

Report to People Overview and Scrutiny Committee

Report Title	Childhood Obesity Task and Finish Group Final Report
Date of Meeting	Thursday, 30 January 2025
Report Author	Claire Dixon, Overview and Scrutiny Officer
Corporate Director	Executive Director Corporate Services/Monitoring Officer
Lead Cabinet Member(s)	Cabinet Member for Health and Wellbeing
Wards Affected	All Wards
Appendices (if any)	<ul style="list-style-type: none">• Appendix 1: Overview of activity sessions and key discussion points.• Appendix 2: Scoping cover report to the People Overview and Scrutiny Committee (July 2024)• Appendix 3: Scoping and Outcomes.• Appendix 4: Task & Finish Group Terms of Reference• Appendix 5: Briefing note to the People Overview and Scrutiny Committee (August 2024)• Appendix 6: Minutes from the Task and Finish Group meetings.

1. Executive Summary

This report summarises the key activities of the Childhood Obesity Task and Finish (T&F) Group, established by the People Overview and Scrutiny (O&S) Committee in September 2024. This final report of the T&F Group includes recommendations for the People O&S Committee, and if agreed, that these are referred to Cabinet for endorsement. Progress will be monitored through the ongoing work of the Committee via suggested recommendation sponsors

2. Recommendations

For the reasons set out in this report, the Committee is recommended to agree the following recommendations:

- 2.1 Build confidence and capacity to deliver healthy weight management advice in the Thurrock health and care workforce with a key focus on staff in Primary Care.
- 2.2 Continue to support and roll out the Health Exercise Nutrition in the Really Young (HENRY) programme and an adult weight management offer from April 2025.
- 2.3 Expand the Food Growing and Community Capacity Building projects within the borough as well as other community projects such as the Purfleet Pantry.
- 2.4 Review the use of Food Partnerships / Networks in other local authorities, for expansion within Thurrock.
- 2.5 Work with the Council's Planning department to support opportunities for physical activity, for example through maximising the use of green space, improving lighting and play and exercise equipment within parks.
- 2.6 Work with the Council's Planning and Regeneration departments to explore planning conditions on new fast food / take away outlets (including possible restrictions on proximity to schools and healthier food offerings).
- 2.7 Increase water fountains in Council owned areas and encourage provision in other public settings.
- 2.8 Collaborative working across Public Health, the Place directorate, and wider stakeholders to support active travel and increased physical activity, for example through initiatives such as School Streets.
- 2.9 Explore opportunities to support young people to engage in physical activity, for example through subsidised gym and sports sessions and junior park runs.
- 2.10 Develop a joined up and collaborative approach between Council departments and partners to simplify and maximise opportunities to promote children's healthy weight.
- 2.11 Improved signposting of healthy lifestyle messages, services and campaigns through partners, including the Council website, GP surgeries and community spaces.
- 2.12 Work with the Mid and South Essex Integrated Care Board (MSE ICB) to link up Tier Two and Tier Three / paediatric services to ensure young people and their families are offered the services appropriate to their needs.
- 2.13 Work with the Mid and South Essex Integrated Care Board (MSE ICB) to focus on the prevention of maternal obesity.

- 2.14 Work with school food providers and the Holiday Activity and Food (HAF) programme to ensure the meals provided are healthy and nutritious.
- 2.15 Work with and encourage schools to:
- Timetable two hours of Physical Education (PE) weekly, as recommended within the Government Schools Sports and Activity Action Plan and to promote campaigns such as the Daily Mile (especially at secondary school level);
 - Provide a basic understanding and knowledge of nutrition and offer food technology classes;
 - Provide affordable healthy food options and ensure sufficient break time to allow for eating a meal;
 - Increase access to free drinking water, for example via the provision of water fountains.
- 2.16 Support appropriate government initiatives to improve healthy eating and physical activity.

3. Commissioner's Comments

- 3.1 Not applicable.

4. Proposals – the rationale and evidence for the recommendations

Introduction and background

- 4.1 A report on childhood obesity was presented to the Children's Overview and Scrutiny (O&S) Committee in March 2024 and concerns were raised about the increasing rates of childhood obesity in Thurrock. Data from 2022/23 illustrates that 23.9% (1 in 4) four year olds in Reception are overweight or obese which is significantly higher than the rate for England (21.3%) and for the region (20%). This increases to 38.7% (1 in 3) in Year Six children in Thurrock compared with the rates for England and the region (36.6% and 34.2% respectively).
- 4.2 Following the review of Thurrock Council's scrutiny function in May 2024, the People O&S Committee was established, with its remit covering Adult Social Care, Health, and Children's Services. Obesity was identified by the Committee and the Cabinet Member for Health and Wellbeing as a priority for the upcoming year.
- 4.3 The People O&S Committee agreed at its first formal meeting in July 2024 that a focused Task and Finish Group (T&F) on childhood obesity would therefore be beneficial. See **appendices 2-4** for the scoping cover report to the Committee, the scoping and outcomes document and the Group's Terms of Reference. The Group's work commenced in September 2024 and was time-limited to a maximum of 10 weeks, concluding in November 2024.
- 4.4 A series of five themed sessions were identified by Public Health colleagues for the T&F Group to meet with various stakeholders to seek their views on childhood obesity and to inform the Group's recommendations. See appendix

1 for a detailed overview of each session and the key discussion points. These sessions were held as follows:

- **18 September 2024:** meeting with Council officers to discuss the 'Health in All Policies Approach to Place-Shaping';
- **8 October 2024:** meeting with representatives from maternity and health visiting services in Thurrock. This focused on their work with pregnant women to manage excess weight during pregnancy and ensure the best possible outcomes for women and their babies;
- **17 October 2024:** a meeting with key stakeholders from organisations across the borough such as Impulse Leisure, Active Essex and the community and voluntary sector;
- **22 October 2024:** the Group met with representatives from the Youth Cabinet to discuss their views on childhood obesity;
- **30 October 2024:** a visit to the Family Hub in Tilbury where children's weight management programmes are delivered.

- 4.5 The T&F Group met on five occasions (see **appendix 6** for the minutes of these meetings) to reflect on the themes highlighted during their discussions and potential key lines of enquiry for upcoming sessions.
- 4.6 Following the activity sessions and additional research conducted (see **appendix 1**), the T&F Group proposed 16 recommendations. The work undertaken by the T&F Group will help to inform the Healthy Weight Strategy and stakeholders will continue to be engaged during the development of this Strategy. The T&F Group's work therefore complimented this wider strategic programme.
- 4.7 The below tables outline each recommendation, the reason for inclusion based on the work of the T&F Group and the suggested officer and Cabinet Member sponsor. If the recommendations are agreed by the People O&S Committee, then these will be presented to Cabinet to endorse as the scrutiny function does not have decision making powers.
- 4.8 Whilst the T&F Group proposed several recommendations, it is important to recognise that some sit outside of the Council's remit, such as national government policies and guidance and the work of the Mid and South Essex Integrated Care Board (NHS).

Number	Recommendation	Reason for recommendation	Recommendation sponsors
2.1	Build confidence and capacity to deliver healthy weight management advice in the Thurrock health and care workforce, with a key focus on staff in Primary Care.	Discussions with stakeholders such as the community and voluntary sector and Primary Care including Clinical Leads, highlighted confidence and capacity as key concerns when providing weight management advice. Weight management and obesity are sensitive and emotive topics, with Primary Care often being the frontline for these discussions. This recommendation aims to target Primary Care staff, including social prescribers to support their empowerment to discuss obesity sensitively.	Director of Public Health and Cabinet Member for Health and Wellbeing.
2.2	Continue to support and roll out the Health Exercise Nutrition in the Really Young (HENRY) programme and an adult weight management offer from April 2025.	The HENRY programme was referenced in several activity sessions, including the meeting with Maternity Services and the visit to the Family Hub. The holistic approach to this programme was supported by partners and service users. NELFT will deliver HENRY through the 0-19 Healthy Families contract. The Council's Thurrock Healthy Lifestyle Service will deliver tier two weight management services for adults from April 2025, following the end of the Slimming World contract. Both elements of this recommendation are commissioned by Public Health.	Director of Public Health and Cabinet Member for Health and Wellbeing
2.3	Expand the Food Growing and Community Capacity Building projects within the borough as well as other community projects such as the Purfleet Pantry	The ongoing work with communities in South Ockendon provided positive evidence of collaborative working across the Council and residents. The pilot highlighted the importance of empowering communities to work together to connect to their wider natural environment. For example, the food growing garden by Benyon Primary School provided pupils with an understanding of food sources and promoted healthy eating choices. Expansion and support of such community projects also links closely to the Council's Corporate Plan priorities of being an 'enabling' organisation to build strong and impactful partnerships to maximise the benefits for residents.	Head of Community Development and Cabinet Member for Community Partnerships
2.4	Review the use of Food Partnerships / Networks in other local authorities, for expansion within Thurrock.	The Health in all Policies (HiAP) evidence session highlighted previous attempts to explore a Food Partnership. A coordinated approach across communities would therefore be beneficial to support residents to access basic food supplies and signposting of charities and organisations.	Director of Public Health and Cabinet Member for Community Partnerships
2.5	Work with the Council's Planning department to support opportunities for physical activity, for example through maximising the use of green space, improving lighting and play and exercise equipment within parks.	The HiAP evidence session referenced the built environment as a wider determinant of health, impacting on physical activity and childhood obesity. This recommendation aims to support identification of green space during the design and planning application process of future developments. The perception of safety is also important, with lighting a key element to encouraging the use of outside spaces for physical activity.	Executive Director for Place and Cabinet Member for Place and Environment

Number	Recommendation	Reason for recommendation	Recommendation sponsors
2.6	Work with the Council's Planning and Regeneration departments to explore planning conditions on new fast food / take away outlets.	The availability of fast food was raised during the activity session with the Youth Cabinet representatives, with young people having easy access through delivery apps and high street locations. The aim of this recommendation is to explore the locations of new fast food / take away outlets via the planning application process. This could include possible restrictions on the proximity to schools and opportunities for healthier food offerings.	Director of Public Health and Cabinet Members for Health and Wellbeing and Place and Environment
2.7	Increase water fountains in Council owned areas and encourage provision in other public settings	Access to free water was referenced during evidence sessions with stakeholders and the Youth Cabinet representatives. Increasing the access to free water may help to reduce the consumption of high sugar drinks. Some primary schools have already adopted this approach, with only water being permitted during school hours (Kennington's Primary Academy and Dilkes Academy). Water fountains is one example of free water provision.	Executive Director for Place and Cabinet Member for Place and Environment
2.8	Collaborative working across Public Health, the Place directorate, and wider stakeholders to support active travel and increased physical activity, for example through initiatives such as School Streets.	The synergies with the Place O&S Parking at Schools Task & Finish Group were highlighted during several activity sessions and a joint meeting was held between the two Groups to explore further. The T&F Groups support the collaboration between Council departments and wider stakeholders. This recommendation aims to build on the evidence collated that increasing active travel and therefore physical activity, is likely to have a positive impact on childhood obesity and improve parking around schools.	Director of Public Health and Cabinet Members for Health and Wellbeing and Place and Environment
2.9	Explore opportunities to support young people to engage in physical activity, for example through subsidised gym and sports sessions and junior park runs.	During the evidence session with stakeholders, it was highlighted that physical activity levels outside of school hours have increased slightly for young people. This recommendation looks to explore opportunities with the Council's sport and leisure services provider to encourage physical activity amongst young people. The provider has previously worked with schools on bespoke programmes and wider activities across the borough.	Director of Public Health and Cabinet Member for Health and Wellbeing

Number	Recommendation	Reason for recommendation	Recommendation sponsors
2.10	Develop a joined up and collaborative approach between Council departments and partners to simplify and maximise opportunities to promote children's healthy weight.	Collaborative working across professionals such as Council departments and partners was a key theme throughout the T&F Group's work, particularly during discussions with stakeholders. This recommendation aims to explore how to simplify and coordinate the vast amount of information regarding healthy lifestyles and services available to residents, particularly those aimed at promoting a healthy weight for children.	Director of Public Health and Cabinet Member for Health and Wellbeing
2.11	Improved signposting of healthy lifestyle messages, services and campaigns through partners, including the Council website, GP surgeries and community spaces.	Signposting of key services and healthy lifestyle messages was highlighted during the HiAP meeting, the evidence session with stakeholders and the visit to the Tilbury Family Hub. The importance of both digital and non-digital platforms was recognised as part of the wider digital inclusion work of the Council. This recommendation links closely with recommendation 1.10 (above) regarding collaborative working across professionals to provide residents with opportunities to access services to support healthy lifestyles.	Director of Public Health and Cabinet Member for Health and Wellbeing
2.12	Work with the Mid and South Essex Integrated Care Board (MSE ICB) to link up Tier Two and Tier Three / paediatric services to ensure young people and their families are offered the services appropriate to their needs.	As part of additional research, the meeting with Clinical Leads highlighted that weight management services would benefit from a collaborative approach across all sectors to reduce obesity. The MSE ICB has established a strategic group focused on obesity, with one of its key priorities to explore the possibility of developing integrated weight management pathways across tier two and three. The intention of this recommendation is to therefore to work with the MSE ICB as part of partnership working.	Thurrock Integrated Care Alliance (Place Board of the ICB)
2.13	Work with the MSE ICB to focus on the prevention of maternal obesity.	The evidence session with Maternity Services highlighted the importance of women being a healthy weight pre-pregnancy as maternal obesity increases the risks to the unborn child. This recommendation focuses on working with the MSE ICB as part of a holistic approach to weight management and thus the prevention of maternal obesity.	Director of Public Health and Thurrock Integrated Care Alliance (Place Board of the ICB)
2.14	Work with school food providers and the Holiday Activity and Food (HAF) programme to ensure the meals provided are healthy and nutritious.	The evidence session with stakeholders highlighted the Holiday Activity and Food (HAF) programme supports children and young people during school holiday periods, with catering provision varying across the programme. This recommendation provides an opportunity for the food options of the HAF to be reviewed as part of encouraging healthy and nutritious meals. Academies provide / commission their own catering therefore the Council aims to work with them to promote healthy and nutritious meals within their schools.	Executive Director for Children's Services and Cabinet Member for Children's Services.

Number	Recommendation	Reason for recommendation	Recommendation sponsors
2.15	<p>Work with and encourage schools to:</p> <ul style="list-style-type: none"> • Timetable two hours of Physical Education (PE) weekly, as recommended within the Government Schools Sports and Activity Action Plan and to promote campaigns such as the Daily Mile (especially at secondary school level); • Provide a basic understanding and knowledge of nutrition and offer food technology classes; • Provide affordable healthy food options and ensure sufficient break time to allow for eating a meal; • Increase access to free drinking water, for example via the provision of water fountains. 	<p>The importance of education and schools was highlighted throughout the evidence sessions. Education is key for children and young people to understand healthy eating, how to cook a nutritious meal and provide opportunities for PE. Attitudes to exercise are set in childhood, with low levels of activity likely to continue into later life. As most of Thurrock's schools are academies, the aim of the recommendation is to work with schools to encourage and support healthy lifestyles of pupils, for example, via the curriculum and opportunities for PE.</p>	<p>Executive Director for Children's Services and Cabinet Member for Children's Services</p>
2.16	<p>Support appropriate government initiatives to improve healthy eating and physical activity.</p>	<p>The HiAP session outlined the role of central government in influencing food policies and initiatives to support healthy eating and physical activity. Whilst this recommendation sits outside the Council's sphere of influence, it was important to recognise reducing obesity, particularly within childhood is multifaceted and involves both local level and central government intervention.</p>	<p>Director of Public Health and Cabinet Member for Health and Wellbeing.</p>

Conclusions

- 4.9 As the T&F Group progressed through its activities within the 10 week timeframe, several recurring themes were identified. These included the importance of education for families and children to promote healthy eating and exercise and a collaborative and joined up approach of services. The signposting of support for weight management concerns and how to access healthy food was also important. These themes were reflected within the T&F Group's recommendations which cover a broad range of areas to reduce obesity levels, particularly within childhood. A reduction in obesity rates is likely to be across the medium to longer term, with recommendations requiring monitored and embedding across the wider system as part of a holistic approach to weight management and the wider determinants of health.

5 Alternative Options Considered

- 5.1 None.

6. Consultation

- 6.1 Various stakeholders were engaged during the T&F Group's work as outlined within the key activities (see **appendix 1**). The Group would like to thank all stakeholders for their time, participation, and contributions.
- 6.2 The T&F Group acknowledged the views of the stakeholders are not representative for all organisations across the borough. This is not an exhaustive list of opinions and activities to help reduce the complex and multifaceted issue of childhood obesity.
- 6.3 No formal public consultation took place.

7. Financial Implications

- 7.1 There are no direct financial implications arising from this report.
- 7.2 If any of the recommendations have financial implications, they will be identified separately as part of programme scoping and management and be considered as part of the budget setting process for 2025/26.

Implications verified by Sima Khroya, Assistant Director, Financial Management & Procurement

Date: 5 December 2024

8. Risks

- 8.1 Some of the recommendations may not or cannot be implemented as they are outside of the Council's direct remit and sphere of influence. This could potentially lead to less successful weight loss prevention.

However, working collaboratively with partners and stakeholders is key to their progression and will be overseen by the suggested sponsors.

Implications verified by Frankie Smith, Head of Internal Audit, Risk and Insurance

Date: 11 December 2024

9. Legal and Governance Implications

- 9.1 Under the Children Act 1989 and 2004 Local Authorities have a statutory duty to safeguard and promote the welfare of children, which includes addressing health risks such as obesity.
- 9.2 Under the Health and Social Care Act 2012 Local Authorities are responsible for improving health outcomes for their populations including children. This includes interventions for childhood obesity. Non-compliance with these duties could lead to judicial review or legal challenge.
- 9.3 Schools must adhere to the School Food Regulations 2014 ensuring healthy meals are provided.

Implications verified by Petrena Sharpe, Safeguarding Lawyer – Team Leader

Date: 9 December 2024

10. Equality and Diversity Implications (including the public sector equality duty)

- 10.1 There are no direct diversity implications contained in this report. The recommendations outlined above seek to reduce obesity rates across all characteristics, with a particular focus on age (children and young people).

Implications verified by: Rebecca Lee, Team Manager - Community Development Team

Date: 11 December 2024.

11. Other Relevant Implications

- 11.1 Tackling obesity and focusing on children's healthy weight management is a priority for the Council, as reflected in the statutory Thurrock Health and Wellbeing Strategy ('Work with communities to reduce obesity in Thurrock'). Reducing obesity in childhood will help to reduce the likelihood of continued obesity into adulthood and the potential use of health services for weight related illnesses.

11.2 The recommendations of the T&F Group will be used to inform the ongoing work to tackle childhood obesity and therefore will be expected to have a positive impact on reducing the levels of obesity in Thurrock.

12. Background Documents

- Thurrock Whole Systems Obesity Strategy 2018-2021
- A Health in All Policies approach to place-shaping
- Childhood Obesity in Thurrock (Children's Overview and Scrutiny Committee Report March 2024)

Relevance Check

Budget Reduction/Service Area:

Service Lead

Date:

In what ways does this Budget reduction have an impact on an outward facing service? How will the service feel different to your customers or potential customers?

N/A

If not, how does it impact on staff e.g. redundancies, pay grades, working conditions? Why are you confident that these staff changes will not affect the service that you provide?

N/A

Is a Customer Impact Assessment needed? No