

# Public Document Pack

**Southend-on-Sea Borough Council**

**Legal & Democratic Services**

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03 February 2022

Dear Councillor

## **PEOPLE SCRUTINY COMMITTEE - TUESDAY, 8TH FEBRUARY, 2022**

Please find enclosed, for consideration at the next meeting of the People Scrutiny Committee taking place on Tuesday, 8th February, 2022, the following report(s) that were unavailable when the agenda was printed.

### **Agenda No    Item**

3.    **Questions from Members of the Public (Pages 1 - 2)**

**Stephen Tautz**  
**Principal Democratic Services Officer**

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PEOPLE SCRUTINY COMMITTEE

8 FEBRUARY 2022

QUESTIONS FROM MEMBERS OF THE PUBLIC

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(1) Question from David Webb to the Cabinet Member for Children and Learning

Official data reveals that 79.3% of students in Southend achieved grade 4 or above in English and Maths GCSEs combined, a further 3.8% improvement on 2020 results. Grade 4 is the threshold considered to be a 'standard pass' by the Department for Education and the bottom of this grade aligns with the bottom of the previous C grade. Official data from Southend schools suggests 64.4% of Southend students achieved a grade 5 in English and maths, which is considered a 'strong pass' by the Department for Education. This is 4.4% above the 2020 figure of 60%.

**How does the Portfolio Holder feel about the results of the hard work of teachers, pupils in achieving above and beyond the National Grade?**

Thank you for your question, Mr Webb. The published results for Southend-on-Sea at GCSE level in the summer of 2021 yet again indicate how well students are achieving in our schools, even taking into account the impact of the pandemic over the last two years.

Schools have improved their ranking against all other local authorities for the four plus measure and are ranked 13<sup>th</sup> out of 151 authorities. At the strong pass, five plus measure it is even better ranked 10<sup>th</sup>.

This high level of attainment follows incremental continuous improvement over the last five years and indicates the hard work and commitment of our students, as well as the commitment and expertise of our teachers the parents who supported them. I offer my congratulations for these very strong results.

(2) Question from David Webb to the Cabinet Member for Communities and Housing

**How does the Portfolio Holder think about how Southend Council tackles obesity in children and adults and where and how the Southend Council and the GP Surgeries can tackle this?**

Thank you for your question, Mr Webb. Obesity is associated with an increased risk of many health conditions including Type 2 diabetes, coronary heart disease, some cancers and depression. One in five children already has excess weight by the time they start primary school and one in three children has excess weight by the time they leave primary school.

Obesity does not affect all groups equally. It is more common among people from more disadvantaged areas, older age groups, some black and minority ethnic groups and people with disabilities.

Environmental factors have a significant impact on promoting weight gain in individuals and populations. Key features of an obesogenic environment include availability and accessibility of unhealthy foods and a built (physical) environment that promotes inactivity. Local authorities are well positioned to develop a strategic approach and are

working with partner agencies to tackle obesity by using their policies and powers to shape an environment that support access to healthier food and lifestyle choices.

### **Current Provision**

The Council's Public Health Team and NHS partners work collectively on the Obesity (also known as the Healthy Weight) agenda. This has been identified by both organisations and stated in both the Director of Public Health's Annual Report (2020) and the Health and Wellbeing Strategy (2021) as a key priority. This is also a key priority of the NHS long-term plan.

Obesity intervention has traditionally been delivered through four tiers. Different tiers of weight management services cover different activities, hence the multi-agency approach. Tier 1 covers universal services (such as health promotion or primary care); Tier 2 covers lifestyle interventions; Tier 3 covers support for overweight and obese adults: lifestyle weight management services and specialist weight management services; and Tier 4 covers Bariatric surgery.

Locally, the Council tends to focus more on Tiers 1 and 2 while the NHS covers some Tier 2 interventions and Tiers 3 and 4 services. In the Mid and South Essex geography, Weight Management Services (WMS) have been commissioned by Southend-on-Sea CCG.

Part way through last year, Southend was an area chosen for additional national funding to deliver targeted Tier 2 adult weight management as part of the Government's Obesity strategy – this is being delivered through the Council's Wellbeing Service provider, Everyone Health with a focus on men, people with learning disabilities and people with mental illness. Everyone Health have been successful, working with local groups such as Project 49, Trust Links, Fusion, etc, to deliver weight management by mobilising their service where people normally go.

During the current financial year, two additional aspects of Tier 3 weight management provision have been put in place by NHS teams. These aspects aim to increase the uptake and effectiveness of WMS, as we move out of the Coronavirus pandemic.

### **Next Steps**

We are currently working to deliver a comprehensive, evidence-based, co-ordinated approach to weight management in Southend. This includes the new Primary Care Networks (GP groups). This approach will promote personalisation of care and support, recognising the complex, individual nature of managing weight and obesity. It will aim in the long term to shift the balance from managing ill health to prevention and promotion of healthy living.

In summary, while this pattern of commissioning will need to continue until April 2023, the medium-term vision is for Southend to engage fully in the proposed development of a common offer across the system, aiming to have consistent standards, outcomes and a common clinical policy with a strong resident-focus.