

**NORTH LINCOLNSHIRE COUNCIL**

**CABINET**

**NORTH LINCOLNSHIRE CHANGE4LIFE STRATEGY 2013/18**

**1. OBJECT AND KEY POINTS IN THIS REPORT**

- 1.1 To approve a refresh of the multi agency Obesity Strategy that follows on from the North Lincolnshire Healthy Weight Strategy 2009/11. It has been updated having regard to national guidance and local priorities, and is intended to sit below the overall Health and Well being Strategy.

**2. BACKGROUND INFORMATION**

- 2.1 North Lincolnshire has had an Obesity Strategy in place since 2006. The purpose of the strategy is to coordinate activity towards addressing the national and local trend of increasing numbers of the population who are overweight.
- 2.2 Obesity is both a national and local priority. At the moment it is estimated that around 29% of adults in North Lincolnshire are categorised as obese. Without action on prevention the national figure is predicted to rise to 50% by 2050.
- 2.3 The coalition government has made its intention clear on this issue: it wants to see the rising rates reversed. Its obesity strategy, 'Healthy Lives, Healthy People: A call to action on obesity in England', was published in October 2011. It sets a new target for a downward trend in excess weight for children and adults by 2020. The strategy highlights the key role that local government can have toward achieving this aim, stating that the sector is "uniquely well placed" to lead the drive as each community has different characteristics and problems that are best addressed at a local level.
- 2.4 The Local Government Association has recently published a paper, 'Tackling obesity: Local government's new public health role'. It identifies the development of a "locally tailored strategy for obesity" as a "key idea for success".
- 2.5 Overweight and obesity are already major causes of ill health such as diabetes, heart disease, stroke, high blood pressure, cancer, mental

health problems, musculoskeletal problems and a range of other factors which affect both overall and healthy life expectancy.

- 2.6 The strategy was developed in consultation with a steering group representing all key partners. It takes into account all relevant national guidance and local priorities informed by partners and the Joint Strategic Needs Assessment (JSNA). It incorporates the wide range of activity that contributes to reducing obesity ranging from universal services such as sport and leisure activities to specialist commissioned services such as weight management.
- 2.7 An action plan will focus effort in delivering the strategy and will outline a range of measurable outcomes. Actions will be facilitated and managed by the obesity co-ordinator and monitored by a multi-agency steering group.
- 2.8. Significant achievements made over the last eighteen months include:
- A total of 8 council facilities that provide catering have achieved a Healthy Options Award. This includes Normanby Hall and The Civic Centre who have achieved Gold, the only two venues across North Lincolnshire to receive this accolade.
  - An additional 21 private businesses have or are currently engaged in improving their healthy food choices, including TATA Steel who were supported to develop new canteen provision and healthy options for employees.
  - In partnership with the People directorate, health trainers and the school sport network, a total of 105 North Lincolnshire's families have been supported to achieve and sustain a healthy weight.
  - A total of 30 local schools were supported to develop innovative and bespoke healthy lifestyle projects for children, young people and families.
  - A unique healthy lifestyle programme for pre and post-natal women has been established which will promote and engage families in our most deprived areas.
  - The successful creation and development of a BME healthy eating group with currently 40 members in Crosby.

### **3. OPTIONS FOR CONSIDERATION**

- 3.1 The option presented for consideration is for Cabinet to confirm their support for the revised strategy, and the work that is required by a wide range of partners.

#### **4. ANALYSIS OF OPTIONS**

- 4.1 Taking this strategy and action plan forward will ensure a continuing focus on work to address the problem of obesity in North Lincolnshire. The updated strategy continues to respond positively to current local and national priorities and uses best practice based on available evidence.
- 4.2 The strategy is a dynamic working document and therefore subject to improvement and revision as a result of emerging evidence of good practice, or availability of resources.

#### **5. RESOURCE IMPLICATIONS (FINANCIAL, STAFFING, PROPERTY, IT)**

- 5.1 Financial – most if not all of the activities that will form part of the overall strategy are funded by the various contributing partners. Any changes in funding would be reflected in the extent of future activity.
- 5.2 Staffing – all staff involved in delivering aspects of the strategy are employed by the various partners and delivery forms part of their overall job function.

#### **6. OUTCOMES OF INTERGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

- 6.1 An integrated Impact Assessment highlights the adverse risks to the health of the local population and potential increased health care costs if obesity continues to rise.

#### **7. OUTCOMES OF CONSULTATION AND CONFLICTS OF INTEREST DECLARED**

- 7.1 Key partners and other stakeholders were consulted on the draft strategy. The strategy was amended to take account of any comments received.

#### **8. RECOMMENDATION**

- 8.1 That Cabinet confirms their support for the Change4Life strategy 2013/18 and the associated action plan attached as an appendix to this paper.
- 8.2 That as the strategy and action plan is further developed in the future reports are presented to the relevant Cabinet Member(s) for endorsement.

**DIRECTOR OF PLACES  
DIRECTOR OF PUBLIC HEALTH**

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### **Background Papers used in the preparation of this report**

- Local Government Association Paper “Tackling Obesity – Local Government’s new public health role”, published in February 2013.
- Report to the Cabinet of 6 June 2006, titled; “Obesity Strategy for North Lincolnshire”
- Report to Cabinet of 22 April 2009, titled; “North Lincolnshire Healthy Weight Strategy”

**North Lincolnshire**  
**Change4Life Strategy and**  
**Action Plan**

**2013-2018**

## 1. Introduction

1.1 North Lincolnshire's Change4Life Strategy (2013-18) is the second joint obesity strategy and action plan for the prevention and universal treatment of overweight and obesity in North Lincolnshire. This refreshed strategy and action plan builds on the previous North Lincolnshire Healthy Weight, Healthy Lives strategy (2009-11), which demonstrated a firm commitment from local partners to tackling obesity at a local level.

1.2 Our local ambition for North Lincolnshire –

To prevent, halt and reduce the levels of overweight and obese adults and children in North Lincolnshire and empower individuals and communities to achieve and sustain a healthy weight”

This matters as overweight and obesity places a significant health and financial burden on individuals and society as a whole.

1.3 Our local strategic direction is based on national policy drivers and recommendations as set out in 'Healthy Weight, Healthy Lives' (2008) a cross-government strategy for England. This national guidance is instrumental in supporting local authorities; commissioners and policy makers to develop locally agreed actions for tackling obesity. The accompanying action plan has been developed to stimulate co-ordinated, facilitated and sustainable change in tackling obesity.

1.4 Implementing evidence-based interventions is centred on five key themes set out in the cross-government strategy. A whole population approach is balanced with identifying and supporting individuals at risk from becoming overweight or obese, mainly children and young people under 11yrs old. The five themes are -

- Healthy growth, Healthy Weight
- Promoting healthier food choices
- Building physical activity into our daily lives
- Creating incentives for better health
- Personalised advice and support for overweight and obesity

1.5 Overall governance and leadership arrangements for North Lincolnshire's Change4Life strategy will sit within the North Lincolnshire Obesity Steering Group. This strategic and multi-partnership group will develop, monitor and evaluate the action plan over the 3-year period (2013-2018).

1.6 To ensure opportunities for effective joint working and service planning are maximised, NL Change4Life Strategy complements and is completed by a range of local policies and strategies.

## **2. The North Lincolnshire Ambition**

### *2.1 Our local ambition –*

In line with the national focus our local ambition is to -

“To prevent, halt and reduce the levels of overweight and obese adults and children in North Lincolnshire and empower individuals and communities to achieve and sustain a healthy weight”.

This is an ambitious goal, but achievable if North Lincolnshire works in partnership to encourage, support and facilitate people to live healthy lives. Achieving and sustaining a healthy weight must be the responsibility of the individual first and foremost however the health of our communities is ‘everybody’s business’ (Healthy People, Healthy lives, 2010) and therefore an effective partnership approach across all sectors is required to achieve efficient and sustainable outcomes.

### *2.1 Our strategic aims for North Lincolnshire –*

Directing our ambition, are three guiding strategic aims that will guide action in North Lincolnshire

- Invest in obesity prevention: Increase capacity of interventions that guide and support adults and children in making healthy choices related to food, physical activity, leisure, transport and the environment,
- Tackle the obesogenic environment: Encourage an environment and culture that supports active lives with more active travel options, and enables people to eat a healthy balanced diet.
- Invest in obesity treatment: Increase the range of treatment services available to overweight and obese adults and children across North Lincolnshire.

## **2. Overweight and Obesity – The Public Health Problem**

### *2.1. Prevalence -*

The international and national increase in the prevalence of populations that are overweight or obese has generated a ‘wicked problem’ for health and medical practitioners, who attempt to deal with this ‘complex and intractable’ public health challenge (1). The increasing rise in the proportion of individuals with an elevated body-mass index (BMI) of 25-29.9 kg/m<sup>2</sup> (overweight) or BMI ≥30 kg/m<sup>2</sup> (obese), has reached pandemic levels with an estimated 2 billion adults and 170 million children (aged <18 years) either overweight or obese across the world (2).

North Lincolnshire (NL) situated in the Yorkshire and Humber region of England, is broadly experiencing higher than national average obesity rates for both adults and

children (3) and critically this is predicted to rise by 50% by 2050 (4), if local effective action isn't undertaken.

**Figure 1 – England V's North Lincolnshire – Obesity prevalence comparison**

	Adults	Children (4-5yrs)		Children (10-11yrs)	
	Obese %	Overweight %	Obese %	Overweight %	Obese %
England	24.2	13.2	9.4	14.4	19
Yorkshire and Humber	26%	14.7	9.5	14.2	17.7
North Lincolnshire	29.1	15.8	8	15.8	20.2

Source: The Health and Social Care Information Centre, Lifestyle Statistics / Department of Health Obesity Team NCMP Dataset (2011/2012)

## 2.2 Obesity and Health Risks

The following are extracted from Healthy Weight, Healthy Lives: A toolkit for developing local strategies (2008) -

Obesity is a leading cause of preventable illness, disability and premature death in the UK. An individual, who is overweight or obese, is at greater risk of developing a wide range of health conditions and the risk proportionately elevates as a person's Body Mass Index (BMI) increases.

In addition research indicates that life expectancy is reduced on average by 3 years for a person who has a BMI of 30-35 kg/m<sup>2</sup>, while a BMI of 40-50 kg/m<sup>2</sup> reduces a person's life expectancy by 8-10 years. This substantial reduction in life expectancy is comparable to the effects of lifelong smoking (Wang et al, 2011).

### **Obesity Key Health Facts**

(The following are extracted from Healthy Weight, Healthy Lives: A toolkit for developing local strategies).

- Overweight and obesity increase the risk of a wide range of diseases and illnesses, including coronary heart disease and stroke, type 2 diabetes, high blood pressure, metabolic syndrome, Osteoarthritis and cancer.
- Obesity increases the risk of colon cancer by nearly three times in both men and women.
- Obese people have a five-fold risk of hypertension compared with non-obese people, among those aged under 50 years, there is 2.4-fold increase in risk of coronary heart disease in obese women compared with non-obese women, and a 2-fold increase in risk in obese men compared with non-obese men.
- It has been reported that 10-20% of obese children and over 75% of obese adults have been diagnosed with non-alcoholic fatty liver disease.
- Among older people, the risk of disability attributable to Osteoarthritis (frequently associated with increasing body weight) is equal to the risk of disability attributable to heart disease, and is greater than for any other medical disorder of the elderly.
- In adults and children the consequences of overweight and obesity have led to increased rates of depression, anxiety and decreases in self-esteem and confidence
- Obesity in pregnancy is associated with increased rates of complications for both mother and baby.

### *2.3 Financial burden of obesity -*

The increasing prevalence of obesity and the resulting health impact for individuals and society as a whole has placed a substantial financial burden on both our national health system and the wider economy. In the UK, the NHS spent £4.2 billion on health care costs associated with overweight and obesity. On a local level North Lincolnshire is experiencing increasing health care costs for preventing and treating obesity with £43.6 million being in 2010 and estimations show this figure is set to rise to £46.6 million by 2015.

In addition to direct costs associated with health care provision, wider indirect costs to both the economy and society are evidenced (Finkelstein et al, 2010). Examples of this include an increase in workplace sickness absence, reductions in productivity and substantial rises in expenditure associated with disability benefits and pensions. The Foresight report in 2007, estimated that indirect costs nationally have already reached in the region of £16 billion and that this will rise to £50 billion per year by 2050 if action is not taken.

### *2.4 Causes of overweight and obesity -*

Excess weight is caused by an energy imbalance between what is consumed through eating and drinking 'energy in' and what is expended by the body 'energy out', including that used through physical activity (HWHL, 2008). However this simplistic view fails to take into account the complexity of how we acquire and use energy. The Foresight report (2007) produced the 'Obesity Systems Map' (Appendix A) which illustrates the "complex web of societal and biological factors that have, in recent decades, exposed our inherent human vulnerability to weight gain".

With seven cross-cutting themes, The Obesity Systems Map, identifies broad factors including culture, food/physical environment and individual psychology as determinants to an individual's energy balance. Fundamentally at a local, national and international level obesity policy and action needs to be centred on the "need to tackle diet and lack of physical activity", along with the "inappropriate social structures framing what people eat and what they do" (Lang and Rayner, 2007).

## **3. Translating National Policy into Local action**

### *3.1 National policy drivers -*

The Foresight report (2007), 'Tackling Obesities: Future Choices' commissioned by the UK government utilised scientific evidence, commissioned research and expert advice on obesity to identify and present practical responses for change. In response, Healthy Weight, Healthy Lives: A Cross Government Strategy for England (2008), outlined a clear ambition of becoming the first major nation to reverse the rising trend of overweight and obesity in the population by ensuring that everyone is able to achieve and maintain a healthy weight (HWHL, 2008).

‘Obesity – a call to action’ published in 2011, forms part of recent NHS Health and Social Care reforms outlined in Healthy Lives, Healthy People – our strategy for public health in

England (2010). Fundamentally this document, states a continued and ‘energised’ effort to tackling obesity including greater and more robust data monitoring systems, population-wide interventions and a renewed emphasis that obesity is ‘everybody’s business’. By increasing the role that local authorities play in improving the health of its communities, the aim is that the wider determinants and enablers of obesity can be addressed and impacted upon.

### **Life Course Approach**

The Marmot Review (2008), highlighted the importance of addressing the issue of obesity across the life course. This approach aims to address the wider factors that affect people at different stages and key transition points in their lives. The life stages are an important consideration to the improvement of current health inequalities ensuring a healthier quality of life for all people from birth to death.

Our local Change4Life strategy will feed into the overarching North Lincolnshire Health and Well-being strategy. This identifies five key life stages for individuals living in North Lincolnshire and these stages will inform and shape local obesity action, interventions and activities (See figure 2).

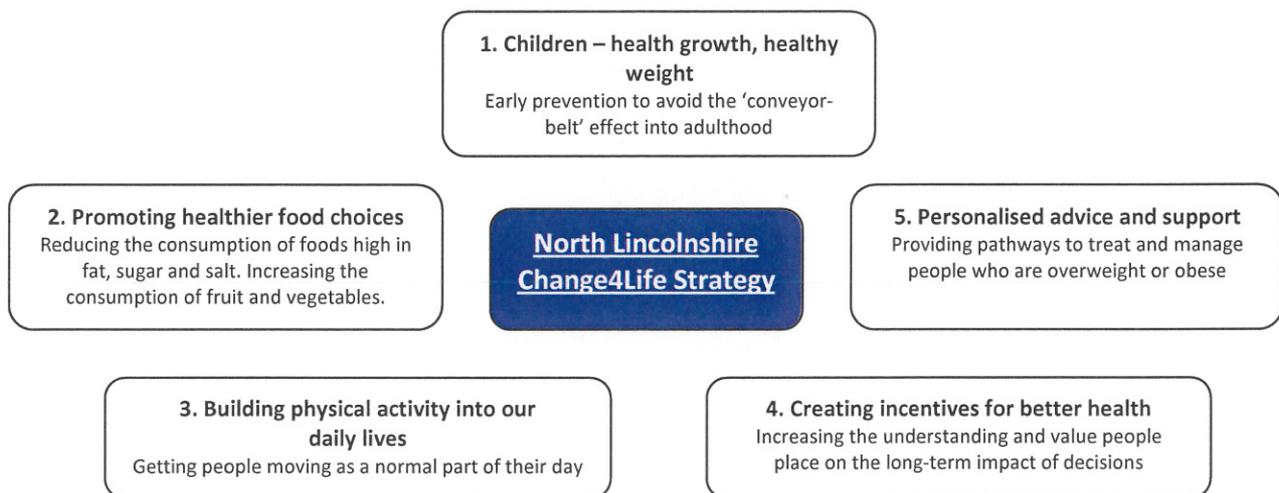
Figure 2 – Obesity and The Five Life Stages

	<b>Starting Well (0-5yrs)</b>	<b>Growing Well (6-17yrs)</b>	<b>Living Well (18-64yrs)</b>	<b>Ageing Well (65+ yrs)</b>	<b>Dying Well (End of life)</b>
<i>Obesity Actions, Interventions and Activities</i>	E.g.  Breastfeeding promotion  NCMP collection and referral  Start 4 Life  Children centre health promotion activities	E.g.  School sport partnership  Schools catering and healthy pack lunch policy  Active school transport  Commissioned childhood obesity programmes	E.g.  Healthy Options awards  Active travel plans  Community physical activity initiatives  Workplace health  Commissioned weight management programmes	E.g.  Physical activity initiatives – Walking the Way to Health  Provision of specialised programmes  Catering/food provision for older adults	E.g.  Uptake of healthy lifestyle leads to longer life expectancy and longer healthy life expectancy

### 3.2 Delivering North Lincolnshire's Ambition

Action in North Lincolnshire in order to achieve ambition will be based on the five main themes (see figure 3) set out in HWHL (2008).

Figure 3 – Delivering our ambition -



Action to tackle obesity during 2008-2011 in North Lincolnshire led to a variety of local activities, interventions and programmes being developed and delivered. This work will lay the foundations for achieving our renewed local ambition. Achieving this ambition will be challenging and cannot rest with one partner. Engagement with our partners and stakeholders in both the public, private and voluntary/community sector is continually required in order to develop and deliver on outcome focused and locally agreed actions.

### 3.3 Identifying priority groups

On a national and local level we must ensure that there is adequate provision of universal preventative approaches through to targeted interventions for those that are already overweight or obese right across people's life course. However, we must also focus on preconception to early years interventions, as these are the times in people's lives where their biology is 'programmed' to be less obese in the future.

The main priority groups for North Lincolnshire are -

- **Children from low-income families** – there is a correlation between low income and a greater risk of obesity in childhood as well as adulthood.
- **Children from families with at least one obese parent** – the increased risk may be due to genetic and environmental factors.

- **Ethnic groups with a higher than average prevalence of obesity** - particularly Black African women, Black Caribbean women, Pakistani women, Black Caribbean men, Irish men.
- **People who have a physical or learning disability** – particularly in terms of mobility, which makes exercise difficult.
- **Older People** – increasing age is associated with increasing prevalence of obesity up to 64 years, and then a decline in the prevalence begins.
- **People who have recently stopped smoking** - people who stop smoking are prone to weight gain as nicotine suppresses people’s natural appetite and increases metabolism. There is also a tendency to replace cigarettes with snacks and sweets.

### *3.3 Local Leadership*

Strong and effective leadership from the North Lincolnshire Obesity Steering Group will be essential in governing and directing the tackling obesity agenda. This strategic group with multi-partner representation will be instrumental in developing, monitoring and evaluating the 3 Year Action Plan. A significant role of the group will be in building knowledge about the problem at a local level. By accessing and analysing a range of national and local data sources and profiles relevant to North Lincolnshire e.g. National Child Measurement Programme, Health Survey for England, Transport surveys, a greater understanding about our populations needs can be achieved. The ability to respond flexibly to emerging research and developing trends will strengthen the long-term effectiveness and sustainability of The North Lincolnshire Change4Life Strategy and Action Plan.

### *3.4 Funding and resources*

To deliver North Lincolnshire Change4Life strategy and Action plan (2012-2015), there will be a need to harness current and future resources in order to fund future essential activities and interventions. This will require both the redirection of existing resources and/or an increase in funding for both new and existing prevention and treatment programmes. With limited resources and capacity, and with such a wide range of possible initiatives and interventions, in terms of prevention, treatment and management, decisions have to be made about where to focus efforts. A balance must be found between a whole–population approach and an ‘individuals at–risk’ approach.

### *3.5 Communication and social marketing -*

At the core of effective health improvement practices is the ability to facilitate communication between all stakeholders including local communities. Raising the awareness of the significant impact of overweight and obesity and disseminating

consistent messages about what constitutes a healthy weight will be vital in encouraging well-informed lifestyle changes. In order for this process to happen, local capacity needs to be built and developed, enabling communication to be maximised across North Lincolnshire’s communities. Training for those in public facing roles as staff or volunteers will enable members of the public to be effectively referred to services and activities that suit their needs.

In addition specific activities aimed at changing families' attitudes and behaviours will be implemented by utilising the Change4Life (C4L) approach. Change4Life is an initiative supported by the Department of Health, which brings the public, private and voluntary/community sectors together, with the shared aims of improving children's and families' diets and physical activity levels. As a result this strategy and accompanying action plan are aligned to C4L in order to support this national and recognisable movement.

#### 4. Obesity – linking to local ambitions

NL Change4Life strategy and action plan complements and is complemented by a range of local strategies, policies and overarching ambitions. The North Lincolnshire Obesity Steering group will ensure that local strategies and respective partners are fully represented in future actions. In addition active participation in various local steering/partnership groups will ensure that obesity remains firmly reflected in the below documentation -

- North Lincolnshire Joint Strategic Needs Assessment
- North Lincolnshire Cardiovascular disease strategy
- Children and Young People's Plan
- Breastfeeding strategy
- Physical activity and play strategies
- Local Transport Plan
- North Lincolnshire School Sport Network

#### 5. Conclusion

We have set ourselves a challenging ambition but it is achievable if we recognise and support the desire of many people to live healthy lives. Maintaining a healthy weight must be the responsibility of individuals first, but it is our role to make sure those individuals and families have access to the opportunities, information and services they want in order to make healthy choices and support healthier lifestyles.

## North Lincolnshire – Change4Life Action Plan (2013-2018)

<b>Theme 1 – Children - Healthy Weight, Healthy Growth</b>						
<i>Aim - To ensure that children are given the healthiest possible start in life, through working with families and carers in promoting healthy lifestyles before, during and after birth</i>						
	<b>Outcome</b>	<b>Actions</b>	<b>Outcome Measures</b>	<b>Target</b>	<b>Progress</b>	<b>Lead/Partners</b>
1	<b>As many mothers breastfeeding up to 6 months as possible</b>	<ul style="list-style-type: none"> <li>Proactively support the implementation of the Breast Feeding Strategy and Action Plan including support of the BABES programme and UNICEF Baby Friendly Initiative</li> </ul>	<ul style="list-style-type: none"> <li>% Of women breastfeeding</li> </ul>	Ongoing (Quarterly reviews)	OSG representation expanded to include feedback by leads/partners	<ul style="list-style-type: none"> <li>LA HI</li> <li>Public Health</li> <li>Midwives</li> <li>Health visitors</li> <li>BABES</li> </ul>
2	<b>Parents/carers have access to information and advice about healthy weight including healthy weaning and feeding of their young children</b>	<ul style="list-style-type: none"> <li>Support the sustainability of the Healthy Start and Start4Life programmes</li> <li>Ensure the delivery of the elements of the school based 5-19 Healthy Child programme that relate to achieving/maintaining a healthy weight</li> <li>Provide training for front line staff working with families and children to ensure the consistency and accuracy of messages about achieving and maintaining a healthy weight.</li> <li>Develop and co-ordinate preventative health activities in early years settings that promote the adoption of healthy eating and active living e.g. Cook and eat sessions, family activity programmes.</li> </ul>	<ul style="list-style-type: none"> <li>% Uptake of Healthy Start vouchers</li> <li>Number of families accessing Start4Life information</li> <li>Number of professional training sessions provided and changes in self-reported knowledge/skill base</li> <li>Number of families engaged and type of activities provided</li> </ul>	Ongoing (Quarterly reviews) As above	OSG representation expanded to include feedback by leads/partners  HC Cascade training undertaken – delivery to commence mid to late 2013  Will form part of the Obesity pathway redevelopment	<ul style="list-style-type: none"> <li>LA HI</li> <li>NLAG - Health visitors, School nurses</li> <li>Children services</li> <li>Schools</li> <li>Public Health</li> </ul>
3	<b>Settings for early years, children and young people are engaged in the Healthy Weight agenda</b>	<ul style="list-style-type: none"> <li>Develop The North Lincolnshire Healthy Settings Programme in partnership with children's centres, schools and colleges, utilizing localised health data to improve policies and practice that feed the healthy weight agenda.</li> </ul>	<ul style="list-style-type: none"> <li>Number of organisations engaged in Healthy Settings</li> <li>% NCMP participation</li> </ul>	Ongoing (Quarterly reviews)	30 Schools accessed Healthy Settings funding – evaluation due by Sept 2013	<ul style="list-style-type: none"> <li>LA HI</li> <li>Public Health</li> <li>Schools</li> <li>Colleges</li> <li>Children Services</li> <li>NLAG - School</li> </ul>

	<ul style="list-style-type: none"> <li>Proactively support the local approach to increasing NCMP participation in schools. Identify opportunities for expanding capacity to include targeted feedback and advice to parents with children who are identified as overweight or obese</li> </ul>	rate	Ongoing (Quarterly reviews)	NCMP for 4-5yrs higher than Nat.av at (96.9%), 10-11yrs below Nat.av at (86.1%)	Nurses
	Number of families engaged with during NCMP results dissemination				

### Theme 2 - Promoting Healthier Food Choices

*Aim - To make healthy eating easy, accessible and enjoyable, so that it becomes a natural way of life for everyone who lives, works and goes to school in North Lincolnshire*

	Outcome	Actions	Outcome Measures	Target	Progress	Lead/partners
1	People in North Lincolnshire have a greater awareness and understanding about Healthy Eating and are able and confident to access Healthy options.	<ul style="list-style-type: none"> <li>Promote and adopt systematic and industrial scale use of the Change4Life and its food/nutrition related sub-brands.</li> <li>Cascade healthy eating promotion material and resources from Change4Life and other credible sources to public, private and voluntary/community sector organisations.</li> <li>Ensure Change4Life messages are embedded in all front-line staff training and commissioned healthy choice activities.</li> <li>Increase the number of public, private and voluntary sector catering outlets and food retailers engaged in promoting healthier choices including the adoption of the Healthy Options Award.</li> </ul>	<p>Amount/types resources distributed</p> <p>Number of media campaigns, press releases and articles published</p> <p>Training materials developed and delivered</p> <p>Number of organisations with Healthy Option Awards</p>	<p>Ongoing (Quarterly reviews)</p> <p>As above</p> <p>Dec 2013</p> <p>By Dec 2013 – An additional 25 outlets</p>	<p>Distributing materials through Healthy workplace award, schools and partner organisations.</p> <p>C4L embedded in HC training (commence late 2013)</p> <p>Initial discussions with Food Safety and 5 businesses</p>	<p>- LA HI</p> <p>- Public Health and community sector organisations</p> <p>- Private businesses</p> <p>- North Lincolnshire Council catering</p>
2	Individuals, families and work places across North Lincolnshire have access to healthy eating and cooking activities	<ul style="list-style-type: none"> <li>Identify investment opportunities for delivering a large programme of cook and eat well projects in communities, schools and workplace across all 5 localities.</li> <li>Identify provision for developing healthy eating training in</li> </ul>	<p>Number of projects and activities delivered</p> <p>Number of training workshops provided</p>	<p>By Mar 2014</p> <p>As above</p>	<p>Will form part of the Obesity pathway redevelopment</p> <p>As above</p>	<p>- LA HI</p> <p>- Public Health</p> <p>- Schools</p> <p>- Childrens Services</p> <p>- Community and</p>

3	<p><b>All children and young people in early years settings, schools and colleges are able and supported to choose healthy eating options</b></p>	<p>schools, children centres, community and workplace settings in order to increase capacity and sustainability of delivery</p> <ul style="list-style-type: none"> <li>Develop partnership relationship with schools catering and individual schools/colleges to embed healthy eating policies and promotions across the board (i.e. cooked meals, lunch boxes, snacks and breakfast clubs).</li> <li>Create and promote Healthy Pack-up guidance for all schools in North Lincolnshire, supporting schools in its engagement with families</li> <li>Increase and maintain the uptake of school meals across all localities for all ages, encouraging policies that retain students within school during lunch/break times</li> </ul>	<p>Number of schools engaged</p> <p>Policies developed and influenced</p> <p>Number of schools promoting guidance</p> <p>% of children having school meals</p>	<p>Ongoing (Quarterly reviews)</p> <p>Mar 2013</p> <p>Ongoing (Quarterly reviews)</p>	<p>Discussions with Schools Catering about maximising healthy eating agenda</p> <p>Built into commissioned activity</p> <p>63 Primary schools (46.2% uptake)</p> <p>9 Secondary schools (35% uptake)</p>	<p>Private sector organisations</p> <ul style="list-style-type: none"> <li>Schools catering and external catering suppliers</li> <li>Early years settings, schools and colleges</li> </ul>
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**Theme 3 - Building physical activity into our daily lives**

1	<p><b>Outcome</b></p> <p><b>More people, more active and more often in North Lincolnshire</b></p>	<p><b>Aim</b> - To increase levels of activity for all our population, by ensuring that enjoyable and accessible physical activity is available for everyone</p> <p><b>[Note - actions in this section are also represented in the Physical Activity Strategy – ‘Active Choices, Active Futures’]</b></p> <ul style="list-style-type: none"> <li>Promote and adopt systematic and industrial scale use of the Change4Life and its physical activity related sub-brands including cascading resources to public, private and voluntary/community sector organisations</li> <li>Support the development of sport, play and community recreation across all 5 localities including identifying opportunities for joint working and new approaches to increasing participation</li> </ul>	<p><b>Actions</b></p>	<p><b>Outcome Measures</b></p> <p>Scale of distribution for resources</p> <p>Number of projects/programmes jointly developed</p> <p>Activities jointly initiated or developed within schools or out of</p>	<p><b>Target</b></p> <p>Ongoing (Quarterly reviews)</p> <p>Ongoing (Quarterly reviews)</p>	<p><b>Progress</b></p> <p>Distributing materials through Healthy workplace award, schools and partners.</p> <p>Start4Life project and constant representation on the OSG to report activity</p>	<p><b>Lead/partners</b></p> <ul style="list-style-type: none"> <li>LA HI</li> <li>Public Health</li> <li>School Sport partnership</li> <li>Public, private and community voluntary sector organisations and departments including leisure services, transport, NGB's</li> </ul>
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	<ul style="list-style-type: none"> <li>• Collaborative working with School Sport Partnerships to develop activity programmes in all schools to promote healthy, active lifestyles</li> <li>• Explore mechanisms that lead to an increase in availability of access to and affordability of systems that support increased activity (transport, vouchers, free swimming etc).</li> </ul>	<p>school settings</p> <p>Development of new referral pathways, access schemes</p> <p>% Participation rates for adults and children/young people</p>	<p>Monthly reviews</p> <p>Ongoing (Quarterly reviews)</p>	<p>Expansive programme of activities</p> <p>Get Going – Leisure Services partnership with free leisure cards to Get Going families</p>	
2	<p><b>Support the development of local planning policies to promote the creation of health enhancing environments</b></p>	<p>Steering groups attended</p> <p>Obesity agenda within policy documentation.</p> <p>Number of new green spaces and outside exercise facilities</p>	<p>Ongoing (Quarterly reviews)</p>	<p>Representation of activities in C4L newsletter, OSG representation</p>	<p>- NLC – Highways, transport, environment, walking/cycling, WTWTH</p>
3	<p><b>Active travel and transport are promoted and embedded into schools and workplace policies</b></p>	<p>Number of schools and workplaces engaged</p> <p>Policies developed and influenced</p> <p>Number of schools promoting guidance</p>	<p>Ongoing (Academic School year review)</p> <p>Each workplaces assessed at Bronze, Silver and Gold</p>	<p>All workplaces engaged provided with support documents and assessed</p>	<p>- Schools, schools transport</p> <p>- All sector workplaces</p>

**Theme 4 - Creating incentives for better health**

*Aim –Engaging with workforces to encourage the provision of healthy eating choices and opportunities for physical activity*

Outcome	Actions	Outcome Measures	Target	Progress	Lead/ Partners
<p>1 Workplaces in North Lincolnshire are aware and actively promoting the healthy weight agenda to their workforces</p>	<ul style="list-style-type: none"> <li>Ensure public, private and voluntary/community sector organisations are able to access and disseminate relevant literature and promotional resources to their workforces e.g. Change4Life, BHF, DoH</li> <li>Promote and support the North Lincolnshire Healthy Workplace programme through assisting organisations to introduce and develop policies that encourage physical activity and healthy eating</li> </ul>	<p>Number of workplaces engaged</p> <p>Scale of resource distribution</p> <p>Number/type of Healthy workplace awards</p> <p>Activities developed/delivered in workplace settings</p>	<p>Ongoing (Quarterly reviews)</p> <p>By Dec 2013, support 15 local businesses</p>	<p>NLC website utilised to promote C4L, BHF. Partners provided with information sources</p> <p>Meeting established (June 2013) with workplace health lead to identify workplaces</p>	<p>- LA HI</p> <p>- Public Health</p> <p>- All sector workplaces</p>
<p>2 Explore ways of linking local workplace health schemes to incentivise healthy behaviours</p>	<ul style="list-style-type: none"> <li>In partnership with employers, devise and develop pilots and sustainable interventions that incentivize healthy behaviours e.g. Free or subsidised fruit schemes, physical activity sessions, health checks</li> <li>Establish pilot weight management programmes based on-site in order to improve accessibility and uptake in the workplace</li> <li>Research feasibility of a range of different approaches to using personal financial incentives to encourage healthy living, such as individuals losing weight and sustaining weight</li> <li>Investigate the feasibility of a corporate Challenge between local employers.</li> </ul>	<p>Number of interventions in operation</p> <p>% Participation rates of activities</p> <p>Knowledge, behaviour and skill increase</p> <p>Uptake of incentives</p> <p>Number of inter-workplace activities</p>	<p>By Mar 2014, establish healthy weight agenda throughout all Workplace Health activity and assessment</p>	<p>Meeting established (June 2013) with workplace health lead to identify workplaces and to take this work forward</p>	<p>- LA HI</p> <p>- Public Health</p> <p>- All sector workplaces</p> <p>- DoH</p> <p>- BHF Workplace support</p>

<p>3 Obesity is 'Everybody's business in North Lincolnshire'.</p>	<ul style="list-style-type: none"> <li>Deliver brief intervention training for those in public facing roles across all sectors that are potentially able to cascade guidance and information about healthy eating, physical activity and relevant services.</li> </ul>	<p>Number of available trainers</p> <p>Number of training sessions held</p> <p>Number of participants/</p> <p>Number of referrals</p>	<p>By Dec 2013 deliver 4 training sessions to a total of 40 (min)</p>	<p>HC Cascade training undertaken – delivery to commence mid to late 2013</p>	<p>- LA HI</p> <p>- Public Health</p> <p>- All sector workplaces</p> <p>- Healthy Chat</p>
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**Theme 5 – Personalised advice and support**

<p><i>Aim – Provide targeted advice and support to individuals and communities to help them maintain a healthy weight, by developing appropriate referral pathways and providing relevant information</i></p>						
	Outcome	Actions	Outcome Measures	Target	Progress	Lead/Partners
<p>1 Individuals in North Lincolnshire have easy access to information and advice on healthy eating and physical activity that is clear, consistent and personal to them.</p>	<ul style="list-style-type: none"> <li>Health Trainer service to provide healthy eating and physical activity messages, along with specific activities/resources to support individuals and groups in adopting healthy behaviours</li> <li>Capture opportunities for personalised weight management discussions and obesity care through NHS Health Checks including signposting to relevant services</li> <li>Ensure front line staff in clinical and community health settings have the knowledge and skills to identify, support and refer people who are overweight or obese</li> </ul>	<p>Number of Health Trainer clients, activities related to obesity agenda</p> <p>Number of NHS Health Check referrals</p> <p>Training sessions delivered, number of participants</p> <p>Participation rates of Well point units</p>	<p>Consultation event required by Sept 2013 with partners and stakeholders</p> <p>By April 2014, Obesity Pathway designed and redeveloped.</p> <p>Services commissioned and ready to provide by Mar 2014</p>	<p>Initial meetings undertaken with providers, NLC procurement and commissioning teams</p> <p>Performance management procedures in place for existing providers</p>	<p>- LA HI</p> <p>- Public Health</p> <p>- NLAG</p> <p>- CCG</p>	
<p>2 Individuals in North</p>	<ul style="list-style-type: none"> <li>Continuously review evidence base for effective</li> </ul>	<p>Service specifications</p>	<p>Consultation</p>	<p>Initial meetings</p>	<p>- LA HI</p>	

<p>Lincolnshire who are overweight or obese will be able to access commissioned services that are tailored to help them achieve and sustain a healthy weight.</p>	<p>interventions and conduct a health needs assessment for obesity, identifying existing inequities in service provision</p> <ul style="list-style-type: none"> <li>• Commissioning a range of multi-disciplinary weight management services for children and families to enable effective best value service models to be developed.</li> <li>• Research and identify potential provision options for specific populations including – <ul style="list-style-type: none"> <li>- Children and young people aged between 13-17yrs old</li> <li>- Women who are pregnant and overweight or obese</li> <li>- Individuals with physical and/or learning disabilities</li> <li>- Individuals who have mental health needs</li> </ul> </li> <li>• Create provision for increased choice of exercise/physical activity solutions for people who are overweight or obese including the implementation of exercise referral schemes (in line with NICE recommendations)</li> <li>• Strengthen current and prospective referral pathways from school nurses, GP's, practice nurses, health visitors and dieticians into commissioned childhood obesity programmes</li> </ul>	<p>developed</p> <p>Services commissioned</p> <p>Number of participations accessing commissioned services</p> <p>Specialist services/activities developed</p> <p>Partnerships developed and steering groups attended</p> <p>Policies influenced</p> <p>Referral rates</p> <p>Identified pathways in place</p>	<p>event required by Sept 2013 with partners and stakeholders</p> <p>By April 2014, Obesity Pathway designed and redeveloped.</p> <p>Services commissioned and ready to provide by Mar 2014</p>	<p>undertaken with providers, NLC procurement and commissioning teams</p> <p>Performance management procedures in place for existing providers</p>	<ul style="list-style-type: none"> <li>- Public Health</li> <li>- CCG</li> <li>- Provider services</li> <li>- DoH</li> <li>- NOO</li> <li>- NICE</li> <li>- Early years settings, Schools, colleges</li> <li>- NLAG</li> <li>- GP's</li> </ul>
<p>3 Identify opportunities for joined up working across CVD risk factors, creating appropriate referral pathways.</p>	<ul style="list-style-type: none"> <li>• Develop partnerships with organisations/stakeholders involved in CVD reduction including Smoking, Alcohol leads/services</li> <li>• Support the development of jointly commissioned activities including physical activity provision for 12 week quits, weight management passes</li> </ul>	<p>Number of projects developed</p> <p>Partnerships developed</p>			<ul style="list-style-type: none"> <li>- LA HI</li> <li>- Public Health</li> <li>- CCG/GP's</li> <li>- Provider services</li> <li>- DoH</li> <li>- NOO</li> <li>- NICE</li> <li>- Early years settings</li> <li>- NLAG</li> </ul>