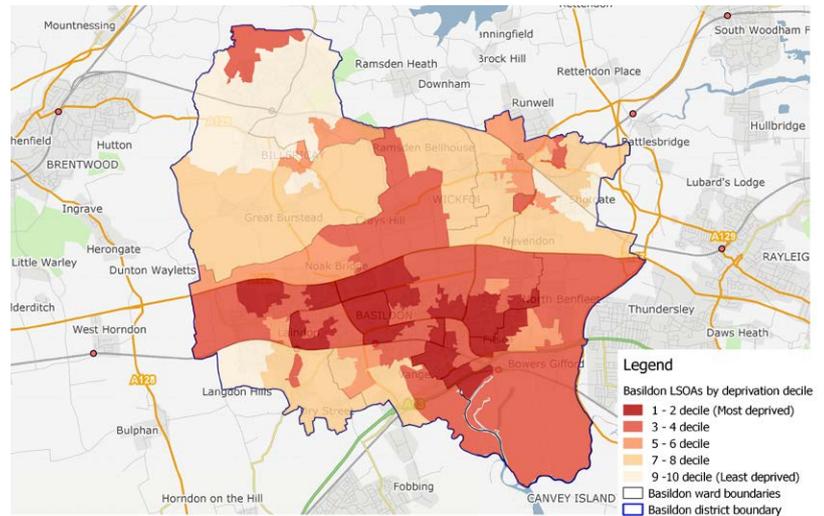


Basildon, Colchester and Tendring were chosen because of their high levels of inactivity and deprivation, which are directly linked. Lack of community and voluntary sector activity, and limited co-production with local communities were also factors.

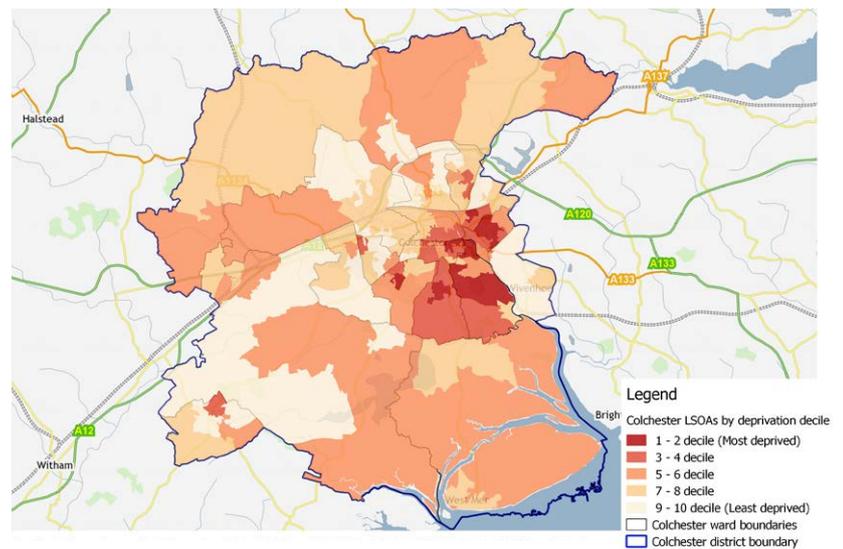
**They were also chosen because they had unique place based issues:**

- Basildon – communities have suffered because of the austere physical infrastructure built following World War 11 and challenges have come from changes in the fashion for town planning from the new town era
- Colchester – the gap between areas of deprivation and other communities is widening at quite a rapid pace. The challenge is to be mindful of the needs of existing communities to ensure that growth benefits all
- Tendring – widespread inequalities and low-incomes directly linked to the demise of local coastal economies, symbolised by Jaywick Sands (number one area for deprivation in the UK)

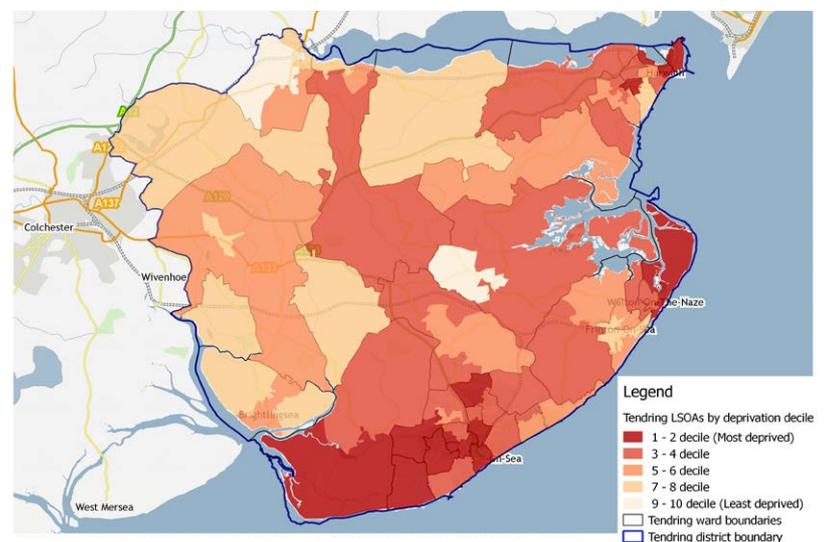
**Basildon map of deprivation by Lower super output area**  
(Indices of Deprivation 2015) Deprived population: 97,163



**Colchester map of deprivation by Lower super output area**  
(Indices of Deprivation 2015) Deprived population: 52,831



**Tendring map of deprivation by Lower super output area**  
(Indices of Deprivation 2015) Deprived population: 83,591



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# The journey so far...

## Pre March 2017

Jan 17 - Essex Assembly and Essex Vision developed.

Collaborate commissioned by Essex Assembly to develop understanding of systems thinking.  
Early preparation for Active Essex strategy.

## March 2017

Priorities determined from data and insight  
Elderly, families, mental health.  
Decided Health and Wellbeing Board (HWBB) to be bid lead, not Active Essex - important politically. Expression of Interest submitted.

# 2017

## May 2018

First draw down of Sport England funds secured of £845,000.

## April 2018

The Health and Wellbeing Board fully adopts the LDP to provide leadership and stewardship. Essex Assembly choose the LDP as one of eight initiatives they are to sponsor and support that are driving whole system change.

# 2018

## June 2018

Tackling inactivity became one of the key priorities for both the One Colchester Strategic Partnership and North East Essex Health & Wellbeing Alliance.

## May 2018

LDP commissions Collaborate CIC (to undertake full diagnostic of the system infrastructure), Intelligent Health (to audit the use of data and insight) and University of Essex (evaluate existing projects about how they engage inactive people and what does/doesn't work).

# 2018

## June 2018

University of Essex commissioned to complete baseline evaluations of 24 existing projects that fit with the LDP, 20 of which would receive funding to take part in action research 'test and learn'.

## 10 July 2018

Essex County Council agree a Full Council motion: *'This Council recognises the importance of physical exercise in avoiding social isolation, safeguarding physical and mental health and tackling obesity and associated diseases such as diabetes'*.

## July 2018

Essex Health and Wellbeing Board launch a new strategy which places physical activity as a priority and directly references the LDP.

## September 2018

Recruitment of a new team of three LDP coordinators who will focus on community engagement - provides evidence of innovative system working, with Active Essex being the employer and each team member being deployed into one of the three test areas.

### May/June 2017

Cllr Spence appointed as Chair of HWBB.  
Active Essex Strategy launched.

### Sept 2017

Assessment visit by Sport England.  
Leadership across the county comes together and re-affirms its commitment to a new way of working.

### November 2017

The LDP became a standing item on the Tendring Local Health and Wellbeing Board agenda, changing how the Council and its partners think about mental health, obesity and long term conditions.

# 2017

### February 2018

9 work streams quickly established to drive the start-up development phase of the LDP.

### Nov/Dec 2017

12 LDPs announced and come together for the first time.

# 2018

### February 2018

Basildon Council adopted its very first Health and Wellbeing Policy, an early indication of the LDP's impetus in changing thinking.

### January 2018

Project Group established of 15 initial stakeholder organisations. Core project team set up in partnership with Active Essex to provide operational momentum and deep knowledge and understanding of Essex systems, structures and people.

# 2019

### September 2018

First meeting of the Strategic Sponsors Group of Chief Executives who are championing the work of the LDP.

### 21 September 2018

Essex is the first LDP visited by Nick Bitel, Chair of Sport England.



**"I was really encouraged by the level of support you have got committed to the pilot and its outcomes, not only with Essex County Council at all levels of leadership but also across the tier two authorities and within the voluntary and community sector. We must keep this energised and I heard strongly the message on the need to keep the momentum going."**

Nick Bitel, Chair, Sport England, who visited Essex on 21 September 2018

# Readiness for Whole System Change

## Summary of Collaborate CIC research findings

The LDP commissioned Collaborate CIC to help develop a better understanding of the systems and infrastructure required to achieve the ambition of tackling population levels of physical inactivity through whole system change.

The project included stakeholder interviews with Essex County Council and local Councils, Community and Voluntary Services and Clinical Commissioning Groups in Basildon, Tendring and Colchester.

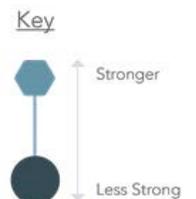
A review of publicly available data was carried out along with an assessment of the key policies and governance relating to physical activity in Essex and the local test areas.

### The positives

- The Essex Assembly and Essex Vision provide a strong platform for the LDP.
- There's a real appetite across the system leaders to commit to a whole system approach but there is currently a lack of knowledge on how to embed physical activity into policy, budgets and service delivery.
- There is clear political and senior management backing at Tier 1 and Tier 2 which can provide impetus and momentum if acted on quickly.
- There are already strong examples of how voluntary and community organisations can successfully engage with the LDP target groups in low-income communities.



This diagram illustrates the current strengths of the 'physical activity system' against the nine building blocks of whole system change created by Collaborate CIC



## The emerging thinking by system leaders

### On inactivity

- Inactivity is usually a symptom of wider economic and social issues (e.g. low-income, long term health condition, lonely).
- Starting with physical activity is rarely the answer.
- Local context is key – different starting points and opportunities in different places.
- There is limited community provision in the low-income communities. Many communities, particularly those facing the greatest inequalities, would benefit from support to build capacity, access resources, and coordinate with other providers and initiatives, including the public sector.
- The lack of awareness of existing physical activity opportunities – the sport and physical activity landscape is complex and collaboration is weak.
- System leaders and individuals know regular physical activity is a good thing – but there is a disconnect in that most organisations (including public sector, NHS and the third sector) do not prioritise physical activity in their day to day work.

### On systems

- The need to focus on outcomes shared by a collaboration of organisations.
- The need for genuine and diverse collaboration.
- The need to gather and use insight systematically.
- The need to continually learn and share.
- Communication is a top priority.
- Consensus that there is a need for significant levels of test and learn, rapidly using good practice to scale up significantly, and replicating successful models and approaches.

### On solutions

- Solutions should be locally owned and co-produced.
- Social movements, networks and communications are key.
- Local community organisations know how to engage with the LDP target groups – they just need to be given the support to make it happen more.

# Basildon:

## Summary of findings

***“The pilot needs to look backwards to go forwards - to look at the history of the last 5-10 years and start by building relationships with communities.”***

Community group

### Context

- Range of top class facilities and green space. But key barriers for the most inactive include culture of limited community participation.
- Together, local organisations know how to engage with target groups, but lack of collaboration and limited capacity of the voluntary sector means this isn't optimised currently.
- The LDP could play an important role in overcoming a history of siloed working.
- Physical regeneration needs to take place hand in hand with improving community capacity and social infrastructure.

Basildon Council adopted its very first Health and Wellbeing Policy in February 2018 (the first Tier 2 local authority in Essex to do so), and has recently reviewed and refreshed the membership of the Basildon Health and Wellbeing Partnership Board to ensure that it is best resourced to meet the ongoing and future challenges and opportunities inherent from the LDP.

The refresh has resulted in the Council relinquishing total control of their Public Health grant and moving to a whole system budgeting approach governed through the Partnership.

The Council is now in the process of drafting its inaugural Health and Wellbeing Strategy, which will embed health into all of the Council's policies.

***“Basildon Council's participation in the development of the LDP has been a key factor in the Borough's continued drive to effect sustainable whole system change in our health and wellbeing offer. As Chief Executive of the Borough Council I am wholly supportive of the LDP and was nominated to be the tier 2 Chief Executive who sponsors the LDP at Essex Partners and Essex Assembly.”***

Scott Logan, Chief Executive, Basildon Council

### Relationships & behaviours

- Building relationships and developing collaborative behaviours is an essential starting point – to raise awareness among organisations and groups of what each other are doing and develop trust to work together.
- Requires a focus on 'resetting' expectations and genuinely sharing power – including positioning the LDP as owned by all local stakeholders, including communities (not just the Council).
- Desire to work differently across partners including the Council, CCG and voluntary sector is a positive foundation for engaging with communities.
- The LDP has the potential to influence more collaborative working in Basildon far beyond physical activity.

### System infrastructure

- Approach needs to be different to what's gone before which has featured a lack of collaboration between local service providers and communities, but sense that now is the 'right time' for whole system collaboration.
- Partners (including health, community orgs and residents) need to be involved in defining what's important for Basildon as a place.
- Key role for the LDP to join up strong but fragmented activities that currently aren't visible or linked into formal structures, and develop new forums for collaboration.
- Building and sharing data and insight among partners is a priority.

# Colchester:

## Summary of findings

***“We have strong partnerships with all the people at the table. But we need to change the way we work together.”***

Voluntary sector

### Context

- Active lifestyles haven't been embedded in Colchester's urban design or culture to date. This is not just about building infrastructure like cycle paths, but taking the residents on the journey of why this is important.
- There are a range of community assets, local passionate enthusiasts and CVS organisations who in partnership with the public sector could work collectively to support and target the priority groups as well as provide the fabric for a social movement.
- Opportunities for green space to be better used for physical and community activities.

The Colchester Strategic Plan 2018-21 has four themes; Growth; Responsibility; Opportunity; and Wellbeing. Community enabling, asset development and empowering communities to take responsibility for their place are at the heart of our approach.

System change is already happening in Colchester, with new diverse partnerships such as the North East Essex Health & Wellbeing Alliance. Colchester's role in the LDP has provided extra vigour and energy to our systems leadership approach.

The systems diagnostic carried out by Collaborate, and community project evaluations carried out by the University of Essex, have highlighted real strengths in our communities that we hope to learn from, nurture, scale and replicate where possible.

***“Colchester Borough Council's engagement with the LDP over the last 12 months has coincided with a period of significant change for the local authority, requiring a need to flex and adapt to achieve our challenging outcomes. We know we still have some real challenges ahead but there is a real sense of purpose and focus to tackle these collectively as system partners and with our communities.”***

**Pam Donnelley, Strategic Director of Customer and Relationships, Colchester Borough Council**

### Relationships & behaviours

- Energy and enthusiasm for the role of the LDP as an agent of change for behaving as a system. People acknowledge that the system is not yet mature but there is the ambition that the LDP will encourage system leadership and that people will hold each other to account.
- Individually there are ideas and knowledge of what is needed, but for some this feels like a lonely endeavour. Working as a collective of system leaders not only across organisations but within organisations and services will help translate the vision into action on the ground.

### System infrastructure

- Some key foundations in place for building and developing a system approach e.g. One Colchester vision for collaboration.
- However the links between delivery and strategy are not always apparent and some key assets such as facilities and funding are not collectively harnessed around shared priorities.
- The ambition for a shared vision and outcomes is high with the LDP seen as the opportunity for testing a new whole system approach.
- An investment in data and behavioural insights is needed to support informed decision making both at a strategic level and local delivery.

# Tendring: Summary of findings

## Context

- Chaotic lifestyles, low incomes, mental health issues and challenges with infrastructure are key issues.
- But evidence of creative and collaborative approaches to finding ways to support physical activity.
- These include the opportunity of the Jaywick development to test how physical activity can be built into design, as well as harnessing technology and building on the increasingly engaged community.
- There are notable individuals (strategic leaders and community leaders) who are held in high esteem, and a belief that they can support the ambitions of the LDP.

***“We need to build relationships with each other, with a shared goal to get everyone in Tendring more active. There is huge potential, but we need to get going.”***

Voluntary sector

## Relationships & behaviours

- Widespread commitment to embedding physical activity in all policies and services and willingness to do things differently.
- Strong set of relationships to build on, and good understanding of the new forms of leadership and collaborative skills required.
- The energy and commitment is there – now there needs to be some focused conversations (including new voices and organisations) to agree a set of priorities and test a creative approach to delivery.

The Tendring Health and Wellbeing Board has written the priorities in its local Health and Wellbeing Strategy to closely align with the LDP and an internal Public Health Officers Group has been formed to ensure that the wide variety of services that the Council provides are aligned to public health outcomes and the LDP.

A senior project group has also been convened to ensure those at a senior level are fully engaged in the LDP process and the Tendring project lead for LDP has become part of the Leading Greater Essex collaborative where wider system partners across Essex are being engaged in system wide projects which align with the Essex Vision.

A restructure of the Local Active Network in Tendring meanwhile will provide a key focus around delivery of the LDP.

***“We have sought to embed the LDP within the Council through how it works with the community, partners, elected members and staff and a number of new actions have been undertaken. It is enabling us to engage better with local community groups and projects, prompting the Council to work in new ways.”***

Ian Davidson, Chief Executive,  
Tendring District Council

## System infrastructure

- Good understanding of what systems change means including how this can enable more holistic approaches to supporting individuals and communities.
- Appetite for the creation of a shared vision that translates into working collectively to reduce duplication.
- Creative ideas for collaborative use of resources across partners.
- The purpose of existing governance structures and how this translates into commissioning and delivery is not yet clear.
- Limited use of data and insight to inform decision making which is acknowledged as an important gap.

## Context

- Availability of green space across the County is a positive, though in some cases accessibility could be improved.
- Strong sporting infrastructure overall in terms of facilities and clubs.
- Transport infrastructure seen as an area for improvement – some people felt Essex's 'active transport' infrastructure was weaker than other places.
- Tier 1 partners agreed tackling physical inactivity was an important priority in Essex – based on the national evidence base on the positive impacts of physical activity, and as a route to tackle the large health inequalities in Essex.
- Partners emphasised the very diverse contexts across Essex and identified this as a challenge. Tailoring approaches locally is essential.

# Essex Wide: Summary of findings

***“In terms of a civilised community we want people to feel good, a healthy workforce, healthy body and minds through life, work and play. We need to shift from talking pleasantries to presenting actions.”***

Essex cabinet member

## Relationships & behaviours

- Tier 1 Partners identified that the process of developing the Essex vision opens up a different kind of conversation with residents and communities.
- The LDP is a strategically important opportunity for the County to test its ambition for a new way of working with communities including developing more enabling rather than patriarchal approaches to engagement, and understanding the role behavioural insight and peer support can play in developing solutions.
- ‘Strengthening communities’ is an increasing focus for the County Public Health team and the LDP is a key opportunity for them to test new approaches and for the LDP to benefit from their input e.g. supporting the development of local resident Facebook groups as a collaboration and engagement tool.

Essex has produced an ambitious, long term Vision that stretches across the county and provides a shared challenge and opportunity for partners. This in itself is a fantastic achievement. The critical piece now is to bring the document to life; to build on what has been achieved, embed collaboration, and fuel a sense of progress for the people of Essex. If the Vision is to be achieved, partners must acknowledge that sustainable and scalable change depends on more than commitment and good will – strengthening the ‘system infrastructure’ that underpins services to the public is essential. The Collaborate findings challenge the Essex LDP to trailblaze whole system change work and tackle physical inactivity through outcomes based collaboration that is unique to Essex so that we can put the vision into practice.

***‘As Essex Partners we have worked as a collective to set out our ambitions for our county in the Future of Essex, a place where we can unite behind a common sense of identity and a shared sense of common purpose. The Essex LDP is a great example of a real tangible opportunity to bring the Essex Partners shared vision to life and make a real change to the lives of people in the communities we serve.’***

Gavin Jones, Chief Executive,  
Essex County Council

## System infrastructure

- Making system change a reality: the appetite is there but Essex are early in the journey. The mechanisms for collaboration, and the buy in and skills among partners aren't yet embedded.
- Awareness of initiatives relating to physical activity in Essex and how to engage, particularly at a local level. Partners acknowledge there is lots happening including work led by the voluntary and community sector that they could link in with, but the landscape is complex and channels for connecting and collaborating are limited.
- Evidence on what works in increasing physical activity (particularly among the most inactive) and how different services and organisations can work together to make this a reality as part of a whole system approach is needed in order to convince partners to invest time and resource.
- The role of the private sector was recognised as important as part of a whole system approach – both as an employer and a provider of leisure services e.g. sports facilities.

# Understanding our outcomes and target audiences

In 2017, Active Essex undertook in-depth analysis of a number of data and insight sources to establish the priorities for their new strategy. This analysis provided the foundation for the LDP, determining three priority target groups of families with dependent children, people with poor mental health, and the elderly. It also provided the three outcomes: to increase levels of physical activity (in all target groups, measuring how many people are lifted out of inactivity); improve wider social and economic outcomes; and achieve transformational change and replication of success across Essex. The LDP Project Group revisited the target groups in May 2018, and established a deeper understanding of the three priority groups described below, and added the important context that wider inequalities must always be factored into the work of the LDP, especially for girls and women, BAME communities, disabled people, and people experiencing loneliness and isolation. The overall focus of the LDP has not changed, which is to focus on those residents who are active for less than 30 minutes a week and live in communities experiencing deprivation and low-income.

## In particular:

### Older People

We agreed on the term 'healthy ageing' and so this includes:

- Middle age (45-65 years) in which the ageing process can be strongly influenced.
- All those who are at risk of functional decline (this is not age-specific).
- Those at transition points (retirement, bereavement, relationship loss, moving to a new house etc.)

### Families

We agreed it should be broadly defined but include:

- All those within any extended family where an individual's activity impacts on another family member. It is therefore not restricted to family-based activities.
- This includes children encouraging their siblings, parents and grand-parents and vice-versa.
- Any activity that influences the family including school, community or work-based activities that encourage the child/parent/grandparent to increase activity to the rest of the family.

### Mental health

- We will include the mental health and wellbeing of the whole population including those with more severe mental health problems requiring NHS treatment and who tend to be the least active.
- All those with mild to moderate ill health diagnosed by a health professional or self-diagnosed.
- We aim to use physical activity as a first line intervention in the care pathway.

### Addressing inequalities

- A main outcome will be to reduce inequalities. This means the increase in activity should be stronger in groups such as those:
  - From ethnic backgrounds
  - With disabilities
  - Who are lonely
  - Living in the most deprived communities
  - Women and girls

**This outcomes diagram shows what success will look like in 2021**



## 3. Transformational Change

Robust evidence that enables replication at scale | Realignment of system budgets | Shared vision and accountability among system leaders  
| Unusual suspects are engaged and become part of the system

# Understanding the existing Essex data and insight

## Summary of Intelligent Health research

1. A desk-based review of all publicly available physical activity data and insight available in Essex.
2. Focus groups with LDP project group members from each priority local area in Basildon, Colchester and Tendring.

### Desk research findings

- The Active Lives Survey, commissioned by Sport England, is the most robust measure of available data on physical activity at local authority level, but it does not provide enough data at a more local level.
- Other surveys are conducted at district and local level but do not use comparable measures and they produce substantial variations in physical activity rates.
- The desk based review did not identify any publicly available behavioural insight into physical activity in Essex. This may indicate a lack of data sharing or dissemination rather than a lack of data collection.
- Children reflect activity in families and there is a significant fall in activity levels when children reach secondary school with only 20% of secondary school girls reaching the required level of activity.
- Baseline levels of mental health/wellbeing could not be established due to a lack of available data.
- Baseline levels of physical activity by families could not be established due to lack of available data, however, data obtained through schools showed children's activity levels decreased by 8% between primary and secondary school.
- Activity levels for older people decrease significantly between the ages of 65 and 85.

### Focus group findings

- There is a lack of data sharing between and within county and borough councils.
- A lack of awareness of what data is available and what insights could be derived from current data sources.
- They felt there was a lack of insight not only with physical activity, but also broader public health and everyday issues (such as money, stressors, coping and motivators).
- They perceived that insight from individual interventions and engagement activities isn't recorded, which may result from providers perceiving other providers as competitors.

### 5 Key recommendations

1. The creation and implementation of a standard evaluation framework for physical activity and for measuring the related social and economic benefits (for example, mental wellbeing).
2. The Local Delivery Pilot should maximise insight which is, or could be collected, within the system.
3. The creation of a clearer picture of physical activity patterns and trends in deprived areas, alongside collecting new insight on general lifestyle challenges faced by the target groups.
4. A strong culture of data sharing is created between and within county and borough councils and other key stakeholders.
5. A specific physical activity data and insight resource is created for the duration of the LDP and beyond.

## Physical activity data

This section of the report outlines headline findings of publically available data on physical activity rates and related factors in Essex.

### The cost of physical activity

The table below shows the cost of inactivity per Essex district. This is calculated from Public Health England's estimated total of £7.4 billion a year as the total cost of inactivity in the UK, adjusted by the number of inactive people in each district and total population where each inactive person costs £507. The cost of inactivity has been calculated using Manchester LDP's methodology and includes the cost of absenteeism from work.

Essex Local Delivery Pilot's target districts are highlighted in red in the table below.

	% inactivity	Cost of inactivity/100,000 population per year including absence from work	Population of each council	Total cost of inactivity per year including absence from work
<b>England</b>	22.2%	£11,255,400	55,268,100	£6,220,645,727
<b>Essex</b>	26.9%	£13,638,300	1,802,164	£245,784,533
<b>Basildon</b>	28.7%	£14,550,900	183,378	£26,683,149
<b>Braintree</b>	26.3%	£13,334,100	150,999	£20,134,358
<b>Brentwood</b>	25.1%	£12,725,700	76,386	£9,720,653
<b>Castle Point</b>	30.9%	£15,666,300	89,731	£14,057,528
<b>Chelmsford</b>	24.7%	£12,522,900	174,089	£21,800,991
<b>Colchester</b>	25.2%	£12,776,400	186,635	£23,845,234
<b>Epping Forest</b>	23.5%	£11,914,500	130,321	£15,527,096
<b>Harlow</b>	26.7%	£13,536,900	85,995	£11,641,057
<b>Maldon</b>	23.6%	£11,965,200	63,350	£7,579,954
<b>Rochford</b>	23.1%	£11,711,700	85,670	£10,033,413
<b>Tendring</b>	33.0%	£16,731,000	142,598	£23,858,071
<b>Uttlesford</b>	20.8%	£10,545,600	86,188	£9,089,042
<b>Southend-on-Sea</b>	27.8%	£14,094,600	179,799	£25,341,950
<b>Thurrock</b>	31.3%	£15,869,100	167,025	£26,505,364

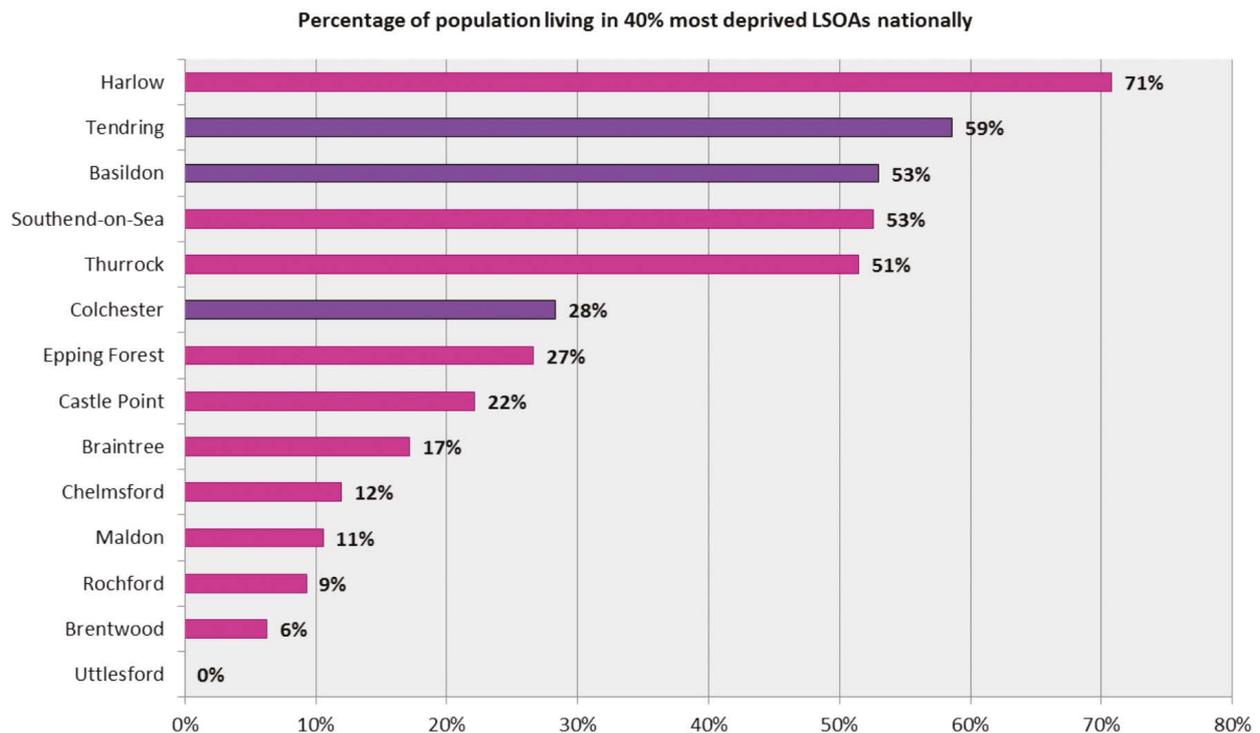
Source: £7.4 billion cost of inactivity:

<https://www.networks.nhs.uk/news/public-health-england-targets-ps7.4bn-cost-of-physical-inactivity>

## Numbers of Essex residents living in deprived areas

In total, there are 233,585 people living in 224 deprived LSOAs (Lower super output areas – average of 2,000 people per LSOA) in Basildon, Colchester and Tendring. These 224 LSOAs are among the 40% most deprived nationally. The table below shows that Tendring and Basildon are the 2nd and 3rd most deprived local authorities in Essex. Colchester Borough Council has the fastest growing levels of deprivation in Essex (2010-2015).

Source: English Indices of Deprivation, Gov.UK, 2015. Population counts derived from ONS Mid-2016 Lower Super Output Area Mid-Year Population Estimates.



## Health inequalities in deprived areas

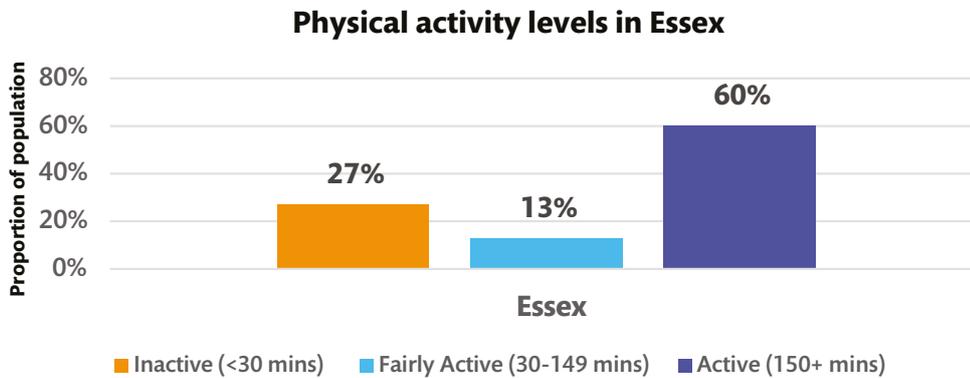
In Essex, life expectancy is 7.2 years lower for men, and 5.5 years lower for women in the most deprived areas of Essex than in the least deprived areas. This disparity is higher in our three target districts. The largest difference in life expectancy between least and most deprived areas is 10 years among males in Tendring, and 9.5 years among females in Basildon.

District	Difference in life expectancy between most and least deprived areas	
	Men (number of years)	Women (number of years)
Essex	7.2 years	5.5 years
Basildon	7.6 years	9.5 years
Colchester	8.1 years	6.8 years
Tendring	10 years	6.3 years

Source: District Health Profiles, Public Health England 2017.

## Inactivity in Essex

- 27% of the Essex population are likely to be physically inactive (doing less than 30 mins of activity a week). This equates to 391,600 physically inactive people in Essex.

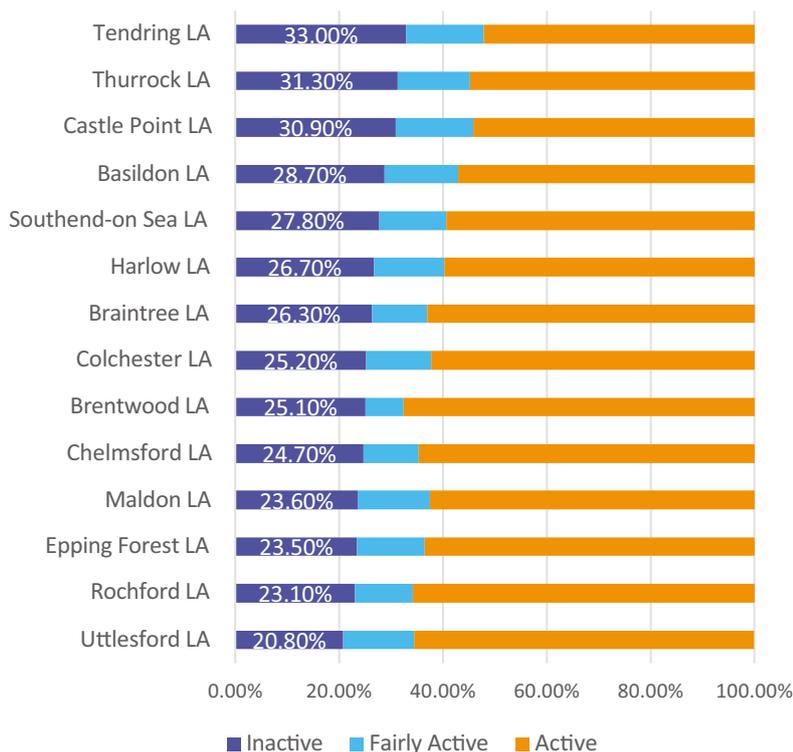


- Lone parents are more likely to be inactive (31%) than single people (26%) or those in a couple (24%).
- People classified as having a lower socio-economic status are more than twice as likely to be inactive than those classified as having higher socio-economic findings.

Source: Active Lives Survey 2016/17

## Physical inactivity by district

- Levels of inactivity are higher in areas of high deprivation in Essex. 31% of the population in high deprivation areas are physically inactive, compared to 21% in low deprivation areas.
- Tendring is the most physically inactive district in Essex, with 33% of the population reporting they are inactive. Basildon and Colchester are fourth and eighth most inactive of all fourteen Essex districts.



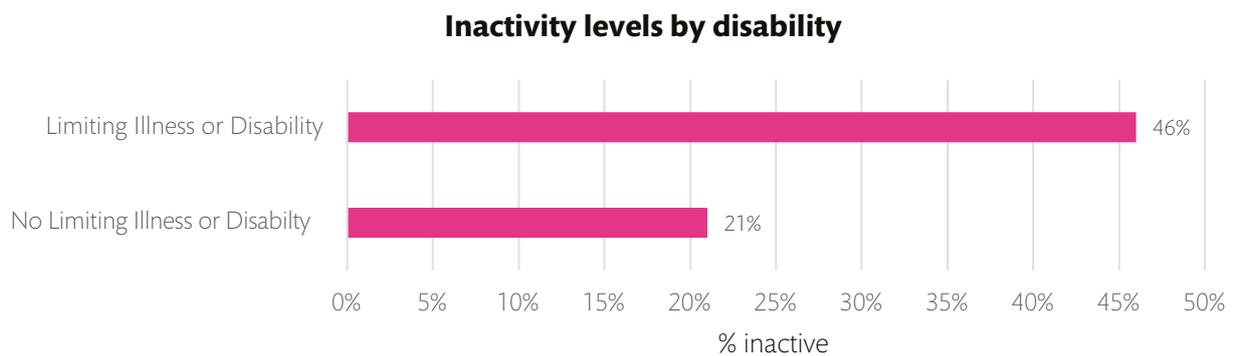
Source: Active Lives Survey 2016/17

## Disability and mental health

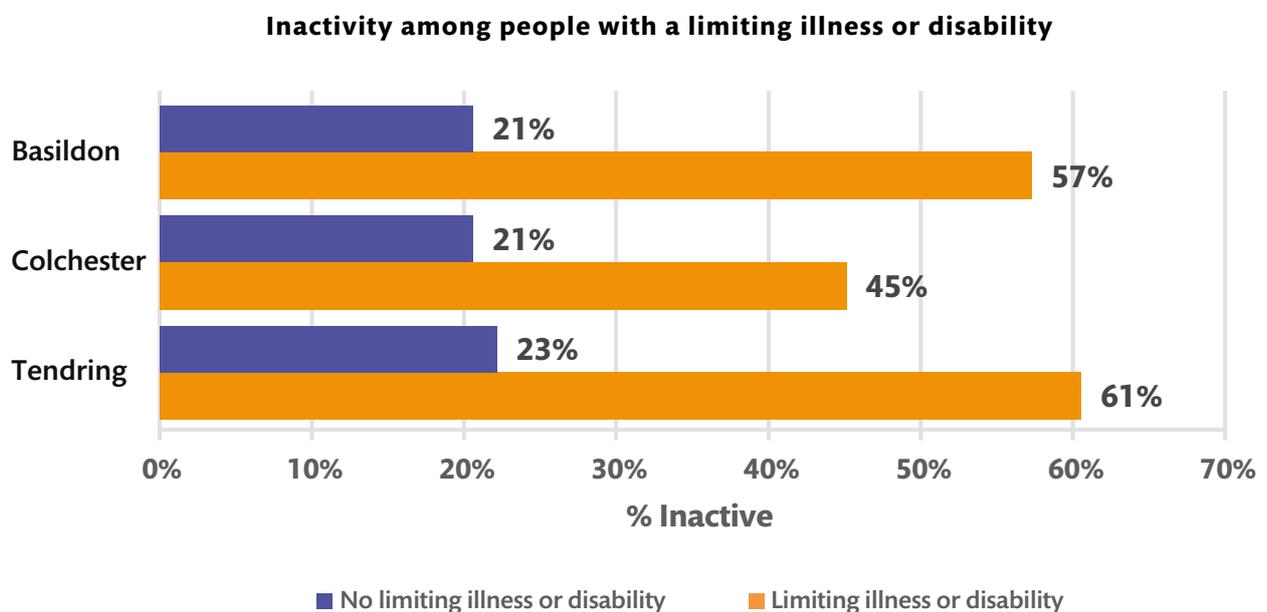
- When estimating the prevalence of mental health issues in these areas, the estimated prevalence of depression in the three test areas is 39,055 residents (17% of all residents). These are district- level rates, and the rates in deprived areas are likely to be higher.

Source: Depression prevalence rates taken from the 2014 Health Survey for England.

- People with a disability are more than twice as likely to be inactive (46%) than people without a limiting illness or disability (21%).



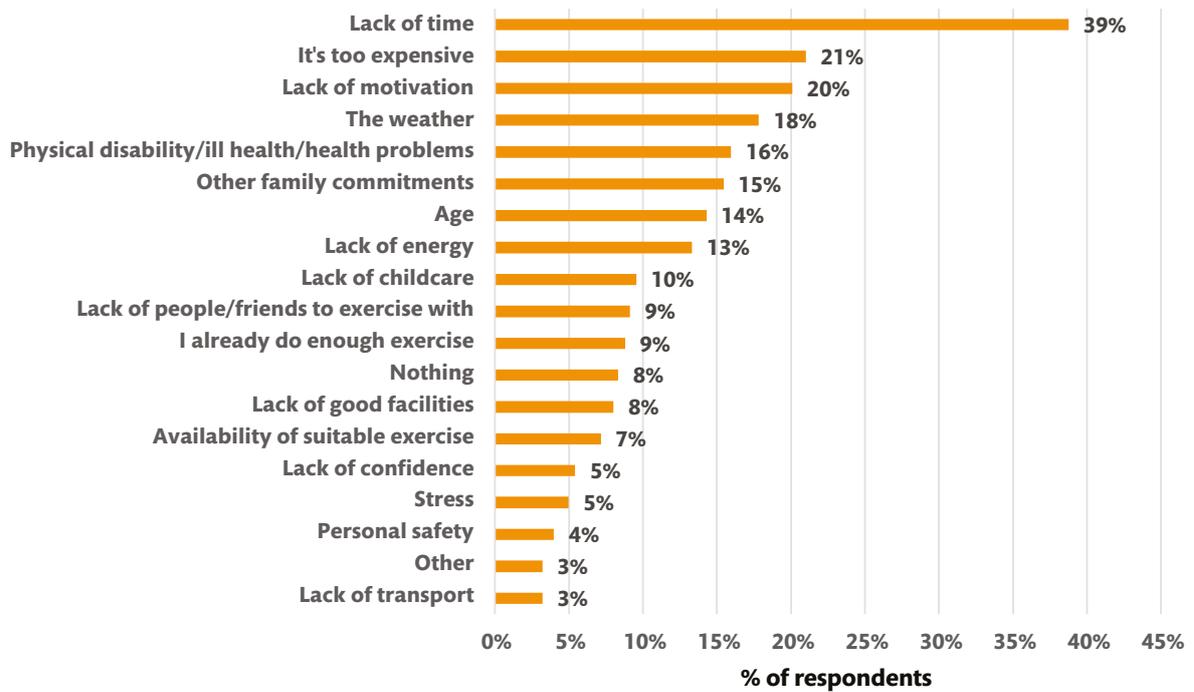
- Rates of physical activity for people with a disability vary across our three target districts. People with a limiting illness or disability are most inactive in Tendring (61%), followed by Basildon (57%). Colchester is close to the Essex average of 46%.



Source: Active Lives Survey 2016/17.

## Barriers to physical activity

- Lack of time is the biggest barrier to physical activity reported by Essex Residents (39%). Cost (21%), motivation (20%) and weather (18%) were also reported as prominent barriers to physical activity.



Source: Essex Residents Survey 2018.

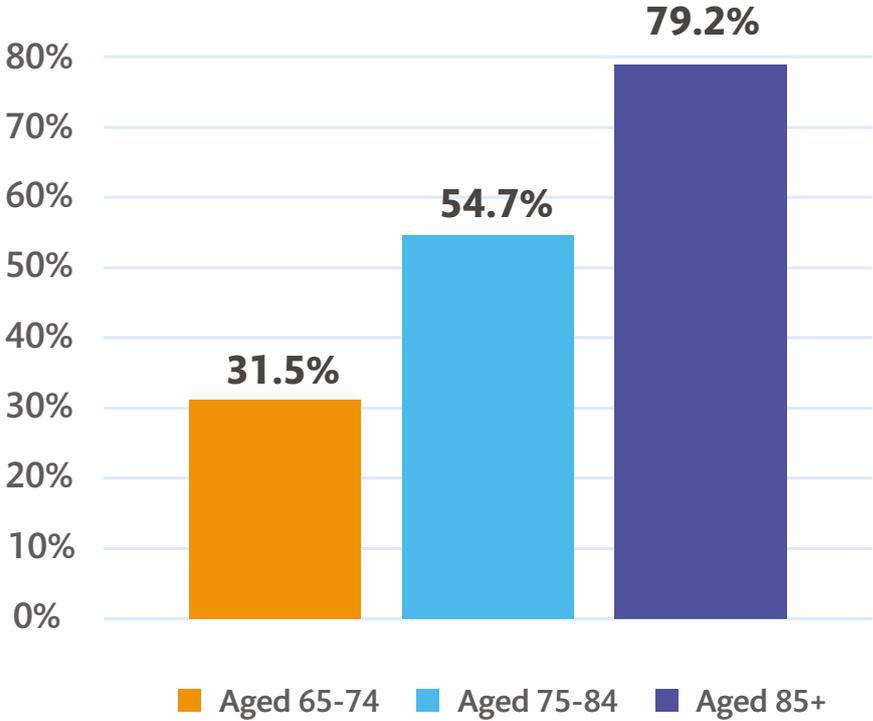
## Physical activity in Essex schools

- 35% of pupils who responded to the School and Students Health Education Unit (SHEU) survey reported being active for an hour or more in total on at least 5 days in the last week. This drops to 25% for secondary school pupils.

Source: School and Students Health Education Unit.

### Physical inactivity in older-aged Essex residents

- Physical inactivity increases rapidly in old age. In Essex, 31.5% of residents aged 65-74 are physically inactive. This increases to 54.7% for residents aged 75-84, and 79.2% for those aged over 85.



## Test and learn

The essence of the Sport England LDP programme is to pilot and test new approaches and ways of working in 12 different locations across the country. The Essex LDP will undertake considerable amounts of testing up until 2021, ensuring that through high quality measurement and evaluation we gather essential learning of what works. We can then use this learning to scale up and replicate what works across Essex and beyond. In the summer of 2018, we initiated our first small scale phase of 'test and learn', investing small amounts of money in 20 existing community projects to test if they could successfully engage with our inactive target groups. Before they commenced their testing, we commissioned the University of Essex to evaluate their existing work to understand the factors that make them successful.

### Understanding what's working and what isn't

The University of Essex was commissioned to carry out baseline evaluations of 24 existing community projects (20 of which went on to take part in the initial test and learn programme) to help identify what works successfully in local interventions and set out a number of recommendations for the LDP to take forward.

It is clear that all 24 projects are unique and pursuing different outcomes and target audiences, but they all have in common the ability to reach low-income inactive people and engage them in meaningful community activities.

There is a significant opportunity to take the main success factors of these projects and scale them up across the three test areas and in other deprived communities of Essex. They provide the key characteristics and ingredients for wide scale test and learn and replication.

These characteristics display the key building blocks for the use of physical activity to successfully achieve new community engagement and development in areas blighted by inequalities and poverty.

The table below lists the 24 community projects and their locations.

ESSEX LDP TEST AND LEARN PROJECTS							
Essex-Wide	Achievement through Football in Southend	Let's Keep Moving in Canvey Island (Castle Point) and Clacton (Tendring)	Fitness in Mind in Brentwood	Livewell Child in Braintree	Ambassador Programme (Gender and Disability) - Essex Wide	Active Living in Epping Forest	Trust Links in Rochford
Basildon	Sport for Confidence		Health Outreach	Home-Start		Old People's Home for 4 Year Olds (Intergenerational Day Centre)	Motivated Minds
Tendring	Mental Health Hub in Clacton	Healthier Independent Longer Lives (HILL) across Tendring		Dig 4 Jaywick Community Garden in Jaywick Sands	Parkeston Welfare Park Committee in Harwich		Teen Talk in Harwich
Colchester	Community 360 A2B social isolation project	Essex Wildlife Trust and Futures in Mind project for those recovering from drug, alcohol and mental health issues.	Five Ways to Wellbeing Project	Catch 22 Crisis Housing project	Together We Grow	Beat The Street	Wild Colchester

# Spotlight on test and learn projects

## The seven main success factors identified were:

1. An accessible location which is safe, friendly, and welcoming. The majority of participants want a location that is close to their home (hyper-local).
2. Strong and passionate leadership, typically comprising a paid leader supported by trained volunteers.
3. A strong ethos which was participant-focused, holistic, flexible, and supportive.
4. A collaborative approach with a range of engaged partners – many of the projects felt part of the system.
5. Effective use of community insight and engagement to understand the place and people and to co-produce projects and activities.
6. A sense of connectedness and belonging developed by the leadership, but also incorporating mechanisms to facilitate peer support.
7. The use of a range of behaviour change strategies including enablement, modelling, education and training.

## Nine main factors were identified that limit the success of existing projects:

1. Individual barriers faced by residents (e.g. long term physical condition, child care needs, lack of confidence).
2. Referral processes are currently not successful in introducing new participants to the projects.
3. There is a lack of knowledge and awareness by residents and providers of existing physical activity programmes across the system.
4. Lack of partnership working and a lack of understanding of the roles and offer of potential partners.
5. Inefficient and ineffective systems and processes in the public sector.
6. Hesitancy by providers to work collaboratively and share intellectual property.
7. Inconsistent monitoring and evaluation processes.
8. Difficulties in identifying and obtaining long-term funding.
9. Difficulties in building capacity to enable projects to sustain, upscale and replicate to meet the known demand and hidden demand.

## Sport for Confidence (Basildon)

*“Never give up”, says Anna Pettican, Senior Occupational Therapist and Projects Manager at pioneering Basildon organisation Sport For Confidence, when asked for advice to share across the Essex Local Delivery Pilot.*

*“Working in new ways and overcoming barriers and challenges that restrict participation in sport and physical activity can be exhausting, but the outcomes can be life-changing.”*

The nationally-acclaimed organisation fuses local health and sport sectors to tackle inequalities in sport and physical activity participation. They achieve this by placing health professionals in leisure centres directly alongside sports coaches and leisure centre staff to make adjustments that create truly accessible and inclusive sport and physical activity opportunities.

Formed in 2015, hundreds of participants and their family carers attend their sessions every week. Physical activities include boccia, trampolining, swimming, and tennis.

*“We provide inclusive sport opportunities, which can be defined as disabled people participating and competing in sport with non-disabled people,” says Anna.*

*“They’re broad and synergistic. As well as increased physical activity levels, participants also report improved mental wellbeing and a sense of belonging.”*

The organisation received the Inclusion and Disability title at ukactive’s inaugural awards ceremony for embodying an inclusive mindset and demonstrating a blueprint which supports people from varying backgrounds.

Anna said: *“We work with the people that use our organisation, listening to their voices and challenges they encounter.”*

She said the LDP will allow the organisation to broaden and evaluate their work.

She added: *“We hope it will provide us with a sense of how we can develop; what is working well that we need to continue, and where we need to make changes and move in new directions.*

*“We are also looking forward to collaborating with other organisations, such as Sport England and the University of Essex.”*



## Five Ways to Emotional Wellbeing (Colchester)

Lifting the fog of depression and anxiety can be an overwhelming struggle at any stage of life. For youngsters, having to deal with social media and exam pressures only compounds those already complex issues.

But in Colchester, a new outdoors project is providing a lifeline for those struggling to adapt to life at secondary school. The 'Five Ways to Emotional Wellbeing' initiative was delivered by Essex Youth Service and Mersea Outdoors having been commissioned by Colchester Borough Council and the Colchester Youth Strategy Group earlier this year.

Two pilots, run by Hannah Thurston, Targeted Youth Advisor at Essex Youth Service, resulted in hugely encouraging outcomes.

*"The group is for young people who are showing signs of suffering from early stages of anxiety and borderline depression, but who have not had a diagnosis and can't cope with the day-to-day pressures,"* Hannah explains.

*"School pressures are getting worse: GCSE grades, body image, and social media are all contributing factors with how young people feel. As a result some young people then display behaviours which get them into trouble, like shouting at teachers and storming out of the classroom or they become very withdrawn and isolated. We're an early intervention project for them."*

All participants so far have been from Year 8 and 9 which were referred by their schools. One loved gymnastics but

quit because they became too body conscious and another found himself socially excluded and *"lived in his bedroom"*.

Both transformed their lives whilst on the seven-week pilot. A mix of classroom and outdoor learning activities, such as orienteering (navigating to identified points using a map) and low ropes obstacle courses developed leadership and teamwork qualities.

*"We had some really successful outcomes,"* said Hannah.

*"The girl who gave up gymnastics was very quiet at the start in our indoor group discussions but her confidence grew throughout the project and really enjoyed the physical activities. Due to their engagement on the project she re-joined their gymnastics group and remembered how much she loved it."*

*"The young lad who sat in his bedroom all day now cycles to school, rather than getting a lift, and stops and speaks to his classmates along the way. He is now awake at school and ready to learn. He was so tired at the end of our first session but got fitter and said he felt so much happier and fresh being physical. He felt like he had achieved something, which was amazing."*

*"Schools don't always have the time or budget to provide bespoke one-to-one support so through the Local Delivery Pilot, we would love to expand our services countywide and offer a lot more support, especially in deprived areas and possibly expand it to Year 11 students prior to GCSE exam season."*



## Active 4 Life (Tendring)

Healthy ageing, stronger bodies, social support – and even a wedding – are just some of the benefits of joining over-50s physical activity club Active 4 Life in Tendring.

The club runs classes three times a week for over 100 people aged over 50 at Clacton Leisure Centre, with sessions consisting of badminton, table tennis, tennis, swimming, and circuit training. Many of the participants are aged over 65.

*“It’s never too late to start exercising – and the health benefits are enormous,”* says Maggie Parkes, Group Fitness Manager at Active 4 Life.

*“Regular exercise helps to deter certain medical conditions such as heart disease, diabetes and some cancers. It also keeps our minds sharp by keeping them active.”*

*“Evidence also shows that aerobic exercise improves our cognitive abilities. During exercise, the brain receives an increase in blood, oxygen and nutrients which keep our brains well fuelled and alert.”*

*“Our classes also include weighted exercises, to keep muscles strong and osteoporosis at bay for our members.”*

Maggie said the club also provides an important social hub.

She added: *“The great thing about these sessions is that they not only give the participants that important physical wellbeing aspect, but they also provide a lifeline for many. One member said she wouldn’t see anyone during the week if she didn’t come here.”*

*“Older people are particularly vulnerable to social isolation and loneliness which can have tremendous effects on their health.”*

One participant, Joan Tyler, aged 88, epitomises the social benefits – she met fellow member and now husband Roy Parker three years ago at Active 4 Life.

*“It was love at first sight – we hit it off straight away”* she said.

*“I look good for my age and it’s all down to Maggie – she keeps us in good stead. I think everyone over the age of 50 who lives nearby should just come and give it a go because I think we’re all brilliant and feel so much better for it.”*

Active 4 Life is a great example of partnership working between the community who run the sessions and Tendring District Council who run the leisure centre and provides a tremendous opportunity to replicate this successful model in other parts of Tendring and Essex.



## Achievement Through Football (Southend and Essex-wide)

Achievement Through Football (ATF) has humble beginnings – a simple vision to change the lives of vulnerable young people for the better.

Over 200 youngsters receive support through football, mentoring and counselling services. Relationships based on trust have developed in Southend, Basildon, Rochford, and Castle Point as the ATF gains momentum.

The project works with councils, schools and the probation service to help young people involved in the criminal justice system and those excluded from mainstream education. Outcomes range from a fall in anti-social behaviour, a rise in volunteering, a better understanding of community needs, and improved employability skills.

Another, Travis Chinnock, 19, had been expelled from school and also suffered from drug problems. But he heard about the project and transformed his life. He said: *“I had lost my way and needed a new opportunity and a fresh start, and the ATF really helped improve my confidence and I now really want to study an apprenticeship.”*



The Local Delivery Pilot is now playing a key role as the ATF seeks to support single-parent families and the Roma community across the county.

Stuart Long, ATF Project Coach, said *“It’s fantastic being part of the LDP and to receive such great recognition and financial support. We work in some of the most deprived areas of the county and we’ve got single parents who find it difficult just getting by, let alone exercising, which doesn’t really come on their agenda. We’re trying to engage with them and provide fun multi-sport activities and childcare at the same time, just to provide them with some positive headspace.”*

*We’re also building community relationships with parents within the Roma community, after slowly building trust with their children over time. Achieving success on both these fronts will be amazing.”*

For more information about the ATF, visit <https://achievementthroughfootball.org>

## Home Start Essex (Basildon and Essex-wide)

Home-Start Essex is a leading family support charity with over 30 years of frontline experience supporting families with at least one child under the age of eight. It recruits and trains parent volunteers to support local parents within their home who may be struggling with post-natal depression, isolation, stress and anxiety, bereavement or other issues.

Each week a Home-Start volunteer will spend up to two hours in the family home to offer emotional and practical support and what makes it special is that all of the volunteers have a lived experience as parents/carers themselves and now want to give something back to the community. In the last 12 months 210 volunteers have supported 453 families and 807 children in Mid, South and West Essex.

Home-Start Essex has received funding from Essex LDP to train and co-ordinate ten new volunteers in South Basildon to set up new ‘Walk & Talk’ sessions to engage 10 vulnerable families into regular exercise, expanding on the existing practice of Home-Start Essex (HSE). At the end of the project, families and their volunteers will sign up for a Park Walk with HSE.



They’ll start with accompanying the parent on a 10-minute walk out of the house and 10 minutes back each week over 8 sessions and at the end they’ll get a certificate. The aim is to extend the walk each week if they can, or to do a faster pace.

Lorraine Ferguson, Operations Manager, Home Start Essex, says: *“It’s really about getting them out and about. I based the idea on the concept of a family walk, which people don’t do nowadays. They don’t go out because they feel it’s unsafe, it makes them anxious and unless they have got a reason to go out they stay indoors. The children then start misbehaving and the parents think they’ve got behaviour problems. Getting out and about can break isolation and can really help with emotional wellbeing.”*

See [www.home-startessex.org.uk/volunteer](http://www.home-startessex.org.uk/volunteer)

# Focus group findings

## Focus Group findings from Basildon, Colchester and Tendring

A number of focus groups were undertaken during the summer of 2018 with community groups and citizens in the three test areas. The focus groups were led by a mix of Collaborate CIC, University of Essex and Active Essex and were focused on the three priority groups of families, older people and people with poor mental health.

The focus groups are part of community engagement work that provide the Essex LDP with invaluable insight into the lives of people in our target communities. Focus groups will be an important and regular part of our community engagement and insight work during the life of the LDP.

### The common themes emerging from the focus groups are:

- Many community activities involve physical activity as a hidden element rather than an up-front element (e.g. litter picking, group walks).
- Safety is a big issue, especially going out at night.
- Gardening is a popular activity.
- Routine is very important – activities to be the same day and time every week without interruption.
- The social aspect of activities is very important – many people will not attend unless they go with a friend or know that a friend will be there.
- Bus routes and taxis are expensive and prohibitive.
- The leader needs to be passionate and empathetic, and make time to get to know the participants and listen to them.
- Many participants are initially motivated because of personal health problems, but their motives for remaining are mainly for socialising and friendship.
- Participants really enjoyed the social environment provided within most activities. The support provided by leaders was appreciated, as was the inclusion of time for group members to talk with each other. Most participants had formed friendships that led to spending time together outside of the project.
- The venue where activities take place must be accessible and meet the needs of the participants.
- Participants valued an element of choice. For example, participants liked that they could attend different sessions, work at their own pace, and activities could be tailored to individual needs. They also appreciated the opportunity to shape the development of a project.
- Many participants reported progressing on to other projects and activities beyond the one they initially attended (e.g., moved on to play golf, try dancing, and go swimming). Many felt capable and motivated to try these and leaders aided them in finding opportunities. However, some participants felt that there was not enough connection between activities run by other organisations.
- Participants did express frustration when marketing materials were not tailored to the right audience (e.g., using inappropriate role models in promotional materials).

**“Going to a group thing by yourself is not fun. I don’t like it.”**

**“The thought of physical activity makes me nervous due to the fact that I hardly do any exercise.”**

**“Every week we start off by sitting and discussing our previous week. Occasionally someone will share something that happened that hasn’t been nice for them and they get it off their chest and get a lot of support from the group.”**

**“The activity is brilliant. It has changed my life. Without it I would be stuck at home. I am thinking of bringing my elderly mum with me.”**

## Strategic Sponsors Group

Cllr John Spence CBE	Chair, LDP Sponsors Group and Essex HWBB	Essex County Council
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Dr Mike Gogarty	Director, Wellbeing, Public Health and Communities	Essex County Council
Ian Davidson	Chief Executive	Tendring District Council
Mark Carroll	Executive Director for Economy, Localities and Public Health	Essex County Council
Anna Randle	Chief Executive	Collaborate CIC
Dr William Bird MBE	CEO and Founder	Intelligent Health
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Simon How	Health and Wellbeing Programme Leader	Public Health England
Emma Branch	Transformation Manager	Brentwood and Basildon CCG
Sharon Alexander	Chief Officer	Tendring CVS
Adam Rigarlsford	Strategic Lead	Sport England
Chris Evans	Chief Officer	Basildon CVS
David Sollis	Chief Executive Officer	Healthwatch Essex

## The members of the LDP Project Group

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