

Report of:	Cabinet Member for Health and Social Care
To:	Health and Social Care Overview and Scrutiny Committee
Date:	29th September 2015

Progress Report on Implementation: Tackling Childhood Obesity in Birmingham Inquiry

Review Information

Date approved at City Council:	8 th April 2014
Member who led the original review:	Councillor Susan Barnett
Lead Officer for the review:	Rose Kiely
Date progress last tracked:	26 th November 2014

1. In approving this Review the City Council asked me, as the appropriate Cabinet Member for Health and Social Care, to report on progress towards these recommendations to this Overview and Scrutiny Committee.
2. Details of progress with the remaining recommendations are shown in Appendix 2.
3. Members are therefore asked to consider progress against the recommendations and give their view as to how progress is categorized for each.

Appendices

1	Scrutiny Office guidance on the tracking process
2	Recommendations you are tracking today
3	Recommendations tracked previously and concluded

For more information about this report, please contact

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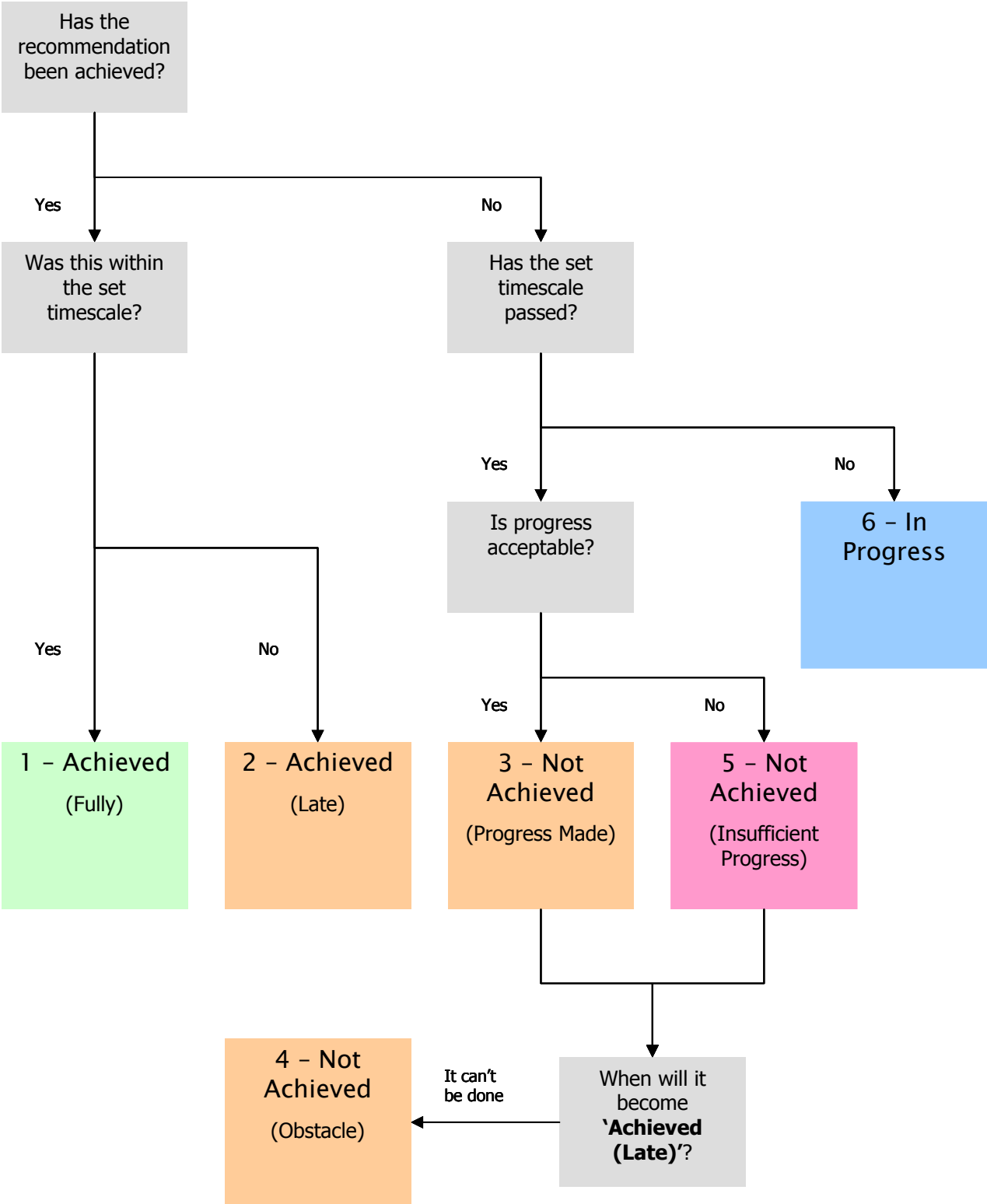
Appendix I: The Tracking Process

In making its assessment, the Committee may wish to consider:

- What progress/ key actions have been made against each recommendation?
- Are these actions pertinent to the measures required in the recommendation?
- Have the actions been undertaken within the time scale allocated?
- Are there any matters in the recommendation where progress is outstanding?
- Is the Committee satisfied that sufficient progress has been made and that the recommendation has been achieved?

Category	Criteria
1: Achieved (Fully)	The evidence provided shows that the recommendation has been fully implemented within the timescale specified.
2: Achieved (Late)	The evidence provided shows that the recommendation has been fully implemented but not within the timescale specified.
3: Not Achieved (Progress Made)	The evidence provided shows that the recommendation has not been fully achieved, but there has been significant progress made towards full achievement. An anticipated date by which the recommendation is expected to become achieved must be advised.
4: Not Achieved (Obstacle)	The evidence provided shows that the recommendation has not been fully achieved, but all possible action has been taken. Outstanding actions are prevented by obstacles beyond the control of the Council (such as passage of enabling legislation).
5: Not Achieved (Insufficient Progress)	The evidence provided shows that the recommendation has not been fully achieved and there has been insufficient progress made towards full achievement. An anticipated date by which the recommendation is expected to become achieved must be advised.
6: In Progress	It is not appropriate to monitor achievement of the recommendation at this time because the timescale specified has not yet expired.

The Tracking Process



Appendix 2: Progress with Recommendations

No.	Recommendation	Responsibility	Original Date For Completion	Cabinet Member's Assessment
R02	That the Chair of the Education and Vulnerable Children Overview and Scrutiny Committee meet with the Chair of the Birmingham Educational Partnership (BEP) to explore how the recommendations of the Health and Social Care Overview & Scrutiny Committee can be supported by the School Food Plan 2013 and also to develop more systematic engagement with all schools including free schools and academies on school food standards, healthy lifestyle options such as increasing walking and other healthy eating initiatives commissioned by Public Health.	Chair of Education and Vulnerable Children Overview and Scrutiny Committee	September 2014	3

Evidence of Progress (and Anticipated Completion Date if 'Not Achieved')

Director of Public Health (DPH) and Childhood Obesity Strategic Lead met with BCC CEO on 16th June '15 to discuss childhood obesity and how we create conditions to improve the health and wellbeing of children. Following a positive conversation it was recommended that the team spoke to the Interim Executive Director for Education with a view to looking at the curriculum entitlement.

A meeting was held on 7th July with BEP CEO, BEP board member, DPH, Interim Executive Director for Education, Childhood Obesity Strategic Lead and Public Health team to discuss proposal further. The aim of the meeting was to promote health and wellbeing. Joint working with the BEP will be ongoing. Actions agreed;

- Interim Executive Director for Education agreed to include health and wellbeing in the BEP service specification under the relation to District based service
- BEP CEO agreed to disseminate 6 key health themed messages to schools during the academic year
- DPH offered staff resource to BEP to further reinforce the health and wellbeing importance to BEP District structures
- The BEP agreed a further conversation following transition would be useful to look at options for expanding the offer

No.	Recommendation	Responsibility	Original Date For Completion	Cabinet Member's Assessment
R04	That the approach described by Birmingham Children's Hospital (BCH) as a stakeholder in the wider health and wellbeing of children and in starting to build a wider commitment by provider trusts to contribute to the public health agenda including the possibility of establishing a health promoting network for hospitals in Birmingham be supported and that BCH be requested to update the Health and Social Care Overview and Scrutiny Committee on progress.	Birmingham Children's Hospital Consultant in Public Health Medicine	April 2015	3

Evidence of Progress (and Anticipated Completion Date if 'Not Achieved')

- Birmingham Children's Hospital (BCH) presented the idea of a network at the regional CEO forum – broad agreement. Health Education West Midlands were extremely interested in the idea and have now taken on the idea of co-ordinating a set of workshops to bring providers together to look at specific areas, such as preventing obesity
- BCH continue to work with their current catering provider to improve the food offer for current patients. They will be retendering this service in the next couple of years, and are beginning preparatory work to outline how this can support further improvements in their offer
- BCH have put themselves forward to be a health and wellbeing pilot site with NHS England for next year
- BCH are now working in much closer partnership with Birmingham Women's Hospital, progressing the

Strategic Outline Case to test if an integrated Women's and Children's hospital for Birmingham is the right choice for the future of both organisations. This includes articulating a wider vision around our aspirations to support the whole family in Birmingham.

- BCH continue to participate in the national provider public health network

No.	Recommendation	Responsibility	Original Date For Completion	Cabinet Member's Assessment
R05	That through the Childhood Obesity Care Pathway, a children's service offer is developed which includes diet and behaviour, as well as physical activity, and that all services have the flexibility to offer family based interventions if appropriate.	Birmingham South Central, Birmingham Cross City and Sandwell and West Birmingham Clinical Commissioning Groups	April 2015	3
Evidence of Progress (and Anticipated Completion Date if 'Not Achieved')				
Referral pathway for Children's Weight Management is in place and was promoted to clinicians at workshop in July 2014. Work is ongoing to achieve a more comprehensive pathway which includes access to family physical activity through a Be Active Children's Offer which is still in the development phase. Remodelling Lifestyle Services including childhood obesity prevention and treatment services is a priority for Public Health.				

No.	Recommendation	Responsibility	Original Date For Completion	Cabinet Member's Assessment
R06	That the Health and Wellbeing Board through the Third Sector Assembly and the three Birmingham Clinical Commissioning Groups examine the best way to develop stronger strategic links between GPs and the Third Sector which may have the potential to facilitate further and better engagement with, and delivery of the childhood obesity agenda.	Cabinet Member for Health and Social Care as Chair of Health and Wellbeing Board	April 2015	1
Evidence of Progress (and Anticipated Completion Date if 'Not Achieved')				
<p>On 1st July 2014, the Birmingham Childhood Obesity Strategic Steering Group hosted a workshop to engage clinicians on this critical agenda. The workshop focused on their role as a GP in tackling Childhood Obesity and the risk of not doing so, clarification around factors which might indicate obesity secondary to an underlying condition, effects of physical inactivity as well as support on raising the issue with families. Guest speakers included; Dr Rachel Pryke, <i>RCGP clinical lead for nutrition and Worcestershire GP</i>, Dr Chizo Agwu, <i>Clinical Director Paediatric services Sandwell and West Birmingham NHS Trust</i> and Dr William Bird, <i>GP and Founder & CEO of intelligent Health</i>.</p> <p>While the impact of the child healthy weight care pathway cannot be measured at this stage feedback from the event and responses from clinicians has been very positive</p> <p>Two additional clinical CPD events were held for Birmingham midwives in November 2014 and January 2015 to support them on raising the issue of obesity and health weight gain during pregnancy.</p> <p>District childhood obesity workshops have been held in Perry Barr, Northfield and Yardley during 2014.</p> <p>A Representative of the Third Sector has been chosen to sit on steering group</p>				

No.	Recommendation	Responsibility	Original Date For Completion	Cabinet Member's Assessment
R08	That the Planning Committee start discussions with a view to adopting a policy development approach which commits to design out the obesogenic environment by following a process similar to the one that was followed when putting together Birmingham's Green Commission. Through this approach an environment can be designed that encourages physical activity,	Chair of the Planning Committee	April 2015	2

	active travel and healthy lifestyle choices.			
Evidence of Progress (and Anticipated Completion Date if 'Not Achieved')				
<p>There has been some conversations with the Director of Planning and Regeneration and the Director of Public Health around establishing a new Supplementary Planning Document to encompass a) limiting Hot food takeaway's near schools and will be concerned with A5's with the potential to include A1 and A3's if viable and/or b) applications for Hot food takeaway's within close proximity to residential units/schools could be refused where it is considered that there may be significant adverse impacts on school/residential amenity in terms of noise, vibrations, odours, traffic disturbance, litter or hours of operation as a result of the proposed premises. An options appraisal has been completed and further discussions are to take place.</p> <p>There is the potential for the current Hot food takeaway policy to be included in the Birmingham Development Plan which is a positive step forward.</p> <p>Public Health and the Smart City Alliance are working together to deliver a Smart City Alliance Workshop which will involve businesses taking part and potentially considering 'Crowd Funder' as a model to identify obesity/food related projects that the public are interested in and opportunities for co-funding. This is seen as an exciting opportunity to work with business to create a healthier environment in Birmingham.</p> <p>Continuing from last year's Planning and Health Workshop work is ongoing to develop and implement a Developer's toolkit which aims to ensure that planning authorities, developers, master planners and architects are engaged at the earliest opportunity in the planning and development process. The developer toolkit covers 11 distinct themes including; housing quality and design, access to healthcare services and other social infrastructure, access to open space and nature etc</p> <p>The planning department are currently working up a submission for the Healthy New Towns and Neighbourhoods Initiative being promoted by NHS England</p>				

No.	Recommendation	Responsibility	Original Date For Completion	Cabinet Member's Assessment
R09	That the Partnerships, Engagement and Communication Group, as an integral part of their work on developing and implementing a communications strategy, establish what advertising the Council and other stakeholders have control or influence over with a view to using this influence to promote healthy eating and physical activity.	Cabinet Member for Health and Social Care	April 2015	1

Evidence of Progress (and Anticipated Completion Date if 'Not Achieved')				
<p>Public Health are having conversations around including the nutrition information on all food and beverage street side advertising controlled by Birmingham City Council. Public health are proposing that they create their own Birmingham Standard for displaying nutrition information (which commuters would be able to read driving passed). We are currently speaking to Department of Health and BCC Legal team to ensure whatever standard is developed is free from challenge by the market e.g. traffic light labelling per portion or 100g and/or health warning messages. The contract is due to commence Dec 2015 and will be in place for 15 years. The contract document will also include that the Council reserves the right to enter into negotiation about restricting the content of food and beverage advertising in particular that which is categorised as unhealthy.</p>				

Appendix ③: Concluded Recommendations

These recommendations have been tracked previously and concluded. They are presented here for information only.

concluded

No.	Recommendation	Responsibility	Date Concluded by Overview and Scrutiny Committee	Tracking Assessment
R01	That letters be sent to: (a) the Secretary of State for Health to lobby for a stronger UK wide response towards childhood obesity with particular reference to addressing the food industry and producers, the role of education and schools and in relation to strengthening planning policy with a view to giving stronger planning powers to local Councils to enable them to deal more effectively with the proliferation of hot food takeaways; (b) the Secretary of State for Communities and Local Government to lobby for a change in policy guidance which would allow planning applications for inappropriate schemes to be refused on health grounds; and (c) Birmingham MPs to ask them to campaign in the House of Commons and lobby the Secretary of State for Health in relation to these issues.	Cabinet Member for Health and Social Care Chair of Health and Social Care Overview and Scrutiny Committee	November 2014	2
R03	That the Chair of the Education and Vulnerable Children Overview and Scrutiny Committee meets with the Chair of the Birmingham Governors Network to ensure that governors: (a) are systematically engaged and well informed in relation to the resourcing and funding decisions needed to support initiatives to tackle childhood obesity; and (b) are aware that they have the power to object to planning applications especially in relation to proposed hot food takeaways near schools and of the appropriate planning grounds they should consider whilst recognising that an objection in itself does not necessarily lead to refusal; and (c) understand their responsibility as school governors around meeting the school food guidelines.	Chair of Education and Vulnerable Children Overview and Scrutiny Committee	November 2014	2
R07	That the Street Trading Consultation Process be amended to include the Director of Public Health as a consultee where Street Trading Consents are being sought for food outlets so that any representation made by the Director of Public Health can be taken into consideration before any decision is made.	Director of Regulation and Enforcement with Cabinet Member for Health and Social Care as Chair of Health and Wellbeing Board	November 2014	1

These recommendations have been tracked previously and concluded. They are presented here for information only.

Concluded

No.	Recommendation	Responsibility	Date Concluded by Overview and Scrutiny Committee	Tracking Assessment
R10	That an assessment of progress against the recommendations and suggestions made in this report should be presented to the Health and Social Care Overview and Scrutiny Committee.	Cabinet Member for Health and Social Care	November 2014	2