Cheshire West & Chester Council

Get Cheshire West Moving

A Physical Activity Strategy for Cheshire West and Chester 2025-28











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Foreword

Cllr Louise Gittins, Chair of Eat Well be Active and Leader of Cheshire West and Chester Council

"Being active is one of the best things in life. Not only does it make you feel great, but it also helps you to stay physically healthy, keep a healthy mind, stay connected with others, and if you are active outdoors, connected with nature too. Being active can also have wider impacts, it can help us to reduce car use, reducing carbon emissions and increasing road safety. It can also help to reduce inequalities, alleviating the impact of deprivation and poverty.

Whilst many residents of Cheshire West and Chester are active, a significant number aren't. This strategy has been co-produced by partners and residents across the borough to help support, encourage and empower people in Cheshire West and Chester to be active, more often, in ways in which they enjoy.

Delivery of this strategy will take effort from partners at all levels, across all sectors and all localities. Being active is so important that it needs to be built into people's daily lives, whether at nursery, school, college, work, home and importantly when they are in care settings. Key to the delivery of this strategy are health colleagues, workplaces, education, leisure, sports clubs, community organisations, volunteers, friends and family – we all have a part to play.

We have the opportunity to really make a difference and make being active the norm. So, let's put on our active soles and find a way to move, which brings us joy!"

With thanks to

The Get Cheshire West Moving Strategy has been co-developed by a range of partners. We would like to thank:

- Active Cheshire
- Brio
- Cheshire Football Association
- Cheshire and Merseyside Integrated Care Board
- Chester FC
- Chester School Sports Partnership
- Cheshire West and Chester Council teams, including:
 - Public Health
 - Youth Service
 - Children and Families
 - Commissioning
 - Planning
 - Strategic Transport and Infrastructure
 - Green Infrastructure
- Cheshire West Voluntary Action
- The Chartered Institute for the Management of Sport and Physical Activity (CIMSPA)
- CWP 0-19 Starting Well Service
- England Netball
- Ellesmere Port School Sports Partnership
- Fallen Angels
- Groundwork
- Her Place
- Healthbox CiC
- Mersey Forest
- Neston Community Youth Centre
- Office of Health Improvement and Disparities (North West)
- Sported
- StreetGames
- Vale Royal School Sports Partnership
- University of Chester

If you find your organisation not named here but would like to find out more and be involved in the delivery of the strategy, please contact PublicHealth@cheshirewestandchester.gov.uk

Introduction

Being physically active is an essential part of living a healthy and fulfilling life. Across the life course, regular physical activity provides significant physical, mental, and social benefits. Despite these benefits, many people are not active enough. The Get Cheshire West Moving Strategy aims to make it easier for residents to be active, more often, in ways they enjoy.

The Get Cheshire West Moving Strategy supports the Cheshire West Place Plan and the Cheshire West and Chester Borough Plan.

Physical activity is also an important component of other strategies and policies at a borough level. Strategies and plans of note include:

- Sports Facility Strategyⁱ
- Cheshire West and Chester Open Space Studyⁱⁱ
- Cheshire West and Chester Playing Pitch Strategy 2024ⁱⁱⁱ
- Local Cycling and Walking Infrastructure Plan (LCWIP) (2020 2030)^{iv}
- Public Rights of Way Improvement Plan (ROWIP)^v
- Climate Emergency Response Planvi
- Local Transport Plan^{vii}

Why is it important to be active?

Physical activity is crucial for children and young people. It promotes healthy growth and development, improves cardiovascular health, strengthens bones and muscles, helps maintain a healthy weight, and boosts overall mental wellbeing^{viii}. Regular physical activity also enhances cognitive function, concentration, and academic performance. It teaches important life skills like teamwork, communication, and discipline while reducing the risk of chronic disease in later life.

When it comes to adulthood, the benefits of physical activity are wide-ranging (see Figure 1). People who have a physically active lifestyle have a 20-35% lower risk of developing cardiovascular disease compared to those who are inactive. Regular physical activity is also associated with a reduced risk of diabetes, obesity, some cancers, and more years spent in good health. Furthermore, being active supports good mental health, and helps to foster social connections. In older adults, physical activity is associated with increased functional capacities. A wide range of physical activity benefits are displayed in Figure 2.

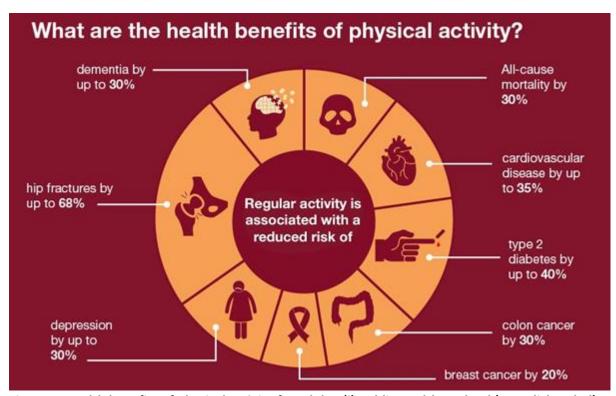


Figure 1: Health benefits of physical activity for adults. (i) Public Health England (now disbanded).



Figure 2: Wider role and benefits of physical activity. Public Health England (now disbanded)

Despite the widely reported benefits of physical activity, most adults across the UK are insufficiently active to meet the full set of recommendations set out in the UK Chief Medical Officers' Guidelines on Physical Activity^{ix}.

How can we be active?

Being physically active will look different to different people. How people choose to be active will depend on many factors including age, sex, where they live, where they work, how their friends are active, cost, time, caring responsibilities, among other factors. It is important to validate all types of movement and physical activity, supporting people to be active in ways which they enjoy and can fit into their lives. Figure 3 places physical activity into four main categories – active living, active travel, active recreation and active sport.



Figure 3: Health Matters, Public Health England (now disbanded)

How active should we be?

New physical activity guidelines were introduced by the UK Chief Medical Officer in 2019 setting out the volume, duration, frequency and type of activity required across the life course to achieve general health benefits. These update the existing guidelines for adults, children and young people, early years (under 5's - infants who are not yet walking and children capable of walking), older people (65+ years), disabled adults, and pregnant women.

The guidelines allow for more flexibility in achieving recommended levels of physical activity and recognise the potential benefits of "small behavioural changes and tailored messages to address inequalities". The guidelines state that:

Under 1s

- Infants should be physically active several times every day in a variety of ways, including interactive floor-based activity, e.g. crawling.
- For infants not yet mobile, this includes at least 30 minutes of tummy time spread throughout the day while awake (and other movements such as reaching and grasping, pushing and pulling themselves independently, or rolling over); more is better.

1- to 4-year-olds

- 1-to 4-year-olds should achieve at least 180 minutes of movement per day, this can include a range of physical activity such as jumping, using playground equipment, climbing, skipping, messy play, walking, swimming, cycling, scooting and playing with objects.
- For 3-4 year olds the 180 minutes should include 60 minutes of moderate to vigorous physical activity.

5- to 18-year-olds

- Guidelines state that 5- to 18-year-olds should engage in medium (brisk walking or cycling) to vigorous physical activity (running) for an average of at least 60 minutes per day across the week. This can include all forms of activity such as physical education, active travel, afterschool activities, play and sports.
- Children and young people should engage in a variety of types and intensities of physical activity across the week to develop movement skills, muscular fitness and bone strength.
- Children and young people should aim to minimise the amount of time spent sedentary, and where physically possible should break up long periods of not moving with at least light physical activity.

Physical Activity for Disabled Children and Young People

In February 2022, new Guidelines on Physical Activity for Disabled Children and Young People were published. The recommendations include:

- Undertake 120 minutes (2 hours) to 180 minutes (3 hours) of aerobic physical activity per week at a moderate to vigorous intensity.
- Complete challenging, but manageable, strength and balance activities three times per week, which are particularly beneficial for muscle strength and motor skills.

Adults (19 to 64 years)

- To support good physical and mental health, adults should aim to be physically active every day. Any activity is better than none, and more is better still.
- Adults should do activities to develop or maintain strength in the major muscle groups.
 These could include heavy gardening, carrying heavy shopping, or resistance exercise.
 Muscle strengthening activities should be done on at least two days a week, but any strengthening activity is better than none.
- Each week, adults should accumulate at least 150 minutes (2.5 hours) of moderate intensity activity (such as brisk walking or cycling); or 75 minutes of vigorous intensity activity (such as running); or even shorter durations of very vigorous intensity activity (such as sprinting or stair climbing); or a combination of moderate, vigorous and very vigorous intensity activity.
- Adults should aim to minimise the amount of time spent being sedentary, and when
 physically possible should break up long periods of inactivity with at least light physical
 activity.

Older Adults (65 years and over)

Older adults should participate in daily physical activity to gain health benefits, including
maintenance of good physical and mental health, wellbeing, and social functioning. Some
physical activity is better than none. Even light activity brings some health benefits compared

- to being sedentary, while more daily physical activity provides greater health and social benefits.
- Older adults should maintain or improve their physical function by undertaking activities aimed at improving or maintaining muscle strength, balance and flexibility on at least two days a week. These could be combined with sessions involving moderate aerobic activity or could be additional sessions aimed specifically at these components of fitness.
- Each week older adults should aim to accumulate 150 minutes (2.5 hours) of moderate intensity aerobic activity, building up gradually from current levels. Those who are already regularly active can achieve these benefits through 75 minutes of vigorous intensity activity, or a combination of moderate and vigorous activity, to achieve greater benefits. Weightbearing activities which create an impact through the body help to maintain bone health.
- Older adults should break up prolonged periods of being sedentary with light activity when
 physically possible, or at least with standing, as this has distinct health benefits for older
 people.





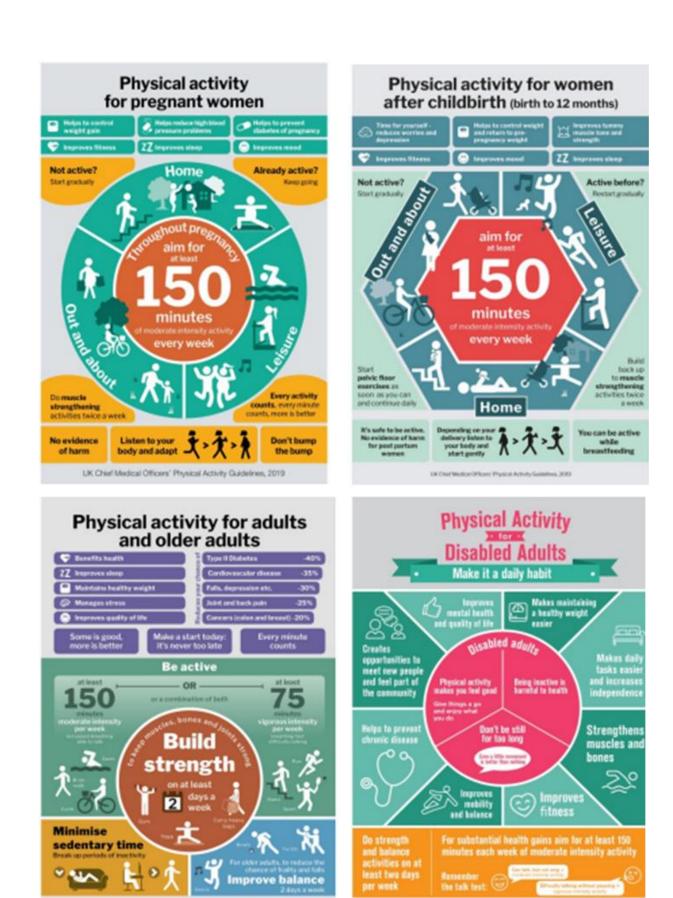


Figure 4: Chief Medical Officers Guidance on Physical Activity

UK Chief Medical Officers' Physical Activity Guidelines, 2019

National and regional approach

A number of national and regional strategies have been used to inform the Get Cheshire West Moving Strategy, these include:

Sport England: Uniting the Movement

Sport England's *Uniting the Movement* strategy (2021) focuses on tackling inequalities in physical activity, targeting older adults, women, people with disabilities, and lower socioeconomic groups. Aligned with Local Government Association guidance, it promotes tailored approaches to increase participation.

NHS England: Harnessing the benefits of Physical Activity

The NHS, in collaboration with national and local partner organisations, can harness the full potential of physical activity to help people live healthier, longer, and more independent lives. They have identified four ways forward:

1. Empowering health and care professionals

All health and care professionals should be equipped with the skills and confidence to discuss the importance of taking up appropriate physical activity with patients who have health conditions. This includes:

- Signposting patients to physical activity opportunities and events.
- Promoting rehabilitation.
- Highlighting the importance of maintaining activity levels to prevent deconditioning.
- Removing myths associated with the risk of physical activity (and the need to seek medical approval).
- Empowering people to make informed choices.

2. Integrating physical activity into clinical pathways

By embedding physical activity into clinical pathways, the NHS can support improvements in patient outcomes and deliver evidence-based care across various conditions. This means fewer complications and less use of NHS resources.

3. Supporting the NHS workforce

The health and wellbeing of the NHS workforce can be supported by holistically promoting physical activity both within and outside of work, such as through the NHS health and wellbeing framework^x. Examples include the Royal College of General Practitioners (RCGP) active practice charter^{xi}, promote healthy workplace environments, encourage active travel, seek to offer flexible hours (if possible), which can support engagement in physical activity, and promote the use of local community facilities and assets, such as gym membership discounts and access to the digital weight management programme. NHS leaders may also act as role models for active lifestyles, thus contributing to a healthier and more engaged workforce.

4. Supporting innovation and evaluation with partners

Collaboration between the NHS and the physical activity sector is essential to embedding physical activity into health and care. Addressing disparities in physical inactivity requires system-level solutions. By supporting collaboration between regions, integrated care systems (ICSs), integrated care boards (ICBs), commissioners (including those in local authorities), and the physical activity

sector, the NHS will help to ensure that underserved communities benefit from targeted interventions. Enhanced research and evaluation of interventions that address physical inactivity and their impact will further drive this effort to influence the provision, access to and use of local assets and facilities.

Cheshire and Merseyside: All Together Active Strategy

The Cheshire and Merseyside All Together Active Strategy, led by the Integrated Care Board, envisions a sub-region with fewer health inequalities linked to inactivity. By 2026, its goals include:

- Supporting local places to leverage physical activity to improve population health.
- Embedding movement, sport, and physical activity into health and social care systems.
- Reducing health inequalities measurably.
- Empowering 150,000 inactive residents to become active.

Active Cheshire Strategy

Active Cheshire's strategy sets out a bold vision for a network of connected system partners working together to create equal access to physical activity and sport, building healthier, more active Cheshire & Warrington where physical activity and sport are a natural part of daily life for everyone.

Active Cheshire will unite, inspire and empower partners to tackle these challenges through three strategic priorities:

- Active Systems.
- Active People and Places.
- Active Environments.

Cheshire and Warrington Sport and Physical Activity Local Skills Plan

Recognising the workforce as a critical enabler of system change, the Cheshire and Warrington Sport and Physical Activity Local Skills Plan identifies priority actions to future-proof the sport and physical activity sector, including:

- Raising awareness of diverse and rewarding careers across the sector.
- Expanding access to inclusive training and progression pathways.
- Supporting small and micro employers with workforce development.
- Strengthening system-wide collaboration and alignment.

Further details on each of these strategies is included in the appendix.

Where are we now?

0-19 Being Active Joint Strategic Needs Assessment (JSNA) Summary

The 0-19 Being Active JSNA was published in February 2024 as part of a series of nine chapters assessing the current and future health and social care needs of children and young people aged 0 to 19 (25 with SEND) and their families, with a focus on improving the health and wellbeing and reducing inequalities.

This chapter reviewed physical activity across the early years, in educational settings, community settings, active travel and being active at home. The findings highlight that in recent years physical activity for many children and young people has moved from unstructured to structured physical activity, meaning the majority of physical activity is carried out as part of PE in school or at sports clubs rather than more unstructured activities such as playing football or tag in the park, or travelling actively.

The 0-19 Being Active JSNA identifies a decline in participation of physical activity as children reach adolescence and beyond, particularly for girls. As well as this, data suggests that as children and young people grow, there are changes in the types of activities they want to take part in - understanding and adapting to this is key to increasing engagement and participation.

There is a clear role for early years and educational establishments. From a very young age, children need to develop fundamental movement skills and the social skills which many activities require, whether that is part of a structured sporting activity or playing a team sport during school breaks or after school.

School provides an excellent opportunity to try new activities, a focus on finding ways to increase physical activity for all pupils, regardless of skill, interest or motivation can make a big difference.

There is an important role for parents and carers in both supporting their children's movement and activity and also positive role modelling. Many children and young people need encouragement and support to be active, particularly when taking part in sports and other activities outside school.

Of course, having activities which children and young people can take part in outside school is also vital which is where the leisure providers, community organisations and the local authority come in. What is clear is that a joined-up system-wide approach is essential to increase the physical activity levels of our children and young people.

The 0-19 Being Active JSNA utilised data from a number of sources, including the Children and Young Person Active Lives Survey and the local Koboca Pupil Survey. A selection of charts is displayed below, but a more detailed picture can be found in the published 0-19 Being Active JSNA document^{xii}.

For Cheshire West and Chester, the Children and Young Person Active Lives Survey (January 2023 – academic year 2021-22), suggests that 43.3% of children (age 5-16 years) in Cheshire West and Chester were meeting the UK Chief Medical Officers' (CMOs') recommendation that children and young people (5 to 18 years) are physically active for an average of at least 60 minutes per day across the week (see Chart 1). Since the 2018-19 academic year, there has been a decrease in the proportion of children (aged 5-16) who are meeting CMO recommendation of 60+ minutes a day of activity, however, since the 20/21 academic year the proportion of children who are fairly active has increased.

60% 51.0% 50.2% 46.9% 50% 43.3% 40% 28.8% 26.6% 25.3% 30% 34:1% 27.9% 20% 24.5% 22.4% 10% 0% Academic Year 17- Academic Year 18- Academic Year 19- Academic Year 20- Academic Year 21-

20*

Less active: less than an average of 30 minutes a dayFairly active: an average of 30-59 minutes a day

21

Chart 1: Levels of activity for Children and Young People in Cheshire West and Chester over time

Source: Active Live (Children and Young People), Sport England, 2022

Chart 2 is data for Key Stage 2 children (age seven to 11). The chart presents the percentage of children who 'feel good' when taking part in PE, physical activity and/or sport across the year groups and split by sex. The chart shows that more males said they 'feel good' when taking part in PE, physical activity and/or sport' than females for all year groups.

Active: an average of 60+ mintues a day

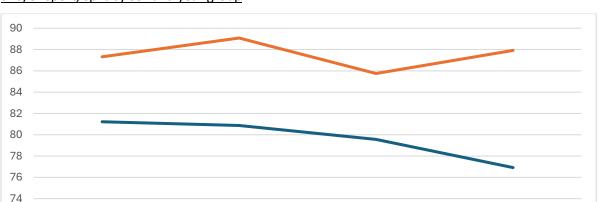


Chart 2: Percentage of Key Stage 2 children who feel good when they take part in PE, physical activity and/or sport, split by sex and year group

Source: Koboca Survey (local data)

Year 3

72 70

Chart 3 shows data for young people in school years 7, 8 and 9 (age 11 - 14 years) split across levels of activity and split by sex. The chart shows similar figures for males and females for the 'not active' and 'active' categories. With more females reporting being 'semi-active' across the year groups, and more males reporting being 'very active' across the year groups.

Females -

Year 5

Males

Year 6

Year 4

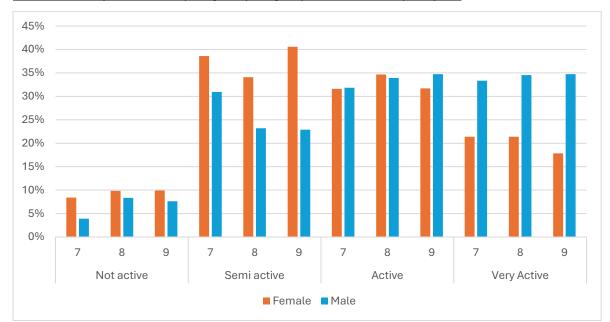


Chart 3: Activity levels for Key Stage 3 (year groups 7-9 children) split by sex

Source: Koboca Survey (local data)

When children in year groups 7-9 (ages 11-14 years) were asked 'When you take part in PE what do you enjoy the most?', the most common responses were 'being with friends' and 'having fun' for both males and females, with the females placing 'being with friends' as what they enjoyed the most, whilst males responded that 'having fun' was the most important factor for them. The results are shown in chart 4.

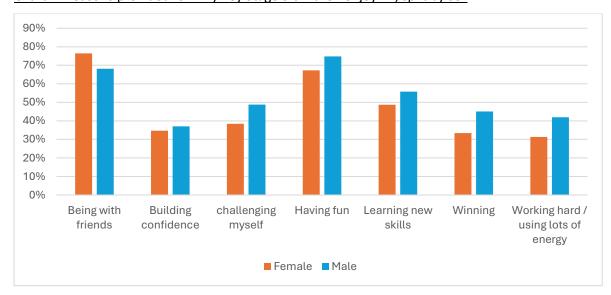


Chart 4: Reasons provided for why Key Stage 3 children enjoy PE, split by sex

Source: Koboca Survey (local data)

There are many opportunities for younger residents of Cheshire West and Chester to be active both in informal and formal settings, however barriers exist. These include:

• Findings from the ActiveCHILD study^{xiii} provide insight into both activity levels of children and young people in the early years, plus the actions that parents and carers take to support their

- child's activity levels. The research findings show that some parents and carers choose for the family to stay at home rather than go out, impacting on the level of activity the child is able to take part in. This highlights the role of the parent/ carer in the child being active.
- Research as part of the Active 6 Projectxiv, found that children's activity is now dependent on more structured activities, such as active clubs, and less dependent on unstructured activities, such as playing with friends after school. This is important for schools and other settings to understand and consider when organising school-based and extra-curricular activities.
- With Cheshire West and Chester being a large geographical area, it is not possible for all
 residents to be able to access a leisure facility easily. As part of their development model, Brio
 Leisure launched a hub and spoke offer, taking activities to communities who are less well served
 by the leisure facilities (due to distance, transport etc.), ensuring that children and young people
 are considered within the offer and taking a family approach to activities where possible.

Adult Physical Activity Needs Assessment summary

To inform the co-development of the Get Cheshire West Moving Strategy and complement the 0-19 Being Active JSNA, partners across the borough worked together to produce an Adult Physical Activity Needs Assessment.

Data and insight

National <u>Data</u>	Local Partner Data	Local Insight
Active Lives Data	Brio membership and usage data	CW&C Adult Physical Activity and
2021 Census	Nature-based Wellbeing	Movement Survey
	Cheshire's Natural Health Service (Mersey Forest)	Fairer Futures Ambassador Focus Group (lived experience)
	Cheshire Football Association registered players	Supporting Women and Girls to be active Workshop
	Parkrun participation	Sport Facilities Strategy and Playing Pitch Strategy

Key findings

In Cheshire West and Chester:

- More adults are physically active compared to North West and England average.
- Less adults are inactive compared to North West and England average.
- Women are less active than men.
- People living with a disability are less active than those without.
- Higher deprivation correlates with higher inactivity.
- The 35-44 age group are the least active.
- More than half of working age residents are sedentary for ≥ 6 hours per day on working days.

Barriers to being active:

• Barriers to being active include 'lack of time', 'lack of energy', 'cost and not being able to afford to pay for activities', 'health issues'.

- Far more females cite 'lack of confidence' as a barrier to being active than males.
- More males than females reported doing 'as many activities at they wanted to'.

Places to be active:

- Roads and streets were the most frequently used place to be active by survey respondents, followed by garden, the gym and woodlands.
- Parks and greenspaces were used by many people but less regularly.
- Males use almost all of the available assets and spaces more than females, the exception is community halls which are used by a higher percentage of females.
- 'More free/affordable activities', 'local walking, wheeling, or cycling', 'local activities' 'better availability or timing of activities,' 'someone to be active with' and 'improved lighting in parks or open spaces' would support more people to be active.

Activities of interest:

- Walking, yoga, Pilates, swimming, classes e.g. spinning, Zumba, gym, dancing and cycling.
- More males were interested in cycling, sports such as football, netball, and cricket, and running than females.
- More females were interested in dancing, swimming, yoga and classes e.g. Zumba, than males.

Service use:

- Brio attracts membership from more females than males.
- Working age members make up the majority of Brio membership across all types (full, Pay as You Go, WorkFit).
- Nature-based activities are positive for engaging residents in activity and can have a positive impact on wellbeing.
- There are considerably more male adult players registered with Cheshire Football Association than females. Membership numbers decline with age.
- Parkruns across the borough engage over 1,000 residents each week.

Active travel:

- Walking or wheeling is a popular way to be active for all, regardless of age and sex.
- The majority of respondents stated that they do not cycle. More males than females do cycle and more frequently.
- In Cheshire West and Chester, a smaller proportion of working age residents walk or wheel to work than the England average. Fewer residents cycle to work compared to the England average, but more than the North West average.

Limitations:

- The CW&C Physical Activity and Movement Survey was not representative 75% were female, the majority were aged 35-64, and considered themselves White British, and most were educated to a high level (had at least an undergraduate degree).
- The survey did not collect information on disability and could not be analysed by geography.
- We only received data from a small number of partners.
- There was limited use of the focus group template, despite partners stating that they would carry these out.
- Limited local insight in terms of disability and other inclusion groups.

Our vision for physical activity in Cheshire West and Chester

Our vision

That Cheshire West and Chester is a place where being physically active is the norm.

Aim

Our aim is to work as a system to enable, empower and support all Cheshire West and Chester residents to be more active, more often, in ways in which they enjoy. The Get Cheshire West Moving Strategy will be owned and delivered by system partners across the borough, working with and building on strengths of local organisations and communities. Local voices will continue to shape the delivery plan for the next three years, to ensure the strategy is meaningful, relevant and impactful for local people. Partners are committed to increasing physical activity for all, thus reducing physical inactivity and sedentary behaviour.

Themes

The objectives and actions of the Get Cheshire West Moving Strategy have been grouped under the following themes and align with those set out by Sport England nationally and Active Cheshire, locally:

Theme 1. Active Systems

- Concerns the broader strategies, policies, and systems that influence physical activity.
- Ensures that physical activity is embedded within organisational, institutional, and policy frameworks.

Key to active systems are system-wide working, data and insight, monitoring and evaluation, learning and impact.

Theme 2. Active Environments

- Focuses on the physical spaces and infrastructure that support physical activity.
- Involves development, accessibility, communication, and sustainability of spaces that are conducive to movement and physical activity.

Key to active environments are active education, active workplaces and active infrastructure

Theme 3: Active People and Communities

- Focuses on individuals and community-level action to engage people in physical activity.
- Emphasise inclusion, cultural shifts, partnerships, and addressing barriers to participation, ensuring that diverse populations are engaged.

Key to active systems is engagement, co-creation, safe and inclusive experiences, and asset-based community development

Ambitions

For Cheshire West and Chester to be a place where being physically active is the norm, we will:

- Make being active an easier choice for residents.
- Empower and enable leaders to ensure physical activity is embedded within systems, advocating for physical activity champions at all levels.
- Support the development of active environments and local infrastructure that encourage people to be more active, more often.
- Reduce inequalities in accessing and taking part in physical activity and sport.
- Work with a wide range of partners including health, social care, voluntary, community, faith, and social enterprise organisations and businesses to embed physical activity into daily life for all.
- Work with communities to understand how they want to be active, empower them to do so.
- Ensure that education and work settings understand the value of physical activity and actively promote it.
- Enable sport clubs and teams to thrive, increasing participation and opportunities to engage in sport and increase participation.
- Monitor and evaluate, share good practice, learn from challenges and innovate.

How will we get there?

Getting more people more active in ways in which they enjoy will take a system-wide coordinated approach. The action plan below is presented in themes and high-level actions which are underpinned by a series of deliverables which are detailed in a delivery plan.

The delivery plan will be a working document, regularly reviewed and refreshed to align with new insight and learning, enhanced partnerships and resource.

Theme 1. Active Systems

- Concerns the broader strategies, policies, and systems that influence physical activity
- Ensures that physical activity is embedded within organisational, institutional, and policy frameworks.

Key to active systems are system-wide working, data and insight, monitoring and evaluation, learning and impact.

1.1 All Eat Well Be Active partners to commit to supporting the Get Cheshire West Moving Strategy and delivery plan

Coordinate the Get Cheshire West Moving Working group with Terms of Reference, governance, and resource structure to implement the strategy and delivery plan.

Work to ensure that physical activity agenda is led and driven by the Health and Wellbeing Board and physical activity/inactivity will be an integral component of the Cheshire West Place Plan and Cheshire West and Chester Borough Plan.

Carry out public consultation on Get Cheshire West Moving strategy and delivery plan.

1.2 Partner organisations to work together to drive systemic change

Align physical activity efforts with broader policy frameworks (e.g., Borough Plan, Place Plan) and wider strategies (sports facility, parks and greenspaces, active travel, playing pitch, Local Transport Plan 4), ensuring that strategies complement and talk to each other.

Renew/ re-engage with stakeholders to foster a collective commitment to physical activity at all levels.

Support partner organisations to set up local leadership and processes to add physical activity to strategies, business and delivery plans.

Integrate physical activity into clinical pathways, in line with the NHS Consensus Statement "Harnessing the benefits of physical activity".

Build cross-sector partnerships to drive physical activity, including collaborations between public-sector bodies, businesses, schools and communities.

1.3 Co-develop unified communications and messaging across sectors, ensuring clear, consistent communication that highlights the benefits of physical activity and how residents can embed movement and physical activity into their daily lives

Create a shared, borough-wide communications plan using positive, inclusive, everyday messaging.

Co-develop a stakeholder forum for sharing best practice and resources (e.g. SLACK).

1.4 Co-develop a plan to best utilise data and insight to monitor and evaluate impact and ensure continued learning

Work as a system to agree on metrics for monitoring success, report annually.

Work with national and local partners to increase uptake of the Active Lives Survey and KOBOCA Survey.

Explore opportunities to work with the University of Chester to develop locally relevant research to increase physical activity across the borough.

Theme 2. Active Environments

- Focuses on the physical spaces and infrastructure that support physical activity.
- Involves development, accessibility, communication, and sustainability of spaces that are conducive to movement and physical activity.

Key to active environments are active education, active workplaces, active communities and active infrastructure.

2.1: Promote and improve environments conducive to physical activity through co-design and better use of existing green and blue spaces

Explore opportunities to engage further with the planning system in relation to healthy planning which supports physical activity.

Ensure safe, accessible and well-lit spaces for outdoor activity, with clear signage, good surfaces, and safe entry/exit points.

Prioritise the development and maintenance of green and blue spaces in areas with high deprivation to improve accessibility and opportunities for physical activity.

Better understand the challenges faced by rural communities in accessing opportunities to be active, considering availability, transport and cost.

2.2: Integrate physical activity with broader environmental sustainability goals

Create the conditions where active travel is accessible, inclusive and the first choice of transport for everyone, whether as a complete journey or as part of a journey including public transport.

Work with planning, housing, transport and other Council departments and partner organisations to position physical activity as a key component of healthy place making and design (e.g. tree planting done in a way which maintains feeling of safety). Placing greatest emphasis on areas of deprivation.

Promote and encourage green social prescribing to support residents to be active in nature.

2.3: Support educational institutions (early years, schools, sixth forms, colleges, universities) to increase the opportunities for their students, staff and local communities to be physically active

Support and encourage early years and educational settings to integrate physical activity throughout the working day.

Support staff to explore, to understand and to overcome barriers to physical activity for key cohorts, including girls, children with SEND and disabilities and those from low-income families.

Use opportunities during higher education to understand which activities young people (16-18) enjoy taking part in, to help to inform activities offered to young adults.

Explore the potential to extend school, college, and university facilities for community out of hours activity.

Support all settings to take up supported initiatives to increase physical activity e.g. Bikeability, School Games, Smile 4 a Mile.

Support educational institutions to produce active travel plans.

2:4: Encourage and empower active workplaces

Support all employers to integrate opportunities to be active into the working day and work environment, with a focus on reducing sedentary behaviour.

Embed active travel and active working practices into workplace wellbeing policies; support employers to produce active travel plans and movement-friendly policies.

Reinvigorate the Active Practice Charter for primary care settings.

2.5: Encourage and empower active residential settings

Encourage those managing and delivering care in residential settings to incorporate varied opportunities for residents to be active.

2.6: Increase opportunities to be active and be involved in sport

Work in partnership to deliver high-quality assets and spaces to be active.

Support local sports clubs and community organisations to provide a sustainable, well-resourced physical activity offer.

Encourage Doorstep Sport throughout the local areas through the provision of accessible and affordable opportunities for young people to take part in informal sport within their local community through vibrant, varied, fun and sociable sessions.

Improve visibility, awareness and accessibility to physical activity opportunities across the borough.

2.7: Ensure inclusivity and accessibility

Provide and commission leisure services and activities to meet a range of needs for adults, children and families.

Ensure pitches and facilities are equally accessible to all, prioritising equal and inclusive access to provision (including ancillary facilities e.g. changing rooms, toilet facilities).

Encourage teams and schools to review the kit required to participate, considering the needs and preferences of all current and potential participants (e.g. sex, ethnicity, income).

2.8: Empower and enable a strong workforce able to support all residents to be more physically active

Promote workforce development that supports inclusive practices and building confidence to increase participation in physical activity.

Ensure physical activity conversations, health-focused interventions and programming considerations are integrated into workforce training, particularly for primary care, teachers, coaches, and social care workers (for example, women's health).

Normalise conversations around women's health topics like menstruation, menopause, and physical exertion, creating a supportive environment for women and girls.

Support inclusive physical activity programmes for people with disabilities and long-term conditions. Reduce reliance on individual champions by building resilience through partnerships, succession planning, and ongoing workforce/capacity building.

Theme 3: Active People and Communities

- Focuses on individuals and community-level action to engage people in physical activity.
- Emphasise inclusion, cultural shifts, partnerships, and addressing barriers to participation, ensuring that diverse populations are engaged.

Key to active people is engagement, co-creation, safe and inclusive experiences, asset-based community development.

3:1 Ensure continuous inclusion of Lived Experience

Ensure local voices underpin all of this work (ensure diversity in voice, seek out views of hardly reached residents).

3:2 Empower active communities

Empower and support communities to understand the physical activity challenges and needs of their population and to meet, where possible the identified needs.

Link to the Place expansion project in Ellesmere Port which has received funding from Sport England.

Establish local "Active Communities Networks" to bring together diverse stakeholders such as schools, leisure providers, and charities to increase physical activity at a local level.

Establish a network of physical activity champions across health, social care, community and workplace settings to empower residents to be active.

Utilise a range of diverse positive role models to promote physical activity, movement and sport.

Support communities to help residents of all ages to overcome barriers to participation.

3.3. Embrace diversity/intersectionality and prioritise inclusion

Understand and embrace the diversity of the population, targeting activities and support in a meaningful and appropriate way. For example, work with residents to offer culturally appropriate physical activity opportunities and those which consider and are accessible to different genders, those with a disability and people on low income.

Delivery of the Get Cheshire West Moving Strategy

The three-year Get Cheshire West Moving strategy is supported by a delivery plan which details specific actions, roles and responsibilities. The delivery plan is a working document and will continue to be reviewed, refined and informed through emerging evidence, national and local priorities and local voice. The year 1 milestones have been included here to show what the strategy aims to achieve in the first year.

Year 1 milestones

Milestones for the first year of the strategy will include, but not limited to:

- 1. Spread the word about the strategy, using a variety of communication channels
- 2. Get West Cheshire Active Working Group meeting bi-monthly
- 3. Deliver physical activity champion / leadership training for senior leaders and elected members
- 4. Delivery of a co-created Joyful Movement campaign for the borough
- 5. Schools supported to embed more physical activity into the school day
- 6. Workplaces supported to embed more physical activity into the working day
- 7. Develop a way to ensure local voices are heard and acted upon in delivering the Get Cheshire West Moving Delivery Plan

Year 1 - how will we know we have made a difference?

- 1. Residents and partners will know about the strategy and how we are working together to increase physical activity for all
- 2. Wide range of partner feeding into and attending Get West Cheshire Active Working Group meeting regularly

- 3. Physical activity champions trained across a wide range of organisations, embedded physical activity into their policies and practice
- 4. Partners and residents engaged in Joyful Movement 2025, finding new ways to be active
- 5. Smile 4 a Mile, Bikeability and other active initiatives delivered in more schools
- 6. Workplaces to have implemented active initiatives such as Active Soles
- 7. Local resident champions from a range of backgrounds with an advisory role in the Get Cheshire West Moving delivery plan

How will we measure success?

The Get Cheshire West Moving Strategy will be reported on quarterly to the Eat Well Be Active Reference Group and annually as part of an Eat Well Be Active update to the Health and Wellbeing Board.

In addition to the monitoring of actions and deliverables within the strategy delivery plan, the following outcome data will be reported on an annual basis:

- Percentage of physically active adults (Active Lives Survey)
- Percentage of physically inactive adults (Active Lives Survey)
- Percentage of physically active CYP (Active Lives Survey and KOBOCA Survey)
- Number of people who travel actively (Active Lives Survey)
- Number of school pupils engaging in Smile 4 a Mile
- Number of school pupils engaging in bikeability

We will also work with stakeholders and communities to collate case studies that displays impact against physical activity and system change. Sharing learning and best practice and allowing this to shape future direction.

Appendix

Uniting the Movement

Sport England's *Uniting the Movement* strategy (2021) focuses on tackling inequalities in physical activity, targeting older adults, women, people with disabilities, and lower socioeconomic groups. Aligned with Local Government Association guidance, it promotes tailored approaches to increase participation. The strategy sets out five focus areas:

- Recovering from COVID-19 and reinventing opportunities.
- Connecting communities via sport and physical activity.
- Providing positive experiences for children and young people.
- Strengthening links between activity, health, and wellbeing.
- Developing active environments and protecting spaces.

NHS England: Harnessing the benefits of physical activity

The NHS, in collaboration with national and local partner organisations, can harness the full potential of physical activity to help people live healthier, longer, and more independent lives.

Empowering clinicians and health and care professionals with the skills and confidence to discuss and promote physical activity, integrating it into key clinical pathways, aligning it with <u>Core20PLUS5 for adults</u>, <u>children and young people</u>, and supporting staff to stay active, the NHS can help to transform patient outcomes and reduce health inequalities. The four ways forward are:

- 1. Empowering health and care professionals
- 2. Integrating physical activity into clinical pathways
- 3. Supporting the NHS workforce
- 4. Supporting innovation and evaluation with partners

All Together Active

In Cheshire and Merseyside, the sub-regional physical activity strategy for health and social care, All Together Active^x highlights physical activity as a cornerstone for preventing non-communicable diseases, improving mental health, and addressing health inequalities. Data suggests that while some local authorities are performing well, disparities persist, particularly in areas with socioeconomic deprivation. Across the sub-region, collaborative efforts are underway to integrate physical activity into healthcare, planning, and community engagement frameworks.

The Cheshire and Merseyside All Together Active Strategy, led by the Integrated Care Board, envisions a sub-region with fewer health inequalities linked to inactivity. By 2026, its goals include:

- Supporting local places to leverage physical activity to improve population health.
- Embedding movement, sport, and physical activity into health and social care systems.
- Reducing health inequalities measurably.
- Empowering 150,000 inactive residents to become active.

This approach emphasises whole-system collaboration, behaviour change, and partnership-building to achieve the Marmot ambitions of reducing inequalities and improving health outcomes^{xi}.

Active Cheshire's Strategy

Active Cheshire's strategy sets out a bold vision for a network of connected system partners working together to create equal access to physical activity and sport, building healthier, more active Cheshire & Warrington where physical activity and sport are a natural part of daily life for everyone.

The Challenge

Too few people in Cheshire & Warrington are regularly active enough to support their physical and mental health. Childhood and adult inactivity rates are sadly increasing, coupled with alarming drop-off rates at every life stage from adolescence to older age. These trends are underpinned by deeprooted inequalities.

Active Cheshire Approach

Active Cheshire will unite, inspire and empower partners to tackle these challenges through three strategic priorities:

- Active Systems
- Active People & Places
- Active Environments

Delivering the following strategic outcomes

- Improved outcomes for people
- Stronger, more collaborative partnerships
- Inclusive, sustainable spaces for physical activity and sport

Underpinned by a focus on:

- Workforce
- Diversity & Inclusion
- Environmental Sustainability
- Safeguarding & Welfare

Active Cheshire Timeline

- By 2026: Establish a shared understanding of the status quo, using insights and evidence to unite us, and determine the collaborative actions needed to tackle inequalities and drive collective impact.
- By 2028: Deepen collaboration, implement solutions, and use continuous learning and
 insight to improve our ways of working. By providing ongoing support and coordination, we
 ensure that efforts remain aligned, adaptable, and impactful.
- By 2031: Create a culture of learning, continuous improvement and meaningful progress. By integrating data, insight and learning from each phase, we'll continue to drive co-created solutions whilst also reflecting on previous phases to better understand conditions that create positive outcomes.

Cheshire and Warrington Sport and Physical Activity Local Skills Plan^{xii}

The Cheshire and Warrington Sport and Physical Activity Local Skills Plan^{xii} (2025–2028) provides a strategic roadmap for developing a skilled, inclusive, and resilient workforce that can drive improved health, wellbeing, and economic prosperity. Developed by the Local Skills Accountability Board (LSAB) a collaborative network of employers, training providers, and sector specialists convened by The Chartered Institute for the Management of Sport and Physical Activity (CIMSPA) the plan aligns with the region's wider Local Skills Improvement Plan.

Recognising the workforce as a critical enabler of system change, the plan identifies priority actions to future-proof the sport and physical activity sector, including:

- Raising awareness of diverse and rewarding careers across the sector
- Expanding access to inclusive training and progression pathways
- Supporting small and micro employers with workforce development
- Strengthening system-wide collaboration and alignment

References

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^{iv} Cheshire West and Chester Council, 2020. Cycling and Walking. Available at: <u>Cycling and Walking | Cheshire</u> West and Chester Council

^v Cheshire West and Chester Council, 2011. Rights of Way Improvement Plan. Available at: Rights of way improvement plan | Cheshire West and Chester Council

vi Cheshire West and Chester Council, 2020. The Climate Emergency. Available at: The Climate Emergency | Cheshire West and Chester Council

vii Cheshire West and Chester Council, 2011. Local Transport Plan 2011-2026. Available at: <u>Local Transport Plan</u> 2011-2026 | Cheshire West and Chester Council

viii OHID Public health profiles – Physical Activity (phe.org.uk).

^{ix} Chief Medical Officer Physical Activity Guidelines Available at: <u>Physical activity guidelines: UK Chief Medical Officers' report - GOV.UK</u>

^{*} NHS Health and wellbeing framework. Available at: NHS England » NHS health and wellbeing framework

xii Cheshire West and Chester, 0-19 Being Active Joint Strategic Needs Assessment. Available at: <u>Joint Strategic Needs Assessment (JSNA) | Cheshire West and Chester Council</u>

xiii The Active Child Study, The CHILD Research Group: <u>ActiveCHILD Study – The CHILD Research Group</u>

xiv Youth Sport Trust. A new normal for children's physical activity in the wake of the pandemic.