

Active Calderdale Process

Evaluation Report

September 2020 – March 2021

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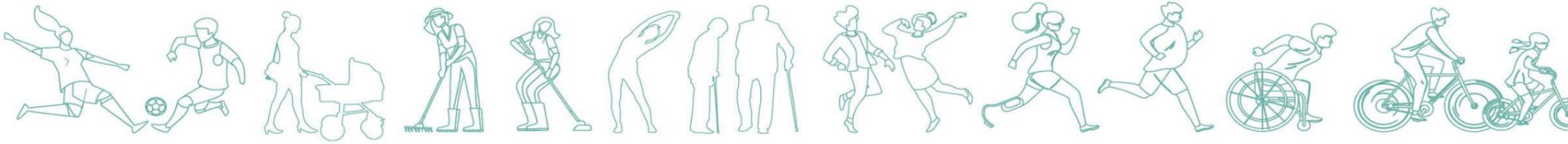


Table of Contents

Table of Contents **2**

1. Introduction and Contributions **3**

 1.1 Method statement 3

 1.2 Evaluation approach 3

 1.3 Contributions 4

2. What has been happening in the last six months and what has the LDP learnt? **4**

 2.1 Guiding frameworks 4

 2.2 Lockdowns and COVID-19 5

 2.3 Core Team 5

 2.4 Transformation Group 7

 2.5 Networks 7

 2.6 Evaluation Team: Deep Dives and Collaborate 8

 2.7 Design Thinking Course 8

 2.8 Campaigns and communications 9

 2.9 Liveable neighbourhoods 10

 2.10 Locality approach in Park ward 10

3. What is being observed and learnt or what changes are happening as a result of the last six months? **11**

 3.1 Importance of working up an “offer” 11

 3.2 Aligning narratives with a clear end goal 11

 3.3 Creating the time and space 11

 3.4 Senior leader presence 12

 3.5 The power of bringing people together 12

 3.6 Seeing “people like me” matters 13

 3.7 Collaborate to extend, not duplicate 13

 3.8 The virtual world ‘hears’ different voices 14

 3.9 The ripples 14

 3.10 The unexpected achievements of the work 15

 3.11 Understanding why people aren’t engaging 15

 3.12 Fresh faces in the environment 15

 3.13 Battling barriers and impediments 16

 3.14 Social media relationships 16

 3.15 Pandemic continues to create the conditions for change 16

 3.16 Re-establishing work post-COVID 17

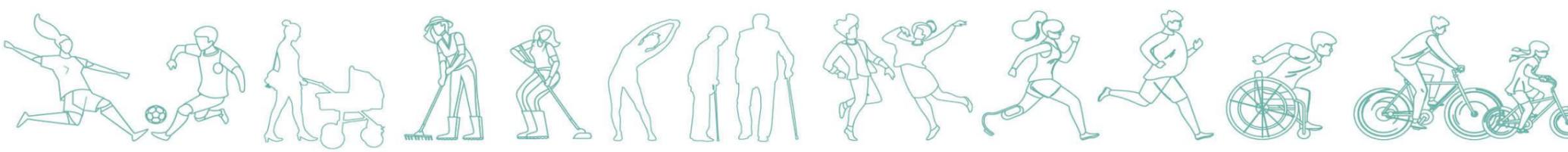
4. How is this shaping where the Calderdale LDP goes next and what does this tell us about the context and system that the pilot is working with? **17**

5. Conclusion **18**

Key videos and blogs from the last six months: **18**

Appendix 1: Family Support Service Design Thinkers Action Plan **20**

Appendix 2: Social Media and Website Analytics **23**



1. Introduction and Contributions

1.1 Method statement

It remains important for the evaluation and research to “**make sense**” of what is happening as a result of the Active Calderdale Local Delivery Pilot’s (LDP) work. In particular, (i) how and why change occurs across systems and their services and organisations, (ii) what the conditions needed for change and influencing the end user’s behaviour are, and (iii) embedding physical activity into an organisation or service area is the vital behaviour we want to establish, but what is the best way to do this for long-term and sustainable change? The LDP’s focus on demographic groups remain as previously reported; the inactive, individuals on low incomes, women and girls, minority ethnic groups, individuals with a disability or long-term health condition, and the elderly. Furthermore, the emphasis remains on North and Central Halifax, the areas with the highest index of multiple deprivation. Investment is being made towards community engagement officers in the Lower and Upper Valley areas of Calderdale.

We continue to work towards understanding the impact of the LDP on addressing the following five main outcomes:

1. Physical wellbeing
2. Mental wellbeing
3. Economic development
4. Community development
5. Individual development

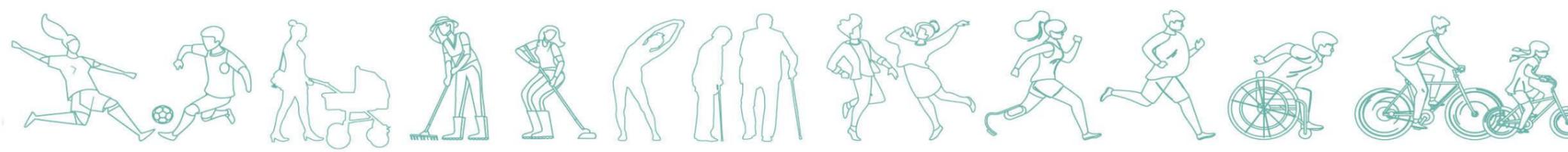
Evaluating and addressing these five outcomes helps to support Sport England and local government to better understand how they can achieve whole system change for the lasting benefit of local residents. Therefore, the overarching aim of the evaluation continues to be:

To improve understanding of how a whole systems approach to positively affecting physical activity behaviour can create change at all levels of the system to release the adaptive capacity of low-active individuals, groups, and whole communities in a place.

1.2 Evaluation approach

The evaluation is being undertaken by Dr Alexandra Potts from Leeds Beckett University, who is an embedded researcher within the Active Calderdale LDP programme office and Core Team, and the evaluation is overseen by Professor Jim Mckenna also from Leeds Beckett University. Through being an embedded researcher within the LDP, this has allowed the development of a thorough understanding of Active Calderdale, the approach, and the complex nature of the system surrounding the LDP. This immersive process has helped to develop relationships between the evaluation team (Alexandra on a daily basis and Jim on a frequential basis) and the Core Team, Transformation Group, and stakeholders. In doing so, this has allowed Alexandra, in particular, to be a part of the Core Team who engages in regular and open conversations with LDP colleagues, rather than “imposing” on the team as an external evaluator who is in a position to find out what is happening and anonymously report or critique. It has also allowed for changes and stories to be captured on both a zoom-round (i.e., changes to the immediate system), zoom-in (i.e., changes to the system detail), and zoom-out (i.e., changes to the bigger system) perspectives.

While Alexandra’s role as an embedded researcher largely focuses on capturing stories and changes, it is important we capture and report on the impact of the LDP work that is being done. We now have secured a dedicated post for data and intelligence for the LDP and we are grateful that Megan Hooson joins the Core Team to help support



on the impact and data side of the LDP work. While Sport England remain open to learning from the LDPs and capturing these stories and changes that are impacting resident's lives, it is important that we produce metrics and data relating to the five main outcomes (physical wellbeing, mental wellbeing, economic development, community development, and individual development). The impact data collected will be reported on later in 2021 (pushed back a year from 2020 due to COVID) and again in 2022 and 2024.

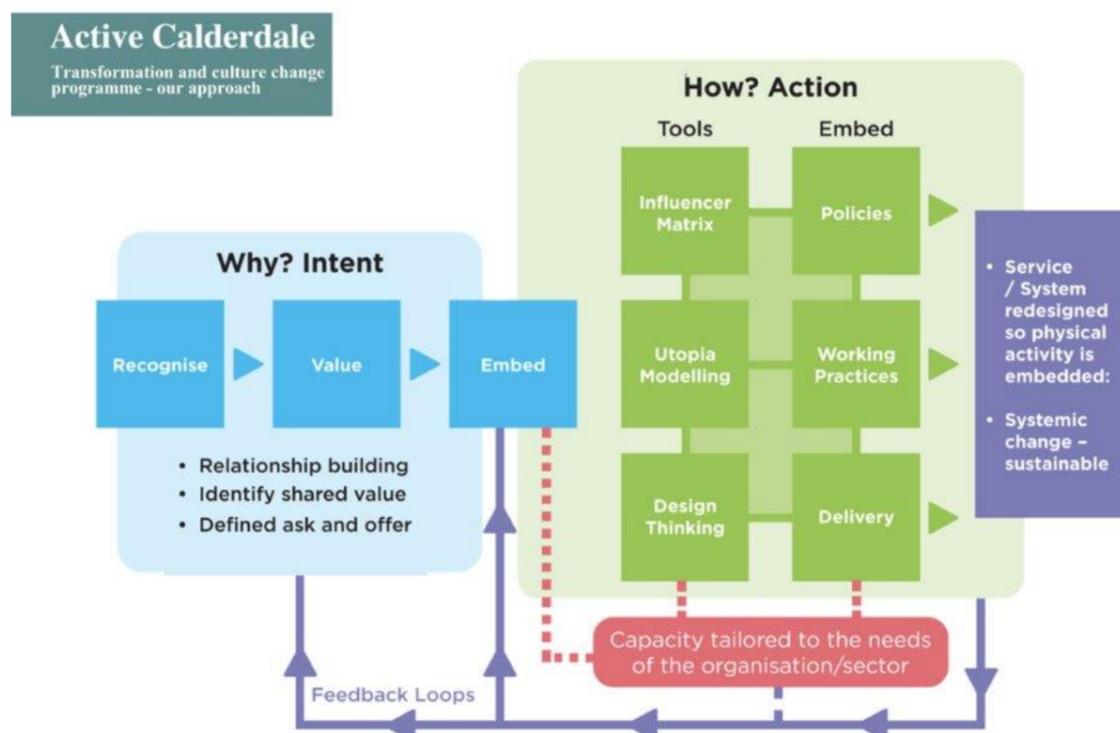
1.3 Contributions

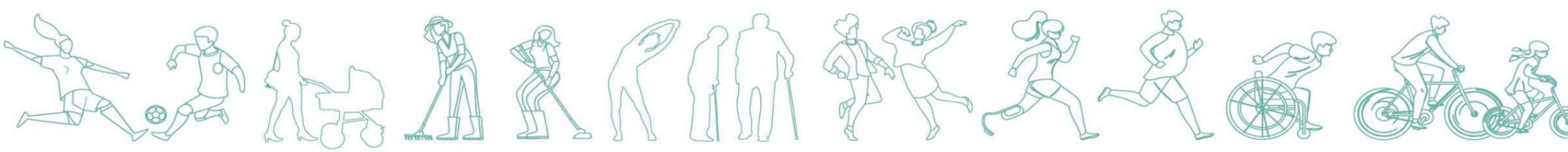
A variety of individuals contributed to this report and I (Alexandra) would like to thank these individuals for their time, reflections, and work on the insight provided in this report and for reviewing and contributing to drafts. Specifically, the Core Team who provide regular updates and reflections in weekly Core Team meetings and informal discussions at other points. Richard Croker, the LDP programme manager, and Ben Williams, the Sport England Local Delivery Pilot Link, who have contributed regular reflections and reviewed drafts of the report, and Russell Turner and Toby Wood from Sport England who reviewed the report prior to submission. Finally, Professor Jim McKenna who oversees the evaluation and contributes to reflections, behaviour change tools, and drafts of the report.

2. What has been happening in the last six months and what has the LDP learnt?

2.1 Guiding frameworks

The Recognise, Value, and Embed (RVE) and Policy, Working Practice, and Delivery (PWD) frameworks continue to prove useful as guiding frameworks for the LDP work both within the Core Team and when working with partners. The approach and guiding frameworks have gained traction and support in helping to redesign services and allows the LDP team to be direct about how they want physical activity to be embedded. The Core Team continues to use these frameworks when working with organisations, partners, and service areas to help guide them through the process of embedding physical activity within their infrastructure and culture.





Alongside the RVE and PWD frameworks, a number of tools are used to help embed physical activity. These include the Influencer Matrix, which is a working model of the COM-B (capability, opportunity, and motivation) behaviour change theory, Utopia Modelling, Design Thinking Course (more detail below), and, more recently, the FEAST behaviour change framework. FEAST stands for Fast, Easy, Attractive, Social, and Timely, and, traditionally, is a guiding framework when creating interventions, but the Core Team have found it useful to apply the FEAST framework when working with partners to embed physical activity.

It is important to note the tools used to help embed physical activity are evolving with practice and application. For example, completing the Design Thinkers Course with the Family Support Service has allowed on us to reflect on the approach. While the Influencer Matrix was a good tool to work through with the Family Support Service, we recognised the importance of spending more time on the fundamentals and underpinning functioning of the Influencer Matrix. Consequently, we have dedicated more time to this during the second Design Thinkers Course with pathways from South West Yorkshire Partnership Hospital Trust Foundation.

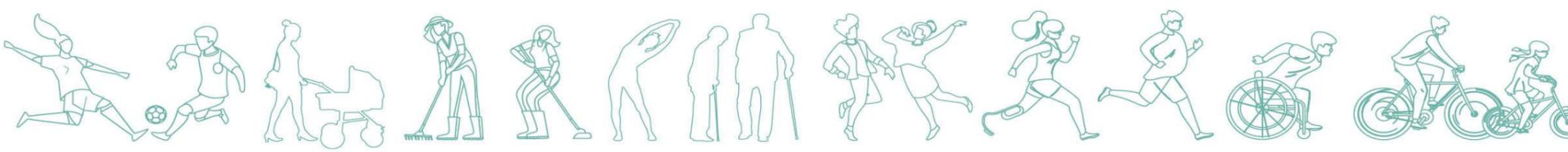
2.2 Lockdowns and COVID-19

Three lockdowns over the last year has radically transformed the way Active Calderdale has had to operate. Switching from face to face working ways to a virtual world has been challenging but the team has adapted well. The “working from home” world has accelerated some work beyond “normal” speed. For example, networks and meetings with senior leaders, who can make changes at a policy and strategic level, appear to have more flexibility and opportunity to dial into online calls around the Active work. Initiatives have been developed (e.g., Move the Calderdale Way and #StepOutChallenge) which has allowed the LDP to influence through partners despite the virtual ways of working. Motivated by an implicit understanding of the deep harm of prolonged social isolation and physical inactivity, an emphasis was placed on encouraging residents to “focus on what they CAN do this winter: keep Calderdale moving.”

However, COVID-19 impacted work being delivered, particularly for the community engagement officers who can no longer be a physical face in the community, where they are hosted at either Halifax Opportunities Trust or North Halifax Partnership. Furthermore, from a wider Core Team perspective, COVID-19 continues to pose a challenge for the Core Team, particularly for those who are employed by areas in the council. A number of the Core Team have been redeployed to attend to COVID related activities, which has limited the Active progress that can be made. This has also been noticed wider, with members of the Transformation Group and other key individuals at a strategic level being pulled away from Active work and meetings, often at last minute, to attend to COVID-19 related activities. Recognising this fact has enabled the Core Team to be flexible with assets and influence when they are able to engage.

2.3 Core Team

Over the last six months a number of new faces have joined the Core Team, funded from either core capacity or dedicated posts. From a core capacity perspective, we welcomed Caroline Fox (Project Manager), Brogan Smith (Digital Content and Engagement Officer), and Megan Hooson (Data and Insights Officer). From a dedicated posts perspective, Iffath Hussain joins leading on mental health as part of South West Yorkshire Partnership NHS Foundation Trust and Rebecca Anticliffe joins as Education Manager. Furthermore, two community engagement coordinators are being recruited for the Upper and the Lower Valley areas of Calderdale. It is important to note the tension between growing a big Core Team versus having enough capacity to mobilise systems. While the programme office team has been careful not to expand the team too much, there is a need for capacity to manage the change and embed element, in particular, across the system.



2.4 Transformation Group

The Transformation Group continues to meet virtually on a six-weekly basis and engagement has increased. Moving away from an update-style meeting, the group is now often asked to “zoom in” on one of their service areas to explore opportunities for physical activity. As a Core Team, we are clearer on what we want to get from the Transformation Group. For example, in November 2020 the Transformation Group engaged in an asset mapping task to gain a better understanding of what assets we can build on and utilise across the system to support and maximise the active agenda, with particular emphasis on the ones the Transformation Group has influence over. The Transformation Group then prioritised their individual top two assets where immediate efforts should be placed and what next steps need to happen to mobilise the priority assets to support the active agenda.

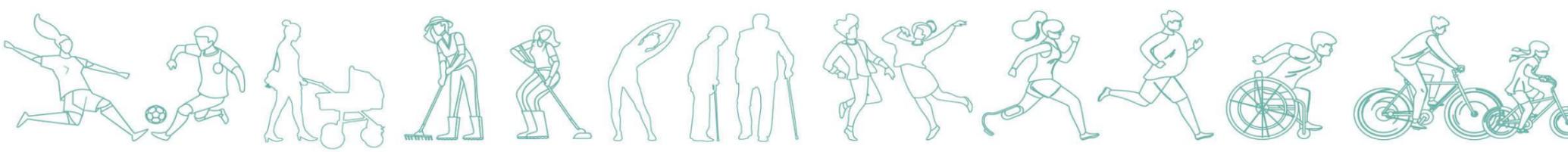
In February 2021 the Transformation Group engaged in a policy mapping activity. This involved identifying policies and strategies the group is either aware of or involved in and understand how well physical activity is embedded within them – either fully embedded, partially embedded, or not embedded at all. This identified the policies and strategies the Transformation Group can collectively prioritise to ensure physical activity is embedded and explore who can support with this. Collectively, this work has allowed us to progress work in areas that have previously been challenging (e.g., planning), and social influence (i.e., seeing “people like me” leading on active) is coming through from individuals in the Transformation Group.

2.5 Networks

A number of networks have been created over the last 12 months. In the previous process evaluation report, we reported that the Implementation Group was to be disbanded and a new network approach was proposed. Each member of the Core Team would have governance and responsibility for their own Network Group, made up of key individuals within their organisation or service area.

We reported on the beginnings of the Health and Social Care network in the previous report, and it is pleasing to report on the success of this network. Since its establishment, the Health and Social Care network has held meetings every eight weeks to help support embedding physical activity into the health and social care pathways. Individual members have completed the Moving Medicine Active Conversations training. This training helped attendees to build the conversational skills to address physical activity with their patients and/or clients. Furthermore, the Cardiac Rehabilitation through Exercise and Walks (known locally as CREW) presented on the physical activity sessions and opportunities they offer to support people to be active in the community. While these are targeted at cardiac rehabilitation patients primarily, the opportunities are open and facilitated for all residents to engage with and it is important for network partners to link with CREW to make these connections to direct residents to these opportunities.

Off the success of the Move the Calderdale Way challenge with the Voluntary and Community sector in September 2020, a Voluntary and Community network has been established in partnership with the Voluntary Sector Infrastructure (VSI) Alliance. The VSI Alliance is a partnership between the Clinical Commissioning Group, Voluntary Action Calderdale, Calderdale Metropolitan Borough Council, North Bank Forum, and Locality and West Yorkshire Community Accounting service, and working with the VSI Alliance allows Active Calderdale to influence through the VSI Alliance to change the culture of physical activity in the voluntary and community sector across Calderdale. While in its infancy, with only one network meeting so far, there is enthusiasm across the sector about active and many organisations are exploring options of how the Move the Calderdale Way incentive money can be invested into embedding physical activity within their offer. Over the coming months, Active Calderdale will work with the network to support them in embedding physical activity as part of their offer.



As part of a localised, zoom-in, approach two local networks have been developed: (i) Illingworth and Ovenden Active Network Group and (ii) Mixenden Active Network Group. Again, while in their infancy, these networks provide the opportunity to discuss the local area and make connections between individuals and stakeholders. Establishing these networks in the community will be imperative to provide a “hub” of information about Active and to help implement change.

2.6 Evaluation Team: Deep Dives and Collaborate

Six-weekly Deep Dives between the evaluation team, programme manager, communications officer, and Sport England LDP colleagues have continued to be useful over the last six-month period. While Deep Dives operate with no set agenda, having the dedicated time and space has allowed us, as a team, to reflect on our approach and current work as well as explore challenges and future opportunities. It has also allowed us to be creative in a safe space and develop opportunities such as the Design Thinkers Course and work on “nudges” across the system. Furthermore, we have focused on the “so what” of the work Active Calderdale is doing to explore the impact of system change on individual behaviour. We have explored options to capture residents’ perceptions of their local environment (e.g., local parks, transport infrastructure) and services they engage with (e.g., GP surgeries, workplaces) to help us to extend our understanding of local systems.

With the help of the Collaborate CIC team, January brought an opportunity to grapple with some of the complex challenges and questions the LDP has been struggling to answer thus far. Specifically, the LDP team took three questions to the CIC group:

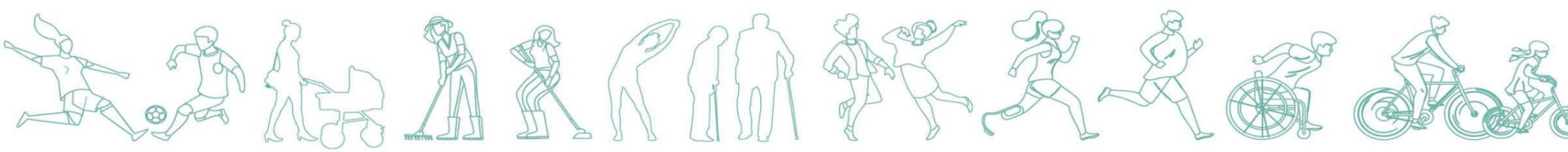
1. How do we measure the ‘indirect’ impact (i.e., the ripples) of Active Calderdale’s work in an efficient, economic, and effective way?
2. How do we efficiently monitor and measure the economic impact of Active Calderdale’s work?
3. How do we monitor and measure if an actor values or continues to value physical activity, without Active Calderdale’s support?

While we do not yet have answers to these three questions, the Collaborate CIC team provided a useful opportunity for discussion and food for thought. This has been important in continuing discussions with Sport England around the local evaluation with Active Calderdale and also how Sport England evaluates on a national level. These discussions are impending; outcomes will feature in the next process evaluation report.

2.7 Design Thinking Course

Following discussions in the deep dives, an Active Calderdale Design Thinking Course has been developed. This course aims to have dedicated time and capacity set aside, via a series of workshops, for the LDP team to work with a particular partner to help embed physical activity into their policies, working practices, and delivery. Over a series of five workshops, the Family Support service engaged in the first Design Thinking Course. The course helped the Family Support Service to highlight key areas where physical activity could be embedded, while creating opportunities for staff to develop the skills to encourage others to be physically active. Furthermore, the Design Thinking Course provided a good opportunity to re-frame perceptions of physical activity away from inactivity being the fault of the individual and more towards the notion that the system has not yet created the right conditions.

As part of this, an action plan (see Appendix 1) established priorities at both an organisational and service user level. For example, on an organisational level the Family Support service staff have been enrolled onto the Moving Medicine Active Conversations training and physical activity will be included as a standard question in the initial assessment forms. On a service user level, there will be more signposting to relevant activities and challenges to get both



staff and families active have been suggested (e.g., Take 10 or “Move Your Own Way”). The process has helped to co-produce actions and helped teams and services to understand the ask.

The next Design Thinkers Course began in February 2021 with service areas in the South West Yorkshire Partnership NHS Foundation Trust, including the perinatal service, learning disabilities service, and early psychosis intervention service. This group have progressed through a number of the Design Thinkers workshops and are currently at the phase of creating their action plan and delegating roles and responsibilities. We will report on their progress in the next process evaluation report.

2.8 Campaigns and communications

A combination of cold and miserable weather alongside shorter days means that winter poses further challenges for individuals to get active. To encourage individuals to be active during this more challenging time, the Active Calderdale team devised a walking challenge called “Active Calderdale Take Ten #StepOutChallenge” for December 2020 (<https://active.calderdale.gov.uk/blog/take-ten-stepoutchallenge>). The aim of the campaign was to challenge everyone to get outside for a walk for at least 10 minutes every day during December. To support this, Active Calderdale has created a calendar (see below) which includes additional challenges based around the ‘Five Ways to Wellbeing’ to further encourage and support people to take at least 10 minutes out of their day to get outside and walk.

The Active Calderdale team encouraged networks, system leaders, and the Core Team to take part and join the challenge on Twitter, and to spread the word and encourage others to take part. Following the challenge, a number of Twitter polls were done to gain some ‘quick win’ feedback. Although the uptake was small, the polls found that after taking part in the #StepOutChallenge, 60% of participants said their mental wellbeing and daily productivity had both significantly improved. Furthermore, prior to the challenge, 40% of participants were active for 30-90 minutes a week, compared to after the challenge where 75% of participants were active for over 120 minutes a week. Importantly, this work underlines that short-term local campaigns can be effective in increasing physical activity. This, more advanced understanding, needs to be promoted more widely; it confirms that physical activity delivers on its ‘promise’.

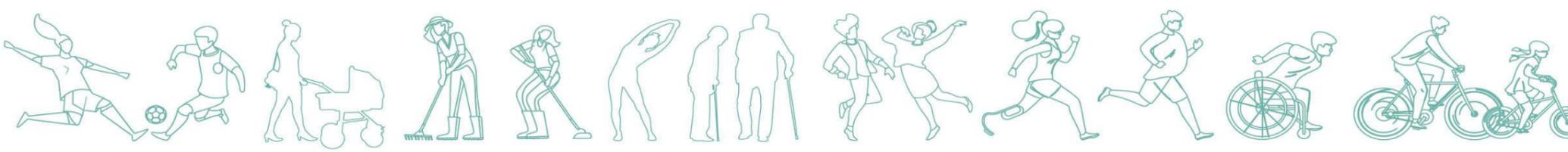
ACTIVE CALDERDALE

TAKE TEN THIS DECEMBER WITH THE #STEPOUTCHALLENGE!

This winter let's celebrate one thing that we can do – go for a walk at lunchtime!

Stepping out of your front door even for a short walk can really boost your physical and mental health – so that's why we're challenging you to Step Out for 10 minutes every lunchtime in December. To keep it fresh, we've also got a different suggestion each day for things you can do while you're walking to give your wellbeing an extra boost! Join in with us every day on Twitter #StepOutChallenge.

- START TODAY** Step Out at lunchtime for 10 minutes!
- CONNECT** Phone a friend while you Step Out this lunchtime!
- BE ACTIVE** Tracking your steps? Try to beat your score from yesterday when you Step Out today!
- TAKE NOTICE** When you Step Out today, take note of your posture - can you pull your stomach muscles in and your shoulders back as you walk?
- LEARN** Listen to a podcast and learn something new when you Step Out today.
- GIVE** Can you pick something up from the shop or pharmacy for someone who needs it when you Step Out today?
- CONNECT** Ask a friend to Step Out with you this lunchtime! (Make sure to stick to the latest COVID-19 guidance and stay socially distanced!)
- BE ACTIVE** Try to include walking up a hill when you Step Out today.
- TAKE NOTICE** Take a photo of something you like on your walk when you Step Out today and share it on Twitter #StepOutChallenge.
- LEARN** Take a photo of a tree when you Step Out today and research what type it is when you get back.
- GIVE** Can you pick up some litter when you Step Out today?
- CONNECT** Ask a colleague to Step Out with you this lunchtime! (Make sure to stick to the latest COVID-19 guidance and stay socially distanced!)
- BE ACTIVE** What is your best step total? See if you can beat it when you Step Out today!
- LEARN** Learn how to count to ten in a new language and practice when you Step Out today.
- GIVE** Could you offer to walk a neighbour's dog when you Step Out today?
- CONNECT** Ask a neighbour to Step Out with you this lunchtime! (Make sure to stick to the latest COVID-19 guidance and stay socially distanced!)
- BE ACTIVE** See if you can walk a little faster when you Step Out today.
- TAKE NOTICE** Listen to your favourite song when you Step Out today - how does it make you feel?
- LEARN** Take a photo of an interesting building when you Step Out today and search when it was built when you get home.
- GIVE** Help clear leaves from a pavement when you Step Out today.
- CONNECT** Smile and say hello to everyone you pass when you Step Out this lunchtime.
- BE ACTIVE** Try taking longer steps when you Step Out today.
- TAKE NOTICE** Listen out for the sounds around you when you Step Out today.
- LEARN** If you spot a dog when you Step Out today, try and find out what breed it is.
- GIVE** Give a compliment to a colleague or friend by text message when you Step Out today.
- CONNECT** Make a plan to text, email or video chat with a friend when you get back from your walk today.
- BE ACTIVE** One last time, let's try and get the most steps in that you can when you Step Out today!
- TAKE NOTICE** See if you can turn down a new street when you Step Out today.
- LEARN** Pay attention to the muscles that you use when you Step Out today, then learn what they're called when you get home.
- GIVE** If you see someone, ask how they are when you Step Out today.
- REMEMBER**
 - We are encouraged to take as much outdoor exercise as we like in outdoor public places such as streets and parks.
 - Make sure you are up to date with the latest COVID-19 guidance for Calderdale: www.calderdale.gov.uk/coronavirus
 - You must keep a 2m distance from anyone who is not from your household or bubble at all times.
 - We suggest lunch time is the perfect time to get out because it will be light outside – but it will still be cold so wrap up warm!



With an emphasis on harnessing the power of social influences, the focus in February moved towards encouraging family and friends to be active with a #FamAndFriendsFeb focus on social media. Releasing adaptive capacity relating to physical activity among individuals can be a powerful tool in allowing others to engage in healthy behaviours.

Away from campaigns and looking at a more strategic level, the communications team have set out their strategy for 2021, have collated a series of key documents which will be integral for the Core Team to use when driving the work, and have created a welcome pack for new partners. Furthermore, the Active Calderdale website is under review and the hope is to make it more accessible to all (i.e., residents and partners) and reflect our transparent approach. A series of videos have been created to showcase some of the excellent and exciting work of the LDP. This has been in collaboration with local partners, including the Basement Project, Voluntary Action Calderdale, and Calderdale and Huddersfield NHS Foundation Trust.

2.9 Liveable neighbourhoods

The physical environment plays a vital role in how active and healthy we are and there are clear associations between the neighbourhood-built environment and physical activity behaviours. Walking is perceived to be one of the greatest opportunities for increasing physical activity levels of the population.

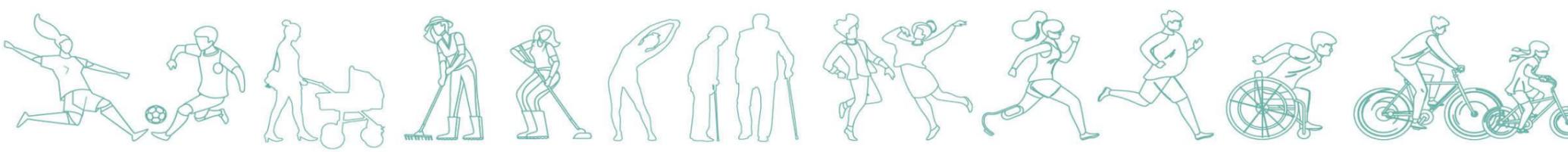
Through long-term sustainable change and building on the assets and characters of our localities, there is an opportunity to bring partners together from across the system (e.g., neighbourhoods, green spaces and street scene, transport, public health) to develop “Liveable Neighbourhoods”. Beyond aligning these official agencies, each liveable neighbourhood will be primarily shaped by each community. Additional insight is also being gathered through work with a Local Countryside Insight group who work with disability groups to help understand local physical environments and what changes might be needed to enable residents to be more physically active. This will also help to identify and influence change that needs to be made at a systemic policy level.

The aims, objectives, and outcomes can be seen below, but suggested liveable neighbourhood projects include pocket parks, park improvement interventions, low traffic neighbourhoods, parklets (parking spaces converted into community spaces), and school streets.

Within the first meeting in January 2021, the above was outlined to partners and it was important to take the opportunity to understand how it fits in with different service areas work (e.g., transport, neighbourhoods, environment), current policies (e.g., climate change policy, Vision 2024), and investment funds (e.g., town investment funds, streets for people), to identify what resource and revenue could be put into the project, understand how it fits in with existing or similar work within communities, and identify the next steps for driving this project forward. A following meeting in March 2021 established three task and finish groups focusing on: (i) project proposal, (ii) identifying and defining priority neighbourhoods, and (iii) community engagement brief and proposal. These tasks are time-bound and are to be completed by the end of March to continue the momentum of the project.

2.10 Locality approach in Park ward

A locality approach is being tested in Park Ward to create a steering group, including local residents, shops, and local stakeholders to understand the best way to support organisations and individuals to be active. By linking with people who have influence and reach in the local area (e.g., beauty salons, bakers etc), a targeted approach is being taken, with particular emphasis on women 18-24, single and young mums, elderly men, and community and faith groups, to explore how Active Calderdale can utilise and mobilise the assets in a place. This approach also helps the LDP to understand how offers can be developed to influence and support services and organisations to make physical activity more embedded as part of what they do. These offers must be in line with the FEAST framework.



3. What is being observed and learnt or what changes are happening as a result of the last six months?

3.1 Importance of working up an “offer”

The LDP has recognised it is important to have an offer for partners and potential partners who are looking at engaging in Active Calderdale. Beyond having an initial ‘ask’ – to embed physical activity in their policies, working practices, and delivery – it is important the LDP colleagues have some ideas of things the partner could do to embed physical activity e.g., active conversations, leaflets, posters for display (templates that can be edited so the message is coming from the service/stakeholder), challenges (e.g., Step Out or Move More Month), or including physical activity questions in initial assessments or as part of meeting agendas.

An additional part of the “offer” has been working up a series of quick and easy physical activity “nudges” that can be implemented by services or organisations to initiate the physical activity ‘spark’ within their service or organisation. Nudges are a powerful way to quickly achieve success (so meeting the Fast aspiration in the FEAST framework). While this has been a challenge at times for the Core Team to develop, they have reflected on this and often worry about getting the offer perfect rather than getting something out there and build on it.

3.2 Aligning narratives with a clear end goal

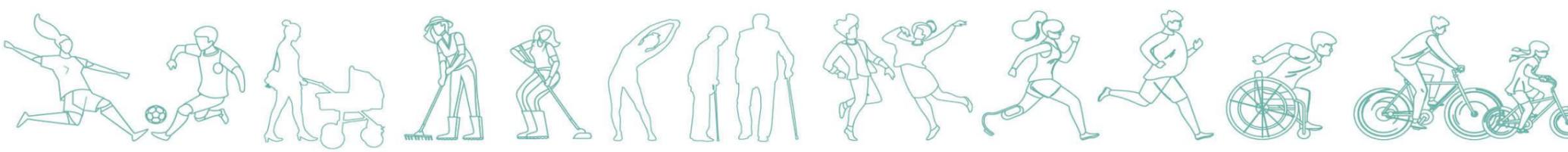
It is important to present the most engaging narrative when working with partners. For example, with the School Streets initiative, individuals held different perspectives on the importance of the initiative for them e.g., climate, issues with parking, wanting to be more active. Understanding these perspectives are important when establishing the value of an initiative or piece of work around changing the system. Understanding these perspectives is important when establishing the value of an initiative or piece of work around changing the system, as significant energy is needed at each point in this process.

The narrative needs to express the end goal and how the various contributors can work to get there. For example, the cycling infrastructure design (LTN 1/20) sets the bar to a high standard, which was almost seen as unachievable in the first instance. But, by having those high standards and measures to work to, changes are now coming into place and people are working towards it. Furthermore, when asking services and organisations to embed physical activity into their policies, it helps to be specific about the actions that entails.

3.3 Creating the time and space

While we have been aware of the importance of creating the time and space to understand and embed for some time, we have worked on having dedicated time with a service area or organisation to assist in this process. To expand, the Design Thinkers Course was developed to be operable over a given number of weeks (allowing for the capacity of the service area or organisation). The Family Support Service has recently completed the first Design Thinkers Course over five weekly, hour long, workshops to work through what their service looks like, the RVE model and how to embed physical activity into PWD. It also allows the LDP team to understand the sector, organisation, or service and understand best practice.

Progressing through these iterations helps to unify mutual respect (‘if they will listen to us, we will listen to them’) and is integral to building the relationship to help change progress. After their engagement in the course, the Family Support Service has now created two action plans which detail what they are going to embed physical activity into their policies, working practices, and delivery, and how they are going to achieve this (e.g., by enrolling staff on moving medicine active conversations training or linking with the sport and leisure sector to provide families with “passport to



leisure” access). The Family Support Service are now implementing their action plan and their subsequent reflections and impact will be reported on in the next process evaluation report.

By dedicating specific time to assist the Family Support Service in this way, the LDP has zoomed-in on a specific service to promote physical activity to the LDP’s priority groups, as these groups are also the priority of the Family Support Service. The next Design Thinkers Course started February 2021 with South West Yorkshire Partnership NHS Foundation Trust, with members from the perinatal service, learning disabilities service, and early psychosis intervention service. This group have progressed through a number of the Design Thinkers workshops and are currently at the phase of creating their action plan and delegating roles and responsibilities. We will report on their progress in the next process evaluation report.

Aside from the Design Thinkers Course, workshops continue to be held with partners across Calderdale to facilitate time and space. Some time ago we reflected on the importance of framing meetings as ‘workshops’ and this continues to be important when developing partnerships to enable a ‘two-way street’ in this process. Workshops have been held with a variety of partners to discuss how they can embed physical activity into their offer. For example, Happy Days is a homeless charity and they have linked up with the Bikeability service in the council to offer asylum seekers and refugees the opportunity to have training in cycle maintenance and competence, and the accessibility of available bikes through St. Augustine’s, a local charity in Calderdale. It is important to facilitate the right conditions in these spaces, to ensure that they are effective. For example, everyone has equal value, no hierarchy is used or implied.

3.4 Senior leader presence

While it is important to have a shared understanding and value of the importance of the Active work across the system; from those on the frontline to middle managers to managers and directors, it seems particularly important for senior leaders to have presence when looking at redesigning systems and service areas. For example, at the Design Thinkers Course with the Family Support Service, the Service Manager was present and engaged throughout. This higher level and strategic support have helped to capture interest and buy in from those at a delivery and implementation level.

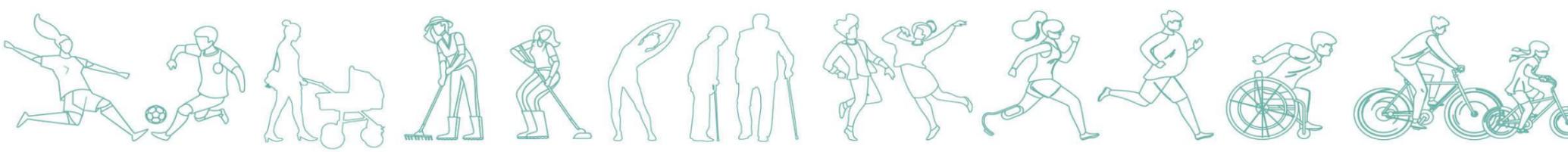
While the same senior leaders and stakeholders are involved – often very powerfully in various influential groups (e.g., the chair of the North Halifax Partnership board was, until recently, the chair of Shroggs Park friends of group and lead in a Dementia club), it is helpful that different leaders also emphasise their ‘presence’. This can extend influence by bringing new ways-of-working, creating new alliances, and capitalising on different networks and links to the community.

3.5 The power of bringing people together

Through a variety of different tools, such as networks and localised workshops, it has become evident that bringing people together to collaborate on a project is a powerful way to leverage important, influential social processes. The new Health and Social Care Network and the Voluntary and Community Network have brought individuals together from across the sector. Creating these workshops, and delivering them using interesting and relevant tasks and activities, has created a buzz around the groups. As a result, the message spreading through social networks is that the workshops are an opportunity “not to be missed”. This ‘reputation’ is also beginning to be extended to other offers coming from Active Calderdale (e.g., Moving Medicine Active Conversations training) and the opportunity to connect with likeminded people across the system and across Calderdale.

This spirit of positivity encourages wider engagement, which then helps encourage system connectivity and service redesign. Over 70 people had registered for the recent walking workshop

(<https://active.calderdale.gov.uk/blog/our-february-2021-walking-workshop>), which was a huge success in gaining insight, ideas, and connecting parts of the system up. These connections have been very action-oriented. For example,



the children's centre in Todmorden now have walking group booklets which have been produced with short walks for families in the area and the Upper Valley walking group are doing short canal walks which ties into the children's centre.

Bringing together the Adult Social Care service, which already has existing investment on a strategic level from the Director of Adult Services and Wellbeing, Ian Baines, has helped to further mobilise the service and embed physical activity. A recent mapping activity with colleagues across the service helped to understand the social care pathway and review where physical activity is embedded and identify gaps. An action plan has been developed with multiple interventions to further embed physical activity as part of routine delivery of the social care service. In April, the Core Team will be running a "Calderdale Connects" session with all social care staff to progress the Active work and secure engagement from staff across the system.

3.6 Seeing "people like me" matters

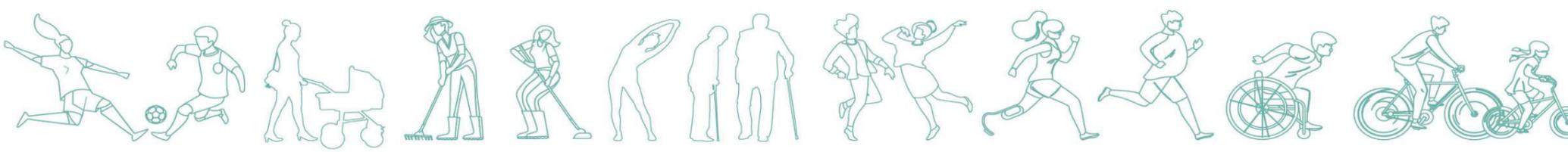
Activating the power of social influence and seeing "people like me" is still strong across the work of the LDP. This has been a strong driver in individual's motivation to not only engage in physical activity, but also to provide local opportunities to others like them. For example, a local running and walking group called "Running Aunties" has been established by BAME women in the community, for BAME women in the community. The initiators quickly realised the unmet need for local running opportunities that cater for 'people like us'. With little experience of how to operate physical activity groups, but deep insights into local needs, priorities and sensitivities, they quickly established successful run and walk sessions. Their story is here: <https://active.calderdale.gov.uk/blog/running-aunties-our-story>. Running Aunties affirms the LDP's commitment to finding and supporting influential figures in the community.

Through the Central Halifax Community Engagement Coordinator, Leisure services and partners have been working together to explore options to help BAME women engage in swimming. Local insight told us BAME women had the motivation and desire to go swimming, but there were certain conditions needed to enable them to go swimming. For example, the BAME women in the community did not want to swim with either a male or non-BAME lifeguard or instructors and they required women only sessions. This insight has helped develop a collaborative strategy, where the Leisure service is putting lifeguard and swim instructor courses together for BAME women with the offer of casual work as either a lifeguard or swim instructor for BAME women sessions when the course has been completed. In this instance, it is important that "people like me" are in the environment to help offer the opportunity to be active and enable that behaviour to happen. In light of COVID and the closure of leisure services, this project is currently on hold and will resume as soon as possible.

The Basement Project (<https://www.youtube.com/watch?v=OVuok-jka38>) continues to operate and demonstrates the impact and value of working through organisations and services that have reach and trust among the community. The work the Basement Project does continues to reinforce the power of social encouragement and support by seeing and engaging with "people like me" in the environment. Replicating this across the system will be an important tool in progressing the active agenda and identifying those individuals in services or organisations who residents resonate most with will be critical.

3.7 Collaborate to extend, not duplicate

A new collaboration has recently emerged between Active Calderdale and the Better Living Service. The Better Living Service, a council run service offering individuals the opportunity to improve their lifestyle and make changes to lifetime habits, work with adults, families, and schools to live a larger life for longer. While this resonates with the motives of Active Calderdale, it is important the work is not duplicated across the system and, instead, offers an opportunity to collaborate and work together.



The Better Living Service are well placed to support with gathering insight and understanding from the end user on their perceptions of the factors that can help them to be active. This includes parks and green spaces, walking and cycling infrastructure, leisure and sport, and the public realm. Their local ‘intelligence’ can support Active Calderdale to influence and shape how these systems are developed and delivered. It also provides an opportunity for the Better Living Service to work with Active Calderdale’s Community Engagement Coordinators to discuss local provision and opportunities, highlight potential gaps, and signpost to opportunities. Finally, to support this collaborative partnership, Active Calderdale has offered the Better Living Service the Moving Medicine Active Conversations Training and the two will input to each other’s team meetings.

3.8 The virtual world ‘hears’ different voices

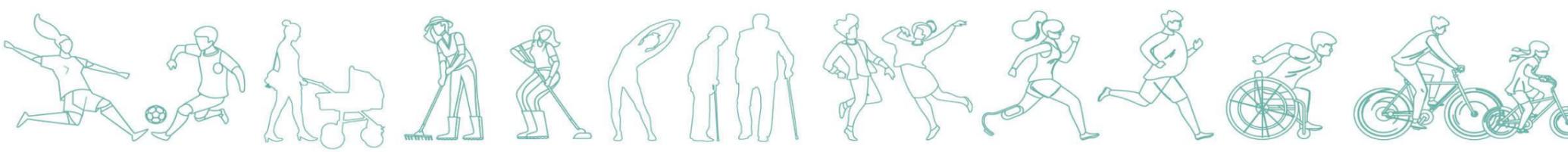
In a COVID-inspired shift to a virtual world, this brought concerns about how people may or may not engage. While an initial sense of nervousness, driven by the concern that overly loud voices would dominate, this is no longer the case. The virtual world has given voice to people who wouldn’t normally have their say; they are adept to speaking up in meetings as they are contributing insightful comments to chat functions. Virtual working has brought more people together, particularly partners, residents, and stakeholders.

The Core Team reflected on this and identified two key factors that have played a part in this; (i) there is no obvious hierarchy in online meetings and workshops – discussions seem to be more peer to peer, and (ii) individuals often attend with low expectations. Dialling in from home, rather than travelling, allows team members to be more relaxed and informal in their delivery. Equally, making useful contributions in this way confirms individual competence and insight, which creates personal invitations for wider connection.

Furthermore, services have reflected on a virtual world providing easier access to activities for some. For example, the Brunswick HIV centre (who are part of the Health and Social Care network) shared how using Zoom due to COVID has allowed individuals access to activities they wouldn’t usually attend due to the stigma around HIV as they do not want to be identified in the community as an individual with HIV.

3.9 The ripples

While the evaluation team have been trying to capture the ripples of the LDP work, some have become evident over the last six months in the Core Team. For example, previous conversations with the Planning and Transport team and a capital major projects retrofitted changing the cycling infrastructure around Calderdale, but the work was slow to get off the ground. Sometime after these discussions and the implementation of the cycling infrastructure design (LTN 1/20), changes to cycling infrastructure have progressed, largely due to a combination of LTN 1/20 and the active and climate agendas. Furthermore, at Calderdale and Huddersfield NHS Foundation Trust, the reconfiguration work, which has been implemented at a strategy level, has allowed for each of the service areas (e.g., infrastructure, workforce, and pathways) to have an active plan around it. Not only has this helped progress physical activity being embedded as part of the hospital trust, but it has also allowed the hospital trust to be flexible and creative in designing their clinical pathways and the influencing is coming from others within the system, not just the active hospitals lead. Finally, resources and videos, such as the Ian Baines Health and Social Care video (<https://www.youtube.com/watch?v=4UnNp4xgWvc>) are still being used as exemplar studies across the system about how to redesign systems and display communication and leadership.



3.10 The unexpected achievements of the work

In a recent reflection activity, the Core Team reflected on the unexpected achievements they noticed. Two examples were highlighted, involving work within active hospitals and the community engagement work in North Halifax. First, at Calderdale and Huddersfield NHS Foundation Trust a virtual focus group was ran with members of staff who do not access online resources (e.g., Twitter, emails etc.) and it became apparent their lack of physical activity was part of a bigger picture around health inequalities. For example, in specific jobs or demographics, individuals were expected (aka 'social practices') to engage in certain behaviours, such as smoking and doing no physical activity. This insight allowed the Hospital foundation to consider how to widen this agenda to ensure people do not get "lost" or slide 'between the cracks' of their support systems.

Second, the community engagement work in North Halifax involved Ash Green School and individuals from the Mixenden community and created a netball provision at the school, mainly aimed at local residents. Addressing the 'Timely' aspects of the FEAST framework, the sessions were fun when other individuals in the school were finishing work, such as teachers and cleaning staff. While local residents were the focus of this system connectivity between the school and the residents group, it was successful in pulling a range of different people together who wouldn't usually be involved or be active.

3.11 Understanding why people aren't engaging

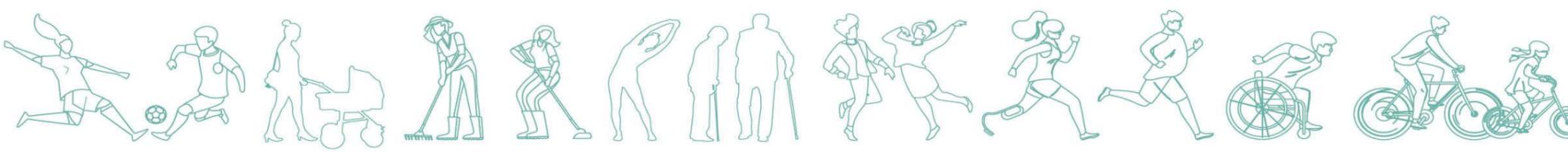
While the LDP has 10 priority sectors they want to influence to instigate system change, it is often difficult to get organisations and/or services within those sectors to engage. It is proving increasingly important to understand why people either aren't, or don't (yet), engage with the LDP. There are often a number of reasons why this lack of engagement occurs, including a lack of capacity, lack of time, no accountability, or territorialism.

While we recognise that the FEAST and Influencer frameworks help resolve many of these issues, not all key influencers use these mental models in their day-to-day operations. It is important we remain sensitive to current happenings and understand that it might not be the right time for that particular service or organisation. Using the idea of 'speed of trust', it is wise to progress at the speed of the service or organisation, taking the idea that a fruitful collaboration will emerge in the near future.

For example, it has taken time to build traction with the Planning and major projects team around active. It has been challenging to move them along and get them closer to valuing physical activity and exploring how they can make changes, which has taken perseverance. It was important to understand where the planning and major transport teams were at, what influence the local plan had, what challenges they were going through, and understanding that their system is in a particular place and can only move at a certain pace.

3.12 Fresh faces in the environment

Staff turnover rates are often high in different areas of the system, which poses challenges for driving the active agenda forward, particularly if big influential characters leave. Yet, an influx of fresh faces in services or organisations provides an opportunity to create new influences who can accelerate change. While it is acknowledged if there is no formalised process in place, active could quickly fall off their priorities, we have learnt that an important opportunity for change is to embed active as part of the new starter's induction. This is a powerful example of using the established behaviour change approach of 'fresh start effective', which capitalises on the rejuvenation associated with fresh start events. This is being explored at North Halifax Partnership and Calderdale and Huddersfield NHS Foundation Trust and would also link into embedding the Influencer Matrix as part of the induction process alongside active. New Sport



England developments around short, free, permanently available on-line Influencer ‘accelerator events’ will be a big help here; we are hopeful these will be available from April 2021.

3.13 Battling barriers and impediments

Recent reflections among the Core Team have identified a number of challenges that halt progress and we often don’t have the tools to overcome them. For example, we don’t yet know how we can best support an individual from a system who wants to be involved yet the rest of the system doesn’t want to be engaged. Furthermore, looking at services or organisations where progress has been slow, we need to learn more about how to activate the power of intermediary groups or individuals to unlock our collective adaptive capacity. Finally, we need to understand how to challenge existing policies and how we can create the facilitative space to make change. For example, current bi-laws do not allow bikes to be ridden in parks across Calderdale. Alongside Active Calderdale, the Safer, Cleaner, Greener team are exploring ways these bi-laws could be lifted to allow residents to ride their bikes in local parks.

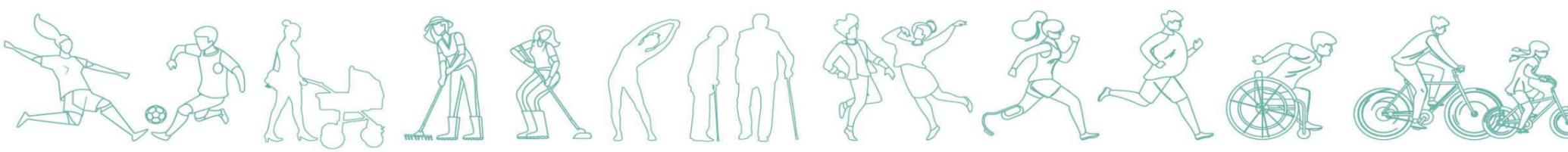
We need to refine how we secure insights from end users (without directly influencing their behaviour as that is contradictory to our systems and influencer approach) to gain an understanding of the service or organisation to develop leverage from both sides to make change happen. Finally, we can’t assume the system has grip and control over what is happening and often things have to be ‘micro-managed’ thorough the system. As this happens, things often get lost and often can’t happen due to a “Bermuda triangle” space (e.g., culture in the work environment) and it’s important to manage the change throughout the complex system.

3.14 Social media relationships

The LDP has recently recruited a Digital Content and Engagement Officer who leads on the social media outlets and associated content. Many of the relationships on Twitter, in particular, are with schools, organisations in the voluntary sector, and local businesses. It has been important to get their engagement from a comms perspective and retain those relationships through regular communication on the platforms. By influencing in this way, it allows the active agenda to reach their followers (i.e., the end user) and helps to stimulate a buzz around the active work. It has also become apparent it is important for the social media work to be organically driven rather than paid adverts. This means the content and campaigns are made by the LDP team with the services and organisations in mind, which has increased engagement over the last few months as a result of the #StepOutChallenge and #FamAndFriendsFeb. Specific website analytics can be found in Appendix 2.

3.15 Pandemic continues to create the conditions for change

In the previous process evaluation report, we explained how COVID created the conditions required for change across certain systems and services. This theme has continued over the last six months and continues to change perspectives and challenge existing policies. For example, we reported on the School Streets plans that had been implemented across nine primary schools in Calderdale. This has progressed and support has now been implemented around the School Streets agenda to help support and facilitate it being a part of each school. To expand, 19 schools have now had School Streets successfully implemented, and bike and scooter parking funding has been secured to support these schools. Consultation is ongoing at five additional schools to gain insight from residents, parents, and school staff to help support the implementation of School Streets. Finally, 10 schools are being identified to receive additional active travel measures including staff cycling training, learn to ride, balance bikes, and bike maintenance training.



Alongside the active travel agenda, cycle storage is being implemented in four towns (Todmorden, Hebden Bridge, Sowerby Bridge, and Mytholmroyd) to connect existing infrastructure to places. Furthermore, consultation for adult cycle training is underway with an emphasis on collaborating with and using local training providers and instructors to deliver the training locally. This will help to establish strong links with local follow-on activities, such as community cycle clubs and led rides.

3.16 Re-establishing work post-COVID

A number of pieces of work were put on hold in March 2020 due to the impact of COVID. As the national Government begins to implement a roadmap to exit the pandemic, it is important we work towards re-engaging these projects to assist in local level recovery from the pandemic. For example, within the Primary Care network, the Royal College of General Practitioners were exploring an initiative on how to turn GP Practices into 'Active Practices.' This involves GP Practices actively promoting and engaging in the physical activity agenda through multiple interventions. This has been on hold over the past 12 months due to the pandemic, but it has recently been re-established with the Social Prescribing Link Workers and five practices are being targeted to work towards the Active Practice charter.

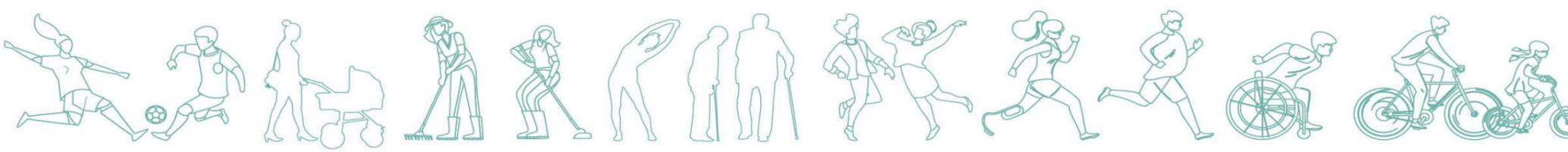
4. How is this shaping where the Calderdale LDP goes next and what does this tell us about the context and system that the pilot is working with?

The learnings so far have helped us to understand a common list of things the LDP wants to see in terms of system change being embedded into an organisation or service area that have, thus far, been effective. For example, every member of staff or service personnel are inducted on physical activity and the importance of it for their organisation or service, physical activity is built into every initial assessment when working with a patient or client, and individuals are comfortable with having conversations about physical activity (which is facilitated through the Moving Medicine Active Conversations training). While these common opportunities to embed are helpful to direct the work, it is important to note the work is specific to the context and new opportunities are emerging with each organisation or service we work with.

New additions to the Core Team via a project manager, education manager, and two community engagement coordinators (in the Lower Valley and Upper Valley) will help to drive the agenda forward and influence in areas where the LDP is yet to provide dedicated resources. The need for community engagement, in particular, is still a priority and is something the LDP must continue if we are to develop relationships and co-design physical activity provision by the community and for the community.

From a community engagement perspective, the community engagement coordinators are capturing insight to influence the wider system and enable partners to connect. In doing so, this will provide better and more sustainable offers to local residents. With the anticipated recruitment of two further community engagement coordinators, it is pertinent the LDP looks at investment on a super-local level and allowing the community engagement coordinators to have the power to invest in small projects or opportunities based on the community's needs. This will help to build trust and develop relationships, gain buy-in, and can help progress work to embed physical activity into policies, working practices, and delivery.

Once a partner has gone through the Recognise and Value phases of our approach, we are putting effort into behaviour change tools and nudges to support organisations when looking to embed physical activity. For example, the Core Team is exploring options to work with Professor Jim McKenna (from Leeds Beckett University) to develop mini-videos about each circle of the Influencer Matrix with contextual examples for both senior leaders and policy makers,



and for those working at a delivery level. Furthermore, the Core Team have worked up a series of “nudges” which individuals can quickly implement in their environment to nudge people about physical activity behaviours. These nudges will be live and regularly updated on the Active Calderdale website and will be shared with partners. It will be important to continue to develop these types of tools to help progress work over not just the next six months, but over the duration of the LDP.

While the last six months have been successful for the LDP, COVID has continued to provide challenges with no face-to-face working and redeployment across the system. A proposed light at the end of the tunnel from the Government is something the LDP should prepare to work towards and look at recovery from COVID and harnessing the power of bringing people together physically, no longer virtually. Suggestions of “pop up physical activity” events are an option to get the both the community and services engaged and re-harness the collective resilience and kindness across Calderdale.

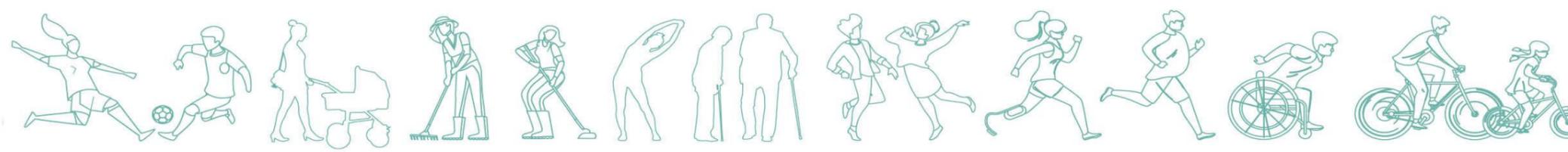
To help inform approaches, such as Liveable Neighbourhoods and the locality approach, the LDP will engage in further consultation with residents and local people. This will take a three-fold approach: (i) local activity survey, (ii) capturing stories about Calderdale residents’ lives, and (iii) Liveable Neighbourhoods approach and consultation. In doing so, this will help understand how the environment (physical and social) provides residents with the capability, opportunity, and motivation to be physically active. This consultation will help us to understand how safe, accessible, and attractive the physical environment (e.g., parks, cycling infrastructure, local area) is, and how the social environment (e.g., GPs, workplaces, schools) encourage, support, and enable Calderdale residents to be physically active.

5. Conclusion

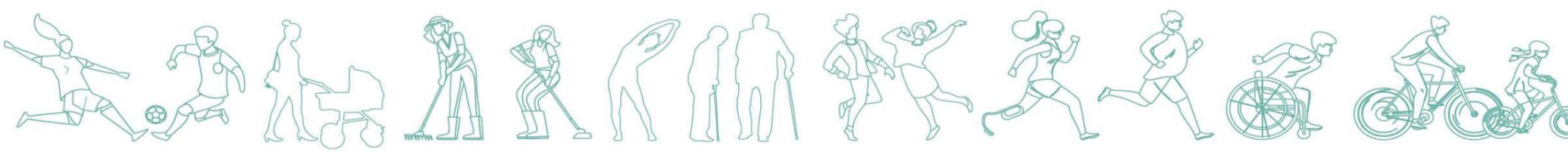
Over the last six months, Active Calderdale has navigated the challenges of working in a virtual world and has had success in influencing change across the system. While it has remained important for the LDP to work with organisations and service areas to work to influence individuals they have influence over, it is important the LDP looks to the potential, and pending, release of lockdowns. Capitalising on this opportunity could significantly increase the LDP’s presence across the system and embed Active Calderdale as an integral part of Calderdale and the subsequential vision. Continuing to deepen our understanding of the context we are working in, particularly with services and organisations, can help build trusting relationships and accelerate the speed of change. Furthermore, allowing for dedicated time and space can help progress change to be made and establish physical activity as an integral part of a partner’s offer and working ways. Through taking an inclusive, whole system approach, Active Calderdale continues to work towards addressing inequalities and influencing physical activity behaviour change across the system.

Key videos and blogs from the last six months:

- Recognise, Value, Change and Embed with the Basement Project: <https://www.youtube.com/watch?v=OVuok-jka38>
- Dipika Kaushak: The Value of a Physical Activity Agenda in Calderdale’s Voluntary Sector: www.youtube.com/watch?v=DSG-UFthMwk
- Opinion: Walk to School Week at St. Joseph’s Primary School: <https://active.calderdale.gov.uk/blog/opinion-walktoschoolweek-st-josephs-primary-school>
- Move the Calderdale Way: <https://active.calderdale.gov.uk/blog/move-calderdale-way>
- Take Ten #StepOutChallenge: <https://active.calderdale.gov.uk/blog/take-ten-stepoutchallenge>



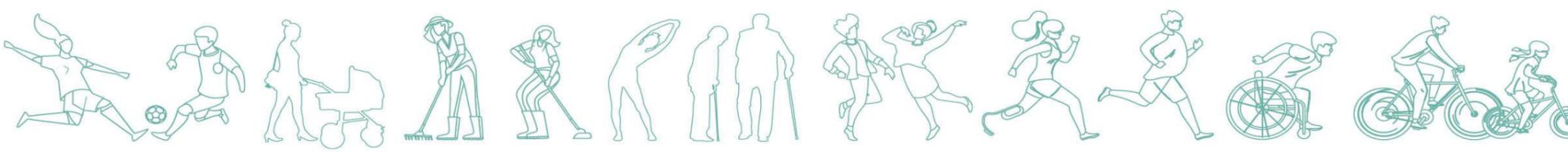
- Our February 2021 Walking Workshop: <https://active.calderdale.gov.uk/blog/our-february-2021-walking-workshop>
- Running Aunties, Our Story: <https://active.calderdale.gov.uk/blog/running-aunties-our-story>



Appendix 1: Family Support Service Design Thinkers Action Plan

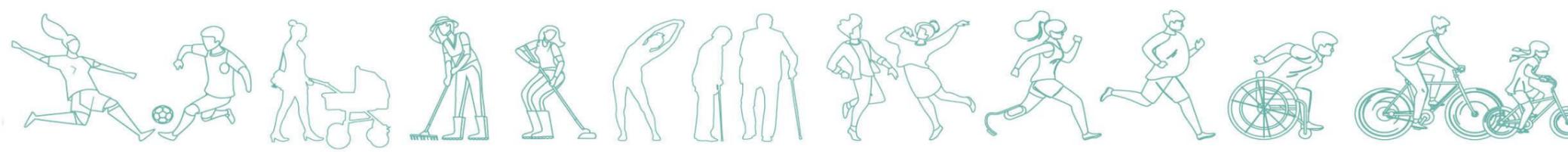
Central Plan:

Ideas and opportunities to embed PA as part of the Family Support service	Actions
Priority 1: Incorporate good conversations about physical activity into the Family Support service practice	Provide and arrange for Moving Medicine 'Active Conversations' training for all family support staff Recruit all staff onto the training
Priority 2: Passport to leisure – how does a family access this?	Find out if the Passport to leisure scheme still exists and what the process for accessing the scheme is.
Priority 3: Provide training for other family support service staff to provide them with an overview of AC and this process	Active Calderdale to attend Family Support service training inset day to provide the training. Arrange the training and confirm date with Active Calderdale.
Priority 4: Family Support Assessment process – include standard PA question(s) into the assessment form (this would act as a 'conversation starters')	Active to provide the types of questions that could be used Review and refine questions so they appropriate. Integrate questions and process for asking questions into the assessment process.
Priority 5: Family Support Work Plan – include actions on PA within individual family action plans	Add a section to the Family Support Workplan to allow for physical activity to be included.
Priority 6: Develop a physical activity 'welcome pack' for Family Support service users – the pack to include information on local opportunities to be active (Parks, local walks, leisure facilities), the benefits of PA, and behaviour change resources. Packs developed appropriate to their localities, and should be able to go on the Children's centre websites.	Develop active 'welcome pack' Review and sign off 'welcome packs'.
Priority 7: Signposting Families to active opportunities – that are relevant for them	Provide relevant content on active opportunities to go in the Family Support Service termly newsletter Send the dates the newsletter goes out to Active Calderdale.
Priority 8: Provide families with the opportunity to feedback how their social and physical environment does/doesn't help them to be active.	Share the Active Calderdale survey and the process with Family Support Family Support staff to complete and provide feedback.
Priority 9: Utilise social media to promote physical activity opportunities and showcase 'people like me' being active as a way to encourage and support others to be physically active	Active comms and Family Support service communications leads to meet to discuss how to utilise social media to promote PA and good news stories about people being active.
Priority 10: Workforce challenges to get staff active and families active – join in with 'Move your Own Way' Promote to staff - act as role models to families – walking the walk!	Under the umbrella of developing a challenge for getting staff and families active follow up meeting to discuss and explore
Priority 11: Adopt take 'Take 10' as an organisation	Tina and NHP to share what they are doing from a staff active perspective.

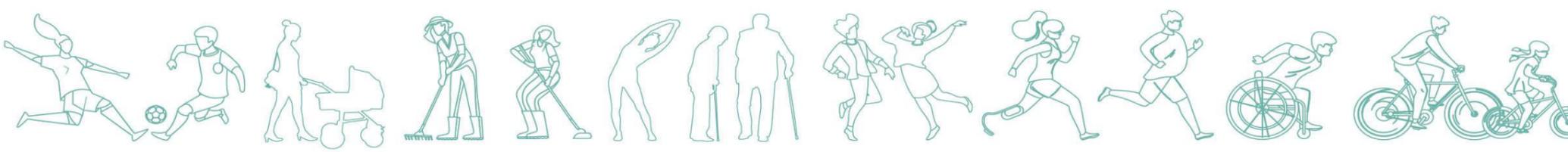


North Halifax Partnership Family Support Service Action Plan:

Opportunity to embed PA as part of the Family Support service	Actions
Priority 1: Training for other family support service staff to provide them with an overview of AC and this process	Action: AC Condensed version of the design workshop with wider staff NHP to let Active know when they want this delivered.
Priority 2: Family Support Assessment process – include standard PA question into the assessment form (this would act as a ‘conversation starters’)	Action: NHP - Agree a set of questions to be put into the assessment process Action: AC to provide guidance on types of questions Action: share informal short Active Lives Question with Toyaba and Baseer
Priority 3: Family Support Work Plan – include actions on PA within individual family action plans	Action: NHP – include PA outcomes in the workplan Action: Suzy to check progress with Baseer
Priority 4: Physical activity pack to be included in the Family Support starter pack - Information on why PA is important and stories of people being active and the impact on their mental and physical health – to reinforce the benefits of PA Bikeability – include information Older age children 10-16 opportunities	Action: AC to develop the starter pack (Active Calderdale) Action: AC Share with NHP for feedback Action: Check progress with CF of updated pack
Priority 5: Where possible and appropriate adopt a practice of Walking consultations with Families	Action: NHP staff offer walking appointment as standard.
Priority 6: Adopt take ‘Take 10’ as an organisation Workforce challenges to get staff active – join in with ‘Move your Own Way’	Action: NHP - Keep promoting and pushing Take Ten opportunities. Identify barriers to staff taking ‘ten’. Promote to staff - act as role models to families – walking the walk!
Priority 7: Incorporate ‘good’ conversations about PA as routine practice – why it’s important and opportunities available to be active	Action: Active to develop training offer on Active conversations training Action: How are staff getting on with active conversations? Need peer support group? Facilitate group discussion between staff members?
Priority 8: Develop ideas for initiatives to encourage people to use local parks and green spaces	Action: NHP to brainstorm and consult with families to create ideas. Action: Share Local Activity Survey with Baseer and get feedback. Discuss Parks section.
Priority 9: Offer cycle training for staff	Action: AC Steve to provide training for staff
Priority 10: Provide families with the opportunity to feedback how their social and physical environment does/doesn’t help them to be active Family Friendly opportunities - Identify gaps in local PA and sport provision and through Active Calderdale seek to influence how provision is developed locally.	Action: AC to share active survey Action: Share Local Activity Survey with Baseer and get feedback. Discuss Parks section.
Priority 11: Utilise social media to promote physical activity opportunities and showcase people like me being active	Action: NHP Share content of staff being active on social media channels.



	<p>Action: Encourage families to share content of being active. Facebook – share your activity thread.</p> <p>Action: AC Comms to provide social media training for HOTS/NHP to utilise and promote active opportunities and share good news stories of people being active.</p>
<p>Priority 12: Help families access leisure facilities</p>	<p>Action: AC look into family swimming incentives</p>



Appendix 2: Social Media and Website Analytics

November 2020:

Most Visited Pages	Page Views
Home Page	755
Campaign - Take Ten Step Out	157
Campaign - Keeping Active During COVID-19	154
Total views	1501

Acquisition Method	Number of views
Direct	862
Referral	433
Organic Search	108
Social Media	98

December 2020:

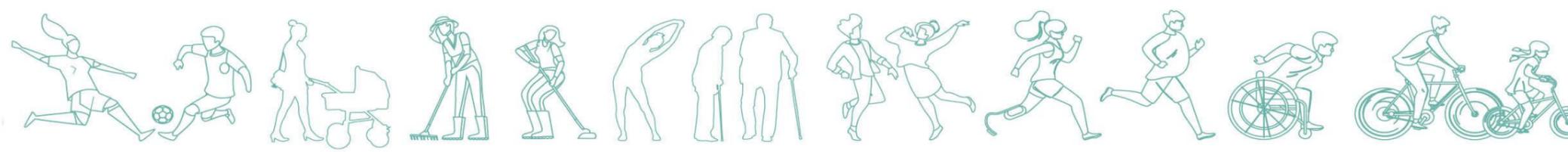
Most Visited Pages	Page Views
Home Page	246
Campaign - Take Ten Step Out	234
Blog: Move the Calderdale Way	196
Total views	1067

Acquisition Method	Number of views
Direct	670
Social Media	217
Organic Search	117
Referral	63

January 2021

Most Visited Pages	Page Views
Home Page	321
Campaign – Keeping Active Through COVID-19	226
Campaign Page	52
Total views	991

Acquisition Method	Number of views
Direct	583
Organic Search	156



Social Media	68
Referral	66

February 2021:

Most Visited Pages	Page Views
Home Page	311
Blog Page	85
Campaign Page	65
Total views	991

Acquisition Method	Number of views
Direct	715
Organic Search	159
Social Media	69
Referral	48