

Final Report and Recommendations In depth scrutiny project 2014/15

‘How the Council assists and excites individuals and community groups to achieve healthier lifestyles’



May 2015

Foreword

The People Scrutiny Committee decided that the in-depth scrutiny project for 2014/15 would focus on how the Council assists and excites individuals and community groups to improve their health and wellbeing. The project team, of which I am Chairman, decided the specific focus for the review would be on the role the Council and its key partners, including the voluntary sector, can play to support more local people to lead healthier lifestyles.

Southend-on-Sea has aspirations to be one of the healthiest towns in England by 2020. To achieve this aim we all need to work together to tackle the negative lifestyle behaviours that are impacting on the health and wellbeing of people living in the Borough.

This timely project presented an opportunity for the Council and other key partners to come together and build on existing good work. It has already had tangible outcomes and identified a number of key actions that we can take to support people to tackle negative lifestyle behaviours and make a real difference to their lives. This work will also inform the delivery of the ambitions set out in the refreshed Southend health and wellbeing strategy.

I would like to extend my gratitude to all those who have been involved in the project for which I have been proud to take the lead and I commend this report for publication.

Councillor James Moyies Chair of In-depth Scrutiny Project

The project team consisted of the following Councillors:-
James Moyies (Chairman), Councillors Brian Ayling, Mary Betson, Caroline Endersby, Nigel Folkard, Judith McMahon, Georgina Phillips and Lesley Salter.

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1. Objectives and Recommendations

Objectives of the project

1.1 Led by the cross party project team Members, the aim of the review was to develop a comprehensive understanding of the most effective interventions that can be put in place to address negative lifestyle related behaviours within the Borough of Southend-on-Sea. The objectives of the project were to:

- Review current lifestyle related strategies, direct commissioned services and services commissioned by partners.
- Identify best practice and areas for improvement.
- Gain a better understanding of the impact disadvantage plays in increasing negative lifestyle behaviours.
- The enabling role the Council can play to tackle inequality.
- Identify ways in which additional sustainable capacity can be built locally through more use of the voluntary/third sector.
- Gain a better understanding of how local and regional partners can work more effectively to deliver innovative approaches to improve access to and uptake of services that address negative lifestyle behaviours.

Our Recommendations

1.2 Cabinet is asked to agree the following recommendations:-¹

- (a) That the in depth scrutiny project 'How the Council assists and excites individuals and community groups to achieve healthier lifestyles' be agreed.
- (b) To recommend that the Health & Wellbeing Board agree that an action plan be developed to take forward the outcomes from the review to be addressed in the Physical Activity Strategy for Southend with measurable broad impact goals. The Strategy will include needs assessment and cross-agency working to maximise existing Southend assets and develop a future direction for the Borough.
- (c) To avoid fragmentation – strong governance arrangements should be put in place to oversee the delivery of physical activity outcomes.
- (d) That a marketing campaign featuring a '30 minute pledge' be implemented within the Borough as one of the work streams of the Strategy and the Implementation Plan.
- (e) Promotion of physical activity be based on the principles of social marketing and include messaging to promote the recommendations

¹ Any recommendations with budget implications, these will require consideration as part of future years' budget processes prior to implementation.

of the Chief Medical Officer for England's Guidelines on physical activity.

- (f) Explore how existing joint commissioning arrangements, such as the Health and Social Care Pioneer project can be used to commission physical activity outcomes for the whole population.
- (g) Prioritise the training of all Council and key partner staff to deliver brief interventions using the 'Making Every Contact Count' process to 'industrial' scale across the Borough in multiple settings.

2. Background to the Report

- 2.1 Southend-on-Sea has aspirations to be one of the healthiest towns in England by 2020. The current population is estimated to be 177,900.
- 2.2 There is higher level of disadvantage within the town than the England average.² Of particular concern is childhood disadvantage with about a quarter of children living in poverty. In 2010-12, the gap in life expectancy between the most deprived and least deprived areas in Southend was 10.1 years for males and 9.7 years for females.
- 2.3 Lifestyle factors play a significant role in increasing health inequality in the Borough. The level of smoking in Southend-on-Sea is significantly higher than the England average (21.8% compared to 18.4% for England). Physical inactivity is higher than the England average (30.3% compared to 28.9%). The percentage of people with excess weight is also higher in Southend-on-Sea (64.4%) compared to the England average (63.8%). Levels of adult obesity are also higher in Southend-on-Sea than the England average. Every 5 days someone under the age of 79 from the Southend population dies a death that could have been prevented if the whole population met the Chief Medical Officers physical activity guidelines.
- 2.4 Since April 2013 the Council became responsible for commissioning a range of public health services that were formerly the responsibility of the NHS. The Council has a Director of Public Health who is a chief officer of the council and a statutory member of the Health & Wellbeing Board.
- 2.5 Each year, the Director of Public Health is required to publish an annual report. This report has now been published and sets out the key issues and makes recommendations to address factors that impact on the health of the population of Southend-on-Sea. The most recent version can be found at www.southend.gov.uk.
- 2.6 The findings of this project will help the Council achieve some of the key recommendations set out in the Annual Report of the Director of Public Health. It will also inform the delivery of the ambitions set out in the refreshed Southend health and wellbeing strategy³. This Strategy has 9 ambitions and the following broad impact goals:-
 - (a) Increased Physical Activity (prevention).
 - (b) Increased Aspiration and Opportunity (addressing inequality).
 - (c) Increased Personal Responsibility and Participation (sustainability).

² See Health profile, Public Health England at www.healthprofiles.info

³ For more information on the Health & Wellbeing Board, go to http://www.southend.gov.uk/info/200233/health_and_wellbeing

3. Methods

3.1 The Committee was supported by a project team comprising:-

- Councillors:- James Moyies (Chairman), Councillors Brian Ayling, Mary Betson, Caroline Endersby, Nigel Folkard, Judith McMahon, Georgina Phillips and Lesley Salter.
- Officers:- Project support was provided by James Williams, Lee Watson and Fiona Abbott.

Evidence Base

3.2 The project team met on three occasions and considered a range of quantitative and qualitative evidence to inform their approach. These sessions involved briefings from key officers informed by data and statistical information.

Briefing / information considered during review

3.3 Briefing:

- *Current local health priorities for Southend-on-Sea.*
- *Summary of the role of the Council to improve the health of the population.*
- *Example of collaborative public health work in the form of the Southend Public Health Responsibility Deal.*

3.4 Information:

- *2014 local Health Profile.*
- *Annual report of Director of Public Health.*
- *Statistical evidence from Sport England.⁴*
- *Information on some 'best practice' from other areas.*
- *On-line evidence briefing on benefits of physical exercise - YouTube clip - '23 and half hours'⁵ – this proved to be the lynch pin / good 'hook' for the project.*

Witness Session held on Friday 6th February 2015

3.5 16 expert witnesses attended to give evidence to the project team. Each witness answered specific questions relating to the project. (The questions asked and answers provided by the witnesses are available on request).

3.6 The list of witnesses is set out in **Table 1**. The project team would like to formally thank the witnesses for giving up their time to attend and

⁴ See <http://www.sportengland.org/our-work/local-work/partnering-local-government/local-sports-data> and www.activesouthend.com

⁵ See <https://www.youtube.com/watch?v=aUalnS6HIGo>

sharing their insights on the topics discussed which have helped to inform this report.

Table 1 – List of witnesses

| Name | Position/Organisation |
|-----------------------------|--------------------------------------------------------------------------------------------------|
| Councillor Ian Gilbert | Deputy Leader and Executive Councillor with responsibility for Public Health |
| Mr David Fairweather | Membership Manager, Southend Hospital NHS Trust |
| Mr James Pekett | Director of Commissioning, NHS Southend CCG |
| Ms Angela Paradise | Head of Corporate Services, NHS Southend CCG |
| Mr Nick Harris | Head of Culture, Southend-on-Sea Borough Council |
| Ms Angela Ejoh | Strategy & Commissioning Manager, Southend-on-Sea Borough Council |
| Dr Andrea Atherton | Director of Public Health, Southend-on-Sea Borough Council |
| Mr Paul Mathieson | Major Projects & Strategic Transport Policy, Group Manager, Southend-on-Sea Borough Council |
| Councillor David Norman MBE | Chairman, Southend Health & Wellbeing Board Supported by Rob Walters, Partnership Advisor |
| Ms Alison Semmence | Chief Executive, Southend Association of Voluntary Services (SAVS) |
| Ms Susie Tyer | Health Trainer Service coordinator, Parkwood Healthcare |
| Mr Ade Butteriss | Senior Partnership Advisor, Southend-on-Sea Borough Council |
| Mr Dale Spiby | Southend United Community Trust |
| Ms Chris Solis | St Luke's Community Hub, Community Projects & Volunteer Manager, Southend-on-Sea Borough Council |
| Mr Ed Sandham | Local Government Relationship Manager, Sport England |
| Mr Jason Fergus | Head of Active Essex |

3.7 The following project team Members attended – Councillor James Moyies (Chairman), Councillors Mary Betson, Caroline Endersby, Nigel Folkard, Judith McMahon, and Georgina Phillips, James Williams, Lee Watson and Fiona Abbott. Councillor Derek Jarvis also attended the event.

3.8 Apologies for absence were received from the following – Councillors Brian Ayling and Lesley Salter (project team Members), Ms Dipti Patel (Head of Public Protection, Southend-on-Sea Borough Council), Mr Nick Faint (Programme Manager, Southend-on-Sea Borough Council), Ms Melanie Craig (Acting Accountable Officer, NHS Southend CCG), Ms Nicola Barrett (Belfairs Academy) and Mr Jon Keay (Healthwatch Southend).

- 3.9 The project team agreed that the evidence day and witnesses would be grouped around the following 4 areas / issues:-
- Funding
 - Enabling role of the Council
 - Role of voluntary sector and volunteers
 - The impact of health inequalities and the questions reflected this focus.
- 3.10 The following items informed the meeting discussions:
- ✚ Extracts from Director of Public Health Report 2013 and 2014.
 - ✚ Southend Health & Wellbeing Strategy – 9 strategy ambitions and associated priorities.
 - ✚ Information provided by Mr Harris re swimming figures.
 - ✚ Information provided by Mr Mathieson re cycling, Comfy Saddle, etc. and from Bristol City Council.
 - ✚ Presentations slides provided by Sport England.
 - ✚ Presentation slides provided by Active Essex.
- 3.11 The following main themes emerged during the event:
- People can access opportunities to be physically active in a wide variety of ways, including competitive sport, active travel and leisure activities
 - The need for physical activity to be a priority for “the system” through all agendas - integration of health and social care/planning/transport/economic development etc.
 - The need improve marketing for physical activity in the Borough, under one recognisable banner wherever possible.
 - We need to make the most of every opportunity to promote physical activity (Making Every Contact Count).
 - The need to utilise existing community assets wherever possible. For example Active Southend- the community sport and physical activity network, the Advantage Card and Shoebury Youth Centre.
 - Need sustainable solutions to deliver long term measurable outcomes.
 - The engagement with key partners was a very welcome part of the evidence day.

4. Our Conclusions

- 4.1 Improving and protecting the public health is an important cross-cutting function within the Council. One of the major public health responsibilities of local councils is to develop, foster and influence relationships with the rest of the public sector, community representatives, such as Healthwatch and other local organisations. These include employers whose activities impact on the health of the local population.
- 4.2 Some of these relationships will be facilitated by the Health & Wellbeing Board – others by individual councillors in their ‘community champion role’. “Public Health is everyone’s business” and therefore needs a whole system approach.
- 4.3 At the witness session the project team heard a range of evidence of current good practice in Southend-on-Sea. It also identified a number of things that need to be done differently to support people to lead healthier lifestyles.
- 4.4 The findings from the project are set out below and the proposed future physical activity aspirations is provided in **Section 5** of the report. The headings below reflect the areas explored with the witnesses, namely:
- Funding
 - The enabling role of the Council & partners
 - Role of the voluntary sector
 - Impact of inequalities
- 4.5 **Funding**
- 4.5.1 There are a range of benefits that could be achieved at no additional cost to the public purse. Examples include embedding the delivery of ‘Making Every Contact Count’ into contracts, service specifications and every day practice.
- 4.5.2 The estimated impact of physical inactivity to Southend’s health economy is £21,472,753 per 100,000 adults per year⁶. Modelling suggests that if 75% of the Southend adult population met the Chief Medical Officers physical activity guidelines 6 premature deaths per month would be prevented (40-79 years old). If 100% met the guidelines 2 premature deaths per week could be prevented.
- 4.5.3 Some of the witnesses provided information as to the current spend for healthy lifestyles nationally and in Southend. For example, Sport

⁶ Reference

http://ukactive.com/downloads/managed/Turning_the_tide_of_inactivity.pdf

England advised that Southend had levered over £1,000,000 of funding over the previous 3 years covering a variety of initiatives.

4.5.4 It may be beneficial to explore joint commissioning opportunities to develop interventions to increase physical activity across the population. Existing joint commissioning arrangements such as the Integrated Health Pioneer Programme could provide a vehicle for such commissioning. It may be worthwhile exploring European funding opportunities in order to develop the type of 'industrial scale' capacity that is required to create a sea-change within Southend-on-Sea.

4.6 **Enabling role of Council our partners and marketing**

4.6.1 In order to deliver change we need strategic alignment to champion physical activity across all sectors. The Health and Wellbeing Board and elected members play a key strategic leadership role in ensuring that all partners prioritise healthier lifestyles and consider the impact of decisions on the population's health and wellbeing.

4.6.2 This aligns well with the Health and Wellbeing Boards ambition to be one of the healthiest towns in England by 2020. This also ties in with Southend Borough Council Public Health Departments plans to develop a 'Physical Activity Strategy' in 2015/16.

4.6.3 There was strong consensus that the public sector – and the HWB in particular - has a responsibility to enable and encourage individuals to see the benefits of being active, rather than taking a negative or apathetic view to those not active enough to receive health benefit. The Council and its partners should seek to maximise the potential of the significant number of daily contacts that services have with people to help people adopt healthier lifestyles (Making Every Contact Count).

4.6.4 At a grass-roots level better co-ordination of physical activity provision, under a single Southend-on-Sea marketing brand is required. This brand could be used to engage those currently inactive who require support and motivation in a range of ways appropriate to their needs. Active Essex has developed the "Get Essex Active" brand. It was suggested this brand could be adapted to "Get Southend Active". Active Southend could be the conduit for this grass roots level co-ordination.

4.6.5 Most witnesses agreed that improved marketing and promotion of physical activity would be extremely beneficial. Simple promotion of existing resources such as the YouTube '23 and half hours' clip is a good example, to highlight the 30 minute challenge approach.

4.6.6 Evidence based marketing activity needs to be rolled out through all partners maximising existing available channels. Some examples mentioned at the evidence session included using the big screen at the

Forum, notice screens at Southend Hospital (in A&E etc.) and at GP surgeries to promote positive messages regarding physical activity.

- 4.6.7 Research suggests that committing to a pledge increases the likelihood of behaviour change and maintenance of that behaviour change. A pledge to action forms one of the recommendations key to success.

4.7 **Voluntary sector**

- 4.7.1 The presentations from the voluntary sector representatives highlighted the importance of this sector in contributing to the vision for Southend to be one of the healthiest towns by 2020. There were good examples of existing partnership working e.g. Turning Tides personalised travel planning, however, improvements can still be made.

- 4.7.2 There needs to be greater understanding of the County Sports Network and its local delivery network (Active Southend) and maximising its potential to take a wider view on promoting physical activity. There is also a need to view sport in its widest sense and have a better understanding of local barriers to participation.

4.8 **The impact of health inequalities**

- 4.8.1 The biggest health gain for the population can be realised by getting those who currently do no physical activity doing some activity. Our interventions (including marketing) needs to take account of this.

- 4.8.2 Witnesses saw the importance of everyday activity in meeting a '30 minute challenge' e.g. active travel and that physical activity doesn't have to be an "extra" to our already busy lives. This links into existing work being undertaken by the Council's sustainable transport team. The net physical activity gain from using sustainable transport (even if it is train or bus) is often far greater than using the car.

- 4.8.3 Several witnesses stressed that any 'interventions' need to be based in the community and be community driven. There is a strong link between physical activity and mental wellbeing. An example provided was the Open Door Project at St Lukes (community gym) where physical activity is integrated with other interventions e.g. job skills.

- 4.8.4 Increasing the use of green spaces and other local assets (sea front, foreshore, cycle paths, parks etc.) is essential to help reduce disadvantage, through providing low cost opportunities to people to become active.

4.9 **Future Strategy**

- 4.9.1 Based on the above conclusions, our recommendation is that there needs to be a "whole system" Southend Physical Activity Strategy. This strategy should include an implementation plan that involves multi-



agency action. The strategy should inform future funding bids to external partners and future commissioning decisions across the whole system. The strategy will include an action plan and an implementation group requiring multi-agency representation.

- 4.9.2 It is recommended that a strong marketing focus for physical activity is required to engage with the population at a scale to promote opportunities to increase physical activity in the Borough. Increasing the scale of Making Every Contact Count training will enable brief interventions to be delivered across Southend by all agencies and sectors.

5. Proposed Future Physical Activity Aspirations for Southend-on-Sea

OUR VISION

For Southend-on-Sea to be one of the healthiest towns by 2020



Our ambition

- A town that embraces our project
- A town where people engage with each other through activity
- A town whose people live longer more active lives
- A town with reduced inequalities in lifespan and improved quality life

Our approach

- Increased accessibility for all
- Strengthened partnerships & agreed Strategy
- Acknowledge that one size doesn't fits all
- Deliver 'Making every contact count' at scale
- SMARTER use of technology/Apps/motivators
- Incentivise increased physical activity
- Community driven solutions
- Marketing

Some perceived challenges for individuals

- Mental Health and wellbeing
- Disabilities
- Time
- Money
- Perception of social / physical environment
- Lack of example setting / role models?
- Loneliness

Some motivators for individuals

- Longer life
- Better quality of life
- Better mental health
- Improved mobility
- Increased social connectedness
- Increased productivity

Core features

- Community Activities
 - Cycling
 - Swimming
 - Tai Chi
 - Dance
 - Walking

Potential Partners

- People!
- Southend-on-Sea Borough Council
- NHS Southend Clinical Commissioning Group
- Southend Hospital
- SEPT
- Voluntary sector
- Businesses
- Primary and community care providers

Some assets

- Churches
- Schools
- Community buildings
- Libraries
- Clubs
- Sea Foreshore
- People
- Open spaces – parks – cycle routes

Marketing

- High Impact Strapline- an example from Scotland: "GlasgowS miles better"
- Utilise existing assets eg. Big Screen at Forum
- Utilise existing communication channels- for example existing Council communications
- Utilise existing networks effectively- eg. Active Southend/Active Essex
- Use pledges as per evidence base
- Social media



Our community

- Encourage everyone to be champions/role models
- Advocates – businesses and community groups
- Making Every Contact Count



Pledge to Action

Part of marketing activity includes encouraging individuals and groups to pledge to achieve:

- Increased Activity
- Aim for 30 mins each day- this can be achieved in smaller chunks & 'every day stuff'
- Support others to aim for 30 mins each day
- Help others to aim for 30 mins each day



6. Contact Details

For further information about this report please contact:

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