Reference Number: HOSC/37/23

Report title: Progress update on healthy weight work in Essex

Report to: Health Overview Policy and Scrutiny Committee

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County Divisions affected: Not applicable

1. Introduction

1.1 Essex County Council (ECC) are working with Leeds Beckett University (LBU) to implement the 6-stage Whole Systems Approach to healthy weight in Essex. A key output of this work is to develop the first Essex joint healthy weight strategy (HWS) and action plan, that aims to prevent and treat overweight and obesity in Essex. If we are serious about reducing obesity risk in Essex it is important that we understand what is really driving it and that organisations and functions responsible for creating obesity are held to account as part of collective efforts to solve the problem.

2. Recommendations

- 2.1 Members are asked to:
 - Note the summary and activity taken place to date
 - Endorse and support suggested next steps as proposed in this paper and as they emerge
 - Support officers in their evidence-based approach to holding system partners collectively to account for their necessary contributions to reduce population obesity risk

3. Background

- 3.1 Initial consultation commenced with the Essex Health and Wellbeing Board (HWBB) in July 2023 in a series of workshops, to inform the HWS development. Concurrently, there are evidence and policy reviews being undertaken, due for completion in December 2023.
- 3.2 The HWS will support delivery of the Essex Joint Health and Wellbeing strategy. The HWS is likely to cross-cut other national and local strategies, including but not exclusive to the UK government obesity strategy policy paper, The National Food Strategy, and Levelling Up, Everyone's Essex, Early Years and Childcare, Fit for the Future, and Climate Action, respectively.
- 3.3 Alongside the objective evidence based global literature review process, the recommendations from the HWBB workshops are being considered in shaping the work programme, as evidenced in the following points:
 - Integrating weight management commissioning, between the NHS and local government, as a key action in the delivery plan

- Some focus on early years, children, and families as a proposed key delivery area of the strategy
- Narrative of strategy to focus on healthy eating over weight management, and healthy weight rather than obesity
- Public consultation to assess residents lived experience of obesity and their environment, to run concurrent to stakeholder engagement, to inform strategy
- Interventions in action plan to focus on individual behaviour change and improvements to the obesogenic environment
- Some focus on workplaces as another suggested key delivery area of the strategy
- Partnership delivery of the strategy, whereby no single organisation has responsibility or accountability, with the HWBB as a key vehicle to oversee shared accountability for outcomes across individual organisational boundaries.
- 3.4 Stakeholder engagement continues into April 2024, specifically guided by the commencement of an Essex implementation review to commence early 2024.
- 3.5 From early 2024, it is proposed that resident engagement will run concurrently to stakeholder engagement.
- 3.6 Thereafter, a strategy and action plan will be developed.
- 3.7 Governance arrangements and associated reporting will be established to guide the implementation of the healthy weight strategy action plan. Early proposals suggestion that an Essex wide healthy weight steering group will be established, with cross-sector representation, including representation from each domain of the Foresight report, the framework being used to shape the 3 evidence reviews. It is envisaged that the group will meet quarterly and have a rotating theme of focus, aligned to the healthy weight strategy and action plan. This group will oversee delivery of the healthy weight strategy and action plan and report annually to the HWBB (unless requested otherwise, whereby additional updates will be accommodated).
- 3.8 The process of reporting into the steering group will be determined during the development of the strategy and action plan and throughout stakeholder engagement; this process is likely to involve District Health and Wellbeing Boards and/or Alliance partnership boards. Progress will be reported to the HWBB annually, with ambition to present the first draft of the healthy weight strategy by September 2024.

4. Options

- 4.1 Members are asked to:
 - Support the outlined approach
 - Support officers leading on the Healthy Weight Strategy in holding system partners to account for their contribution to reducing obesity risk as evidenced by the ECC and Leeds Beckett University led evidence and literature.

5. Issues for consideration

5.1 It is important that a partnership and whole system approach is taken to reducing population risk of excess weight, rather than a disproportionate focus on one part of the system, such as individual behavioural responsibility, which,

evidence has shown, is unlikely to reduce excess weight at population level. The HOSC could play a useful role in ensuring Essex stakeholders engage with and contribute to reducing population obesity risk as part of the cross organisation, multi stakeholder approach which needs to be taken.

6. Financial implications

6.1 All activity currently envisaged is contained within existing financial allocations.

7. Legal implications

7.1 None.

8. Equality and diversity implications

- 8.1 The Public Sector Equality Duty applies to the Council when it makes decisions. The duty requires us to have regard to the need to:
 - a) Eliminate unlawful discrimination, harassment and victimisation and other behaviour prohibited by the Act. In summary, the Act makes discrimination etc. on the grounds of a protected characteristic unlawful.
 - b) Advance equality of opportunity between people who share a protected characteristic and those who do not.
 - c) Foster good relations between people who share a protected characteristic and those who do not including tackling prejudice and promoting understanding.
- 8.2 The protected characteristics are age, disability, gender reassignment, pregnancy and maternity, marriage and civil partnership, race, religion or belief, gender, and sexual orientation. The Act states that 'marriage and civil partnership' is not a relevant protected characteristic for (b) or (c) although it is relevant for (a).
- 8.3 The Equality Comprehensive Impact Assessment indicates that the proposals in this report will not have a disproportionately adverse impact on any people with a particular characteristic. Actions will be targeted to areas with highest rates of Obesity, which typically have highest levels of deprivation, working with communities to identify solutions; this is likely to involve levelling up areas. Public Health colleagues have started this approach, such as by liaising with levelling up community supermarket delivery partners with the ambition to explore increasing the availability of healthy, fresh food. Following completion of the first draft HWS action plan, a ECIA will be completed; if adverse findings are identified, the action plan will be revised accordingly.

9. List of appendices – none