

## HEALTH SCRUTINY COMMITTEE

18 December 2018

<b>Title:</b> Childhood obesity: a system-wide scrutiny review – draft report and recommendations	
<b>Report of the Director of Public Health</b>	
<b>Open Report</b>	<b>For Decision</b>
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<b>Wards Affected:</b> All	<b>Key Decision:</b> Yes
<b>Accountable Director:</b> Matthew Cole, Director of Public Health	
<b>Accountable Strategic Leadership Director:</b> Elaine Allegretti, Strategic Director, People and Resilience	
<b>Summary:</b> For 2018/9, the Health Scrutiny Committee agreed that Childhood obesity would be the topic on which to undertake an in-depth scrutiny review; it was requested that the review look at the evidence around tackling the issue at a system-wide level; this is topical in the light of publications from Public Health England and the Local Government Association both of whom advocate a system-wide approach to the problem of obesity.  Members noted that childhood obesity in Barking and Dagenham remains the highest in London and threatens to halt any potential measurable education, skills and health gains experienced by our residents in future years. Prevalence is increasing more in the most deprived areas than the more affluent areas of England and severe obesity is at its highest ever level of the past 10 years. In terms of ethnicity the analysis found levels of excess weight in Black and Minority Ethnic (BME) Year 6 boys was increasing faster than in White British Boys. However, in Reception White British Girls were amongst the only groups showing an upward trend in excess weight. In Barking and Dagenham children have been found to have the highest levels of severe obesity in England.  The long-term cost of obesity and the impact on the quality of life for those who are overweight or obese means that system-wide action is required to reduce the level of obesity in this borough. This Scrutiny review and the recommendations that are produced as a result provide an opportunity to impact the current and future health and wellbeing of children across Barking and Dagenham.	

## **Recommendation(s)**

The Health Scrutiny Committee is recommended to review the appended draft scrutiny report and the draft recommendations and provide commentary to officers at the meeting to help inform the final version of the report.

## **Reason(s)**

It is good scrutiny practice to provide members of the Committee, as well as interested members of the public, an opportunity to comment on draft scrutiny reports.

The question of addressing the obesity problem reflects the Council's ambition to make Barking and Dagenham a borough where all residents get an opportunity to thrive and enjoy good health and well-being. This fits with the aims of the Corporate Plan to ensure that no-one is left behind as it seeks to make the Borough a place where all people can achieve their potential and where high aspirations for every child can be made a reality.

## **1. Introduction**

- 1.1 Barking and Dagenham has the worst childhood obesity rates in London and little has changed over the past 5 years. This is impacting our children's lives now and will continue to do so in the future.
- 1.2 Obesity in childhood tends to follow into adulthood and carries a serious risk of causing long term and irreversible damage to health through conditions such as diabetes, cardio-vascular disease and musculoskeletal problems.  
The Health & Wellbeing Board is concerned about obesity as a health problem, and because it imposes significant but avoidable costs on health and social care, in both the public and private sectors. It is also an issue that perpetuates health inequalities because obesity rates are worst in the poorest areas and in the BME populations.
- 1.4 There is an increasing body of evidence to demonstrate that maintaining a healthy weight has a positive impact on educational attainment especially in young people.
- 1.5 The Health Scrutiny Committee wanted to understand how the problem could be addressed through a system-wide approach.

## **2. Terms of Reference for the Scrutiny Review**

- i) Are the identified outcomes from the Healthy Weight Strategy, the right ones to focus on?
- ii) What is happening locally already to tackle obesity?
- iii) What are the evidence-based interventions which will have most impact?
- iv) What could we and should we be working together on in order to address gaps in the system and become more effective in making a difference at scale and pace?

### 3. Key Messages/findings

2.1 This section summarises the key findings/messages that address the terms of reference and the proposed recommendations from the scrutiny review are set out below for members' consideration.

i) **Are the identified outcomes from the Healthy Weight Strategy, the right ones to focus on?**

2.2 The Healthy Weight Strategy identified and proposed 4 key outcomes that we should aim for:

- Enable families and individuals to take responsibility for achieving and maintaining a healthy weight.
- Make an active lifestyle and healthy eating the easier choice.
- Address causes that put particular groups of families and individuals at a greater risk of obesity.
- Ensure the built and natural environment support families and individuals to be healthier and more active.

2.3 Key messages from the scrutiny review evidence support the Healthy Weight Strategy proposals, but the review has helped to refine and provide further detail on how our actions could better tackle the childhood obesity issue. Those key messages are set out in the remainder of this section below.

ii) **What is happening locally already to tackle obesity?**

- From visits members learnt that the weight management courses provide an opportunity for learning and high engagement of both adults and children.
- It is not always the children and families with excess weight who are attending these courses.
- Because of universal access, Community Solutions services don't have the opportunity to help those families who need it most.
- Parents would like more opportunities for their children to play and be active.
- Parents feel that the parks do not provide a safe, family-friendly place where they can be active.

iii) **What are the evidence-based interventions which will have most impact?**

- Weight management courses are not the solution to rising levels of childhood obesity, but they are worthwhile if they can help those families most in need of intensive coaching.
- Evidence from peer reviewed literature demonstrates the best approach is a series of interventions.
- The obesogenic environment needs to be addressed in order to encourage universal change in the population.
- A Whole Systems Approach to obesity has been shown to have success in reducing obesity levels and is advocated by The Local Government Association and Public Health England.

**iv) What could we and should we be working together on in order to address gaps in the system and become more effective in making a difference at scale and pace?**

- Currently there is a lot being provided for our residents on obesity, however due to a lack of partnership the impacts of these are limited.
- Partners could amplify the impact of their work by collaborating in a system-wide approach.
- Residents in Barking and Dagenham don't see weight as a health issue, so we need to better understand how we effect change from their perspective, particularly for the BME populations.
- Schools often have to focus on mental health and better social integration of pupils as part of tackling obesity.
- A local targeting of the environment and fast food outlets, eg healthier catering commitment should be explored.
- The environment such as roads surrounding schools don't support active travel to and from school.
- Councillors all expressed the Importance of addressing education around cooking skills and food behaviours.

**4. Draft recommendations**

**Understanding the problem**

**Recommendation 1:** The Council reviews how we use data to help us better understand residents' perspectives and needs, as the evidence demonstrates that we haven't understood enough about the obesity issue.

**Recommendation 2:** The Council's goal for residents becomes the achievement of healthy weight, rather than just excess weight, as being overweight and underweight are both indicators for poor health outcomes.

**Recommendation 3:** NELFT and the Council review the National Childhood Measurement Programme data and its use and consideration is given to how the process can improve the targeting of weight management services, which will support families that need it most.

**Recommendation 4:** All partners, as part of the overarching work to review services ensure that the pathway for signposting and referral to the HENRY programme is able to reach the families most in need.

**The Evidence Base**

**Recommendation 5:** The Council draws up a prevention picture based on insight of the targeted populations to inform evidenced based approaches.

**Recommendation 6:** The council adopt a whole systems approach to obesity, as advocated by the Local Government Association and Public Health England and

follow in the footsteps of the vanguard local authorities who have been implementing the approach.

**Recommendation 7:** Barking and Dagenham Health and Well-being Board support the formation of a system-wide stakeholder group with all relevant personnel included to take forward the actions at a system level.

### **Impact Maximisation**

**Recommendation 8.** The Council supported by Public Health England look to implement a local healthier catering commitment by the fast food outlets.

**Recommendation 9:** GPs/GP networks commit to liaising with schools and education to support families with the greatest need to access services, for example, referrals into HENRY and Lean Beans and to make lifestyle changes.

**Recommendation 10:** Barking and Dagenham Clinical Commissioning Group reviews its mental health commissioning arrangements to focus on work within education to support schools in improving the mental health and social integration of pupils.

**Recommendation 11:** NELFT and the Commissioning Director for Education review its 0-19 service to take account of the need for a more nuanced mental health offer and better support for obesity work in schools.

**Recommendation 12:** The Council, Education and BeFirst prioritise roads around schools with a view to making active travel for families the easiest way to get to and from school.

## **5. Reading List**

Officers and members drew on the following pieces of written research & literature throughout the review to inform the report and assist with producing recommendations:

**Trends in Children's body mass index between 2006/07 and 2016/17. Public Health England. July 2018**

<https://app.box.com/s/og3q86aqejc99okxe9xyvpfvo21xai21/file/306723044116>

**Childhood Obesity: a plan for action. HM Government. June 2018**

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/718903/childhood-obesity-a-plan-for-action-chapter-2.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/718903/childhood-obesity-a-plan-for-action-chapter-2.pdf)

**Making Obesity everybody's business: A whole systems approach. Local Government Association. November 2017**

<https://www.local.gov.uk/sites/default/files/documents/15.6%20Obesity-05.pdf>

**Let's #makeachange: a healthy weight strategy for Barking and Dagenham. 2016-2020**

<https://www.lbbd.gov.uk/sites/default/files/attachments/Healthy-Weight-Strategy.pdf>

Barking and Dagenham Public Health applied to be one of the reviewers of the draft guidance from Public Health England on adopting a whole systems approach to obesity. This will be published in the Spring of 2019, however the evidence within the guidance was used to inform this review.

## **6. Financial Implications**

- 6.1 This report is mainly for information in fulfilment of the Health Scrutiny Committee's request for a review of system-wide action on childhood obesity. As such, there are no financial implications arising directly from the report.

## **7. Legal Implications**

Implications completed by: Dr. Paul Feild, Senior Lawyer, Law and Governance

- 7.1 There is a legal requirement under section 21 of the Local Government Act 2000 for councils which establish executive governance (this includes leader and cabinet, our model) to establish scrutiny and overview committees.
- 7.2 The Health Scrutiny Committee has specific responsibilities with regard to health functions in the borough. Such Health Scrutiny Committees shall carry out health scrutiny in accordance with Section 244 (and Regulations under that section) of the National Health Services Act 2006 as amended by the Local Government and Public Involvement in Health Act 2007 relating to local health service matters. The Health Scrutiny Committee in its work has all the powers of an Overview and Scrutiny Committee as set out in section 9F of the Local Government Act 2000, Local Government and Public Involvement in Health Act 2007 and Social Care Act 2001 (including associated Regulations and Guidance).
- 7.3 As the body of the report indicates childhood obesity is a major public health concern. As the quantitative evidence demonstrates, the scale and prevalence in the borough is significant and without intervention is leading to young people having over their lifetimes serious but avoidable health outcomes. The work so far has produced clear evidence of the importance of raising awareness of managing weight control with the community through a whole systems approach, that partnership working is key to bringing about change in health and it identifies 12 recommendations proposed in this report to work on tackling this major health issue.

**Public Background Used in the Preparation of the Report: None**

**List of Appendices:**

**Appendix 1: Draft HSC Childhood Obesity: system-wide scrutiny report.**