Summary and extracts from Edinburgh Leisure’s Social Return on Investment
Purpose
(why are we here?)
To make a positive difference to communities by creating opportunities for everyone to get active, stay active and achieve more.

Vision
(where are we going?)
Inspiring Edinburgh to be a more active and healthy city.

Values
(how do we deliver?)
Edinburgh Leisure will make a positive difference by being:
- Welcoming
- Caring
- Passionate
- Proud

Goal: 5 million customer visits by 2015/16
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The positive benefits from encouraging and inspiring Edinburgh to become a more active city are increasingly accepted with the direct link between physical activity and health in particular being evidenced on a regular basis.

High impact studies such as this one are therefore a valuable contribution to the debate about the importance and most effective delivery of these essential services and highlight the value to the city of investing in physical activity.

An improved understanding and transparency of how this value is being delivered can only help to protect this investment, direct it to the most impactful areas and establish closer and more effective partnerships between interested parties.

I am delighted that the findings of this report confirm our belief in the value of our services and I am sure will be used constructively in future discussions regarding prioritisation and protection of local authority services.

Dr Charles Winstanley
Chairman
Edinburgh Leisure

“Edinburgh Leisure is now in its fourteenth year of operation, with a proven and proud record of success.”
Edinburgh Leisure (EL) is now in its fourteenth year of operation and has a proven and proud track record of success, both in terms of getting Edinburgh more active (with visits up by 28%) and operating more cost effectively (our City of Edinburgh Council funding has been reduced from 50% of total costs to 36%). This report allows us to start moving beyond measuring and celebrating what we do (such as growing our annual visits to over 4 million) to an evaluation of the impact of our work from the point of view of the people who benefit directly from it.

From the six specific areas of our work that have been measured we can now demonstrate an economic return of over £32.5m from an investment of around £9m.

In today’s tough economic climate Social Return on Investment (SROI) provides a vital tool to help inform and influence the external debate about the role of sport and physical activity in improving health, productivity and quality of life for people of all ages. It presents compelling evidence to support the view that public access leisure provision should be considered an investment to be protected rather than a cost. Critically, it also provides us with a robust methodology with which to make informed decisions about future resource prioritisation. Balancing the needs of the general population with those of specific groups is never easy at the best of times, but when money is tight it is tougher than ever. Using the SROI methodology will help us understand the value of different areas of our work to ensure future decisions are built around a deeper knowledge of the impact Edinburgh Leisure has on the people and communities it serves.

The move towards embracing SROI is a reflection of our belief that Edinburgh Leisure exists to make a positive difference to communities by creating opportunities for everyone to get active, stay active and achieve more. This report measures an element (but not all) of that positive difference and through using robust, objective and prudent calculations, can translate what we have always believed into hard financial numbers. We might not yet be able to quantify the full value of what we do in terms of well-being and improving life opportunities, but this report does go some way to show that, even on very limited financial criteria, the business case for investing in public access leisure provision is utterly compelling.

I would like to thank Baker Tilly for their expertise, critical challenge and objectivity in helping Edinburgh Leisure think of our business from a new perspective. I would also like to thank the internal EL team who delivered the project under the excellent guidance of Lynne Irons.

I believe this report and new way of thinking is an important step, not just for Edinburgh Leisure but for the leisure industry and the many partners who are integral to ensuring that we can continue to deliver the maximum collective return from what are increasingly scarce resources.

£32.5m a year and counting – bring on the next fourteen years of Edinburgh Leisure inspiring Edinburgh to be a more active and healthy city!

John Comiskey
Chief Executive
Edinburgh Leisure
iii. Introductory Comments from Jim Clifford

Edinburgh Leisure is now one of many Third Sector organisations that is seeking to show the social impact of its work. Against a traditional tendency to emphasis the good in what is being achieved for beneficiaries (be they individuals or communities), we are all increasingly asking “what effect did it have?” and “how did you do that?”. SROI as a methodology addresses both aspects: clarifying and quantifying the economic, social and environmental effects – the change achieved – and developing the theory of change, linking the change achieved, or outcome, back to the activity that achieved that.

This study evaluates at over £32.5m the gains from some, but not all, of Edinburgh Leisure’s activities. Even with the 60% to 65% of activities covered, we recognise that wider gains arise, over and above those evaluated. Nevertheless, EL’s contribution to health, youth engagement, and rehabilitation care, is considerable.

Following the work by New Economics Foundation over the past decade, and latterly the Scottish Enterprise-sponsored work, the Social Return on Investment methodology was published in a Cabinet Office paper in May 2009. Leading commentators and researchers, including NEF, New Philanthropy Capital, SROI Network, and ourselves and Cass Business School recognise that, although there are some wrinkles to be ironed out, SROI is a practical and workable solution to demonstrating social impact. With such a need to focus on this during times of cuts in public funding, and increased social pressures, this is needed now more than ever. It is rightly described by NPC in their April 2010 position statement as “an incredibly useful tool.”

The methodology used in this research project, and indeed the majority of similar projects we are undertaking, is Action Research, also known as Action Science. In a process which allows the research to reflect the stories that it can tell about its work, the organisation is supported by the researcher in learning about what it achieves and for whom. In this context, it gathers quality information, from those that best understand it, building in relevant, validated third party data, and giving the organisation the knowledge to be able to embed it in its performance monitoring systems: all in one go. It works, and delivers results cost-effectively.

SROI can become a process-driven exercise in which the answer emerges as a function of the process. It can also suffer from the use of financial proxies that have a poor correlation with the outcomes they attempt to measure, or are based on over-enthusiastic assumptions, and a lack of robustness in linking outcomes to the activities in which they originate. This is not the case here. As is increasingly the case for SROI studies of this type, the evaluations have been developed with real thought, care and prudence, and are soundly based on validated underlying data, with conservative assumptions where such are necessary.

Jim Clifford

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Jim Clifford is Head of Non-profit Advisory Services, and Chairs the Public Sector Group at Baker Tilly. He has authored a number of high profile social impact and cost studies including the social impact protocol for Sector Skills Councils, published in 2010, the study of PACT’s domestic adoption and fostering services, referenced in the Narey Report on Adoption, Alana House Women’s Community Centre, the PRTC National Carer’s Centre Network, and comparative study of costs of special schools for NASS, He is a Visiting Fellow at Cass Business School’s Centre for Charity Effectiveness where he is undertaking research into evaluative protocols for transactional decision making (linking Social Impact with conventional valuation and brand valuation) with Professors Palmer, Harrow and Bruce. He is a non-executive director of the Centre for Public Scrutiny.
1. Executive Summary

1.1 Edinburgh Leisure is a not for profit organisation, with an aim of enhancing the quality of life and improving the health of the community, throughout the City of Edinburgh by providing:

- sports
- physical activity
- leisure and
- coached activities

1.2 The importance of promoting physical activity is increasingly being stressed by local government, Scottish and UK Government bodies and other agencies.

1.3 As part of their strategic planning for the future, Edinburgh Leisure decided to undertake an evaluation of seven core areas of activity covering 60 – 65% of its operations using a Social Return on Investment (SROI) methodology. As Edinburgh Leisure measures some of the intangible benefits that its services provide, to a range of stakeholders, the results of this study will help to:

- inform discussions with funders and partners
- aid in prioritisation of activities internally and
- focus scarce resources

1.4 The SROI methodology has been developed in order to help organisations measure and quantify the benefits they are generating. This evaluation was facilitated by Baker Tilly working with an SROI Project Team, comprising seven staff from Edinburgh Leisure, over a three month period.

1.5 The results of this evaluation for each project considered were are follows:

<table>
<thead>
<tr>
<th>Project</th>
<th>Evaluated gains (£’000)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership and pay-as-you-go access</td>
<td>24,771</td>
</tr>
<tr>
<td>Leisure Cards</td>
<td>3,461</td>
</tr>
<tr>
<td>Pitch hire</td>
<td>655</td>
</tr>
<tr>
<td>Specific swimming projects</td>
<td>803</td>
</tr>
<tr>
<td>Open All Hours</td>
<td>368</td>
</tr>
<tr>
<td>Healthy Active Minds</td>
<td>2,009</td>
</tr>
<tr>
<td>Ageing Well</td>
<td>439</td>
</tr>
<tr>
<td><strong>Total gain due to Edinburgh Leisure</strong></td>
<td><strong>32,506</strong></td>
</tr>
</tbody>
</table>

1.6 This table shows total benefits from the projects included in this evaluation to be at least £32.5million per annum. These results are to be set in context of annual funding from CEC of £9.2m per annum, albeit this funding covers a wider area of activity than just those projects evaluated.

1.7 The attached summary provides some of the background to the evaluation and a high level review of; the areas covered, the related outcomes, the beneficiaries and the key findings. The full detailed report which explains in detail the analysis and research references is available from Edinburgh Leisure. Its formal academic citation is Clifford J., Hamblin J., Theobald C., and Williams C. (2012) Edinburgh Leisure: Social Impact evaluation of certain projects using Social Return on Investment, Edinburgh Leisure and Baker Tilly.
2. Summary of Project & Key Findings

Edinburgh Leisure - Background

2.1 Edinburgh Leisure (EL), is a not for profit organisation with charitable and social enterprise status, it:
  • operates over 30 venues including swimming pools, sports centres, gyms, golf courses, a climbing centre and a sailing school
  • manages over 190 sports pitches
  • runs a variety of fitness classes and other training and activity programmes
  • runs a number of outreach projects targeting the most in need.

2.2 EL employs over 750 staff, receives funding of £9.2m from City of Edinburgh Council (CEC) and operates in partnership with NHS Lothian, sportscotland and many others.

Benefits of Physical Activity

2.3 The importance of promoting fitness is increasingly being stressed by local government, Scottish and UK Government bodies and other agencies including most recently the Healthier Scotland “take life on, one step at a time” campaign. The Scottish Government reports that the direct cost to the NHS in Scotland of obesity was in excess of £175m, and infers that the cost to the NHS of people being overweight could add a further £137m to this. In addition, the report suggests that some 2.6 million work days are lost in the Scottish economy as a result of obesity, with people that have a Body Mass Index greater than 30 having 51% more short and long term sickness absence than those in the normal weight range.

2.4 The above and other research in the full report highlights the importance of EL’s work to promote participation in physical activity, to achieve a preventative or remedial effect on obesity and to reduce the cost borne by health and social care agencies and the wider economic impact from dealing with those who are overweight or obese. The Department of Health has also reported that a physically active individual is 30% less likely to suffer from a stroke, heart disease or type 2 diabetes.

2.5 This is clearly an issue for Scotland and necessarily therefore for Edinburgh, as on average obesity rates in Edinburgh were found to be broadly consistent with the average in the NHS Regions in Scotland, with obesity rates increasing in those areas of the City which show higher levels of deprivation.

2.6 In addition, a link has been established between those suffering from mental health problems and inactivity, where it has been found that in a significant percentage of cases, physical activity was related to anxiety reduction following exercise. According to a recent study, the impact of mental illness in Scotland cost in the region of £10.7billion per annum for 2010. Again this highlights the importance of EL’s work in promoting participation in physical activity.
SROI Methodology

2.7 For this study the primary focus has been on economic and social benefits, rather than environmental benefits. Where environmental benefits arise from the work of EL that can be reliably measured, these are included. Where environmental gains are either too remote from the intended purpose of the work or cannot be measured reliably, the nature of the benefit has been noted, and recorded as an unmeasured additional benefit.

2.8 This study represents an evaluation, using a Social Return on Investment methodology (as described in Appendix II), to analyse the annual gains achieved by certain projects comprising 60 – 65% of EL’s activities. These projects are described in paragraph 2.12.

2.9 SROI involves taking; total measureable outcomes, discounting these to present value where the benefits occur in the future, or are recurring over a period of time and deducting; deadweight, alternative attribution and displacement effects.

2.10 The project team which comprised seven EL staff with facilitation provided by Baker Tilly focused on identifying outcomes over six core areas set out in paragraph 2.12.

2.11 Data and assumptions provided by staff at EL have been relied upon in our analysis; Baker Tilly have acted to facilitate EL’s understanding of the methodologies used to evaluate the impact but Baker Tilly are not responsible for the assumptions used in the evaluations shown in the full report.
The Evaluated Areas

2.12 The evaluated areas selected are set out below with more detail in Appendix I:

- Membership gives customers unlimited access to facilities and classes by paying a monthly fee, it covers: gym access, fitness classes, swimming and climbing with currently some 17,221 members.
- Leisure cards offer a 25% discount on entrance fees for all facilities for a one off payment of £25. Concessions are available for groups such as those on Income Support, under 18s, over 65s and disabled users.
- Sports pitch hire and the facilitation of structured use of these facilities by sports leagues – EL operates 190 pitches covering a number of sports, with no other operator having the scale or breadth of activities. In operating a one stop shop for booking, EL works with a number of leagues who have the ability to block book pitches up to a year in advance, which reduces the administration burden for their organisers and encourages participation by both amateur and professional clubs.
- Learn to swim programmes can be split into:
  - Swimming lessons, for adults, from beginner to master level with over 275 swimmers per week currently involved. Feedback indicates many swimmers are in the 50+ age group with several joining due to a G.P.’s recommendation to manage physical conditions such as joint injuries and arthritis.
  - There are over 5,000 children aged 4 months+ engaged in the weekly mainstream lessons programmes.
  - Lessons for children with ASN (Additional Support Needs) are provided to children with a range of physical and mental support needs, including learning and physical disabilities. They can engage in a coached lead programme for £4.20 per lesson. There are currently 175 children per week in the ASN programme.
- The Open All Hours youth work project, which seeks to promote participation in; physical activity, sport, fitness and social activities on a Friday night. Open all Hours takes place in ten locations, inviting young people of high school age to join in activities such as; swimming, dance classes and team sports for a nominal fee of £1 for a two hour session. EL believe that many of the young people involved are in a group that would be unlikely to engage with other youth organisations and as such are at greater risk of becoming disengaged with the wider population. A large part of the success of this project can be attributed to collaborative working with CEC, community safety partnership, police, fire brigade, FABB and Cafe K. Approximately 260 young people take part each week, including 11 young people with additional support needs.
- The Healthy Active Minds programme, which seeks to achieve therapeutic improvements for people with mild to moderate mental health conditions through participation in physical activity. This is a partnership funded by NHS Lothian and EL. There are currently around 100 referrals per month through NHS Lothian, from local GPs.
- The Ageing Well programme, which seeks to promote fitness and mobility, continued independence and social interaction amongst older people in Edinburgh – it is run in partnership with NHS Lothian and Pilmeny Development Project. The project was set up over ten years ago and has now expanded to involve over 500 users. In addition to the fitness aims, an equally important aim of the project has been peer mentoring and social inclusion for participants.
2. Summary of Project & Key Findings

Understanding the services

2.13 For each of the evaluated areas of work, discussions were held with EL around:
   - the nature of the service(s) provided;
   - the identification of the direct and indirect beneficiaries;
   - the nature of the benefits derived from the service;
   - where relevant, the identification of other agencies or companies that could provide a similar service; and
   - the likely cost of providing equivalent services through alternative sources

2.14 This discussion was developed to consider how a financial value could reasonable be attributed to service outcomes. The results of this discussion are summarised on page 14 for each project with more detail set out in Appendix A.

2.15 For the purposes of mapping outcomes in this study, we have defined ‘primary’ and ‘secondary’ outcomes. These represent:
   - Primary outcomes: the outcomes that directly and immediately result from the intervention in question. For example, supporting an individual to gain employment, achieves an immediate saving in some welfare benefits; and
   - Secondary outcomes: the long term results that flow from primary outcomes. For example, the individual who is now in employment will be economically productive in the long term.

2.16 This study does not include outcomes further removed from the activity than ‘secondary’ outcomes, as to do so would be to lose proximity to the intervention that is being measured. Using the example of an individual supported in gaining employment, it is likely that if they are in work for the long term, this may influence the behaviour of their children in seeking work rather than perpetuating a cycle of reliance on welfare benefits. Whilst undoubtedly valuable, such outcomes are not sufficiently proximate to the original intervention for a meaningful evaluation to be carried out. This is consistent with the seven principles of SROI evaluation (shown in the Cabinet Office 2009 guide to SROI) “do not over-claim”. 
2. Summary of Project & Key Findings

Summary Map of Outcomes

The chart below serves to draw together each of EL’s areas of work included in this study, by highlighting the key activities and outputs together with the common and unique primary and secondary outcomes associated with them. Ultimately, this directs the approach used to place a financial measure on these outcomes from the perspective of key stakeholders (CEC, NHS Lothian, sportscotland):

<table>
<thead>
<tr>
<th>EL activities</th>
<th>EL outputs</th>
<th>Primary outcomes</th>
<th>Secondary outcomes</th>
<th>Evaluation of outcomes</th>
<th>Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership leisure cards</td>
<td>High quality sports and fitness facilities are made available at competitive rates for use by the community, with a focus on increasing participation</td>
<td>Reduced cost access to high quality of facilities increases local participation rates</td>
<td>Groups at risk of being excluded from exercise including disabled young people and older people are encouraged to participate</td>
<td>Participants reduce their risk of health problems either due to physical inactivity or the risk of pre-existing conditions being complicated by being overweight or obese. EL’s structured approach promotes longevity of participation</td>
<td>Individuals: Improved physical and mental health due to participation or volunteering. Reduced cost access to high quality facilities. Improved employability due to volunteering. Reduced risk of involvement in ASB* and becoming NEET*.</td>
</tr>
<tr>
<td>Swimming lessons</td>
<td>Local projects are set up to promote social inclusion and to encourage wider participation among groups at risk of marginalisation</td>
<td>Young people at risk of social exclusion participate in structured Open All Hours activities that promote fitness and social inclusion</td>
<td>EL staff actively support the development of sports leagues that utilise pitches, thereby increasing participation</td>
<td>Some sport (notably swimming) has therapeutic value for conditions including musculo-skeletal problems such as arthritis. Volunteers benefit from involvement, including in terms of mental and physical well-being or improved employability due to additional skills learned</td>
<td>Reduced costs of health and social care costs due to improved physical and mental health. Reduced sickness absence due to improved health. Reduced cost to access provision compared to local commercial alternatives. Reduced crime rates (focusing on ASB*). Reduction in NEETs*.</td>
</tr>
<tr>
<td>Open All Hours youth project</td>
<td>EL facilitates other organisations (such as sports clubs) by co-ordinating access to facilities such as sports pitches</td>
<td>For certain groups (principally older people) swimming offers a relatively low impact option that may enhance the ability of users to participate in other exercise</td>
<td>Projects are delivered (partially funded by other local agencies) to address specific groups including older people and those with mental health issues</td>
<td>Young people at risk of social exclusion are engaged with and become less likely to participate in anti-social behaviour and are less likely to become NEET* due to lack of engagement in education</td>
<td>Reduced costs of crime (notably ASB*). Reduction in NEETs*.</td>
</tr>
</tbody>
</table>
| Ageing Well programme | Communal activities such as Ageing Well, Healthy Active Minds and Open All Hours have a social aspect that promotes well-being and inclusion | Participants on the HAM programme may achieve an improvement in their condition such that the extent of healthcare intervention required can be reduced | **Note:** 

*Refer to Definition of Terms on page 34

*ASB* stands for Anti-Social Behaviour

*NEET* stands for Not in Employment, Education or Training
2. Summary of Project & Key Findings

Summary of Evaluations

2.18 The outcomes from each of the seven areas of activities are measured using three evaluation approaches:
   • Economic benefit created: where there is an impact on earning capacity or productivity;
   • Costs saved or not wasted: where the intervention results in a saving, either in the cost of another intervention or in a consequential cost (e.g. introducing prevention to save on the cost of treatment); and
   • Alternative or cheaper sourcing: where one intervention directly replaces another more expensive one.

2.19 It is clear that the outcomes generated fall into five broad categories, subject to minor variations in the nature of project-specific assumptions. These categories are:
   • Improved physical and mental health;
   • Reduced sickness absence;
   • Reduced cost to access provision compared to commercial alternatives;
   • Reduction in anti-social behaviour rates (Open All Hours only); and
   • Reduction in NEETs (Open All Hours only)

2.20 The full report provides detailed evaluation and calculation analysis for each of the projects.

2.21 The projects selected for analysis are felt to be sufficiently distinct as to avoid the risk of double counting of benefits.

2.22 The evaluation of Healthy Active Minds excludes fitness gains, as the visits by participants may be included in the membership and general access model, as it was not possible to distinguish reliably between visitors participating on this scheme as opposed to standard membership or general access. The fitness gains associated with this scheme are therefore included in the membership and general access models, which can be found in the full report.
# 2. Summary of Project & Key Findings

<table>
<thead>
<tr>
<th>Financial impact of evaluated programmes and activities</th>
<th>Evaluated gains (£'000)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Membership and general access</strong></td>
<td></td>
</tr>
<tr>
<td>Healthcare cost savings</td>
<td>18,799</td>
</tr>
<tr>
<td>Reduction in sickness absence</td>
<td>5,196</td>
</tr>
<tr>
<td>Cost savings for members</td>
<td>777</td>
</tr>
<tr>
<td><strong>Total gains due to membership and general access</strong></td>
<td>24,771</td>
</tr>
<tr>
<td><strong>Leisure Cards</strong></td>
<td></td>
</tr>
<tr>
<td>Healthcare cost savings</td>
<td>2,708</td>
</tr>
<tr>
<td>Reduction in sickness absence</td>
<td>753</td>
</tr>
<tr>
<td><strong>Total gains due to Leisure Cards</strong></td>
<td>3,461</td>
</tr>
<tr>
<td><strong>Pitch hire</strong></td>
<td></td>
</tr>
<tr>
<td>Healthcare cost savings</td>
<td></td>
</tr>
<tr>
<td><strong>Total gains due to pitch hire</strong></td>
<td>655</td>
</tr>
<tr>
<td><strong>Swimming projects</strong></td>
<td></td>
</tr>
<tr>
<td>Healthcare cost savings</td>
<td>803</td>
</tr>
<tr>
<td><strong>Total gains due to specific swimming projects</strong></td>
<td>803</td>
</tr>
<tr>
<td><strong>Open All Hours</strong></td>
<td></td>
</tr>
<tr>
<td>Healthcare cost savings</td>
<td>31</td>
</tr>
<tr>
<td>Impact on ASB incident rates</td>
<td>97</td>
</tr>
<tr>
<td>Impact on youth engagement</td>
<td>240</td>
</tr>
<tr>
<td><strong>Total gains due to Open All Hours</strong></td>
<td>368</td>
</tr>
<tr>
<td><strong>Healthy Active Minds</strong></td>
<td></td>
</tr>
<tr>
<td>Healthcare cost savings and cost savings for users</td>
<td>2,009</td>
</tr>
<tr>
<td><strong>Ageing Well</strong></td>
<td></td>
</tr>
<tr>
<td>Healthcare cost savings - participants</td>
<td>414</td>
</tr>
<tr>
<td>Healthcare cost savings - volunteers</td>
<td>24</td>
</tr>
<tr>
<td><strong>Total gains due to Ageing Well</strong></td>
<td>439</td>
</tr>
<tr>
<td><strong>Total gain due to Edinburgh Leisure</strong></td>
<td>32,506</td>
</tr>
</tbody>
</table>
2. Summary of Project & Key Findings

2.23 On this basis, the impact of the outcomes evaluated for the areas of work shown above exceeds EL’s total annual CEC funding by at least £23.3m per annum.

2.24 It should be noted that this report only includes the outcomes evaluated from the projects shown in this study, which EL estimates represents 60-65% of its activities. Therefore if all the areas of EL’s work were evaluated, the total impact would be likely to increase. Notable areas not included are:

- Golf
- Coaching programmes (other than swimming)
- Soft play
- Sailing
- Tennis (indoor and outdoor)
- Bowling (indoor and outdoor).

Other outcomes not evaluated

2.25 In common with most SROI evaluations, it is not practicable or cost-effective to evaluate every aspect of the effect of the projects. This relates often to the wider well-being and less proximate benefits from EL’s work. Hence the projects may not reflect full evaluations of outcomes including:

- Long term impacts on subsequent generations due to lifestyle change among the current one;
- The value of friendships made during participation in certain activities;
- The wider impact on communities of improved wellbeing, due to certain project outcomes including reductions in Anti-Social Behaviour rates;
- The promotion of participation in competitive sport, including the development of professional athletes;
- Improved water safety and potentially, lifesaving skills derived from swimming lessons; and
- Improved educational outcomes and social cohesion through participation in sport.
The membership scheme offers a range of packages so that customers can enjoy unlimited access to facilities and classes by paying a monthly fee. There are currently some 17,221 members.
The EL membership packages available are as follows:
• Swimming: unlimited access to swimming pools, sauna and Turkish Baths; and
• Fitness: offering unlimited access to gyms, fitness classes and swimming facilities and discounts on other activities;
• Climbing: as offering unlimited use of the climbing, gym and swim facilities at the Ratho site
Concessionary prices are offered for those on Income Support, juniors (12-17 year olds), 65+ and disabled users. Corporate memberships are also available.
A Leisure Card is also in place, where for a one off cost of £25, users can claim 25% off the entrance fee of all facilities.

Membership fees are offered at a discount compared to commercial alternatives, thereby broadening access to high quality fitness facilities. As is noted earlier, addressing the issue of health, particularly in relation to weight and obesity, is of critical importance to public sector agencies including health and social care providers, but also to the wider economy. EL’s facilities support people in achieving and maintaining long term behavioural change in relation to fitness that contributes, along with other lifestyle changes, to ensuring that they stay healthy. The research shows that this contributes to:
• reductions in the costs of caring for people who would otherwise be at risk of becoming overweight or obese, resulting in complications in, or development of other conditions such as diabetes, both in the short and long term;
• reductions in the level of sickness absence among the working population; and
• increased effectiveness and productivity in the workplace
The table overleaf shows a description of the key primary and secondary outcomes achieved by the membership and leisure card schemes:
Our memberships and leisure cards support business by improving sickness absence costs to the value of £5.2million.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Primary outcomes</th>
<th>Secondary (long term) outcomes</th>
<th>Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Membership scheme provides unlimited access</td>
<td>Users gain access to high quality facilities at a discounted rate compared to equivalent commercial providers. Reduced cost access to high quality facilities is believed by EL to promote participation among the population. Membership and discount schemes create a structure that promotes regular participation, such that some beneficiaries may become regular users who might otherwise lack the required stimulus to meet their recommended exercise target.</td>
<td>Those users who would not otherwise participate in regular exercise meet their regular exercise needs, thereby improving their health and fitness levels, thereby reducing costs of medical and other care interventions. Those users of working age who would not otherwise participate in regular exercise are likely to reduce their number of sickness absence days compared to others who do not take regular exercise.</td>
<td>Users: • Improved quality of life and wellbeing (not measured). • Saving compared to commercial alternatives (for those who would access an alternative). NHS and other agencies: • Reduced costs of care. Employers: • Reduced sickness absence among employees.</td>
</tr>
<tr>
<td>to EL’s facilities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Leisure Card scheme provides discounted</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>access to EL’s facilities</td>
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</tbody>
</table>

“The gym team at Craiglockhart Leisure Centre are unique, giving you encouragement and actively helping you achieve your goals.”
Open All Hours (OAH) is a multi-activity programme aimed at secondary school age children. This is a service which takes place in 10 EL locations, where young people of high school age are encouraged to pay £1 on a Friday evening and Saturday afternoon to join in activities such as swimming, dance classes and team sports. Approximately 260 young people take part in OAH each week, including 11 young people with additional support needs, including physical disabilities, learning and behavioural difficulties.

This project was initially established in 2002, with the intention of providing access to sporting activities in less affluent areas of Edinburgh, at times when there was little activity for such young people available, but has since grown due to its initial success.

A large part of the success of this project can be attributed to collaborative working with other partners, including City of Edinburgh Council. EL also works closely with the Community Safety Partnership, including the police and fire brigade as well as FABB and Cafe K.

OAH has also targeted specific groups of young people by:

- Collaborative working with FABB, a local charity that seeks to promote social inclusion for disabled people to encourage participation of disabled young people; and

- Establishing a girls only session in Leith, specifically targeting ethnic minorities which focuses on; swimming, dance and exercise in an environment that is suitable for the cultural differences which exist. These groups focus particularly on the local Islamic community, given the rules prohibiting male and female children participating in sport together.

A leadership programme has also been established where 10% of the participants are selected as eligible to volunteer as trainers for the other young people during these sessions. This is regarded as a privilege by participants, and as such EL typically finds that leadership places offered are taken up.

The evidence of feedback to EL project leaders from project partners, such as the local Community Safety Partnership, is that this has had a positive impact on the young people involved and the communities in which they live. EL believes that many of the young people who join OAH are in a group that would be unlikely to engage with other formal youth organisations, and as such are at a greater risk of becoming disengaged than the wider population.

OAH can, in some more extreme cases, be seen as a preventative measure that reduces the likelihood of a young person requiring a more intensive intervention at a later date, thereby reducing the burden on other services such as the local Youth Offending Team.

The table overleaf shows a description of key outcomes achieved by the OAH Team:

* Refer to Definition of Terms on page 34
The impact on youth engagement in the city is valued at £240k.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Primary outcomes</th>
<th>Secondary (long term) outcomes</th>
<th>Beneficiaries</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young people are given access to EL facilities at a time when other activities are not available to them, or which would not be accessed by this group. These sessions are publicised in the communities they serve in order to draw young people in. Other agencies including local Safety Partnerships signpost these activities in order to offer young people a place to meet in a safe environment. Disabled children are also given an opportunity to integrate with their peers. Young women from ethnic minorities are given an opportunity to exercise in a culturally sensitive environment.</td>
<td>Users gain access to high quality facilities at a significantly discounted rate. Some young people in groups that are likely to be at higher risk of becoming excluded are given an opportunity to engage with other young people. Disabled children are also given an opportunity to integrate with their peers, resulting in improved social cohesion. Young women from ethnic minority backgrounds are given an opportunity to exercise in a culturally sensitive environment. Some of the users also gain access to volunteering opportunities as future leaders, which may lead to improved employability.</td>
<td>Young adults, who may otherwise receive little physical exercise, are encouraged to lead a healthier lifestyle. The adoption of such a lifestyle may also lead to reduced NHS costs in the long term due to decreased costs of care in relation to obesity-related diseases. Communities around the sites may also benefit as the incidence of ASB is likely to decrease as a result of these sessions. For some participants who are at risk of disengaging from education, the structured activities and opportunity to socialise with others may re-motivate them, resulting in re-engagement with education and reducing the risk that they would become NEET. Those users involved in providing coaching to their peers may also improve their leadership and social skills, making them more employable.</td>
<td>Participants: • Discounted access to leisure facilities. • Structured activities provided at times when relatively little alternative provision exists. • Reduced risk of disengagement and becoming NEET. Parents: • A safe place for their children to go and meet others. • For parents of disabled children, there may be some benefits as a form of respite. Local community and emergency services: • Reduced incident rates, particularly in relation to ASB. NHS: • Reduced costs of care due to regular exercise. The State: • Reduced welfare benefit costs for young people who would otherwise disengage and become NEET.</td>
</tr>
</tbody>
</table>

“I get a lot of exercise and its fun! I feel safe and I get to try new things”
APPENDIX A

c) Pitches

EL operates a range of 31 venues with over 190 pitches across the city, covering a number of sports including football, rugby, hockey, cricket and shinty, with no other private or local leisure trust having the scale and breadth of facilities that EL does.

In operating a one-stop shop for booking, EL works with a number of leagues who have the ability to block book the pitches for up to a year in advance, thus greatly reducing the administrative burden of organising such a league and encouraging participation by both amateur and professional clubs.

By providing easy access to these facilities and support and advice to these teams, EL encourages participation in regular sporting activity, particularly within the amateur leagues. This encourages individuals to carry out regular exercise which they may not otherwise do if these facilities were not available to them.

These pitches are also made available to local schools and after school clubs in off-peak times. EL believes that many of the participants who use pitches are unlikely to access other fitness facilities such as a gym, as opposed to participating in team sports. These sports offer a social aspect and encourage a ‘team spirit’ that results in social pressure to maintain fitness and to participate regularly in matches and training in order to achieve good performances in competition with others. This pressure is likely to increase the levels of commitment to exercise among participants, thereby increasing longevity of participation. The quality of facilities and support from EL staff has facilitated the creation of new leagues, many of which encourage teams to be created from local pubs and clubs that might not otherwise have participated.
Activity | Primary outcomes | Secondary (long term) outcomes | Beneficiaries  
--- | --- | --- | ---  
Pitches are managed by EL and are available for use by clubs and individuals throughout Edinburgh. These pitches are also available for schools and after school clubs to use in off-peak times. | Users gain access to high quality pitches at a discounted rate compared to equivalent providers. EL’s approach encourages leagues to be created, and the quality of facilities attracts new members to those leagues who might not otherwise participate or whose participation would be short-lived in the absence of a formal structure. Schools and after school clubs have access to pitches to allow them to provide classes, when alternative facilities may not be available. | Users meet their regular exercise needs, thereby improving their health and fitness, particularly where these users would be unlikely to access alternative facilities. This is also likely to be enhanced by the socialisation effects of structured leagues and team spirit they create which encourages users to carry out regular exercise. Promotes the adoption of exercise as part of the user’s lifestyle which is likely to lead to reduced medical interventions and hence a reduction in NHS costs. This is particularly notable for higher-risk groups for whom access to other fitness facilities would be unattractive. | Participants:  
• Access to high quality facilities.  
• Achievement of exercise participation targets and increased longevity of these gains due to social aspects of leagues which are facilitated by EL.  
Local Clubs:  
• Access to high quality facilities, in the absence of sufficient alternatives to sustain this level of participation.  
• New clubs are created in the local area as leagues, supported by EL staff, seek to broaden their membership.  
Schools:  
• Access to facilities to support delivery of PE lessons. 

“Without the support from Edinburgh Leisure’s pitches team our team [Caledonian Thebans] wouldn’t have survived this year.”

Our rugby pitches have a healthcare gain of £144k.
The swimming programme is broken down into three key projects:

- Swimming Lessons for adults
- Swimming Lessons for children with ASN (Additional Support Needs)
- Children’s swimming lessons – around 5000 users per week, 40 weeks of the year – from 4 months to 16 years

1. Swimming lessons for adults

A range of swimming lessons for adults are run by EL, from beginner to master levels. Over 275 swimmers are currently involved in this programme on a weekly basis.

Feedback from the EL swimming project team suggests that many of the users of the adult swimming lessons fall into the 50 plus age group. Several participants have undertaken swimming lessons or joined EL’s classes, such as aqua aerobics, as a result of a GP’s recommendation. This is due to expected improvements in conditions such as arthritis or other musculo-skeletal conditions from swimming. For some others, swimming offers a preventative measure to reduce the risk that less severe forms of these conditions escalate in future. For this group, for whom other higher impact exercise would be difficult or damaging to sustain, swimming offers one of very few alternatives.

Feedback from participants suggests that swimming has not only improved their fitness in itself, but has also led to improved stamina and ability to undertake other exercise such as walking, cycling and running. The health benefits of swimming, for this group, therefore extend beyond the gains directly achieved from exercise during swimming, to facilitating improvements in certain medical conditions and facilitating other forms of exercise.
Our total gains due to specific swimming projects are £803k.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Primary outcomes</th>
<th>Secondary (long term) outcomes</th>
<th>Beneficiaries</th>
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</table>
| Swimming lessons are provided to adults Unlimited access to EL swimming facilities is also provided | Adults are encouraged to participate in regular exercise through instruction in a supportive environment. Adults learn safety skills which may assist them should they get into difficulty in/around water. For some, swimming offers an opportunity to participate in exercise where higher impact fitness programmes would, potentially, be detrimental. Unlimited access to facilities also encourages participation outside formal lesson times. Access to a group of (usually) local adults for social interaction and support. | Encourage a lifelong healthy lifestyle through participating in exercise through swimming. This may reduce NHS costs over time if obesity related diseases are prevented. Specific musculoskeletal conditions (such as arthritis) or injuries may also be improved through regular swimming, thereby reducing costs to the NHS of managing these conditions. Feedback from participants to EL indicates that swimming may enhance the ability to participate in other forms of exercise, thus augmenting the benefits of other exercise. Opportunity to access formal sporting competitions through masters/triathlon/open water swimming participation. May encourage younger generations to participate in sport. | Participants:  
• Improved water safety skills.  
• Improved water confidence.  
• Improved fitness.  
• Improvements in musculoskeletal conditions.  
• Improved ability to access other exercise.  
NHS Lothian:  
• Reduced costs of care. |

“Learning to swim has had so many health benefits for me – confidence in the water, gaining real enjoyment from swimming and feeling/looking noticeably fitter”
2. Swimming lessons for children with additional support needs

Swimming lessons are provided to children with a range of conditions including learning and physical disabilities, with approximately 175 children receiving lessons each week, at a price of £4.20 per lesson. Families that use this scheme do so at their own expense, rather than as part of a prescribed treatment plan, although healthcare professionals may signpost them to swimming as a useful form of exercise to complement other therapies.

The support required by these children can vary, though in most instances one-to-one supervision will be required, given the typical levels of additional needs of the child.

The ability for parents and carers to send their child to a supervised lesson once per week also provides an element of respite, if only for 30 minutes per week. Edinburgh Leisure has also attempted to set up fun galas, parents events and runs a yearly Christmas Party to Reward children for their hard work and commitment throughout the year. These events assist in developing the social aspects of the programme.

Case studies of participants show that they achieve wide-ranging outcomes including:

- Physical Stimulation;
- Positive educational outcomes;
- Freedom of movement and the massage/loosening effect of water on the body (cardiovascular muscles and joints);
- An opportunity to take up a sport in a safe environment and be able to follow a sporting pathway – all the way to Paralympic competition and access to a professional/full time athletic career;
- Improvements in physical mobility:
  - EL staff undertake training with a range of partner organisations to develop staff knowledge and understanding of conditions.
  - EL’s staff regularly communicate with parents and carers of the children in these groups, in order to ensure that the gains achieved from these activities are maximised and are complementary to other therapeutic interventions;
  - Increased confidence, including increased trust in others and better communication and social skills; and
- Providing an activity that all members of the family can do together outside the formal lesson times;
Swimming lessons are provided for children with physical and learning disabilities. Children have access to high quality facilities with appropriate teaching by trained staff at an affordable price. Parents may benefit, to some extent, from respite time and social interaction with other parents, albeit this may be limited by the length of lessons (30 minutes). Children learn safety skills which may assist them should they get into difficulty in/around water.

Encourage a lifelong healthy lifestyle through participating in exercise through swimming. This may reduce the cost of provision of NHS services such as physiotherapy due to a long term improvement in their condition. Regular participation may also reduce the risk of children becoming overweight, for those whose conditions limit their ability to access other forms of exercise. Again, this would reduce the costs of care borne by the NHS, and may reduce the complexity of care needs for participants. There may also be other social benefits to this, such as the opportunity for participants to be part of a team and to interact with others. Opportunity to engage in wider sporting pathways, increasing access to sporting achievements.

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| Swimming lessons for children with physical and learning disabilities | Children have access to high quality facilities with appropriate teaching by trained staff at an affordable price. Parents may benefit, to some extent, from respite time and social interaction with other parents, albeit this may be limited by the length of lessons (30 minutes). Children learn safety skills which may assist them should they get into difficulty in/around water. | Encourage a lifelong healthy lifestyle through participating in exercise through swimming. This may reduce the cost of provision of NHS services such as physiotherapy due to a long term improvement in their condition. Regular participation may also reduce the risk of children becoming overweight, for those whose conditions limit their ability to access other forms of exercise. Again, this would reduce the costs of care borne by the NHS, and may reduce the complexity of care needs for participants. There may also be other social benefits to this, such as the opportunity for participants to be part of a team and to interact with others. Opportunity to engage in wider sporting pathways, increasing access to sporting achievements. | Participants:  
- Improved water safety skills.  
- Improved water confidence.  
- Access to exercise leading to health gains.  
- Social inclusion resulting from participation with others.  
NHS Lothian:  
- Reduced care costs.  
- Enhanced effectiveness of physiotherapy through complementary delivery techniques.  
Parents and Carers:  
- Social gain from meeting other parents.  
- Opportunity for some (albeit limited) respite.  
- Learn about opportunities for their child to participate throughout the swimming pathway (e.g. specialised competitions). |

“[Swimming] has helped her develop her communication skills and also her trust in others”
3. Swimming lessons for children

Up to 5,000 children aged 4 months+ take part in EL lessons programme, currently available in 10 venues across Edinburgh.

Classes are booked in blocks, in line with the school term, and include options for monthly and termly direct debit payments. Core lessons cost £4.20 per 25 min lesson, and although EL does not require waiting lists, current customers are offered priority booking during each term.

Edinburgh Leisure uses Scottish Swimming’s Learn to Swim Programme and teachers are required to undertake regularly professional development and are assessed to ensure quality standards are met.
## Activity

<table>
<thead>
<tr>
<th>Activity</th>
<th>Primary outcomes</th>
<th>Secondary (long term) outcomes</th>
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<tr>
<td>Children aged 4 months and over access swimming lessons across 10 EL sites.</td>
<td>Children learn to swim, which is a useful life skill and a form of exercise that is achievable throughout their lives. Adult and Baby classes – new means of stimulation for parent and baby, enables an additional opportunity for bonding and sensory development and physical movement.</td>
<td>Swimming lessons contribute to a child’s requirement for physical activity each week. Swimming lessons may promote long term participation in physical activity that will support a healthy lifestyle for these children in their adult lives. Adult and baby classes – opportunity for new parents to link to a new social group empathetic to each other’s needs and motivations.</td>
<td>NHS Lothian: • Reduced care cost. Participants: • Develop good lifestyle habits including regular participation in exercise. • Gain life skills including lifesaving (not measured). • Sensory and physical development for babies. • New parents benefit through links to other new parents, with opportunities for social interaction and potentially support and friendship out with the classes.</td>
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“He loves the water...we don’t know what we would do without our family swim”
Ageing Well is run in partnership with NHS Lothian and Pilmeny Development Project and aims to provide activities and social opportunities for inactive older people, to improve their health and wellbeing through a peer support network.

The peer support network means that all activities are led or supported by older people themselves, as volunteers.

A number of activities are operated through Ageing Well, including; health walks, seated exercises, new age curling, dance classes, knitting and singing for health and happiness.

This project was set up over 10 years ago and has now expanded to over 500 users on a weekly basis. Although this project was established to provide activity for inactive older people, the social aspects of this project are equally as important as the physical benefits and include learning new skills as a volunteer and meeting new people of a similar age.

The programme also has value for people who have retired relatively recently. Such participants may be more physically capable, but the social aspect of developing a peer group who wish to remain physically active; for example, walking clubs, have a preventative effect in terms of forming a friendship group that may offer mutual encouragement to avoid physical inactivity in later life. This programme also promotes sustained participation as the social aspect encourages long term participation in the group.

A similar socialising effect is likely to occur for volunteers that lead groups. Research published by the Big Lottery fund indicates that volunteering results in gains for the volunteer including:

- improved physical health;
- reduced risk of mental health issues; and
- improved confidence and a potential route to employment.

For this group, the latter benefit is felt by EL to be unlikely to apply, as they tend to be of retirement age and therefore unlikely to be seeking to re-enter the workplace (although some may wish to do so). However, the gains generated by achieving improvements in mental and physical health may be significant. A further gain in terms of preventative action may also be felt in that their leadership role and socialisation with a group committed to maintaining their health may encourage longer term participation for the volunteer.
The healthcare cost savings to for our participants is £414k.

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</table>
| Activities provided for older people to promote physical activity (at a level appropriate for their capabilities). Older people can also act as volunteers, leaders or coaches for these activities. | Older people are given the opportunity to participate in a number of activities, at a low cost that may not otherwise have been available to them. Creates a support circle of friends for the individuals and fosters a sense of community, which may promote better quality long term gains (see secondary outcomes). Participants are also provided with the opportunity to become involved in volunteering or coaching their peers. | NHS and social care interventions are mitigated by maintaining or improving the physical and mental health of the user and allowing them to retain an independent lifestyle, to the greatest extent possible. Research highlights that volunteers may benefit both in terms of physical and mental health as a result of their role, with enhanced benefit due to the socialisation effect from regular contact with a dedicated group. | Users:  
• Improved mental and physical health.  
• Social inclusion.  
Volunteers:  
• Improved mental and physical health.  
Health and social care services:  
• Reduced costs of health and social care including reduced in-home care time, reduced hospital admissions, reduced GP interventions and reduced therapy interventions. |

“Why do I come on the walks... Over the last two years I have found that my stamina and strength has improved and my ‘mind set’ has changed too.”
Healthy Active Minds (HAM) is a partnership project funded by NHS Lothian and Edinburgh Leisure. HAM offers adults with mild to moderate mental health issues, such as depression, anxiety and stress, an opportunity to participate in physical activity and establish social connections. Several research reports have found potential mental health gains from participation in physical activity.

The HAM scheme is structured to ensure that each referral can result in a positive outcome:

- A consultation is carried out by the HAM team to identify the needs of the individual. At this stage a self-assessment survey is used with the individual to determine the severity of their condition prior to commencing the programme;
- The individual is then given a three month pass, offering unlimited access to EL’s facilities. This pass is worth £150 (equivalent cost of EL membership for three months);
- After 12 weeks, a second consultation is held to review progress, using the same self-assessment survey to determine the extent of improvement achieved. At this point, the individual is provided with a concessionary card, which results in reduced rates for use of EL’s facilities (e.g. £1 for classes). The card must be used before 4pm.

After a further six months a final consultation is held to discuss whether the individual has enjoyed the experience at EL and to assess the benefits that they have gained from participation in the HAM programme. An exit pathway is then discussed with the participant, which may include EL membership options and/or signposting to other organisations, including community health programmes which are able to provide the individual with relevant support. The objective of this meeting is to encourage long-term participation and ongoing support.

EL currently receives around 100 referrals to the HAM programme from the local NHS per month.

Feedback from the consultations is collated to demonstrate the mental health outcomes achieved during participation in HAM. The results of client progress questionnaires indicates that 69% of participants perceive that their condition improved during the course of participation in HAM. In addition to the mental health benefits achieved (the principal objective of the scheme), participation in regular exercise has a positive impact on the fitness of individuals, and other factors such as drug and alcohol use and diet.
Healthy Active Minds evidences a healthcare cost saving of over £2million.

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<th>Beneficiaries</th>
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</table>
| Reduced cost or free-of-charge access to EL facilities is provided to people with moderate mental health issues, referred to the programme by their GP. | Individuals gain free-of-charge or reduced cost access to EL facilities. Individuals gain opportunities to socialise with others. | Physical activity has been found to improve mental health of participants. Participation in exercise achieves an improvement in fitness and therefore reduced costs of health and social care. It also leads to reduced sickness absence (for those beneficiaries that are in paid employment). Social gains including improved confidence and programmes aimed at behavioural change may result in accelerated improvement in mental health conditions and wider improvements in health and fitness. | Participants:  
  • Improvement in mental health conditions.  
  • Improvement in health and fitness levels.  
  • Increased confidence may allow quicker withdrawal from medication in some cases.  
NHS and social care agencies:  
  • Reduced costs of care.                                                                                                                                                                                                 |

“Healthy Active Minds helped me realise I had control over my mental health problems, taking physical action to counteract the illness”
The SROI methodology has been developed in order to help organisations to measure and quantify the benefits they are generating. It is increasingly being seen as an incredibly useful tool by a number of organisations and key commentators within the third and public sectors in the push to evaluate and measure social impact.

There are three ‘bottom’ line aspects of social return:
- Economic: the financial and other effects on the economy, either macro or micro;
- Social: the effects on individuals’ or communities’ lives that affect their relationships with each other; and
- Environmental: the effects on the physical environment, both short and long term.

The benefits of using SROI include:
- Accountability: organisations are able to give both the numbers and the story that supports them;
- Planning: SROI provides a change management tool to assist in the direction of resources towards the most effective services and to assess the viability of potential additional services;
- Cost and time effectiveness: the measures produce an analysis of the most cost and time effective activities; and
- Simplicity: impacts can be reduced to a simple comparison of the cost of funding EL and the benefits that flow from their core activities to facilitate analysis and give a clear indicator of types and ranges of success.

SROI takes total measurable outcomes, discounted to present value where the benefits occur in the future or are recurring over a period of time, and deducts:
- Deadweight: Outcomes that would have occurred regardless of the intervention;
- Alternative attribution: Outcomes that arise as a result of intervention by others; and
- Displacement: Outcomes that are negated or compromised by disadvantages arising elsewhere either in terms of social, economic or environmental damage.

A review of academic work and practical examples of SROI in use by the non-profit sector suggests that the measures fall into three patterns, which have been used in this work:
- Economic benefit created: where there is an impact on earning capacity or productivity;
• Costs saved or not wasted: where the intervention results in saving, either in the cost of another intervention or in a consequential cost (e.g. introducing prevention to save on the cost of a cure). This may be seen in either removing the need for, or increasing the effectiveness of, an alternative intervention; and
• Alternative or cheaper sourcing: where one intervention directly replaces another more expensive one.

6. In identifying these benefits, a key underlying requirement is to consider not only the positive contribution that EL makes, but also the economic damage that is avoided by having it in place. Much of our report involves the quantification of the damage to stakeholders that would result based on these implications. By avoiding this damage, EL contributes to the economy just as meaningfully as where the effect is an incremental benefit.

7. This evaluation was facilitated by Baker Tilly working with a SROI Project team, comprising seven staff from EL over a three month period to evaluate six core areas of activity undertaken by EL. These six areas cover only 60 – 65% of Edinburgh Leisure’s activities but consolidated a manageable number of areas for this initial review. An action research process was undertaken as follows:
   • A meeting was held with the SROI Project team to determine:
     • The key services that the relevant EL projects provide
     • The outcomes of these services and
     • The beneficiaries
   • Three further meetings were held during September to November 2011, interspersed with the SROI Project team testing out the conclusions from each interview by practical application in their work, then reporting the results back to the next meeting.
   • In addition there were a variety of phone calls with Baker Tilly interspersed between these meetings to discuss progress and review emerging evidence from internal and external consultation. Members of the group were encouraged to discuss emerging findings with colleagues in order to confirm their view on the manner in which the areas of work under review achieve a change in outcomes for beneficiaries (known as the theory of change) and the extent of the change achieved. For certain projects, the group co-ordinated further work to gather feedback on the success of projects from beneficiaries and external stakeholders as evidence to form a basis for certain key assumptions used in this study.
   • Based on this research, the SROI Project team was involved in co-developing potential means of evaluating the impact of these services by substituting financial measures (proxies) for the outcomes described. These are detailed in the full report.

8. Data and assumptions provided by staff at EL have been relied upon in our analysis; Baker Tilly have acted to facilitate EL’s understanding of the methodologies used to evaluate the impact but Baker Tilly are not responsible for the assumptions used in the evaluations shown in this report.
APPENDIX C

Definitions of Terms

The following definitions apply throughout this document, unless the context requires, otherwise:

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>ASB</td>
<td>Anti-Social Behaviour</td>
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<td>ASN</td>
<td>Additional Support Needs</td>
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<td>CMO</td>
<td>Chief Medical Officer</td>
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<td>CSJ</td>
<td>Centre for Social Justice</td>
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<td>CEC</td>
<td>City of Edinburgh Council</td>
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<td>EL</td>
<td>Edinburgh Leisure</td>
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<tr>
<td>FABB</td>
<td>Facilitating Access Breaking Barriers</td>
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<tr>
<td>GP</td>
<td>General Practitioner</td>
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<tr>
<td>GVA</td>
<td>Gross Value Added</td>
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<td>HAM</td>
<td>The Healthy Active Minds programme</td>
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<td>NEET</td>
<td>Not in Education, Employment or Training</td>
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<tr>
<td>NHS</td>
<td>National Health Service</td>
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<td>OAH</td>
<td>The Open All Hours programme</td>
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<tr>
<td>OECD</td>
<td>Organisation for Economic Co-operation and Development</td>
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<td>ONS</td>
<td>Office for National Statistics</td>
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<td>SAMH</td>
<td>Scottish Association for Mental Health</td>
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<td>SROI</td>
<td>Social Return on Investment</td>
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<td>UK</td>
<td>United Kingdom</td>
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Summary and extracts from Edinburgh Leisure’s Social Return on Investment