



# Get Active in The Forest



An example of Walking For Health in action

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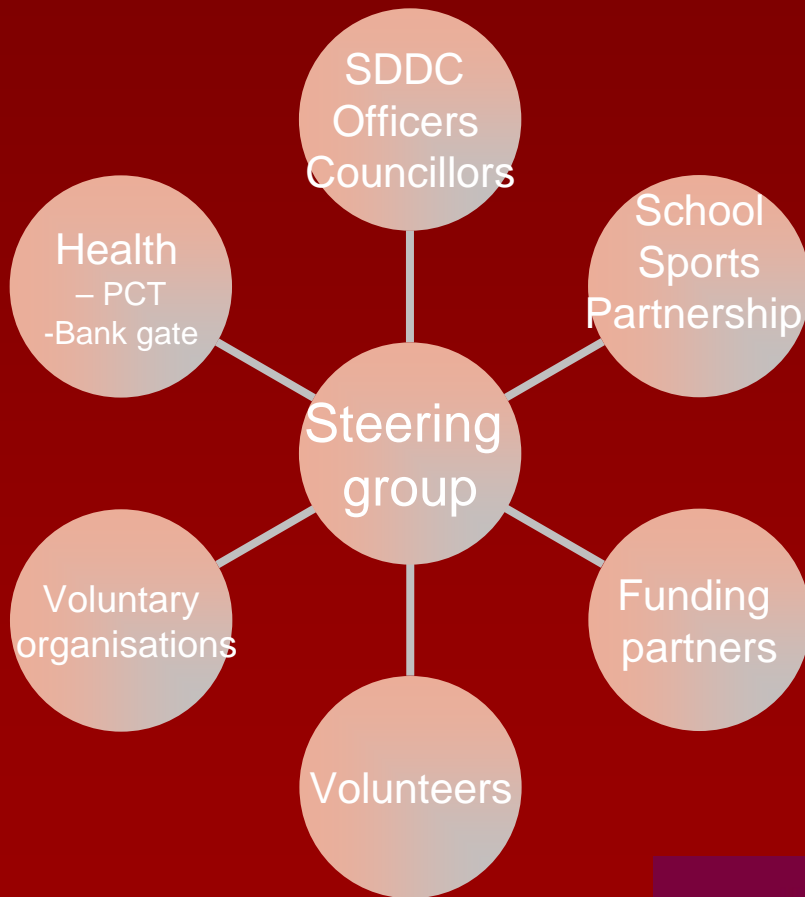
# History

- NOF funding - first 3 years
  - End of funding consulted volunteers
- Active England
  - Extended the project
  - Included other activities
  - Built on walks
- Existing funders and the route to sustainability





# Get Active set up



- Steering group makes strategic decisions and delivery
- Two part time (f/t equivalent) development staff
- Team of 50+ dedicated volunteers including some senior volunteers





# Delivery



- 68 walks per month
  - District wide remit
  - Wide range of participants
- Outputs
  - April-June 09 307 participant
  - 668 participations per month
  - Retention rates high





# Criteria we stick to

- Short walks under an hour and low impact at moderate intensity
- 2 walk leaders whenever possible
  - VWL Trained and refreshed regularly
  - First Aid trained
- Risk Assessed
- Registers and OHQ's





# Development worker role



- Support - Most important aspect!
  - Networking
  - Relationship building - getting to know the leaders
  - End of phone support
  - Constantly reiterating the key WFH message
  - Identifying skills - helping VWL's to fulfil potential
  - Social events
  - Recognising achievement and nominating for awards
  - Organising schedule
  - Back up walk leader
  - Dealing with issues
  - Accidents and reports
  - Paperwork





# Development worker role



- Development
  - New walks
  - Consultation
  - New partners/ groups
  - Volunteers
  - Exit strategies,
    - walks and other activities
- Liaison
  - With partners, Natural England, funders, PCT, GP surgeries and local community groups
- Recruitment of volunteers
  - CVS, recruitment drives (local), within walks





# Development worker role



- Visiting walks to check progress and quality control
- Maintaining the database
- Evaluating and monitoring
- Accreditation
- Promotion
  - Walks, scheme, raising profile, embedding into local strategies, GP practice managers
- Funding - working towards sustainability





# Training



- Cascade trainers
- Important co-ordinator present
- Important to stress:
  - Main message
    - Health walks are under an hour
  - Demo walk
- Refresher training
  - 'Strict' refresher message. Bi - annual or more often if needed





# Monitoring and evaluation



- Data base
- Support of volunteers is essential
- Developed own questionnaire
  - Based on WHI 'voice of the walker' but with additional input from PCT
- Quality control - Mystery shopper, Ispal, WFH
- Scheme spider web tool
  - Steering group
  - Walk leaders
  - Delivery Team





# The good and the bad!



## • What worked

- WFH concept -stick to it!
- Co-ordinator
- Relationship/support
- Steering group
- In house training
- Working with established groups
- Social networking events

## • What hasn't

- Setting walks up on the whim of a walk leader e.g. dog walk
- Forcing people into training or making them wait too long
- Some GP surgeries where management support wasn't there
- Walks on alternate weeks.





# Any questions?



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