

**Health and Wellbeing Partnership Board
March 2008**

Obesity Strategy

Executive Summary:

Purpose of Report

To outline the obesity strategy to the Health and Well Being Board, this has been developed with local partners and practitioners. The strategy highlights the need for action and the desire for all actions to be multifaceted, linked in such a way as to make them more effective in terms of delivery.

Actions requested:

Action Required

The Board is asked to

Approve the obesity strategy as a countywide Strategy

Approve the implementation structure so that further work can begin

PCT Strategy core aims supported by this paper:

X	Be healthier – particularly if they live in our most deprived communities
X	Be working with the PCT to promote physical and mental well being and prevent ill health
X	Be actively supported to manage their own health and care needs at home, when this is appropriate
X	Have access to high quality, personalised, safe and appropriate health services
	Get excellent value for money from their local health services
	Have a PCT which is a high performing organisation

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Obesity Strategy

Introduction

A key recommendation from the Director of Public Health's 2005 -2007 was that the PCT should, whilst working with partners, develop an obesity strategy. Over the last nine months much work has been undertaken to deliver this key objective, the summary below describes that work.

Why is it important?

The number of obese individuals in England has tripled since the 1980s and all indications show that Oxfordshire is no exception. Nearly one in four people in the UK are obese^{*1} - being obese reduces life expectancy by an average of 9 years.

Obesity impacts on life in different ways. It affects general mobility, leading to problems with joints and causes long-term diseases such as diabetes, stroke and heart disease as well as affecting individuals' self esteem. Obesity does not affect all equally; it is generally more common in women and in manual workers. It is therefore another cause of health inequalities.

Where are we now?

Within Oxfordshire the information we have is poor, although much work is going on to improve our data. At present estimated prevalence of obesity shows that about 24% of the population are likely to be obese – if no action is taken, this could increase to 45% by 2026. (see strategy page 6)

Information about obesity in the South East is more robust and there is little to suggest our population differs significantly from those around us

Headline facts about Obesity in the South East

- Levels of obesity have nearly trebled in the UK in the last quarter century and currently stand at 21% of men and 24% of women.
- The national trend is mirrored in the South East but levels are significantly lower than the national level.
- The average population body mass index (BMI) is well into the overweight range, both nationally and regionally.
- Obesity itself is the tip of the iceberg. The average person in this country is classed as overweight. Obesity is increasing at an alarming rate in children and young people. In the South East, almost one in twenty children are obese and a further 15% of boys and 19% of girls are overweight.
- There are significant inequalities in obesity. Twice the proportion of women in unskilled manual groups are obese, compared with those women from professional groups.

What can be done to improve outcomes?

Many factors contribute to the development of overweight and obesity although the solution appears simpler; to impact on obesity levels we must ensure that diets are healthy and the amount of exercise taken increases.

However, because of the complex factors leading to obesity, the problem will not be reversed by any single approach. Successful strategies will need to change many aspects of people's lives and changes are needed to the current environment which encourages obesity.

¹ Obesity is defined as a body mass index (BMI) of 30+. BMI is measured by weight in kilogrammes divided by height squared

Whilst the solution appears simple, the task is not easy because the causes of obesity are woven into the fabric of modern lifestyles. The way forward is to help people gradually make healthy choices from cradle to grave, starting with breastfeeding and continuing into a healthy and active old age. This can only be done through a long-term commitment linking together the efforts of all organisations and the public at all levels from local to national.

Public awareness about obesity and the causes of obesity is gradually improving. National work has started with the food industry to improve labelling and reduce the fat, sugar and salt content of ready meals. Advertising restrictions have been introduced.

The picture is similar at local level. Some actions have started, this includes

- Oxfordshire Healthy Schools Programme is working to promote healthy eating and physical activity and, to that end, local programmes such as ours promote a balanced healthy diet and encourage physical activity throughout the whole school.
- Breastfeeding is an important foundation for a healthy diet. It is the perfectly balanced food for babies and protects against future disease. In Oxfordshire we are meeting our goal of increasing breastfeeding rates by 2 percentage points per year. Currently around 55% of Oxfordshire's mothers breastfeed – around 10% more than the national average.
- Oxfordshire has a good track record of coordinating work on exercise and nutrition, especially between District Councils and the NHS. The thrust of this work has suffered during a period of organisational change but will provide a building block for the future.
- Pilot work is underway looking at how commercial companies (Slimming World, Weight Watchers and Rosemary Conley) can help to provide services for people who need to lose weight. At present 500 packs are available for GP's to use with patients who have an urgent need to lose weight.
- Some practices are undertaking practised based initiatives for example Sonning Common Health Centre are running weight management groups.

The work underway is a valuable start to what needs to be achieved, however, one of the most important starting points is to link all the ongoing work together. This will be achieved by forming implementation groups which can begin to map projects ensuring the right people know what services are available within their area, thus improving usage of existing work.

How has the obesity strategy developed?

Work on the obesity strategy started in April 2007. There was a period of talking to key individuals to draw together expectation and experience about what the strategy could deliver. On the 28th June a whole day workshop was held which hosted all our partner organisations in the morning and then allowed practitioners to contribute to the discussions in the afternoon. From this day a draft strategy was designed.

During September six 2 hour workshops were held for partners and practitioners to look at and discuss the strategy further working through scenarios to make changes to both the strategy and the care pathway. In November the strategy was agreed with the clinical executive and after a consultation period has come back to the Board for approval.

It is recognised that the strategy has been pulled together quickly, this is necessary to ensure that an implementation plan is put into place to start some significant work across the county aimed at reducing obesity. For this reason, the strategy will be evaluated and reviewed in March 2009 to ensure that it is meeting the needs of the whole population. After this early review the strategy will have a five year shelf life.

Overview of Strategy

The main strategy sections are

- An epidemiology section which looks at the size and shape of the problem within Oxfordshire
- Two sections looking at prevention of obesity in both Children and Adults, these sections make recommendations for population interventions
- Two sections looking at a care pathway for dealing with people who already have weight management issues (Children and Adults)
- An action plan which sets out the priorities for the next twelve months and beyond.
- A baseline assessment against NICE Criteria

Epidemiology

This section looks at the prevalence of obesity within Oxfordshire, the targets and how we are performing against those target.

Prevention of Obesity

This section maps the work which is currently ongoing for both children and adults. Services include those ran by public organisations and private providers and looks at generic countywide preventative services and services for specific communities. A key recommendation from this section is to develop resources which ensure all those working with those requiring these services are fully aware of what services are available.

Treating Obesity

This section describes two care pathways (Adults and Children) which describes the services we aspire to deliver. Elements of each stage of the care pathway are already available to patients but work being developed through the Operational Plan will allow this to move further forward. There is more work to be done on developing both pathways, however, within the children's pathway there is a need to consolidate what is being provided within core elements of services and what requires additional resources.

Action plan

This begins to set out priorities for the next 12 months, this will be developed further once the strategy has been agreed and an implementation group has been formed. A structure is suggested for monitoring and evaluating the strategy. This includes a NICE baseline assessment so that progress can be regularly monitored.

Monitoring the Strategy

This strategy is linked to several key targets. In 2006, the government released a PSA target relating to obesity which states that Health, Local Government and other bodies will work together to...

...Halt the year on year rise in obesity among children aged under 11 by 2010 in the context of a broader strategy to tackle obesity in the population as a whole.

This target breaks down into a number of key indicators which are important for all partners within Oxfordshire which this strategy intends to cover. They are set out below.

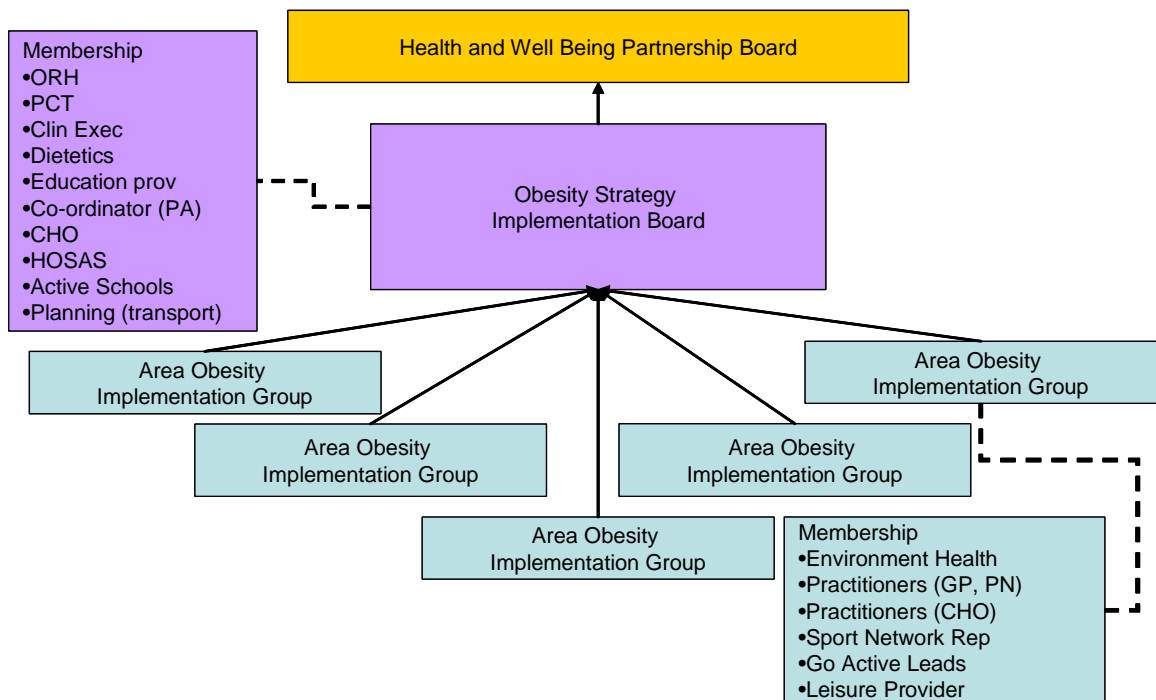
Key Target Groups	National PSA Target	Baseline as at 2006/07
Children & Young People Adults	Halt year on year rise of obesity in under 11's by 2010, as part of a wider programme to reduce obesity in the population as a whole	Year R (ages 4 – 5) overweight 12.22%, obese 7.98% Year 6 (ages 10 – 11) overweight 13.05%, obese 15.42% Adults: 15% obese (Adult lifestyle survey, 2005)
Children & Young People	To increase the proportion of school children in England who spend a minimum of two hours each week on high quality sport from 25% in 2002, to 75% by 2006 and 85% in 2008	PESSCL survey results 06-07 North Oxfordshire SS Partnership 91.3% Oxford & Thame SS Partnership 77% Vale PE, SS & Club 92% Links Partnership West Oxfordshire SS Partnership 83% South Oxfordshire SS Partnership 95%
Children & Young People	By 2010 aim for all pupils to have the opportunity to do up to two hours of sport in school hours and two to three hours of sport outside of school hours	All pupils are offered 2 hours of Physical Activity within school hours. Work ongoing to achieve out of school target
Children & Young People	Target to have 75% of schools accredited as Healthy Schools by 2009 with the rest working towards Healthy School status Build on existing progress; so that by 2010 all schools will have active travel plans	In Oxfordshire 179 schools and 4 nurseries have reached and are maintaining the Healthy School Standard. Oxfordshire is on target to achieve its target of 257 (90%) accredited Health Schools by 2009. (Stretch target which extends national target) As at August 2007 – 220 schools have developed action plans in place with 120 schools needing to produce action plans

Key Target Groups	National PSA Target	Baseline as at 2006/07
Adults	<p>By 2008, increase the take-up of sporting opportunities by adults and young people aged 16 and above from priority groups by increasing the number who participate in active sports, at least 12 times per year by 3%, and increasing the number of participants who engage in at least 30 minutes moderate-intensity-level sport, at least three times per week by 3%</p> <p>Aim for an increased prevalence of physical activity amongst the whole population in England, with an increasing year on year 1% per annum trajectory'</p>	<p>Baseline from Active People Survey 2006</p> <p>23.2% of the population or 146,230 people in Oxfordshire are participating in 3 x 30 minutes of sport and active recreation per week</p> <p>To meet this target a further 6,303 people need to become regularly active in Oxfordshire year on year</p>

In 2007, another target has been added

Key Target Groups	National PSA Target	Baseline as at 2006
Children & Young People	Reduce the proportion of overweight and obese children to 2000 levels by 2020, in the context of tackling obesity across the population.	To be confirmed by April 2008.

Monitoring of the strategy is through the Health and Wellbeing Partnership Board. Discussions on how this will happen are on going but it is envisaged a sub group will monitor performance against KPI's and through the delivery of the action plan. A delivery structure is being developed which will be developed as overleaf



Next Steps

Our next steps are

- Sign off by Health and Well Being Partnership Board
- Formation of an Obesity Project Group – April 2008
- Launch with Implementation groups meeting during March and April 2008 to develop local action plans further
- January - March 2009 – review strategy, progress report
- April 2009 – launch five year strategy

A full copy of the obesity strategy can be found on the PCT website.

www.oxfordshirepct.nhs.uk