Health and Wellbeing Strategy Reporting Template Goal 5: Healthier for longer

Objective 5A: Reduce Obesity Increase the number of people in Thurrock who are a healthy weight

Goal Sponsor: Director of Public Health - Ian Wake

Objective Lead: Helen Horrocks

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Action	Outcome	Action lead	Link to outcome framework	Delivery Date	Progress Report	Reference to existing strategy or plan	
Development of a new	w Healthy Weight Strate	gy for Thurrock f	from April 20	17-March 202	21		
A. Review existing strategy and implementation and impact on obesity prevalence	Understand current status of delivery against the Thurrock Healthy Weight Strategy 2014-2017.	Sue Bradish		31 August 2016	Review complete as part of the Whole Systems Obesity JSNA under development.	Thurrock Healthy Weight Strategy 2014-2017	
B. Undertake Stakeholder Mapping Exercise	This analysis will help us understand key individuals to be engaged in Whole Systems Obesity, ensuring there are links across key agendas and outcomes.	Helen Horrocks / Sue Bradish		31 December 2016	 Completed stakeholder analysis. This will feed into strategy development. Tested and participated in a network analysis for Leeds Beckett University for the national WSO programme. Feedback awaited. 	Thurrock Healthy Weight Strategy 2014-2017	
C. Undertake a Whole Systems Obesity Joint Strategic Needs	Understand what the key components are in reducing the prevalence of obesity.	Helen Horrocks/Sue Bradish		31 March 2016	Ongoing – The whole systems obesity joint strategic needs assessment is now a large product of the joint strategic needs	Healthy Lives, Healthy People: A	

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Assessment	Understand what works and importantly what doesn't work or are barriers in achieving healthy diets and increases in physical activity.				assessments for Thurrock. It is anticipated that this will be complete by financial year end to inform the vision and strategy on Whole Systems Obesity.	call to action on obesity 2011 • Thurrock Healthy Weight Strategy 2014-2017	
D. Undertake engagement with key stakeholders and develop a core strategic group to undertake a self- assessment and strategy development	A cross-cutting key stakeholder group formed to develop, agree and implement the whole systems obesity strategy and action plan.	Helen Horrocks/ Sue Bradish		Ongoing	 This is an ongoing action, engagement is happening on a continual basis to maintain a dynamic approach as the current best practice identified by the national pilot project. Engagement and strong links made with Leeds Beckett University who are leading the national WSO commission with four pilot projects. Network analysis tested/undertaken with LBU – awaiting feedback. Strong links made with Planning and Regeneration. Ongoing work to strengthen links with Environment and Communitues. Core group is anticipated to meet 	 Healthy Lives, Healthy People: A call to action on obesity 2011 Making the case for Obesity, why invest? Public Health England, 2015 	

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						bi-annually in 2017 for focussed workshop on strategy and implementation.			
	Develop and sign off a Whole Systems Obesity Strategy	New Whole Systems Obesity Strategy in place with action plan to reduce prevalence of Obesity in Thurrock.	Helen Horrocks / Sue Bradish		31 July 2017	 WSO Strategy will set high level vision and strategy. This will enable action on obesity to be dynamic and responsive to local needs and changes. Delivery date extended due to wider focus on placemaking, and positive conversation and stakeholder engagement development. 	 Healthy Lives, Healthy People: A call to action on obesity 2011 Thurrock Healthy Weight Strategy 2014-2017 Making the case for Obesity, why invest? Public Health England, 2015 		
	Maximise the local	benefit of the national	y published Chil	dhood Obesi	ty Action Pla	in			
F.	Review the	Agreement to	Helen Horrocks	Link to	31	Review of actions required	Childhood		
1	published national childhood Obesity	implement recommendations	/ Elozona Umeh	outcome framework	September 2016	complete in September 2016. • Local recommendations to be	Obesity: A Plan for		

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	Action Plan and make recommendations for local action.	falling out of the national strategy ahead of the local strategy development. Maximise the benefit of the national strategy locally in Thurrock.			31 March 2017	taken to Children's DMT for agreement and implementation in February/March 2017.	Action	
	Implement the Daily Mile in Thurrock Primary Schools	40% of Primary Schools in Thurrock signed up to the Daily Mile.	Elozona Umeh/Aurelia Hayward		31 March 2017	32% of primary schools signed up to date.Ongoing signs up in progress.		
	Review and revise children's weight management and support as a part of the Brighter Futures – Healthy Families Service re-procurement.	Children's weight management support in line with NICE guidance and national best practice.	Elozona Umeh/Helen Horrocks/Sue Bradish		January 2017 April 2017	 Input to the new 0-19 service specification complete. Procurement of 0-19 service underway. Evaluation to be scheduled end of March 2017. 	NICE guidance	
		n adult weight managei		<i>r</i> ay				
	Develop a single point of access for healthy lifestyle services to incorporate community weight management provision.	Single point of access for lifestyle services, improving communications and ease of referral and self-referral. Increased uptake of a broad range of weight	Andrea Clement/Faith Stow		1 st April 2017	 New Adult Healthy Lifestyle Service went out to tender. Procurement now completed and new provider has been awarded. New service to start 1st April 2017. 		

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		management services.							
J.	Scorecard to be developed for GP Practices for obesity and overweight management and referral.	Adult obesity and weight management addressed as part of health care service and demand management and prevention agenda in primary care and health.	Emma Sanford		30th April 2017	This will now be progressed as part of the GP Scorecard project			
	Launch a care pathway for promotion and engagement with GP practices to ensure ongoing identification, support and referral	GP practices fully aware of care pathway for weight management and referrals being made to appropriate tiers as part of health improvement and demand management.	Faith Stow		1 st April 2017	 Care Pathway links developed between current Tier 2 and Tier 3 in 2016. The newly procured tier 2 weight management services as part of the adult healthy lifestyles service will be linked into tier 3 and tier 4 Adult Obesity Services and launched to GP practices on 1st April 2017. 	NICE guidance		
Ide		trategic opportunities to	o influence the o				,		
L.	Deliver a Planning and Health Summit to facilitate an ongoing engagement and conversation	 Re-established relationships between planning, regeneration, health and communities supporting and 	Kirsty Paul/Helen Horrocks	Link to outcome framework	September 2016	A South Essex Health, Well-being and Planning Summit was delivered on the 21st September 2016, and has had the following benefits and outcome: • Further engagement by the NHS in the planning agenda. • Strong links to external			

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between Planning and Health, with the aim of planning for Thurrock which will support an improvement in population health and well-being.	ongoing conversation to inform the local plan development.				 organisations in support of the place agenda. SportEngland input/review of in Purfleet Masterplan for active design principles. Active design workshop principles of workshop in the event has been used now in HPAG and a workshop on Tilbury masterplanning. PH to support the LP consultation engagement. Expressions of Interest submitted for two TCPA projects; 1) working with developers on building healthy places and 2) health infrastructure planning. This work will be carried into 2017/18. 		
M. An Active Place strategy will be produced and implementation to increase the proportion of people being physical active and reduce inactivity in Thurrock.	This strategy will inform the local plan, delivering key strategic infrastructure recommendations which will support an increase in participation in sport, leisure and physical activity in	Sean Nethercott/Rob Cotter		July 2017	 Initial need assessments have been completed for 3 of the 4 areas (active travel outstanding) and work is underway in pulling together and tying in the overall strategy document 		

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Four key strategies will be produced from the Active Place workstream, including: Indoor Sport and Leisure Facilities, Playing Pitch Strategy, Green and Open Space Strategy and an Active Travel Strategy N. Explore the opportunity to	Leisure opportunities	Governance		To be confirmed	Discussions regarding the potential creation of a riverfront walk/cycleway	Cabinet report
create a riverfront walk/cycleway along the Thames	created, linking key strategic points of interest, to support increases in physical activity.	structures being defined, lead will be identified by June 17		Committee	have taken place between colleagues in Public Health, Regeneration, Planning and Transportation but these are still explorative and no decision has been as of yet on the necessity and practicality of creating a riverfront walk/cycleway. Meeting with Natural England scheduled to discuss England Coast Path.	Infrastructure Requirement List Cycle Infrastructure Delivery Plan Active Place Strategy (emerging)
O. Review and update the Infrastructure Requirement List to ensure that the	 More effective use of planning obligations Additional investment for 	Kirsty Paul – Principal Planning Officer		Ongoing	The IRL is a living document projects on the list are reviewed at key stages and new projects can be included at any time. Projects to be proposed will look to	Infrastructure Requirement List

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impacts of new development are appropriately mitigated	infrastructure projects that seek to improve outdoor spaces and leisure facilities • Additional investment for infrastructure projects that seek to facilitate active travel modes				support healthier environments, which will have dual focus on health weight environments, physical activity, mental health and air quality.			
P. Undertake a comprehensive audit and needs assessment for open spaces and play areas in the borough (Active Place Strategy)	 Identify key projects for future investment Inform policies in the emerging Local Plan 	Kirsty Paul – Principal Planning Officer		December 2016	A draft report setting out an audit of existing open spaces has been submitted to the Council to review. It is now anticipated that this work will be finalised in April 2017.	Emerging Thurrock Local Plan. For key consultation stages in the emerging Local Plan please refer to the Council's Local Development Scheme.		
Q. Undertake a comprehensive audit and needs assessment for footpaths and cycleways in the borough (Active	 Identify key projects for future investment Inform policies in the emerging Local Plan 	Kirsty Paul – Principal Planning Officer		December 2016	A Draft Report setting out an audit of existing open spaces has been submitted to the Council to review. It is now anticipated that this work will be finalised in April 2017.	Emerging Thurrock Local Plan. For key consultation stages in the emerging Local Plan please		

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Place Strategy)						refer to the Council's Local Development Scheme.		
R. Ensure that policies in the emerging Local Plan support the delivery of Objective 2A, Create outdoor spaces that make it easy to exercise and be active. Consideration will be provided to providing the community and schools with dual access to facilities as part of the active places strategy.	 Protect locally important green spaces from development Ensure that all new residential dwellings have appropriate access to open space Ensure that new residential dwellings are sited in accessible locations 	Kirsty Paul – Principal Planning Officer		Ongoing - 2020	The next consultation stage for the emerging Local Plan is anticipated to take place in April 2017. In addition, the Design Strategy Supplementary Planning Document is anticipated to be adopted in February 2017 by Cabinet.	Emerging Thurrock Local Plan. For key consultation stages in the emerging Local Plan please refer to the Council's Local Development Scheme.		
S. Ensure that all new developments appropriately contribute towards the creation	 More effective use of planning obligations Additional investment for infrastructure 	Kirsty Paul – Principal Planning Officer		Ongoing	Planning obligations are currently negotiated in accordance with the Infrastructure Requirement List (IRL). The Planning and Growth Service are currently working with colleagues in environment and public health to	Infrastructure Requirement List		

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and/or enhancement of open space and play areas in the borough	projects that seek to improve outdoor spaces and leisure facilities • Reduce the proportion of people who are inactive in Thurrock				include additional green infrastructure projects on the IRL. It is anticipated that this work will be finalised in April 2017.	•		

Outcome framework

	2046	2047	2049	2040	2020	2024	Doto	Donorting
Indicators	2016 Baseline	2017	2018	2019	2020	2021 Target	Data Source	Reporting Timescales
Outcome Framework Indicator 1.								
% of children overweight or obese in year 6 This indicator quantifies the proportion of children aged 10-11 years classified as overweight or obese in the National Child Measurement Programme. There is concern about the rise of childhood obesity and the implications of obesity continuing into adulthood. Evidence has shown that children who are overweight or obese have higher risks of developing long term conditions such as diabetes and hypertension, exacerbation of conditions such as asthma, and poor mental health and wellbeing. This is also an indicator on the Public Health Outcomes Framework.	36.7% (2014/15)					Below the national average		
Outcome Framework Indicator 2. % of adults overweight or obese This indicator quantifies the percentage of adults classified as overweight or obese calculated from self-reported height and weight data in the Active People Survey. Reducing the levels of obesity is a key priority for both national and local organisations, as it is known that excess weight and obesity are a major determinant of premature mortality and avoidable ill-health. This is also an indicator on the Public Health Outcomes Framework.	70.4% (2012-2014)	partly d system e.g. pot followin	ss towards epend on changes tential fac ig the con Place Stra	other wh happenin ilities inve	ole g later – estment	65%		