Healthier Catering in Leisure Centres: Evaluation of a Pilot Initiative

‘You come here to get fit not eat chocolate’ – Centre user, Penyrheol Leisure Centre

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Prepared for: Department for Public Health and Health Professions, Welsh Assembly Government

The views expressed in this report are those of the authors, and the stakeholders consulted, and not necessarily those of the Welsh Assembly Government.
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Acknowledgements

Wavehill Consulting is very pleased to have been commissioned to evaluate the Healthier Catering in Leisure Centres Pilot Project, and have very much enjoyed undertaking the work. We would like to express our gratitude to the participating centres for their co-operation during the evaluation and to all the stakeholders who took the time to speak to us.
1. **Summary**

1.0 **Introduction**

The Healthier Catering in Leisure Centres Pilot Initiative was created in response to the Welsh Assembly Government’s Food and Fitness Action Plan (2006) which includes an explicit commitment to improve the range of healthy options available through vending and catering outlets in Sports and Leisure Centres.

It was managed by the Department for Public Health and Health Professions (DPHHP) of the Welsh Assembly Government who invited all local authorities in Wales to participate by way of written bids for grant-eligible costs for facilities, events or publicity materials that would help improve the nutritional value and quality of the food and drink on offer at their centres. DPHHP was not prescriptive about the activities that local authorities should propose or undertake, given that authorities were starting from varying baselines and so that pilot project could be driven by local needs. Seven local authorities took part in the pilot project:

- Blaenau Gwent;
- Caerphilly;
- Cardiff;
- Gwynedd;
- Neath Port Talbot;
- Powys;
- Swansea.

All except Caerphilly took part in the evaluation

1.1 **The Evaluation**

Wavehill Consulting was asked to undertake a 9 month independent evaluation of the Healthier Catering in Leisure Centres pilot scheme. We were asked to:

- Assess if healthier food/drink options have been introduced and/or increased in the participating leisure centres;
- Explore if there is any evidence of increased consumption of these items;
- Identify the barriers and facilitators implementing the scheme;
- Identify what has/has not worked well and provide examples of good practice;
- Provide recommendations for future policy, national/local guidance and monitoring/evaluation needed to assess progress.

1.2 **Evaluation Conclusions**

- On the whole, the pilot project has clearly acted as a catalyst for centres and authorities to begin the process of making their catering and vending on offer healthier. In spite of broad agreement that the produce on offer at centres should be healthier, until the pilot, many of the centres and authorities lacked the stimulus and guiding framework to begin. By corollary, there is, therefore, a clear risk that the progress made during the pilot project may dissipate if there is no follow-up to the programme.

- Some centres have clearly found difficulty in delivering their commitments and in sustaining the improvements that they have made even over the course of the pilot project itself. This has normally been due to staff illness, turnover or through internal delays occasioned by difficulty in commissioning services. Again, we point to a risk that centres may revert back to previous habits in terms of vending and catering practices.
• The principles of the pilot project were broadly supported amongst non-participants, along with a feeling that a strategic driver was needed to take forward the agenda.

• It is clear that both participating and non-participating authorities feel the need for a stimulus and supporting framework to help stimulate any improvements they make. We recommend that any move to build on the pilot project should be based on a common framework so that authorities have a ‘roadmap’ to follow which will provide them with accessible, achievable objectives and clear milestones. In order to evidence progress, there is also a need for a monitoring structure to ensure that the general trend is towards improvement of the situation across the board.

• Lack of awareness, in all probability occasioned by internal communication difficulties, was the principal reason that most non-participating authorities did not take part in the pilot project. Indeed, securing the interviews in section 6 provided a major challenge for Wavehill’s interviewers given that senior officers have so many demands placed upon their time. Given that most of those who did not know about the pilot would have liked to have taken part, we conclude that the project could have had an even wider impact had these authorities been engaged.

• Any future activities planned to engage local authorities in a subsequent phase of this project will need to take account of these communication difficulties. Initial contact will need to be made through a variety of channels in the first instance, followed by pro-active, and thereafter tenacious, telephone contact. It would also be worth considering whether, in reality, subsequent projects need to be pitched at a high Chief Officer level or whether managers at lower tiers could prove to be a more appropriate entry point.

• Lack of staff knowledge and ‘buy-in’ has clearly been a difficult issue for many centres. Proposed changes to existing working practices and the lack of experience amongst front-line staff in putting together healthy options were identified as problems for some of the pilot studies. Yet, where it has been employed, a capacity-building approach, based on training of frontline staff and involvement in changes resulting from the healthy catering enterprise, it is one that has been proven effective in ensuring this buy-in. There is every reason to believe that this approach can be replicated elsewhere, given the correct training.

• Clearly the greatest barrier faced by those who took part in the pilot project is an anticipated loss of revenue, were they to pursue a ‘totally healthy’ model of vending and catering. There also are major concerns amongst the non-participating authorities on the possibility of losing revenue if local authorities are required to move away from stocking popular, but unhealthy, products.

• In spite of these revenue concerns, there was wide ranging support, in principle, amongst both participating and non-participating authorities for moves towards healthier vending and catering. Most project representatives were open to the idea of helping to offset any loss made by identifying new revenue streams and business models through a programme of supported planning.

• Monitoring and gauging demand for healthy options and providing appropriate responses was a proven success at the project which undertook this level of analysis. It also resulted in an increase in revenue, where customers were offered a choice between healthy and less healthy food and drink.

• An integrated approach to solving the problem of unhealthy consumption was called for by centre and project managers with interviewees pointing out that a blanket ban without a supporting campaign would move the purchasers to other outlets, rather than solve the problem from its roots.
• The progress made during the pilot programme has been made on the basis of a choice-based model of provision, which offers healthy options alongside less healthy food and drink, and has allowed customers to choose healthy options without threatening the revenue generated by the existing products on offer.

• There is strong evidence to suggest that most users support in principle interventions that would lead to improvements in the food and drink on offer at centres.

• Awareness of the need to eat and drink healthily is, on the whole, widespread and the vast majority of those interviewed had a basic understanding of which of the foods on offer at the centres were high or low in sugar fat or cholesterol. However, this awareness was not by itself, enough to stop people from habitually eating unhealthy food. The main barriers to eating healthily were said to be convenience, accessibility of unhealthy food, inaccessibility of healthy food, temptation (which is itself a product of availability) and the need for a ‘treat’.

• Amongst practitioners, there was wide-ranging support for a nationally branded and standardised system for classifying foods likely to be sold at centres as healthy and unhealthy in order to provide guidance to both staff and customers.

• Notwithstanding broad expressions of support for improvement in the food and drink on offer, observed during the interviews with service users during this evaluation of the pilot programme, there may be a need to determine the precise margins of opinion, and to quantify the preferred option for service users across the whole of Wales. The evidence gathered during this pilot study suggests that most people are in favour of having healthy options available within a continuum of choice, underpinned by messages to help inform people to make appropriate and balanced choices.

• As part of any ongoing project or support arrangements made, the provision of robust, national guidance on the nutritional balance of popular products would be useful. This could be produced for the use of vending and catering managers in the form of detailed nutritional guidance, as well as in a high-impact visible accessible style for public notice.

• Amongst young people of school age, awareness is very high, and many made direct reference to the fact that they had studied nutrition at school through PSE lessons, or other school-based activities. Any initiative to encourage healthy eating needs to link in to the education of young people’s eating habits at the school level, particularly in light of many leisure and sports centres being located on, or adjacent to, school sites.
2. Introduction and Method

2.0 Introduction

The Healthier Catering in Leisure Centres Pilot Initiative was created in response to the Welsh Assembly Government’s Food and Fitness Action Plan (2006) which includes an explicit commitment to improve the range of healthy options available through vending and catering outlets in Sports and Leisure Centres (See 7.2.1-7.2.5 for a detailed breakdown of the policy context within which the pilot project is operating).

It was managed by the Department for Public Health and Health Professions (DPHHP) of the Welsh Assembly Government who invited all local authorities in Wales to participate by way of written bids for grant-eligible costs for facilities, events or publicity materials that would help improve the nutritional value and quality of the food and drink on offer at their centres. DPHHP was not prescriptive about the activities that local authorities should propose or undertake, given that authorities were starting from varying baselines and so that pilot project could be driven by local needs. However, there were several stipulations that governed what was and was not eligible:

Funding was not provided for:

- Staff costs;
- To underwrite loss of revenue;
- Initiatives already underway or funded by another source.

Applications were assessed by DPHHP, and the funding allocated between April and November 2007, although some projects had not at the close of the evaluation drawn down and spent all of their allotted funds.

A wide variety of activities were funded which included activities such as:

- One-off ‘taster’ community events;
- Purchase of new equipment to improve vended or catered food and drink;
- Staff training in nutrition;
- Purchasing of marketing and publicity material to advertise healthy options and raise awareness.

2.1 The Evaluation Brief

Wavehill Consulting was asked to undertake a 9 month independent evaluation of the Healthier Catering in Leisure Centres pilot scheme, beginning in May 2007 with data collection for 6 months until November 2007, and a final report to be submitted in January 2008, the specific evaluation objectives were:

- To assess if healthier food/drink options have been introduced and/or increased in the participating leisure centres;
- To explore if there is any evidence of increased consumption of these items;
- To identify the barriers and facilitators implementing the scheme;
- To identify what has/has not worked well and provide examples of good practice;
- To provide recommendations for future policy, national/local guidance and monitoring/evaluation needed to assess progress.
3. **Case Studies by Local Authority**

3.0 **Introduction**

This section includes a detailed analysis of the pilot project, as it was delivered at each of the participating centres. Each of the case studies is based on a combined analysis of the data gathered at every stage of the evaluation, including:

- Initial consultant visits to centres and in-depth interviews with staff;
- Two mystery shopper visits undertaken at each centre;
- Interviews undertaken with users of each centre (one set of interviews at the beginning of the project and one at the end);
- Analysis of the monitoring returns submitted by centres;
- Final interviews and visits undertaken with staff;
- Any other research or consultation undertaken during the course of the evaluation.

3.1 **Blaenau Gwent – Tredegar and Nantyglo Leisure Centres**

**Background**

Blaenau Gwent local authority manages four sports centres at Abertillery, Ebbw Vale, Nantyglo and Tredegar with smaller satellite facilities at Glynoedd and Brynmawr. Two of the centres participated in the Healthier Catering in Leisure Centres Pilot Initiative, namely Nantyglo and Tredegar. Both of these centres are located next to secondary schools, and their vending machines are used by young people during breaks and lunchtimes. In addition, the Ebbw Vale centre has been involved in a recent drive by the local authority to introduce healthy options to its centres as a separate initiative to the Healthier Catering in Leisure Centres Pilot Initiative.

Of the two participating sites, Tredegar is the larger centre. Among its food and drink outlets it has a variety of vending machines selling drinks, snacks and confectionery, a licensed bar, which serves cooked food and several function suites. Nantyglo is a smaller site which has vending machines in its foyer, and a kitchen which is currently being renovated.

The starting point for both centres was a baseline where there was very little healthy food and drink on offer to users. Both centres were tied into vending contracts with large suppliers of confectionery and carbonated soft drinks who also supplied the vending machines at both centres. The major barrier the centres faced were the restrictions on what could be placed in the sponsored vending machines. The companies involved stipulated that only their produce could be housed in their machines and staff felt that the healthier options were limited or in all reality not healthy at all.

3.1.1 **Project Proposal and Delivery**

In the summer of 2007 both Nantyglo and Tredegar purchased and installed unsponsored carousel vending machines, which were purchased with the Welsh Assembly Government grant from the pilot project. The vending machines were filled with a range of healthier options such as freshly prepared baguettes, sandwiches and wraps.

The initial scope of the pilot project in both centres was therefore limited, but it was focussed and achievable. The staff interviewed at the centres viewed their participation in the pilot as part of a longer-term aspiration to move towards a greater proportion of its output being ‘healthy’. 
3.1.2 Mystery Shopper Findings

Wavehill conducted two mystery shopper visits to both sites, one in July 2007 and the second in November 2007.

Nantyglo

In July our mystery shopper was able to purchase a reasonably healthy drink and snack at the machine in Nantyglo: snack options included cereal bars (Special-K, Nutrigrain) and GO bars, and drinks options included water, yoghurt drinks and 1005 juice-based drinks. However, no freshly-prepared snacks were available. Following the exercise, our shopper spoke to staff at the centre who stated that freshly-prepared produce was normally available and frequently re-stocked, (such as wraps, baguettes and pots of salad).

The second visit in November revealed the same findings, namely the availability of healthier snack and drink options but no freshly-prepared produce, although the manager did speak to our shopper following the exercise and said that up until a fortnight prior to our visit, sandwiches, baguettes and wraps had been available from the carousel machine which were freshly prepared each morning on the premises. Unfortunately, the kitchen had been closed for renovation and the centre was awaiting the completion of works before they are able to resume this option. The service user interviews confirmed this, with many calling for their continued supply (See 3.1.6)

Tredegar

The results during the first phase mystery shopper exercise in Tredegar were similar to the first phase at Nantyglo. Our shopper was able to purchase a range of snacks which were cereal-based or had a lower sugar content, and drinks options included still and sparkling water, yoghurt drinks and juice-based drinks.

During the second visit our shopper observed that there were two drinks machines, one with sports energy drinks in and one with cans and bottles of diet fizzy drinks. They now only sell diet fizzy drinks in sponsored machines as a matter of policy although we note that there are public health concerns that many diet drinks are far from ideal, containing artificial ingredients and sweeteners. There were two food vending machines, one with crisps and usual chocolate options but had a row of energy bars and Rice Krispie squares at eye level on one row.

The Carousel Healthy option machine had juice, energy bars and some sandwiches and wraps meal options where a packet of crisps and drink are put together. These had all sold out. The sponsored machine had educational information on the machine about calcium, water and the need to refuel with healthy food and drink.

The bar / social club area that looks over the pool, had a varied menu of meal types, e.g. lasagne, pies and scampi with chips and salads. There were no snacks available. This bar is not open until 6 pm. There is a children’s menu which had meals aimed at children, but also included a healthy option such as a baguette, salad and yoghurt. These options are mainly available for children’s clubs during the holidays. The centre has introduced healthy options to the bar menu, such as jacket potatoes, baguettes and rolls.

The duty manager explained to our shopper that all their vended healthy meal options are bought at lunchtime by the pupils from the neighbouring school. They were looking into restocking for the evening when the children’s swimming clubs come in – initially they were looking to re-stock, monitor demand and patronage and then decide on longer-term policy. Indeed, in a subsequent visit by another Wavehill consultant, which occurred on a school day in the morning prior to break and lunch times, the machine was full of freshly-prepared healthy meal options.
3.1.3 Monitoring Returns

The monitoring returns for Tredegar show that for all of the products supplied that initial sales in August and September were high for bottled water, cereal bars, So Wild drinks and salads. However, sales fell off in October for all these products while the centre experimented with its output. For example, the centre initially tested fruit juices and cereal bars, before beginning to sell more sandwiches and packaged meals in September, hoping to cater for the pupils returning for the new term at the neighbouring school. During the same period, sales of sandwiches and rolls peaked in September then fell markedly in October, suggesting that fewer were supplied during that month – the service user interviews confirm this (see 3.1.6).

Similarly, the returns from Nantyglo show little pattern over the period whilst output was being tested. However, it can be said that the rolls and sandwiches proved popular with some 163,347 and 427 sold in August, September and October respectively. However, these did not continue due to the refurbishment of the kitchen. As may be expected given that the centre has a fitness suite and gym, bottled water also sold well.

It is difficult to draw detailed conclusions from the data, given that supply of items was not always consistent owing to the fact that the centre was testing the popularity of items through experimenting with different quantities. However, the level of sales when healthy options are available indicate that the centre seems to have identified a new market that it was not previously catering for. Sales of bottled water reached 288 in October, some 864 units of fruit juice were sold in August, 80 sandwiches in September and some 768 cereal bars were sold in August (notwithstanding the continuing debate over the sugar content of cereal bars and their nutritional value).

Over the three-month period for which returns were submitted, some £2,405 of the vended produce sold was ‘healthy’ according to the definitions set out in the monitoring guidance (doubts over cereal bars notwithstanding), this represents 22% of a total vending revenue of £10,981.

3.1.4 Examples of Good Practice and Positive Outcomes

The centres, both neighbouring school sites, had monitored demand from September onwards and experimented to determine which of its healthy produce was providing most popular amongst pupils. The manager explained that they had consequently attempted to offer healthy meals as an affordable package for the pupils, comprising a sandwich or baguette with a filling such as tuna, chicken or ham, a juice drink and a small snack (typically a cereal bar or low sugar bar), all for £1. This offer was proving popular, especially amongst school children.

Another positive outcome from the Blaenau Gwent pilot is the fact that the centres’ vending and catering revenue has increased over the course of the pilot project by £1,500. This was attributed to the demand for healthy options, but also, crucially the continued presence of the traditional vending food and drink. The centre’s manager commented: ‘It’s opened our eyes to the fact that the demand [for healthy produce] exists, and I think that’s why revenue is up. But there are still the people who want to buy the fizzy drinks and chocolate. It’s just that now people have more choice.’

The Tredegar centre is also looking at providing post-exercise healthy meals and snacks for some of its sports and swimming clubs.
3.1.5 Barriers to Progress

In spite of the good progress made at the centres participating in the pilot project in Blaenau Gwent, some barriers do remain:

- The local authority is currently tied into a three-year vending contract. This will inevitably limit the progress that can be made in phasing out unhealthy options completely, but it has not prevented the expansion of healthy options and in the future the centres will have the option to increase their capacity to provide healthy options;
- The refurbishment of the kitchen at Nantyglo has limited the provision of freshly-prepared options at the centre.

3.1.6 Service users

Most of the service users interviewed at both centres had, by and large, noticed the introduction of the new machines, and some had purchased from them. Tredegar adult users commented on the changes:

‘Yes I think it’s good to be able to choose between good and bad.’

And in Nantyglo, one user commented:

‘It’s a good mixture maybe they should get rid of some of the chocolate.’

While other adult users took a harder line on the food and drink they felt should be on offer:

‘It’s extremely important [to change what’s on offer]. I come here to keep fit and healthy and all you have is rubbish to eat.’

‘They should take machines out all together only have healthy options then.’

Given that the centres are both on school sites, the majority of users we spoke to were pupils, most of whom were keenly aware of the need for balanced diet:

‘We do it at school you can do both healthy and unhealthy here, it’s alright as long as you do both.’ But the same pupil pleaded: ‘Yes [I support the changes] but don’t take away the chocolate and cans machine!’

Other pupils we interviewed were of the same opinion:

‘The chocolate and cans [are unhealthy] but I think people should choose for themselves.’

The hiatus in the provision of sandwiches in the Nantyglo centre due to kitchen refurbishment was commented on by pupils:

‘Bring back the sandwiches!’

‘They don’t do the sandwiches anymore.’

[The centre] doesn’t give people the opportunity to eat and drink healthily because the sandwiches have stopped
3.1.7 Conclusions and Consultant’s Comments

The pilot project in Blaenau Gwent can be considered successful. The centres’ manager acknowledged at the outset of the pilot that the participating sites were starting from a low base, and that there was much improvement to be made. As a result, the project’s aims were simple, limited, achievable and focussed.

The pilot project has acted as stimulus for action beyond its initial scope, and has provided the centres’ management with a catalyst for monitoring its healthy output, gauging demand and making significant improvements to the vending and catering options on offer. The pilot project has ensured that users of the centre now have a greater range of choice, and access to healthy options. The major success of the project in Blaneau Gwent has been the effect on revenue; the centres have recorded an increase in catering takings over the course of the pilot. The major challenge facing the centres in the future will be in reducing or phasing out, unhealthy options over time, whilst still sustaining customer support and revenue.
3.2 Cardiff

Background

Cardiff City Council manages a total of seven sports and leisure centres. The centres that were due to participate in the Cardiff pilot were Llanishen, Pentwyn, Eastern, Fairwater and all its ‘wet-only’ sites. However, the majority of the activity was based around, Llanishen and Pentwyn. Both centres are similar in design: large integrated sites comprising wet and dry facilities, poolside café outlets, a first floor bar, and vending machines in their foyers. Of the two centres, Llanishen enjoys more passing catering trade due to office blocks and a retail park adjacent to its site.

The facilities are both used as ‘leisure’ centres rather than just as sports centres, the bars and cafés are used as a meeting point for meals and social events especially amongst older users. The catering manager who oversees both sites explained that the centres were equipped to respond to the ‘leisure’ boom of the 1980s and as such contained a catering infrastructure, such as deep fat fryers, limited refrigeration and no ovens, that was not particularly helpful as centres move increasingly towards promoting health, well-being and healthy eating (this point was also made by some non-participating authorities, see 6.4). For example, the bars are fully licensed and the kitchen facilities at both centres are dominated by deep-fat fryers. Indeed, as part of Council-wide Leisure Review, in June 2006, a project brief was put together to improve the bar and catering facilities in Pentwyn. The brief noted the downturn in alcohol sales and the need to promote healthier lifestyles in its outlets. The proposals included removals of fixed seating so as to enable the site to be used for children’s parties and as a meeting room. The proposal also included a commitment to ‘healthier catering’, although no details were included as to what this would entail. The proposal also listed one of its longer term aims as the development of a Healthy Eating Policy for Leisure Centres.

Cardiff City Council has been one of the leading partners in the development of a city-wide Food Strategy, which identified a number of key action areas:

- Public Sector Procurement;
- Large Public Events;
- Education and Training;
- Targeted Age-Groups;
- Rewarding Excellence;
- Ensuring the presence of the food agenda in other Cardiff-wide Strategies;
- The Cardiff Food Industry.

Under the Public Procurement priority some medium and long-term objectives are noted which impact on healthier eating, such as:

- Cardiff City Council purchasing policy to reflect the principles of the Corporate Health Standard (Welsh Assembly Government 2005);
- Monitoring of the nutrient value of foods provided through public sector venues;
- Increase the proportion of food bought from fresh sources in large public organisations.

The project had made contact with the City’s community dietician through the Food and Health Steering Group.

The existing catering and vending on offer at both centres was similar, given that they were managed by the same catering manager. The cafés were offering fried food such as burgers and chips as well as pasties and pies, and the vending output had been dominated by fizzy drinks and chocolate, although recent efforts had been made to improve the food and drink on offer here. The catering manager felt that the physical constraints in the kitchens were holding back both centres from offering fresh and healthy food: ‘We need new equipment to provide fresh food, salads, fruits.’
A Catering Forum has also been established within the City Council, which lists Health and Well-Being as one its three main aims. It has produced an Action Plan for the improvement of the catering service, although much of this action plan is concerned specifically with improving service delivery and increasing revenue. It is, therefore, within a wider context of city-wide action and the identified need to modernise facilities that the pilot took place.

3.2.1 Project Proposal and Delivery

The measures introduced across all participating sites (Llanishen, Pentwyn, Eastern and Fairwater) included:

- The proportion of healthy vending was to be increased to around 30-35%;
- Organic lines were to be trialled;
- Free water fountains were to be installed in drinking areas;
- A healthy food service was also to be extended to wet-only centres.

The other proposals from Cardiff City Council were centred on the improvement of catering, cafeteria and bar facilities at Pentwyn and Llanishen:

Cafeteria Services

- Installation of chiller display cabinets;
- Increased range of healthy products, such as the installation of baked potato machines;
- Increasing the availability of non-carbonated drinks;
- Use of more breaded rather than battered products;
- Replacing chicken nuggets with non-reconstituted meat products, such as breaded chicken breast options;
- Improving the healthy choices for children’s parties, such as offering fruit and sandwiches;
- Trial of organic produce;
- Promotion of healthy eating.

Bar Service

- Installation of Chiller cabinets;
- Increased range of healthy products, such as the installation of baked potato machines.

The range of proposals was ambitious and challenging. However, at a fairly early point in the project it became apparent that Llanishen and Pentwyn were the centres from which the project would be driven and at which most progress would be made. At the time of both the first and second mystery shopper visits none of the funding had been allocated or spent at Eastern or Fairwater centres, or any of the wet-only centres. Therefore, our mystery shopper did not visit the centres. This situation persisted until the time of the final consultant visit and interview in late November, at which point the funding had been newly-allocated to the other centres and the activities at those centres planned for the New Year.

Some progress had been made at Llanishen and Pentwyn, however, both centres had removed the post-mix (i.e. the drinks machine which adds a syrup base to carbonated water to produce a fizzy carbonated drink) drinks machines from the cafés and replaced it with a range of water, juice-based options and smoothies.
3.2.2  Mystery Shopper Exercise - Pentwyn

Visit 1

Vending Machines
During the first visit, the centre stocked various drinks vending machines. It was possible to purchase a healthy option including still bottled water and low sugar Ribena as well as less healthy carbonated drinks. Their food vending machines also contained a small number of healthy options including cereal bars, flapjacks, packs of fruit as well as the usual crisps and chocolate selection.

Catering Outlets
Café: Our shopper felt that this area was mainly aimed at children and the ‘fast food’ market. The main selections available were all served with chips including options such as, burgers, bacon buns, hot dogs. There was a jacket potato machine at the café, but it was empty and didn’t appear to be working. There was also a Slush Puppy machine and teas and coffees were available. There was no visible promotion of healthy eating.

Bistro Bar: As this area incorporated a licensed bar, it was clearly aimed at their adult customers. The selection of food available was much more varied and had a selection of healthy options including jacket potatoes with various fillings, a selection of sandwiches made with brown bread and served with a small salad, a salad bar and a selection of light snacks which included omelettes. They also offered paninis, pies and side dishes which included chips and wedges. A breakfast menu was available, which offered scrambled egg on toast, beans on toast, a light breakfast as well as a full English breakfast. As it was a licensed bar a wide variety of soft and alcoholic drinks was also available.

Shopper Comment: Following the exercise, the shopper spoke to the Centre Staff, they run a children’s club, ‘The Walrus Club’ which has its own dedicated menu which the children attending the club can select from, this includes a selection of healthy options including pitta pockets, wholemeal baps, jacket potatoes and a selection of fresh fruit, yoghurts and fromage frais. (See menu in Annex: Section 3).

Pentwyn – Visit 2

Vending Machines
There were various drinks machines in the canteen which was situated poolside with fizzy drinks in both, there was also a hot drinks machine. In the main foyer they had two drinks machines with a good selection of sports drinks and juices such as Ribena and water based fruit drinks. Their food vending machines contained both healthy snacks such as Geo Bars, healthy crisp options and Go Ahead biscuits but also contained crisps and chocolates and sweets. Some of the crisps and snacks were baked rather than fried. Our shopper, who is a health and well-being professional, estimated that just under a third of the vended food and drink was reasonably nutritious food and drink.

Catering outlets
Café: This was situated poolside and open 5pm onwards, aimed at those taking part in children’s swimming lessons and the fast food market. There were sausages, burgers and fish with chips, but also jackets with beans and cheese and veggie burgers on offer. There was the choice of juices, Fruit Shoots and Slush Puppies. There was no sign of any promotional material.
Bistro Bar: This is a bar which is open all day and evening which has themed evenings and is open for private functions. The choices were varied with freshly prepared sandwiches (both brown and white bread), salads and jackets as well as pies and scampi options with chips. The breakfast menu was varied including both lighter choices such as scrambled egg on toast and a full English fried breakfast. There was a children’s menu which offered the usual nuggets and chips type option but also carrot sticks, fruit and yoghurt and sandwiches. The children’s club meals offered the same kind of options and the people our shopper spoke to said that the healthier snack options like fruit salads and yoghurts were only available when they bought them in for children’s clubs in the holidays. The menus were bright and inviting but there was no promotional material on any notice boards.

As it was a licensed bar a wide variety of soft and alcoholic drinks was also available.

Shopper Comment: There were no water dispensing machines visible in the gym or any communal area.

Mystery shopper Conclusions - Pentwyn

The choice of vending food and drink has improved slightly over the course of the pilot, with more healthy options being introduced and fewer chocolate snacks on offer. The removal of the post-mix in the café is a positive move, as is the installation of the chiller display cabinet in the café. The improvement of the menu in the bistro bar is a welcome development, but this needs to be sustained and built upon. However, chicken nuggets are still clearly available in spite of the commitment to phase them out in favour of non-reconstituted meat-based alternatives.

No water fountains had been installed in the gym area, as far as our shopper could discern, and no promotional material had been installed.

3.2.3 Mystery Shopper Exercise - Llanishen

Visit 1

Vending Machines
Their machines did hold a range of healthy drinks options; including still bottled water and low sugar carbonated drinks as well as post-workout ‘power’ drinks like Powerade.

Their food vending machines also had a selection of ‘fairly’ healthy options including Snack-a-Jacks, cereal bars and Special K bars as well as the standard choices of chocolate and crisps.

Catering outlets
Café: A choice of healthy options was available, including jacket potatoes with various fillings and a selection of yoghurts. There was also the usual range of burgers and chips, but also a choice of veggie burgers and sausages.

Bistro Bar: As Llanishen and Pentwyn are run by the same Catering Manager; the food selection in this area is the same as at Pentwyn. Our shopper ordered an egg mayonnaise sandwich which was made with brown bread and served with coleslaw and a small salad, very fresh and very nice.
Visit 2

Vending Machines
There were four vending machines in the foyer outside the downstairs canteen. They included water, fruit and energy drinks, carbonated drinks and Ribena. The centre’s food vending machines included energy bars but the majority of the options was chocolate and crisps there were no healthy crisp selection like Snack-a-Jacks.

Catering outlets
Café: The food and drink included jackets and yoghurts, fruit shoot drinks and water but it was mainly aimed at children with chips with burger or sausage etc on offer. There were a few people in the café eating crisps and hot drinks.

Bistro Bar: Again as Llanishen and Pentwyn are run by the same Catering Manager; the food selection in this area is the same as in Pentwyn, although the Llanishen bar seemed a lot busier and was selling more of the healthier options from the menu, rolls with salad, salads, jacket potatoes. Our shopper had a Tuna and Mayonnaise Jacket with a generous side salad, which our shopper, who is a health and fitness professional, purchased and described as ‘very nice’. A lot of customers clearly come to the bar specifically for lunch and without using the centre for other purposes.

There was no promotion of healthy eating but a lot of people eating healthy food and drink nonetheless. There were no gym water fountains visible.
Mystery Shopper Conclusions - Llanishen

As with Pentwyn, there have been some changes in both vended output and catering food and drink, including a reduction in the variety of chocolate and salty snacks. However, our shopper could see no vended healthier options at Llanishen, such as baked snacks and crisps. Again, similar concerns exist about the lack of water fountains in gym areas, and the lack of promotional material visible at the centre.

3.2.4 Monitoring Returns

The vended returns from Pentwyn, show that sales of baked crisps have steadily increased over the period they have been on offer, as has bottled water.

Pentwyn - Vending Machine

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Still or Carbonated Bottled Water</td>
<td>15</td>
<td>75</td>
<td>155</td>
<td>160</td>
<td>93</td>
</tr>
<tr>
<td>Baked Crisps</td>
<td>50</td>
<td>80</td>
<td>150</td>
<td>115</td>
<td>95</td>
</tr>
<tr>
<td>Rice Cakes</td>
<td>50</td>
<td>40</td>
<td>70</td>
<td>35</td>
<td>19</td>
</tr>
<tr>
<td>Cereal Bars</td>
<td>20</td>
<td>35</td>
<td>52</td>
<td>30</td>
<td>12</td>
</tr>
</tbody>
</table>

The catering returns also show that fruit juice has proved popular and jacket potatoes have been selling steadily. The take-up of fresh fruit over the period is disappointing.

Pentwyn – Catering Facilities

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresh Fruits</td>
<td>5</td>
<td>9</td>
<td>15</td>
<td>12</td>
<td>4</td>
</tr>
<tr>
<td>Still or Carbonated Bottled Water</td>
<td>79</td>
<td>63</td>
<td>87</td>
<td>60</td>
<td>31</td>
</tr>
<tr>
<td>Milk (skimmed or semi-skimmed)</td>
<td>68</td>
<td>40</td>
<td>46</td>
<td>31</td>
<td>13</td>
</tr>
<tr>
<td>Pure Fruit Juices</td>
<td>135</td>
<td>119</td>
<td>231</td>
<td>236</td>
<td>203</td>
</tr>
<tr>
<td>Salads (including pasta salads)</td>
<td>15</td>
<td>18</td>
<td>10</td>
<td>13</td>
<td>10</td>
</tr>
<tr>
<td>Yoghurts and Fromage Fraises</td>
<td>100</td>
<td>0</td>
<td>30</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Jacket Potatoes</td>
<td>115</td>
<td>127</td>
<td>138</td>
<td>109</td>
<td>83</td>
</tr>
<tr>
<td>Sandwiches and Rolls</td>
<td>110</td>
<td>78</td>
<td>126</td>
<td>117</td>
<td>82</td>
</tr>
<tr>
<td>Tortilla Wraps</td>
<td>13</td>
<td>14</td>
<td>6</td>
<td>8</td>
<td>8</td>
</tr>
</tbody>
</table>

At Llanishen the picture is similar with baked crisps proving increasingly popular over the period, as have rice cakes. It is perhaps to be expected that Bottled water sells well when there is a gym or fitness suite on site.

Llanishen - Vending Machine

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Still or Carbonated Bottled Water</td>
<td>400</td>
<td>223</td>
<td>219</td>
<td>167</td>
<td>Nil return</td>
</tr>
<tr>
<td>Baked Crisps</td>
<td>0</td>
<td>65</td>
<td>162</td>
<td>153</td>
<td>Nil return</td>
</tr>
<tr>
<td>Rice Cakes</td>
<td>0</td>
<td>200</td>
<td>235</td>
<td>225</td>
<td>Nil return</td>
</tr>
<tr>
<td>Cereal Bars</td>
<td>40</td>
<td>95</td>
<td>199</td>
<td>89</td>
<td>Nil return</td>
</tr>
<tr>
<td>Baked Snacks</td>
<td>480</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Nil return</td>
</tr>
</tbody>
</table>

The fresh fruits has proved more popular at Llanishen, and sales of fresh milk are also consistently high, as are fruit juices.
Llanishen – Catering Facilities

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresh Fruits</td>
<td>60</td>
<td>75</td>
<td>70</td>
<td>35</td>
<td>Nil return</td>
</tr>
<tr>
<td>Still or Carbonated Bottled Water</td>
<td>270</td>
<td>284</td>
<td>416</td>
<td>301</td>
<td>Nil return</td>
</tr>
<tr>
<td>Milk (skimmed or semi-skimmed)</td>
<td>258</td>
<td>291</td>
<td>410</td>
<td>355</td>
<td>Nil return</td>
</tr>
<tr>
<td>Pure Fruit Juices</td>
<td>298</td>
<td>372</td>
<td>342</td>
<td>337</td>
<td>Nil return</td>
</tr>
<tr>
<td>Salads (including pasta salads)</td>
<td>86</td>
<td>64</td>
<td>49</td>
<td>57</td>
<td>Nil return</td>
</tr>
<tr>
<td>Yoghurts and Fromage Fraises</td>
<td>16</td>
<td>30</td>
<td>57</td>
<td>25</td>
<td>Nil return</td>
</tr>
<tr>
<td>Jacket Potatoes</td>
<td>87</td>
<td>98</td>
<td>136</td>
<td>141</td>
<td>Nil return</td>
</tr>
<tr>
<td>Sandwiches and Rolls</td>
<td>208</td>
<td>287</td>
<td>358</td>
<td>282</td>
<td>Nil return</td>
</tr>
<tr>
<td>Tortilla Wraps</td>
<td>0</td>
<td>11</td>
<td>13</td>
<td>15</td>
<td>Nil return</td>
</tr>
<tr>
<td>Fruit Smoothies</td>
<td>62</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Nil return</td>
</tr>
<tr>
<td>Bread Sticks and Vegetable Sticks</td>
<td>21</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Nil return</td>
</tr>
</tbody>
</table>

3.2.5 Examples of Good Practice and Positive Outcomes

The new bistro bar menu, which is the same at both centres, is worth highlighting as an example of good progress, and some of the options appear to be both popular and of a good quality on the basis of our mystery shopper reports. The catering manager explained that food at the bar bistro sites is now cooked to order with fresh ingredients.

Improving the quality of the food and drink on offer is of course closely related to improving the nutritional value of a meal, and as such this is a positive development. The sandwiches and wraps served at the bar sites were also said to be selling well, although the jacket potato sales were described as ‘disappointing’.

3.2.6 Barriers to Progress

Two principal barriers to progress were cited:

- The first was the physical infrastructure of the catering facilities at both sites. Whilst the chiller display cabinets and jacket potato machines have helped to expand the range of options, the kitchens are still built around deep fat frying machines. The point was made that to replace these or even to upgrade the kitchens would need large capital investment;
- The second barrier cited was the long-term sickness absence of a number of key catering staff, including full-time a Catering Assistant, and a Catering Support assistants who, it had been envisaged, would drive much of the day-to-day work of the project, and increase customer awareness.

3.2.7 Service users

The views of service users interviewed at both centres were very similar, which is unsurprising given the fact that the offer and the improvements were the same at both centres.
| Firstly, and encouragingly, there was a **good level of awareness** of the changes that had been made, especially to the bar bistro menu, but also to the vending offer. | Yes there is a lot of choice on the menu, *in the evenings like jackets and paninis* – Pentwyn user

Yes there’s loads of choice now – Pentwyn user

*Loads on offer Jackets and salads and bars. Especially in holidays when they have a kids club, they offer snacks then* - Pentwyn user

*I’ve definitely noticed more cereal bars and energy bars in machines and the flavoured waters* - Pentwyn user

Yes there is more snacky stuff for kids but they tend to want the chocolate in the machines! - Pentwyn user

Yes they have lots of choices of salads and jacket potatoes as well as children’s food – Llanishen user

Yes there are more fruit drinks available for kids and the place is a lot busier than it was (the bistro bar) – Llanishen user

Yes there are lot of salads - Llanishen user

*Introduced new things like paninis, toasties with salad, and quorn curry* - Llanishen user

*Not many sandwiches hard to see what’s available. The menu has been better* - Llanishen user

| Secondly, it is worth noting that there is **some strong support for the changes** and suggestions on what they would like to see. But it is also worth pointing out, as elsewhere, that many service users do not want to see an end to choice, but rather support healthy options, based on a wide choice. | Yes [I support the changes] as long as they let people make their own choice – Pentwyn user

*I do support them but I still want my bacon roll!* - Pentwyn user

Yes [I support the changes], but you can’t force people - you can sway them towards healthy options – Pentywyn user

*Definitely [support the changes] except there are no water fountains in any of the activity areas* – Llanishen user

Yes all centres should offer healthy options – Llanishen user

*Fitness place should offer fitness food and they do* – Llanishen user |
3.2.8 Conclusions and Consultant’s Comments

It is sufficiently clear from the above that some specific aspects of the pilot have been achieved, and others have not been achieved. Some progress has been made in relation to improving vending food and drink and the café offer. The most successful part of the pilot project would appear to be the made-to-order items on the new bar bistro menus which have clearly expanded the range of healthier options, with some options proving popular amongst users.

Overall, the conclusion can be drawn that a difference is discernible at the two centres where progress has been made to date in implementing the pilot project commitments. At these two centres, the pilot project has given much-needed impetus and has enabled the stocking of new healthier options through the purchasing and installation of new facilities.

The lack of progress in certain areas, however, must be acknowledged and commented upon. The lack of drinks fountains in the gym areas, the continued presence of chicken nuggets on the children’s menu, the fact that no funding has yet been spent at two leisure centres and all of the wet-only sites are all causes for concern. Given the timeframe and the fact that this was a pilot project, the scale and ambition of the original bid was, we conclude, too large. To their credit, however, the officers concerned have instead concentrated on making small sustainable improvements at two sites, those managed by the catering manager, who has driven the project.
3.3 Neath Port Talbot

Background

Celtic Community Leisure, a ‘not for profit’ Leisure trust, manages a total of nine sports centres and pools in the Neath Port Talbot local authority, on the authority’s behalf. These include 5 wet pool sites, and 4 dry sites. The centre which was predominantly participating in the Healthier Catering in Leisure Centres Pilot Initiative was Neath Sports Centre. The majority of the proposals concerned the café facility at Neath Sports Centre, with the remainder having been allocated publicity material to promote healthy eating and some one-off promotional events with young people at play-schemes (at 4 sites during school holidays) and some involvement of fitness instructors at 3 locations.

Neath Sports Centre, where the majority of the planned activities took place is a large facility, adjacent to both a secondary school and further education college site. The centre has a fitness suite, sports hall and is surrounded by playing fields which are a frequent venue for rugby and football matches. The centre’s catering and vending facilities include a small range of vending machines in the centre’s foyer, a licensed bar and an adjacent café which serves a wide range of cooked food (mostly fried food with chips), drinks and snacks.

At the start of the project, the project’s manager admitted that in terms of its healthy catering output, the centre was starting from a low base: ‘We expect people to work up a sweat at the gym and when they come out we can’t offer them anything fresh or healthy. It’s mainly chips.’

3.3.1 Project Proposal and Delivery

As noted above, most of the longer-term sustainable activities centred around Neath Sports Centre. In total five, key commitments were made:

- Purchase of new equipment for Neath Sports Centre, including a chiller display cabinet, grilling equipment and other minor items, in order to prepare, store and market healthy options;
- Training for catering staff from Neath Sports Centre in the preparation of healthy food and drink, and training of gym / fitness instructors from Neath Leisure Centre, Pontardawe Leisure Centre and Afan Lido in food nutrition (See Annex: Section 3 for an outlined plan of the training for Catering staff);
- Provision of promotional bags and leaflets to children at playschemes new gym members and at site open days / promotions;
- Healthy Eating Publicity Materials to be displayed at all 9 sites managed by Celtic Leisure;
- Taster days for smoothie making and juicing, including purchase of ingredients.

As noted in the introduction to this report, it is very difficult to evaluate the true outcome of one-off promotional events. Therefore this report has not undertaken any evaluation of one-off publicity events, such as the promotional bags and the taster days, given that the true impact of such events is seldom direct, attributable, and may be delayed or never accrue.

At the close of the evaluation, the project had delivered on all of its objectives, with the exception of fulfilling the commitment to commission and display promotional materials in all its centres. The wall and notice-board space had been made available at most centres but the printing of materials had not been undertaken. Also, whilst the nutrition training for gym staff had been arranged and commissioned, it had not been completely delivered at the time of the final evaluation visit.
3.3.2 Mystery Shopper Exercise

Neath - Visit 1

Vending Machines

The centre had the best selection of healthy options that our shopper had seen during this phase. There was no choice of unhealthy carbonated drinks; the selection included bottled still water, Fruit Shoots and different 100% fruit drinks.

Their food vending machines had some cereal bars available as well as flapjacks along with the usual crisps and chocolate.

Catering outlet

As with the drinks vending machine a wide variety of healthy drinks were available including bottled water, Fruit Shoots, orange juice and milk as well as teas and coffees.

There was a specified ‘Children’s Menu’ which our shopper didn’t feel gave any real healthy options, nearly everything available on this menu was served with chips including burgers, curry and sausage, although there was an omelette selection. The adult menu was better and included jacket potatoes with a selection of fillings, toasted sandwiches and beans on toast. There was also a selection of yoghurts and fresh fruit on sale.

There was no visible healthy eating promotional literature or publicity around the Centre.

Neath - Visit 2

Vending Machines

An excellent choice of drinks, no carbonated drinks, mainly water based drinks, smoothies juices and different 100% fruit drinks.

Their food vending machines had some cereal bars available, jaffa cakes and packets of pretzels along with the usual crisps and chocolate.

Catering outlet

As with the drinks vending machine, a wide variety of healthy drinks were available including bottled water, Fruit Shoots, orange juice and milk as well as teas and coffees.

There was a large variety of meals mostly with chips and a few children ‘meal deals’ such as, chicken nuggets and chips with or without a drink. There were jacket potatoes, baguettes and sandwiches available and soup. There was also a selection of yoghurts and fresh fruit on sale.

There were two big colourful posters about what to eat and balanced diet which were by the café kiosk but nothing around the rest of the centre.

There was also a bar open in the evenings serving alcohol and the usual variety of different soft drinks and a similar menu. There were 20p sweet machines by the main reception which contained Minstrels, Jelly Beans and Tuttie Fruitie sweets.
Afan Lido - Visit 1

(Promotional material was the only pilot project commitment at Afan Lido)
In the area outside the gym (tucked away) there was big colourful poster (EAT FIT) explaining top tips
on salt, sugar and exercise, along with exercise related educational publicity.

Afan Lido- Visit 2

Our shopper noted no significant differences between the first and second visits.

Mystery shopper Conclusions

The vended food and drink on offer at Neath Sports Centre clearly contained very few unhealthy
items such as carbonated, high-sugar drinks and items of confectionery although these were available
in the cafeteria. The cafeteria showed no notable difference between the two shopper visits, but it
should be noted that the second visit did occur prior to the unveiling of the new menu planned for
early 2008. We conclude that, on the basis of the mystery shopper exercise alone, it is in all reality too
early to observe any real change in the catering on offer. However, information gathered elsewhere
for this case study suggests that this change will occur in time with the launch of the new menu, given
that all other essential elements are in place, such as staff training, input of stakeholders into the new
menus and the new facilities at the centre’s café.

3.3.3 Monitoring Returns

It is worth noting that, as with most of the pilot projects, Neath was experimenting with its café offer
over the life of the project and different quantities of products were therefore, on sale during
different months. However, the table below shows that sandwiches and rolls, low sugar children’s
drinks and bottled water have all sold well over the life of the pilot. After an initial surge, in all
probability helped by the play scheme activities, children’s oven meals have sold in moderation.

Neath Sports Centre Café – Catering Facilities

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresh Fruits</td>
<td>26</td>
<td>26</td>
<td>48</td>
<td>14</td>
<td>3</td>
</tr>
<tr>
<td>Still or Carbonated Bottled Water</td>
<td>313</td>
<td>242</td>
<td>209</td>
<td>128</td>
<td>47</td>
</tr>
<tr>
<td>Milk (skimmed or semi-skimmed)</td>
<td>7</td>
<td>5</td>
<td>6</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>Salads (including pasta salads)</td>
<td>5</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Yoghurts and Fromage Fraises</td>
<td>17</td>
<td>22</td>
<td>1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Jacket Potatoes</td>
<td>4</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Vegetable Portions</td>
<td>37</td>
<td>10</td>
<td>19</td>
<td>27</td>
<td>8</td>
</tr>
<tr>
<td>Sandwiches and Rolls</td>
<td>238</td>
<td>239</td>
<td>209</td>
<td>228</td>
<td>99</td>
</tr>
<tr>
<td>Low Sugar Drinks (children’s)</td>
<td>324</td>
<td>222</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Beans on Toast</td>
<td>5</td>
<td>0</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Broccoli Bake</td>
<td>8</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>Kids Oven Meal</td>
<td>559</td>
<td>41</td>
<td>72</td>
<td>181</td>
<td>54</td>
</tr>
<tr>
<td>Pure Fruit Juices</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>45</td>
<td>19</td>
</tr>
<tr>
<td>Diet / Zero Canned Drinks</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>57</td>
</tr>
</tbody>
</table>
3.3.4 Examples of Good Practice and Positive Outcomes

The ‘buy-in’ achieved through the training of catering staff has been particularly positive for the centre. A focus group was undertaken with the catering staff who had attended the training, around six weeks after they had completed it, this point in time chosen so that the real impact could be measured, after the initial euphoria of acquiring new skills and knowledge had worn off, and the staff had had a chance to put these into practice.

The catering staff had initially been apprehensive about the training, and had developed their own well-established methods for cooking food which had proven popular with the centre’s clients. One commented: ‘I thought it would make more work for us. More things to have to worry about.’

However, as a result of the training, the staff consulted had learned new techniques and had learned that small adjustments to their working practices could result in healthier food being produced. For example, the sausage sandwiches, which were very popular amongst spectators of rugby and football at weekends, were now grilled as result of the training and the purchase of a machine to do this. One member of staff commented that whilst she had known the basic principles of food nutrition prior to the course, the hints on how to make adjustments to what they already did proved useful: ‘I knew most of it to be honest – what’s low fat and what’s not, but a lot of it was about ways of making things we normally do healthier. We grill our sausage sandwiches now, with the George Forman machine. Nobody’s complained yet!’ Another added: ‘We think more about how we cook, about how we can make things low-fat and low-sugar.’

One of the staff who had worked at the centre for many years commented that this was not the first time in her experience that healthy catering had been on the agenda, but she pointed out that public attitudes were shifting, unlike in previous years: ‘People’s views have changed. We’re much more aware now, aren’t we? We all know now what’s good for us and what’s bad.’

Following the course, the staff had been involved in the development of a new menu which the centre was planning to implement in the New Year. The intention of the centre’s staff was for the new menu to be 60% traditional fare, and 40% healthier options. The centre manager commented, ‘We don’t feel like we’re dragging the staff along with us. They’re involved and part of this.’

3.3.5 Barriers to Progress

The project staff identified no significant barriers to delivery of the pilot project. They commented on how they had enjoyed the pilot and felt it was a positive experience for them. The point was made, however, that the scope of the project could have been greater if less financial risk had been attached to it: ‘Having an offset budget to compensate for loss from the start would have been good. We could have experimented more perhaps. The staff felt that the plans had taken longer to implement than planned, but also felt that a gradual, permanent change was better than a quick fix followed by reverting back to old habits.

3.3.6 Service users

A large proportion of the service users interviewed during both of the service-user consultations were school pupils and college students from the neighbouring sites.
During the first phase of consultation, in July 2007, few users had noticed any changes in the catering and vending offered at the centre, which was understandable given that only the preparation phases of the project were underway at that point, such as planning, sourcing of new facilities and commissioning training. However, even by November 2007, few users said they had noticed any substantive changes to the catered output although many did feel that it offered choice. There was, however, some awareness of the posters promoting healthy eating that had appeared in the public areas of the centre.

<table>
<thead>
<tr>
<th>Most commented that the offer was as it had always been.</th>
<th>The posters are all new but the food is the same</th>
</tr>
</thead>
<tbody>
<tr>
<td>[There’s] always loads of stuff here they didn’t used to have the posters but always had choices [between healthy and unhealthy options]</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>And that it had a wide range of options but was too ‘chips-based’ for some:</th>
<th>The vending has no bad things. The café you can get snacks that are both healthy and not</th>
</tr>
</thead>
<tbody>
<tr>
<td>It’s all good really chips are a bit bad but you can’t take it all away from people</td>
<td></td>
</tr>
<tr>
<td>It’s good really except the chip meals are a bit too much</td>
<td></td>
</tr>
<tr>
<td>It’s ok maybe too many kids meals - how much choice of chips and burgers do you need?</td>
<td></td>
</tr>
<tr>
<td>You can always smell the chips in the café</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Most of the people interviewed, especially the young people were supportive of the drive to improve the centre’s food and drink.</th>
<th>Yes it’s good to promote healthy eating</th>
</tr>
</thead>
<tbody>
<tr>
<td>It’s really important being fat doesn’t go with fitness</td>
<td></td>
</tr>
<tr>
<td>Yes the more you educate people the more they will eat better</td>
<td></td>
</tr>
</tbody>
</table>

Worth considering in the case of Neath, is that the changes that had been made at this stage, were foundational and perhaps not immediately noticeable to service users. One of the staff commented that they were not advertising the fact that small changes had been made to catering practices (such grilling sausages and bacon, and baking oven chips and wedges), but that the changes were being implemented quietly before the launch of the new menus in the New Year.

She also noted that whilst some service users were sampling the new healthy options on offer, others were merely noticing them. One of the catering staff noted: ‘Some of our regulars come in and say ‘Oh that’s a nice salad. Anyway, pastie and chips please.’

**Afan Lido**

None of the service users interviewed at Afan Lido were aware of any changes at the centre or any publicity material. See Mystery Shopper Exercise (above).
3.3.7 Conclusions and Consultant’s Comments

This pilot project has had some notable success in developing its catering staff’s skills and ensuring staff have a sense of ownership over future developments. In the process they have, through the training and the purchase of new equipment, been able to make small adjustments to catering practices which have improved the nutritional value of the fare on offer. The launch of the new menu in the New Year is a welcome development which may prove to be a major step forward, but its reception by customers (who often want to have a choice but currently opt for traditional fried and fast food options) will undoubtedly test the sustainability of the changes made. The centre manager felt that the pilot was the first step in a gradual change, and the centre has taken that first step in a positive manner.

The ‘step-change’ approach taken at Neath has involved building capacity in terms of facilities, staff skills and knowledge. It is, therefore, unsurprising that outcomes take longer to appear with this method, but the evidence gathered suggests that it is likely to lead to sustainable improvements in the longer term, as providing a good basis on which to build progress.
3.4 Swansea

Background

The drive to improve vended and catered food and drink at Swansea proposed to cover 6 centres: Penlan, Bishopston, Penyrheol, Morriston, Cefn Hengoed and Pentrehafo. According to the project manager, the local authority had been examining the possibility of phasing out unhealthy vended food and drink for some time, and had experimented with healthy vending machines at a number of sites prior to the pilot. Cefn Hengoed and Bishopston had all installed MY-Bod machines the previous year which were still in situ, but they had not proved a success from a patronage and revenue point of view. However, the project team were keen for the pilot to work.

3.4.1 Project Proposal and Delivery

Swansea produced a range of proposals over the six centres:

- The vending offer was to be improved at each with unhealthy products being phased out of the machines by April 2008;
- Waterlogic 2000 water coolers were to be purchased for all six sites;
- Training in nutrition was also to be delivered to 20 coaches who worked with children;
- In addition, a number of promotional days and taster sessions were to be arranged that would encourage healthy eating and distribute leaflets, bags, posters and stickers. These included Fruity Fridays at free swimming sessions.

Wavehill selected two of the centres to study over the course of the pilot project, namely Penlan and Penyrheol which are both situated on school sites.

Swansea delivered on some of its commitments. Water coolers were installed at the sites, although some concerns were raised by mystery shoppers about the availability of cups. The Fruity Fridays were felt to be a success from the perspective of outputs: fruit and publicity materials distributed. The project did not make contact with the area’s community dietician, but sought advice from the City Council’s Activa Fitness Manager who advised on healthy options. Our mystery shopper exercise noted some progress at the two sites observed in introducing more of the healthier options into its offer (See 3.4.2), although the aspiration to phase out all unhealthy produce at sites by April 2008 seems an ambitious commitment which will be difficult to deliver.

The pilot project had not, at the close of the evaluation, delivered the planned nutritional training to the 20 coaches at centres who worked with children. Difficulties relating to procurement of the training at the price estimated in the grant application had delayed the process – the best price quoted to date had been £400 per coach. However, by the time this report was written this had been planned and commissioned: 16 staff throughout the different centres under the management of the City and County of Swansea had been enrolled on the Children’s Nutrition course through the Weight Management Centre at a total cost of £3000.
3.4.2 Mystery Shopper Exercise

Penyheol – Visit 1

The drinks machines at the centre held a wide variety of different types of drinks some of which could be considered a healthier option, including bottled still water, Fruit Shoots and Tango Clear as well as a selection of other options; J20, Gatoraid, Pepsi Max and 7up.

The food vending machines however did not include any healthy options; they mainly contained a selection of crisps and chocolate such as, Aero, Drifter, KitKat and Yorkie Bars.

There was a water cooler machine in reception which was working, but unfortunately there were no cups available.

No healthy eating promotional literature was visible at all around the Centre.

Fieldworker Comment: Our fieldworker spoke to the Centre Manager who explained that they were holding an Open Day on the 30th September to promote the Centre and its facilities and to advise people that it was now fully functioning following the fire at Penyheol School. She explained that at this event they would be advertising the different types of classes that were available and they were also planning to incorporate the healthy eating programme in their promotion and that this was when they intended to kick off the programme.

Penyheol - Visit 2

The centre housed one drinks machine and one food machine; the drinks machine had a very good mixture of healthy drinks, with only one row of fizzy bottled drinks. The rest of the drinks were juices, Fruit Shoots, pure orange juice and sports drinks. The food machine had baked Walkers crisps and brunch bars but the rest of the food and drink was comprised of the usual chocolate selection, particularly Aerostas and Kitkats. The centre also included a hot drinks machine and a water dispenser with no cups but they were available from behind the reception desk. All the machines were fully stocked and in full working order. The swimming pool building on the same site has the same machines with the same stock but was not used by children so much.

The sports hall is used as the school dinner hall at lunchtime and has a very good selection of food; brown and white bread sandwiches with salad, salads, yoghurts and fresh fruit and a vegetarian quiche as well as chips, beans and curry. There was a good selection of healthy drinks.

There was no visible promotional literature or pamphlets but the Assistant Manager explained that the school displayed five-a-day and balanced diet information in the hall at lunch times.

Comment: Our consultant spoke to the Assistant Manager who explained that the school and centre had dual use of the building in the day since the fire. At lunchtimes the vending machines area in the foyer was full of pupils and the centre could refill the machines once or twice a day to meet demand. Before the fire the children were not allowed in the Centre at all and so had no access to the vending machines. The Centre did hold an open day in September where healthy eating was promoted. The centre get all their fruit bags and seeds from Penlan and actually gave a lot away on that day.

Penlan – Visit 1

The drinks machine had some healthy options and sports drinks including bottled still water and Powerade, as well as other less healthy choices such as Coke, Capri-Sun and Sprite.
Their food vending machine had a choice of healthy snack options including packets of raisins & sultanas and fruit pieces such as apricots and also packs of peanuts. They also held a selection of unhealthy options including crisps and chocolate. There was a water cooler in reception which was working, but there were no cups. It is noted that some centres do not provide plastic cups due to the waste generated, and instead encourage the (re-)use of bottles. However, there was no signage to indicate a deliberate policy in either direction. There was also no visible promotional literature at the start of the fieldworker’s visit.

**Fieldworker Comment:** I spoke to the Vending Manager, who explained that work was starting on the programme that day (14th August). A Notice Board was being put up by the Vending Machines and was going to be used to advise customers of the calorie and fat content of the choices in the machines. They had also written a ‘Commitment to Healthy Eating’ statement which they plan to display around the Centre. The vending manager also explained that they had recently placed a new order for food for the vending machine which included a wider selection of healthy eating options based on calorie and fat content and that they had feedback session with staff to get their thoughts on what customers may want in the machines. Finally, she mentioned that there were possible plans to price differentiate between ‘good’ and ‘bad’ foods to encourage customers to buy the healthier options.

By the time our fieldworker left the Centre, the notice board was up and the Vending Manager was putting up the literature regarding the calorie and fat values of the options in the machine as well as other information regarding healthy eating.

**Penlan – Visit 2**

The drinks machine had a mixture of Capri Sun, cans and bottles of fizzy drinks and bottles of water. There were no sports drinks or flavoured water available at the centre. There was a hot drinks machine which was out of order and a water dispenser in the reception with no cups.

The food vending machine at the centre had crisps, chocolate and sweets; there was not a healthy option for our shopper to have a snack, except for a bottle of water. Once our shopper had introduced themselves to the receptionist, an employee put 7 packets of dried fruit and seeds in the machine.

There was a Commitment Poster explaining that there were new healthy snacks selections in the vending machines and encouraging users to try them out. There was also a poster identifying chocolate on A to D scale of Good to Bad health content. There was also a ‘Food Pyramid’ with types of crisps and a list of grams of fat and calories on each item of chocolate.

**Fieldworker Comment:** Our fieldworker spoke to the new Vending Manager, who had taken over in the summer. He explained that there had been a lot of changes in staff so they hadn’t been as good at keeping healthy stock in the machines as they should have.

**Mystery shopper Conclusions**

Some improvements were observed in the vending machine choices on offer between the first and second visits to Penyrehol, with more healthy drink and snack options available and fewer carbonated drinks. However, the situation at Penlan is the reverse. Clearly at the start of the project, Penlan had introduced some healthy options. Yet, sustaining this progress proved difficult and illustrates the ongoing nature of the challenge. On two occasions the presence of our shopper acted as a stimulus for reactive action. This raises the question of how many other missed opportunities to vend healthy products (possibly at the expense of unhealthy options) have occurred over the course of the pilot. Concern must also be raised about the lack of cups at the water coolers. Clearly on this basis only those with an empty bottle can use the fountains which would restrict their output enormously.
3.4.3 Monitoring Returns

The tables below show that Penlan has done well in its sale of fresh fruit, in comparison to other pilot sites where this has been on offer (See 3.2.4 and 3.3.3). Pure fruit juices and pretzels have also proved popular.

Penlan Leisure Centre - Vending Machine

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresh Fruit</td>
<td>117</td>
<td>178</td>
<td>124</td>
<td>140</td>
<td>34</td>
</tr>
<tr>
<td>Still or Carbonated Bottled Water</td>
<td>82</td>
<td>68</td>
<td>72</td>
<td>46</td>
<td>62</td>
</tr>
<tr>
<td>Pure Fruit Juices</td>
<td>140</td>
<td>108</td>
<td>68</td>
<td>112</td>
<td>96</td>
</tr>
<tr>
<td>Pretzels</td>
<td>120</td>
<td>160</td>
<td>44</td>
<td>112</td>
<td>28</td>
</tr>
<tr>
<td>Nuts</td>
<td>17</td>
<td>31</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Baked / Reduced Fat Crisps</td>
<td>72</td>
<td>58</td>
<td>46</td>
<td>48</td>
<td>66</td>
</tr>
<tr>
<td>Ribena Really Light</td>
<td>0</td>
<td>0</td>
<td>144</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Fruit Shoot</td>
<td>0</td>
<td>0</td>
<td>144</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Penlan Leisure Centre – Water Vending Machine

<table>
<thead>
<tr>
<th>For mains-based system: no of water cups used this month</th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>120</td>
<td>180</td>
<td>208</td>
<td>80</td>
<td>62</td>
</tr>
</tbody>
</table>

The water vending machine has also proved to be popular with the result that no cups were available when our mystery shopper visited the centre (See 3.4.2).

3.4.4 Examples of Good Practice and Positive Outcomes

The health information material that was placed on the wall adjacent to the vending machines at Penlan was a good example of a project showing initiative beyond its immediate commitments. The poster showed the nutritional values of each of the confectionery products on offer, placing them in a good or bad zone, and had a pyramid system showing the fat content of crisps on offer in the machines. Though basic in its format and presentation, it was well-researched, accessible, easy to understand and contained clear ‘take-home’ messages for customers. It raises an important point, namely that improvements to the nutritional value of the food and drink on offer should where possible be supplemented with an explanation of why changes are taking place in order to put these changes in context for users and to ‘bring them along’ with the initiative.

As in other pilots, the pilot project had also acted as a stimulus for authority-wide consideration of the issue, even if progress was slow and direct outcomes unclear at this stage.

3.4.5 Barriers to Progress

The pilot project had suffered continuity problems from its outset, having been passed through three project managers over its course, due to staff turnover. Finally, a fire at Penyrheol had affected progress, and vandalism of two vending machines at Penlan meant that the project suffered a slow start there.

The staff, as well as some centre users, expressed disappointment that the café at Penlan had closed down during the pilot. It was felt by the staff that this had led to a missed opportunity for future improvement.
3.4.6 Service users

Penlan

As in the Mystery Shopper Exercise, the initial improvements to vended food and drink made at Penlan were noted by a number of interviewees.

However, the point was made that the centre had **not sustained** the improvements in vending, or that provision of healthy options was **inconsistent**.

Not really [noticed many changes]. There was a lot of healthier stuff here in the summer, it’s gone back to how it was

Not really they sometimes have a few packets of nuts or seeds but not always, mainly crisps and chocolate, the fountain is good to fill up bottles

It’s not offering a healthy option. The posters tell you what you already know and the machines don’t support it

All of those interviewed at the centre were **supportive of the changes** that had been made and supportive of moves to improve the nutritional balance of the vending offer.

I support that, it makes sense in a gym environment, promoting healthy eating

It’s a healthy place and it takes the point of swimming away if it’s not healthy food

I support it, it may not work with kids, they will choose crisps over an apple, but if there were not crisps they would choose the apple

It’s a good idea but no one takes any notice if you still offer chocolate

They won’t pick nuts if they can have chocolate, good idea if it happened.

Others more clearly supported the principle of excluding unhealthy food and drink from the machines, altogether.
In terms of a way forward for the centre in improving the healthy balance of its output, the users made a range of suggestions.

| Offer less chocolate and fizzy drinks and more bars like cereal bars |
| I would have fruit, brown bread sandwiches, light crisps, healthier low fat kiddie stuff |
| Just one row of crisps and stock up on more fruit |
| Take quite a bit of the chocolate out and have a different ratio of good and bad (more good) |
| Fruits and sandwiches in vending machine would be better |
| Offer sandwiches and fruit or just take away the machines and have only the water dispenser |
| A café and a rest area with fresh food |
| More fruit and probably sandwich or rolls maybe a café |
| Make fruit salad available |
| I’d be more inclined to buy from a bar behind reception sandwiches fruit and so on, there is no choice when the kids come out hungry |

Penyrheol

At Penyrheol, the service users consulted were all pupils who were using the centre facilities owing to a fire at the adjoining school. All had come over to the centre to use the vending machines during their lunch break.

| There was some awareness of the changes in vending food and drink that had been made at the centre. |
| There’s more baked crisps and a few energy bars |
| The drinks machine has more water in it only one row of fizzy drinks |
| The machines have lots of different drinks but I don’t have money to use the machines |
| Yes there are different crisps now and less fizzy drinks but we weren’t allowed here before the fire |

Most of the young people interviewed supported the idea of healthier options, awareness-raising and many showed an appreciation of why healthy eating was important. However, this should be qualified by pointing out that many of them had come to the centre with the express purpose of buying chocolate crisps and fizzy drinks.

| Yes we would buy it if it was here, the girls would especially |
| It’s good idea PSE [where they learned about healthy eating] is only once a week |
| The school hall has information they should have more healthy snacks |
| Most of the young people interviewed supported the idea of healthier options, awareness-raising and many showed an appreciation of why healthy eating was important. However, this should be qualified by pointing out that many of them had come to the centre with the express purpose of buying chocolate crisps and fizzy drinks. |
In addition, one pupil complained about the lack of cups at the new water cooler.

Conclusions and Consultant’s Comments

Owing to staff turnover, the Swansea pilot project has clearly suffered a lack of continuity which is reflected in the apparent inconsistency of the progress in improving the vended food and drink at Penlan. The lack of cups at water coolers has also been raised both by mystery shoppers and customers alike.

However, the project did make some progress in improving its vended food and drink in Peny rheol, and the introduction of the publicity to educate customers as to which products are healthy and which are not is a welcome development which can be built upon.
3.5 **Powys**

3.5.1 **Background**

Powys county council operates 15 leisure and sports centres across a wide geographical area of mid-Wales. All of the sites offer a vending service to customers and three of these sites offer a staffed catering service (Brecon, Welshpool and Machynlleth).

Powys County Council began this pilot project from a more advanced starting point than the other authorities that took part. A number of the county’s sites have been awarded Heartbeat Wales awards for its provision of healthy options. For over a year, the authority has offered healthy options through H-Box Healthy Vending Machines at five sites and all products supplied therein are certified to meet the Health Education Trust’s guidelines on healthy food and drink. Some centres routinely held promotional events such as ‘Fruity Fridays’ for children and young people. Each sports centre now has a consultative group which would frequently discuss the issue of healthy catering. Adjacent and neighbouring schools were represented at these meetings and the centres worked with the schools to ensure that healthy food and drink was available to young people.

The vending and catering model at Powys centres is still based on choice between healthy options and standard vended food and drink, and the project manager freely admitted that in revenue terms, the healthy vending machines were not large generators of revenue. A range of healthy drinks (such as still and sparkling water, flavoured waters and juices are also available at the sites – indeed, three of the sites had changed their approach and were selling water only and phasing out carbonated sugary drinks. The catering services at Brecon, Welshpool and Machynlleth also offer range of healthy options, as well as traditional food and drink. The cafés had also begun providing healthy option packed lunches during school holidays and one centre had introduced a line of organic low fat beef burgers.

3.5.2 **Project Proposal and Delivery**

Under the grant application, Powys proposed that the following funded activities take place in Brecon, Machynlleth and Welshpool.

- A smoothie menu at all three centres, enabled by the purchase of smoothie machines;
- Improving the quality of the jacket potatoes on offer through the purchase of table top baking ovens for Brecon and Machynlleth;
- A marketing and promotional campaign at all three centres to highlight the healthy options available at all sites. This including branded packaging for the healthy packed lunches referred to above. The purpose of this was said to be part of a drive to brand healthy consumption at the centres, and to produce a consistent, clear set of messages that customers would recognise.

In addition, a small number of one-off events and taster sessions were planned targeting schoolchildren and early-bird swimmers.

The pilot project at Powys delivered on most of its commitments under the terms of the grant. Jacket potato and smoothie machines were installed at the proposed centres. However, sales for smoothies were said to have been very low, with no units sold at two sites and only a small number sold at the other. Jacket potato sales were also said to be disappointing, and had not met the project manager’s expectations, but remaining at the same level as they were prior to the installation of the machines, despite the marked improvement of the product itself.
The pilot project had also not been able to print and install the publicity material it had planned under the scheme. Delays at the reprographics department were responsible for this situation – initial drafts of the materials were felt by the Project Manager to have lacked the high impact sought for the branding, and the design process had begun again.

3.5.3 Mystery Shopper Exercise 1

At the point at which the first mystery shopper exercise took place, we were advised that visible progress had only been made at Brecon. Therefore, during phase one of the exercise, we concentrated our efforts at that centre. During the second phase of the exercise, all centres were visited.

Brecon Visit 1

Café
The jacket potato oven was up and running and potatoes were available with a wide variety of fillings. There was also fresh fruit available. However, the smoothie machine was not yet in place. Following the exercise, our shopper spoke to a member of staff who advised that the centre planned to have the machine up and running in time for the new school term in September. They planned to target the students at the adjacent Further Education College as their main customers for smoothie drinks who were frequent customers at the café.

No promotional marketing for healthy eating was visible in the Centre.

Vending Machines
There were a lot of vending machines in the Centre, including a healthy eating machine which offered choices such as yoghurts, fresh fruit, bottled water, cereal bars and low fat crisps. The member of staff advised our shopper that the machine wasn’t very popular amongst users. There were also a number of 20p sweet machines in front of the Reception Desk.

Brecon – Visit 2

Café
There was a good menu offering jackets, smoothies and the meals offered jackets or chips and salad. The display unit had a variety of fruit, yoghurt, sandwiches and muffins and cakes.

There was no promotional material visible except a number of posters asking to recycle their empty wrappers and bottles

Vending Machines
There were four machines: two food and two drinks machines. One healthy food vending machine with a choice of Snack-a-Jacks, Mini Ryvita, pretzels and cereal bars, the other still had a variety but included chocolate and crisps but also juice, water and light crisp options. There was a Tango carbonated drinks machine and a sports drink machine. There were 20p sweet machines by the side of these machines, a popcorn machine in reception and a Jawbreaker machine.

The Centre was very busy with a mix of young people from the college, older adults, workers and adults.
Flash Centre - Welshpool

Prior to the pilot project, the centre was starting from a point where healthy options were available at both the vending machines and the café. However, the jacket potatoes sold were not baked, but microwave-cooked and therefore of a lesser quality than those that were sold following purchase of the oven. The marketing of healthy options was not prominent.

Café
The café offers three varieties of smoothies and the advertising for these is very prominent. The service area was dominated by cakes and biscuits and there were no apparent healthier options on display.

The menu offered jacket potatoes as an option, however, these were felt to be ‘lost’ in the general menu, not being marked out as healthy options, and the menu contained many more unhealthier options including cooked breakfasts, burgers, pizza, battered fish and scampi. All of these options came with chips but had the option of jacket potato as an alternative accompaniment. There were no healthier options explicitly indicated as such on the menu.

The children’s section of the menu contained no healthier options, it included sausage, mini burger and chicken nuggets all were available with chips; alternatives to chips were smiley potato faces or jacket potato.

There are Frutina slush machines that have replaced the traditional Slush Puppy machines. These are made with pure fruit.

There were no promotional materials or literature on display.

Vending machines
The centre contains a large bank of vending machines, the majority of which contain traditional snack items such as chocolate, crisps, etc. There is however a designated healthier eating vending machine provided by ‘H Box’ and a vending machine containing healthier drinks such as water and low sugar drinks.
Bro Ddyfi Leisure Centre - Machynlleth

Café
There were no freshly made smoothies on sale, however pre-packed smoothies were available. Our shopper spoke to the café manager who explained that the smoothie maker had been purchased but that there had been a staff shortage due to illness and they had not yet begun using of the smoothie maker as planned. She showed our shopper the planned smoothie recipes that were devised with certain illnesses and ailments in mind, e.g. a smoothie designed specifically for sufferers of irritable bowel syndrome and another for those with arthritis – these products and the supporting publicity were produced by the company who provided the smoothies. These options are due to be introduced in January 08. It is recommended that the authority seeks the advice of the community dietician on the benefits of these products.

Jacket potatoes were shown at the top of the menu board and offered with a range of fillings. These were the most reasonably priced options on the menus (£2.90 for 2 fillings and £3.40 for 3 fillings). Other meals on the menu were priced between £4.60 - £5.30. All main meals offered a choice of jacket potato or salad as an alternative to chips as an accompaniment to the main meal.

No healthier eating literature was on display.

Mystery shopper Conclusions
The key point to note is that the planned healthier options were, in most cases, available when our shoppers visited the centres. However, the lack of high-visibility marketing and promotional material to mark the products out, guide the customer and brand them as positive, healthy choices has in all probability lessened the impact of the new options.

3.5.4 Monitoring Returns
The returns for Brecon show that jacket potato sales have remained relatively stable between August and November, and increased slightly over the period. However, the project manager noted that sales were no greater than in previous months, despite improvements in the quality of the potatoes on offer. This was put down to the lack of publicity material surrounding installation of the oven.

Jacket Potatoes

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brecon</td>
<td>329</td>
<td>362</td>
<td>392</td>
<td>368</td>
<td>264</td>
</tr>
<tr>
<td>Welshpool</td>
<td>308</td>
<td>212</td>
<td>110</td>
<td>100</td>
<td>224</td>
</tr>
<tr>
<td>Machynlleth</td>
<td>358</td>
<td>255</td>
<td>301</td>
<td>229</td>
<td>197</td>
</tr>
</tbody>
</table>

At the other two centres sales have fallen off, after an initial good showing. This can be explained by patronage rates of the centres being higher in the summer months, but falling off in autumn. Brecon, which is situated next to a large sixth form college, experiences less of a fall off in the autumn, with the beginning of term bringing in new customers.

Smoothies

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brecon</td>
<td>Nil</td>
<td>Nil</td>
<td>Nil</td>
<td>Nil</td>
<td>Nil</td>
</tr>
<tr>
<td>Welshpool</td>
<td>Nil</td>
<td>40</td>
<td>125</td>
<td>195</td>
<td>100</td>
</tr>
<tr>
<td>Machynlleth</td>
<td>Nil</td>
<td>Nil</td>
<td>Nil</td>
<td>Nil</td>
<td>Nil</td>
</tr>
</tbody>
</table>
The project manager explained that the poor sales at Brecon and Machynlleth were due to the fact that the machines were not in prominent locations at both cafés. Staff sickness was also said by the café manager to be a factor at Machynlleth (see 3.5.3). There had also been some wastage of fresh fruit bought for use in the machines at the centres.

3.5.5 Service users

Brecon Leisure Centre

During the first round of interviews the users interviewed were generally older, while during the second round of interviews, four out of the ten interviews conducted were with FE students from the neighbouring college. Few differences were observed between the findings gathered during both round of interviews, which is perhaps unsurprising given that the changes were made without the supporting publicity campaign planned.

<table>
<thead>
<tr>
<th>However, during both phases of interview, two of the users had noticed minor changes to the food and drink on offer at the centre. Others had not noticed, but some acknowledged that there had been a choice between healthy and unhealthy food for some time.</th>
<th>I think there are more fillings available for jackets</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not changes as such but you can either have jacket or chips now</td>
<td></td>
</tr>
<tr>
<td>No not really it’s quite samey</td>
<td></td>
</tr>
<tr>
<td>Not really [noticed any changes] but you can get quite a lot here - good stuff and quick food like a portion of chips</td>
<td></td>
</tr>
<tr>
<td>I haven’t noticed any publicity and promotion but they put the menu on blackboard</td>
<td></td>
</tr>
<tr>
<td>Not really it’s always varied</td>
<td></td>
</tr>
<tr>
<td>No, you always get a good variety</td>
<td></td>
</tr>
<tr>
<td>Not really it’s been great for ages</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Most users, during both visits, supported the idea of improving the food and drink, and raising awareness on offer, with some awareness of government campaigns to promote healthy eating. Again, some noted that the centre was already well-advanced in terms of offering healthy options.</th>
<th>Yes this place is very ahead in that respect</th>
</tr>
</thead>
<tbody>
<tr>
<td>Its good they need to do it across all the leisure centres in Wales Brecon is a bit more advanced</td>
<td></td>
</tr>
<tr>
<td>Yes they could have more diet information here, 5 a day like you do at school</td>
<td></td>
</tr>
<tr>
<td>Yes they should give people a choice</td>
<td></td>
</tr>
<tr>
<td>Yes they should be teaching people you always see it on the TV</td>
<td></td>
</tr>
<tr>
<td>Yes we have a lot of food information at the college- you need to know what’s in food</td>
<td></td>
</tr>
<tr>
<td>As regards <strong>further improvements</strong>, users fell into two groups – those that felt that the unhealthy food should be taken away in favour of healthier food and drink. Interestingly, none of the young people called for the 20p sweets machines to be taken out, but the adults felt very strongly about this issue.</td>
<td><strong>The snack stuff isn’t quick to take away really, need more fruit and yoghurt on display</strong></td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td><strong>Take the sweets machine away maybe</strong></td>
<td><strong>There are too many vending machines with a bad choice of chocolates and crisps available. They are so visually displayed and hard to avoid, our children pester us until we give in and it is difficult</strong></td>
</tr>
<tr>
<td><strong>Add fruit to the vending machines. Get rid of the cheap 20p sweetie machines like jelly beans and gob stoppers, the children love them and 20p is an achievable price.</strong></td>
<td><strong>Vending machines, fill them with healthy options - take out the chocolate and crisps</strong></td>
</tr>
<tr>
<td><strong>Take out the rubbish 20p sweet machines, children are drawn to them for a quick fix, they need to replace them with a healthier alternative</strong></td>
<td><strong>Make the option of having sandwiches/rolls with wholemeal bread</strong></td>
</tr>
<tr>
<td><strong>And those that were happy with the current offer.</strong></td>
<td><strong>It’s fine, we usually enjoy the things we buy here</strong></td>
</tr>
<tr>
<td><strong>It’s very good - seems very fresh</strong></td>
<td></td>
</tr>
</tbody>
</table>
**Bro Ddyfi - Machynlleth**

The users interviewed at Machynlleth Leisure Centre were either using the swimming pool or visiting specifically to eat lunch.

<table>
<thead>
<tr>
<th>There was some awareness of the changes in café food and drink that had been made at the centre. However, two interviewees felt it had always been healthy and saw no difference.</th>
<th>The addition of the salad bar is a good idea and there is more fruit and the snack bars on offer are more wholesome. There are many more healthier options like salad. The display is much nicer and the healthier options like salads are more prominent.</th>
</tr>
</thead>
<tbody>
<tr>
<td>All of those interviewed at the centre were supportive of the changes that had been made to the café menu.</td>
<td>I am supportive of it particularly if it is in response to market demand. Yes I support it as I like to eat healthily, it is important to have that choice. I personally support it because I need to lose weight and don’t like to go places where there is only junk food on offer. I support healthy eating because we all need to be aware and change our bad habits. There are a lot of children using this centre and it is important that what they eat is healthy.</td>
</tr>
<tr>
<td>In terms of a way forward for the centre in improving the healthy balance of its output, the users made a range of suggestions.</td>
<td>They could make it slightly cheaper; some things are OK but it’s too expensive for families. I would get rid of junk food in the vending machines there are lots of chocolates in there and my eldest finds it hard to resist high sugar sweets, chocolates and crisps. They should do away with any unhealthy options so that you are forced to choose from the healthy stuff. They could make the healthier stuff much cheaper and put up the price on chips, etc.</td>
</tr>
</tbody>
</table>
Flash Centre - Welshpool

The users interviewed were all parents of children attending either swimming classes or the children’s club.

<table>
<thead>
<tr>
<th>There was <strong>some awareness of the changes</strong> in café food and drink that had been made at the centre.</th>
<th>Yes, they have more healthier stuff like flapjacks and muffins.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes, there are more healthy options on the menu.</td>
</tr>
<tr>
<td></td>
<td>Yes - they’re now doing paninis.</td>
</tr>
<tr>
<td></td>
<td>Yes - they have a specials board.</td>
</tr>
<tr>
<td></td>
<td>Yes - there has been more of a push to healthier eating.</td>
</tr>
<tr>
<td></td>
<td>There is more choice and healthier options like salad and jacket potatoes and smoothies.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>All of those interviewed at the centre were <strong>supportive of the changes</strong> that had been made to the café menu.</th>
<th>I think the changes are really good as far as they go.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>I have noticed the slush machine but didn’t know it was a healthier option, I think it is a good idea.</td>
</tr>
<tr>
<td></td>
<td>The kids have had the new slushes and I think they’re a good idea if they stop them drinking rubbish.</td>
</tr>
<tr>
<td></td>
<td>I support anything that improves how well the children eat.</td>
</tr>
<tr>
<td></td>
<td>I support it as it’s hard enough to get kids to eat healthy but even harder if the option is not there.</td>
</tr>
<tr>
<td></td>
<td>Yes - they should be making it healthier.</td>
</tr>
<tr>
<td></td>
<td>The smoothies are lovely and the kids really like them, so I definitely support that.</td>
</tr>
</tbody>
</table>
In terms of a way forward for the centre in improving the healthy balance of its output, the users made a range of suggestions.

- Get rid of the slush machines (the unnatural ones) as I have real concerns about the kids and e numbers
- I would like to see them getting rid of all e numbers
- Get rid of the pop machines and take the cakes off the counter as they are a temptation
- Have salads on show more - I tend to go for the first thing I see, so if they were more obvious I would be more likely to go for them
- They could reduce the cost of healthier options that may make people more likely to go for them
- Get rid of the drinks machines
- Improve the price of healthier options and change the children’s menu so that it is not all unhealthy options

3.5.6 Examples of Good Practice and Positive Outcomes

Powys as a local authority has clearly been working to improve its catering and vending on offer for some time and the presence of healthy vended food and drink at all sites as standard is something that can be highlighted as good practice. However, it is difficult to discern any notable and directly-attributable outcomes from the pilot project itself. The project manager did feel that improving the quality of the jacket potatoes and the range of fillings available would eventually lead to an increased uptake, and the visible presence of the machines. The consistency of the quality of the jacket potatoes produced was said to be much improved on previous food and drink available.

3.5.7 Barriers to Progress

The biggest barrier faced by the pilot project has been the difficulties encountered in settling on a high-impact design for the re-branding of the healthy catering and vended food and drink at the centres. This has in all, probability lessened the impact of the changes made at the centres, as the publicity materials would have gone some way towards guiding customers, and urging them to sample the new options.
3.5.8 Conclusions and Consultant’s Comments

In spite of the few direct outcomes discernible, it would be unfair to be critical of the pilot project at Powys, given the fact that the centres were starting from such a high baseline, comparatively speaking. At many centres studied as part of this evaluation, progress in making the transition from an almost totally unhealthy range of food and drink to a more balanced range of options, can be achieved quickly, efficiently, visibly and have a high impact on customers’ awareness and an effect on consumption patterns in some cases. However, introducing further healthy options into centres, which already have a good balance, is less likely to have such a profound effect. We offer two explanations for the situation:

Firstly, and as noted above, the delays in re-branding the healthy options available was a missed opportunity that could have given the pilot some momentum and challenged customers’ perceptions of the food and drink on offer. This in turn could have led to better sales of the new options.

Secondly, we offer the possibility that the centres in Powys have already achieved a balance that suits the consumption preferences of its current customer base. As noted above, the H-Boxes which have been in place for well over a year are not large generators of revenue, and that revenue on jacket potatoes has not increased despite marked improvements in the product on offer. We conclude that Powys may have already gone as far as it can to provide balance within the current prevailing choice-based model. Indeed, as the project manager remarked: ‘Unless there is a sea-change in public attitudes, it will be very difficult to go much further [in terms of reducing less healthy food and drink available]. We’ll be looking at running at a loss.’
3.6 Gwynedd

Gwynedd County Council has been working to improve its catering and vending on offer in recent months, prior to the commencement of the pilot project. It was involved in another pilot project during 2006/7 at Plas Silyn centre at Penygros and Glaslyn at Porthmadog. This pilot project, linked with Healthy Schools Initiative involved amending the catering menus and snacks on offer and training the centres’ staff in Level One Diet and Nutrition.

3.6.1 Project Proposal and Delivery

Most of the activities at the Gwynedd Pilot project involved three of the centres in the county: namely Bangor Swimming Pool, Plas Ffrancon Centre and the Tennis Centre, in addition to the free swim initiative. These were:

- A scheme to provide free taster fruit to children whom were regular centre users at Bangor, Bala, Caernarfon, Porthmadog and Bangor, such as users of the free swimming scheme, and to then review fruit sales thereafter;
- The purchase of a smoothie maker at Bangor;
- A month’s supply of breakfast cereals to be given to early bird swimmers at Bangor;
- Purchase of a jacket potato machine at Bangor;
- Purchase of Jacket Potato Oven for Plas Ffrancon;
- A taster summer menu for Plas Ffrancon to include free taster packed lunches for play scheme children;
- Healthy Option taster Packed Lunches at the Tennis Centre for summer play-scheme and summer camp children;
- Improvement of lunch options at the Tennis Centre through purchase of a pasta cooker and a taster day. Self-evaluation questionnaire to be distributed and analysed.

The evaluation focussed mainly on Plas Ffrancon and Bangor Swimming Pool. All of the commitments were met at the centres, although the tracking of the results of the fruit taster scheme was still ongoing at the time of this report’s writing, and the self-evaluation materials were not available. In addition to its’ grant-funded activities, Bangor Swimming Pool had also hoped to set up a breakfast club for elite swimmers, but this had not yet begun, and was being planned for January 2008.

The one-off events had all been reported successes. Bangor Swimming Pool held smoothie days at the Summer Play Scheme to publicise its new products and involve children in making smoothies. The children present were split into 10 groups of 4 to 6, and asked to create their own smoothie. Each one was marked out of ten for taste, appearance, appeal and healthiness by the Play Scheme Leader. The winning team was given the prize of a day out at Llandudno Cineworld (See appendix 1 for full details).

The tennis centre at Caernarfon also held a fruit taster session for its 50+ customers as part of European 50+ day. Despite short notice for the event, those who attended reported that they had enjoyed the day and were very keen to taste the fruit on offer (See appendix 1 for full details).

At the children’s free-swimming sessions in Bala, Porthmadog, Bangor and Caernarfon, some 4,810 units of free fruit were distributed.
3.6.2 Mystery Shopper Exercise

The first round of mystery shopper visits occurred too early in the life of the Gwynedd pilot project for there to be any observable progress. However, all centres had been visited during the first round of project visits and a baseline established at that point. Therefore, both main centres were visited during the second round of the shopper exercise.

Bangor Swimming Pool

Café
The café is obviously attempting to offer healthier options to all its customers. The menu is dominated by jacket potatoes from the new jacket potato machine with a large portion of side salad, pasta options, salads and freshly made sandwiches that are laden with salad. All crisps are of the baked variety and snack bars are also the healthier varieties. Around the service counter are posters and literature regarding the healthier options on offer, with no promotion of unhealthier options. All food is freshly prepared in an ‘open kitchen’ atmosphere allowing customers to see what is being offered. Our shopper purchased a jacket potato which was said to be very nice.

There are Frutina slush machines that have replaced the traditional Slush Puppy machines; these are made with 99% fruit. Our shopper spoke to a member of staff who is responsible for the menu who was absolutely committed to providing healthier food at the café and has created the menu to reflect that.

Vending machines
The vending machines are placed in the entrance hall of the centre and contain healthier option drinks; it is our understanding from the interviews undertaken with staff that Gwynedd County Council has removed all traditional fizzy drink machines from their leisure centres (although lucozade sports drinks are still available in some centres).

Plas Ffrancon Leisure Centre - Bethesda

Café
The counter area in this leisure centre is very small and therefore it did not have a lot of food on display and customers have to order or ask for what they want. It was difficult therefore to gauge what foods were being promoted. The café is however, offering healthier options to eat and drink and has literature posted to show what the healthier options are. There were Frutina slush machines that have replaced the traditional Slush Puppy machines; these are made with 99% fruit. There was a bowl of fruit placed prominently on the counter. The menu includes paninis, pasta, sandwiches and jacket potatoes.

Vending machines
Again, the vending machines are placed in the entrance hall of the centre and contain healthier option drinks; it being our understanding that Gwynedd County Council has removed all traditional ‘Coke’ machines from their leisure centres.

Mystery Shopper Conclusions
Our shopper and the visiting consultant were struck with the progress that had been made at both centres. The catering on offer had improved markedly over the course of the pilot in favour of healthier options and prominence was given to these options to encourage their purchase. Coupled with the county-wide policy of removing fizzy drinks machines, the overall impression was very favourable.
3.6.3 Monitoring Returns

Bangor

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jacket Potatoes</td>
<td>144</td>
<td>93</td>
<td>120</td>
<td>113</td>
<td>87</td>
</tr>
<tr>
<td>Smoothies</td>
<td>20 (free, as part of event)</td>
<td>Nil</td>
<td>Nil</td>
<td>Nil</td>
<td>Nil</td>
</tr>
</tbody>
</table>

The sale of jacket potatoes at Bangor has been a notable success of the pilot project. The figures above, whilst stable and steady, do not show that the café was selling double the number of jacket potatoes during the pilot project compared to sales in the year prior to the pilot. This can also be attributed to the prominence of jacket potatoes in the café (see mystery shopper exercise above). It appears from the monitoring returns that smoothies have only been offered during the promotional events. It would be worth introducing them to the café menu in order to widen their sale and test their popularity.

Plas Ffrancon

<table>
<thead>
<tr>
<th></th>
<th>August</th>
<th>September</th>
<th>October</th>
<th>November</th>
<th>December</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fresh Fruit</td>
<td>320</td>
<td>139</td>
<td>23</td>
<td>18</td>
<td>10</td>
</tr>
<tr>
<td>Bottled Water</td>
<td>320</td>
<td>139</td>
<td>139</td>
<td>302</td>
<td>116</td>
</tr>
<tr>
<td>Pure Fruit Juices</td>
<td>Nil</td>
<td>Nil</td>
<td>80</td>
<td>126</td>
<td>47</td>
</tr>
<tr>
<td>Salads</td>
<td>120</td>
<td>90</td>
<td>112</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Yoghurts and Fromage Fraises</td>
<td>80</td>
<td>74</td>
<td>Nil</td>
<td>46</td>
<td>20</td>
</tr>
<tr>
<td>Jacket Potatoes</td>
<td>60</td>
<td>74</td>
<td>99</td>
<td>19</td>
<td>23</td>
</tr>
<tr>
<td>Sandwiches and Rolls</td>
<td>Nil</td>
<td>Nil</td>
<td>27</td>
<td>25</td>
<td>0</td>
</tr>
<tr>
<td>Beans on Toast</td>
<td>40</td>
<td>13</td>
<td>13</td>
<td>77</td>
<td>56</td>
</tr>
<tr>
<td>Vegetable Soup</td>
<td>30</td>
<td>Nil</td>
<td>Nil</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>

Most of the produce outlined above, with the exception of Jacket Potatoes, was given away as part of the play scheme initiative at Plas Ffrancon to produce a summer menu and packed lunches for children. It does show however, that take-up of these lunches was good. The project manager was pleasantly surprised at how much the children enjoyed the healthy meals provided for them.

3.6.4 Service - Users

Bangor Swimming Pool

At Bangor Swimming pool all of the users interviewed were visiting the swimming pool in order to take exercise. All of those interviewed felt that the choices on offer were varied and that the healthier options were the most attractive.
There was **some awareness of the changes** in café fare that had been made at the centre.

However all of those interviewed said that the food on offer had always been good, suggesting a continuation of a high standard in the provision of healthier food at the swimming pool.

All of those interviewed at the centre were **supportive of the changes** that had been made to the café menu.

**The food here has always been nice.**

**There is a bigger menu**

**There have always been salads but they are pushing them now**

**There is much healthier food on offer**

**Yes I support anything that makes it easier to eat properly**

**Yes it’s a good thing**

**Yes I support it - they should be making it healthier**

**Yes kids and adults need to think about what they eat and having the options here makes it easier to choose the healthy options**

**This is a place where you come to try and get fit**

**Plas Ffarancon**

The users were visiting the centre for a variety of reasons including using fitness facilities, accompanying children using facilities and purely for the purpose of having lunch.

**There was a high level of awareness of the changes** made to the menu at the leisure centre.

**There are jacket potatoes, pasta fruit smoothies; no more tinned drinks**

**You can now get fruit, pasta, Jacket potatoes; no tinned fizzy drinks anymore**

**There are fruit, pasta, jacket potatoes, beans on toast available**

**The menu now has jacket potatoes, pasta**

**Yes, more fruit and healthy options on the menu**

**Yes, jacket potatoes and fruit**

**Yes, there are more healthy eating options including jacket potatoes, pasta and fruit**

**They now have jacket potatoes with a variety of filling**

**There is more healthy food, like jacket potatoes and fruit**

**I have noticed there is fresh fruit available now and the jacket potatoes are good**
All of those interviewed at the centre were supportive of the changes that had been made and supportive of moves to improve the nutritional balance of the vending offer.

Others more clearly supported the principle of excluding unhealthy fare from the machines, altogether.

Yes, it is much better for the children for them to have balanced food

Yes, I like to try and feed my family healthy food and it has now become more possible with these changes

Yes, it helps to make children choose a healthier option, especially younger children it encourages them to eat healthily

Yes – I think the changes are brilliant

Yes, I tend to train and keep an eye on diet and nutrition, so having these options at the centre would encourage me to eat more healthily when I am here

Yes, healthier options for my children are a very good idea and a way forward to healthier eating

Yes, I support anything that gives you healthier food

There is a good offer on jacket potatoes and pasta; you get a free bottle of water with any of the two with one filling in the potato with side salad. It is also good not to have fizzy drinks available anymore

The menu is very nice and I agree with getting rid of fizzy drinks

It’s very nice food. I agree with getting rid of fizzy drinks; the new slush is better as it is 99% fruit

The menu is varied and soft drinks have been taken off the shelves

Everyone has their own choice healthy or unhealthy

There is a good range of healthy foods

It is good as it encourages smaller children to eat healthy by encouraging them to eat pasta and baked potatoes

There is a balanced variety

They [the sorts of food on offer] are much better. I never use the vending machine just the canteen

I think it’s quite good
3.6.5 **Examples of Good Practice and Positive Outcomes**

All of the centre managers felt that lasting, sustainable changes had been made at the centres, and surprise was expressed at how well jacket potatoes were selling even after the pilot project. It was estimated that, at Bangor Swimming Pool, sales of healthy options across the board were up 30% on the previous year. Participation in the healthy lunches at the Tennis Centre and Plas Ffrancon had risen from the previous year, some 50% in the former case. At Plas Ffrancon, fry ups and burgers had been removed from the menu permanently.

One of the managers summed up by saying: *’I think the main lesson was that we were not providing enough healthy options before.’* The awareness, stimulated by the pilot project, of the need to improve can be viewed as a positive outcome in itself.

3.6.6 **Barriers to Progress**

Low take-up of the free fruit provided to young people and the fact that young people were prone to messing about with the whole fruit was said to have been a negative experience. The manager of Bangor Swimming Pool felt that making smoothies in the café was time-consuming with only one member of staff there at certain time, hence lack of smoothie sales. Getting staff ‘on side’ was also said to have taken some time at one centre.

3.6.7 **Conclusions and Consultant’s Comments**

On the whole, the pilot project at Gwynedd appears to have been successful. All of the key commitments have been met, and the staff delivering the pilot were keen to stress that the work should continue after the pilot project comes to an end. The likelihood of these centres improving further is, in our view, supported by the fact that over the course of the project, managers appeared to be looking for other ways to improve beyond the terms and stipulations of their grant funding. Some significant improvements in the catering offer have been observed coupled with a county-wide push to phase out sugary carbonated drinks from vending machines. The county has a good basis to move forward with future improvements.
3.7 General Conclusions on the Case Studies

This section is an analysis of some of the key conclusions drawn from the Case Studies presented above. Some of the conclusions made in individual sections above are valid in relation to the specific pilot project delivered and as such are noted in the relevant case study. However, this section details those conclusions that have general significance for the pilot as a whole and for the future development of the project if it is to go forward.

3.7.1 Conclusion

Some centres have clearly found difficulty in delivering their commitments and in sustaining the improvements that they have made even over the course of the pilot project itself. This has normally been due to staff illness, turnover or through internal delays occasioned by difficulty in commissioning services.

Evidence
See 3.1.5, 3.2.6, 3.3.5, 3.4.5, 3.5.7

3.7.2 Conclusion

The capacity-building approach based on training and frontline staff involvement in changes resulting from the healthier catering enterprise is one that can be considered good practice, which can be replicated elsewhere. This is especially so given the problems with staff ‘buy-in’ identified by pilot project managers and other practitioners (see 5.3.5).

Evidence
See 3.3.4 and 3.3.7

3.7.3 Conclusion

Monitoring and gauging demand for healthy options and providing accordingly was a proven success at the project which undertook this analysis. It also resulted in an increase in revenue, where customers were offered a choice between healthy and less healthy food and drink.

Evidence
See 3.1.3 and 3.1.4.
4. **Aggregated Findings of the Interviews with Centre Users**

4.0 **Introduction**

This section is an analysis of the 212 qualitative interviews undertaken with centre users during the course of this evaluation study. The short interviews were conducted in the public areas at each centre. The interviewer’s brief was to target members of the public seen to have used the vending machines and catering outlets and to ask them a series of questions relating to their awareness of any change at the centre, the impact of any perceived change, and to comment on their own awareness of the need to eat healthily and the role of leisure centres in facilitating and balanced healthy diets.

Given the diversity of participating centres’ starting points and the pilot projects themselves, along with the fact that they were commission based on each individual centres’ needs and aspirations, rather than an overall strategic basis, means that the impact of the changes is difficult to aggregate into a common user experience. The findings relating to users’ awareness of changes and the impact of these changes was, for the most part, dependent on these local factors such as the type of provision offered at each centre, the centre’s initial baseline and the prominence given to any changes made through marketing and publicity.

Some of the findings of the interviews with users, subsequently, do not lend themselves to aggregation and whole programme analysis. Where they are locally specific, the findings are considered under the Service Users heading in the relevant local authority Case Study in section 3.

This section analyses the data collected which can be aggregated to give an overall picture of users’ views. The section therefore analyses the data relating to:

- Awareness of the need to eat and drink healthily;
- The role of leisure and sports centres in facilitating healthy consumption;
- Users’ views on how this should be achieved.

4.1 **Awareness of the Need for a Balanced Diet**

Only two of the 212 centre users interviewed were not aware of the need to eat a balanced diet which is low in saturated fat, salt and sugar. However, when our interviewers probed beyond this, a number of discreet response groups emerged.
4.1.1 For most of those interviewed, eating healthily was something they were aware of but
would not always practice. A number of reasons were cited, such as temptation, time and the need for a treat. A few
users also felt that they were not always informed about nutritional content to make an informed decision.

I know what’s good for me. Some people may say a bacon roll is unhealthy but I’ve earned it after a swim
I’m very aware [of the need to eat healthily], but sweet stuff is very tempting
I’m quite aware, but I just like the bacon bun
I really keep my eye on what I’m eating but I like to have more information sometimes on what the latest information on what is good and bad
It’s all very well knowing what’s good for you but if you fancy a chocolate bar . . .
I know what’s good and bad everyone knows, you get tempted by chips and chocolate though
Yes we are aware, but we don’t always practise healthy eating

4.1.2 For another group of interviewees, awareness was still high, but choice was also
seen as important to preserve.

I’m really aware the chips and kids meals are not healthy but you can’t dictate to people; just make
sure there is a selection
It’s really important, yes, but you can’t force people to eat and drink all healthy stuff though
The chocolate and cans are unhealthy, but I think people should choose for themselves

4.1.3 Others interviewed saw healthy eating as part of an overall healthy lifestyle that they were
attempting to follow. For many of this group, eating healthily was closely related to exercise. Some spoke of not jeopardising fitness gains made by exercise through poor diet.

I’m very aware about diet. I’ve lost a stone and I’m really working hard not to put it on again. I don’t want to eat stodgy stuff
It quite central to my life. I always come to work out here and I watch what I’m eating
We are very careful. Chips and crisps and cakes are not good for the waist line!
We are very careful about what we eat - the swimming makes you think about it
We’re very aware, I’d say. We practise it at home, we have two foster children and we are trying to get them to understand the need to eat healthy food
Yes, because of our health problems we need to eat a healthy diet
I am aware, I work out myself, the water and fruit packets they sell here are ok
As many of the centres were based on school sites, our interviewers were also asked to speak to school pupils in order to collect their views on the subjects addressed. This was especially important given that they were often the most frequent users of the centre’s vending and catering facilities.

**4.1.4 Most of the school pupils interviewed** were especially aware of the need to eat healthily, with many citing school activities and lessons as well as media publicity as responsible for their awareness. Some also stated that their parents were conscious of the need for healthy diet,

| I do nutrition at school. The water and fruit packs are good the crisps sweets and chocolates and fizzy pop are not |
| Really aware, it’s like the schools healthy eating thing. It’s not much healthier here, though, except there is more water |
| Yes it’s all everywhere, school, TV. We do it at school you can do both healthy and unhealthy here, it’s alright as long as you do both |
| We do it at school. Raisins dried fruit squash is healthy, chocolate isn’t too healthy |
| Yes do it at school but my mum and dad teach me too, the apple and yoghurts are healthy |
| We do it in PSE and at home mum gives me healthy food sometime |
| My parents help me be aware and they don’t buy bad food at home any more |

**4.2 The role of Leisure and Sports Centres in Promoting and Facilitating Healthy Diet**

One of the paradoxes noted by some of the practitioners consulted during this study was the fact that centres are at the forefront of the campaign to increase levels of activity and participation, but were not currently offering healthy vending and catering options to complement this (see 5.1.1). In order to determine where users of centres stood in relation to this question, we asked for their views on whether or not centres should have a role in the promotion and provision of healthy food and drink.
### 4.2.1 Almost all of those who were interviewed were of the opinion that leisure and sports centres **should be places where healthy food was available**.

Some noted the **irony of the current situation**, where people came to centres to become exercise and become healthier whilst having no healthy choices for their post-workout snack or meal.

<table>
<thead>
<tr>
<th>It’s a fitness place. It should be healthy food</th>
</tr>
</thead>
<tbody>
<tr>
<td>It’s a waste of time if you go swimming and then put the calories back on</td>
</tr>
<tr>
<td>It’s mixed messages for kids, healthy living in gym and unhealthy food</td>
</tr>
<tr>
<td>A health centre is to promote fitness and well being so it needs things like prepared fruit salads</td>
</tr>
<tr>
<td>Defeats the point of the leisure centre to eat healthily promotes healthy living</td>
</tr>
<tr>
<td>They need to promote health in the sport and food side of things - they go together</td>
</tr>
<tr>
<td>They should encourage healthy living</td>
</tr>
<tr>
<td>Leisure centres are about Sport activities and should have food to match</td>
</tr>
<tr>
<td>In all centres it’s all unhealthy food – it’s hypocritical</td>
</tr>
<tr>
<td>You come here to get fit not eat chocolate</td>
</tr>
<tr>
<td>If you work out and you don’t want to ruin it you want healthy food</td>
</tr>
</tbody>
</table>

### 4.2.2 Others were **similarly supportive** of the need for healthy options at centres, but they emphasised that people ought to have a **choice** in the matter of what they bought.

<table>
<thead>
<tr>
<th>It’s important but people want a choice so you can’t take everything away because you think it’s bad</th>
</tr>
</thead>
<tbody>
<tr>
<td>It’s important to have choices but they shouldn’t get bogged down in it</td>
</tr>
<tr>
<td>Yes important the more on offer and choice it may change eating habits especially for kids</td>
</tr>
<tr>
<td>If people see a choice they are more likely to think about it before they buy fatty stuff</td>
</tr>
<tr>
<td>There should be a good selection because you come here to work out</td>
</tr>
<tr>
<td>They should promote healthy selection</td>
</tr>
</tbody>
</table>
### 4.2.3 Also worth noting is the concern shared by interviewees across a range of age groups for **young people**, the messages and they were receiving and the options available to them.

- It’s mixed messages for kids, healthy living in gym and unhealthy food
- Very important you need to educate children and sway them to choose healthily
- It’s important but I think that the mums and dads should be watching what their kids eat at home too
- It is important. There are a lot of obese children. It’s up to the parents too though they need to look at what is on the table at home
- Very, very important, the kids need to understand about proper eating habits
- It’s really important because it’s an example to the kids and it’s supposed to be a healthy place
- It’s the perfect opportunity to provide healthy options when kids are straight from school because everyone’s hungry

### 4.3 Barriers amongst Users of Leisure and Sports Centres to Eating and Drinking Healthily

We asked interviewees to comment on the barriers that they faced to eating healthily, both at sports and leisure centres and more generally.

| 4.3.1 Convenience, accessibility of unhealthy options and inaccessibility of healthier options at centres were the main barriers cited by interviewees. | If what [healthy option] I want is not on offer
If it [a healthy option] is not available.

- Nothing [healthy] on offer
- Chips being on offer!
- They don’t do the sandwiches anymore
- Lack of choice, but that’s not really what the centre is for
- If I’m in a hurry and very hungry
- It’s same wherever you are as long as it’s available [unhealthy options] ill probably choose it!
- Just if I’m really busy
- I can choose chips and gravy so will have that over an apple
- I suppose it’s the choice in the machines |
### 4.3.2 Temptation

was also a factor for some, both within centres and in general life, although it is worth noting that temptation is only made possible by availability.

Some also cited **special occasions, going out, drinking alcohol** and feeling deserving of a **treat** as factors preventing them from following a healthy diet.

I go for the sweet stuff!

At home I’m often tempted by the fridge of if I’m bored that’s why I come to gym to stay busy!

The 20p sweet machines are always tempting

Off days, and being tempted by chips

Celebrations . . .

Drinking out at night . . . .

Special occasions . . .

Parties aren’t too good

You’ve got to have treats!

Just me and wanting chips

[I eat healthily] unless I’ve been down the pub

Just me being a greedy pig!

### 4.3.3 Cost

was cited by some people as a barrier, with some interviewees stating that healthy food was more expensive, both at leisure and sports centres, and beyond.

It [healthy food and drink] is too expensive

It [healthy food and drink] costs a lot

Money

Price is an issue - healthy food is more expensive

### 4.4 Proposed Changes to Leisure Centre Vending and Catering

Users were also asked to comment on the changes they would like to see made at leisure and sports centres which would improve the food and drink on offer.
4.4.1 The largest response group were those who advocated **reducing the unhealthy vended food and drink available at centres**, although only a few went as far as to advocate an outright ban on unhealthy produce. Many spoke of altering the balance in favour of healthier food and drink.

<table>
<thead>
<tr>
<th>Offer less chocolate and fizzy drinks and more bars like cereal bars</th>
</tr>
</thead>
<tbody>
<tr>
<td>Just one row of crisps and stock up on more fruit</td>
</tr>
<tr>
<td>Take quite a bit of the chocolate out and have a different ratio of good and bad (more good)</td>
</tr>
<tr>
<td>Less chocolate they should put things like celery sticks in the machines</td>
</tr>
<tr>
<td>Get rid of the vending machines!</td>
</tr>
<tr>
<td>Take away the fizzy drinks in the machine</td>
</tr>
<tr>
<td>Take the sweets machine away maybe</td>
</tr>
</tbody>
</table>

4.4.2 Similarly, others felt that getting rid of or reducing the **fast food** served at catering outlets was an important step.

<table>
<thead>
<tr>
<th>Not offer chips with everything</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get rid of the chips</td>
</tr>
<tr>
<td>They should have more chip free days</td>
</tr>
<tr>
<td>Take away half the menu - the half with chips!</td>
</tr>
<tr>
<td>Probably take away the fried food</td>
</tr>
<tr>
<td>Stop the burgers – less deep fried food</td>
</tr>
</tbody>
</table>

4.4.3 Others felt that **introducing more healthy options** were the best way to encourage healthier diets in users.

<table>
<thead>
<tr>
<th>I would have fruit, brown bread sandwiches, light crisps, healthier low fat kiddie stuff</th>
</tr>
</thead>
<tbody>
<tr>
<td>More choices in the café like wraps and baguettes</td>
</tr>
<tr>
<td>More fruit more variety on carousel and salad bowls</td>
</tr>
<tr>
<td>Fast food but healthy options like sandwiches and fruit</td>
</tr>
<tr>
<td>More snacks like sandwiches</td>
</tr>
<tr>
<td>Fruit and sandwiches</td>
</tr>
<tr>
<td>More choice of fruit</td>
</tr>
<tr>
<td>Need more fruit and yoghurt on display</td>
</tr>
</tbody>
</table>

4.4.4 Finally, **cost** was an issue for a number of users, who felt that healthy food and drink ought to be **made affordable**.

<table>
<thead>
<tr>
<th>Price is an issue – healthy food is more expensive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Make it cheaper and put on a variety of rolls</td>
</tr>
</tbody>
</table>
4.5 Conclusions

This section is an analysis of the conclusions drawn from the data collected and analysed above.

4.5.1 Conclusion

Awareness of the need to eat and drink healthily is, on the whole, widespread and the vast majority of those interviewed had a basic understanding of which of the foods on offer at the centres were high or low is sugar fat or cholesterol. However, this awareness was not by itself, enough to stop people from habitually eating unhealthy food. The main barriers to eating healthily were said to be convenience, accessibility of unhealthy food, inaccessibility of healthy food, temptation (which is itself a product of availability) and the need for a ‘treat’.

Evidence
See 4.1, 4.1.1, 4.3.1, 4.3.2.

4.5.2 Conclusion

There is strong evidence to suggest that most users support in principle interventions that would lead to improvements in the food and drink on offer at centres. However, four main sub-groups of opinion are discernible within this spectrum of opinion:

- A small group who support a blanket ban on unhealthy food and drink and view this change as supplementing and supporting their healthy lifestyle which includes use of sports facilities;
- A sizable sub-group that supports the idea of a blanket ban, but were still prone to the barriers outlined in 4.5.1. For this sizable group, it is very difficult to imagine that a ban on unhealthy food and drink would have the effect of changing their habits, drastically. Indeed, there is a danger that for this group, a blanket ban which does not offer attractive alternatives to the current offer will merely move the problem and lead to them purchasing unhealthy food elsewhere;
- A group who supported the principle of offering healthy options but gave no indication of what sort of system they would like to see;
- Finally, the discrete largest group were those who support the principle of offering healthy food and drink, as part of a range of options. The accent for this group was very much on giving people options, and educating them to take the best option.

Evidence
See 4.1.2, 4.1.3, 4.2.2, 4.4.1 and 4.4.3

4.5.3 Conclusion

Amongst young people of school age, awareness is very high, and many made direct reference to the fact that they had studied nutrition at school through PSE lessons, or other school-based activities.

Evidence
See 4.1.4
5. **Whole-programme Analysis of Practitioner Experiences**

5.0 **Introduction**

This section of the report is intended as an analysis of practitioner experiences that have ‘whole-programme’ significance. Whereas the Case Study chapter (Section 3 above) concentrates on practitioners’ specific achievements and challenges as they relate to local conditions of delivery, this section is intended to give a more general, aggregated view of the common experiences and lessons learned over the course of the pilot projects by those delivering and managing them.

5.1 **Reasons for Taking Part in the Pilot Project**

All of the pilot project managers took part in the project with the straightforward objective of improving the nutritional value of the food and drink on offer at their centres, and giving their service users a greater choice.

<table>
<thead>
<tr>
<th>5.1.1 Some acknowledged the irony in their position – having a responsibility for the promotion of fitness and healthy living, on the one hand, and their inability to provide their customers with healthy choices.</th>
<th>We expect people to work up a sweat at the gym and when they come out we can’t offer them anything fresh or healthy. It’s mainly chips.</th>
</tr>
</thead>
<tbody>
<tr>
<td>We’ve been aware for some time that things need to change – we’re promoting fitness but the machines were stacked with chocolate bars and sugary drinks and nothing else! The issue was about how we change, not about whether we do</td>
<td></td>
</tr>
<tr>
<td>5.1.2 For others, the issue was more about widening the choice available to their customers. In spite of longer-term, aspirational commitments to phasing out unhealthy products from catering and vending services completely in their bid documentation, none of the authorities had managed to do this over the course of the pilot.</td>
<td>It’s about giving people options, some nutritional, some maybe not so nutritious, but ensuring that the options are available and people are aware of why one is better than the other.</td>
</tr>
<tr>
<td>It’s about supplying an alternative, offering a choice and explaining what the benefits are.</td>
<td></td>
</tr>
<tr>
<td>We want to raise awareness and give people a choice wherever possible.</td>
<td></td>
</tr>
<tr>
<td>5.1.3 Some officers also saw the project as part of a wider drive to change attitudes and behavioural patterns, endemic in the communities they served.</td>
<td>We’re trying to change the historical eating patterns of those using the centres.</td>
</tr>
<tr>
<td>There is a legacy of poor health in this area, a lot of it based on bad diets. It’s a question of trying wherever we can to give people healthier options and change their perception.</td>
<td></td>
</tr>
</tbody>
</table>
5.2 **Positive Outcomes**

We asked each officer interviewed to reflect on what the positive achievements were. The commonly-cited and more general outcomes which were reported are shown below.

<table>
<thead>
<tr>
<th>5.2.1 By far the most notable and common outcome for authorities was the pilot project acting as a stimulus to take forward the healthier catering and vending agenda, and for building sustainable improvements. As noted elsewhere in this report (see 5.1, 6.1 and 6.4.2), authorities are generally aware of the need for change but many have lacked the stimulus and framework to implement that change.</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.2.2 Another point raised was the fact that a number of centres had seen an increase in revenue, although it must be stressed that in all cases this was on the basis of mixing healthy with the traditional less healthy food and drink already on offer. No centre had eliminated unhealthy produce from its vending or catering offer.</td>
</tr>
<tr>
<td>We’re more consistent now as an authority as a result. We’re looking at going authority-wide with some of the products [introduced under the scheme]. It’s given us the kick start we needed!</td>
</tr>
<tr>
<td>As a manager it’s made me think. It was kind of like the missing piece of the jigsaw – it gave us the push to achieve what we wanted to and knew we should. We can say to our clients now, ‘Come and do your exercise, be healthy and you can now eat healthily too!’</td>
</tr>
<tr>
<td>It’s helped us to move in the right direction certainly</td>
</tr>
<tr>
<td>It’s been a good start to a longer term goal</td>
</tr>
<tr>
<td>It’s complemented what we were already doing and helped us to go further than we would have been able to, I think</td>
</tr>
<tr>
<td>It has been really helpful having the funding to buy the necessary equipment as it has allowed us to put our visions into practice. Also having the equipment gives the project an element of sustainability, it meant we were not just giving away fruit, but that we have the equipment available to carry on providing healthier options after the pilot has finished</td>
</tr>
<tr>
<td>It’s opened our eyes to the fact that the demand [for healthy produce] exists, and I think that’s why revenue is up. But there are still the people who want to buy the fizzy drinks and chocolate. It’s just that, now people have more choice</td>
</tr>
<tr>
<td>An increase in profits and a decrease in people choosing unhealthy options</td>
</tr>
<tr>
<td>Income is up on this time last year</td>
</tr>
</tbody>
</table>
5.2.3 A number of project managers and officers noted some changes in the attitudes of customers towards what was on offer at centres.

Our customers are beginning to ‘get it’

Customers [are] changing the choices they make and opting for healthier options

I think we have had an impact on younger children and they seem to be making more informed choices about the way they are eating and drinking

I’m convinced the children will buy the healthy stuff. We’ve seen the demand for it, but it has to be seen as attractive; has to be ‘sold’ to them

5.3 Barriers and Difficulties Encountered

The table below lists some of the more common difficulties encountered amongst projects during the pilot.

5.3.1 As noted elsewhere, none of the centres or authorities involved in the pilot project managed to make the transition to a model based on completely healthy vending and catering provision. There were however, widespread long-term aspirations to do so and an understanding of the reasoning for this course of action. The risk of losing revenue was the main barrier to this course of action, as it was for the non-participating authorities interviewed (See 6.4.1).

Many noted that centre users wanted unhealthy options or at least the choice to purchase them, and might go elsewhere for their snacks if they were denied choice.

In the longer term we would like to phase out the unhealthy stuff. It’s what we do to plug the [revenue] gap that will decide whether we will or not

We would support that in principle. But if we were looking to go totally healthy then funding is the issue. We have income generation targets and pressure from our managers

We will need help if we are to go completely healthy. Whether that’s through subsidy or funding for the transition I don’t know, but the revenue side of things is a consideration

Unless there is a sea-change in public attitudes, it will be very difficult to go much further [in terms of reducing less healthy food and drink available]. We’ll be looking at running at a loss

The budget is difficult this year and the authority is already looking for ways to generate more income

We would have liked to have totally healthy, but vending contracts and revenue stopped us. The will exists, it just that there are other factors

Having an offset budget to compensate for loss from the start would have been good. We could have experimented more perhaps
### 5.3.4 In spite of the improvements to facilities made under the pilot project, some difficulties in this area still remained. The **physical infrastructure** of several leisure centre buildings, it was felt, did not lend themselves to the provision or storage of healthy food.

We are tied into a contract where there is a limit to the healthy stuff on offer

The vending contract with [supplier’s name] is an issue. We can’t put anything else in their machine, other than what they provide, and not much of it is healthy

We would have liked to have totally healthy, but vending contracts and revenue stopped us. The will exists, it just that there are other factors

Our buildings and kitchen facilities are not suitable really. They have deep fat fryers and no refrigeration space. It’s impossible to store fresh produce. The deep fat fryers need to be ripped out and replaced with ovens and fridges

The kitchen is too small and was an afterthought when the centre was designed

Physical constraints. There’s not much preparation space, and preparing fresh food requires storage and preparation space. Our kitchen is too small for this

### 5.3.5 Several projects pointed towards the difficulty they faced in relation to **staff knowledge, attitudes to change**, ensuring ‘buy-in’ and relying on frontline catering staff to drive the improvement process. It is worth pointing out that the staff training piloted at Neath Port Talbot achieved some notably positive outcomes in ensuring that staff feel they have the knowledge to implement changes and ownership of any changes to their working practices (see 3.3.4).

It’s been difficult to get staff on-board. Perhaps training is the issue

We would like staff to receive training on what is healthier. It would be good to work alongside nutritionists or dieticians. We all really need some more background knowledge to inform what we do

Trying to get all members of staff to promote the healthier options. It wasn’t a huge problem but it takes a while to get staff on side and to be thinking along healthier lines when they have been working differently for a long time

It had to be a gradual change, and not too painful for staff. Anxiety was very high, particularly for the older members of staff who have been here for some time

A healthy catering training budget for staff would be worth thinking about
5.3.6 As insignificant as it may initially sound, one of the common difficulties faced by three of the pilot projects concerned some of the one-off promotional events where fruit was given away to children and young people. A number of those interviewed learned very quickly that giving whole pieces of fruit away to young people would often result in poor take-up, or it being thrown away or used in food fights. This perhaps reflects a deeper problem, identified elsewhere in this report (see 6.5.2 and the final comment in the table in section 5.2.3), that appropriate and attractive packaging of healthy options to young people is important. Young people are used to being aggressively marketed with attractive, bright packaging and a wide range of choice and bite-sized portions where snacks are concerned.

The throwing of fruit around the centre was a big issue. We did come up with alternatives to counteract this such as giving away smoothies instead

We have had difficulty getting secondary school pupils to take up the fruit options

When giving away free fruit, it is not a good idea to give whole fruits to children as they will throw them away and dispose of them quite badly. We found it was more likely to be attractive to the children if it was cut up. We are also going to consider mixed bags of fruit in the future

We tried giving away whole fruit, but the kids just messed about with it. [After the event], we found it in the drains, in the toilets, everywhere

5.4 Moving Forward

We asked each of those interviewed to comment on a range of issues with regard to moving forward with the healthy catering and vending agenda, building on the pilot project, and what they feel needs to be done at national level to help authorities improve the food and drink on offer.
5.4.1 Most of the centres intended in some way to build on the work, through continuation of changes made under the pilot project, further experimentation with new products and more gradual longer-term aspirations towards sustainable improvements.

Only one authority, which was starting from a higher baseline than most others, said that there were no immediate plans to move forward.

5.4.2 There were several calls for future strategy and activities at Welsh Assembly Government level to include a standardised set of healthy vending and catering guidelines, along with the supporting consistently-branded publicity materials for customers. The point was made that a great deal of confusion existed as to what was considered ‘healthy’, not only in the mind of the public, but also amongst the staff that were responsible for catering and for stocking vending machines.

We have to finish what we have left to do [under the pilot]. It’s about educating the public, our customers. We have quarterly meetings and in these we look at where we can introduce new products.

As a council we are trying to ensure that we are all going down the healthier options route. It is difficult in the centres where the café is contracted out as we have no control over content in these, but in all those where have control, we are trying our best to ensure that healthier options take precedence over the unhealthier. We have already been trialling healthier drinks now that all the coke machines have been removed.

We are always building; our whole café menu has changed. We are making a concerted effort to push the jacket potato option and are reviewing the fillings to make them more appealing and healthier.

We intend to promote the smoothies more in half term holidays and our long term goal is to be able to offer them in the café, we will now look into the option of using frozen fruit instead of fresh to cut down on preparation time and wastage.

I think in the immediate future it will be through small steps. Looking at where we can make small sustainable changes to catering practices, and what we have on offer to customers.

There should be a national campaign of promoting and advertising the benefits of healthier eating. I would also like to see the creation of some national guidelines on products that are available, for example are Tracker bars really a healthier option? I think that way there will be a consistent measure getting out there.

I would like to see healthy eating ‘branding’ established nationally.

I think it needs to be more cohesive, bringing the messages together about what is good and bad and why.

There needs to be a national campaign in Leisure centres.
5.4.3 Others called for the facilities and infrastructure to be put in place, to make the aims of the pilot project sustainable in the longer term.

Funding for infrastructure would be the best way of moving forward

We need to build up the facilities across Wales. Funding for machines so that we can control what we vend

5.4.4 There only a small number of calls for the Welsh Assembly Government to make up the funding gap for revenue that might be lost whilst authorities were making the transition to completely healthy catering and vending. Other asked that this be taken into account when future strategy is planned.

We will need help if we are to go completely healthy. Whether that’s through subsidy or funding for the transition I don’t know, but the revenue side of things is a consideration

If WAG was prepared to underwrite our losses for a certain period, while we’re finding our feet that would make things easier

5.4.5 Finally, most of the projects felt that some long-term support to help them become both healthy and sustainable in terms of vending and catering output would be welcome.

We’d need some support on how to make revenue elsewhere that would be lost if we were to ‘go healthy’. It would be interesting to see if anyone has done this and how they did it

I hope WAG see this as a long-term project. We’re happy to go down this road, but they must be mindful of the financial constraints under which we are working and help us to overcome them

I like the idea of having some support, say in putting a business plan together, identifying potential new income that will stop us relying on the income from vending

5.5 Conclusions

This section is a summary of the main conclusions drawn from the information presented above.

5.5.1 Conclusion

The progress made during the pilot programme has been made on the basis of a choice-based model of provision, which offers healthy options alongside less healthy food and drink, and has allowed customers to choose healthy options without threatening the revenue generated by the existing products on offer.

Evidence
See 5.1.2
5.5.2 Conclusion

The pilot project has clearly acted as a catalyst for centres and authorities to begin the process of making their catering and vending offer healthier. In spite of broad agreement that the produce on offer at centres should be healthier, until the pilot, many of the centres and authorities lacked the stimulus and guiding framework to get them started.

Evidence
See 5.2.1 and 5.4.1

5.5.3 Conclusion

Clearly the greatest barrier faced by those who took part in the pilot project is an anticipated loss of revenue, were they to pursue a 'totally healthy' model of vending and catering. However, it is also worth noting that most project representatives were open to the idea of helping to offset any loss made by identifying new revenue streams and business models through a programme of supported planning.

Evidence
See 5.3.1, 5.4.5

5.5.4 Conclusion

Lack of staff knowledge and ‘buy-in’ has clearly been a difficult issue for many centres. Proposed changes to existing working practices and the lack of experience amongst front-line staff in putting together healthy options were identified as a problem for some of the pilot studies.

Evidence
See 5.3.5

5.5.5 Conclusion

The packaging of fruit and other healthy items to appeal to young people has been a lesson that has been learned by several pilot projects.

Evidence
See 5.3.6

5.5.6 Conclusion

There was wide-ranging support for a nationally branded and standardised system for classifying foods likely to be sold at centres as healthy and unhealthy in order to provide guidance to both staff and customers.

Evidence
See 5.4.2
6. **Non-participating Local Authorities**

6.0 **Introduction**

At the inception stage of the Healthier Catering in Leisure Centres Pilot Initiative, every local authority in Wales was invited to participate in the scheme by the Welsh Assembly Government. As part of our whole programme evaluation, we were also asked to conduct telephone interviews with representatives from local authorities that had not taken part in the scheme in order to identify the reasons for their non-participation. In addition, we asked for opinions on number of key issues relating to Healthier Catering and Vending. This section is an analysis of the responses gained.

We conducted a total of 11 interviews with representatives from these authorities. As per the original contact list used to invite authorities, our interviewees were Chief or Principal Leisure Officers and Leisure Managers. However, in one case we interviewed a Catering Manager who his colleague felt was better placed to comment.

6.1 **Reasons for Non-Participation**

This section details the reasons for non-participation, according to interviewees.

6.1.1 Of the eleven officers interviewed nine were *not aware* of the existence of the pilot project. All who offered an explanation cited internal communication difficulties such as, letters not reaching correct recipients, or information not being ‘cascaded down’ to people in a position to act on its contents.

6.1.2 Eight of those who did not know about the pilot project said that they would have liked to *have taken part* had they known. These authorities were Wrexham, Ceredigion, Monmouth, Newport, Carmarthenshire, Anglesey, Bridgend and Flintshire,

6.1.3 The Vale of Glamorgan (who knew about the pilot) and Conwy (who did not know about the pilot) authorities told us that they did not take part, as they either have *strategies in place* to improve their centres already or *reduce their catering and vending operations*.

6.1.4 The officer interview from Denigshshire, did know about the pilot project but was under the impression that the project was *solely for the improvement of catering facilities*, which the authority does not operate in its centres. Had the officer concerned known that the project included vending; his authority would have taken part.

6.2 **Existing Strategies at Local Level**

Interviewees were asked about their awareness of the Food and Fitness Action Plan and if they had any consequent strategies operating at local authority level to improve the nutritional value of their catering and vended produce.

6.2.1 All interviewees bar one were aware of the Food and Fitness Action Plan.

6.2.2 Only *two authorities* had any specific activities underway at the time of the interview to take forward the plan’s aims on healthy catering and vending at leisure centres. One commented *‘We’ve been working with our Catering Department on vending machines. But we need a corporate policy statement on the issue, which takes account of the issues around the potential for lost income. We are currently piloting some healthy options in centres.’* Another stated that his department was *‘Working with the LEA. We’ve developed a Healthy Catering Strategy for schools, but we’re looking at leisure centres currently.’*
6.2.3 Many authorities had **Healthy Schools Schemes** and officers and had been working with schools to produce healthy schools meals. Others, with centres on split school / leisure facility sites, had agreements with schools to switch off vending machines during school breaks and lunchtimes so that pupils were not able to purchase sweets and carbonated drinks at the centres.

6.3 **Support for the Pilot and its Aims**

Interviewees were asked whether they supported the pilot project and its aims.

6.3.1 All those consulted **supported the pilot project** and its aims. In fact when interviewees were asked to outline what they would like to see happen on this issue if there were no budget issues, the majority backed a blanket ban on unhealthy options in principle. However, in practice all those interviewed felt that this would unworkable in reality given the financial situation (See below 6.4.1). One commented: ‘In an ideal world, yes, you could have a hardline blanket ban, but to be effective it would have to everywhere. Not just picking on leisure centres.’

6.3.2 However, a number of officers were **sceptical** about a policy of simply stopping the sale of unhealthy options. For one it was a matter of personal choice: ‘It’s not my job to tell people what to eat or to think. We can encourage.’ Another felt that ‘We need to step up the awareness, I agree. But being too preachy will turn people off.’

6.4 **Barriers to Progress**

We asked each of the interviewees to talk about the barriers they faced to improving the nutritional balance of the food and drink on offer through their catering and vending outlets.

6.4.1 Perhaps unsurprisingly, the biggest challenge said to be facing those consulted in improving the produce in vending machines and catering outlets were anticipated poor take-up and major concerns over the possibility of loss of revenue:

- ‘Our people like to eat chip baps!’;
- ‘Education and delivering alternatives that young people will purchase, but with the location of our leisure centres that is difficult’;
- **We have tried some of the healthier vending options but we just end up losing [money] on it. And throwing food away’**;
- ‘There’s the issue of revenue, and employment. If we employ five catering staff in a centre, people will lose their jobs if we lose revenue’;
- **We have a healthier options vending machine [in one of our centres]. We opened it with a great deal of publicity. It has had limited results and shows nowhere near as much profit as a traditional vending machine’;
- ‘My concern is that if we have to go down this route, the costs of activities may have to increase. Vending machines are profitable and help to subsidise activities. If that subsidy were no longer there customers may end up having to pay the difference and this may stop people taking up the activities and it will therefore be self defeating if we have a decrease in physical activities because of it.’

This issue, more than any other, was the major barrier authorities faced, and was said to have led to a ‘paralysis’ where authorities invariably wanted to move towards healthier catering and vending output, but were reliant on the income generated by the public appetite for less healthy options.
6.4.2 Some interviewees spoke of the lack of a driver for change, contrasting the situation with the schools catering agenda. 'There’s a lack of awareness where leisure facilities are concerned, and no real push to change things, no policy or framework than we can commit to and say 'That’s our long-term aim.'"

6.4.3 **Vending contracts** were cited by some interviewees, with some authorities locked into three-year contracts with companies who did not provide healthy options. One local authority had been engaged in a legal battle with a vending company over precisely this issue.

6.4.4 Others cited a lack of knowledge amongst catering and leisure staff about which products were considered healthy and which were not. One commented: ‘It’s difficult. We look at [vending] catalogues and see milkshakes which people might think are healthy but we are told are full of sugar, the sports drinks people don’t realise they are full of sugar and designed for a specific purpose.’ Another agreed: ‘I think if staff knew what was good and bad we could at least buy the right things.’

6.4.5 The point was also made that many of the centres that had catering facilities were built in response to the leisure boom of the late 1970s and early 1980s. As such the catering facilities at some centres are unsuited to healthy catering and the increasing emphasis on centres as healthy living rather than ‘leisure’ facilities. This point was also echoed by one of the pilot projects (See above 3.2).

6.5 **Suggestions for Ways Forward**

We asked interviewees to comment on what they would like to see happening in the future to improve the situation.

6.5.1 The point was made that banning unhealthy produce from machines and catering outlets would only displace the problem, rather than solve it unless an integrated approach were taken. One commented ‘If we are just banishing the chocolate and soft drinks, we’ll just move the problem fifty yards down the road to the newsagents or whatever. People need to know why it’s not good for them and make a choice.’ Another stated: ‘I believe that even if we stop selling less healthy or unhealthy options, young people will just go elsewhere to buy them.’

6.5.2 Others commented that any change to policy on the stocking of vending machines would, therefore, need to be supplemented by a programme of education, publicity and incentives. ‘Healthy food needs to be branded positively, and made attractive, especially to young people [who are] used to bright colours and choice.’ Another stated, that: There needs to be a ‘carrot’ an incentive to buy healthy. Make jacket potatoes 50p and chips £1.

6.5.3 Many interviewees have requested that the evaluation report be made available to local authorities to help give them a future steer on things that have worked and not worked elsewhere.
6.6  Conclusions

This section is a summary of the main conclusions drawn from the information presented above.

6.6.1  Conclusion

Lack of awareness, in all probability occasioned by internal communication difficulties, was the principal reason that most non-participating authorities did not take part in the pilot project. Indeed, securing the interviews above provide a major challenge for our interviewers given that senior officers have so many demands placed upon their time. Given that most of those who did not know about the pilot would have liked to have taken part, we conclude that the project could have had an even wider impact had these authorities been engaged.

Evidence
See 6.1, 6.1.1, 6.1.2

6.6.2  Conclusion

The principles of the pilot project were broadly supported amongst this group, although there are differing positions on the importance of choice. There was also a feeling that a strategic driver was needed to take forward the agenda.

Evidence
See 6.3, 6.3.1, 6.3.2, 6.4.2

6.6.3  Conclusion

There are major concerns amongst the non-participating authorities on the possibility of losing revenue if local authorities are required to move away from stocking popular, but unhealthy, products.

Evidence
See 6.4.1

6.6.4  Conclusion

An integrated approach to solving the problem of unhealthy consumption was called for, with interviewees pointing out that a blanket ban without a supporting campaign would move, rather than solve the problem.

Evidence
See 6.5.1

7.0 **Introduction**

The purpose of this section is to place the Healthier Catering in Leisure Centres Pilot Initiative in its relevant policy context. This section is therefore reflective summary of the principal policy and strategic drivers that relate to the improvement of food, its provision in the public sphere and the general public health issue of balanced consumption and quality of food.

7.1 **Policy & Strategies at European Level**

A number of strategies and action plans have been developed at European level to tackle the issue of obesity and to promote healthier diets amongst citizens of member states.


The White Paper outlines four principles for action:

- Actions should aim to address the root causes of the health related risks;
- Actions are intended to work across government policy areas and at different levels of government using a range of instruments including legislation, networking, public-private approaches, and to engage the private sector and civil society;
- Action from a wide range of private actors including actors at a local level;
- Monitoring is essential to assess what is working well, what needs refinement or change.

The White Paper stresses a partnership approach at both a European level and in developing local networks. It also focuses on actions leading to better informed consumers, making the healthy option available, encouraging physical activity, focusing on priority groups and settings, developing the evidence base and monitoring systems emphasising policy coherence across member states.

7.1.2 **European Obesity Charter (World Health Organisation, November 2006)**

The World Health Organisation European Ministerial Conference on Counteracting Obesity aimed to:

- place obesity high on the public health and political agendas;
- foster greater awareness and high-level political commitment to action;
- promote international and inter-sectoral partnerships.

Member States adopted a European charter on counteracting obesity at the Conference, which calls for specific action, including regulatory measures that each country can take to tackle obesity.

7.1.3 **The Green Paper, Promoting healthy diets and physical activity: a European dimension for the prevention of overweight, obesity and chronic diseases (European Commission) September 2006**

The Green Paper was launched in December 2005 and invited consultation on a broad range of issues related to obesity, to gather information for a European dimension to tackling obesity levels in the EU. Over 260 responses were received, including responses from the governments of the EU, the public health community, the food industry, universities and the public. Most contributors called for a multi-sector approach, involving action and coherence across EU policies and many contributors called for particular attention to be given to children and young people and for better consumer information on nutrition, which is clear, consistent and evidence based.
7.1.4 EU Platform on Diet, Physical Activity and Health (The European Commission 2005)

The EU Platform on Diet, Physical Activity and Health, launched in 2005, operates under the leadership of the European Commission. The Platform aims to provide a common forum for all those at European level that are committed to tackling the EU wide increase in overweight and obesity. It brings together key players from industry, NGOs, consumer groups and political leaders to take voluntary action to halt and reverse the rise in obesity.

The Nutrition Network for Wales and the Physical Activity Network for Wales are represented on the Platform as part of a special interest group.

7.2 Welsh Policy & Strategies

There have been a number of key strategies and actions plans published in Wales, mainly by the Welsh Assembly Government, which relate closely to the agenda of the Healthier Catering in Leisure Centres Pilot Initiative.

7.2.1 Food and Fitness – Promoting Healthy Eating and Physical Activity for Children and Young People in Wales 5 Year Implementation Plan (Welsh Assembly Government, June 2006)

The implementation plan was produced, following consultation, to communicate the actions which will be put in place to improve the nutrition and levels of physical activity of children and young people in Wales. Its seven key commitments are:

1. Extending the Welsh Network of Healthy Schools;
2. Improving the Food and drink consumed in schools;
3. Providing high-quality PE, health related exercise and practical cookery skills;
4. Provide an environment which will encourage children and young people to access physical activity and healthy food;
5. Development of skills to enable children and young people to take part in physical exercise and prepare healthier foods;
6. Develop and deliver training on food and fitness for those working with children and young people;
7. Ensure that actions are evidence-based or innovative with evaluation and that findings are shared.

Under Action 4, there is an explicit commitment to ‘target leisure and youth centres from April 2006’ under which the Healthier Catering in Leisure Centres Pilot Initiative has been driven and funded.

7.2.2 Think Healthy Vending – Guidance on vending machines in schools (Welsh Assembly Government, May 2005)

This user-friendly document provides advice regarding the use of refrigerated vending machines in schools as part of a whole school approach to food and nutrition. During the pilot project it was distributed to participating leisure centres to provide them with some guidance regarding healthy vending. However, as it was developed with schools in mind, leisure centre managers have during this evaluation called for uniform guidance aimed at vending managers and catering staff at centres (See 5.4.2 and 8 Conclusion 3)

The document sets out the Welsh Assembly Government’s long-term strategy for sport and physical activity for the next 20 years. Climbing Higher focuses on those whose lives are ahead of them, and for whom lessons about sport and physical activity can be learned now and continued throughout life. The key themes and aims of the ‘Climbing Higher’ Strategy are:

- Education;
- Environment;
- Culture, Society, and Community;
- Economy;
- The World Stage.

Each of the themes is underpinned by a set of targets relating to participation and exercise levels, opportunities for participation, infrastructure as well as achievements in the arena of elite sports.

7.2.4 Quality of Food Strategy – Task and Finish Group Report (Welsh Assembly Government and Health Challenge Wales, 2007)

As part of the process of developing a long-term strategy, this document was published to ‘outline the gaps and challenges which the Task and Finish Group identified as needing to be addressed to improve the quality of food in Wales.

The report’s vision is ‘To enable all citizens in Wales to access healthy and sustainable food via a strategy which integrates the goals of public health, sustainable development, social justice, equality, diversity and human rights, agriculture, education, rural and urban regeneration, and citizen engagement, to improve nutritional health by raising the quality of food from farm to fork.’

The document contains a number of key proposed actions relating to:

- Food Production;
- Food Manufacturing and Processing;
- Distribution;
- Retail and Catering;
- Purchasing;
- Preparation;
- Waste and Disposal.

Specifically, related to the Healthier Catering in Leisure Centres Pilot Initiative, the section on Retailing and Catering refers to:

- The all-Wales healthy options awards, which will be piloted by local authorities in 2007/8 to encourage and motivate caterers to provide healthy options (p.29);
- There is reference to the Healthier Catering in Leisure Centres Pilot Initiative (p.30);
- The report also includes a section on Public Sector Catering, noting that its aim is to ‘transfer good practice being developed in schools, hospitals and leisure centres to all statutory / public funded institutions and services.'
7.2.5 The Welsh food Debate

At the time of this evaluation, as part of the process of further developing the Quality of Food Strategy, the Welsh Assembly Government was initiating a stakeholder debate. This was to take the form of stakeholder forums across Wales and written responses from interested parties.

Dr Tony Jewell, the Chief Medical Officer, launched the debate and invited comments and contributions from the public on range of issues relating to food quality, such as:

- whether healthy eating schemes should be rolled out across Wales;
- whether more healthy options should be made available from local convenience stores;
- whether there should be a greater choice of healthy foods in cafés and the workplace;
- how changes to the way we produce and consume food could help reduce Wales’ carbon footprint; and
- how more local food could be used in hospital, schools and care homes.

7.2.6 Appetite for Life – (Welsh Assembly Government, November 2007)

In November 2007, the Welsh Assembly Government published the Appetite for Life Action Plan which sets out the strategic direction and actions required to improve the nutritional standards of food and drink provided in schools in Wales. Its development was informed by: responses to a wide-ranging consultation exercise (which included children and young people’s views); lessons learnt from other parts of the UK; and detailed discussions with the Local Authority Caterers Association.

The Action Plan sets out seven principal actions, each of which are underpinned by a series of sub-actions, such as pilot projects, action research, and the development of resources, guidelines and appropriate publicity. The seven key actions are to:

1. Introduce and implement new nutrient, food and drink based standards;
2. Develop and utilise catering staff and equipment to maximum effect to support the delivery of change;
3. Support schools in developing a whole school approach to food and nutrition;
4. Develop and implement marketing and communication strategies that will support delivery of Appetite for Life at a local and national level primarily;
5. Develop and implement marketing and communication strategies that will support delivery of Appetite for Life at a local and national level primarily;
6. Collect and utilise data to help inform spending decisions and to improve transparency and accountability;
7. Review, develop, and establish monitoring, research and evaluation programmes to support the whole school approach to improving food and nutrition in schools.
7.3 Desk research on Leisure Centre Healthier Catering Models of Delivery

The purpose of this section is to identify any similar schemes or approaches that have been undertaken elsewhere (in the UK) and make an assessment of whether there is any good practice elsewhere that will help formulate the recommendations for this research.

7.3.1 Food and Nutrition Strategy for Anglesey Schools and Leisure Centres

On a local authority level; within Wales, the Isle of Anglesey County Council in partnership with the Anglesey Local Health Board and the National Public Health Service have worked with schools and leisure services to promote a healthy attitude to food and nutrition. Its key aims are to:

- Make healthy choices available in all schools and leisure centres;
- Help pupils to choose healthy meals, snacks and drinks;
- Work with parents, pupils and the school to improve food, nutrition and health;
- Promote food safety and hygiene in schools;
- Encourage pupils and parents to understand where food is sourced;
- Encourage use of local food in schools and leisure centres;
- Promote nutrition education within the curriculum;
- Provide school menus on-line on Isle of Anglesey County Council website.

Leisure centres and schools in the County are being asked to work towards a series of objectives, among them:

- Small increases in price on less healthy foods to subsidise lower prices on healthier foods;
- Reducing the amount of fat, sugar and salt in foods;
- Reducing processed foods in the menu;
- Promoting healthy eating options and hold promotional events;
- Maximising the use of local food in schools;
- Leisure centre cafés to offer healthy food choices;
- All staff to receive nutritional training;
- Vending machines in Leisure Centres to provide lower fat, very low sugar food and drink items that are also free from or very low in artificial additives.

7.3.2 Zest for healthy eating at Larkfield Leisure Centre

Beyond Wales, there are a number of schemes which have aimed to promote healthier catering at leisure centres through the positive branding of leisure centre outlets as places where healthier food and drink can be purchased.

OJ's, who run Café Zest at Larkfield Leisure Centre, have recently achieved Tonbridge & Malling Borough Council’s Healthy Eating Award in recognition of their efforts in promoting healthy eating in the community. Café Zest, which is managed by OJ’s at the leisure centre offers a wide choice of healthy meals, snacks and drinks in the cafeteria overlooking the leisure pool. The Borough Council’s Healthy Eating Award Scheme rewards food premises that take an active role in promoting healthy eating by making healthy choices available. An assessment by the Borough Council found that the facility uses healthy cooking methods and offers plenty of healthy food options, which are high in fibre and low in fat, salt and sugar. Any business in the borough that holds a Clean Food Award can apply for a Healthy Eating Award by first reviewing and adapting its menu and cooking methods and then contacting the Borough Council for an assessment. The Council's nutritionist will then visit the premises to see if the business meets the award criteria and, if needed, give free nutritional advice and tips on healthy cooking.
7.3.3 Ludlow Leisure Centre Development - Healthy Eating cafeteria that uses local produce

Some good practice examples we noted, beyond Wales, have approached the improvement of leisure centre food and drink within a wider strategy to improve the quality of food in the area in the context of:

- Moves towards using local produce;
- The quality of the tourist offer and visitor experience;
- The ‘slow food movement’;
- Local ‘quality marques.’

One such examples is Ludlow, a town with its own local produce ‘marque’ (Local to Ludlow), a thriving organic and ‘agri-food’ production sector and an increasing emphasis on its culinary visitor experience and brand. Teme Leisure Trust and Cittaslow Ludlow, South Shropshire District Council and Ludlow Food Festival have worked together to help put quality local food on the menu of the local leisure centre. Vending machines at the local leisure centre now stock ‘tasty, good-value snacks and drinks’ rather than high-fat, high-salt and high-sugar products. The Trusts catering staff have been instructed to seek out quality, local produce to put on the menu and drinks, snacks and meals with an emphasis on taste, quality and good health.

The town’s Food Festival introduced members of the Leisure Trust café team to local suppliers and helped them join up with initiatives like Local to Ludlow. In addition, the Executive Committee of South Shropshire District Council, as the owner of the leisure centre building, also agreed to assist Teme Leisure, the Trust managing the Centre, with funding the project by providing capital for some of the work in exchange for a reduction in future management charges.

7.3.4 Survey of Vending in Leisure and Sport Centres in East of England (Written by: Beelin Baxter, Regional Public Health Group, Analysed by: Jason Gwinnett, Regional Public Health Group)

Also worth noting is a survey of vending provision at leisure centres in England which was undertaken in 2005. Based on its survey results, the report notes that:

- Vending machines are a quick and easy point for food and drinks, allowing visitors to “grab and go” at their convenience;
- Vending is a profitable business for sport and leisure centres because of its low overheads;
- While people are trying to be healthy at leisure centres, the food and drinks on offer do not help them to do so;
- Of particular concern is the poor vending choice of sport centres that are on the same site as schools. While a lot of work is being done to get schools to offer healthy choices to their pupils, the same needs to be done by sports and leisure centres, especially those on the same site as schools;
- The ‘snap shot’ of the survey painted a poor picture of current (2005) vending practice in terms of the choices of nutritional food and drinks. The situation was said to be no better in sport centres that are on the same site as schools;
- Leisure and sport centres in all sectors must strike a balance between profits and health of their users;
- The use of refrigerated vending opens up the options of vending food such as sandwiches and fresh fruit. By following proven practice, healthy vending can complement sport and leisure centres’ ethos and make profits at the same time.
8. Conclusions and Recommendations

8.0 Introduction

This section is the final analysis of the main conclusions drawn from the data presented in the previous sections. It is also supplemented by recommendations, which are added where they are felt to be appropriate and workable, on the basis of the evidence gathered and the conclusions reached.

Conclusion 1

On the whole, the pilot project has clearly acted as a catalyst for centres and authorities to begin the process of making their catering and vending on offer healthier. In spite of broad agreement that the produce on offer at centres should be healthier, until the pilot, many of the centres and authorities lacked the stimulus and guiding framework to begin. By corollary, there is, therefore, a clear risk that the progress made during the pilot project may dissipate if there is no follow-up to the programme.

Evidence
See 5.2.1, 5.4.1

Conclusion 2

Some centres have clearly found difficulty in delivering their commitments and in sustaining the improvements that they have made even over the course of the pilot project itself. This has normally been due to staff illness, turnover or through internal delays occasioned by difficulty in commissioning services. Again, we point to a risk that centres may revert back to previous habits in terms of vending and catering practices.

Evidence
See 3.1.5, 3.2.6, 3.3.1, 3.4.5, 3.5.6

Conclusion 3

The principles of the pilot project were broadly supported amongst non-participants, along with a feeling that a strategic driver was needed to take forward the agenda.

Evidence
See 6.3, 6.3.1, 6.3.2, 6.4.2
Recommendation relating to Conclusions 1, 2 and 3

It is clear that both participating and non-participating authorities feel the need for a stimulus and supporting framework to help stimulate any improvements they make. We recommend that any move to build on the pilot project should be based on a common framework so that authorities have a ‘roadmap’ to follow which will provide them with accessible, achievable objectives and clear milestones. In order to evidence progress, there is also a need for a monitoring structure to ensure that the general trend is towards improvement of the situation across the board.

**Conclusion 4**

Lack of awareness, in all probability occasioned by internal communication difficulties, was the principal reason that most non-participating authorities did not take part in the pilot project. Indeed securing the interviews in section 6 provided a major challenge for Wavehill’s interviewers given that senior officers have so many demands placed upon their time. Given that most of those who did not know about the pilot would have liked to have taken part, we conclude that the project could have had an even wider impact had these authorities been engaged.

**Evidence**

See 6.1, 6.1.1, 6.1.2

Recommendation relating to Conclusion 4

Any future activities planned to engage local authorities in a subsequent phase of this project will need to take account of these communication difficulties. Initial contact will need to be made through a variety of channels in the first instance, followed by pro-active, and thereafter tenacious, telephone contact. It would also be worth considering whether, in reality, subsequent projects need to be pitched at a high Chief Officer level or whether managers at lower tiers could prove to be a more appropriate entry point.

**Conclusion 5**

Lack of staff knowledge and ‘buy-in’ has clearly been a difficult issue for many centres. Proposed changes to existing working practices and the lack of experience amongst front-line staff in putting together healthy options were identified as problems for some of the pilot studies. Yet, where it has been employed, a capacity-building approach, based on training and frontline staff and involvement in changes resulting from the healthy catering enterprise, it is one that has been proven effective in ensuring this buy-in. There is every reason to believe that approach can be replicated elsewhere, given the correct training.

**Evidence**

See 3.3.4, 3.3.7, 5.3.5
Conclusion 6

Clearly the greatest barrier faced by those who took part in the pilot project is an anticipated loss of revenue, were they to pursue a ‘totally healthy’ model of vending and catering.

Evidence
See 5.3.1, 5.4.5

Conclusion 7

There are major concerns amongst the non-participating authorities on the possibility of losing revenue if local authorities are required to move away from stocking popular, but unhealthy products.

Evidence
See 6.4.1

Conclusion 8

Monitoring and gauging demand for healthy options and providing appropriate responses was a proven success at the project which undertook this level of analysis. It also resulted in an increase in revenue, where customers were offered a choice between healthy and less healthy food and drink.

Evidence
See 3.1.3, 3.1.4

Recommendation relating to Conclusions 6, 7 and 8

In spite of revenue concerns, there was wide ranging support in principle amongst both participating and non-participating authorities for moves towards healthier vending and catering. Most project representatives were open to the idea of helping to offset any loss made by identifying new revenue streams and business models through a programme of supported planning.

If authorities are realistically to move in this direction without the need for legislation, it is reasonable to expect that it will only be done on the basis of business planning which supports them in offsetting the revenue they may lose from the current provision. It is therefore recommended that a support programme be developed that will help local authorities to achieve healthy status without the need for revenue loss. This could be based on the progress made during the pilot and be delivered by authorities who have already made this transition.
**Conclusion 9**

An integrated approach to solving the problem of unhealthy consumption was called for by centre and project managers with interviewees pointing out that a blanket ban without a supporting campaign would move the purchasers to other outlets, rather than solve the problem from its roots.

**Evidence**
See 6.5.1

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**Conclusion 10**

The progress made during the pilot programme has been made on the basis of a choice-based model of provision, which offers healthy options alongside less healthy food and drink, and has allowed customers to choose healthy options without threatening the revenue generated by the existing products on offer.

**Evidence**
See 5.1.2

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**Conclusion 11**

There is strong evidence to suggest that most users support in **principle** interventions that would lead to improvements in the food and drink on offer at centres. However, four main sub-groups of opinion are discernible within this spectrum of opinion:

- A small group who support a blanket ban on unhealthy food and drink and view this change as supplementing and supporting their healthy lifestyle which includes use of sports facilities;
- A sizable sub-group that supports the idea of a blanket ban, but were still prone to the barriers outlined in 4.5.1. For this sizable group, it is very difficult to imagine that a ban on unhealthy food and drink would have the effect of changing their habits, drastically. Indeed, there is a danger that for this group, a blanket ban which does not offer attractive alternatives to the current offer will merely move the problem and lead to them purchasing unhealthy food elsewhere.
- A group who supported the principle of offering healthy options but gave no indication of what sort of system they would like to see.
- Finally, the discrete largest group were those who support the principle of offering healthy food and drink, as part of a range of options. The accent for this group was very much on giving people options, and educating them to take the best option.

**Evidence**
See 4.1.2, 4.1.3, 4.2.2, 4.4.1, 4.4.3.
Conclusion 12

Awareness of the need to eat and drink healthily is, on the whole, widespread and the vast majority of those interviewed had a basic understanding of which of the foods on offer at the centres were high or low in sugar fat or cholesterol. However, this awareness was not by itself, enough to stop people from habitually eating unhealthy food. The main barriers to eating healthily were said to be convenience, accessibility of unhealthy food, inaccessibility of healthy food, temptation (which is itself a product of availability) and the need for a ‘treat’.

Evidence
See 4.1, 4.1.1, 4.3.1, 4.3.2.

Recommendations relating to Conclusions 9, 10, 11 and 12

Notwithstanding broad expressions of support for improvement in the food and drink on offer, observed during the interviews with service users during this evaluation of the pilot programme, there may be a need to determine the precise margins of opinion, and to quantify the preferred option for service users across the whole of Wales. The evidence gathered during this pilot study suggests that most people are in favour of having healthy options available within a continuum of choice, underpinned by messages to help inform people to make appropriate and balanced choices.

Conclusion 13

Amongst practitioners, there was wide-ranging support for a nationally branded and standardised system for classifying foods likely to be sold at centres as healthy and unhealthy in order to provide guidance to both staff and customers.

Evidence
See 5.4.2

Recommendation relating to Conclusion 13

As part of any ongoing project or support arrangements made, the provision of robust, national guidance on the nutritional balance of popular products would be useful. This could be produced for the use of vending and catering managers in the form of detailed nutritional guidance, as well as in a high-impact visible accessible style for public notice.
Conclusion 14

Amongst young people of school age, awareness is very high, and many made direct reference to the fact that they had studied nutrition at school through PSE lessons, or other school-based activities.

Evidence
See 4.1.4

Recommendation relating to Conclusion 14

Any initiative to encourage healthy eating needs to link in to the education of young people’s eating habits at the school level, particularly in light of many leisure and sports centres being located on, or adjacent to, school sites.

Forward Strategy

We conclude that much of the work undertaken in the pilot projects evaluated and observed over the course of nine months has been dependent on the goodwill of staff and a strong desire for change amongst staff in participating leisure centres. There is also reason to believe that this desire for change is widespread amongst those who did not participate in the pilot project (See section 6). In this sense, there is certainly potential for sustained and sustainable improvements to continue over the longer term. Also, as noted in Conclusion 1, there is a clear risk that the progress made during the pilot project may dissipate if there is no follow-up to the programme.

The information collected above demonstrates that:

- It is unlikely that further improvement will be forthcoming without a national driver or stimulus for change. Local authority officers are looking to the Welsh Assembly Government for a lead on the issue of improving the nutritional value of the food and drink on offer at leisure centres;
- Leisure centre and catering staff need to be provided with government-endorsed guidelines (as per those for schools in Appetite for Life). This could also take into account the ‘branding’ of healthier catering at leisure centres. Both the nutritional guidance and the ‘branding’ is currently uncoordinated and inconsistent across the pilot sites we observed;
- There is also a need for continuous training of catering and vending in nutrition (see 8.5), which is core to their professional development and accessible to authorities, enabling them to take account of staff turnover. A compiled list of accredited providers, circulated to authorities, would be a useful starting point;
- As noted in 8.3.1 there is a need for a common improvement framework (as per Appetite for Life) so that authorities have a process-based ‘roadmap’ or action plan template to follow which will provide them with accessible, achievable objectives and clear milestones. In order to evidence progress, there is also a need for a monitoring structure to ensure that the general trend is towards improvement of the situation across the board;
- The issue of the revenue generated by the current unhealthy offer at centres is perhaps the biggest barrier to future progress. As noted in 8.8.1, if authorities are realistically to improve the nutritional value of their offer without the need for legislation or compulsion, this will need to be done in a staged way and in a supported environment where opportunities for offsetting the lost revenue can be identified. A support programme, possibly delivered by successful pilots and authorities, could be developed that will help local authorities to achieve ‘healthy status’ without the need for revenue loss.
9. **Methodology**

9.1 **Method**

This section is detailed breakdown of the method employed for collecting the data during the evaluation. Wavehill proposed a method which was split into three main phases of activity

- Stage 1: Planning & Desk Research;
- Stage 2: Fieldwork & Data Collection;
- Stage 3: Analysis, reporting & dissemination of findings.

9.2 **Stage 1 - Planning & Desk Research**

9.2.1 **Desk Research to set pilot project in the context of current policy and search for similar initiatives**

Prior to any fieldwork or research taking place, the Wavehill team undertook a policy review, and desk research to give the evaluation team a strong contextual background to the project and put the pilot project and the evaluation in context. The analysis of similar initiatives gave the team an insight into good practice observed elsewhere.

9.2.2 **Scoping Interviews**

We undertook three scoping interviews with key Welsh Assembly Government staff to ensure that we understood the objectives of the evaluation prior to collecting data. This also helped us to develop the evaluation framework (see below)

9.2.3 **Evaluation and data Collection Frameworks**

We also developed an evaluation framework and data collection framework in order that timely and relevant information could be collected from the centres, themselves, users and that our interviewing methods and questions related directly to the objectives of the evaluation.

The framework for collecting data from leisure centres detailing the food and drink they sold under the pilot scheme was developed in partnership with the people who had the responsibility for filling it in, in order that the document was easy to use and the process of collecting information was not too time-consuming for the project managers and their staff.

9.3 **Stage 2 – Fieldwork & Data Collection**

Wavehill undertook two consultant visits to each project, two mystery shopper exercises at each project, and two rounds of service user interviews.

9.3.1 **Consultant Visit to practitioners in the field**

The first visits were undertaken at the beginning of the pilot projects. The focus of these visits was on:

- The pilot’s objectives;
- The process of setting up the project;
- Establishing an initial baseline at each centre from which progress could be gauged;
- To agree the data relating to sales and use of pilot project goods and initiatives that the centres could collect and input into the data collection framework.
The second consultant visits, undertaken towards the end of the pilot projects focussed on:

- Reflecting on the progress made over the course of the pilot;
- Identifying barriers to progress and positive outcomes;
- Plotting forward strategy for the project.

9.3.2 Collection of Monitoring Data

Over the course of the project each centre provided Wavehill with data relating to the monthly outputs of the pilot project. For example, some centres installed new healthy vending machines with the grant funding and provided Wavehill with the sales figures for produce sold under the grant-funded initiatives. Others purchased jacket potato machines or smoothie machines and provided information on patronage rates.

9.3.3 Mystery shopper Exercise

Two mystery shopper visits were undertaken at each venue: one visit in month 2 of the evaluation (July) and one in month 6 (November). The mystery shopper was set the task of observing the progress on the proposed changes at each centre and of purchasing a healthy meal or snack (depending on the nature of what was on offer at each centre).

The purpose of the exercises was:

- To validate independently the progress of the pilot at the two visits, in comparison to the initial baseline, observed at the first consultant visit;
- To determine whether it was possible to purchase a healthy snack or meal at each centre.

9.3.4 Qualitative interviews with centre users

The final element of the data collection was to assess user ‘demand’. We undertook two rounds of user interviews, at the same junctures as the mystery shopper exercises, at centres and interviewed a total of 212 users.

These interviews focussed on asking users of the centres:

- Whether they had noticed any changes to what was on offer through the centre’s catering or vending;
- Whether they approved of or supported the change;
- Their views on the role of leisure and sports centres in promoting healthy eating and providing healthy options;
- Any other changes they would like to see made.

As a result of the interviews being undertaken at two points in time we were able to track changes in perceptions, awareness and purchasing amongst users patterns as the pilot progressed.

9.3.5 Non-participating Authorities

We also undertook eleven telephone interviews with representatives from local authorities that had not taken part in the scheme in order to identify what the reasons were for their non-participation. In addition, we asked for opinions on number of key issues relating to Healthy Catering and Vending. This section is an analysis of the responses gained.
9.3.6 A note on the evaluation of one-off promotional events

Many of the pilot projects involved one-off promotional events. Our evaluation experience has taught us that it is very difficult to evaluate the true outcome of one-off promotional events, or activities such as giving out promotional materials.

Firstly, it is almost impossible to gauge the impact of giving a promotional pack, with health messages therein, as any impact may be minimal, indirect, delayed and cumulative or may never accrue.

Secondly, the self-evaluation sheets that are often handed out at the end of such promotional events are also of limited value as they only gauge immediate reaction, and cannot by their very nature take account of behavioural change.

Thirdly it is unfeasible to take the contact details of every person given a leaflet or sampling a smoothie, and even if this were done, gauging the impact of the event several months after it, can lead to problems with attributing the source of any benefit or other outcome. For instance, is the subject sufficiently aware six months after tasting a smoothie or receiving a health message of how that experience relates directly to any changes in behaviours. For this reason, we have not undertaken any in-depth evaluation of one-off promotional events, but have given a brief outline of each and where possible related some of the user experience gained.