

<b>MEETING</b>	<b>B&amp;NES HEALTH AND WELLBEING BOARD</b>
<b>DATE</b>	<b>25/03/2015</b>
<b>TYPE</b>	<b>An open public item</b>

<b><u>Report summary table</u></b>	
<b>Report title</b>	Refresh of the Healthy Weight Strategy
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<b>List of attachments</b>	Draft Shaping Up – Healthy Weight Strategy
<b>Background papers</b>	N/A
<b>Summary</b>	Strategy is signed off and ready for public consultation.
<b>Recommendations</b>	The Board is asked to: <ul style="list-style-type: none"> <li>• Approve the strategy subject to public consultation</li> <li>• Agree the governance of the strategy</li> </ul>
<b>Rationale for recommendations</b>	<p>A Healthy Weight strategy was initially developed in B&amp;NES in 2005 and subsequently refreshed in 2007 and 2011. Since then, obesity has climbed the national public health agenda.</p> <p>The local strategy contributes to the HWB priority and outcome:</p> <ul style="list-style-type: none"> <li>• Priority: <b>Helping children to be a healthy weight</b></li> <li>• Outcome: <b>All pregnant women, children and young people are a healthy weight</b></li> </ul> <p><b>The strategy also contributes to the wider inequalities agenda identified in the Joint Health and Wellbeing Strategy:</b></p> <ol style="list-style-type: none"> <li>1. <b>Boost the economy</b> through reducing sickness absence and worklessness</li> <li>2. Meet the Council's new responsibilities in meeting the outcomes identified in the Public Health, NHS and Social Care Outcomes Framework – for example reducing falls in over 65s, increasing physical activity, reducing mortality from cardiovascular disease and increasing the use of outdoor space, improve access to affordable healthy food</li> <li>3. Contribute to improving travel flow and air quality – through increasing opportunities for and uptake of walking, cycling, play and other physical activity in our daily lives, reducing sedentary</li> </ol>

	<p>behaviour</p> <ol style="list-style-type: none"> <li>4. Reduce demand on health and social care services – through supporting people to achieve and maintain a healthy weight, increase knowledge and skills of food preparation and food growing as well as creating opportunities for people to live full and independent lives through increasing their activity levels</li> <li>5. Increase the use of existing facilities and maximising use of outdoor space – for example increasing use of existing community facilities (e.g. schools), parks and open spaces to encourage people to be more active</li> <li>6. Empowering communities - connecting with communities to improve health and wellbeing</li> <li>7. Reduce health inequalities - Getting people of all ages and backgrounds to eat more healthily, participate in leisure and sports activities both of which can improve social cohesion and help reduce antisocial behavior</li> <li>8. Widening access to an affordable healthier diet</li> <li>9. Increasing pupil attainment – supporting children to have the knowledge and skills to feel emotionally and physically well</li> <li>10. Improve the provision of and access to good food in the private and public sector through implementation of Workplace Charter, Eat Out Well, the School Food Plan</li> <li>11. Contribute to a Healthy and Sustainable Food Culture in supporting the delivery of the local food strategy to increase skills in cooking and growing, as well as increasing public awareness of good food.</li> </ol>
<p><b>Resource implications</b></p>	<p>The Council will contribute financially to the delivery of the Shaping Up Healthy Weight Strategy from existing resources (both across various Council departments and from the ring-fenced Public Health budgets). The Council will consider the appropriate use of any new funding it secures to support delivery of the recommendations in the strategy.</p> <p>Due to the cross cutting nature of this strategy its successful delivery will rely upon the funding and resources identified within supporting strategies (listed below) and a commitment to pool budgets or align resources from supporting strategies for implementation of this strategy:</p> <ul style="list-style-type: none"> <li>• CCG strategic plan</li> <li>• Local Food Strategy</li> <li>• Fit for Life Strategy</li> <li>• Transport plan</li> <li>• Green infrastructure strategy</li> <li>• Children and young people’s plan</li> <li>• Play strategy</li> </ul>

	<ul style="list-style-type: none"> <li>• Built facilities and playing pitches strategy</li> <li>• Green spaces strategy</li> </ul> <p>The strategy seeks to influence the work and use of resources of other partners and coordinate work within the sector in order to secure additional budget to deliver the outcomes.</p>
<b>Statutory considerations and basis for proposal</b>	It is a mandatory responsibility of every local authority to monitor levels of excess weight in reception and year 6 children.
<b>Consultation</b>	<p>The draft strategy has emerged following extensive research and consultation which considered a wide range of options</p> <p>To date the following consultation has been undertaken:</p> <p>Healthy Weight Strategy Group, Cabinet member for Neighbourhoods, Cabinet Member for Wellbeing, Health and Wellbeing Board, School Health Pupil Survey, local focus groups targeting families general public, focus groups of those who are using commissioned lifestyle services, a wide range of partners and stakeholders for Healthy Weight.</p> <p>Extensive consultation was undertaken as part of the strategy development for the Fit for Life Partnership and the Local Food Strategy, both of which contribute to the development and delivery of the Healthy Weight Strategy.</p> <p>Further plans are in place to undertake a formal online consultation of the strategy with the general public, Health and Wellbeing Board network members and Children and Young People's participation group.</p>
<b>Risk management</b>	A risk assessment related to the issue and recommendations has been undertaken, in compliance with the Council's decision making risk management guidance.

## **THE REPORT**

- 1.1 The strategy describes our partnership plans to promote healthy weight and tackle unprecedented levels of obesity. A strategy was initially developed in B&NES in 2005 and subsequently refreshed in 2007 and 2011. This refresh of the strategy is a high-level overview of current issues relating to healthy weight and focuses on what will achieve sustainable change.
- 1.2 It draws on the main themes from the national Healthy Lives, Healthy People: A Call to Action on Obesity in England as a clear vision for where action can be taken. It also takes into consideration the best practice recommendations as outlined in National Institute for Clinical Excellence (NICE) guidance and briefings relating to diet, nutrition, obesity and physical activity.
- 1.3 The report makes reference to a number of national and local statistics, by referring to the extensive evidence base for the benefits of activity and by making use of the joint strategic needs assessment to understand the key local issues.
- 1.4 It presents to Councillors, staff, partners and stakeholders the priorities for tackling obesity up to 2020. It links directly to the Joint Health and Wellbeing Strategy and the Children and Young People's Plan providing more detail on how the Council is working to deliver on the vision to support all residents to achieve and maintain a healthy weight.
- 1.5 The need for this strategy is increasingly important at this time when finances are very limited; whilst the needs, expectations and aspirations of our customers and partners are increasing.

## **2 WHY HEALTHY WEIGHT?**

- 2.1 In England 24.7% of adults are obese (BMI 30 and over), including 2.4% who are severely obese (BMI over 40). The negative health impacts tend to increase with greater levels of obesity. Moderate obesity (BMI 30-35) has been found to reduce life expectancy by an average of three years, while severe obesity (BMI 40-50) reduces life expectancy by eight to ten years.

### **Obesity Harms Adults**

- 2.2 Locally over half of adults (55.7%) in B&NES are estimated to be overweight or obese, although this is significantly lower than regional and national figures. Rates of recorded obesity are rising in adults in B&NES, but are lower than national rates.
- 2.3 It is well documented that people who are overweight and obese increase the risk of a range of diseases that can have a significant health impact on individuals. Obesity is associated with type 2 diabetes and hypertension – which are major risk factors for cardiovascular disease and cardiovascular related mortality. Obesity has also been associated with cancer, dementia, disability and reduced quality of life, and can lead to premature death.

### **Obesity and health inequalities**

- 2.4 The prevalence of overweight and obesity has increased in all communities, demonstrating that the whole population is at risk and a population preventative

approach is required. However some sectors of the population are more at risk of developing obesity and its associated complications, contributing to inequalities in health:

- People from deprived areas
- Older people
- People with disabilities
- Some black and minority ethnic groups

2.5 Obesity is also associated with educational attainment. Men and women who have fewer qualifications are more likely to be obese. Around a third of adults who leave school with no qualifications are obese, compared with less than a fifth of adults with degree level qualifications.

### **Obesity Harms children**

2.6 Trends in child obesity are a particular cause for concern. Obesity has been rising rapidly in children in England over the past 20 years – the proportion of children classified as obese has nearly doubled for children aged 4-5 years and increased more than threefold for children aged 10-11 years. However this increase may be starting to level off, as the rate of increase in child obesity has slowed compared to the increases observed between 1995 and 2004.

2.7 Around 1 in 4 (23.2%) Reception aged children (4 to 5 years old) in B&NES are an unhealthy weight, i.e. either overweight or obese. Around 1 in 11 (8.9%) Reception aged children in B&NES are obese.

2.8 Around 3 in 10 (29.5%) Year 6 aged children (10 to 11 years old) in B&NES are an unhealthy weight, i.e. either overweight or obese. Around 1 in 6 (16.0%) Year 6 aged children in B&NES are obese.

2.9 Half of parents do not recognise their children are overweight or obese. Parental obesity is a significant risk factor for childhood obesity. Therefore, areas with high levels of childhood unhealthy weight and obesity are also likely to have more adult obesity.

2.10 Being overweight or obese in childhood and adolescence has consequences for health in both the short term and longer term. Maternal obesity significantly increases risk of foetal congenital anomaly, prematurity, stillbirth and neonatal death. Once established, obesity is notoriously difficult to treat, so prevention and early intervention are very important.

### **Economic Impact of Obesity**

2.11 Independent research earlier this year found that obesity now costs the British taxpayer more than police, prisons and fire service combined.

2.12 The associated costs to society and business could reach £45.5 billion per year by 2050, with a 7 fold increase in NHS costs alone. Previous estimates suggested that the economic cost of obesity locally is approximately £49 million.

2.13 There are significant workplace costs associated with obesity. For an organisation employing 1000 people, this could equate to more than £126,000 a year in lost productivity due to a range of issues including back problems and sleep apnoea.

## **Vision, Outcomes and Objectives**

### 2.14 Vision for B&NES:

In Bath and North East Somerset all residents have the opportunity to have a healthy lifestyle and every adult and child is informed, able and motivated and supported to make positive choices regarding nutrition and physical activity.

### 2.15 Aim:

To focus our combined efforts on lasting societal and environmental changes that enable people to maintain a healthy weight; while informing and empowering people to make healthy choices.

### 2.16 Outcome:

- All people in B&NES are a healthy weight
- All residents and their families can experience the benefits of being a healthy weight.

## **How B&NES will promote a healthy weight:**

2.17 Achieving a higher proportion of healthy weight in the population is a complex social and public health issue. The evidence is very clear that policies aimed solely at individuals will be inadequate and that simply increasing the number or type of small-scale interventions will not be sufficient to reverse the trend. We need significant effective action to prevent obesity at a population level targeting elements of the obesogenic environment as well as improving nutrition and physical activity in individuals.

### 2.18 Our key objectives will be to:

- i. Coordinate a holistic integrated weight management pathway for the whole population which promotes self-care, prevention, early intervention and specialist support for both families and individuals
- ii. Control exposure to and demand for consumption of excessive quantities of high calorific foods and drinks
- iii. Increase opportunities for and uptake of walking, cycling, play and other PA in our daily lives, reducing sedentary behaviour
- iv. Increase responsibilities of organisations for the health and wellbeing of their employees
- v. Develop a workforce that is competent, confident and effective in promoting healthy weight
- vi. Influence decision making and policy making to change the environment we live in to facilitate healthy behaviours.

2.19 Achievement of these objectives will involve action across the stages of life through pregnancy to older age with a particular focus on families. Action will be at three levels; universal (for whole population), targeted (for those at risk) and specialist (for those who are above a healthy weight).

## 2.20 Principles underpinning the strategy:

- i. Leadership – Has strong local leadership supporting people to embrace change
- ii. Partnerships – effective partnership working to optimise the use of resources
- iii. Intelligent Interventions - developments are needs led, making best use of available market insight
- iv. Advocacy – ensuring local people & key stakeholders understand the benefits of healthy weight
- v. Value for Money – ensuring we deliver our priorities in the most effective way
- vi. Innovative – uses technology to better engage and connect with people
- vii. High quality and Best Practice – Development that meets local need, learning from & improving on the best practice
- viii. Holistic – a cross sector commitment contributing to improved health and wellbeing of local people
- ix. Targeted – focuses on the inactive, addressing inequalities for underrepresented groups, creating opportunities which are fun, tailored and inclusive
- x. Sustainability - ensuring exit routes are in place for participants to ensure impacts and measures are sustained and long lasting and that work is built from the bottom up creating an asset based community development approach.

2.21 The strategy recommends taking an integrated life course approach to addressing obesity. Key recommendations from each life course are summarised below:

### **Outcome 1: All pregnant women, children and young people are a healthy weight:**

- 2.22 Continue to provide effective Tier 1 and Tier 2 services for those at risk of unhealthy weights, ensuring that commissioned interventions include psychosocial aspects of being overweight. Improving access and availability of provision for 5-9 year olds, 14-19 year olds, families with physical and learning difficulties.
- 2.23 Develop a community development building parental capacity approach to self-care and prevention for the whole family (including carers and extended family members).
- 2.24 Continue to deliver the National Child Measurement Programme.
- 2.25 Work collaboratively with the Fit for Life partnership to:
- Encourage more pregnant women, children and young people to be more active as part of everyday life, removing barriers to participation
  - Refresh the Council's play strategy and ensure promoting the opportunity for active play is embedded in all other relevant children's service specifications

- Increase the opportunities for active travel for families
- Secure investment and deliver a coordinated training programme of 'making every contact count' for frontline staff working in the public and voluntary sector
- Enable all staff to have increased confidence in: - raising the issue of weight
- Through the delivery of the Fit for Life Partnership: Ensure physical activity is a consideration in all policy
- Create family friendly environments that enable opportunities for active play and planned physical activity development that impacts on children and young people
- Improve the nutritional quality and offer of food in junior and secondary schools and continue to increase uptake of school meals.

2.26 Through the local food partnership:

- Greater promotion of national Change4Life programme to deliver key messaging on the dangers of sugary and caffeinated drinks and portion sizes/over snacking locally
- Reduce diet-related inequality by focusing services on low-income residents/families with priority given to children from Black and Minority Ethnic Backgrounds
- Children with a physical or learning difficulty and young
- Support the NHS and the Local Authority to be exemplar employers in achieving the Workplace Wellbeing charter and Eat Out Eat Well Gold Status.

## **Outcome 2: All Adults are a healthy weight**

2.27 Continue to provide effective services for those at risk of unhealthy weights, ensuring that commissioned interventions include psychosocial aspects of being overweight.

2.28 Improve access to weight management programmes for :

- Adults aged 20-25
- People suffering from poor mental health
- Those with a physical or learning difficulty
- Residents who are from a Black or minority ethnic background

2.29 Review and develop an improved prevention self-care offer which includes the promotion of online tools and social media prioritising at risk populations.

2.30 Development of a Healthy Lifestyles app for people with learning difficulties.

2.31 Develop an online weight management offer for employees:

- Adults who have had a health check
- Newly diagnosed diabetic patients

2.32 Through collaboration with the local food partnership:



- Support more adults to access, afford and choose good quality, healthy food can enhance the consumption of good food and improve dietary health
- Seek opportunities for more people to develop skills in food growing and cooking will equip them with the knowledge, skills and confidence to prepare healthy meals.

2.33 Work in partnership with the Fit for Life Partnership to:

- Modernise leisure facilities and increase opportunities for activities to make them more attractive to women, people with disabilities
- Increase opportunities for low level structured activity needed for obese residents and/or those with long term conditions
- Continue to support the B&NES Inclusive Sport and Physical Activity partnership to improve opportunities and access to sport and physical activity for those with disabilities
- Review and increase provision of community based activities which attract adults aged 20-25 year olds, women, people with learning/physical difficulties and have a different ethnic origin than white.

2.34 Enable staff to have increased confidence in raising the issue of weight and the competencies to deliver weight management interventions.

2.35 Increase the opportunities for workplace weight management programmes.

2.36 Work with leisure and tourism, parks and allotments and open spaces to create opportunities for physical activity.

2.37 Ensure development of the transport plan includes opportunities for individuals and families to travel sustainably and contributing to climate change and traffic calming agenda.

2.38 Strengthen partnership with Planning Department to influence the need for residents to be physically active as a routine part of their daily life on new planning applications.

## **Older People**

2.39 Create a weight management care pathway to ensure a single inclusive pathway based on client need and evidence based practice.

2.41 Work with partners to embed weight management support within existing social care pathways.

2.42 Review and create a sustainable model for cooking skills for adults or single occupant households.

2.43 Through the delivery of the local food strategy:

- Improve the nutritional quality of food provision in local hospitals and residential care settings

- Improve access to a healthy and affordable diet prioritising social housing tenants.

#### 2.44 In collaboration with the Fit for Life Partnership:

- Invest in additional marketing campaigns that will inform, support, empower people to make changes to their activity levels
- Increase number of mass participation events aimed at engaging new people, promoting positive messages and providing education about sport and physical activity
- Promote activities which are holistic and combine improved mental wellbeing and exercise and reduce social isolation
- Increase the opportunities for low level structured activity needed for obese or those with long term conditions
- Review and explore the potential of increasing the number of community based rehab programmes
- Support development of residential travel plans that promote sustainable/active travel.