Health Walk coordination models of ownership and funding in Northern contexts

**Argyll and Bute – slightly funded**

They are to receive a small amount of PFA funding to establish a coordinating remit (role links into active travel and environment as well) within the TSI.

* + Historically, Live argyll, the local leisure trust, were involved in the Move More programme focused on cancer. They wanted to embed Health Walks into a community delivery model with HSC & PFA money but existing capacity was a barrier.

**Cairngorm – not funded**

Cairngorms National Park Authority sits within several LAs. Coordinator is a volunteering manager post which was mainstreamed in March 2020 from CNPA core budget.

**Aberdeen city – funded but not necessary for role**

Walk Aberdeen is a well-established project managed by Sport Aberdeen, the leisure trust. Sport Aberdeen delivers physical activity and sport services on behalf of the council and other partners. Part-time Health Walk coordinator role is mainstreamed from core funding. Only applied for funding from us for last round due to the need for added capacity to tackle inequalities. Don’t rely on PFA.

Their additional non-core funding for the programme comes from:

* + The Community Sports Team support the development of health walks as part of Community Sports Hubs, thanks to sportscotland Prog for Government EDI funding
  + Nordic walking activities funded by grant from Parkinson’s UK

**Aberdeenshire – funded, necessary for role**

Live Life Aberdeenshire feel like leisure trust but sit within the council. Due to uncertainty of funding they encourage partners they work with the be independent SHWN members. They’re Committed to embedding walking into their physical activity referral framework. When the coordinator left recently, they didn’t get senior management sign off for recruiting a replacement due to council financial difficulties. They hope to reinstate the job in April.

Only funded by LLA and PFA.

**Moray – funded, necessary for role**

Their HW coordinator is based in the NHS health improvement team and the role sits within Health & Social Care Moray, a partnership between the council and NHS Grampian. Their NHS is working proactively to get connections around local opportunities for physical activity embedded into their secondary care model.

Their match-funding for the programme comes from:

* + Health Improvement Fund
  + Some in-kind contributions from both Moray council and NHS

**Angus – funded, necessary for role**

The Healthy Steps Angus programme is run from Angus Alive, the leisure trust. Similar model to Aberdeenshire in that they encourage HWs become independent members. Difficulty getting up and running but they have a committed coordinator. They hold a steering group of funders. 25-26 will be their 3rd project year.

Their match funding for the programme comes from:

* + Angus Health and Social Care Partnership (deliver services for the council and NHS Tayside)
  + Angus Council
  + Angusalive in-kind support
  + Get Out Get Active (GOGA)

**Dundee – funded but not entirely necessary for the role**

The Steps to Health programme is run by Leisure and Culture Dundee, an independent charity responsible for delivering leisure, sport, library, information and cultural services in Dundee. Dundee is very proactive around walking and it’s well built into their wellbeing and leisure offer. Their challenges are more around volunteer recruitment and support, so that’s what our funding contributes to. Dundee community health team are under the steps to health banner.

Only funded by Leisure & Culture Dundee and PFA.

**Perth & Kinross – not funded**

Stride for Life programme is run by Live Active, P&K’s leisure provider on behalf of the council. HWs are embedded in their core wellbeing offering. They get health improvement and health and social care money. They have 5 coordinators in P&K for each locality so walking is part of their remit alongside exercise referrals. They had funding for hospital discharge and home care physical activity support so they do lots of Strength & Balance in home and community settings.

NHS Tayside health improvement team are having conversations around GOGA funding, Green Health Partnership funding and Nature Scot funding finishing, so there’s some conversations around how to manage that funding transition.

National survey insight

Relevant SHWN member survey insights

Of those who responded, groups represented:

* 34% (14) third sector
* 29% (12) local authorities
* 16% (7) leisure trusts
* 12% (5) volunteer run
* Other member types – NHS boards, TSIs, and few others (national park authority, Scottish fire & rescue service, community council)

More established organisations tended to be from third sector organisations and local authorities, while newer members were more commonly leisure trusts or volunteer-led groups.

Walks were predominantly led by a mix of paid staff and volunteers:

* Combo of staff and volunteers - 62% (26)
* Volunteers – 29% (12)
* Staff – 10% (4)

LAs, leisure trusts and NHS boards often focus on geographical areas, and volunteer-led groups tended to target local communities. Third sector groups took a more targeted approach, e.g. targeting specific health conditions or people facing barriers to physical activity.