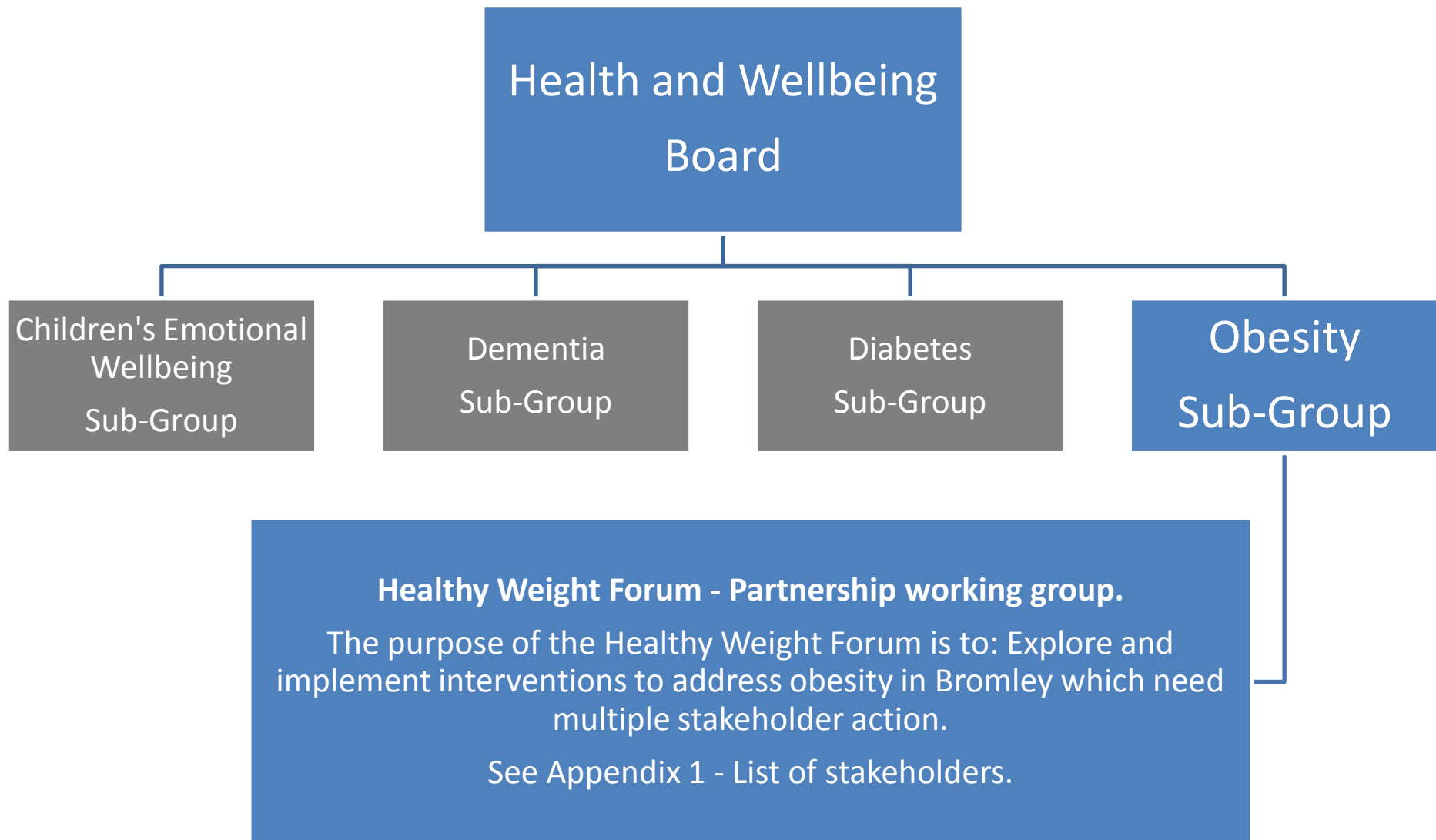


Obesity Sub-Group Action Plan 2015/16

One size doesn't fit all



Organisational Structure for the Health and Wellbeing Board Obesity Sub-Group.



Background

Risk factors and causes of obesity are complex. Behavioural, genetic, environmental and social elements all contribute to weight gain and impact health equality in the borough. Given this complexity, obesity cannot be solved by a single service, department or organisation; any approach to address the issue must involve a range of coordinated initiatives that 'cross-cut' or span different organisations.

The Bromley Health and Wellbeing Board declared obesity as one of four Health & Wellbeing Strategy priorities in 2015 and established an Obesity Sub-Group to identify and investigate the impact of Obesity in Bromley. This sub-group has proposed 4 priority actions to take forward in 2015/16. This action plan will detail the requirements on the 4 priorities and will explore and implement actions through the newly established Healthy Weight Forum, the multiple stakeholder working group. Progress on these actions will be reported to the Health and Wellbeing Board.

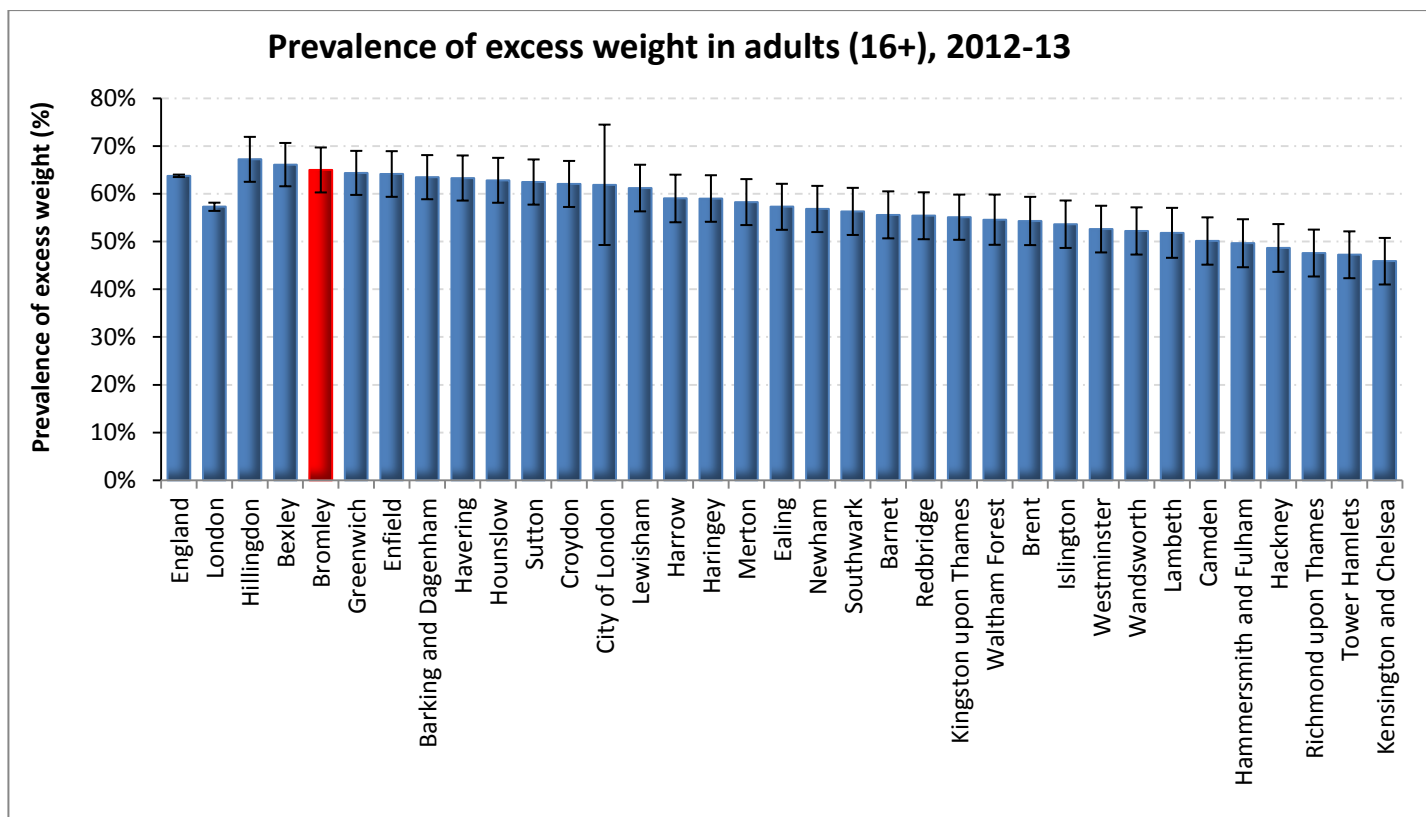
Obesity in Bromley

In England 61.9% of adults and 28% of children aged between 2 and 15 years are either, overweight or obese. 70% of adults are expected to be overweight or obese by 2034. Today's generation of children may well be the first for over a century for whom life expectancy falls.

The current burden of obesity in Bromley

- Bromley has the third highest prevalence of excess weight in London.
- 65% of Bromley's population are either overweight (>25 BMI) or obese (>30 BMI), which represents approximately 205,820 adults (Public Health Outcomes Framework, 2013).
- This is higher than the England average (61.9%) and higher than the populations of all but one (Bexley) of our closest statistical neighbours (Havering, Sutton, Barnet and Richmond upon Thames).
- In Bromley, the estimated prevalence of obesity is 21.8% (2013 Health Profile), which represents 54,163 adults.
21.3% of children in Bromley aged 4-5years old (Reception class in school) are either overweight or obese increasing to 32% of children aged 10-11years old (Yr 6 class in school). Around 8% and 16%, respectively, are obese.
- 25.6% of Bromley's population do less than 30 minutes of activity per week (2014) increasing from 24.1% in 2013, indicating increasingly sedentary lifestyles.
- Excess weight can have a significant impact on health. Obesity is associated with a reduced life expectancy of approximately nine years and this is mainly due to the increased risk of heart disease¹.
- Obesity is a key risk factor for circulatory disease and cancer, which were accountable for over 60% of the deaths in Bromley between 2010 and 2014. Obesity has an attributable risk for Type 2 diabetes of 24%. In tandem with the rising levels of obesity in Bromley, there has been a significant increase in the prevalence of diabetes, with 14,013 cases on the GP registers in 2013/14, as compared to 4,846 in 2002.

Figure 1: Prevalence of Excess Weight across London 2012-13



Source: Public Health Outcomes Framework

Why is obesity important?

Increasing rates of obesity present a major challenge to the health of local people and failure to tackle this will have a significant impact on the Council, NHS and other public service providers.

Annual Cost of Obesity:

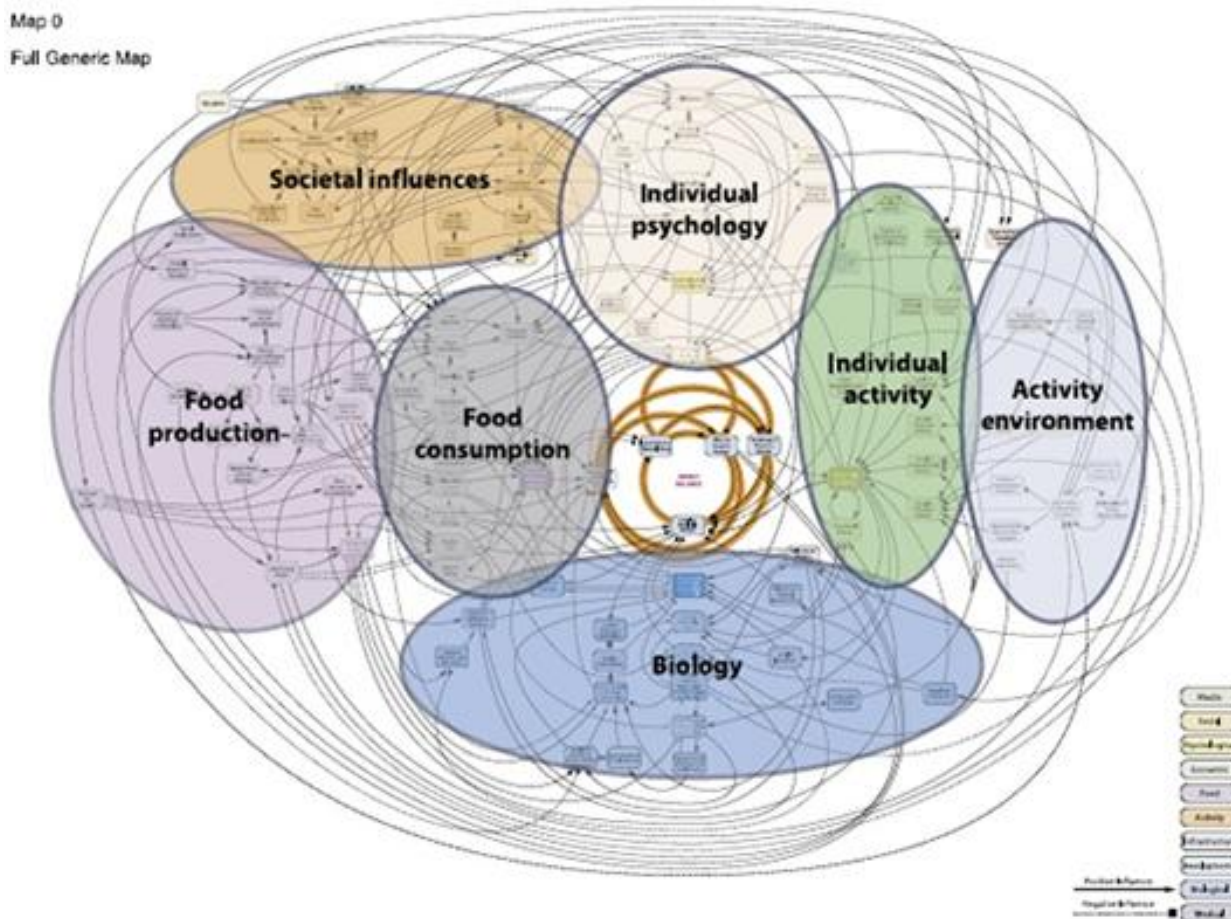
- Cost to the wider economy = £27 billion
- Cost to NHS = £5.1 billion
- Cost to Social Care = £352 million
- Obesity attributed sick days = £16 million
- Obesity medication = £13.3 million
- Societal costs of stigma and mental health issues

Source: Public Health England, February 2015.

What is recommended to reduce obesity?

Obesity is a complex, systemic issue with no single or simple solution. Only a comprehensive, systemic programme of multiple interventions is likely to be effectiveⁱⁱ. Therefore the role of the forum is to bring together those current interventions and see where partnership working can add the greatest value and to tackle those issues where only a collaborative multiagency approach will work.

Figure 2: Obesity Map



Source: Foresight, 2007ⁱⁱⁱ.

How is the Health and Wellbeing Board Obesity Sub-Group going to tackle obesity in Bromley?

The Health and Wellbeing Board Obesity Sub-Group recommend the following action plan to reduce obesity in Bromley. The recommendations are a result of the suggestions made by the Healthy Weight Forum. The Healthy Weight Forum is a local group of key stakeholders established by the obesity subgroup to map existing interventions and identify local gaps in provision, look at the evidence base for effective interventions and decide collectively actions this working group will deliver. Actions were prioritised based on their potential to have the biggest impact on obesity in Bromley and resources available.

Obesity Sub-Group Action Plan

Start Date:

Expected completion date:

Objective	Action/s	Outcome / Impact	Lead by	Due date	Progress
1. Map a Healthy Weight Pathway – from Healthy Weight to Morbidly Obese.	Map current weight management activities from Tier 1 (population wide basic intervention & prevention e.g. environmental impacts) to Tier 4 (Specialist Interventions e.g. surgery) 1. Map current local services available and gaps for each step on the Healthy Weight Pathway.	Outcome: 1. Identify signposting opportunities. 2. Optimise referrals to services. 3. Increase awareness of evidenced based provision. 4. Identify gaps in provision. Impact: 5. Reduce weight in referred individuals. 6. Improve Health outcomes for those individuals.	Healthy Weight Forum partners. Lead Role; LBB Public Health. CCG.	31.3.2016	

<p>2. Support the development of local planning policy to consider healthy weight environments.</p>	<p>Provide evidence based recommendations to support the development of sound local planning policy to promote health and wellbeing in the borough.</p> <p>Provide evidence based recommendations for restriction of fast food outlets and access to open space.</p>	<p>Outcome:</p> <ol style="list-style-type: none"> 1. Provide evidence on health and wellbeing to underpin the Local Plan. 2. Provide evidence regarding access to open space and leisure facilities on health and wellbeing outcomes to underpin the Local Plan. 3. Refresh the mapping of Local Fast Food Outlets. Compare availability and planning policy against the food flagships GLA modelling to inform the Local Plan. <p>Impact:</p> <ol style="list-style-type: none"> 4. Positive impact on the obesogenic environment. 	<p>LBB Planning Team. LBB Public Health.</p>	<p>31.3.2016</p>	
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<p>3. Communications: Develop and deliver a Healthy Weight communications plan.</p>	<p>Communications plan to raise the profile of obesity and services available.</p> <p>Improve LBB website health information and access / Improve usage of social media to disseminate information.</p> <p>Healthy weight forum members to collate and share information on interventions and disseminate appropriately</p>	<p>Outcomes:</p> <ol style="list-style-type: none"> 1. Increase resident / provider and organisational awareness of existing schemes that effectively combat obesity. 2. Improve access to that information. 3. Raise awareness of the prevalence of obesity and support mechanisms available. <p>Impact:</p> <ol style="list-style-type: none"> 4. Increased awareness and referrals. Halt progression of obesity. 	<p>Healthy Weight Forum partners. LBB Communications team. LBB Public Health.</p>	<p>31.3.2016</p>	
<p>4. Explore local options to deliver / influence the delivery of healthy foods education and cooking sessions.</p>	<p>Look at examples of evidenced based best practice for raising the awareness of healthy food. Examples include; Mytime model of Shop Well, Sainsbury's model of Type 2 Diabetics shopping sessions, cook and eat sessions or healthy discount card interventions.</p>	<p>Outcome:</p> <ol style="list-style-type: none"> 1. Review the evidence base for promoting healthy food availability and acceptability. 2. Work with local partners to investigate what works / could work locally. 3. Influence commercial enterprises to promote healthy food / education. <p>Impact:</p> <ol style="list-style-type: none"> 4. Increased awareness, availability, acceptability and consumption of healthy food. 	<p>Healthy Weight Forum partners. Mytime Active BHC</p>	<p>31.3.2016</p>	

Appendix 1 - Partners that attended the Healthy Weight Forum.

Healthy Weight Forum partners	Department / organisation	Partner	Responsibility	Contact Details
Cllr Angela Page	Councillor	Health & Wellbeing Board	Obesity Subgroup Chair	Angela.page@bromley.gov.uk
Cllr Terence Nathan	Councillor	Health & Wellbeing Board	Obesity Subgroup Vice Chair	Terence.nathan@bromley.gov.uk
Dr Agnes Marossy	Public Health	Consultant in Public Health – Adult obesity	Chair Healthy Weight Forum	020 8461 7531 Agnes.marossy@bromley.gov.uk
Carolyn Piper	Public Health	Public Health Programme Manager - Adults	Vice Chair Healthy Weight Forum	020 8461 7775 Carolyn.piper@bromley.gov.uk
Alison Navarro / Rosanna Ottewell / Colin Maclean	Community Links	Community Links	Resident engagement	020 8315 1900 Alisonn@communitylinksbromley.org.uk rosannao@communitylinksbromley.org.uk colinm@communitylinksbromley.org.uk
Amanda Day / Local Press	PR department	Communications Lead	Comms	020 8313 4390 Amanda.day@bromley.gov.uk
Charles Obazuaye	Human Resources	LBB Occupational Health and/or HR	Staff / workplace engagement.	020 8313 4381 Charles.obazuaye@bromley.gov.uk
Marlon Brown / Warren Galstin	Clinical Commissioning Group	CCG rep	Part of the Healthy Weight Pathway, Tier 3&4 services.	01689 866544 marlon.brown@nhs.net warren.galstin@nhs.net
David Pickup	Pro-Active Bromley Chair	Pro-Active Bromley Chair	Represent Sports Clubs, Sports Networks and Leisure organisations	No email address contact via Carolyn.piper@bromley.gov.uk
Dr Meena Kharade	GP	GP Obesity Champion	GP lead – primary care representative	Meena.kharade@nhs.net

Finola O'Driscoll	Public Health	Public Health Programme Manager - Children	Children's obesity lead	020 8461 7772 Finola.O'Driscoll@bromley.gov.uk
Folake Segun	Healthwatch	Healthwatch	User Voice.	020 8315 1917 folakes@healthwatchbromley.co.uk
Gill Slater	Planning	Head of Planning Strategy / Development Planner	Planning and Environment lead.	020 8313 4492 Gill.slater@bromley.gov.uk
Judie Obeya / Judy Ferguson	Affinity Sutton Housing	Affinity Sutton Housing	Housing Department – residents and funding initiatives.	0300 100 0303 Judie.obeya@affinitysutton.com Judy.ferguson@affinitysutton.com
Louise Simpson / Carol Long	Environmental Services	Environmental Services - LBB Street Scene & Green Space Growtime	Parks and green spaces contribution to an active environment. Health eating / growing campaigns.	020 8461 7846 Lsimpson@thelandscapegroup.co.uk 020 8461 3038 clong@thelandscapegroup.co.uk
Mark Clune	Bromley Healthcare	Head of Healthy Lifestyles	Deliver commissioning services	020 8315 8880 Mark.clune@bromleyhealthcare-cic.nhs.uk
Mike Evans - Director of Health	Mytime Active	Mytime Active Leisure Provider	Facilities and programmes	mike.evans@mytimeactive.co.uk
Caroline Dubarbier	Transport	Transport Planning Manager	Transport planning - active transport lead	020 8461 7641 Caroline.Dubarbier@bromley.gov.uk
Tracy Ennis	Public Health	Public Health Cardiovascular Nurse	Primary Care obesity pathway.	020 8461 7660 Tracy.ennis@bromley.gov.uk
Tricia Wennell (PA - Nicola Bush)	Social Care	Head of Adult Social Care	Represent complex care leads.	020 8461 7495 Tricia.wennell@bromley.gov.uk 020 8313 4476 Nicola.bush@bromley.gov.uk
Vicky Power	Weight Watchers	Weight Watchers	Tier 2 services.	VPower@Weight-Watchers.co.uk

Appendix 2 - Healthy Weight indicators mapping by ward.

Ward	% of Obese Children in 4-5 yr olds	% of Obese Children in 10-11yr olds	Obesity estimates (16+)	Healthy eating estimates	Binge Drinking Estimates (16+)	% Recorded Diabetes (16+) (2012/13)	% Recorded Hypertension (2012/13)	Deprivation, IMD (Mean) (2010)
Bickley	4.7	12.2	19.3	40.1	12.4	4.39	14.21	8.56
Biggin Hill	8.2	15.1	26.7	32.8	14.2	3.94	14.18	8.93
Bromley common and Keston	9.5	15	22.6	34.1	13.1	4.01	12.95	15.68
Bromley Town	4.5	16.8	18.5	39.7	15.5	4.66	15.05	12.91
Chelsfield and Pratts Bottom	6.4	16.9	22.1	35.7	11.7	4.09	15.93	5.99
Chislehurst Ward	6.3	16	20	39.2	11.5	3.82	13.9	11.04
Clock house Ward	6.9	18.2	22.2	34.1	17	3.3	9.89	14.07
Copers Cope Ward	7.5	12	17.1	42.3	17	2.99	11.08	11.92
Cray Valley East	9.9	22.4	26.4	30.4	12.4	5.02	14.49	27.04
Cray Valley West	8.7	21.6	25.3	29.9	13.2	4.79	13.79	29.24
Crystal Palace	12.4	23.2	22.7	34.3	18.9	2.17	5.83	32.54
Darwin	8.7	15.9	24.2	34.6	11.6	4.9	19.9	14.73
Farnborough and Crofton	4.8	11.5	21.3	37.4	11.4	4.67	17.1	7.95
Hayes and Coney ward	6.4	12	21.7	36.4	13.8	3.98	14.9	6.97
Kelsey and Eden Park	7.8	15.2	21.5	35.8	13.8	4.48	15.36	11.73
Mottingham and Chislehurst North	12.4	22.3	25.8	28.9	14.5	2.24	7.14	29.06
Orpington	7.5	19.2	23.2	33.9	11.3	7.02	24.05	18.4
Penge and Cator	9.9	21.7	23.6	33.4	15.4	2.95	8.14	25.75
Petts Wood and Knoll	5.7	12.3	20.6	39.4	11.9	4.4	15.22	4.9

Plaistow and Sundridge	9.7	17.3	20.5	36	15.4	3.32	10.75	17.37
Shortlands	5.4	11.8	17.8	42.4	13.2	3.81	12.56	6.58
West Wickham	6.1	12.2	20.7	38.6	12.8	4.25	2.46	6.6

Source: Joint Strategic Needs Assessment

REFERENCES

ⁱ PHE slideset (2015). Why invest in obesity.

ⁱⁱ McKinsey Global Institute (2014), *Overcoming Obesity: An initial economic analysis*.

ⁱⁱⁱ Government Office for Science (2007), *Tackling Obesities: Future Choices – Project Report*, Foresight.

http://www.foresight.gov.uk/Obesity/Obesity_final/Index.html