Progress towards maximising the potential of the environment as a health promoting resource is being made in Scotland through the work of a strategic collaboration which has brought together key players in the health and environment sectors. This note provides a summary of the main work areas, challenges and keys to success of the ‘Green Exercise Partnership’ (GEP).

Established in 2007, the GEP comprises representatives of two key public sector environmental bodies – the Forestry Commission Scotland (FCS) and Scottish Natural Heritage (SNH) – and the health improvement board of the National Health Service – NHS Health Scotland. The partnership came together as a result of the growing evidence of public health benefits from engaging with the natural environment, and recognition of the need to improve links between the health and environment sectors to deliver sustainable health outcomes from our natural assets.
Introduction

The GEP work plan comprises two main strands: Greening the NHS estate and Mainstreaming green exercise. The main focus to date has been on co-ordinating the NHS Greenspace demonstration project as part of the Greening the NHS estate work, and this is very much seen as a positive step towards mainstreaming use of the outdoors in health interventions and social care by building partnerships within the NHS and raising awareness of the broader opportunities.

The GEP’s target for the NHS Greenspace demonstration project is to establish at least one project in each of the eleven mainland Area Health Boards to show the health benefits that flow from positive investment in, and management of the NHS estate – literally the greenspace around hospitals and healthcare centres that can be used by patients, staff, visitors and the local community. Working closely with NHS Health Facilities Scotland, the aim of the project is to unlock positive health outcomes that are available on the doorstep of these NHS facilities, and to influence policy and practice so that this resource is managed as part of core business for health promotion and clinical interventions, as well as supporting corporate objectives relating to climate change, biodiversity, sustainability and good corporate citizenship. The project has enabled the retrofitting of greenspace enhancements into existing facilities, and influenced the planning and design around new facilities (including advice on masterplanning for larger-scale developments) to encourage therapeutic and informal use of eg growing spaces, woodland walks, outdoor gyms and active travel opportunities.

Work on Mainstreaming green exercise has contributed to the development of a robust cross-sectoral policy framework in which health features in environment policy, environment features in health policy, and the links between environment and health are also recognised in many other public policy areas including planning, transport and education. Examples include – Good Places Better Health (2008), the Scottish Government’s strategy on health and the environment, and the Scottish Biodiversity Strategy (2013) which encourages the development of initiatives that will “improve health and well-being through physical activity connected with nature”. Members of the GEP seek to influence consultations on topics such as obesity, mental health and Public Health, and are involved in the development of the National Physical Activity Implementation Plan and Walking Strategy. Through online resources and training events, they also disseminate good practice in green exercise programme delivery, and support key initiatives such as the Central Scotland Green Network and the National Walking and Cycling Network which place significant emphasis on the delivery of health outcomes through improving the extent and quality of outdoor access infrastructure. Through its work, GEP is championing green exercise and its contribution to physical and mental health with the aim of embedding the use of a broad range of outdoor resources into the culture of the health sector and the daily habits of the public.

Challenges

A number of key challenges have been identified as the GEP has progressed its work:

- **Language and processes** – an early challenge for members of the GEP was learning to speak each others’ languages and understand each others’ processes. Acronyms, technical jargon, governance structures, decision-making and budgetary processes all made the prospect of cross-sector partnership working quite daunting. A process of targeted briefing sessions, attendance at conferences and training events, and the co-production of advice and guidance materials has helped to break down this barrier.

- **Policy implementation** – having a robust policy framework doesn’t automatically lead to implementation. The GEP
provides a stronger voice of advocacy for green exercise, and has provided a ‘seat at the table’ in a range of Good Places Better Health strategic discussions and collaborations. The NHS Greenspace project has provided a good example showing cross-sector delivery of policy into practice on the ground, although the identification and allocation of funds is still a key issue.

- **Culture** – the environment sector has a long tradition of partnership working and using the environment to achieve multiple objectives. By working more closely with the health sector, and in particular estate managers, greenspace in NHS ownership is being seen as an asset and opportunity rather than a liability and maintenance burden, able to contribute to many aspects of health improvement and sustainable estate management. Compared to the environment sector, the health sector is huge in terms of staff and budget, but this area of work has seen progress in breaking down silo-working and increasing efforts to move away from an illness and treatment model to adopt a more upstream approach with greater emphasis on prevention.

- **21st century demands** – understandably, the combination of mounting pressure to improve treatment and care for an expanding and ageing population, and the constant development of new clinical interventions and pharmaceuticals, has generated the prioritisation of ‘high-tech’ healthcare. Patients want the best treatment, and clinicians want to provide state of the art interventions for state of the art interventions. Patients want the best treatment, and clinicians want to provide state of the art interventions. The biomedical model of health delivery which is putting pressure on new assets and a shift in approach to reduce emphasis on existing resources under so much pressure, and move towards a social model of health focusing on prevention rather than cure. But it is also being used as a way to re-connect public health with the natural environment – traditionally regarded as a therapeutic and restorative setting.

**Key elements of success**

Having staff in the environment and health sectors with appropriate skills and experience is vital. Within the GEP, the FCS has a specialist advisor with experience of working in the NHS, SNH has deployed a landscape architect to work specifically on the NHS Greenspace project, and the NHS has staff with environment sector experience working within their national sustainable development team which includes advising on use of the outdoors estate.

Highlighting the **outdoors as a health-promoting asset** responds in part to the health sector’s recognition of the need for new assets and a shift in approach to reduce emphasis on the biomedical model of health delivery which is putting existing resources under so much pressure, and move towards a social model of health focusing on prevention rather than cure. But it is also being used as a way to re-connect public health with the natural environment – traditionally regarded as a therapeutic and restorative setting.

**Disseminating good practice** examples of green exercise initiatives, and using site visits to NHS Greenspace projects to facilitate peer group advocacy by early adopters has helped capacity-building of skills within staff from both the health and environment sectors.

**Influencing policies and procedures** has been used to raise awareness of both the potential of positive physical and social environments for health, but also to identify the barriers to maximising this potential due to internal procedures. Fundamentally, unless policies and procedures change so that this area of work is incorporated into core business and funded as such, it will continue to be viewed as the subject of short-term ‘projects’ using ‘special’ budgets such as grants, legacies and endowment funds. Support at senior level in both sectors is crucial and has helped drive forward change.

**Engaging with politicians** through conferences and media events has helped to raise the profile of this area of work, and has provided an opportunity to show how the key partners are responding to the Scottish Government’s objective of a more joined up ‘Team Scotland’ approach to the delivery of public services. With the heightened priority of physical activity for health, the GEP environment sector partners are now being asked to input into a range of working groups, some chaired by government Ministers.

The **third sector and voluntary organisations** are also supporting this agenda and there are some excellent examples of innovative practice. Trellis – the national therapeutic gardening charity in Scotland – is helping provide havens away from the indoor clinical environment of hospitals by establishing psychic and sensory gardens in hospital grounds, and Ramblers Scotland is promoting short local walking routes from a variety of community ‘hubs’ to encourage green exercise. A range of other organisations are involving community volunteers and delivering alternative approaches to sustainable land management of the NHS estate.

The GEP’s **seedcorn funding** for the NHS Greenspace demonstration project has helped to unlock additional funding including £1 million from the Scottish Government’s Health Finance Directorate, and £1 mill from NHS Area Health Boards, most of which has come from endowment and legacy funds held in trust for staff and patient well-being projects.
Conclusion

In Scotland there is now high-level recognition of the value of the environment for the public’s health, and a robust policy framework which is steering cross-sectoral delivery. The GEP has provided a very useful mechanism to enable the ‘green exercise’ message to be taken to government and health sector decision-makers and more funds are beginning to be identified.

Mainstreaming, or embedding green exercise into health sector policy and practice so that it becomes a routine part of prevention, treatment and care of physical and mental health conditions, requires time and sustained effort. Through its efforts to encourage greening of the NHS estate, the GEP has been able to engage directly with health boards in project delivery – and these relationships will be built on to encourage an up-scaling of the use of high quality greenspace within and beyond NHS ownership for health-promoting activity.

By raising awareness of the existing evidence base, and strengthening it through research and evaluation, the GEP is helping to achieve a shift in culture within the health sector to embrace green exercise as part of an increased emphasis on prevention rather than cure. Green exercise fits well in the current physical activity / Active Scotland agenda, and there is growing acknowledgement that investment in outdoor infrastructure is an effective low-cost example of preventative spend that can bring population-level health benefits. More cross-sector working and public-facing promotion of local green exercise opportunities are currently being planned.

Useful references:

- Green Exercise Partnership
- NHS Greenspace Demonstration Project
- Innovative NHS Greenspace in Scotland – Briefing Note
- Greenspace Design for Health and Wellbeing – Practice Guide
- Green Exercise Case Studies
- Greening Possilpark Health & Care Centre
- Ninewells Hospital Greening Project
- Forests and Dementia
- Branching Out – Conservation and greenspace on referral for adults using mental health services

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