

Report of:	Cabinet Member for Health and Social Care
To:	Health & Social Care Overview and Scrutiny Committee
Date:	17 October 2017

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:	29 th September 2015

1. In approving this Review the City Council asked me, as the appropriate Cabinet Member for Health and Wellbeing, 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

Contact Officer:	Dr Dennis Wilkes
Title:	Assistant Director of Public Health
Telephone:	07595090451
E-Mail:	dennis.wilkes@birmingham.gov.uk

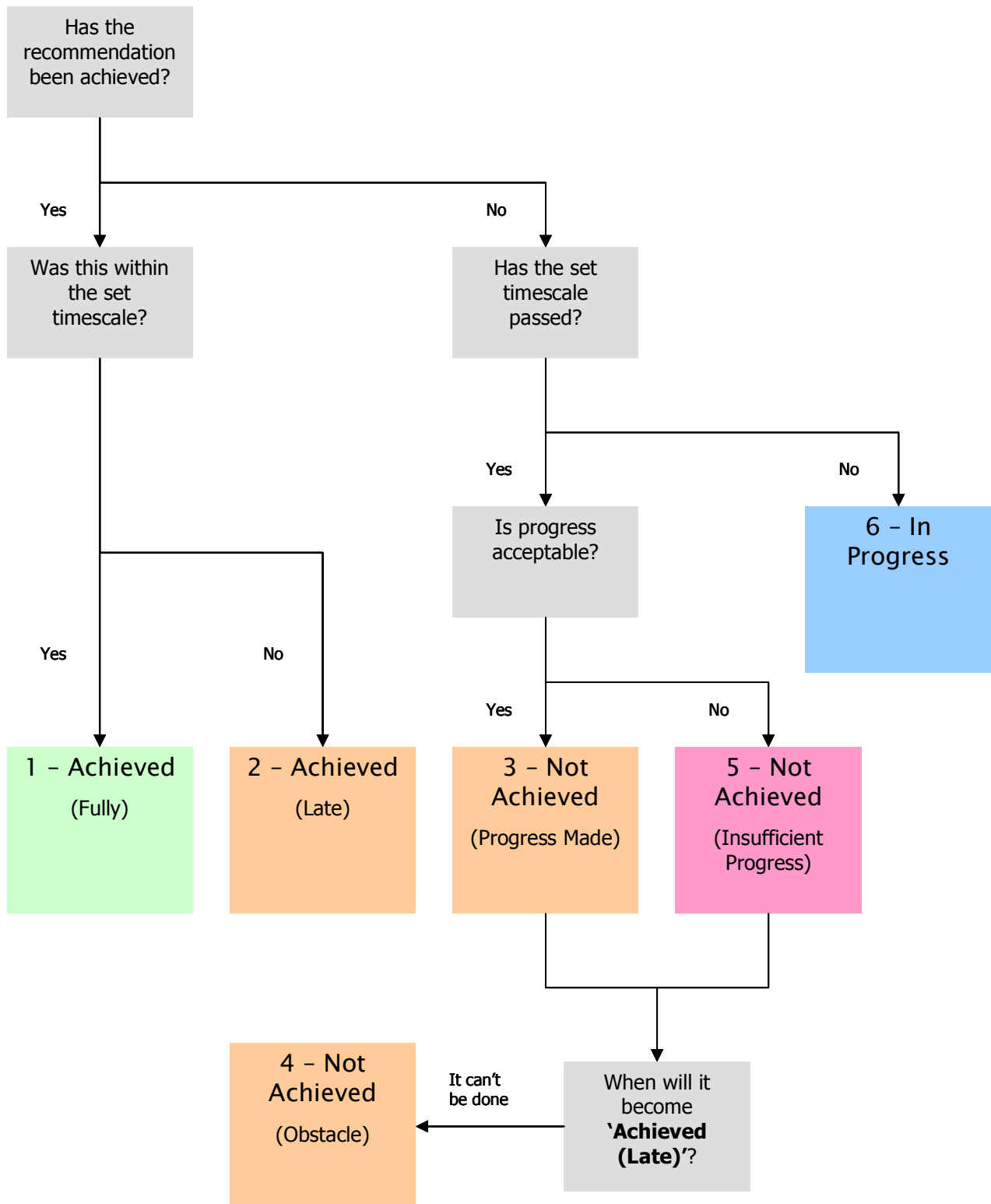
Appendix 1: The Tracking Process

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 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	June 2016	2 (achieved late)

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

The national School Food Plan 2013 is still in place and provides resources to support and encourage schools to address the ongoing challenge of obesity in our youngest children. OFSTED has guidance which it uses for inspection purposes based on these standards and the national nutritional guidance to schools.

Citykitchen, the Cityserve offer to Birmingham schools for catering, engage with schools and students to develop menus and products with the aim of enabling schools to be School Food Plan compliant.

Schools continue to participate in the Health for Life and Be Healthy Schools award, delivered through Services 4 Education, with increasing numbers achieving accreditation and sustaining the messages and activities to support healthy nutrition and activity behaviours in their pupils.

The enthusiasm of the schools in the Longbridge area to participate in the trial of the School Mile Run evaluation, supported by the section 106 funding, is further evidence of their commitment to this health improvement work.

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	Birmingham Children's Hospital Consultant in Public Health Medicine	June 2016	2 (achieved late)

	requested to update the Health and Social Care Overview and Scrutiny Committee on progress.			
Evidence of Progress (and Anticipated Completion Date if 'Not Achieved')				
<p>The introduction of the NHS Sustainability and Transformation Partnership resulted in a work stream focussed on Transforming Secondary Care, namely hospital based care. Included in this was the development of their Health & Wellbeing offer for staff and patients. The Birmingham Children's Hospital introduced this recommendation and embedded it into the work plan.</p> <p>Progress on the Health & Wellbeing offer has been slow, due to competing priorities, but it remains an active component of the work stream. The work stream is monitored by the STP Programme Board.</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	<p>That letters be sent to:</p> <p>(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;</p> <p>(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</p> <p>(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.</p>	Cabinet Member for Health and Wellbeing Chair of Health and Social Care Overview and Scrutiny Committee	November 2014	2

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
R03	<p>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:</p> <ul style="list-style-type: none"> (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
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	June 2016	1
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 Wellbeing as Chair of Health and Wellbeing Board	June 2016	1
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 Wellbeing 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
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, active travel and healthy lifestyle choices.	Chair of the Planning Committee	June 2016	1
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 Wellbeing	September 2015	1
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 Wellbeing	November 2014	2