



EXECUTIVE BOARD DECISION

REPORT OF:	Executive Member for Health and Adult Social Care
LEAD OFFICERS:	Director of Public Health
DATE:	9 February 2017

PORTFOLIO/S AFFECTED:	All
WARD/S AFFECTED:	All
KEY DECISION:	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

SUBJECT: Eat Well Move More Shape Up Strategy 2017-20

1. EXECUTIVE SUMMARY

Obesity and physical inactivity are major public health problems due to their association with serious chronic diseases and the costs to both the individuals and society as a whole. The rapid increase in the number of obese people in the UK is a major challenge. Levels of participation in physical activity in the UK are currently very low in both children and adults. Nationally, over two thirds of the adult population are overweight or obese and data from the National Child Measurement Programme (NCMP) shows that 1 in 10 4-5 year olds and 1 in 4 10-11 year olds are obese.

Blackburn with Darwen (BwD) healthy life expectancy is significantly lower than the national average and the amount of years lived with a long term condition and disability is increasing resulting in a poor quality of life in later years. The economic cost of obesity and physical inactivity is significant and with the increasing pressure on the health and social care system, prevention must be a priority.

Public Health has provided strategic leadership and co-ordination and has a key role in leading the development of the 'Eat Well, Move More, Shape Up' strategy to ensure senior level multiagency ownership and co-ordinated local action. The three year strategy (2017-20) adopts a life course approach, aligned to the three Health and Wellbeing life stages of Start Well, Live Well and Age Well. Local priorities have been informed by a wide range of stakeholders and the public through a range of consultations, including online and face-to-face consultation, the National Obesity and Physical Activity strategies and evidence of what works.

The Blackburn with Darwen 'Eat Well, Move More, Shape Up' Strategy provides a framework for action across the life-course to:

- Improve access to healthy, affordable and sustainable food.
- Increase physical activity levels.
- Increase the number of children and adults of a healthy weight.

It provides an approach to health improvement that recognises the contributions that can be made across all sectors of our society. It draws on local experience and research evidence, aiming to promote improved healthy life expectancy and physical and mental health and wellbeing.

The priority areas are based on guidance from the national strategies 'Everybody Active Every Day', 'Childhood Obesity: A Plan for Action' and the 'NHS 5 Year Forward View' and have been developed and agreed after extensive consultation with the public and stakeholders. The co-produced action plan provides an approach to health improvement that recognises the contributions that can be made across all sectors both within the borough's health and wellbeing partners and across wider Lancashire.

The local authority is in a prime position to lead on the agenda by both influencing and engaging with the many partners and stakeholders who are integral to the success of the strategy. Signing up to the Local Authority Declaration on Healthy Weight will ensure health is a focus in all polices across the portfolios and shows a commitment from senior leaders to address the obesity issues in the borough. Through this leadership the local authority will advocate a coordinated approach with all partners to have a wide reaching, positive effect on the health of BwD's population.

The Eat Well Move More Shape Up Strategy group will lead and monitor progress on the implementation of the action plan, and report to the Health and Wellbeing Board sub groups (Start Well, Age Well, Live Well groups), with accountability to the Health and Wellbeing Board.

The draft strategy and action plan can be viewed on the following website:

<http://www.blackburn.gov.uk/Pages/Public-health.aspx>

2. RECOMMENDATIONS

That the Executive Board:

- Notes that obesity and physical inactivity is a significant public health issue requiring cross portfolio and senior level leadership and commitment to increasing physical activity levels, improving access to healthy and sustainable food and encouraging self-care from council, partners and stakeholders.
- Approves the three year Food, Physical Activity and Healthy Weight (Eat Well Move More Shape Up) strategy and action plan.

3. BACKGROUND

Food and Nutrition

Food is essential for life and impacts can be both positive and/or negative, depending on the type of food we eat. Food helps meet our physical needs by providing energy and nutrients but for many people it can also meet social, cultural and emotional needs. Food selection is not only a behavioural choice but can also be influenced by factors such as cost, access, knowledge and social norms. Significant differences in nutritional knowledge have been linked to different socioeconomic groups, with knowledge declining with lower socioeconomic status.

Physical Activity

Physical inactivity is the fourth leading cause of global mortality, and the cause of many leading preventable diseases in society such as coronary heart disease, some cancers and type 2 diabetes. Evidence tells us that being physically active has benefits for mental health and wellbeing, quality of life and maintaining independent living in older age and also plays a key role in brain development in early childhood and is good for longer-term educational attainment. Physical activity can help to play a role in reducing health and social inequalities and as a result of its wide reaching impact has been described as the 'best buy' in public health. The cost of physical inactivity to BwD economy amounts to £3,206,550 compared to the national average of £1,817,285.

Healthy Weight

Obesity is a major public health problem due to its association with serious chronic diseases and the costs to both the individuals and society as a whole. Obesity is a complex, but largely preventable condition which has serious, far reaching physical, psychological and social consequences that affects virtually all age and socioeconomic groups although some more than others. Obesity affects a person's wellbeing, quality of life and ability to earn.

Key Drivers

There are numerous national and local drivers which support a comprehensive strategic policy approach to addressing these cross cutting agendas, which include:

- *Everybody active, everyday – An evidence based approach to physical activity* (Oct 2014);
- *Sporting Futures: A new strategy for an active nation* (Dec 2015);
- *Towards an Active Nation* (May 2016);
- *NHS 5 Year Forward View* (2014);
- *Get Well Soon – Place Based Health* (2016)
- *Childhood Obesity: A Plan for Action* (Aug 2016)
- BwD Health and Wellbeing Strategy (2015-18)
- *Cumbria and Lancashire Sport and Physical Activity Strategy*
- *Lancashire Walking and Cycling Strategy*
- Pennine Lancashire Transformation Together A Healthier Future Programme

4. KEY ISSUES & RISKS

Demographics:

- The Borough has the second highest all-age mortality rate for cardiovascular disease (CVD) out of 152 upper-tier authorities in England.
- Childhood poverty continues to be a key issue
- BwD was ranked the worst local authority with the lowest proportion of children aged 5 with no obvious dental decay in 2015.

Physical Inactivity

- Physical inactivity directly contributes to 1 in 6 deaths, and around a quarter of the population is inactive and 45% of women and 33% of men are not active enough to benefit their health.
- Only 21% of boys and 16% of girls aged 5-15 are achieving their recommended physical activity targets (1 hour moderate activity daily).
- In BwD only 40,000 people (16+) are active enough to benefit their health which is 12% lower than the national average.

Healthy Weight

- BwD has a rate of 48.9 per 100,000 killed or seriously injured in BwD compared to 39.3 nationally, with implications on levels of walking and cycling
- More than 1 in 5 Reception children in BwD are overweight or obese and more than 1 in 3 Year 6 children are overweight or obese.
- The rate of obesity more than doubles between Reception and Year 6 from 9.4% to 22.6%.
- The prevalence of underweight children remains a local issue however this has reduced from last year's figures but still remains higher than the regional and national prevalence.
- 25% of adults aged 35-70 who had a Health Check in 2015-16 were identified as having pre diabetes. This figure is more than double the rate seen in Lancashire (10%). This poses a significant challenge to both the local authority and Clinical Commissioning Group in the management of those who have been identified.

Diabetes prevention is a key focus for the CCG and the local authority can support this in ensuring that public health commissioned services through Culture, Leisure, Sport & Young People are fully embedded into both the primary and secondary prevention pathway.

5. POLICY IMPLICATIONS

This strategy has been aligned to both local and national recommendations and guidelines for improving access to healthy and sustainable food, increasing physical activity levels and achieving a healthy weight and BwD's Health and Wellbeing strategy. The action plan has been developed in line with national policies and guidelines and local priorities as derived from the extensive consultation work undertaken.

In addition to the key drivers, the strategy and action plan will take into account the following policies and strategies listed below:

- Health & Social Care Act 2012
- Public Health Outcomes Framework 2014-15 (Department of Health, 2014)
- Fair Society, Healthy Lives. A strategic review of health inequalities in England post 2010 (The Marmot Review, 2010)
- Blackburn with Darwen Health and Wellbeing Strategy 2015-18
- BwD Planning for Health Supplementary Planning Document
- BwD Integrated Strategic Needs Assessment
- Local Authority Declaration on Healthy Weight
<https://www.blackpool.gov.uk/News/2016/March/Blackpool-Council-signs-up-to-healthy-charter.aspx>

6. FINANCIAL IMPLICATIONS

Public Health outcomes and programmes as identified through the strategy action plan will be largely funded through the Department of Health public health grant, with NHS England and Clinical Commissioning Group (CCG) funding clinical and specialist NHS healthcare services. Additional external funding opportunities will be sought for new projects. As part of the council Health and Wellbeing Review, public health outcomes contributing to the strategic aims will be delivered by all portfolios as funded by the Department of Health Prevention grant.

The social determinants of health agreements are monitored by the public health team via the Management Accountability Framework (MAF).

The Department of Health Public Health grant is currently ring fenced for prevention services and programmes, whereby Local Authorities are audited via the Director of Public Health and the council Director of Finance to ensure it used in line with the grant criteria.

Public Health currently funds a range of programmes which are supportive of the aims of this strategy, the majority of which are delivered by the council which include:

Programme Area	Food, Physical Activity & Healthy Weight activities include	2016-17 Estimated Spend (£)
Life course Living Happy, Healthy and Well	Re:refresh physical activity programme Wellbeing (Health Trainer) Service Falls prevention Walking and cycling Weight management Holiday Activity Programme Use of green spaces for health: Ante and post-natal physical activity Food growing Recipe 4 Health scheme	£1.3m
Children and Young People Living Happy, Healthy and Well Supported by the 0-19 Healthy Child Programme	Breastfeeding groups and co-ordination HENRY parenting programme Healthy Start vitamin scheme Dental health promotion	£100,000
Total		£1.4m

In addition to these specific services and interventions, all public health funded provision, will be reviewed and redesign to deliver a wide range of public health outcomes which will contribute to the delivery of this strategy and action plan.

7. LEGAL IMPLICATIONS

Transfer of public health from the NHS to local government and Public Health England (PHE) has introduced a significant extension of local government powers and duties and represents an opportunity to change focus from treating sickness to actively promoting health and wellbeing. Section 12 of the Health and Social Care Act 2012 inserts a new section 2B into the NHS Act 2006 to give each relevant local authority a new duty to take such steps as it considers appropriate to improve the health of the people in its area. This section also gives the Secretary of State a power to take steps to improve the health of the people of England and it gives examples of health improvement steps that either local authorities or the Secretary of State could take, including giving information, providing services or facilities to promote healthy living and providing incentives to live more healthily.

Local authorities have considerable discretion in how they choose to invest their grant to improve their population's health, although they have to have regard to the Public Health Outcomes Framework and should consider the extant evidence regarding public health measures.

It will be necessary to ensure compliance with planning and licensing laws with regard to activities in the strategy and plan such as applications relating to the operation of hot food takeaways. Legal advice will also be sought in relation to highways legislation and pilot programmes planned including temporary street closures for street play.

8. RESOURCE IMPLICATIONS

Public health will chair the strategy steering group and coordinate the reporting against the action plan on behalf of all stakeholders on an annual basis. Contribution to public health outcomes as identified through the strategy action plan will be delivered through the social determinants of health fund for each directorate and monitored by the public health team through specified key performance indicators.

In addition to the delivery of direct primary prevention services, there will be a cost relating to staff time from across a range of council departments and Executive Member portfolios, to draw upon the council's powers and responsibilities for developing and implementing local policy changes to support the aims of the strategy.

9. EQUALITY AND HEALTH IMPLICATIONS

Please select one of the options below. Where appropriate please include the hyperlink to the EIA.

Option 1 Equality Impact Assessment (EIA) not required – the EIA checklist has been completed.

Option 2 In determining this matter the Executive Member needs to consider the EIA associated with this item in advance of making the decision. (*insert EIA link here*)

Option 3 In determining this matter the Executive Board Members need to consider the HIA associated with this item in advance of making the decision.



Eat Well Move More
Shape Up HIA v1.0.p

10. CONSULTATIONS

Extensive consultation around the strategy has taken place over the last 18 months. An initial period of consultation and insight work took place during 2015 and involved a Start Well and Age Well consultation along with a commissioned consultation around the issue of food poverty in the borough. There was also an initial online public consultation in 2015 which had 201 responses.

From this work the draft action plan was produced and further targeted consultation has taken place during 2016, particularly concentrated between May and September. The consultation has included the following:

- Public Online Consultation – 110 responses
- Health Professional Online Consultation – 27 responses
- Stakeholder Engagement event in June 2016 and face to face/email engagement with individual stakeholders
- Senior Policy Team briefings across all portfolios
- Quarterly Eat Well Move More Shape Up Steering Group meetings
- Primary School Catering Managers
- Clinical Commissioning Group Protected Learning Time event and Clinical Commissioning Group Operations Group
- Bangor Street Ladies group & Inter Madrassah Organisation Women 4 Women group
- Families Health & Wellbeing Consortium
- Older People’s Forum and Age UK consultation
- Learning Disabilities Partnership Board
- Blackburn with Darwen Health and Wellbeing Board, Live Well Board and Children’s Partnership Board

Intelligence gathered through the BwD Integrated Strategic Needs Assessment (ISNA) and subject specific ISNAs has also informed the action plan.

11. STATEMENT OF COMPLIANCE

The recommendations are made further to advice from the Monitoring Officer and the Section 151 Officer has confirmed that they do not incur unlawful expenditure. They are also compliant with equality legislation and an equality analysis and impact assessment has been considered. The recommendations reflect the core principles of good governance set out in the Council's Code of Corporate Governance.

12. DECLARATION OF INTEREST

All Declarations of Interest of any Executive Member consulted and note of any dispensation granted by the Chief Executive will be recorded in the Summary of Decisions published on the day following the meeting.

VERSION:	0.09
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CONTACT OFFICER:	Shirley Goodhew Beth Wolfenden 01254 666960
DATE:	12 January 2017
BACKGROUND PAPER:	Eat Well Move More Shape Strategy, Action Plan, Plan on a Page and Health Impact Assessment.