# Health & Wellbeing Board

# 5 November 2014



# Healthy Weight Strategic Framework for County Durham

# Report of Anna Lynch, Director of Public Health County Durham, Children and Adults Services, Durham County Council

# **Purpose of the Report**

1. The purpose of this report is to present the Healthy Weight Strategic Framework for County Durham to the Health & Wellbeing Board for agreement.

# Background

- 2. The Joint Strategic Health Needs Assessment<sup>1</sup>, the Director of Public Health annual report<sup>2</sup> and the Joint Health and Wellbeing strategy<sup>3</sup> for County Durham have identified overweight and obesity in children, young people and adults as a priority health and social risk area that needs to be addressed. Obesity strategies for children and young people and for adults in County Durham were developed in 2004. Following the review of obesity in primary aged children by the Children and Young People's overview and scrutiny group, it was recommended<sup>4</sup> that the obesity strategy should be reviewed.
- 3. Over 75% of children in County Durham are a healthy weight when they start school. However throughout the life course, development of excess weight (overweight and obesity) increase to an extent that less than 25% of adults are a healthy weight.
- 4. In 2011/12, approximately 2000 residents of County Durham across all ages were admitted to hospital with either a primary or secondary diagnosis of obesity<sup>5</sup>, most of which could have been prevented.
- 5. The County Durham Healthy Weight Strategic Framework has been developed by the County Durham Healthy Weight Alliance (HWA) as a local response to 'Healthy Lives, Healthy People: A Call to Action on Obesity in England<sup>6</sup>'. This was developed as a policy priority to tackle the emerging rise in overweight and obesity observed over the past few decades.

<sup>&</sup>lt;sup>1</sup> JSNA (2012), <u>http://content.durham.gov.uk/PDFRepository/JSNA-2012-Interactive-Version.pdf</u>. Accessed 8/1/14 <sup>2</sup> NHS County Durham and Darlington, *Back to the Future: annual report of the Director of Public Health*, <u>http://content.durham.gov.uk/PDFRepository/Public-Health-Annual-Report-2011-2012.pdf</u>. Accessed 8/1/14

<sup>&</sup>lt;sup>3</sup> County Durham Joint Health and Wellbeing strategy (2013-2017), <u>http://content.durham.gov.uk/PDFRepository/Public-Health-Annual-Report-2011-2012.pdf</u>. Accessed 8/1/14

<sup>&</sup>lt;sup>4</sup> Joint Children & Young People's and Adults Wellbeing and Health report (2012), Obesity in primary aged children, <u>http://content.durham.gov.uk/PDFRepository/OS\_ObesityinchildrenNov2012.pdf</u>. Accessed 8/1/14 <sup>5</sup> HES, Statistics on obesity, physical activity and diet- England 2013.

http://www.hscic.gov.uk/searchcatalogue?productid=11194&topics=2%2fPublic+health%2fLifestyle%2fDiet&sort=Relevance&size=10&page=1#top, Accessed 30/1/14

<sup>&</sup>lt;sup>6</sup> DH (2010), Healthy Lives, Healthy People :A call to action on obesity in England. <u>https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/213720/dh\_130487.pdf.</u> Accessed 13/1/14

- 6. The Call to Action provides insight into future trends and consequences of obesity. It is estimated that nearly a quarter of people in England are already obese.
- 7. This could result in a doubling of direct healthcare costs, and an increase in the wider costs to society and business, reaching a possible £49.9 billion by 2050.
- 8. There are significant social costs associated with the treatment of obesity and its consequences, as well as costs to the wider economy arising from chronic ill health. Sickness absence attributable to obesity in England is estimated at 15.5 -16 million days per year.
- 9. The Healthy Weight Framework is aligned to priority actions in the County Durham Joint Health and Wellbeing plan, sustainable communities' strategy, cardiovascular disease (CVD) delivery framework, Sustainable food strategy, physical activity strategy, school food action plan for County Durham, Children, Young People and Families Partnership Plan, North Durham CCG commissioning intentions and Durham Dales, Easington and Sedgefield CCG commissioning intentions.

# Aims and Objectives

- 10. The aim of the strategic framework, is to develop and promote evidence based multiagency working and strengthen local capacity and capability to achieve a sustained upward trend in healthy weight for children, young people and for adults in County Durham by 2020.
- 11. The objectives are:
  - To develop a supportive built and natural environment such as walking, cycling and access to healthy food and nutrition so that it is less inhibiting to healthy lifestyles;
  - Provide information and practical support available to individuals to make healthier choices;
  - Provide effective programmes and services to help individuals and families achieve and maintain a healthy weight: and
  - Develop a workforce which is competent, confident and effective in promoting healthy weight.

# Scope

- 12. Interventions will be designed across the life course for children, young people and families and for adults and will be targeted according to the specific needs of communities to ensure proportionate distribution of resources. Interventions progressed will be:
  - Universal -create positive environments and activities which actively promote and encourage a healthy weight in County Durham. This involves transport, the built environment, parks, open space and access to affordable healthy food. Most interventions at this level will be achieved through provision by the voluntary and community sector, Independent sector, parish councils, children's centres, schools, Area Action Partnerships (AAPs), leisure and culture, businesses, sustainable transport etc. and also through policy and planning. It also includes opportunistic screening of height and

weight by general practitioners (GP), brief intervention and advice and sign posting to relevant activities and programmes;

- **Targeted** interventions that support individuals, families and communities most at risk of developing overweight and obesity to intervene early. Provision of these interventions will occur mainly through public health commissioning as part of the wellbeing model, breastfeeding and parenting programmes and other children and young people services; and
- **Specialist** services for children, young people and adults to ensure support to those who need additional help to achieve a healthy weight, including maternity services. These interventions are provided through mainly hospital based services commissioned by Clinical Commissioning Groups or NHS England e.g., bariatric surgery, dietetics, psychology and paediatric services.

# The challenge

- 13. Data from the National Child Measurement Programme (NCMP), shows that in County Durham, very few children (0.6% at reception and 0.8% at year 6) are underweight, compared to those who are either overweight or obese (21.9% at reception and 35.4% at year 6).
- 14. Interventions to promote healthy weight in children will therefore be targeted more at reducing overweight and obesity and reducing the inequality gap between reception and year 6.
- 15. Incomplete data exist for adult obesity via the Quality Outcomes Framework (QOF). However, Public Health England estimates that about 28.6% of adults aged 16 years and above are obese in County Durham. Overweight and obese prevalence has been identified to be higher in the most deprived areas of the county.

# What we will do

- 16. A self-assessment was conducted against the recommendations from the NICE guidance (PH42), 'obesity: working with local communities'<sup>7</sup>. There have been consultations with stakeholders including: Clinical Commissioning groups, Voluntary and Community sector, Area Action Partnership Co-ordinators, Scrutiny committee, School nursing and Health visiting service, health watch, Headteachers, Local access forum, Children and Young people, One Point staff, Schools, CDDFT staff, Town and Council forum, local businesses and other relevant agencies between November 2013 to June 2014. Following these a series of strategic actions have been developed. The high level strategic actions include:
  - Explore opportunities for education and training across the life course to promote healthy diet and nutrition;
  - Support the development of A5 (takeaway foods) planning guidance;
  - Explore ways to improve access to the natural environment to increase participation in physical activity;

<sup>&</sup>lt;sup>7</sup> NICE PH42 (2012), Obesity-working with local communities. <u>http://publications.nice.org.uk/obesity-working-with-local-communities-ph42</u>. Accessed 13/1/14

- Maximise available opportunities to become physically active;
- Consider using a consistent approach to marketing using Change4life branding;
- Develop and implement a model for community engagement; and
- Develop a performance and reporting process for the HWA in order to make relevant data available to all partners and facilitate evaluation and inform commissioning.
- 17. These actions will be delivered through four multi-agency subgroups of the healthy weight alliance, namely:
  - Food and Health;
  - Physical activity;
  - Social marketing, Engagement and Communications; and
  - Capacity Building, Monitoring, Evaluation and Intelligence.
- 18. The subgroups will engage with agencies and other community partners to ensure that there is coordinated delivery across the county.
- 19. Each of these subgroups will produce a detailed delivery plan to be implemented and will report to the HWA. The Food and Health and Physical activity subgroups will in addition report to the Food Partnership and the Sports and Physical Activity Partnership respectively. The HWA will report to the Health and Wellbeing Board through the Director of Public Health annually.

# Consultation

20. A series of consultations on the framework with various agencies including Clinical Commissioning groups, Voluntary and Community sector, Area Action Partnerships, Overview & Scrutiny committee, School nursing and Health visiting service, health watch, Headteachers, Local access forum, Children and Young people, One Point staff, Schools, CDDFT staff, Town and Council forum, local businesses and other relevant agencies were carried out between November 2013 to June 2014. Feedback from these sessions have been considered in the development of the framework.

# Recommendations

- 21. The Health & Wellbeing Board is requested to:
  - Agree the Healthy Weight Strategic Framework for County Durham
  - Note the alignment of the Healthy Weight Strategic Framework to a range of existing strategies between Durham County Council and partner organisations
  - Note the need for collaborative working with all relevant partners required for implementation of the strategic framework
  - Note the tiered approach to delivery required across the life course; and
  - Note the scale of the challenge and potential impact if action to tackle obesity is not progressed
  - Note this is long-term approach and actions are programmes over the six year time frame

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#### Appendix 1: Implications

#### Finance

The public health grant funds some current commissioned interventions which will be integrated into a new wellbeing approach, based on communities.

# Staffing

There are no implications identified for staffing

#### Risk

Non delivery of the framework poses a risk to achieving some of the performance indicators from the public health outcomes framework, mainly breastfeeding, excess weight in children and in adults and utilisation of outdoor space for physical activity. There is a financial risk to clinical commissioning groups resulting from hospital admissions for obesity and obesity related long term conditions.

# Equality and Diversity / Public Sector Equality Duty

Within the delivery of the framework there will be an opportunity to address underlying causes of unhealthy weight e.g., equity, poverty and social justice

# Accommodation

There are no new implications for accommodation, although some interventions may need to be delivered at existing premises such us community centres and children's centres.

#### **Crime and Disorder**

There are no implications for crime and disorder

#### **Human Rights**

There are no implications for human rights

#### Consultation

A series of consultations on the framework with various agencies including Clinical Commissioning groups, Voluntary and Community sector, Area Action Partnerships, Scrutiny committee, School nursing and Health visiting service, health watch, Headteachers, Local access forum, Children and Young people, One Point staff, Schools, CDDFT staff, Town and Council forum, local businesses and other relevant agencies were carried out between November 2013 to June 2014. Feedback from these sessions have been considered in the development of the framework.

#### Procurement

No implications

#### **Disability Issues**

There are no identified implications for disability issues

#### Legal Implications

There are no legal implications identified