The Greater Manchester Moving journey so far

- **Jan ’14**: Greater Manchester Stakeholder meeting
- **Nov ’14**: Greater Manchester Devolution agreement announced
- **Feb ’15**: Launch of Greater Manchester Moving Blueprint
- **Jul ’15**: Taking Charge: 5 year plan for Health and Social Care in Greater Manchester
- **Nov ’15**: Sport England and GMCA/ NHS in Greater Manchester signed MOU
- **Dec ’15**: Physical Activity agenda prioritised in Greater Manchester Mayoral Manifesto
- **Feb ’16**: GM Cycling and Walking Commissioner Appointed
- **Jul ’16**: Made to Move Walking and Cycling Report Published

**Timeline Events**

- **Greater Manchester Moving** leadership and strategy development group formed
- **Health and Social Care devolved powers announced**
- **Association of Greater Manchester Leisure and Culture Trusts formed (GM Active)**
- **Greater Manchester Physical Activity and Sport Commissioning pilot with Sport England**
- **Physical Activity a priority in Greater Manchester Population Health Plan**
- **GM Moving Refresh Launched**
- **GM confirmed as Sport England Local Delivery Pilot**
Greater Manchester Moving: The Ambition

Everyone in Greater Manchester more active, to secure the fastest and greatest improvement to the health, wealth and wellbeing of the 2.8m people of Greater Manchester¹

Our shared purpose is to positively change the lives of people across Greater Manchester through physical activity and sport. Building from our strengths and through systemwide collaboration, we will double the rate of past improvements, reaching the target of 75% of people active or fairly active by 2025.

¹ Data to support the ambition for everyone to be more active. Report on the Greater Manchester Physical Activity Survey November 2020.
### Principles of working
- Consistent use of the Approach to Transformational Change in policy and practice
- Everyone is a leader
- Person centred
- Whole systems
- Genuine collaboration and co-production

### Policy and strategic architecture
1. Lead policy, legislation, and system change

#### People
2. Across the life course
3. Start well - best active start
4. Develop well - the best place in England to grow up
5. Live well - increase activity across the adult population
6. Age well - active ageing for an age friendly city region

#### Place
7. Active and sustainable environments and communities
8. Contribution to economic growth

#### Workforce
9. A skilled and diverse cross sector workforce fit to deliver transformational change

#### Enablers
10. Evidence, data and insight
11. Evaluation
12. Marketing and communications

### Priorities

### Outcomes
- Physical wellbeing
- Mental wellbeing
- Individual development
- Social and community development
- Economic development

---

**Greater Manchester Moving**
Local Delivery Pilot

• Acceleration of scale, pace and depth of GM Moving implementation, with three priority audiences:
  • Children and Young People age 5 -18, in out of school settings
  • People out of work and people in work but at risk of becoming workless
  • People age 40-60 with, or at risk of long term conditions, specifically cancer, CVD and respiratory disease

• Cross Cutting Themes: Mental Health and Wellbeing, Inactivity and Reducing Inequalities.
Greater Manchester Devolution:
Transport (including buses and potentially rail stations), Strategic Planning, Housing Investment Fund, Police and Crime, Work and Health, FE and Apprenticeship Grants)
Integrated GM Health and Social Care Partnership.

The GM Approach

Population level change requires ‘whole system’ approaches

- International and national guidance and laws, local laws and policies, rules, regulations, codes
- Built, natural, transport links
- Schools, health care, businesses, faith organisations, charities, clubs
- Individual relationships, families, support groups, social networks
- Individual capabilities, motivations, opportunities, knowledge, needs, behaviours
1> The case for change
Establish the case for change (high level problem, current outcomes). Take time to understand what is already working well. Learn from this.

2> Scale of potential impact
Risk stratification of whole population, identification of priority cohorts.

3> Examine the evidence, data and insight
Where are the priority cohorts? What are the individual, social, environmental and policy factors that are influencing behaviours? What works to engage them? What do we know and understand about their lives, fears, barriers to change? What don’t we know? How can we find out?

4> Engage across sector/across the system and with priority cohorts
Start from an appreciative standpoint. Then explore the issue, question or challenge and co-design system change and solutions. Consider skills and workforce development.

5> Pilot system change or investment
Decision made on system change or investment required, enabling transformation or creation of system, service or approach. Typically start on a pilot basis - mainstreaming following successful pilot or trial.

6> Implementation at scale
Agree plan for roll out, including options to test new models at a smaller scale and anticipated approach to scaling up across Greater Manchester appropriate to local need and assets.

7> Final evaluation
Evaluate from the outset, including process, outputs, outcomes and savings. Final evaluation should be used to help refine delivery models, driving continuous improvement.

8> Mainstream investment or decommissioning
Agreement on ongoing investment to support mainstreaming (for example, funding commitments/resource allocation to support system change).
First steps

- Data, Evidence and Insight
- Engagement (3 lenses)
- Evaluation
- Whole system proposals
- Implementation

GM Moving Enablers

- Transformational Leadership and Workforce Development
- Community of Learning
- Marketing and Communications
Early Observations and Learning

- Co design and co production.
- Emergent work.
- Expectations- ours, partners, communities.
- Scale and Pace.
- Transformational Leadership- what will it take?
- Communication and engagement.