

18<sup>th</sup> November 2019

Agenda Item: 9

# **REPORT OF THE DIRECTOR OF PUBLIC HEALTH**

# CHILDHOOD OBESITY TRAILBLAZER

## **Purpose of the Report**

1. To provide information on the Nottinghamshire Childhood Obesity Trailblazer to enable the Committee to consider whether there is any further action it requires.

## Information

- 2. As set out in the Nottinghamshire Joint Strategic Needs Assessment (JSNA) excess weight chapter, obesity is one of the most serious public health challenges of the 21st century. It is having an impact on people's lives now, across the generations, in terms of quality of life, development of chronic diseases such as type 2 diabetes, and its association with common mental health disorders. A focus on childhood obesity is important as overweight and obese children are more likely to stay obese into adulthood and to develop long term conditions such as diabetes and cardiovascular disease at a younger age. Obesity can also exacerbate conditions such as asthma and mental wellbeing concerns.
- 3. In the 2017/18 school year in Nottinghamshire, 1 in 5 children (21.5%) were overweight (including obesity) and 1 in 10 were obese (9.7%) when they started school which is similar to the national prevalence of 22.9% and 9.9%, respectively. By the time children reach the end of primary school, 1 in 3 of the County's children are overweight (33.2%), and 1 in 5 are obese (19.0%), which is slightly lower than the national prevalence of 34.3% and 20.1%, respectively. Over the last 12 years there has been no significant change in prevalence, except for Reception age obesity which has seen an upward trend in the last five years.
- 4. This data masks significant variation within the County. For example, at Reception age, Bassetlaw has a prevalence of obesity (11.8%), which is significantly higher than the England average and both Bassetlaw and Ashfield had a significantly higher prevalence (22.9%) at Year 6. The prevalence of obesity in Rushcliffe is one of the lowest in the country at both age points (6.1% and 10.7%, respectively). The prevalence of obesity is also twice as high in the 10% of the County with the highest deprivation score, compared to the 10% of the County with the lowest score.

- 5. Childhood obesity is a complex problem with over 100 interlinked causes. These can be considered in 7 themes (Nottinghamshire JSNA, 2016):
  - **Societal influences**: the impact of society, for example the influence of the media, national policy, education, culture
  - **Food environment**: the influence of the local availability, affordability and quality of food on an individual's food choices
  - **Physical Activity environment**: the influence of the issues such as safety, infrastructure and open space on an individual's ability to be physically active
  - **Physical Activity**: the type, frequency and intensity of activities an individual carries out
  - **Food consumption**: the quality, quantity (portion sizes) and frequency (snacking patterns) of an individual's diet
  - **Individual psychology**: the effect of psychology on an individual's eating and physical activity patterns
  - **Biology**: the influence of genetics and ill health.

To influence these themes at a local level there is a need to work across Council departments and across organisations with communities in an evidence based "whole system approach" to obesity as set out by Public Health England. This recognises the place-making role of councils and the role they can play in helping to harness the strengths residing in communities.

- 6. In Nottinghamshire this is approached through the priorities under the County's Health & Wellbeing Strategy relating to developing healthy and sustainable places and a best start in life for children. Childhood obesity is also an emerging strategic priority within the Nottinghamshire Integrated Care System and the Bassetlaw Integrated Care Partnership. The Council's Trailblazer project presents a small but important part of this overall system work.
- 7. The Childhood Obesity Trailblazer Programme is funded by the Department of Health and Social Care and managed by the Local Government Association. It promotes a test and learn approach to try out innovative approaches to using local authority levers to address specific drivers of childhood obesity and to reduce inequalities in childhood obesity. The programme's aims include sharing of learning and best practice with other authorities and to identify actions which government can take to deliver change at scale. Therefore, the aim is not that the prevalence of childhood obesity across the whole of Nottinghamshire County should be reduced over the three years of the programme, but that evaluation of what it delivers produces new learning about how councils can take effective action in their communities.
- 8. Nottinghamshire County was selected from amongst more than 100 submissions to be one of five local authorities to participate in the three-year Programme. The focus of the Nottinghamshire project is on how the Council can positively influence, enable, and support change within the home and community food environment for families with children in the early years. Initial Trailblazer work will be focussed on areas of Nottinghamshire with the highest levels of childhood obesity (in Bassetlaw, Mansfield and Ashfield Districts). It is very much a cross Council project bringing together skills and expertise from Public Health, Early Years and School Catering with Children's Centre Services, Childcare and Early Years Providers, and importantly local parents. This will be done through work under three main themes which are described below.

### 9. Making access to affordable healthy food for families easier

Focus groups with parents in four areas told us that time pressures due to parental and employment responsibilities and the ability to find healthy recipes can be challenging. Some families did not feel that healthy food was affordable. Time, cost, access, preparation skills were all barriers families experienced to eating healthier meals.

We are seeking to address aspects of these issues by using the school meals supply chain and the work of the food development team to make affordable healthy food accessible. One concept is testing out the idea of nutritionally balanced recipe boxes for families. It is envisaged that boxes could contain recipe cards and ingredients for at least two family meals and can be priced competitively. They will therefore aim to provide healthy food, and develop food preparation knowledge, skills and confidence; and raise awareness and promote schools' meals through positive messaging. We will develop this concept working with local parents, and may try other ideas such as pop up grocers, linking in community food producers, or offering them through a range of community venues.

We are also undertaking work to improve awareness and uptake of Healthy Start which is a national programme that aims to improve the nutrition of children under 5 years by providing vouchers for milk and fruit and vegetables and vitamins for pregnancy, breastfeeding and young children. This will involve increasing awareness amongst services and practitioners and families and increasing the number of retail outlets which accept the vouchers, potentially boosting their income.

### 10. Improve quality of food provision through early years settings

Local childcare and nursery providers told us that they work hard to provide healthy meals and snacks to the children they look after, and they are keen to be able to provide information and advise parents and carers on healthy eating. We are testing out enhancing and broadening the Council's School Meals offer to include early years providers in addition to schools' provision. This will need to start on a small-scale with willing providers, and then be tested and refined to determine how this is best delivered and what the local demand is. It will only be developed if it is a cost-neutral or profitable venture for the catering service. We also want to support early year practitioners and cooks who prepare food using the County Council Food Development team, catering and Public Health nutrition expertise and share this with the local sector through a community practice. This may include face to face and on-line forums/discussions and video demonstrations developed through the test and learn approach.

#### 11. Enable parents to develop good eating habits with their children

Evidence tells us that parental feeding styles and practices can have an impact on children's eating behaviours. Nottinghamshire Children's Centre services and commissioned Public Health services already provide advice and support to families about healthy eating. But the staff have told us that they would like to improve their skills and knowledge, and commissioners have told us there is potential to spread good practice such as food growing and cooking and eating together. We will also work to make sure that food which is dropped off at centres by charities is appropriate. We will work with children's centres in our priority areas to test out small changes to the way food is provided, distributed and engaged with families so that it is done in the best way possible to help and enable parents.

## **Other Options Considered**

12. When preparing the expression of interest for the Nottinghamshire project other options were considered in terms of the driver of childhood obesity to focus upon. Some were discounted as they are already a focus of existing workstreams. Engagement with parents and frontline early year practitioners in the discovery phase helped shape the focus of this work and discount other options.

### **Reason/s for Recommendation/s**

13. To enable the Committee to understand the project and its context and provide comment on the planned actions.

## **Statutory and Policy Implications**

14. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public-sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

### **Financial Implications**

15. The County Council will be in receipt of a grant of £75,000 per year for three years from July 2019 to assist in the delivery of the Trailblazer project.

## **RECOMMENDATION/S**

1) That Committee considers whether there is any further action it requires arising from the information contained within the report on the Childhood Obesity Trailblazer.

#### Jonathan Gribbin Director of Public Health

#### For any enquiries about this report please contact:

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### Constitutional Comments (LW 17/10/19)

- 16. Children and Young People's Committee is the appropriate body to consider the content of the report, with the proviso set out below:
- 17. Given the cross cutting nature of the programme and the particular need for involvement of colleagues from Early Years and School Catering, Children's Centre Services, Childcare and Early Years Providers, and importantly local parents, the Director of Public Health

wanted to ensure that Children and Young People's Committee was provided with information about this Trailblazer programme. Should Members require any further action it may be necessary for these to be referred to the Adult Social Care and Public Health Committee which has responsibility for approvals relating to Public Health initiatives.

### Financial Comments (SAS 21/10/19)

18. The County Council will be in receipt of a grant of £75,000 per year for three years from July 2019 to assist in the delivery of the Trailblazer project.

### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Childhood Obesity Trailblazer - report to Adult Social Care and Public Health Committee on 9th September 2019

Nottinghamshire Joint Strategic Needs Assessment: Excess weight in children, young people and adults (2016).

## Electoral Division(s) and Member(s) Affected

All.

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