## Increasing Physical Activity Programme

Trafford Leisure have recently been awarded funding to deliver a programme to tackle inactivity in children, young people and their families.

In brief the programme will provide the opportunity for children, young people and their families to engage in physical activity opportunities on a weekly basis for 12 weeks. The programme is free of charge and will provide one to one support, encouragement and motivation for the families to plan their activities, overcome barriers and change their behaviour towards physical activity. The sessions will take place both in the community and at the Leisure Centres.

# Who can be referred into the programme?

- There are 2 age brackets the programme is split into,
   Children and young people aged 5 11 years and their families
   Young people aged 11 18 years
- Inactive children or young people. Inactivity is classed as not achieving 3 x 30 mins activity per week.
- Referrals must reside in Trafford.

#### How can referrals be made?

- Anyone can refer into the programme, self referrals are welcomed.
- Referrals can be made by completing the Increasing physical Activity Referral form and returning it as directed at the bottom of the form
- The Active Living Leader / Manager for the relevant locality will make personal contact with the referral to introduce the programme and discuss the next steps.
- It is anticipated that the regular weekly sessions will commence mid / end of February 2016 once staff have been recruited.

#### What will the programme offer?

- A free 2 hour structured session held at a weekend.
- A designated mentor / point of support who the referred participants can work with on a one to one basis.



- An activity work book where participants can log their thoughts, their individual or family plans for increasing activity and their concerns.
- Access to a wide menu of activity opportunities including group walking and cycling, den building, team building exercises, urban trails, problem solving, trampolining, and traditional sports eg swimming and badminton
- Those in the 11 18 bracket will also have access to additional activities and a pre paid Active Trafford card.
- The programme will be fun and engaging.

#### What now?

If you know of any children or young people who meet the criteria and could benefit from undertaking physical activity please pass on the basic details of the programme. The programme is designed to be flexible around the needs of individuals and their families to engage as many people as possible.

Please pass on the generic Active Living contact details and the relevant locality Manager will ensure follow up.

Active.living@traffordleisure.co.uk
Tel no. 0161 826 3967



### **Increasing Physical Activity Referral Form**

Child / young person being referred								
Name								
Address								
Contact number	Landline:		Mobile:					
Email								
DOB	Name:	N						
Details of immediate family members	Relationship:  Name: Relationship:	R N	Name: Relationship: Name: Relationship:					
Reason for being referred			oual on one pr	u				
Medication and	,							
reason for taking				25				
Preferred Activities	Outdoor activ     (walks, cyclin		o Class					
(Please Tick as	o Gym			Sport sessions s+ coach led sessions)				
` many as			, , , ,	,				
appropriate)	○ Swimming			ot exhaustive many other are available as part of the me				
Ethnicity	o White British	o Black	Caribbean	○ White & black African				
	o White Irish	o Black	African					
	o Indian	o Chine	ese	o White and Asian				
		a White	& Black	o Other				
	o Pakistani	o White Carib						
	⊙ Bangladeshi							
Referral Agent details								
Name		***	•	The second secon				
Organisation Contact number	r Landline:		Mobile:					
Email	Landine.		wonie.					
Date of Referral								
W								
Please indicate any activities that the patient should <u>not</u> engage in, or contraindications towards exercise								
Please indicate the b								
contact and the easiest way to contact the referral - phone/email								

Please return: Trafford Leisure, 3<sup>rd</sup> Floor Marsland House, Marsland Road, Sale, M33 3AQ Tel: 0161 826 3967, Fax 0161 973 5014 or <a href="mailto:active.living@traffordleisure.co.uk">active.living@traffordleisure.co.uk</a>



#### **Physical Activity Referral Process**

A health referral can be made from a range of partners within Trafford. Some examples of partners who refer into our scheme are Physiotherapists, Blue Sci, Phoenix Futures and GP practices. The Health Referral scheme is set up to help people who struggle to get involved in Physical Activity to partake in some form of activity. We have set up a 5 free visit offer for these people to attend and use a range of our facilities we have on offer. As this scheme is free we have broken down the initial barriers of cost that may prevent people walking through the doors of our leisure centres. In theory the 5 visits should help the referral gain confidence and help them realise the benefits of regular exercise. Once the free visits have been completed there is then the option of the referral to continue on a Zest membership, Active Trafford or casual basis.

We offer a range of activities in both the Leisure Centre (L.C.) based and Community (C) based. The most suitable form of physical exercise will be decided from having conversations with the referral on what they want to do and what they feel most confident to do. The activities and a description of we offer are as follows:

- Health Walks (C) Walking is simple and one of the easiest ways to get more active, lose weight
  and become healthier. It's underrated as a form of exercise but walking is ideal for people of all ages
  and fitness levels who want to be more active.
- Nordic Walking (C) Nordic walking uses poles in order to add further benefits to walking. The use
  of poles engages upper body muscles as you walk. The poles help propel the walker along meaning
  they work harder but they offer support at the same time. It burns up to 46% more calories than
  normal walking.
- Cycling (C) Cycling is one of the easiest ways to fit exercise into your daily routine because it's
  also a form of transport. It saves you money, gets you fit and is good for the environment. It's a lowimpact type of exercise, so it's easier on your joints than running or other high-impact aerobic
  activities. But it still helps you get into shape
- Health Hips and Hearts (C) Healthy Hips and Hearts (HHH) are gentle chair based physical
  activity sessions. All sessions are suitable for all abilities. The sessions are for those with mobility
  difficulties. The emphasis of the sessions is on gentle fun exercise in a relaxed social setting.
- Gym (L.C.) Our gyms have a range of cardio, strength and core equipment which will help develop
  your fitness and strength. Our Instructors will tailor a personal programme for you to follow so you
  can easily monitor your progression.
- Swimming (L.C.) Swimming is a great form of all-round exercise. It's ideal if you want to be more active and stay healthy, whatever your age or ability.
- Classes (L.C.) We offer a wide range of classes from high intensity (Spinning and Plyo-metrics) to relaxation (Yoga and Tai Chi). They are in a group environment setting where encouragement is provided by other participants and the instructor.
- In to Sport (L.C.) In to Sport encourages adults who may not have played the sport for a long time to attend structured social sessions that gently re-introduce them to the sport. They cover basic skills and are aimed at reducing the barriers associated with formal sports club settings.



Date: \_\_\_\_\_

## **Physical Activity Referral Form**

1 Hydrodi Activity Referral Form								
		Perso	n being referred	<u>d</u>				
Name					*			
Address		8		39				
Contact number	Land	ine:		Mobi	le:			
Email								
DOB Reason for being		1-4-4						
referred		1						
Medication and reason for taking								
Preferred Activities (Please Tick as many as appropriate)	0	Health Walks		0 (	Gym			
	0	Nordic Walks		o Swimming				
	0	o Cycling		0 (	o Classes			
	. 0	Healthy Hips and Hearts		o I	nto Sport sessions			
Ethnicity	0	White British	o Blac	k Caribbea	n o White & black African			
	0	White Irish	o Black African		○ White and Asian			
	0	Pakistani o Whit		ese	o Other			
	0			e & Black obean				
	0	Bangladeshi	553 6830 690					
				- Amto-				
		Referr	al Agent details	<u>s</u>				
Name								
Organisation								
Contact numbe	r	Landline:		Mobi	ile:			
Email Date of Referra	1							
Date of Referra		-						
Please indicate any activities that the patient should <u>not</u> engage in, or contraindications towards exercise								
Please indicate the I contact and the contact the referra	easies	t way to	_					
Please return: Active Living Team, Marsland House, 3 <sup>rd</sup> Floor, Marsland Road, Sale, M33 3AQ								
Tel: 0161 826 3958, Fax 0161 973 5014 or activeliving@traffordleisure.co.uk								
For official use only Comments:								
Comments,								



Dear Doctor/Health/Referral Professional Re: - Physical Activity Referral scheme In order to speed up the referral process we would appreciate if you would complete the following form for the below person being referred to Trafford Community Leisure Trust. Mr / Ms \_\_\_\_\_\_\_DOB\_\_\_\_\_ Please indicate if the following question(s) applies to the person indicated above. Medical Profile Y/N Has the Doctor ever said that you have a heart condition and recommended only medically supervised Physical Activity? Do you have chest pain brought on by physical activity? ☐ Have you developed chest pain in the last month? Have you on one or more occasions lost consciousness or fallen over as a result of dizziness? Has a Doctor ever recommended medication for your blood pressure or heart condition? Are you aware, through your own experience or a Doctor's Advice, of any other physical reason that would prohibit you from exercising without medical supervision? Do you have a bone or joint problem that could be aggravated by exercise? Are you currently pregnant or is there a possibility that you might be? We do not wish this person to exercise if it may be unsafe. Therefore, we would like your opinion on the suitability of this person to begin exercising. YOU ARE NOT RESPONSIBLE IN ANY WAY FOR THE TYPE OF EXERCISE PROGRAMME THAT WE MAY EVENTUALLY PRESCRIBE. I believe that the aforementioned may exercise without any restrictions □ I believe that the aforementioned may exercise but urge caution with the following

Date .....

Signed .....

Printed .....



# **Health Referral Contact Information**

- James Jackson Active Living Manager, Stretford and Old Trafford Tel: 0161 826 3969 Mob:07919 043114
- Matthew Round Active Living Manager, Sale
   Tel: 0161 826 3968 Mob: 07912 280899
- Jenny Burton Active Living Manager, Altrincham and Timperley
   Tel: 0161 826 3967 Mob: 07415 250826
- Rachel Forde Active Living Manager, Urmston, Davyhulme and Partington
   Tel: 0161 826 3958 Mob: 07912 280896

If you are unable to send this over electronically please complete the form in block capitals. It can become difficult to read all the information once it has been faxed .