

**DUDLEY HEALTH AND WELLBEING BOARD**

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| <b>DATE</b>                    | <b>5<sup>th</sup> December 2018</b>   |
| <b>TITLE OF REPORT</b>         | <b>Healthy Weight<br/>Whole Systems Approach to Obesity Prevention (WSAOP)</b>  |
| <b>Organisation and Author</b> | <b>Dudley Council Health and Wellbeing Division</b>   |
| <b>Purpose</b>                 | <b>Update on Healthy Weight priority, the Whole Systems Approach to Obesity Prevention, progress and next steps</b>   |
| <b>Background</b>              | <p>Obesity is a major global health crisis. Nationally one in four adults in are obese and nearly a quarter of children are obese or overweight by the time they start primary school aged five, and this rises to one third by the time they leave aged 11.</p> <p>Whilst we have excellent services in Dudley for both adults and children wanting to achieve a healthy weight, tackling obesity is a complex and multifaceted problem with over a hundred contributing factors. We therefore need to be ambitious if we are to beat the challenge of childhood obesity and meet the 2014, multiagency aim, to halt the rising trend in obesity in adults and to reduce the levels of child obesity from 23.4% (2006) to 18.5% by 2020, (as measured in 10 and 11 year old children). Current results (2016/17) show we are some way off achieving this, as 23.2% of year 6 children are obese (compared to 20% in England).</p> <p>In 2016 a Delivery Plan (Appendix 1) with contributions from the Children &amp; Young People’s Alliance Partnership, was agreed which saw a move away from the traditional approach to obesity which focused on targeted services, to a wider vision “to create an environment and culture where adults and children have the opportunity to maintain a healthy weight by making changes to the environment and by encouraging people to have healthier lifestyles” (Health &amp; Wellbeing Board Priority).</p> <p>Therefore, in October 2017, when Public Health England commissioned Leeds Beckett University to develop a Whole System Approach to Obesity (WSAOP) we were keen to embrace the opportunity, seeing it as an enabler to continue the new way of working, to contribute to the evidence base and develop a way of tackling obesity as core business within the existing system. There has been continued progress on areas such as walking to school, the Daily Mile, free swimming and a re-launch of child weight management services.</p> <p>The WSAOP utilises ‘systems’ tactics by collaborating across all sectors and communities that have an impact on the obesity journey and working in partnership with all stakeholders to identify key local levers. The idea is that small actions when taken together will reinforce and support each other to achieve the long-term goal. Systems approaches also prevent potentially effective interventions being confounded by other parts of the system and seeks to recognise unintended consequences by viewing the system as a whole.</p> |

**Key Points**

The prescribed programme by Leeds Beckett University meant that we were required to deliver against some challenging timescales (Appendix 2) as we were asked to facilitate 3 workshops between October and January in addition to attending workshops in Leeds and contributing to the development of the route map.

The workshops involved bringing together a set list of stakeholders, identifying and mapping the causes of obesity, highlighting any gaps, prioritising actions and getting buy in from stakeholders across the system in order to isolate opportunities to disrupt the system. We now have a list of potential partners; some new to this area of work and four causal levers with identified priorities within each theme.

**4 High Level Causal Levers (and a few causal factors)**

Emotional Health and Wellbeing (postnatal depression, living alone, sleep, disability)

Food Availability (supply and demand, cooking in schools, poverty, technology)

Habitual Physical Activity (play, active travel, lighting, technology, PE, safety)

Parenting (role models, time, neglect, use of technology to pacify, safety)

*Community* engagement, voice of the child and marketing and promotion are a golden thread throughout the 4 levers.

Three of the 4 causal levers identified have existing mechanisms in the system in Dudley, therefore the aim to embed healthy weight into partner priorities has already begun, existing working groups now have healthy weight as a standing agenda item. Progress will be governed by a Strategy Group which will meet bi-annually. Food availability links directly with both the poverty and isolation agendas and we will be working over the coming months to identify key stakeholders in this.

In addition the process identified several key themes that contribute to healthy weight in Dudley such as adverse childhood experiences (ACES) and bereavement. The inclusion of these were unique to Dudley and demonstrates that a true system wide approach has been taken.

Discussions are now taking place at a strategic level that wouldn't in the past have included weight. Some of these are now being picked up elsewhere in the system and will continue to do so.

Taking part in a nationally recognised research project gave the programme momentum and credibility. We were able to engage a wide range of stakeholders that brought interesting ideas and concerns to the discussion. Participants were able to see their role within the system and commit to action. Unfortunately, timescales did restrict the contribution from some stakeholders, which varied and sometimes meant that strategic decision makers were not present or able to attend all sessions.

Additionally we recognised very early on that the Leeds approach did not consider the importance of engaging with the community, as this is at the heart of the Dudley approach we have committed to explore this beyond the research period. We are currently scoping how to work with the community and on how to incorporate the learning from existing community engagement coproduction / social marketing and from the Schools Council work on Healthy Weight that will commence in the New Year.

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| <p><b>Emerging issues for discussion</b></p>       | <ul style="list-style-type: none"> <li>• Embedding healthy weight within partner agencies core business in order to create and develop relationships and integration, making it everyone business and using a shared language.</li> <li>• Support partners to have a greater understanding of each other's organisational drivers and blockers in order to facilitate a more productive environment</li> <li>• Recognition that many other priorities underpin the healthy weight agenda and a reduction in obesity levels may be an outcome to be considered.</li> <li>• As healthy weight becomes core business we need to create a high profile governance system and commitment to tracking progress against the vision.</li> <li>• By developing and supporting resilient communities, making healthy choices will become the easy choice.</li> <li>• There needs to be a shift in priorities that underpin the healthy weight outcomes, such as nurture and attachment. There needs to be a recognition of unintended consequences.</li> <li>• A way to listen to what the Community has to say has to be explored – how do we get people to tell us their “weight” story?</li> </ul>  |
| <p><b>Key asks of the Board/wider system</b></p>   | <p>We would like to work with partners to explore their contribution to healthy weight, particularly how we can each address the levers identified. This will also help to share priorities, language, learning and identify areas of coproduction.</p> <p>Suggested partners that can contribute to addressing the levers include:</p> <ul style="list-style-type: none"> <li>• Housing</li> <li>• Transport</li> <li>• Education</li> <li>• Police</li> <li>• Fire</li> <li>• Voluntary sector</li> <li>• Communications</li> </ul> <p>Support to ensure community engagement and voice of people of all ages is integral to the development of our collective work to promote healthy weight</p> <p>Following engagement with communities, we will ask partners to be clear about their commitment to specific action and provide leadership to promote healthy weight.</p> <p>To continue to monitor the progress of the Healthy Weight priority and support the whole systems approach required to improve outcomes.</p> <p>Achieving the vision will require all partners to get behind this ambition to play their part in making healthier decisions, providing healthier options and creating healthier environments.</p> |
| <p><b>Contribution to H&amp;WBB key goals.</b></p> | <p>Healthy weight</p>  |

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**Delivery Plan**

Below is the outline delivery plan for enabling children and young people (CYP) to be a healthy weight. The first priorities are those outlined in the Alliance Board Strategy and agreed by the partnership, the second are enablers that will help to further develop and embed the approaches required to develop sustainable long term commitment from across the partnership, with children and young people at the heart of services.

| Activity/<br>Programme<br>area                                    | Action  | Lead/s             | Timescale<br>/RAG | Progress   |
|---|---|--------------------|-------------------|--|
| <b>Delivery plan for Alliance Board Healthy Weight Priorities</b> |   |                    |                   |  |
| <b>Dudley Daily Mile</b>  | Continue to roll out the Daily Mile initiative.   | Public Health team | Amber             | Ongoing.   |
|   | Identify and target schools not currently participating and secure buy in.  |                    | Amber             | Schools identified & contacted                                   |
|   | Support and guidance to all schools to both maintain and implement.   |                    | Amber             | All schools contacted. Links to Half Marathon currently underway |
|   | Agree timescale for implementing in all schools.  |                    | Red               | Links to free swimming currently being explored                  |
| <b>Walking to School Programme</b>                                | Insight work to understand what the 'enablers' and 'barriers' are for CYP walking or cycling to and from school.  | Public Health team | Green             | Learning shared with Scrutiny Development Group.                 |
|   | Triangulate the findings of the insight work, school crossing patrol review and other intelligence to inform how future active travel services, programmes and infrastructure are shaped and streamlined. | Road safety Team   | Green             |  |
|   | Report with recommendations   |                    | Green             |  |

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| <b>School Food Plan (Whole Setting Approach to Food)</b>            | Continue to ensure key aspects of the national School Food Plan are adopted and promoted in Dudley.<br><br>Identify and target schools not currently participating and secure buy in.   | Public Health team<br><br>Education settings | Amber              | Limited staff capacity and website issues has hindered continuation of 'Whole Setting Approach to Food' for schools and colleges. Recovery plan in place.  |
| <b>Healthy Pregnancy and first months (including Breastfeeding)</b> | Review of maternity services currently commissioned by Public Health to include Interdependencies with Children are Social Care, Early Help and the Multi Specialist Community Provider (MCP).<br><br>Maintain UNICEF baby friendly initiative across all partners. | Public Health team                           | Amber<br><br>Green | Ongoing – pilots services in breastfeeding to be evaluated in December with recommendations made in January.<br><br>Achieved, ongoing work to be continued |
| <b>Healthy Weight services</b>                                      | Review of all healthy weight services for pregnant women and children.<br><br>Implement the findings of the review.   | Public Health team                           | Amber<br><br>Red   | Review of NCMP complete.<br><br>Commissioning of services currently being explored   |

| Activity / Programme area   | Action   | Lead/s                           | Timescale /RAG | Progress   |
|---|--|----------------------------------|----------------|--|
| <b>Enablers to embed Healthy Weight priorities and approaches</b> |  |                                  |                |  |
| <b>System Wide approaches</b>                                     | Work with Leeds Beckett University to apply a systems based approach to obesity.   | Public Health team (initially)   | Green          | Ongoing. Roadmap currently being finalised by LBU.           |
|   | Expression of interest in testing the reflective Actions Mapping Tool as part of the Whole Systems Approach to Obesity Programme and to partake in the research project. | Wider partners to be established | Green          | Workshops completed. Causal levers identified. Work ongoing. |
|   | Workshop to be planned with wider  | All CYPA                         | Green          | Community engagement currently being explored.               |

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|                                   | <p>partners, families and CYP.</p> <p>Workshop to help shape governance of healthy weight priority across the partnership across life course.</p>   | H&WBB and both Alliances | Green | Workshop completed. Report to HWBB September 2018. Work ongoing.  |
| <b>Voice of Child</b>             | Utilising participation strategy approaches to shape the healthy weight priority.   | DCVS Public Health team  | Amber | Young people will coproduce service specifications for the commissioning of services. Ongoing. Work with school councils to commence in the Autumn. |
|                                   | Work with young health champions to develop the healthy weight programme and explore opportunities to encourage participation from CYP in leading programmes like 'sugar detectives' and similar roles for CYP. | Health champions         | Amber |   |
|                                   | Continue to utilise case studies and feedback from existing reviews and services to shape future plans.   | CYP                      | Green | Ongoing   |
| <b>Campaign on Healthy Weight</b> | Explore high profile campaign on Healthy Weight with CYP and families   | Public Health team       | Amber | Commences September 2018  |
|                                   | The campaign and approaches to be led, developed and designed by CYP.   | CYP to be identified     | Green | School Councils will lead the campaign  |
| <b>Leading by example</b>         | Explore opportunities for key figureheads to pledge commitment to healthy weight agenda, e.g. pledge to lose weight, increase walking, champion key messages etc...   | All                      | Amber | Pledges yet to be discussed.  |



**Whole Systems Obesity**

**Dudley Programme Timeline**

| <b>Event / work</b>                                       | <b>Date / venue</b>          | <b>Actions delivered</b>  |
|---|------------------------------|---|
| Whole systems obesity workshop                            | July 2017 - Leeds            | Dudley Public Health staff attend workshop delivered by Leeds Beckett University (LBU) about plans for piloting whole systems work and submit expression of interest in becoming a pioneer site.  |
| Selection as pioneer site                                 | 5 October                    | LBU inform DMBC of selection as a pioneer site.   |
| Manual Introduction and Training (Phase 1)                | 17 October 2017 - Leeds      | DMBC interview with LBU research team to identify expectations from involvement in the programme.<br>Work through the manual, to understand process, requirements and identify any areas requiring further clarity  |
| Preparation for Workshop 1 (Pre-systems)                  | October - November 2017      | Undertake Pre-systems work from manual/training. This included: <ul style="list-style-type: none"> <li>• Demonstrating senior level support</li> <li>• Setting up a Core Working Group (CWG) and agreeing the two dates between workshop 1 and 2 when the Core Working Group will meet (Building the local picture (developing slides to be presented at Workshops 1)</li> <li>• Stakeholder engagement (business case)</li> <li>• Reporting back to senior leaders on pre-systems</li> </ul> Preparation for Workshop 1. This includes: <ul style="list-style-type: none"> <li>• Book venue for workshop 1 and 2</li> <li>• Invite attendees for workshop 1 and 2</li> <li>• Slide &amp; Workshop 1 preparation</li> </ul> |
| Workshop One Event – Mapping the Causal System (Phase 2)  | 2 November 2017<br>DL Dudley | Workshop 1 delivery by local Core Working Group   |
| Identifying opportunities to disrupt the system (Phase 3) | November -                   | Local Core Working Group; <ul style="list-style-type: none"> <li>• Create causal maps from WS1</li> <li>• Identify themes from causal map</li> <li>• Identify where any proposed actions from WS1 may link to themes</li> <li>• Identify current actions in relation to themes</li> </ul> Preparation for Workshop 2  |



|  | Longer, safer, healthier lives for all    |   |
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| Workshop Two Event – Building and aligning actions (Phase 4) | 23 November 2017<br>Canal and River Trust | Workshop 2 delivery by local Core Working Group<br>Conduct feedback and evaluation with LBU   |
| Building and aligning actions training                       | 11 December 2017<br>Leeds                 | Conduct feedback and evaluation of workshops 1 & 2 with LBU.<br>Planning for next steps and feedback provided from LA perspective.                |
| Action Planning (Phase 5)                                    | January 2018                              | Collate and process actions suggested in workshop 2 and develop into 5 theme based action plans.  |
|  | February 2018                             | Disseminate action plans to stakeholders and established working groups for each theme.   |
| Whole systems obesity workshop                               | 16 March 2018 - Leeds                     | Feedback session at Leeds and review of manual for Phase 5. First draft of the route map shared.  |
| Building and aligning actions (Phase 4)                      | 20 March 2018                             | Held an event for engagement of stakeholders not represented in workshops 1 & 2 (GP practices and schools).                                       |
| Community engagement planning (Phase 5)                      | 13 April 2018                             | Meeting held with DMBC PH Communities team to look at how to engage and involve the local community to coproduce the action plans.                |
| Evaluation   | 4 July 2018                               | Core Working meeting with LBU to provide feedback on the process to support the national evaluation and development of the WSAOP toolkit for LA's |