FUNDING PROFORMA

Applicants, designations and host organisations (Name, Job Title and Organisation)

I.M Active, National Programme Manager (Families), Get Out (GO)
P.E Mann, Physical Activity Programme Lead, Health in Schools (HiS)
Dr H. Hart, Consultant in Public Health, Community Planning Partnership (CPP) Somewhere

Programme Title
Your Environment and Health (YEAH)

OVERVIEW OF PROGRAMME

Brief description of programme (less than 200 words)

Your Environment and Health (YEAH) is a multi-agency project that aims to encourage walking to primary schools in one CPP

The Intervention entails provision of a range of YEAH materials to primary (P5) school teachers. The materials have been integrated into a training pack. Schools and teachers are invited to participate. Those teachers who agree, receive training and subsequently deliver the YEAH lessons/material to their class. Teachers are also encouraged to reinforce the messages across the school curriculum.

A previous pilot initiative, delivered in one school, was shown to be effective: the mean distance travelled to school (walking) by P5 children in the intervention group increased significantly when compared with pre-intervention levels, and the mean distance travelled by car decreased significantly. These differences were demonstrated to be significantly different to changes in the distances travelled by foot and car in comparison schools.

Given this success, it is now proposed that this project is rolled out within all 4 CPPs within Lazy City Council Area. Learning from this roll out, if appropriate, will inform the expansion of the intervention on an incremental basis across the whole country.

It is proposed that a formative evaluation is commissioned at the outset in order to inform ongoing decisions regarding the programme's initial and later roll out.

Rationale for programme

This should include an explanation of why your programme is needed.

YEAH:

- is entirely consistent with current national (Scottish Government) strategic priorities;
- has been tried and tested in a pilot area with demonstrable success; and
- offers and opportunity to assess the generalisability of this intervention in other contexts (across diverse schools and localities)

Fit with Scottish Government strategy and national priorities

YEAH's target group is children– a target group identified as a priority in *Let's Make Scotland More Active*.

YEAH is delivered through schools – a setting that *Let's Make Scotland More Active* acknowledges has a major influence on a child's physical activity. In fact this strategy document states that 'no institution other than the family has more effect on a child' (Scottish Executive 2003, para 111).

YEAH is consistent not only with the physical activity strategy but with the Scottish National Transport Strategy (December 2006) and its associated activities e.g. the Scottish Government Transport Division (through its funding of the Safe Routes to School initiative) aims to promote active travel options for school children and increase the proportion of non-car based travel to school (and thereby tackle the congestion associated with the school run)

YEAH contributes to /accords with Education's *A Curriculum for Excellence*, Health Promoting Schools (national Priority 5), Eco-Schools (National Priority 4) and Active Schools programmes

There are currently NHS HEAT targets on reducing obesity trends in young people and national government targets on protecting and enhancing the environment which this programme may also contribute towards.

Evidence base

This programme has been piloted in 2001 in one school and subsequently 2004-2007 in one CPP area with demonstrable success.

In the initial pilot this success was indicated by increased distance walking and reduced distance travelled by car among children in targeted classes. The evaluation in the one school benefited from using a quasi experimental design which indicated that this increase was higher than that observed in the control classes/school (the difference was statistically significant).

The second pilot which rolled out the interventions to one CPP resulted in its first year in

- the percentage of children travelling the whole journey to school by car decreasing from 30% to 8%
- the mean distance travelled by car decreasing from 0.96km to 0.68km
- the percentage of children walking the whole journey to school increasing from 46% to 62%
- the mean distance walked was increased from 0.43km to 0.71 km. This increase represents an estimated 12 minutes of walking on the way to school –if repeated on the way home this would represent almost half of the recommended daily physical activity recommendation

The table below shows the change in the percentage of participating pupils walking all or *the main part* of their journey to and from school pre and post intervention

	Before	**After**	**Before**	**After**
Year				
2005	59%	72%	64%	72%
2006	57%	68%	62%	72%
2007	56%	66%	64%	67%

There was no comparison group data for the above results

There is therefore an evidence base for this proposal. Furthermore, a number of studies have shown that walking to school is associated with higher overall physical activity levels (see McKee et al, J of Epidemiology and Community Health 2007;61: 818 -823).

In addition to the above, YEAH represents a short intervention that is relatively easy to implement/deliver and can potentially reach large numbers of children. We therefore consider this to be a feasible programme to be rolled out.

Aims and objectives

Aim

To bring about a modal shift towards walking from car- and bus-based travel among eligible P5 pupils

Objectives

To increase distances walked by eligible P5 pupils in their commute to and from school after the six week intervention
To decrease the distance travelled by car or bus by eligible P5 pupils in their commute to and from school
To enhance knowledge and attitudes towards active commuting to school amongst pupils, teachers and parents

Target groups

Primary target group: Primary 5 pupils in all (non specialist) schools in the 4 CPP areas within Lazy City Council who live within the statutory walking distance of school for this age (3 miles) and are currently driven to school or travel by bus

Secondary (intermediary) target groups: Parents/families/teachers of above

PROGRAMME OUTCOMES AND HOW THESE WILL BE ACHIEVED

Intended outcomes and timescales for achieving these

Please provide information on intended outcomes. In addition it will be useful (if feasible) to provide information on:

- thresholds for change i.e. what level of change is the programme seeking to achieve
- timescales i.e. over what timescale is this change intended to be achieved and sustained
- the target groups for each of the outcomes
- whether/how increases in physical activity will be maintained.

Intended outcomes at end of intervention (six weeks) and sustained at 6-month follow up:

Increased mean number of metres walked by eligible P5 pupils in their commute to and from school following their six week programme

Decreased mean number of metres travelled by car by eligible P5 pupils in their commute to and from school following their six week programme

Increased mean number of metres walked by eligible P5 pupils in their commute to and from school six months post intervention

Decreased mean number of metres travelled by car by eligible P5 pupils in their commute to and from school six months post interventions

Increased percentage of children in participating classes travelling the whole or main part of their journey by foot post intervention and after six months

Decreased percentage of children in participating classes travelling the whole or main part of their journey by car

Also, intermediate outcomes:

Increased knowledge of the benefits of active commuting for their own health (Pupils)

Increased knowledge of the benefits of active commuting for the environment (Pupils)

More positive attitudes to active commuting among parents, pupils & teachers

Increased knowledge of road safety and pedestrian skills by pupils

Thresholds for change:

In the initial pilot the mean distance travelled increased from 198m at baseline to 772 metres post intervention. This represented a 389% increase.

In recognition of the potential dilution of effect (due to the wider roll out and to account for changes in the seasons in which the interventions might be conducted) we (more modestly) set the threshold for change in participating pupils (living within 3 miles) at a mean increase of 250%

In terms of thresholds of change in the percentage of participating children walking the whole of main part of their journey by foot we would again set a more modest threshold than achieved in 2004 (16% increase) of a 10% increase.

Our thresholds of change in the percentage of participating pupils travelling the whole or main part of their journey by car we would again set a more modest threshold (than the 22% achieved in 2004) of a 10% decrease.

Whilst we would hope the achieve these thresholds post intervention we are currently less sure whether they will be sustained 6 months post intervention as we, as yet, know little about longer term maintenance .

Timescales
The programme runs for 6 weeks and has been demonstrated to increase physical activity by the end of this period.

As we do not know whether this is sustained in the longer term, we will commission an evaluation in a sample of schools which will include an assessment of the extent to which increases in physical activity are maintained over time (6 months) and with a view to informing the programme's future

design and delivery regarding maintaining modal shift.

Where possible we will also run the intervention across the CPP over three years and in different terms to gauge any changes in outcomes that may be attributable to seasonal effects. This will utilise programme monitoring data but the data cleaning, analysis and interpretation will be commissioned externally.

Maintenance

The programme is targeted at P5s. However to encourage the maintenance of increased walking over time, we intend that:

- Health in Schools encourage the additional refresher lessons developed by YEAH's to spiral through the curriculum for P6 and P7 in motivated schools; and
- Schools with the support of School Travel or Active School Coordinators where available will identify any local environmental barriers to walking and (with the support of GO) bring these to the attention of the City Roads Department
- Additional interventions are currently being piloted with P6/7 to enhance maintenance

How will the programme achieve its intended outcomes?

Here it will be important to describe:
the programme's main activities (what it will do) and how these activities plausibly link to the programme's short, medium and long terms outcomes.
To illustrate these links, applicants may find it helpful to use logic modelling or similar tools
(see http://www.wkkf.org/default.aspx?tabid=101&CID=281&CatID=281&ItemID=2813669&NID=20&LanguageID=0)

See http://leap.scdc.org.uk/

Please see the attached logic model which details intended activities and how these plausibly link to the outcomes. It is also colour coded to show key areas of responsibility (and so spheres of influence)

What are the key features of the programme's **inputs** that will help the programme achieve its outcomes?

Here it will be important to state which agencies/personnel will be involved, and the resources/knowledge/ skills/influence that they will bring

As the national agency responsible for developing the Health Promoting School, HiS exerts an influential role in advising schools how to meet their statutory requirements in relation to health improvement. It also provides training and resources on health improvement (including physical activity) that accord with Curriculum for Excellence. As a partner in this funding bid, Health in Schools would promote and distribute hard copies of YEAH materials

across all schools who agree to participate in the training. With a responsibility for building the evidence base for health promotion in schools, HiS would be responsible for commissioning the independent evaluation of this programme and aspects of analysis of the ongoing monitoring data

GO is a community based initiative that promotes walking and cycling. It has a network of individuals across Scotland which is assisting schools in developing their plans for sustainable travel. As a partner in this funding bid, GO will provide the training in the use of the YEAH materials and monitoring mechanism/tools. In addition, GO staff would be available to provide adhoc advise to teachers implementing the intervention

As a respected and longstanding voluntary organisation with established links with local authorities (roads departments), GO is well placed to liaise with local authorities regarding identified physical obstacles/possible solutions to enhanced walking.

As the organisation with direct/previous experience in implementing YEAH, CPP Somewhere will initially co-train with GO staff

Lazy City Council Road safety Officer will provide Road Safety advice and materials to participating schools

Participating schools and teachers will implement the interventions in the classroom and complete agreed monitoring procedures pre and post intervention and at six months follow up.

Active School Coordinators and/or School Travel Coordinators will disseminate parents materials and host parent information meetings where requested in participating schools

How will the programme address **inequalities**?

Here it will be important to explain whether and if so, how the programme will target those most in need. Where possible please be explicit about the type of inequalities being addressed (e.g. socio-economic, geographical, disparities in access or behaviour patterns [e.g inactivity] for particular groups (e.g. elderly, disabled, specific ethnic groups) or topics.

It is not anticipated that this programme will necessarily impact on inequalities in terms of physical activity. It is likely that primary pupils in deprived areas are more likely that those in more affluent areas to walk to school (given that their parents are less likely to own cars, may be less likely to be in work and so may be available to accompany children to school).

As the programme includes resources for use by children and families at home, we anticipate that these may be less well used in home characterised by extreme deprivation and/or chaotic lifestyles e.g. families with low literacy levels, with alcohol or drug problems etc.

Despite this we think the intervention has significant value in terms of increasing activity levels in pupils more generally as it may contribute to establishing more positive attitudes to physical activity and active commuting in particular. It may also enhance road safety and reduce distance travelled by car as part of the school journey (and increased child accidents rates are strongly associated with deprivation). Whilst we acknowledge these are not physical activity related health inequalities they are some of the most marked inequality issues in relation to children.

In recognition of the need to learn about inequalities issues the independent evaluation will consider any differential engagement levels and outcomes in schools in different SIMD categories.

INFORMATION REGARDING LIKELY POPULATION HEALTH IMPACT

Programme reach

If feasible, please provide an indication of:

- the number of individuals who the programme will be targeting
- the number of individuals who are likely to participate in the programme
- the number of individuals who are likely to adhere to the programme
- your view of how representative of the targeted group, those who participate/ adhere are likely to be

There are 150 primary schools within the four CHP areas in Lazy City Council with 180 P5 classes educating approximately **5,400 P5 pupils.** The programme will be available to all schools and P5 Classes within these schools who wish to participate. It is however likely that a substantial proportion of these children are already walking most or all of their journey to school. National transport statistics would suggest that around 59% of primary children walk to school and 22% travel by car. This reduces the target population to around 3240.

As detailed below we hope to recruit 30% of schools and so we would hope that at least 927 eligible/target pupils would be exposed to the intervention. Others within the classes will also be exposed to the interventions but may (live outside the 3 mile limit and/or) already be active and so their walking behaviour may be reinforced.

Programme adoption

If feasible, please provide an indication of:

- the number of settings who the programme will be targeting
- the number of settings who are likely to actually start the programme
- your view of how representative of your targeted settings, those who take part

are likely to be.

There are 150 primary schools in Lazy City Council. We will try to recruit, 33% of these schools (n=50). We anticipate recruiting 60 of the 180 P5 classes. Due to the voluntary nature of the programme it is likely that schools in the more affluent areas may be more likely to apply as commuting by car may be higher. These schools may also have greater capacity to engage in additional not mandatory programmes due having less income/inequalities related and educational challenges. We will strive however to engage at least 10 of schools from more deprived SIMD areas (or based on free school meals take up or clothing grants) to explore the relevance and uptake of the programme within these settings

Programme implementation

Please comment on the nature and limitations of influence that you feel that you (as budget holders) would have in rolling out the programme e.g. how will you ensure that the programme is delivered as intended across sites.

The cornerstone of this programme are the YEAH materials – the curriculum resources and those for the children and families at home. These are set/consistent and include very clear guidance on how they should be used. The consistency of application will be emphasised in the training programme. In addition, GO staff will be available across each CPP to provide additional input/support to teaching staff. However, our role is to co-ordinate and support the programme's rollout and some degree of variation in how the programme is implemented is inevitable

A key limitation in this programme is that as a result of local democratic nature of school management we have little control over whether schools will participate in the programmes, that teachers will attend the training or will subsequently implement the lessons or complete the monitoring.

Materials have been designed and piloted and we know that they are pragmatic and viewed possibly by those who have participated. Lazy City Council have backed the programme and are encouraging participation by schools as an element of their Health promoting School Programme.

Other than the provision of appropriate parent materials (again these have been piloted and improved) and ensuring their concerns are addressed (e.g. through road safety training, parent meetings and through peer encouragement for other parents) we have little additional means of incentivising participation or adherence.

Pupils adherence will be encouraged through the diaries and awards within the materials and encouraging walking buddy where feasible

As part of the external evaluation we will investigate the reasons for non

participation and drop out amongst (schools, teachers, pupils and parents) with an appropriate purposive sample.

Programme effectiveness

Please describe the evidence or thinking that informs the programme. If the intervention has been piloted/evaluated previously this section should be stated including details of any changes to this model that are proposed, and an explanation for these changes.

If the model has not been evaluated before, it will be important to explain in detail why the intervention is likely to 'work' i.e. what is your theory about why your intervention should lead to increased physical activity among your target group(s)?

As highlighted above, the proposed programme builds on two pilots with demonstrable effectiveness. In its original guise the intervention lasted six weeks and comprised:

- a YEAH curriculum resource guide to support teachers in delivering active travel projects through the existing Curricular guidelines and across a variety of school topics.
- YEAH Child and family resources – essentially a set of active travel resources designed to be used by children and their families at home and which provide practical guidance about how to plan an active journey to school.

The pilot programme was delivered to P5 pupils who travelled some/all of the way to school by car and who lived less than the statutory walking distance of school for this age (3 miles). These elements of the intervention will be maintained in this roll out.

The rollout differs from the pilot in the following way.

The pilot was implemented over the term between Easter and Summer (Spring term). In this roll out however, schools/teachers will decide when to implement the programme. As we anticipate that the risk of bad weather and dark mornings/evenings in the winter months will dilute the programme's effectiveness we will encourage schools/teachers to implement the programme at the start of different terms within each year with a view to understanding the role of timing, in particular in relation to the acceptability and effectiveness of the intervention. The programme lasts a full term.

Programme maintenance

How is it anticipated that the programme will be sustained or mainstreamed at the end of the funding period?

Health in Schools has agreed to assume responsibility for the long term implementation – including funding - of the programme if the evaluation indicates the programme is effective in promoting increases in the means distances and percentages walking to school.

MONITORING
What baseline data will be collected and from whom? Please specify what types of data will be collected (knowledge, attitudes, behaviours etc) and by whom A feature of the intervention is collection of baseline information on distance travelled from home to school, mode of travel used, and distance travelled by mode(s). This will be collated by teachers and returned to HiS.
How will the programme's progress be monitored? Please describe the nature of the information that will be collected and the stages/timing for this data collection. Baseline data (as described above) will be collected immediately prior to the intervention and post intervention (after the 6 week programme) and at six months post intervention Data on number of schools offered and taking up, implementing or dropping out of the interventions will be recorded by His Teachers will be asked to record the % of eligible pupils who have participated The above data will be complemented by: • the collection of some limited contextual data from teachers with a view to understanding those circumstances associated with more or less favourable outcomes e.g. how many lesson plans they delivered, how much time they spent in total in delivering the programme etc. and; • collection of some individual level data e.g. gender, postcode (to allow classification by SIMD, ethnicity) This will be done by a short survey
Who will collate and analyse these monitoring data? i.e. will the host organisation of a funding applicant be responsible for this and/or will this be commissioned from another agency? HiS will be commissioning 'out' the analysis of the monitoring data described above (together with a full evaluation of the programme)
EVALUATION
What evaluation do you intend to conduct/commission? Please describe and state whether this is likely to be externally commissioned? Evaluation will be externally commissioned by HiS. The purpose of this will be to uncover the circumstances associated with positive outcomes, and those associated with the programme being less effective. At this stage it is anticipated that this evaluation will include:

- interviews/focus groups with targeted pupils, parents and teachers with the sample including those who choose to not become involved, who start but do not complete the programme, and those who adhere to the full intervention;
- follow up interviews/focus groups with pupils, parents and teachers to understand the factors/processes associated with maintained increases in physical activity

FUNDING

What is the total amount of funding for which you are applying?
£311,500

How many years will this funding cover?
3 years

Please provide a breakdown of how the budget would be spent <u>each year</u>
e.g. detail costs for training, materials, staff (remembering to add on any host organisation costs), monitoring and evaluation

<u>Recurring/annual costs over programme</u>
YEAH (hard copy) materials for teachers: £30k
New post of YEAH co-ordinator in HiS including employment costs: £33k
Cleaning and analysis of monitoring data: £8k
Independent evaluation: £30k

<u>Plus, in year one:</u>
4 YEAH briefing /training sessions to GO staff (by NHS Somewhere): £6k
Development of online survey: £1k

ORGANISATION APPROVAL FOR APPLICATION

For each applicant's employing organisation, please state the name and designation of the most senior individual in the who has approved this application