
REPORT FOR: HEALTH AND WELLBEING BOARD

Date of Meeting:	17 th March 2020
Subject:	Harrow Obesity Plan 2020-24 – Obesity is Everyone’s Business
Responsible Officer:	Carole Furlong, Director of Public Health
Public:	Yes
Wards affected:	All
Enclosures:	Harrow Obesity Plan 2020-24 - Obesity is Everyone’s Business

Section 1 – Summary and Recommendations

This report sets out the strategic aims and objectives and detailed action plan to deliver these to address the issue of Obesity in Harrow in 2020. The plan has been formed by a wide group of stakeholders and is based on the needs identified in the Obesity Needs Assessment 2020.

Recommendations:

The Board is requested to:

- Endorse the report
- Support further stakeholder engagement
- Support a Councillor volunteer to be our ‘healthy food champion’
- Consider other strategic opportunities to encourage residents and staff to eat healthier food and be more active therefore making healthier food and physical activity an integral part of policy, planning and commissioning across departments and cross sector.

Section 2 – Report

Current situation

There are myriad health risks associated with obesity, including an increased risk of stroke, cardiovascular disease, type II diabetes, depression and some types of cancer. (1) There is also a clear relationship between a high BMI and disease which also implies that any reduction in BMI may be beneficial for health and all other care services for vulnerable people. (2)

The Active Lives survey 2017/18 estimated that just over half (52.9%) Harrow adults are either overweight or obese. Using the 2018 mid-population estimate for the Harrow adult CCG population and applying the Active Lives prevalence we can estimate 101,462 adults residents were overweight or obese. Harrow has higher rates than London and England of physical inactivity in adults (32%).

In 2017/18 94.5% of Reception children and 94.9% of Year 6 children in Harrow participated in the National Childhood Measurement programme (NCMP). This showed that 8.8% of Reception children were obese and that by the end of primary school this was 20%.

The environment in which our residents live affects both how active they are and what they eat. Currently fast-food, which is generally high in energy content and low in nutritional value, is readily available in Harrow – the density of fast food outlets (compared to other food shops) is increasing in most Harrow wards. In 2019 12 schools in Harrow were found to have more than 4 fast-food outlets within 400m of the school.

Why a change is needed

Our Obesity Needs Assessment 2020 has shown us a detailed picture of the issue of excess weight (overweight and obesity combined) in Harrow. It has shown us that wards with lower income are likely to have more people overweight and obese and often have more and highly available junk food. Our interviews with stakeholders showed that many people are not sure where to refer people with a weight problem and seek information on services and so our urgent work will be to refine and communicate an effective pathway for prevention and treatment in adults and children.

Our environment is a determinant of lifestyle and can affect the choices our residents have and for this reason the action plans work with all the appropriate stakeholders to maximise assets to facilitate a healthy diet and an active lifestyle including reinforcing the work in the Active Harrow Strategy 2019 which came to the Board late last year.

As part of our 'whole system approach' a group made up the Harrow Obesity Stakeholders including Primary care, Paediatrics, Community Dietetics, Health Visiting, School Nursing, Planning, Public Health, Transport, Environmental Health, Parks, Schools and Harrow Clinical Commissioning Group have been working together to interpret the picture presented in the Harrow Obesity Needs Assessment 2020. Since January 2020 we have worked together to identify our assets in Harrow and make a partnership plan making the most of our momentum and resources to prevent and treat excess weight.

Our Harrow Obesity Plan Key Aims by 2024 are:

- To engage with the issue of excess weight in Harrow with a whole system approach maximise the efficient use of resources, assets and momentum for change
- To have a clearly communicated pathway for prevention, treatment of excess weight for everyone who needs it and a plan to reduce the obesogenic elements within our environment

Our Harrow Obesity Plan Objectives (to achieve by 2024 unless otherwise stated):

1. To strategically address our obesogenic environment with actions that form a whole system approach
2. To have a fully specified and functioning pathway for excess weight for children and adults and maternity by end of March 2021
3. To have a reference point for information on how to access services that prevent and treat excess weight for residents and professionals by end of March 2021
4. To have at least 300 adults with a BMI of 30+ seen as part of the Shape Up programme (tier 2) in 2020-21 (further years will be confirmed annually after budgets and commissioning plans are finalised).
5. To have a fully functioning excess weight treatment and prevention pathway for children and young people including tier 2 weight management services commissioned and operational by March 2021 (further year aspirations will be confirmed annually depending on Public Health resource allocation and when commissioning plans are finalised).

The Obesity Plan 2020-24 contains a detailed action plan which will be updated annually. The monitoring of this action plan will be completed by the Harrow Obesity Stakeholder group who will report updates to the Harrow Health and Wellbeing Board annually. The Obesity Stakeholder group will have designated 'system leaders' for each action plan section and smaller groups may meet to deliver what success looks like.

Financial Implications/Comments

The Public Health commissioning plans for 2020-21 include a new tier 2 weight management offer for children under 5 (that will come from a reallocation of resources within the existing 0-19 Health Visiting and School Nursing contract) together with £40k to commission tier 2 weight management services for adults in line with commissioning responsibilities.

The specification will include performance indicators on numbers completing the 12 week course and percentage weight loss (in line with the clinical guidance on effective weight management). The services will be targeted towards areas of high obesity and higher inequality to ensure that the investment has maximum impact on the obesity pathway. Public Health will offer support to the CCG to identify the impact of referrals on specialist commissioning to inform future resource allocation across the wider pathway.

The Obesity plan includes some actions/objectives which are being delivered by partners and at this stage it has not been possible to identify all of the resources committed for the pathway across all stakeholders. The public health team are working with partners such as the CCG responsible for commissioning Tier 3 specialist services to develop a clear pathway and understand the current demand for services so that any future resources can be appropriately targeted.

The pathway groups in consultation with service users will co-design services. Tier 2 services will be operational by December 2020 and data will be available annually on the numbers referred to services and their weight loss outcomes. A map of Tier 1 services will be developed and whilst the services are universal and open access without specific data, this will provide more detail on what services are available.

Legal Implications/Comments

There are no legal implications arising from this report.

Risk Management Implications

none

Equalities implications / Public Sector Equality Duty

Was an Equality Impact Assessment carried out? A full EIA will be completed once the service user feedback is complete in April 2020 as this will provide important feedback from our harder to reach groups.

The below table shows the areas where there is impact and consideration for the needs of priority groups already featured in the plan:

Area	Action identified
Race and Faith	The development of the obesity pathway is versatile to all cultures and ethnicities and this is featured in the action plan consistently
Pregnancy	A review of the engagement by pregnant mothers with weight management
Sex	The pilot we have done this year of Tier 2 services has given us some useful insight on how to commission services next year to make them more flexible easy for people with caring responsibilities (largely women) to access. In 2020-21 we will be using an app to provide some support to enable more flexibility.
Age	Recommendations in the strategy review the current provision for adults and children against national guidelines and evidence
Disabilities	The development of the obesity pathway that is appropriate for vulnerable groups.

Council Priorities

- The strategy outlined an approach to Building a Better Harrow by working to improve Harrow as a place supporting opportunities for being active and access to healthier food. It highlights the need to ensure that our planning, transport and regeneration programmes promote and encourage this.
- The strategy focuses to Support those most in need with an overall aim and approach that gives appropriate proportional emphasis that supports that groups within Harrow who have a higher risk of obesity and physical inactivity. An example of this is targeted work on active travel which will focus on schools with the higher obesity rates.
- Consultation with the identified service users will take place shortly and an on-going dialogue will be maintained. Residents have already given their views on access to healthy food via the residents survey and we undertook a survey on physical activity as part of the Active Harrow Strategy 2019.
- We are working in close partnership with many community partners, council departments and the CCG to deliver this strategy and to build capacity within those groups and organisations to prevent excess weight and therefore Protecting Vital Public Services.
- We are Delivering a Strong local Economy for All by reducing the cost of physical inactivity and obesity. The cost of inactivity to LB Harrow is £16 million.(3) Health cost of inactivity in Harrow is estimated to be £4.0 million. Sports and active recreation adds an economic value of £121.4m in improved quality and length of life plus health care costs avoided. It brings in jobs and opportunities for volunteering.
- We are Delivering a Strong local Economy for All by working in close partnership and therefore maximising both funding opportunities and capacity to improve the rates of healthy weight and physical activity levels.

Section 3 - Statutory Officer Clearance (Council and Joint Reports)

Name: Donna Edwards	<input checked="" type="checkbox"/>	on behalf of the Chief Financial Officer
Date: 2 nd March 2020		
Name: Caroline Eccles	<input checked="" type="checkbox"/>	on behalf of the Monitoring Officer
Date: 2 nd March 2020		

Name: Paul Hewitt

X

Corporate Director

Date: 4th March 2020

Section 4 - Contact Details and Background Papers

Contact: Anna Kirk Public Health Strategist 0208 420 9522

Background Papers:

Obesity Needs Assessment 2020 link to this document -

<https://www.harrow.gov.uk/health-leisure/joint-strategic-needs-assessment/2?documentId=12490&categoryId=210266>

References

1. Obesity . *NHS*. [Online] [Cited: 13 November 2019.]
https://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf.
2. Mortality and burden of disease attributable to selected major risks. [Online] WHO, 2009. [Cited: 13 11 2019.]
https://www.who.int/healthinfo/global_burden_disease/GlobalHealthRisks_report_full.pdf .
3. <http://www.ukactive.com/turningthetide/pdf/Turning%20the%20tide%20of%20inactivity.pdf>