

HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Director of Public Health
DATE:	23 January 2017

SUBJECT: Eat Well Move More Shape Up Strategy 2017-2020

1. PURPOSE

To raise awareness of physical inactivity and unhealthy weight as a local public health issue.

To request approval from the Board to implement the partnership Blackburn with Darwen Eat Well Move More Shape Up Strategy

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

That the Health and Wellbeing Board:

- Notes that obesity and physical inactivity is a significant public health issue requiring 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 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 amounts to £3,206,550 compared to an average of £1,817,285 nationally.

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, including the national strategies: *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) the recently released *Childhood Obesity: A Plan for Action* (Aug 2016) and the refreshed BwD Health and Wellbeing Strategy. The strategy will also be driven by the Together A Healthier Future Programme and will be a key document in the prevention agenda of the transformation programme across the Pennine footprint. The strategy will be aligned with the '*Cumbria and Lancashire Sport and Physical Activity Strategy*' and the '*Lancashire Walking and Cycling Strategy*'.

4. RATIONALE

The purpose of the Blackburn with Darwen Eat Well Move More Strategy is to provide a framework for action across the life-course to increase healthy life expectancy. It provides an approach to health improvement which recognises the contributions that can be made across all sectors of our society. It draws on local experience and research evidence, aiming to increase both physical activity levels and the number of residents who are a healthy weight.

The national obesity and physical activity strategies are clear that it is not the sole responsibility of any one sector alone. It is important that stakeholders and partners work together to help reduce the prevalence of non-communicable diseases such as Type 2 Diabetes, coronary heart disease and stroke through a healthy lifestyle and co-ordinate and deliver interventions with local communities to ensure that they are effective in helping to improve healthy life expectancy in Blackburn with Darwen.

5. KEY ISSUES

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
- 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.

The current Pennine Lancashire health and social care transformation programme seeks to redesign the future of health care in our area and presents a challenge in saving over 20% of its total budget over the next five years. This also presents an opportunity in providing a case for change from a primary prevention perspective within which food and physical activity initiatives and policy changes within this strategy could support the case for change.

6. 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.

The strategy and action plan take into account the policies and strategies listed earlier in this paper and those listed below:

- 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>

7. FINANCIAL IMPLICATIONS

There are no financial implications. The strategy and action plan will be delivered within existing partner agency budgets and the Department of Health Public Health Prevention grant.

8. 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 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 food take aways. Legal advice will also be sought in relation to highways legislation and pilot programmes planned including temporary street closures for street play.

9. RESOURCE IMPLICATIONS

The strategy and action plan will be delivered by strategic health and wellbeing board partners, with the council's Public Health team providing a leadership and co-ordination role.

10. EQUALITY AND HEALTH IMPLICATIONS

In determining this matter the Board need to consider the HIA associated with this item in advance of making the decision, which accompanies this report

11. 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.

VERSION:	1.0
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DATE:	23 January 2017
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BACKGROUND PAPER:	Eat Well Move More Shape Up Strategy and Action Plan, Plan on a Page http://www.blackburn.gov.uk/Pages/Public-health.aspx Health Impact Assessment
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