

DECISION-MAKER:	OVERVIEW AND SCRUTINY MANAGEMENT COMMITTEE
SUBJECT:	TACKLING CHILDHOOD OBESITY - UPDATE
DATE OF DECISION:	10 NOVEMBER 2022
REPORT OF:	CABINET MEMBER FOR HEALTH, ADULTS AND LEISURE

<u>CONTACT DETAILS</u>			
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STATEMENT OF CONFIDENTIALITY

None

BRIEF SUMMARY

In August 2020 the Scrutiny Inquiry Panel completed a Scrutiny Inquiry to consider what may be done in Southampton to tackle childhood obesity. The recommendations were accepted by Cabinet in December 2020. This report provides an update on progress against each of the recommendations of the Scrutiny Inquiry.

Taking a whole systems approach has been the priority for 2022, this has been an on-going process of working with stakeholders in the system to identify the drivers of childhood obesity and identify interventions to address them. Given the time since the Scrutiny Inquiry is approximately 2.5 years, consideration should be given to how leadership from the Council can continue to support this priority to facilitate local action, as well as encourage stakeholders to create and implement localised solutions.

RECOMMENDATIONS:

	(i)	That the Committee note the progress made implementing the approved recommendations from the Childhood Obesity Scrutiny Inquiry.
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REASONS FOR REPORT RECOMMENDATIONS

1.	To enable the Committee to scrutinise progress made tackling childhood obesity in Southampton.
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ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2.	None
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DETAIL (Including consultation carried out)

3.	In Southampton prior to the pandemic, the level of obesity among Reception year pupils (aged 4-5 years) as measured by the National Child Measurement
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	Programme (NCMP) remained stable and similar to the national average. Rates in year 6 pupils (aged 10-11 years) increased overtime and became worse than the national average.
4.	During the COVID-19 lockdown local authorities were advised to collect measurement data from a representative sample of schools. Prevalence data for 2020/21 for children in Reception year for obesity (17.1%) and excess weight (32.7%), showed a significantly higher increase locally and nationally compared to the previous four years.
5.	The Year 6 2020/21 sample for Southampton was too small to make robust statistical comparisons. However, the prevalence for Year 6 obesity (26%) and excess weight (41%) mirrored the national figures with increasing prevalence in the trend data following the national direction of travel.
6.	The data also showed the gap in obesity prevalence between children in the most and least deprived parts of Southampton had widened.
7.	Due to the unprecedented increase in childhood obesity rates in 2020/21 the Office for Health Improvement and Disparities (OHID) extracted provisional NCMP data in May 2022 to understand if this increase had been sustained. The national figures showed that for Reception year obesity prevalence had decreased to pre-pandemic levels and for year 6, obesity levels had decreased but remained higher than pre-pandemic levels.
8.	Children with obesity are five times more likely to have obesity as an adult and adult obesity is associated with a wide range of problems including depression, dementia, respiratory disease, musculoskeletal conditions, type 2 diabetes, cancer, liver disease, cardio-vascular disease, and infertility
9.	Stigma and discrimination toward children with obesity pose numerous consequences for their psychological and physical health. Children with overweight or obesity experience lower self-esteem, may withdraw socially and may be bullied because of their weight. In addition, there is early research to indicate that childhood overweight and obesity is linked to lower educational outcomes.
10.	All recommendations of the Scrutiny Inquiry into tackling childhood obesity which took place in 2020 were adopted. However, due to the re-direction of resources to manage the pandemic, it was decided that the action plan to tackle childhood obesity would be adopted in two phases. Phase 1 focused on areas that could be progressed from January 2021. Phase 2 will be commenced in January 2023 or when additional funding can be secured.
11.	Phase 1 a) Recommendations 1 & 2. Use the planning system to promote healthy weight environments and restrict the growth in hot food takeaways. The new Local Plan is now at the Draft Plan with Options stage and is currently the subject of public consultation until 23rd December 2022. The Food and Drink policy within the Draft Plan includes measures to restrict the proliferation of hot food takeaways (HFTAs). The first measure sets out criteria to control the concentration of HFTAs by preventing new HFTAs from being granted planning permission where they breach these criteria. The second measure restricts planning permission being granted for new HFTAs within 400m walking distance of the entrance or exit of a primary or secondary school. Other policies

in the Draft Plan that are supportive of a healthy weight environment include support for active travel, protection of existing open spaces including allotments and support for the creation of new spaces and backing the creation of new sports and leisure facilities and the improvement of existing ones. These policies will be refined following review of consultation feedback and receipt of further evidence to prepare the submission version of the Local Plan. A further consultation will take place in 2023 prior to submission for independent examination by a Planning Inspector on behalf of the Secretary of State.

b) Recommendation 6. Developing and implementing the leisure mission.

The mission for leisure is to improve health and wellbeing, and reduce health inequalities, in Southampton through 'fit for purpose' leisure services and 'spaces' which support physical activity, sport, play and recreation. This is co-ordinated by the Leisure Services Manager and a cross-council Leisure Services Group is developing a strategic action plan to deliver this mission. The plan will draw on existing relevant strategies – primarily the 'We Can Be Active' physical activity strategy and the Strategic Outcomes Planning Model (completed by Max Associates). The approach for implementing the action plan will include intelligence-driven leisure services provision, securing grants/bidding opportunities, community engagement and a focus on outcomes.

c) Recommendation 7. Target underserved communities when promoting health initiatives.

The Stronger Communities team have piloted several events this year including two 'Love Where You Live' events in Bevois and Harefield and a Jobs and Wellbeing Fair at the Civic Centre. The team are planning to run a minimum of 6 'Love Where You Live' events in areas defined as 'left behind'. Our ambition to become a Child Friendly City is currently progressing from the Discovery to Development phase, to understand the priorities children want to work on. In addition, the team continues to support the successful running of St Mary's Leisure centre and is leading a consortium bid to secure capital investment via the Football Foundation's Playzone scheme to improve and enhance multi-use games areas in parts of the city where physical activity is lowest.

d) Recommendation 8 & 9. Commit to the whole systems approach and sign and commit to the Local Authority Declaration on Healthy Weight.

Southampton was the first council in the south coast to sign up to the Local Authority Declaration on Healthy Weight in March 2022. Some pledges support existing activities to promote a healthy weight environment, such as active travel and improving access to healthy, affordable food. The declaration has also provided opportunities to strengthen the current ambition to develop local guidance restricting the promotion of food and drink that is high in fat, sugar, and salt (HFSS) on Council owned sites. The whole systems approach (WSA) to obesity is well underway, a local map is being developed with

	<p>stakeholders to illustrate the drivers of obesity in Southampton and some recommendations have emerged for addressing these drivers. It is understood that taking a systems approach can be counterintuitive due to the requirement to address the system (that causes the problem) rather than the problem itself (obesity). Plans are being developed to share findings with leaders to consider how system level changes could be delivered.</p> <p>e) Recommendation 11. Develop/clarify governance arrangements. Strategic oversight has been secured through the Executive Director for Wellbeing (Children and Learning) heading up a task and finish group which meets quarterly. The group has representation from across the Council, as well as external partners and oversees the delivery of the Scrutiny Inquiry recommendations. Leadership is also provided by the Director of Public Health, the Cabinet Member for Health, Adults and Leisure in addition to oversight by OSMC.</p> <p>f) Recommendation 12. Develop the evidence base. The Public Health team have increased collaboration on research projects to develop the evidence base on nutrition and tackling childhood obesity. The projects include the Healthy Start evaluation, Wessex Diet, and an evaluation of the Spatial Planning for Health Specialist post.</p>
12.	<p>Phase 2</p> <p>a) Recommendations 3-5. Improve our knowledge of the local food environment, develop a Southampton Eating Better award, and become a Sustainable Food Place.</p> <p>These recommendations of becoming a Sustainable Food Place and implementing a programme to encourage fast food retailers to provide healthier options were postponed to phase 2. However, momentum for a local Food Plan (and working towards becoming a Sustainable Food Place) has grown, supported by a review of available local data and mapping food retailers in the city, as well as the impact of the current pressures on the cost of living. There are two networks currently supporting the food agenda, a Nutrition Education network led by Abri and City Catering (providing support, resources and training for consistent nutrition information and advice), and a Food Aid Forum (a network of providers of emergency food aid) led by Southampton City Mission. The next steps will be to bring together a broader coalition of stakeholders to shape a local Food Plan.</p> <p>b) Recommendation 10. Measure BMI at year 3 for Southampton school children. Due to workforce pressures this recommendation will be reviewed and reconsidered based on the capacity of the service.</p> <p>c) Recommendations 13-15. Scale up initiatives so they reach a critical mass and support schools to make healthier choices easier (including an analysis of free school meal uptake).</p>

	<p>Additional funding and resources have been allocated to the healthy settings programmes in the city (Healthy Early Years Award (HEYA) and Healthy High-5 (HH5 for schools)). HEYA now includes a mental health component to focus on the needs of children, staff and families and to support reflective practice in early years settings. Overall, 62 settings are engaged with the award. Engagement with HH5 dipped during the COVID-19 lockdown and has not yet recovered, currently 14 local schools are engaged. Plans to increase uptake are being developed by Public Health School Nursing team in partnership with the council's HAF (Holiday Activity Fund) team, which will include refreshing the resources and recruiting more schools.</p> <p>d) Recommendation 16. Learn lessons from HENRY (Health, Exercise and Nutrition for the Really Young).</p> <p>HENRY is a licenced programme which helps parents gain the confidence, knowledge and skills to help the whole family adopt a healthier lifestyle. Plans are being developed to embed themes from the HENRY programme into local parenting support programmes delivered as part of Family Hubs.</p>
13.	<p>In addition, there is evidence that beyond the 16 recommendations above, the Scrutiny Inquiry has indirectly enabled various projects and pieces of work that are part of the tackling childhood obesity agenda. This includes the local roll out of Early LifeLab (a curriculum-based programme to help primary school pupils understand the science behind healthy behaviours), the development of the childhood obesity safeguarding strategy and the HealthyWey training (available to the local 0-19 workforce as a part of a study led by John Moores University) as a result, health practitioners will now embed a mandatory annual healthy weight update.</p>
14.	<p>Work to implement many of the recommendations from the scrutiny inquiry has progressed well, however, there is a lack of capacity to drive this programme at pace. Recommendations that were deprioritised during the height of the pandemic are now being moved forward, particularly work to improve the local food environment. To support this agenda plans are now being refined to ensure the demands created by the current cost of living crisis can also be addressed.</p>
15.	<p>The WSA has helped to strengthen local momentum and should continue to develop as this will support an on-going process of working with stakeholders in the system to develop an understanding of the local drivers of childhood obesity over time.</p>
16.	<p>To support ongoing work and given the time since the Scrutiny Inquiry is approximately 2.5 years, consideration should be given to how commitment from the Council can continue (through a local action plan or strategy). This ongoing commitment will support local action, as well as encouraging wider stakeholders to continue to create and implement localised and innovative solutions.</p>
17.	<p>To ensure that addressing childhood obesity continues to receive the oversight needed in the long-term, it is recommended that the issue is recalled for review by OSMC again in 12 months.</p>
<p>RESOURCE IMPLICATIONS</p>	

Capital/Revenue

18.

Finance

Phase 1 - Funding is required for phase 1 of the plan. Originally the estimated funding requirement was £60,000 (see original planned expenditure, table 1) but this has increased to £95,800 due to an extension of the Spatial Planning for Health Specialist post (see updated planned expenditure, table 2). This funding has been committed from the Public Health budget this year (from the Public Health reserve) and the funding spans three years.

Table 1 (Original planned expenditure)

	Amount
2020/21	7,500
2021/22	30,000
2022/23	22,500
Total	60,000

Table 2 (Updated planned expenditure)

	Amount
2020/21	33,000
2021/22	48,100
2022/23	14,700
Total	95,800

Phase 2

-We do not have the funding available to commence phase 2 but at this stage the estimated annual funding requirement of £41,000 per annum (£31,000 per annum officer time, plus £10,000 per annum of additional resource) to progress recommendations 4 (develop a Southampton Eating Better award) and contribute to recommendations 13-16.

-A one-off cost of £1400-£2,000 for recommendation 9 (sign-up to the Healthy Weight Declaration) was secured.

-Business cases will be developed to deliver the other recommendations in the plan

Property/Other

19.

N/A

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

20.

The Health and Social Care Act 2012 requires Local authorities to collect data on Reception Year and Year 6 children's height and weight from all state-maintained schools within their area as part of the National Child Measurement Programme. Office for Health Improvement and Disparities

	(OHID) provide operational guidance to local authorities and schools on how to undertake the exercise. The Act also requires Local Authorities to improve the health of their local population.
<u>Other Legal Implications:</u>	
21.	N/A
RISK MANAGEMENT IMPLICATIONS	
22.	N/A
POLICY FRAMEWORK IMPLICATIONS	
23.	The proposals are in line with policies outlined in Southampton's Corporate Plan Southampton Corporate Plan 2021-25

KEY DECISION?	No
WARDS/COMMUNITIES AFFECTED:	All
<u>SUPPORTING DOCUMENTATION</u>	
Appendices	
1.	None

Documents In Members' Rooms

1.	None
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Equality Impact Assessment

Do the implications/subject of the report require an Equality and Safety Impact Assessment (ESIA) to be carried out?	No
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Data Protection Impact Assessment

Do the implications/subject of the report require a Data Protection Impact Assessment (DPIA) to be carried out?	No
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Other Background Documents

Other Background documents available for inspection at:

Title of Background Paper(s)	Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)
1.	Tackling Childhood Obesity in Southampton – Final report Tackling Childhood Obesity in Southampton