# TACKLING PHYSICAL INACTIVITY IN ESSEX:

Readiness for systems change

Main Report: Summary – October 2018







# Overview

These slides summarise overall findings from Collaborate's whole system diagnostic. More detailed findings are available on request from the Essex Local Delivery Pilot (LDP) team.

Aim: assess readiness for a whole systems approach to tackling physical inactivity for the LDP, and develop a route map of recommendations.

Our research focused on the 'system infrastructure' needed for partners to work together in the new ways required to achieve whole system change. While not the primary focus, where relevant, we also identified insights on the wider context for physical activity (e.g. on physical infrastructure such as green space, facilities, urban design).

Systems change is complex, emergent and takes time. This diagnostic exercise cannot hope to provide an 'answer' for developing a systems approach, but aims to surface key considerations for the LDP in developing a systems approach, assess readiness against these, and provide recommendations for next steps.

Approach: semi-structured diagnostic interviews and small scale community consultation in Basildon, Colchester and Tendring and a smaller number of Tier 1 interviews. Interviews covered: interviewees roles and relevance of physical activity to these, the context for physical inactivity, the role and potential of collaboration, and strengths /weaknesses in the system infrastructure.borate

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## 1. Overall findings about tackling physical inactivity

"Some people just shut the door and watch TV. You can't knock on their door – they don't want to know. Once they shut their door they're in their own world and don't want to be confronted by other people." – Sheltered housing resident

The below findings that emerged from our diagnostic are relevant to physical activity generally – across Essex and beyond. While these insights are not new, they highlight the importance of a whole system approach that responds to the specific circumstances of individuals and communities, and are foundations for the findings and recommendations that follow.

Summary of key messages:

- Inactivity is often linked to other complex issues in people's lives. Many inactive people face multiple and complex challenges in their day-to-day lives (e.g. poverty, caring responsibilities, health conditions, social isolation) that require responses that go far beyond typical physical activity programmes.
- While physical activity can help improve **social connections** and **mental wellbeing**, people who are the most inactive often require support to address these issues before they are able and willing to consider becoming more active as part of a wider healthy lifestyle.
- Helping people become active and sustain this takes time to build trust, understand the specific issues people face and what will motivate them. Often people are motivated to get involved for reasons other than becoming more active as an end in itself e.g. having fun, making friends, peer influence).

"Small, local community activities are much better than building a big leisure centre – this will work for a certain group but not for the people we need to target. The bit that is missing is a holistic assessment, not just about physical activity."

– Service provider



"While evidence is clear on the benefits of physical activity, within Essex it's pretty peripheral to what do. There's a lot of potential to embed physical activity in an overall sense in the system."

Partners across Essex recognise the importance of physical activity – the evidence base is clear on the benefits, and it has an important role to play in helping tackle significant health, social and economic inequalities in Essex. Every partner we spoke with identified that physical activity was in some way relevant to their work, and the potential to work together with communities to realise the mutual benefits across services.

However, there is a disconnect between recognition of the importance and relevance of physical activity, and how far action is being taken to realise this potential in practice. Barriers identified (the first two specific to physical activity, the third more general) that the pilot can help tackle include:

- 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 aren't there.
- **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 systems approach is needed to convince partners to invest time and resource.
- **Making system change a reality**: the appetite is there, and emerging collaboration on physical activity provides a positive foundation, but Essex are early in the journey. The mechanisms for collaboration, and the buy in and skills among Essex partners aren't yet embedded.

### 2. Essex-wide recommendations

There's consensus that shared visions and delivery plans need to be developed at a local (i.e. Basildon, Colchester and Tendring) rather than County level, with scope to deliver ward/hyper local initiatives as part of this.

There is a need to significantly increase collaboration at Tier 1, Tier 2, and local level, including with formal and informal groups that are not currently connected to or benefitting from the system.

County level partners and other districts across Essex have a key role to play in:

Making Essex Active: building system infrastructure and a 'movement' for physical activity

Supporting and enabling the pilot testing in Basildon, Colchester and Tendring

Sharing and embedding learning across Essex



There is appetite across partners to help make Essex a more active County; using the opportunity of the pilot to build an overall 'movement' on physical activity, including specifically engaging communities who face the greatest inequalities. The pilot can directly contribute and should also act as a platform for existing initiatives targeted at increasing physical activity and promoting healthy lifestyles more generally. Opportunities include:

- **Reviewing the totality of investment** and initiatives relating to physical activity in Essex and how the pilot's specific focus on targeting inactivity can best align with and complement these. This should include consideration of how the pilot can be a platform to communicate initiatives such as Active Essex, Livewell Essex and Provide lifestyle service in a joined up way
- Embedding physical activity more in considerations across multiple organisations, services and investments e.g. in transport and planning, more targeted use of capital funding and grant funding
- Making the most of political backing (e.g. the County Council Cabinet's motion on physical activity) as part of communications and overall 'movement building' on physical activity
- Promoting physical activity among **employees** across Essex and **employers** (e.g. in terms of performance, attendance, retainment of staff)
- Using the Essex Vision platform as an opportunity to raise visibility of and engagement with physical activity across **Essex partners and Essex Assembly.**

All partners were clear that detailed strategies should be developed at a local level to respond to specific opportunities and challenges in each area. But there are key opportunities for Essex-wide partners to support and enable the local pilots (and generate learning that could be applied beyond the three pilot areas).

- Establishing a **clear plan and parameters** for the pilot overall so that partners in Basildon, Colchester and Tendring have a sense of the boundaries and permission to develop locally tailored approaches
- Funding and commissioning: ensuring services commissioned at a County level relevant to physical activity are coordinated with and support the ambitions of local pilots
- Engaging with operational teams (e.g. adult social care and youth work staff) who work in the three target areas to gain their insights on what it will take to tackle physical inactivity, and raise their awareness of what opportunities are available locally to help people they support become more active
- Using strategic influence to support change at a local level e.g. engagement of CCGs and schools
- **Data:** using data and insight capability at a County level to support pilot areas to develop and share insights from their work, plus tapping into new data initiatives e.g. population health management work, partnership with Behavioural Insights Team and Nesta
- **Coordinating with County local initiatives:** such as new integrated Neighbourhood Teams and localities work in Basildon, Colchester and Tendring
- **Championing and celebrating new ways of working:** the pilot is a key strategic opportunity for Essex to test a systems approach. County partners have an important role in creating a culture of permission and helping the pilot overcome (rather than adhere to) bureaucratic processes

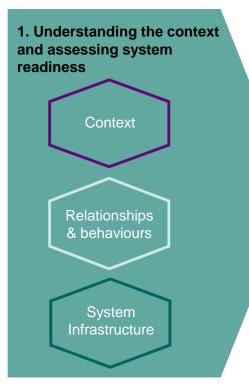
There is significant interest among partners (including from other districts in Essex) in learning from the pilot – about what is happening and how they can engage, and the insights and evidence emerging. There are significant opportunities to increase the range of partners involved in the LDP, including 'unusual suspects' who directly link to the pilot's target groups.

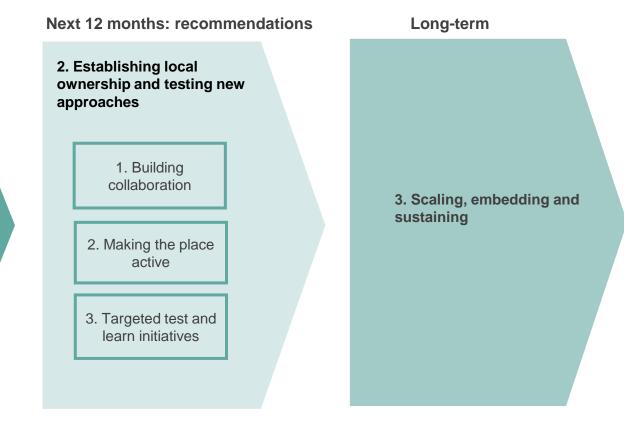
- **Communication** was one of the biggest asks by partners so they can understand what the pilot is focusing on and how they and their teams can engage and support. As part of this, it is important to communicate why the pilot is focusing on what it is (e.g. locations and target groups) we recommend an update on progress is circulated among partners by the end of 2018. Health inequalities in Essex were recognised as an important factor in communicating the context and need for the pilot.
- The pilot needs to ensure it **generates evidences on priorities** that reflect what partners need to know to help make the case and embed physical activity in their work, for example, in mental health or social care.
- These priorities include:
  - Identifying for **which cohorts** the biggest and most rapid gains in increasing physical activity and corresponding improvement in outcomes can be achieved;
  - Identifying **what works in helping people** to become more active as part of a whole system approach (and the key organisations/services who can embed learning from the pilot in their work and how);
  - Develop the evidence base in Essex on **impacts for specific target groups**. This should include building understanding of benefits for community cohesion and health at an individual and population level (for example, health partners wanted to see data on impact of physical activity on admissions/readmissions).

# 3. Local pilot areas (Basildon, Colchester, Tendring): overview

The following slides use this overarching route map to present findings and recommendations:

#### **Present: findings**





# 3. Local pilot areas: analysis framework

Working towards system change requires a deep understanding of local context, strong relationships, and a focus on building the infrastructure to hardwire change for the long term.

Our analysis of the readiness of the pilot areas of Basildon, Colchester, and Tendring to work in new ways to tackle physical inactivity, explores these three areas:

#### **Understanding context**

What is the place like overall and specifically what are the opportunities to build on and challenges to address to tackle physical inactivity?

See the ten key sectors Intelligent Health have identified must work together to create active communities

[Appendix 1]

# Relationships and Behaviours

How far do organisations and individuals work together in a way that makes whole system change possible? What is the potential?

See the pre-conditions for systems change identified in Collaborate's Behaving Like a System report

[Appendix 2]

#### System Infrastructure

What collaborative infrastructure exists to enable and sustain whole system change on physical activity? What else is needed?

> See Collaborate's Building Collaborative Places system infrastructure building blocks

> > [Appendix 3]



# 3. 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. [They] want to be seen to be given something not have things taken away." – Community group

#### Context

- Range of top class facilities and green space. But key barriers for the most inactive including linked to a 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 realised currently
- The pilot could play an important role in overcoming a history of siloed working
- Physical regeneration needs to consider opportunities to build community capacity and social infrastructure

#### **Relationships & behaviours**

- Building relationships and developing collaborative behaviours is an essential starting point – to raise awareness among partners of what each other are doing and develop trust to work together
- Desire to work differently across partners including the Council, CCG and voluntary sector is a positive foundation for engaging with communities
- The pilot has the potential to influence more collaborative working in Basildon far beyond physical activity.

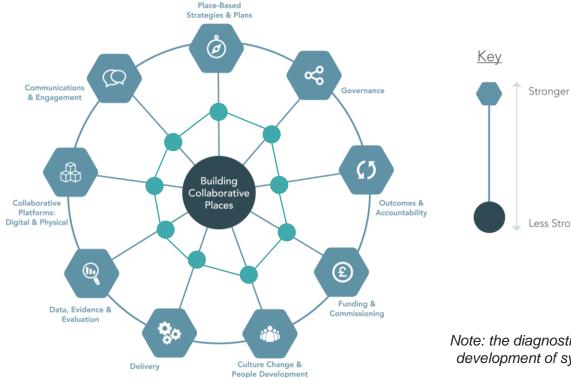
#### System infrastructure

- Approach needs to be different to what's gone before (a lack of collaboration between local services and with 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
- Key role for the pilot to join up strong but fragmented activities that currently aren't visible or linked into formal structures, and develop new forums for collaboration which is a barrier to collaboration currently
  - Building and sharing data and insight among partners is a priority

"There are lots of people who want to do really good things but collaboration takes place coincidentally rather than because it's been thought through. It could be so much broader and have more impact." – Local provider

# 3. Basildon: summary of system infrastructure findings

The diagram below provides a high level summary of the status of system infrastructure for physical activity in Basildon based on areas of strength and weaknesses identified by people who participated in the diagnostic.



As the LDP aims to create a whole system approach to tackling physical inactivity that does not exist currently, it is not a surprise that many of the building blocks require further development. There are significant opportunities and ambition to make these developments happen.

The strongest areas in Basildon are shared vision and governance given central work on this through the LDP, and culture change based on the signs of and appetite for new ways of working – this will be an important foundation for the pilot.

Note: the diagnostic is intended as a design process to help shape the development of system infrastructure needed in the next phase of the pilot, not a rigorous benchmarking exercise.

# 3. 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 public on the journey of why this is important
- There are a range of community assets, local passionate enthusiasts, and VCS 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

#### 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

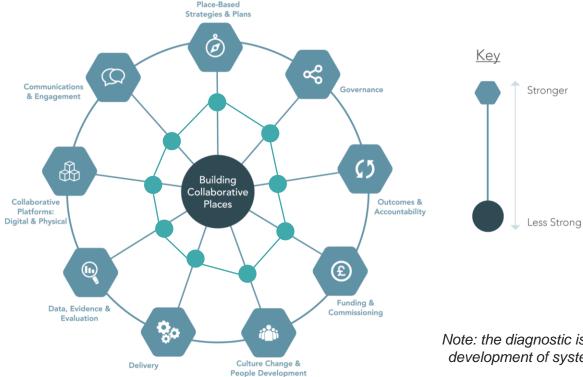
#### System infrastructure

- Some key foundations in place for building and developing a system approach e.g. well funded and thriving voluntary sector and One Colchester vision for collaboration
- However the links between delivery and strategy are not always apparent and some key assets (e.g. facilities and funding) are not collectively harnessed around shared priorities
- The ambition for shared outcomes is high with the pilot 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 in delivery

"There is fantastic community spirit in Colchester, but the diversity needs to be examined" – Service provider

# 3. Colchester: summary of system infrastructure findings

The diagram below provides a high level summary of the status of system infrastructure for physical activity in Colchester based on areas of strength and weaknesses identified by people who participated in the diagnostic.



As the LDP aims to create a whole system approach to tackling physical inactivity that does not exist currently, it is not a surprise that many of the building blocks require further development. There are significant opportunities and ambition to make these developments happen.

The strongest areas in Colchester are shared vision and governance given central work on this through the LDP and wider One Colchester Partnership, and culture change given signs of/appetite for new ways of working.

Note: the diagnostic is intended as a design process to help shape the development of system infrastructure needed in the next phase of the pilot, not a rigorous benchmarking exercise.

# 3. Tendring: summary of findings

"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

#### 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 pilot

#### **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

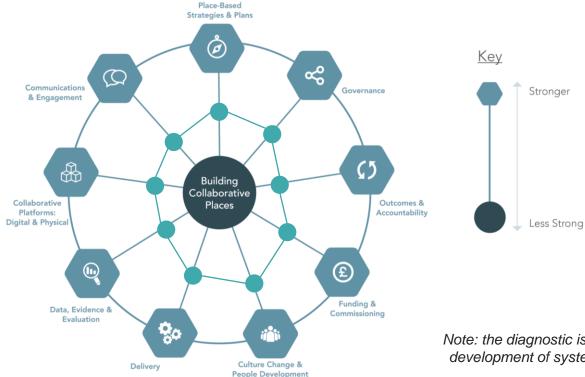
#### System infrastructure

- Deep 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

*"If we just had one pot of money that we used collectively, it would be a dream. You can't even unpick it due to its complexity." –* Council officer

# 3. Tendring: Colchester: summary of system infrastructure findings

The diagram below provides a high level summary of the status of system infrastructure for physical activity in Tendring based on areas of strength and weaknesses identified by people who participated in the diagnostic.



As the LDP aims to create a whole system approach to tackling physical inactivity that does not exist currently, it is not a surprise that many of the building blocks require further development. There are significant opportunities and ambition to make these developments happen.

Tendring has particular strengths in culture change and delivery based on the existing track record of collaborative approaches.

Note: the diagnostic is intended as a design process to help shape the development of system infrastructure needed in the next phase of the pilot, not a rigorous benchmarking exercise.

# 3. Local pilot areas: principles

Below we identify key principles that emerged from our system analysis, and set out how these have informed the recommendations on the subsequent page.

Principle	How this is reflected in the route map
Locally owned and co-produced	<ul> <li>The formation of broad local partnerships to oversee and drive the pilot in a way that reflects the local context</li> <li>Community engagement and co-production with diverse stakeholders throughout to build a 'movement'</li> <li>Strengths based approach - identifying and building on local assets is the starting point for all work, including tapping into local people's passions and interests, and supporting and enabling communities to take action</li> </ul>
Genuine and <b>diverse</b> partnership	<ul> <li>Developing diverse partnerships is central to the route map to ensure a sense of shared ownership, provide coordination and enable a whole system approach that tackles diverse factors that impact physical activity</li> </ul>
Focus on people relationships	<ul> <li>Developing trust and relationships a key element of building the partnerships, including with local people. Targeted initiatives will bring together professionals and local people to help 'make every contact count'</li> <li>Developing the skills of the workforce and ways of working that enable a more people-centred collaborative approach</li> </ul>
Test and learn to insight throughout	<ul> <li>The partnership has overall responsibility for learning including coordinating with the LDP national programme and Essex evaluation partners, and translating this locally. This should include learning about taking a whole system approach</li> <li>Targeted initiatives will be informed by existing data and will be an opportunity to generate rich insight into issues impacting on physical activity and potential solutions</li> </ul>
Target resources where they can the most difference	<ul> <li>Tackling physical inactivity among the most inactive groups can be very time and resource intensive. Alongside whole- place approaches (e.g. creating active environments), targeted initiatives (focused on specific geographies/issues/demographic groups) will provide the focus and space for diverse partners working on complex issues to test new ways of working together to make progress and generate learning that can be built on elsewhere</li> </ul>
Communicate throughout	<ul> <li>Building and sustaining the diverse partnerships outlined in the route map will require effective and regular communication with a wide range of stakeholders. Communications should set out a common language to describe the pilot and what it means locally and should be updated throughout to maintain momentum and engagement</li> </ul>

### 3. Recommendations:

This detailed route map summarises recommendations for the next phase of work in Basildon, Colchester and Tendring based on the findings and principles outlined previously. The implementation of each strand would vary in each place, informed by detailed findings on system readiness in each.

2. Making the place active: building a local movement and system infrastructure

Identifying opportunities and taking action to make the Borough/ District more active as a place overall. Promoting a culture of community activity is key along with coordinating action to ensure transport, green space, and overall investment relating to physical activity encourages more active lifestyles. 3. Providing leadership for targeted test and learn initiatives to address inactivity

Providing leadership to ensure the most inactive 1.Building collaboration: people have the more intensive support and to provide overall direction and connections they oversight of the pilot locally need to increase The partnership will be responsible levels of activity. for collaboratively developing a This will include local vision, governance, using data to leadership, evaluation and determine the focus learning, communication, and of target initiatives coordination with the overall and helping bring together people to co-Plus two specific roles: produce responses.

> Initiatives co-produced by a partnership of key local stakeholders (e.g. practitioners, community groups, commissioners, councillors) and citizens.

a partnership

Essex LDP.



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> Collaborate is an independent CIC based at London South Bank University, focusing on the thinking, culture and practice of cross-sector collaboration in public services. We believe that an increasingly complex operating environment needs an outcomesfocused and more collaborative approach – and we work with government, business and civil society to make this happen in practice. Instead of 'public services', Collaborate facilitates coalitions developing 'services to the public' – efficient, dynamic services that have closer relationship with the people using the, and are more resilient to the challenges they face.

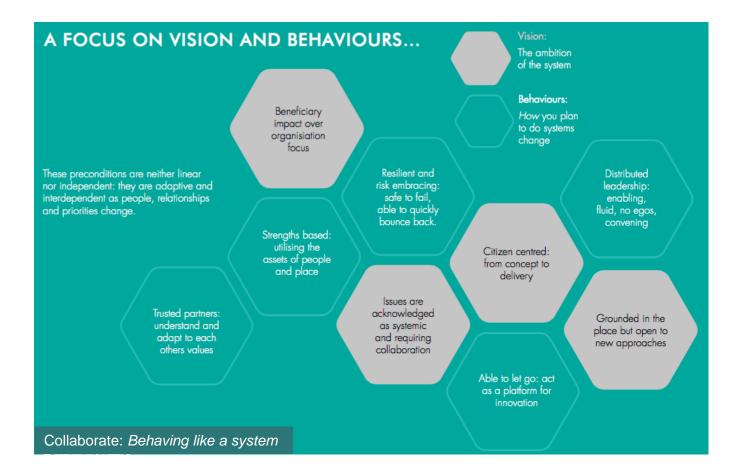
> > Cover images taken from waldegraves.co.uk, c1.staticflickr.com, ms-uk.org and thebadmintonacademy.org

### Appendix 1: sectors that contribute to active communities



Intelligent Health

### Appendix 2: pre-conditions for systems change





### Appendix 3: the nine building blocks of system infrastructure





1. Place-Based Strategies & Plans

2. Governance



3. Outcomes & Accountability

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4. Funding & Commissioning



5. Culture Change & People Development



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6. Delivery

7. Data, Evidence & **Evaluation** 



8. Collaborative Platforms: **Digital & Physical** 



9. Communications & Engagement



Collaborate: Building Collaborative Places