



Derby City Council

HEALTH AND WELLBEING BOARD
21 January 2016

ITEM 9

Report of the Acting Strategic Director - Adults
and Health and Director of Public Health

Derby Childhood Obesity update

SUMMARY

- 1.1 An update on Derby's Childhood Obesity Strategy was last presented to the Board in July 2015. Six month on, this paper provides an update on progress made since then.
- 1.2 A number of key steps have been undertaken to reduce childhood obesity:
 - **Health and spatial planning:** a Derbyshire Health and Planning Steering Group has been established and a Shared Strategic Statement has been developed, which aims to tackle obesogenic environments.

A protocol for incorporating health considerations into development management processes in Derby has been drafted and is being piloted.
 - **Pilot – Normanton Whole System Approach:** the Whole System Approach to obesity prevention is being piloted in the Normanton area with a number of initiatives underway including Healthy Kids event and Cooking in Places of Worship.
 - **BIT project in primary schools:** a project to improve the healthiness of packed lunches in Derby primary schools is being developed in collaboration with Public Health England's and the Cabinet Office's national Behavioural Insights Teams.
 - **Sport England Move More Strategy:** links have been made with Derby's Move More Strategy, being led by Derby University in partnership with a number of key partners. The partners are in the formative stages of developing a whole system approach to physical inactivity targeting areas of health inequality.
 - **Obesity treatment and obesity pathway:** development of an integrated obesity treatment and prevention pathway is underway aimed at driving activity and resources towards the lower level of intervention. It is envisioned that the new pathway will be collaboratively commissioned between the CCG and the Local Authority.
- 1.3 In November 2015, the Health Select Committee published its report, 'Childhood Obesity: Brave and Bold Action' setting out nine areas of improvement.
- 1.4 Local action is progressing in the context of a high national profile, with a Childhood

Obesity Strategy expected from Central Government in the New Year.

- 1.5 Further work to establish a Healthy Food Awards scheme for Derby food businesses is currently on hold due to lack of resource for implementation.
- 1.6 These actions aim to lay the foundations of reducing childhood obesity in the medium and long-term.
- 1.7 In the coming months these activities will be further embedded and progressed. An update on progress will be brought back to the Board in six months.

RECOMMENDATION

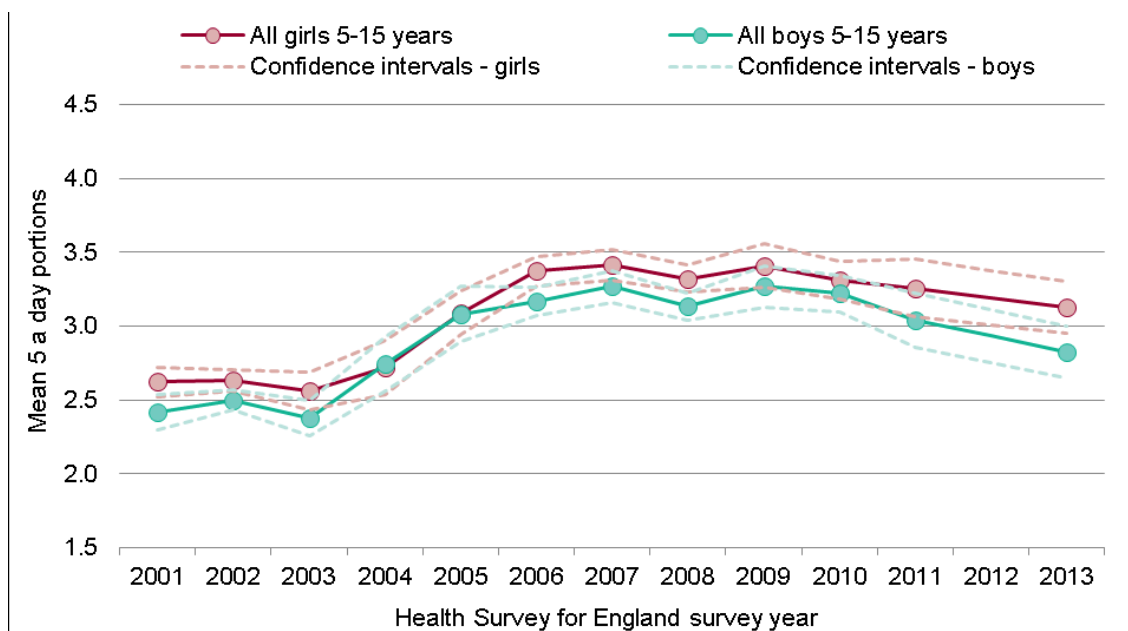
- 2.1 That the Board receives and notes the progress made in the development and implementation of Derby's Childhood Obesity Strategy.
- 2.3 That Board members consider the leadership role their organisations / system components might play in preventing obesity and promoting a healthy weight environment.

REASONS FOR RECOMMENDATION

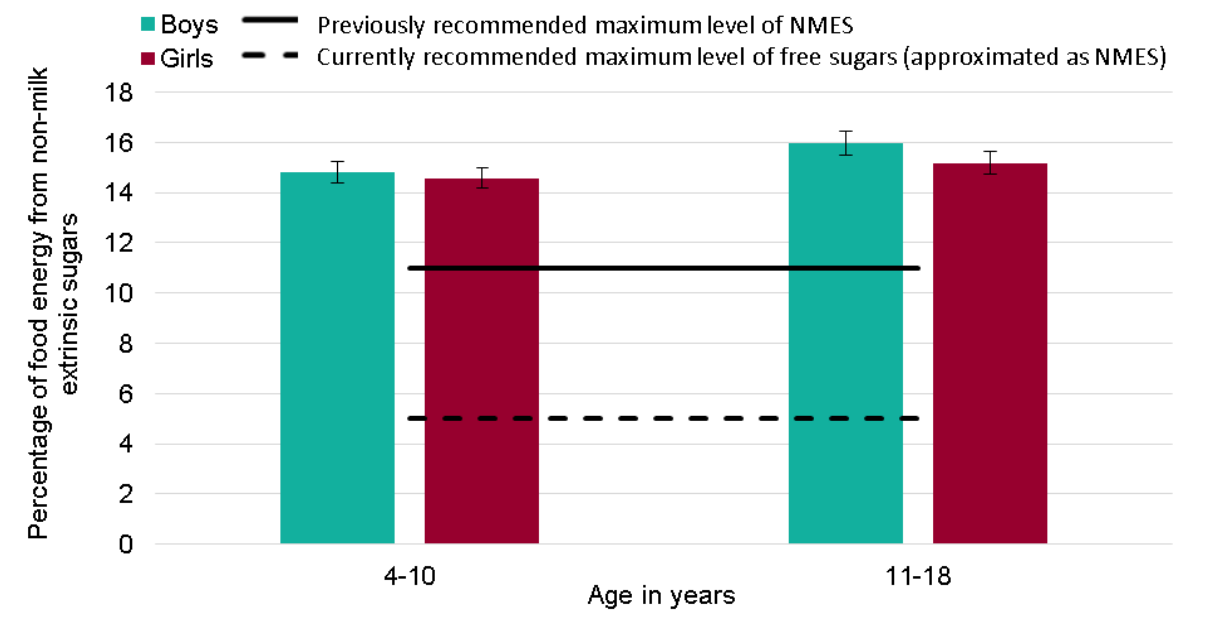
- 3.1 One in five children in Derby is already carrying excess weight by age 4-5, and by age 10-11 the figure has risen to over a third.
- 3.2 Obesity puts us at greater risk of type 2 diabetes, heart disease and stroke, certain cancers, low self-esteem and can reduce life expectancy by up to 9 years.
- 3.3 There is a strong association between childhood obesity and deprivation, and the gap between disadvantaged and affluent areas widens as the child grows older.

SUPPORTING INFORMATION

- 4.1 The majority of children do not eat the recommended minimum of five portions of a variety of fruit and vegetables per day: among children aged 11–18 years, 10.1% of boys and 7.5% of girls meet the five a day recommendation (PHE December 2015).



- 4.2 In July 2015 the UK government adopted newly published advice which recommends that the average intake of free¹ sugars should not exceed 5% of total dietary energy for age groups from two years upwards. Children's consumption of added or processed sugar significantly exceeds the maximum recommended level.



¹ I.e. sugars added to foods by the manufacturer, cook, or consumer, plus sugars naturally present in honey, syrups, and fruit juices.

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- 4.3 Children's consumption of saturated fat as part of their daily food energy significantly exceeds the maximum recommended level of 11% of total food energy; younger children aged 4–10 years obtain significantly more of their food energy from saturated fat than older children aged 11–18 years (PHE December 2015).
- 4.4 An overview of the key activities undertaken locally to tackle childhood obesity are summarised in Appendix 2.

OTHER OPTIONS CONSIDERED

- 5.1 None.

This report has been approved by the following officers:

Legal officer Financial officer Human Resources officer Estates/Property officer Service Director(s) Other(s)	Alison Parkin Alex Ward Cate Edwynn Nick O'Reilly, Ann Webster, Andy Hills, Richard Boneham, Paul Clarke
For more information contact: Background papers: List of appendices:	Jilla Burgess-Allen 01332 643098 jilla.burgess-allen@derby.gov.uk None Appendix 1 – Implications Appendix 2 - Childhood Obesity progress report December 2015

IMPLICATIONS

Financial and Value for Money

- 1.1 There is no current financial impact relating to this report.

Legal

- 2.1 There are no known legal implications at this point. It is noted that regulatory / planning measures would require an equality impact assessment.

Personnel

- 3.1 None directly arising from this report.

IT

- 4.1 None directly arising from this report.

Equalities Impact

- 5.1 There is a strong association between childhood overweight/obesity and deprivation, and the difference between levels of childhood obesity in disadvantaged compared to affluent families gets greater as the child grows older. Measures to tackle childhood obesity have the potential to reduce health inequalities and improve the life chances of socially disadvantaged families.

In general, children classed as White British have lower obesity prevalence than most other ethnic groups, with highest rates tending to occur in Black and Bangladeshi groups. South Asian populations are at risk of chronic diseases and mortality at lower levels of overweight than European populations. This differential vulnerability to obesity-related morbidity and mortality is being taken into account in the development of the strategy, to ensure ethnicity-related inequalities are reduced

Health and Safety

- 6.1 None directly arising from this report.

Environmental Sustainability

- 7.1 None directly arising from this report.

Property and Asset Management

- 8.1 None directly arising from this report.

Risk Management

- 9.1 None directly arising from this report.

Corporate objectives and priorities for change

- 10.1 Derby's approach to tackling childhood obesity will support the Derby Plan, the Joint Health & Wellbeing Strategy and the Core Strategy.

Appendix 2: Childhood Obesity Update

December 2015

Jilla Burgess-Allen, Public Health Specialty Registrar

Progress on linking health & spatial planning

Derby's Childhood Obesity Strategy aims to tackle the 'obesogenic environment', including the availability of 'junk food' and the drivers of sedentary lifestyles. It is difficult for children and families to maintain a healthy weight living and working in places where it is easy to buy cheap high calorie / processed foods, where there is a high density of fast food outlets providing large portion sizes and limited healthier options, or where congested streets make walking or cycling unsafe or unpleasant, air quality is poor and noise levels are high, or if there are few or poorly maintained parks and areas of greenspace.

A Derbyshire Planning and Health Steering Group has been established to provide strategic oversight of collaborative work on planning and health. Derby City Council Public Health, Planning Policy and Housing & Regeneration teams are all represented on the group, as is Southern Derbyshire CCG. A shared strategic statement on planning for health has been drafted (see Appendix 1), setting out a shared vision for healthy communities, shared principles, key messages and priorities for incorporating health into planning processes across all organisations within the Combined Authority.

The Derbyshire Planning and Health steering group has also developed a work plan detailing key priorities for action and implementation.

Derby City Council Public Health and Planning colleagues have agreed to pilot a simple protocol for incorporating health considerations more systematically into development management processes. The pilot protocol includes suggested ways in which health can be more systematically taken into consideration at three key stages in the development management process: pre-application, application phase, and securing planning obligations. We also plan to trial the use of a checklist (adapted from the HUDU Healthy Urban Planning tool) to be applied to developments above a threshold of 200 dwellings or 20,000Sq m floorspace.

Normanton Whole System Approach pilot

Following the successful Healthy Normanton event in April 2015, a Normanton Obesity Task Group has been established to take forward community level ideas for tackling obesity in the area.

A successful Healthy Kids event, led by a consortium of three local GP practices, was held at the Indian Community Centre in October 2015.

Cooking in Places of Worship: the Public Health community engagement team are engaging temples in the Normanton area in nutrition awareness-raising and are starting to identify simple ways to make the food prepared at temples healthier (eg less butter on rotis, swapping full-fat for semi-skimmed milk)

Eat better, Start better sessions to be delivered by Surestart from January 2016.

Surestart also plan to start using the Peartree Community Garden to help children and families get involved in food growing activities.

BIT project in primary schools

Evidence suggests that children who take up school meals tend to eat a healthier diet than those who take packed lunches or are allowed to go off site to have takeaway meals. Only 1% of packed lunches meet the nutritional standards that currently apply to school food.

Derby's Public Health team have started to work with Public Health England's Behavioural Insights Team to develop a project aiming to improve the healthiness of packed lunches in a number of Derby primary schools. We are currently in the process of engaging schools, parents and pupils in coproducing the intervention, which might include providing clear lunch examples, easy swaps and clear labelling of the sugar, salt and fat content of common items, helping guide parents to healthier choices.



Working with local food businesses

There is significant potential to alter Derby's existing food environment by working with local food businesses to improve the healthiness of their offer. We have conducted ground work to identify a range of possible models for a Healthy Eating Award Scheme for Derby Food Businesses, highlighting expected resource requirement and anticipated impact. A preferred model was identified with Regulatory Services, whereby a pilot scheme would be developed in a high-obesity area of Derby using a bottom-up approach that engages with both demand and supply sides; this would be evaluated and rolled out if cost-effective. However, no further progress can be made given current resource constraints.

Links to Sport England Move More strategy

Derby has been successful in bidding for Sport England money to deliver an ambitious strategy tackling inactivity across the city.

The project is being led by Derby University, in partnership with Derby City Council, Sporting Futures, Derby County Community Trust, and Derby College.

The project aims to target 5,500 inactive people with one or more non-communicable disease (NCD) risk factors such as high blood pressure and obesity over three years. Individual changes in behaviour will be monitored over a period of twelve months to see how sport can improve a person's health and general wellbeing.

An important element of the Move More Strategy is to make best use of the wider Public Health workforce in promoting physical activity and healthy diet. It is envisaged that health champions, adopting an evidence-based MECC (Making Every Contact Count) approach, will be trained from a broad range of public sector organisations, community organisations, and local residents.

Derby City Council's Livewell service are currently enrolling 10 primary plus 3 secondary schools into the children's strand of the project, taking a 'Whole school approach' to getting pupils moving.

Obesity treatment and prevention pathway

NHSE have confirmed that they will be transferring the commissioning responsibility for tier 4 bariatric services to CCGs in April 2016. A robust pathway is required to ensure access is available to those who would gain most benefit from bariatric surgery whilst maintaining most individuals at the lowest level of intervention within the pathway.

Development of an integrated obesity treatment and prevention pathway is underway, ensuring it meets the principals of the Derby 'Wedge', driving activity and resources towards the lower level of intervention within the pathway. Development of the Derby pathway also seeks to address current inequities in service between the County and the City. It is envisioned that the new pathway will be collaboratively commissioned between the CCG and the Local Authority.

National policy context

In November 2015 the Health Select Committee published its report, 'Childhood obesity: brave and bold action'. The report highlights nine areas for improvement. They are:

- Strong controls on price promotions of unhealthy food and drink;
- Tougher controls on marketing and advertising of unhealthy food and drink;
- A centrally led reformulation programme to reduce sugar in food and drink;
- A sugary drinks tax on full sugar soft drinks, in order to help change behaviour, with all proceeds targeted to help those children at greatest risk of obesity;
- Labelling of single portions of products with added sugar to show sugar content in teaspoons;

- Improved education and information about diet;
- Universal school food standards;
- Greater powers for local authorities to tackle the environment leading to obesity;
- Early intervention to offer help to families of children affected by obesity and further research into the most effective interventions.

The government has announced it will be publishing a national childhood obesity strategy in the New Year.

Public Health England is in the process of reviewing the 'Eatwell Plate', new resources are expected in the New Year.