# **AGENDA ITEM 9**

To: West Kent Health and Wellbeing Board

From: Jane Heeley, Chief Environmental Health Officer, TMBC and

**Healthy Weight Lead WKHWB** 

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Date: 18<sup>th</sup> October 2016

Subject: National Tacking Obesity Conference and Healthy Weight Update

### 1. Introduction

This report provides feedback from the National Tackling Obesity Conference on 22<sup>nd</sup> September 2016, attended by Councillor Lynne Weatherly and Jane Heeley, and considers how the learning from this event might be used to further update our Obesity and Overweight Action Plan to positive effect.

## 2. Key points from the National Tackling Obesity Conference

- 2.1 The conference was reminded of the scale of this serious health epidemic:
  - one in three children in Year Six are overweight or obese;
  - seven out of ten men and six out of ten women are overweight or obese;
  - in the last ten years obesity prevalence has increased from 15% to 25%;
  - socio-economics are a significant contributor to this.

The conference programme focussed on national guidance and monitoring, through contributions from the authors of the Childhood Obesity Action Plan and NICE, as well as highlighting a number of interventions that have achieved some strong outcomes.

2.2 The presentation from the NICE representative reviewed the main themes that have been identified in the NICE Obesity Pathway and perhaps not surprisingly several of these are themes have been recognised by the Board and its members in developing the Healthy Weight Action Plan; for example the need for practitioner training, evaluation of commissioned activity, identifying barriers for change and addressing those during interventions and additionally the need to take a long term strategic approach both nationally and locally to reducing prevalence. Locally Boroughs and Districts are working with KCC, recognising that local environment is important to enabling and sustaining change, recognising that healthy behaviours need to become part of everyday life and interventions need to be tailored to the needs of the individual.

- 2.3 It was interesting to note that the NICE evaluation on cost effectiveness showed that moderate cost interventions (£10 to £100 per head) were deemed to be cost effective if they generated a weight reduction of just one kilogram, if that was maintained for life. Low cost interventions (£10 or less per head) were cost effective if a weight loss of less than one kilogram was achieved, even in the short term. Exercise referral schemes had been shown not to be cost effective if the individual was inactive or sedentary, but otherwise healthy.
- 2.4 Understandably there was much debate round the effectiveness of professionals from across the health sector to talk to patients or clients about overweight and obesity. Different schools of thought emerged from both presenters and the audience. There is clearly a mixed situation in practice, with some professionals readily taking the opportunity to engage on these matters with patients and but also the acknowledgement that many do find these conversations difficult and would benefit from training in having those difficult conversations sensitively and effectively.
- 2.5 A number of high profile case studies/interventions were discussed in detail, including:
  - The Deal for Health and Wellness Wigan's approach to Weight Management
     www.wigan.gov.uk;
  - Brighton Sugar Smart City <u>www.brighton-hove.gov.uk</u>;
  - HENRY Health, Exercise and Nutrition for the Really Young www.henry.org
     and
  - UK Active Kids physical activity programmes <u>www.ukactive.com</u>

More details of all these initiatives are available through the website links, however, there is not one thing that they had in common apart from huge enthusiasm and passion for their project. In part Wigan's success could be attributed to the pooled budgets across the Council and CCG, this has greatly facilitated integrated working and been able to resource 8,500 places per annum on their Lose Weight, Feel Fabulous weight management programme. To date participants have numbered 23,000and shed 20,000 pounds between them.

- 2.6 One of the principle sessions outlined the content of the national strategy for Childhood Obesity A Plan for Action, which was published in August. It includes the following key actions that are intended to reduce childhood obesity:
  - Introducing a soft drinks levy for both producers and importers;
  - Taking out 20% of sugar in products particularly food consumed by children,
     e.g. breakfast cereals, yogurts etc. This will be a voluntary scheme for now;
  - Making healthy options available in public sector buildings hospitals, council
    offices and leisure centres;
  - Provide support with the cost of healthy food for low income families continue with the Healthy Start Scheme
  - Clearer food labelling
  - Children 1 hour of physical activity
  - Healthy rating scheme administered by Ofsted, including healthier school food

• Enabling health professionals to support families – MECC

Full detail of the document can be found at: <a href="https://www.gov.uk/government/publications/childhood-obesity-a-plan-for-action">https://www.gov.uk/government/publications/childhood-obesity-a-plan-for-action</a>

The content of the Plan was certainly not welcomed by all, with some strong expressions that the Strategy had not gone far enough in controlling the food manufacturing sector and advertising of unhealthy products.

That said, there are a number of areas for the Task and Finish group to consider, which are outlined in the following paragraph, along with more general learning points from the conference, and with the Board's agreement will be incorporated into our Action Plan and presented at a subsequent meeting.

### 3. Actions for this Board to consider

- Identify the range of interventions that should be monitored and review the cost effectiveness of these and their outcomes over time, including outcomes from Tier 2 and 3:
- Address the provision of healthy food offers in public sector buildings;
- Continue developing the MECC strategy and progress training at scale and pace, consider whether alternative training is available to deal specifically with conversations about weight;
- Ensure we know where we need to best target our resources to motivate change and identify the local resources and assets to do this;
- Consider how we can get local communities engaged with this agenda through our wider services;
- Review what we are doing around early intervention and develop plans around this;
- Explore what technology is available to support individuals' on this pathway; and
- Ensure that Board members maximise opportunities for engagement with the Kent Change 4 Life campaign.

#### 4. Recommendations

Through this report the Task and Finish Group would like to recommend to the Board that we review how these actions can be incorporated into our existing Action Plan and present to the next meeting of the Board the relevant changes, with suggestions on how they will be implemented.

Jane Heeley and Lynne Weatherly