

EXECUTIVE

Date: Wednesday, 19 July 2023
Time: 12.30 p.m.
Venue: Mandela Room, Town Hall

AGENDA

1. Apologies for Absence
2. Declarations of Interest
3. Minutes - Executive - 20 June 2023 3 - 10

THE MAYOR AND EXECUTIVE MEMBER FOR ADULT SOCIAL CARE AND PUBLIC HEALTH

4. Breastfeeding Borough Declaration 11 - 24
5. Healthy Weight Declaration 25 - 76

EXECUTIVE MEMBER FOR FINANCE AND GOVERNANCE

6. Risk and Opportunity Management Policy 77 - 90
7. Any other urgent items which in the opinion of the Chair, may be considered.

THE MAYOR AND EXECUTIVE MEMBER FOR ADULT SOCIAL CARE AND PUBLIC HEALTH

8. SPECIAL URGENT ITEM: Governance Improvement: Next Steps - Resourcing the Financial Recovery and Resilience and Cultural Transformation Programmes 91 - 100

Charlotte Benjamin
Director of Legal and Governance Services

Town Hall
Middlesbrough
Tuesday, 11 July 2023

MEMBERSHIP

Mayor C Cooke (Chair) and Councillors T Furness, P Gavigan, P Storey, J Thompson, Z Uddin and N Walker.

Assistance in accessing information

Should you have any queries on accessing the Agenda and associated information please contact Chris Lunn / Scott Bonner, 01642 729742 / 01642 729708, chris_lunn@middlesbrough.gov.uk / scott_bonner@middlesbrough.gov.uk

EXECUTIVE

A meeting of the Executive was held on Tuesday 20 June 2023.

PRESENT: Mayor C Cooke (Chair), T Furness and Z Uddin

PRESENT BY INVITATION: Councillors D Davison, D McCabe and M Storey

OFFICERS: M Adams, S Bonner, R Brown, G Cooper, G Field, C Heaphy, R Horniman, A Humble, D Middleton, A Perriman and E Scollay

APOLOGIES FOR ABSENCE: Councillors D Branson, P Storey, J Thompson and N Walker

23/1 **DECLARATIONS OF INTEREST**

There were no declarations of interest received at this point in the meeting.

23/2 **MINUTES - EXECUTIVE - 4 APRIL 2023**

The minutes of the Executive meeting held on 4 April 2023 were submitted and approved as a true record.

23/3 **MINUTES - EXECUTIVE - 18 APRIL 2023**

The minutes of the Executive meeting held on 18 April 2023 were submitted and approved as a true record.

**** SUSPENSION OF COUNCIL PROCEDURE RULE NO. 5 - ORDER OF BUSINESS**

ORDERED: that in accordance with Council Procedure Rule No. 5, the Committee agreed to vary the order of business to consider agenda item 10, Approach to Nutrient Neutrality and delivery of Middlesbrough Council Housing schemes, as the next item of business.

23/4 **APPROACH TO NUTRIENT NEUTRALITY AND DELIVERY OF MIDDLESBROUGH COUNCIL HOUSING SCHEMES**

The Executive Member for Regeneration submitted a report for Executive's consideration.

The report set out the background to Nutrient Neutrality and the Council's approach to dealing with it and sought approval for the assessment of the Council's land holdings to be used as mitigation to achieve Nutrient Neutrality.

On 16th March 2022, Natural England published statutory advice for certain local planning authorities, including Middlesbrough Council, which set out a requirement for new developments to achieve Nutrient Neutrality. All planning authorities within the Tees River Catchment were affected by this advice, due to excess levels of nitrogen being recorded in the River Tees.

The Conservation of Habitats and Species Regulations 2017 (as amended) were the UK's transposition of European Union Directive 92/43/EEC on the 'Conservation of natural habitats and of wild fauna and flora' (the Habitats Directive). The Habitats Directive stated:

'[Whereas] an appropriate assessment must be made of any plan or programme likely to have a significant effect on the conservation objectives of a site which has been designated or is designated in future'.

The Teesmouth and Cleveland Coast Special Protection Area and Ramsar Site (in the report referred to as the SPA) was a designated European habitat site, meaning it was offered the highest level of protection under the legislation. The Council, in its role as the 'Competent

Authority', had a statutory duty to ensure that new development proposals accorded with this legislation. Therefore, the Council was prohibited from allowing development proposals to proceed if they were likely to have a significant effect on the SPA.

The statutory advice issued by Natural England meant that certain developments, which could lead to an increase in the level of nitrogen in the River Tees, could not proceed without achieving Nutrient Neutrality.

OPTIONS

If the Council wished to bring forward its own land for in-scope housing development, then it was likely that offsite mitigation would need to be secured. This could be done through Natural England's Nutrient Mitigation Scheme or any alternative third-party mitigation scheme (should they have been forthcoming).

It could also have been achieved through the acquisition of alternative agricultural land elsewhere in the Tees Catchment, or the development of constructed wetlands.

All of these were likely to be costly and/or time consuming to achieve, potentially making it more challenging to bring Council-owned land forward for development. It was not recommended that any of these options be pursued in the absence of full consideration of using the Council's own landholdings.

ORDERED

That Executive:

- 1. Agree to take the sites identified in Appendix 4 out of agricultural use, once all existing farm business tenancies have expired, so that they can be used as mitigation to achieve Nutrient Neutrality; and**
- 2. Delegate authority to the Director of Regeneration, in consultation with the Executive Member for Regeneration, to agree an internal credit system for the allocation of nitrogen credits to mitigate the impact of new housing development.**

REASONS

To enable the use of the Council's landholdings to support the delivery of new housing, which is either being brought forward on Council-owned land or by third parties elsewhere.

23/5

CORPORATE PERFORMANCE REVIEW: YEAR END 2022/23

The Executive Member for Finance and Governance submitted a report for Executive's consideration.

This report advised Executive of Year End corporate performance at 2022/23. It also provided the necessary information to enable Executive to discharge its performance management responsibilities, and where appropriate, sought approval of any changes (where those were within the authority of Executive).

The Council's Scheme of Delegation gave Executive collective responsibility for corporate strategic performance, together with and associated actions.

The report provided the necessary information to enable Executive to discharge its performance management responsibilities, setting out progress against Executive action, the Strategic Plan and other key associated items, together with actions to be taken to address any issued identified.

The projected 2022/23 Year End financial outturns were presented separately and were not repeated in this report. Where performance had a significant impact on finances this is highlighted within the body of the report.

OPTIONS

No other options were presented as part of the report.

ORDERED

That Executive:

- 1. Approve the proposed changes to Executive actions, detailed in Appendix 1 of the report;**
- 2. Note progress of delivery of the Strategic Plan 2022-24 at Quarter Four / 2022/23 Year End, detailed in Appendix 2 of the report;**
- 3. Approve the proposed changes to the Strategic Plan workplan initiatives, detailed in Appendix 3 of the report;**
- 4. Note the Council's updated position in relation to Strategic Risk, at Year End 2022/23 at Appendix 4 of the report and;**
- 5. Note progress of the 2022/23 Directorate Priorities at Quarter Three 2022/23, detailed in Appendix 5 of the report.**

REASONS

To enable the effective management of performance and risk in line with the Council's Local Code of Corporate Governance.

23/6

REVENUE AND CAPITAL BUDGET – YEAR END OUTTURN POSITION 2022/23

The Executive Member for Finance and Governance submitted a report for Executive's consideration.

The report advised Executive of the Council's financial position at year-end 2022/23.

The Council's Scheme of Delegation gave Executive collective responsibility for corporate strategic performance and financial management / monitoring, together with associated actions. Standing Orders and Financial Procedures required Executive's approval for major virements between revenue budgets, and in-year changes to the Council's Capital Investment Strategy (Capital Programme).

The report enabled Executive to discharge its financial management responsibilities, by setting out:

- The final pre-audited revenue and capital budget outturn for the year-end 31 March 2023;
- The statement of the Council's borrowing and reserves and provisions; and
- The actions the Council had taken, and planned to take, to address the issues identified.

A revised Investment Strategy (Capital Programme) for the period 2023/24 to 2025/26 was attached at Appendix 1 considering the 2022/23 outturn for Executive's consideration and approval.

The approved 2022/23 Revenue budget for the Council was £118,328,934 as set out in the Revenue Budget, Council Tax, Medium Term Financial Plan (MTFP) and Capital Strategy 2022/23 Report approved by Council on 23 February 2022.

The Council continued to operate in a challenging financial and economic environment with inflation, as measured by CPI, at the financial year-end 2022/23 running at 10.1%. Inflation was forecast to remain high throughout 2023/24 and potentially into 2024/25. The Council's financial resilience had been depleted by the reduction in earmarked reserves in recent years, as referenced by the former interim s151 Officer, with earmarked usable reserves totalling £4.515m at 31 March 2023.

It was essential that actions were taken through the 2023/24 financial year to rebuild the Council's financial resilience over the medium term. The General Fund Reserve stood at £12.041m as planned in the MTFP. This was equivalent to 9.5% of the 2023/24 net revenue budget and should only be used in exceptional circumstances as a last resort.

Children's Social Care expenditure levels remained the biggest area of financial risk to the Council given the demand and price pressures facing the service. As previously reported to Executive, the Children's Social Care budget was increased during 2022/23 by £5.665m to a total of £45.409m. The final outturn against this budget was £54.832m an overspend of £9.423m (20.8%). The 2023/24 base budget approved by Council in February 2023 recognised the ongoing financial pressures in the service, setting a budget of £54.649m and the Service had a Finance Improvement Plan requiring the delivery of savings totalling £2.9m in 2023/24 and a further £1.8m in 2024/25. It is essential that this plan is delivered in full to avoid further weakening of the Council's financial position.

OPTIONS

No other options were put forward as part of the report.

ORDERED

In respect of the General Fund Revenue Budget, Executive:

- 1. Note the 2022/23 final pre-audited net revenue outturn of £121.084m against an approved budget of £118.329m, an overspend of £2.755m (2.3%). This is an improvement of £0.656m from the forecast outturn at Quarter Three;**
- 2. Note that within the outturn, total revenue expenditure of £0.755m in relation to transformation of Children's Services was assessed as qualifying expenditure under the Government's Flexible Use of Capital Receipts initiative and therefore supported the reduction of the overall revenue outturn overspend position. The Flexible Use of Capital Receipts Strategy was approved by Full Council on 7 September 2022;**
- 3. Note the progress against the Financial Recovery Plan 2022/23 as approved by Executive on 18 October 2022, which had succeeded in contributing to reducing the forecast overspend from £9.012m (7.6%) at Quarter One to £2.755m (2.3%) at year-end;**
- 4. Approve that the final revenue over-spend of £2.755m will be met by a contribution from the earmarked Social Care Transformation Reserve, leaving a balance of £2.354m in the Reserve. This Reserve would then be closed and its balance transferred;**
- 5. Approve, in recognition of the pressures that face the wider Council financial position, that a corporate Financial Resilience Reserve (FRR) be established as part of the closure of accounts process at the 31 March 2023. The purpose of the Reserve was to meet unforeseen financial pressures that could not ultimately be managed within directorate budgets. The Reserve would also meet exceptional one-off costs to meet the Council's improvement work to satisfy the Department for Levelling Up, Housing and Communities (DLUHC) and the External Auditor's requirements;**
- 6. Approve the balance of £2.354m on closing the Social Care Transformation Reserve shall be transferred to the Financial Resilience Reserve;**
- 7. Note that further consideration will be given to the feasibility of revising the 2023/24 Flexible Use of Capital Receipts Strategy to support further transformation across Council services during 2023/24 and in developing the 2024/25 Medium Term Financial Plan (MTFP). This would be addressed in future reports to the Executive in due course;**
- 8. Note that the initial analysis of the financial outturn has highlighted the risk of potential ongoing financial pressures arising from 2022/23 (detailed in table 14 and paragraphs 62 and 63 of the report). These would be investigated further and be subject to management action by the Leadership Management Team within 2023/24 and would inform the update and development of the Council's Medium Term Financial Plan for 2024/25 to 2026/27; and**
- 9. Note the management actions being taken to control expenditure in order to mitigate the risk of overspending in the future (detailed in paragraphs 64 to 67 of the report).**

In respect of the Capital Programme and Treasury Management, Executive:

- 1. Note the 2022/23 capital programme final pre-audit outturn of £58.962m against a revised capital budget of £61.456m, an underspend of £2.494m (4%). The**

outturn represented an underspend of £65.863m (53%) against the original capital budget approved by Council in February 2022;

2. Approve the revised Investment Strategy to 2025/26 at Appendix 1 of the report, including £181.194m for the financial years 2023/24 to 2025/26;
3. Note the 2023/24 allocation included £4.942m of funds that were assumed to be spent in 2022/23 as in the Quarter Three Executive report and which had slipped to 2023/24; and
4. Note the Treasury Management outturn position with respect to the Council's prudential indicators which were set out at paragraphs 91 to 99 of the report.

In respect of the Dedicated Schools Grant (DSG), Executive:

1. Note the in-year deficit of £2.809m for 2022/23, including £1.959m relating to the High Needs Block;
2. Note the total cumulative deficit of £6.565m at 31 March 2023, including £7.021m relating to the High Needs Block, which were set out in Table 15 and paragraphs 68 to 74 of the report; and
3. Note under existing government regulations this could not be funded from the General Fund, and the Council was required to deliver a recovery plan to the Department for Education (DfE).

In respect of the Council's reserves and provisions, Executive:

1. Note that the balance on the General Fund Reserve at the 31 March 2023 was £12.041m as planned in the 2023/24 MTFP;
2. Note the balance on other earmarked reserves and provisions which were set out in Table 19 (paragraphs 100 to 104) and detailed in Appendix 2 of the report; and
3. Note that usable earmarked reserves as set out in Table 19 of the report were at a critically low level. Measures would be required during 2023/24 and in developing the 2024/25 budget and MTFP to rebuild the Council's financial resilience over the medium term.

REASONS

To enable the effective management of finances, in line with the Council's Local Code of Corporate Governance, the Scheme of Delegation and agreed corporate financial regulations.

23/7

PROPOSAL TO BRING SUBSTANCE MISUSE CLINICAL PRESCRIBING SERVICE IN-HOUSE

The Mayor and Executive Member for Adult Social Care submitted a report for Executive's consideration.

The report sought approval to bring the specialist clinical/prescribing service for substance misuse into Middlesbrough Council, for delivery to commence 1 October 2023.

The current service provider ended their provision on 30 September 2023 and no other organisations submitted tender proposals following a procurement process. There was an absolute requirement to have the service in place. Therefore, there was a need for as much certainty as possible in order to mobilise a new service within such extremely challenging timescales.

It was imperative that essential elements, such as securing clinical staff, having a prescribing system and appropriate buildings to deliver the service from, were all in place. These were complex undertakings and required specialist knowledge from a broad range of individuals, teams and organisations.

The specialist prescribing service in Middlesbrough was currently contracted with Foundations Medical Practice. Historically this service had been delivered as part of a coterminous

arrangement with the former South Tees Clinical Commissioning Group (CCG), now the North East and North Cumbria Integrated Care Board (ICB), who commissioned Foundations for primary care.

The ICB provided an enhanced service payment in relation to the Foundations patient group, which augmented the general medical element of service delivery. This, along with the Public Health and various primary care contracts, had historically made the service financially viable and ensured that the healthcare needs of an underserved population group had been more effectively met.

The service had been affected by the overall budget reductions to substance misuse with significant cuts to the funding since 2013. These impositions, on both the service and wider substance misuse model, had resulted in caseload sizes becoming dangerously high, which restricted the amount of support that could be provided to individuals who were reliant on the service.

OPTIONS

Appendix 3 of the report contained a detailed options appraisal.

However, in summary other potential decisions were considered but were not recommended for the following reasons:

- 1. Do nothing – not a feasible option as the outcome would have resulted in no service provision on 1/10/23;**
- 2. Direct award of a contract to a suitable provider organisation – there were several major risks associated with this option, mainly regarding to the lack of certainty in this process within the already tight timescales. Other risks included:**
 - i) There had been no market interest in the tender. Therefore, this may not have yielded a suitable provider willing to take the service on;**
 - ii) Potential that the process would have failed during negotiations, which would have left no timescales to get alternative provision in place; and**
 - iii) Highly likely to have been a more costly option in order to secure a suitable provider and expected that the preferred delivery model would have had to be compromised;**
 - iv) Would have been a limited time solution and required taking the service back to the market in the near future – likely to have to have changed the model to secure a bid;**
- 3. Direct award of a contract to a Primary Care Network or GP practice – the risks outlined in option b. above also apply here. There is even less likelihood of securing a suitable provider from this sector, most crucially due to the lack of skills and experience within local primary care.**

ORDERED

That Executive approve the specialist clinical/prescribing service for substance misuse be brought into Middlesbrough Council.

REASONS

Detailed reasons were provided in paragraphs 19 to 34 of the report, however in summary there was no option to risk having any break in service provision.

This would have resulted in serious risk of overdoses and deaths and would have had extremely negative consequences for a large number of extremely vulnerable people. This decision provided appropriate timescales to enable the future service to be planned, developed and implemented safely, in conjunction with relevant partners and stakeholders.

The Children and Young People's Learning Scrutiny Panel had undertaken a review entitled Youth Offending and Partnership Working with Schools. A copy of the full report was attached. The Scrutiny Panel had made five recommendations upon which a response was sought from the relevant service area.

The Deputy Mayor and Executive Member for Education and Culture and Interim Director of Children's Care submitted a service response to the recommendations of the Scrutiny Panel. A copy of the action plan was attached.

The former Chair of the Children and Young People's Learning Scrutiny Panel presented the final report to Executive. The Deputy Mayor and Executive Member for Education and Culture presented the service response.

ORDERED

1. That the content of the Children and Young People's Learning Scrutiny Panel final report on Youth Offending and Partnership Working with Schools (Appendix 1) be noted; and
2. The action plan (Appendix 2), developed in response to the Scrutiny Panel's recommendations, be approved.

REASON

It was a requirement that Executive formally considered the scrutiny panel's report and confirmed the service area's response to the accompanying plan.

23/9

FINAL REPORT OF THE CHILDREN AND YOUNG PEOPLE'S SOCIAL CARE AND SERVICES SCRUTINY PANEL: SUPPORTING YOUNG PEOPLE TO PREPARE FOR ADULTHOOD AND INDEPENDENCE - SERVICE RESPONSE

The Children and Young People's Social Care and Services Scrutiny Panel had undertaken a review entitled Supporting Young People to Prepare for Adulthood and Independence. A copy of the full report was attached. The Scrutiny Panel had made 23 recommendations upon which a response was sought from the relevant service area.

The Executive Member for Children's Services and Interim Director of Children's Care submitted a service response to the recommendations of the Scrutiny Panel. A copy of the action plan was attached.

The former Chair of the Children and Young People's Social Care and Services Scrutiny Panel presented the final report to Executive. The Executive Member for Children's Services presented the service response.

ORDERED

1. That the content of the Children and Young People's Social Care and Services Scrutiny Panel final report on Supporting Young People to Prepare for Adulthood and Independence (Appendix 1) be noted; and
2. The action plan (Appendix 2), developed in response to the Scrutiny Panel's recommendations, be approved.

REASON

It was a requirement that Executive formally considered the scrutiny panel's report and confirmed the service area's response to the accompanying plan.

23/10

ANY OTHER URGENT ITEMS WHICH IN THE OPINION OF THE CHAIR, MAY BE CONSIDERED.

None.

All decisions will come into force after five working days following the day the decision(s) was published unless the decision becomes subject to the call in procedures.

MIDDLESBROUGH COUNCIL	
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Report of:	The Mayor and Executive Member for Adult Social Care & Public Health; Director of Public Health (South Tees)
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Submitted to:	Executive
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Date:	19 July 2023
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Title:	Breast Feeding Boroughs Declaration
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Report for:	Decision
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Status:	Public
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Strategic priority:	Children and young people
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Key decision:	Yes
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Why:	Decision(s) will have a significant impact in two or more wards
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Urgent:	No
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Why:	Not Applicable
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Executive summary

The report presents an overview of the importance of Breast Feeding (along with current data) and the benefits to both mother and child and the wider community. The report sets out how the adoption of the Breast Feeding Boroughs Declaration across Middlesbrough and Redcar & Cleveland would increase local breastfeeding rates and reduce health inequalities.

The report gives an overview of what it means for South Tees to become a Breast Feeding Borough and the benefits for Middlesbrough and Redcar and Cleveland. The report sets out the ten commitments that will be delivered through the existing and well-established Infant Feeding Steering Group across South Tees to increase breastfeeding rates, reduce bottle (formula) fed culture and normalise breastfeeding across the civic, community and service levels to support the best start in Life for Children across South Tees.

The recommended decision for the Executive to approve the adoption of the Breast Feeding Boroughs Declaration as a Local Authority and agree to promote themselves as a Breast Feeding Borough by implementing the ten declarations, is the best option to increase breast feeding rates across South Tees, whilst also preventing the worsening of health inequalities.

The implications of the recommendations have been considered by the appropriate officers of the Council and is set out in the main body of the report.

Purpose

1. The purpose of the report is to seek approval from the executive of the Breast Feeding Boroughs Declaration which has been developed in alignment with the Council's 'Health and Wellbeing' recovery plan and the wider Public Health South Tees Strategy.

Background and relevant information

2. Across South Tees we recognise the difference that early experiences and responsive parenting can make to an infant and young person's health, well-being, and future life chances. Those who breastfeed are likely to have better maternal health and wellbeing and bond better with their baby. As breastfed children get older, they also have better attachment with their parents and build better relationships with others (UNICEF 2018).
3. Many think the benefits of breastfeeding are purely nutritional; not realising that breastfeeding also protects the health of mothers and their children. Reductions in the risk of infants developing illnesses and protection against childhood diseases later in life are well researched. Evidence also suggests that breastfed babies benefit from improved brain development (WHO, 2016).
4. Despite the evidence to support breastfeeding, rates at birth across South Tees remain stubbornly lower than the England average as well as there being a significant drop off between birth and 6-8 weeks as demonstrated in the table below.

	Middlesbrough	Redcar and Cleveland	England
Breastfeeding rate at birth (2018/19)	48.1%	49.6%	67.4%
Breastfeeding rate at birth (local data 2021/22)	57.4%	58.9%	Not available
Breastfeeding rate at 6-8 weeks (2021/22)	33.9%	31.5%	49.3%

5. As well as low breastfeeding rates, there is a strong bottle (formula) feeding culture in the UK which can be demonstrated when comparing the numbers of formula fed and breastfed children within South Tees (appendix A).
6. According to UNICEF as many as 8 out of 10 women in the UK stop breastfeeding before they would like to, and many women experience barriers to breastfeeding that are completely out of their control. Professor Amy Brown therefore states that in order 'to change breastfeeding, we must therefore change how breastfeeding, and mothering is perceived in our society by removing structural barriers rather than

- targeting the individual alone. We must create an environment where breastfeeding is normal, accepted and protected.’
7. Further to this UNICEF highlights the need to acknowledge that infant feeding is a public health imperative for which the government, policy makers, communities and families all share responsibility.
 8. Therefore, changes are needed at a population level to support the normalisation of breastfeeding to ensure that in the future more families feel comfortable and confident in their feeding choices.
 9. By creating a declaration on breastfeeding, the aim is to make breastfeeding the norm across South Tees.
 10. The declaration will include 10 commitments developed in consultation with local families that will promote action at a civic, community and service level to normalise the breastfeeding agenda and focus directly on change within the local authority to promote a breastfeeding friendly culture for all. This will include changes at a policy level as well as developing a public facing campaign to increase the visibility of breastfeeding across South Tees.
 11. The proposed ten commitments are as follows:
 - i. Representation at a senior leadership level in the form of breastfeeding champions.
 - ii. As a gold standard all relevant services associated with the care of families are accredited or working towards accreditation of the UNICEF Baby Friendly Initiative (*N.B. R&C Health Visiting Service are going for BFI Gold in 2023, R&C Family Hubs are BFI accredited, requiring a reassessment before going for BFI Gold, Harrogate and District Foundation Trust (HDFT) Healthier Together Service are BFI Gold accredited*).
 - iii. Provide ongoing community support services that are accessible to all in South Tees.
 - iv. Ensure that families have access to the correct information and resources and can ask for support.
 - v. Act as a best practice employer for breastfeeding and support employers across South Tees to become breastfeeding friendly workplaces.
 - vi. Deliver breastfeeding awareness training to upskill a variety of work forces in South Tees.
 - vii. Ensure that events held on council property or by the council are breastfeeding friendly.

- viii. Ensure that families have access to breastfeeding friendly places by increasing the number of venues signed up to the breastfeeding welcome scheme.
 - ix. Embed breastfeeding in education from an early age.
 - x. Increase the visibility of breastfeeding in South Tees via a long-term infant feeding campaign using positive images of real local women breastfeeding in South Tees to support families to make informed infant feeding choices.
12. Action to implement the commitments will be led by the well-established Infant Feeding Steering Group (through the South Tees Best Start Partnership) and will link into the current infant feeding delivery plan.
13. Once the declaration is signed and actions are in place to implement the commitments, the Infant Feeding Steering Group will seek to install permanent signage across key sites in Middlesbrough and Redcar and Cleveland to recognise that South Tees is a Breastfeeding Friendly Borough.
14. Similar signage has been installed in Blackburn with Darwen (appendix B) along with a public facing campaign to promote breastfeeding, this campaign and signage led to an increase in the continuation of breastfeeding rates at 6-8 weeks.

What decision(s) are being recommended?

- 15. That the Executive approves the adoption of the Breast Feeding Boroughs Declaration as a Local Authority.
- 16. The Executive agrees to promote themselves as a Breast Feeding Borough by implementing the ten declarations (appendix C).

Rationale for the recommended decision(s)

- 17. It is recommended to support the Breast Feeding Borough Declaration for change to take place at a population level to support the normalisation of breastfeeding and thus, increase breastfeeding rates across South Tees and in turn reduce the bottle (formula) fed culture.
- 18. The programme supports the strategic direction of the Children's Trust in Middlesbrough and the Children and Young People's Partnership in Redcar and Cleveland.
- 19. The budget aligned to this programme is £10,000 from within existing budgets for Middlesbrough and R&C Public Health, which will support the development of the Breast Feeding Boroughs branding, professional images of local people, the continuation of the Breast Feeding Welcome Scheme licence (venues registering as breast feeding friendly), permanent signage and UNICEF Baby Friendly Accreditation.

20. The benefits to breast feeding for the health of the mother and child shows resounding evidence that breast feeding saves lives, improves health, and cuts costs in every country worldwide (UNICEF). Breast feeding protects children from a range of illnesses including infection, diabetes, asthma, heart disease, obesity as well as Sudden Infant Death Syndrome (cot death). The benefits to maternal health include protecting mothers from breast and ovarian cancers and heart disease.
21. Breast feeding contributes to significant savings to the NHS. A NICE costing report estimates that Baby Friendly accreditation will start to save a facility money after three years, owing to a reduction in the incidence of certain childhood illnesses. Moderate increases in breast feeding translates into cost savings for the NHS of many millions of pounds, and tens of thousands of fewer hospital admissions and GP consultations (UNICEF Baby Friendly report).
22. Breast Feeding Boroughs will support to normalise breast feeding and increase the rates of breast feeding at initiation and 6-8 weeks. A similar campaign which was successfully delivered in Blackburn with Darwen, resulted in the continuation of breast feeding for months after birth.

Other potential decision(s) and why these have not been recommended

23. There are no other decisions to be made. To do nothing will result in possible decreases of breast feeding rates across South Tees and worsening of health inequalities.

Impact(s) of the recommended decision(s)

Legal

24. No foreseeable legal impact to becoming a Breast Feeding Borough.

Strategic priorities and risks

25. Strategic Priority: Creating environments for healthy food choices and physical activity
26. **Risk description:** The risks to not adopting and achieving the Breast Feeding Boroughs Declaration, will lead to the breast feeding rates across South Tees remaining stagnant and therefore, resulting in wider health inequalities, and poorer health and wellbeing outcomes for children and their mothers. This will result in increasing demands on services associated with children and their mothers, along with budgets.

Human Rights, Equality and Data Protection

27. Not applicable

Financial

28. There are no direct financial implications arising from this report as all planned expenditure will be met from within the approved Public Health budget.

Actions to be taken to implement the recommended decision(s)

Action	Responsible Officer	Deadline
Implementation of the Breast Feeding Boroughs Declaration by the Infant Feeding Steering group over the next 12 months, leading to a full Breast Feeding Boroughs status by April 2024.	Anne Rose	April 2024
Executive agrees for South Tees to be Breast Feeding Borough status.	Anne Rose	April 2024

Appendices

1	Data Report – breast feeding rates at initiation and 6-8 weeks for both Middlesbrough and Redcar and Cleveland
2	Breast Feeding Boroughs Blackburn with Darwen
3	Breast Feeding Boroughs – 10 Commitments

Background papers

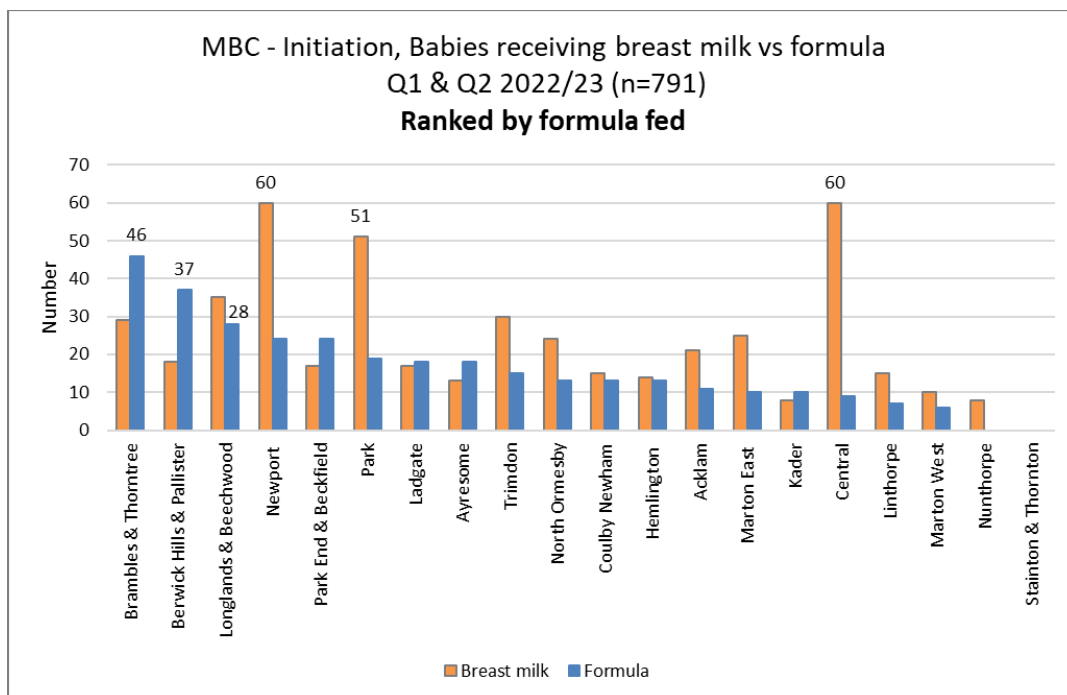
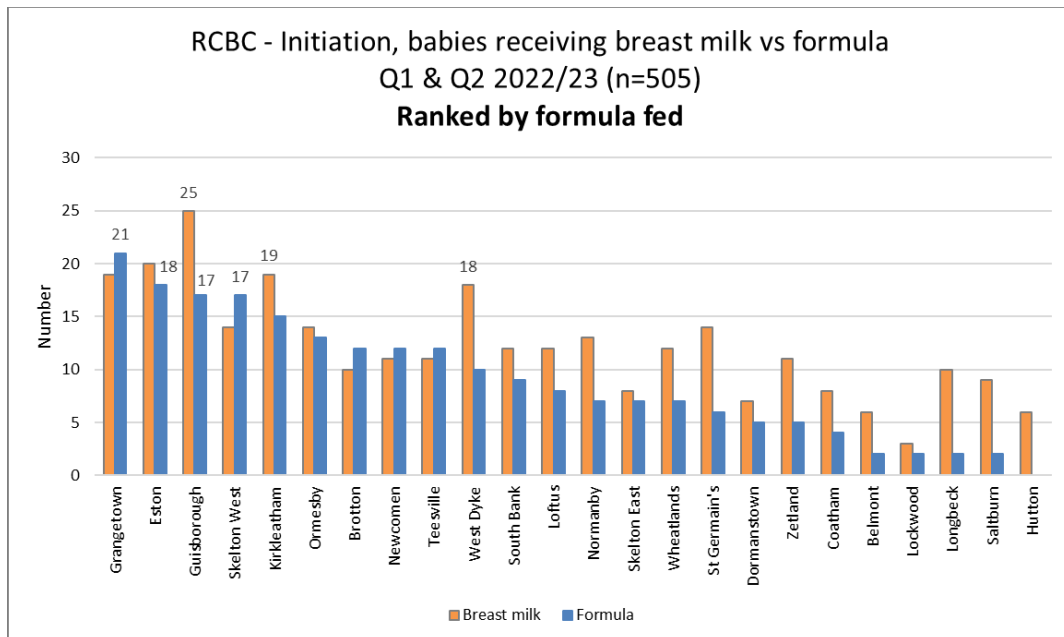
Body	Report title	Date

Contact: Anne Rose – Health Improvement Specialist (Early Years & Healthy Weight)

Email: anne_rose@middlesbrough.gov.uk

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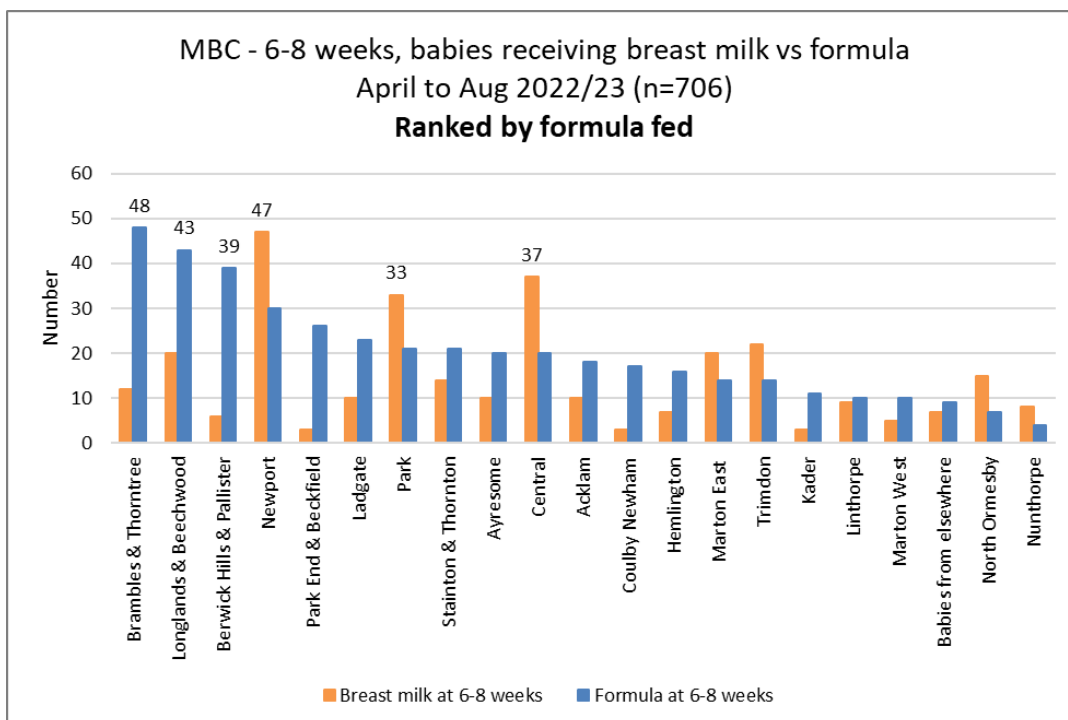
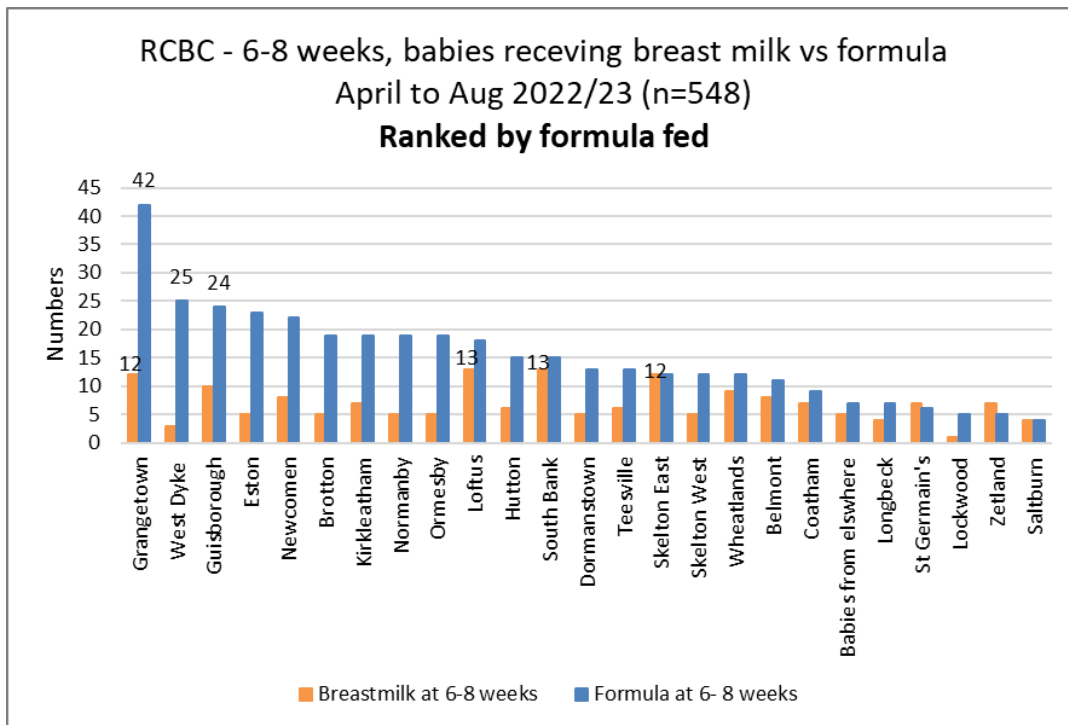
Appendix A - Data Report – breast feeding rates at initiation and 6-8 weeks for both Middlesbrough and Redcar and Cleveland



Initiation data - The highest number of babies receiving formula are in the following wards:

RCBC - Grangetown, Eston, Guisborough and Skelton West.

MBC - Brambles & Thortree, Berwick Hills & Pallister, Longlands & Beechwood.



6-8 weeks data - The highest number of babies receiving formula are in the following wards:

RCBC - Grangetown, West Dyke, Guisborough.

MBC - Brambles & Thorntree, Longlands & Beechwood, Berwick Hills & Pallister.

Wards to focus on to reduce the number of babies receiving formula and to encourage breast milk currently are:

RCBC - Grangetown, Eston, Guisborough, Skelton West and West Dyke

MBC - Brambles & Thorntree, Berwick Hills & Pallister, Longlands & Beechwood.

Please note: There are very good breastfeeding cultures in Newport, Central and Park

Appendix B - Breast Feeding Boroughs Blackburn with Darwen

Examples of permanent signage and localised campaign material from Blackburn with Darwen, following the launch of this campaign breastfeeding rates at 6-8 weeks increased.

Period	Blackburn with Darwen				North West	England
	Count	Value	95% Lower CI	95% Upper CI		
2015/16	695	*	-	-	*	43.2%*
2016/17	647	*	-	-	*	44.4%*
2017/18	447	*	-	-	*	43.1%*
2018/19	-	*	-	-	38.9%	46.2%*
2019/20	848	*	-	-	*	48.0%*
2020/21	860	*	-	-	*	47.6%*



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Appendix C – Breast Feeding Boroughs – 10 Commitments

The proposed commitments are as follows:

- 1) Representation at a senior leadership level in the form of breastfeeding champions
- 2) As a gold standard all relevant services associated with the care of families are accredited or working towards accreditation of the UNICEF Baby Friendly Initiative
- 3) Provide ongoing community support services that are accessible to all in South Tees
- 4) Ensure that families have access to the correct information and resources and can ask for support
- 5) Act as a best practice employer for breastfeeding and support employers across South Tees to become breastfeeding friendly workplaces
- 6) Deliver breastfeeding awareness training to upskill a variety of work forces in South Tees
- 7) Ensure that events held on council property or by the council are breastfeeding friendly
- 8) Ensure that families have access to breastfeeding friendly places by increasing the number of venues signed up to the breastfeeding welcome scheme
- 9) Embed breastfeeding in education from an early age
- 10) Increase the visibility of breastfeeding in South Tees via a long-term infant feeding campaign using positive images of real local women breastfeeding in South Tees to support families to make informed infant feeding choices

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<p>MIDDLESBROUGH COUNCIL</p>	
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<p>Report of:</p>	<p>The Mayor and Executive Member for Adult Social Care & Public Health; Director of Public Health (South Tees)</p>
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<p>Submitted to:</p>	<p>Executive</p>
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<p>Date:</p>	<p>19 July 2023</p>
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<p>Title:</p>	<p>Healthy Weight Declaration</p>
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<p>Report for:</p>	<p>Decision</p>
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<p>Status:</p>	<p>Public</p>
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<p>Strategic priority:</p>	<p>All</p>
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<p>Key decision:</p>	<p>Yes</p>
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<p>Why:</p>	<p>Decision(s) will have a significant impact in two or more wards</p>
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<p>Urgent:</p>	<p>No</p>
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<p>Why:</p>	<p>Not Applicable</p>
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Executive summary

- The report outlines an overview of the process of signing up to the Healthy Weight Declaration (HWD) and the recommendation to progress Middlesbrough Council’s adoption of the declaration.
- The report outlines the aim of the HWD to increase the number of people living in Middlesbrough who are a healthy weight and improve nutrition and hydration outcomes across the town.
- The report provides a summary of the current obesity rates in Middlesbrough for children and adults either overweight, living with obesity or living with severe obesity.
- The report demonstrates the HWD 16 commitments that provide strategic vision and aspiration for the council. It offers a rationale and platform to connect council teams, bringing them together to raise awareness about the importance of healthy weight and to deliver interventions.

Purpose

1. The purpose of the report is to seek approval from the Executive to progress with Middlesbrough Council's adoption of the Healthy Weight Declaration, ensuring it is aligned to the Council's 'Health and Wellbeing' recovery plan and the wider Public Health South Tees Strategy, which a particular focus to reduce obesity levels and thereby improve both the health of local communities and those working for the council.

Background and relevant information

2. Being overweight or living with obesity increases the risk of serious health problems, including disability, disease and death, and have substantial long-term economic, wellbeing and social costs. Diet and obesity-related ill-health has a huge financial impact on the NHS with estimates that it costs the UK around £6 billion each year, before we consider the economic and societal impacts due to reduced productivity and obesity-related illness that make people unable to work.
3. In Middlesbrough, an estimated 71% of adults (18+) are overweight or living with obesity, with 28% mothers living with obesity in early pregnancy.

1 in 3 children in reception are overweight or living with obesity and by the age of 11 (Year 6), 1 in 4 children are overweight or living with obesity, with higher prevalence of excess weight being strongly associated with increasing deprivation.

4. The current cost of living crisis has resulted in reduced household budgets as prices of essentials such as food and fuel increase, as well as rising housing rents and mortgages. Food costs alone rose by over 13% in the 12 months up to August 2022. By June 2022, 1 in 6 households were already in serious financial difficulty impacting on both physical and mental health and well-being. Lower income families are more vulnerable to increases in the cost of living; they have less money to spend and less flexibility when it comes to household budgets. The poorest fifth of families spend almost two-fifths (37%) of their income on essentials (food, housing, fuel and power).
5. Being overweight or living with obesity can be prevented, but it is a normal reaction to an abnormal environment, where it is very difficult to achieve and maintain a healthy weight given all the external factors and influences on our lives. We therefore need to look at the whole system of social, economic and environmental factors that impact on weight.
6. The HWD has been developed to support local authorities to demonstrate commitment at a leadership level to develop and implement policies that promote healthy weight and improve the health and well-being of the local population.
7. Following its initial launch in August 2015, the HWD was first adopted by Blackpool Council in January 2016. It has subsequently been adopted by the following councils; St Helens, Knowsley, Blackburn with Darwen, Lancashire, Sefton, Cumbria, Allerdale, Copeland, Eden, Carlisle, South Lakeland, Barrow in Furness, Rochdale, Liverpool, Cheshire West, Cheshire, Pendle, Leeds, Kirklees, City of York, Rotherham, Devon, Bristol, Plymouth and Sunderland.

8. Middlesbrough Council has an important role to play. We control planning, public and environmental health, leisure and recreation and regeneration – the HWD is a vehicle to take a whole-systems approach needed to tackle this complex issue. The declaration can have an impact across local authority departments, making sure the council works as one to achieve maximum impact and, ideally by working with other local partners, will have an impact far beyond council controlled areas.
9. The Healthy Weight Declaration (HWD) includes 16 standard commitments (appendix 1, page 14).
10. To meet the 16 commitments Public Health will lead and develop the following five areas:
 1. Commitment from system leaders
 2. Evidence of initiatives to address commercial determinants
 3. Health promoting environments/infrastructure
 4. Organisational and cultural change
 5. Evaluation and monitoring
11. This work will be led by Public Health linking into the development of a Healthy eight Strategy and guided by the new healthy weight steering group. It will, by definition, involve a wide range of stakeholders, both internal and external to the Council in order to make progress.
12. These actions do not all need to be done at once, or prior to signing up to the declaration – we will prioritise and work systematically through the commitments, identifying those where work is already being undertaken.

What decision(s) are being recommended?

13. That the Executive agrees to signing the Healthy Weight Declaration as a tool to gain leadership support and promote the Local Authority's commitment to addressing obesity.
14. That the Executive identifies an elected member champion who will help to progress the HWD through the democratic process.
15. That the Executive identifies opportunities for leaders to promote the HWD as part of a wider system.

Rationale for the recommended decision(s)

16. It is important that the Executive has oversight of the Local Authority's commitment to achieving the HWD. The HWD will be integral to achieving this by enabling all Directorates across the council to consider the impact they can have to promote and encourage healthy weight.

Other potential decision(s) and why these have not been recommended

17. There are no other decisions to be made.

Impact(s) of the recommended decision(s)

Legal

18. No foreseeable legal impact to adopting Healthy Weight Declaration.

Strategic priorities and risks

19. The Healthy Weight Declaration supports the delivery of the Public Health South Tees, Healthy Environments programme area.

20. **Risk description:** The Healthy Weight Declaration will provide a multifaceted framework to guide Middlesbrough Council in supporting local people to be a healthy weight. The concern if we do not adopt this approach is that we will continue to see limited action to address obesity, which will lead to obesity rates across the town to continue to rise, resulting in wider health inequalities, and poorer health and wellbeing outcomes for the local population. This will result in increasing demands on services across the NHS and Local Authority.

Human Rights, Equality and Data Protection

21. Not applicable

Financial

22. There are no direct financial implications arising from the recommendations in this report. All expenditure will be incurred within existing Public Health budgets or will be the subject to future reports to the Executive.

Actions to be taken to implement the recommended decision(s)

Action	Responsible Officer	Deadline
Identify political champion	Jo Bielby	July 2023
Executive agrees for Middlesbrough to sign up to the Healthy Weight Declaration	Jo Bielby	July 2023
Implementation of the Healthy Weight Declaration and creation of new Healthy Weight Declaration Steering Group.	Jo Bielby	March 2024

Appendices

1	Healthy Weight Declaration 16 core commitments - page 14
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Background papers

Body	Report title	Date

Contact: Jo Bielby – Advanced Public Health Practitioner

Email: Joanna_bielby@middlesbrough.gov.uk

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**FOOD
ACTIVE**

LOCAL AUTHORITY
DECLARATION ON

**healthy
weight**

**FOOD ACTIVE
LOCAL AUTHORITY DECLARATION
ON HEALTHY WEIGHT
SUPPORT PACK**

**SECOND EDITION (UPDATED)
SUMMER 2020**

EXECUTIVE SUMMARY

Why consider a Local Authority Declaration on Healthy Weight?

Unhealthy weight is a significant public health issue which can have a significant impact on our physical, psychological and emotional health and wellbeing. Obesity can reduce life expectancy on average by three years, with severe obesity shown to shorten lives by eight-10 years. It can increase the risk of poor health and hospital stays, and individuals affected are less likely to be in employment.

Obesity is a complex problem. Factors that significantly influence obesity include genetics, behaviour, culture and the environment. The environment in which we live is considered to be obesogenic; unhealthy food and drink choices are readily available and affordable, and there are insufficient opportunities for physical activity, leading to sedentary lifestyles which do not support a healthy weight.

Yet, despite the widespread recognition of the health, social and economic costs of unhealthy weight and efforts to promote healthier lifestyles, unhealthy weight persists with data from 2020 showing that 61.3% of adults in England are classed as overweight or obese.

In recent years however, as the government has returned responsibility for public health to local authorities, this has offered a unique opportunity to consider the wider social determinants of health and population measures which can have a significant impact on the well-being of local communities.

Local political leadership, public engagement and cross-system working with departments such as housing, economic and environmental regeneration, planning, education, transport, and children and young people's services can present real opportunities to take an innovative approach to addressing unhealthy weight.

The aim of the Local Authority Declaration on Healthy Weight (hereafter HWD) is to achieve a local authority commitment to promote healthy weight and improve the health and well-being of the local population; and to recognise and support local authorities to exercise their responsibility in developing and implementing policies which promote healthy weight.

EXECUTIVE SUMMARY

How this support pack can help you

This pack has been designed to provide local authorities with a step-by-step guide to adopting the HWD. We recognise that not all councils are the same, some may be unitary, some may be upper-tier and others may be district. In addition, councils may not all have the same procedures, hence there will be variations in how the HWD is adopted. There are, however, significant and helpful examples of learning that have been collated and can be applied across any given local authority.

Within this pack we have included a pathway for the adoption process, suggestions for local priorities, along with a number of case studies which provide experiences from the perspective of colleagues who have driven the HWD from within local government. You will also find links to the evidence base behind the 16 commitments included in the HWD, FAQs, a template press release and sources of additional information prepared by Food Active to share best practice, and to support adoption and monitoring of the HWD.

This document is a second updated edition of the original support pack developed by Food Active. The document has been revised to take into account greater shared learning, as a response to further commissioning and support for the HWD beyond the North West and as part of a review and re-refresh of the HWD commitments.

Regions including Yorkshire and Humber, the South West, and a number of local authorities in the North East of England are now taking this work forward. The shared learning and thus updates to the support pack are part of an iterative process, further versions will be produced as more authorities sign up and support Food Active's HWD.



Above: Chief Executive of Kirklees Council, Jacqui Gedman, supports Kirklees HWD, March 2019

Introduction from the Lead Director of Food Active; Matthew Ashton, Director of Public Health, Liverpool City Council

When Food Active first devised the HWD we consulted extensively with a range of key informers.

In August 2014 we held a very well attended consultation event in Manchester drawing on the example of Action on Smoking and Health’s Local Government Declaration on Tobacco Control as a starting point to consider local authority approaches to addressing healthy weight. We then held workshops through the summer of 2015 with four authorities to discuss the feasibility of adopting a Declaration on Healthy Weight.

Blackpool Council were the first to adopt the HWD in January 2016, with over 20 authorities following suit in the subsequent years. The timeline and process to adopt the HWD is described in this Support Pack, with practical examples and learning - with each local authority (and partner) that takes similar action our learning grows and we are able to share experiences.

Subsequently, I am delighted to be able to introduce the revised HWD commitments, recently launched following consultation with our Local Authority colleagues. In addition, the ‘Whole Systems Approach to Obesity and HWD: a joint narrative’ co-produced by Public Health England and Food Active, outlines how the HWD and Whole Systems Approach to Obesity can work in synergy

There is no single or correct path as you will see, and different authorities will determine their approach according to their circumstances and settings. Unitary and metropolitan authorities are likely to be very different from two-tier councils for example, as urban may be from rural.

The key unifying feature is the local leadership shown and the desire for councils to support their local communities in developing and delivering policies to support healthier environments.

As you progress from planning and adoption to driving action and monitoring impact you will come across challenges and opportunities – some expected but some may come as a surprise. Hearing about your experience helps us to share learning across the network, to co-develop support materials and to feed into future updates of the HWD. So please do keep us in the loop.

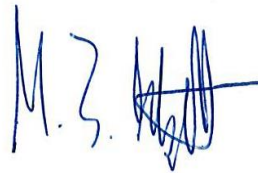



Introduction to Food Active from Matthew Philpott; Executive Director, Health Equalities Group

Food Active is a healthy weight programme delivered by the Health Equalities Group, and commissioned by local authority public health teams, NHS organisations, and Public Health England teams at both regional and national level.

Set up in 2013 by the North West Directors of Public Health, the 'North West Obesity Task Force' was officially launched as Food Active in 2014. Delivered by public health charity, Health Equalities Group, the programme focusses on advocacy, targeted interventions, research and strategic partnerships to drive forward policy calls. Food Active supports local authorities across the region both on an individual level but also in taking a collaborative approach to promoting healthy weight

Interest in adopting Food Active's Local Authority Declaration on Healthy Weight has grown exponentially since 2017, and we are now commissioned by many public health teams from outside the North West of England, as local leadership is increasingly recognised as playing a key role in developing healthier places and spaces.



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HISTORY OF FOOD ACTIVE

Food Active was established in 2013 following the launch of the government white paper ‘Healthy Weight, Healthy Lives’, in response to high levels of unhealthy weight in the North West. Originally funded by all North West Directors of Public Health in support of a number of evidence-based interventions, Food Active takes a population-based approach to promoting healthy weight.

Food Active now works across a much larger footprint, beyond that of the North West and focusses on advocacy, policy change, research and targeted campaigns as core elements of the work programme.

Food Active is also a member of the Obesity Health Alliance; a coalition of over 40 organisations who have joined together to reduce the number of people with obesity.

The coalition focuses on policy-making to tackle the social, economic and cultural factors that contribute to obesity and the inequalities in health as a result (see appendices or the Obesity Health Alliance website for further information and our joint position statement on obesity www.obesityhealthalliance.org.uk). You can also find out more about Food Active and the work we do at: www.foodactive.org.uk



Above: Food Active Launch Event, 2013

BACKGROUND TO THE HWD

Food Active was originally established to take on a stepped approach in collectively advocating for policy change at a national level in order to accelerate progress in reducing obesity. This does not detract from the importance of continuing to develop and share good practise to facilitate policy change at the local level.

The HWD presents the opportunity for local government to lead local action in tackling obesity and promoting the health and well-being of communities. It is a statement, individually owned by each adoptive authority. It encapsulates a vision to promote healthy weight to improve the health and well-being of the local population. The HWD is a strategic commitment made across all council departments to reduce unhealthy weight in local communities, protect the health and wellbeing of staff and citizens and to make an economic impact on health and social care and the local economy.

The HWD is based on a similar successful and well-regarded model previously developed in tobacco control by Action on Smoking and Health (the Local Government Declaration on Tobacco Control). The HWD was developed by Food Active following a lengthy period of engagement and consultation via a Regional Expert Stakeholder Group. Membership of the group included North West Directors of Public Health and public health leads; epidemiologists and public health academics from North West universities; third sector and other food and physical activity partner organisations.

The HWD includes 16 standard commitments whereby Local Authorities pledge support to achieve action on improving policy and healthy weight outcomes in relation to specific areas of the council's work.

Within the HWD there is also the opportunity for local authorities to add local commitments relevant to their needs and aspirations. These local priorities are usually determined through consultation which may include the Health and Wellbeing Board, CCG etc.

Benefits of adopting the HWD are numerous and include:

- Keeping healthy weight a high priority on local government agendas
- Enabling cross-departmental working & partnerships
- Facilitating system leadership
- Maintaining accountability: Local Authorities exercising their responsibility in promoting healthy weight

Since its launch in August 2015 the HWD continues to gain recognition as a useful tool for local authorities to adopt a systems approach to promoting healthy weight. Increasing numbers of local authorities across England continue to adopt the HWD, with 23 councils having adopted at the time of publication. Ranging from authorities in the North West, Yorkshire & Humber and to the South West of the country, these authorities include unitary, two-tier and district authorities, all with unique experiences of adoption. In addition NHS, Education, Sports, VCS and Private sectors have engaged with their local authority partners in delivering on their healthy weight commitments.

The HWD has also been included as best practice in two case study reports, including Local Government Association ‘Tackling Childhood Obesity’ Report and the ‘Childhood Obesity Plan Chapter 2’.

HWD Resource Hub

As Food Active is a programme that receives no central funding or grant aid, it is essential that we are able to recover the costs that reflect use of intellectual property and support in adopting the HWD – if we did not do this we simply wouldn’t be able to continue our work. We therefore offer a set of basic, advanced and collective commissioning costs and aligned benefits to assist prospective commissioners in understanding the different ways they can buy into a Local Government Declaration for their own area. Costs are available on request.

The HWD Resource Hub is an online portal which hosts a wide range of supporting resources for those embarking on the HWD. The hub is updated on a regular basis with new resources and case studies: <http://www.foodactive.org.uk/the-healthy-weight-declaration-resource-hub/>



Above: Blackpool Council adopting the HWD in 2016 – the first local authority to do so.

THE CASE FOR ADDRESSING POOR DIET

Diet-related ill health in the UK is estimated to lead to approximately 70,000 premature deaths annually, which represents around 12 per cent of the total number of deaths¹. It is estimated that obesity alone is responsible for more than 30,000 deaths each year². Evidence shows that poor diet has the highest impact on the NHS budget, costing around £6 billion per year, a figure which is greater than alcohol consumption, smoking and physical inactivity³.

An unhealthy diet is strongly associated and causally linked with a number of chronic, complex conditions such as obesity, cardiovascular disease, some cancers and type II diabetes.

The prevalence of unhealthy weight is concerning; more than one in five children start school with overweight or obesity, and more than a third of children leave primary school with excess weight⁴. Furthermore, our future generations are experiencing an unhealthy weight at a younger age and the impact of this, is also experienced for longer. Over two thirds of adults in England are affected by unhealthy weight (67% men and 60% of women)⁵. There is regional variation in levels across the country; levels of excess weight in adults are highest in the North East and the West Midlands with lowest rates in the South East of England⁵.

Obesity and inequality are also inextricably linked, amongst other factors income and social deprivation have an impact on the likelihood of becoming obese. There is a strong relationship between deprivation and childhood obesity, NCMP data shows that obesity prevalence in the most deprived 10% of children is approximately twice that of the least deprived 10%⁴.



Above: World Obesity Federation Stigma Free Image Bank

Poor oral health also impacts on children and families' wellbeing. It is costly to treat and can be an indicator of wider health and social care issues such as poor nutrition and obesity. In England almost a quarter (24.7%) of 5-year olds have tooth decay⁶. Regional variation indicates that the North West and Yorkshire and Humber experience greater prevalence of tooth decay in children than other parts of the country.

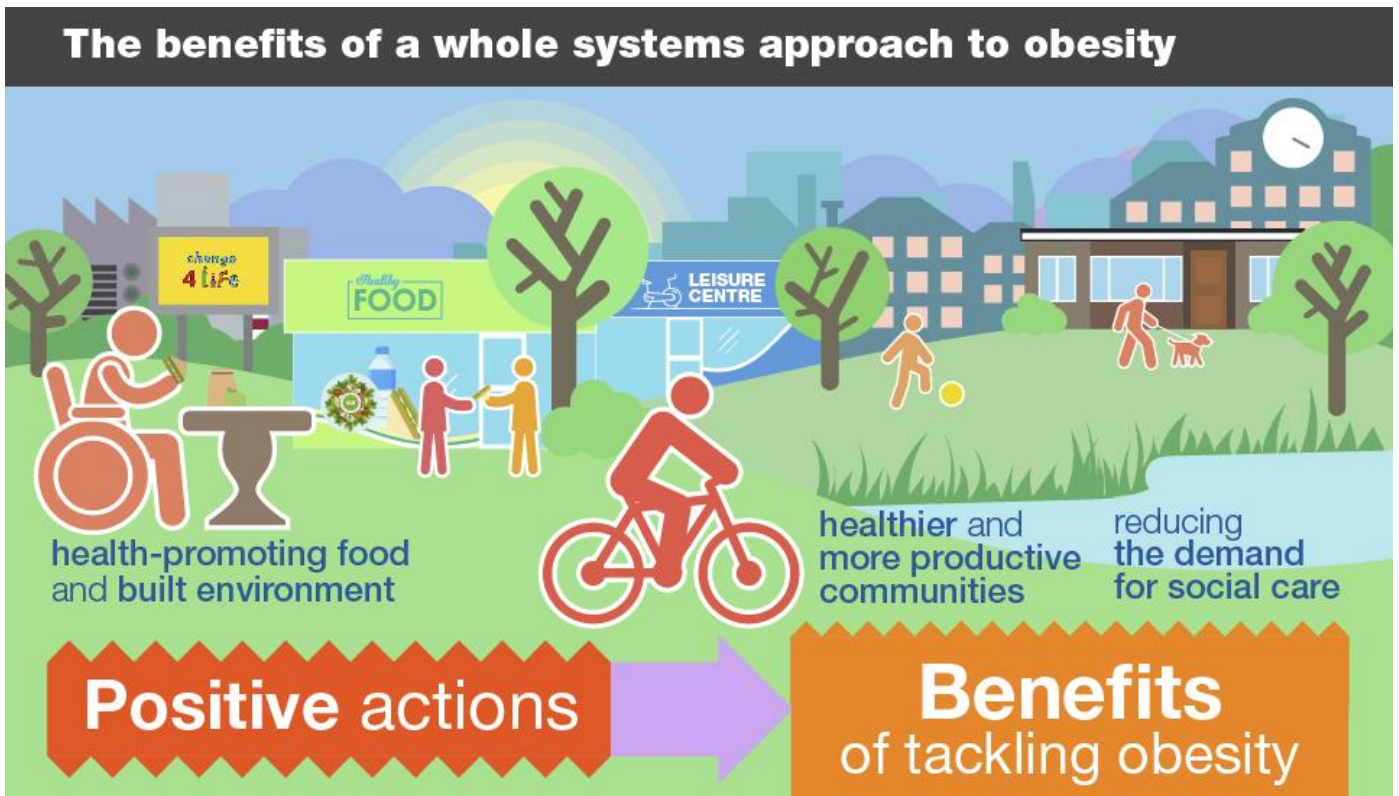
Dietary patterns in the UK indicate that many children and adults are aware of the importance of consuming a healthy diet and are concerned about the amount of unhealthy content in food and drink products. However, in contrast, the majority of children and adults do not meet dietary guidance, for example 5-a-day, where in the North West only 51.2% percent of adults meet the 5-a-day recommendations compared with the England average of 54.6%⁷. This demonstrates the need to consider the range of factors beyond an individual's knowledge and attitudes that impact on their dietary behaviour.

People’s diets are influenced by the food and drink products available in their surrounding environment. Unhealthy food and drink is easily accessible, affordable and often eaten outside the home. Those living in socially deprived areas often have less access to healthy foods, and increased access to unhealthy foods such as takeaways and fast food outlets.

Children and young people particularly are exposed to a range of food and drink marketing tactics that work in combination to influence demand for their products. Mass media advertising is known to have a direct impact on children and young people’s dietary choices and an indirect effect on their dietary preferences, consumption and behaviour. There are various other marketing communication tactics beyond mass media advertising, including attractive packaging, celebrity endorsement, linkage with fictional characters, sponsorship and sales promotions.

Often companies aim to influence policy makers through stakeholder marketing, typically in the form of corporate social responsibility. This has the purpose of strengthening a company’s brand and enhancing consumer trust. Stakeholder marketing also helps fend off statutory regulation, providing a platform for companies to influence the public health agenda through the development of public-private partnerships.

Targeted action is required at all levels to promote healthier eating and to make it easier for people to make better choices. Nationally, the UK government is supporting a number of measures to address obesity and promote healthy weight including a soft drinks industry levy, reformulation to remove 20% of sugar in products, making healthy options available in the public sector, making school food healthier, clearer food labelling, supporting nutrition and physical activity in the early years and more.



Above: Health Matters: Whole System Approach to Obesity, Public Health England (2019)

Local Government has a responsibility; since the transition of public health from the NHS into local authorities, councils are uniquely positioned to support a system-wide approach to promoting healthy weight. The functions which councils are directly responsible for can have a significant impact on the health of the communities they serve and their employees. However, making progress on improving healthy weight outcomes goes well beyond the remit of public health.

A local authority level commitment, which encompasses planning, public health, environmental health, education, leisure and recreation, has the scope to impact significantly on the residents of a council area. Examples of collaborative working across directorates and with external stakeholders can lead to progress in areas such as; planning to consider recreational space, active travel, the food environment and supplementary planning to address proliferation of takeaways, procurement contracts for provision of food and drink and access to free drinking water across local authority controlled sites. If the causes of obesity are multi-factorial a whole-systems approach is key to improving the health of our populations.

A Local Government Declaration on Healthy Weight not only presents councils with an opportunity to work more collaboratively, it also provides a means of coordinating strategies, policies, programmes and activity related to healthy weight and sets out a vision and commitment to improving outcomes within a locality.

Whole Systems Approach to Obesity; as previously stated the causes of obesity are complex and exist in the places where we live, work and play. A growing body of evidence suggests that whole systems approaches (WSA) could help tackle complex problems like obesity. Public Health England (PHE), the Local Government Association (LGA), the Association of Directors of Public Health (ADPH), Leeds Beckett University and a number of local authorities have worked in partnership to develop a Whole Systems Approach to Obesity⁸ to support practitioners at a local level to adapt and work in a way that enables all stakeholders to be engaged in the healthy weight agenda.



Above: Health Matters: Whole System Approach to Obesity, Public Health England (2019)².

Although developed at different times, the WSA and HWD programmes can compliment each other in terms of supporting local areas to address obesity and promote healthy weight through a long-term, cross-sector, health in all policies approach. The HWD can either be used by local authorities as a standalone process to address healthy weight, or in tandem with the WSA. A joint Public Health England/Food Active narrative has been developed to describe how the approaches can be used together.

For a full list of references see appendices.

WHAT WILL WE BE SIGNING UP TO?

The original fourteen commitments within the HWD were determined following extensive consultation with the expert stakeholder group and are supported by an evidence base. Food Active in consultation with stakeholders, has facilitated a review of the HWD. This recent review has been undertaken to meet a number of objectives and based on the request of commissioners and stakeholders, actively implementing the HWD. In particular it was felt that new evidence associated with healthy weight should be reflected in the commitments, whilst enabling authorities to consider how the HWD can impact not only on healthy weight outcomes but support converging agendas.

The review has taken into consideration ongoing feedback reflecting on successes, challenges, barriers to adoption, evaluating impact and in addition, to consider whether the HWD commitments were still considered 'fit for purpose'. The outcome of the consultation, current policy context and relevant evidence base are reflected in the new draft of the HWD commitments and updated evidence brief. (See appendices).

The commitments are designed to be bold but achievable and take account of national healthy weight policy. A small number of local authorities may not adopt all the sixteen standard commitments, as for some it may not be within the realm to achieve progress within particular areas. This offers some flexibility when authorities are considering adoption and making the case for support.

As the public health profile, demographics, workforce, plans, strategies and priorities will vary from one local authority to another, the HWD offers the opportunity for councils to make further local commitments to supplement the standard pledges if they wish.

The sixteen standard commitments are detailed below, and example of local commitments are presented overleaf.



THE 16 COMMITMENTS

Strategic/system leadership

1. Implement the Local Authority HWD as part of a long-term, 'systems-wide approach' to obesity;
2. Advocate plans that promote a preventative approach to encouraging a healthier weight with local partners, identified as part of a 'place-based system' (e.g. Integrated Care System);
3. Support action at national level to help local authorities promote healthy weight and reduce health inequalities in our communities (this includes preventing weight stigma and weight bias);
4. Invest in the health literacy of local citizens to make informed healthier choices; ensuring clear and comprehensive healthy eating and physical activity messages are consistent with government guidelines;
5. Local authorities who have completed adoption of the HWD are encouraged to review and strengthen the initial action plans they have developed by consulting Public Health England's, Whole Systems Approach to Obesity, including its tools, techniques and materials;

Commercial determinants

6. Engage with the local food and drink sector (retailers, manufacturers, caterers, out of home settings) where appropriate to consider responsible retailing such as, offering and promoting healthier food and drink options, and reformulating and reducing the portion sizes of high fat, sugar and salt (HFSS) products;
7. Consider how commercial partnerships with the food and drink industry may impact on the messages communicated around healthy weight to our local communities. Such funding may be offered to support research, discretionary services (such as sport and recreation and tourism events) and town centre promotions;
8. Protect our children from inappropriate marketing by the food and drink industry such as advertising and marketing in close proximity to schools; 'giveaways' and promotions within schools; at events on local authority controlled sites;

Health Promoting Infrastructures/Environments

9. Consider supplementary guidance for hot food takeaways, specifically in areas around schools, parks and where access to healthier alternatives are limited;
10. Review how strategies, plans and infrastructures for regeneration and town planning positively impact on physical activity, active travel, the food environment and food security (consider an agreed process for local plan development between public health and planning authorities);
11. Where Climate Emergency Declarations are in place, consider how the HWD can support carbon reduction plans and strategies, address land use policy, transport policy, circular economy waste policies, food procurement, air quality etc;

Organisational Change/Cultural Shift

12. Review contracts and provision at public events, in all public buildings, facilities and 'via' providers to make healthier foods and drinks more available, convenient and affordable and limit access to high-calorie, low-nutrient foods and drinks (this should be applied to public institutions & scrutiny given to any new contracts for food & drink provision, where possible);
13. Increase public access to fresh drinking water on local authority controlled sites; (keeping single use plastics to a minimum) and encouraging re-useable bottle refills;
14. Develop an organisational approach to enable and promote active travel for staff, patients & visitors, whilst providing staff with opportunities to be physically active where possible (e.g. promoting stair use, standing desks, cycle to work/school schemes);
15. Promote the health and well-being of local authority staff by creating a culture and ethos that promotes understanding of healthy weight, supporting staff to eat well and move more;

Monitoring and Evaluation

16. Monitor the progress of our action plan against the commitments, report on and publish the results annually.

LOCAL COMMITMENTS

The commitments you choose to include here, if any, will be individual to the needs of your population. Here you can be much more specific about action you wish to take as a council. You may wish to consider here how the HWD links to other local strategies, plans, pledges and ambitions. Supplementary local commitments have included:

Children and young people

- Improving the quality of packed lunches by developing local agreement with schools to implement guidance in line with school food plans
- Working with schools to achieve 'walk to school' recommendations as part of School Food Plans and increase physical activity for children and young people
- Promote the uptake of breastfeeding as providing the best nutrition for babies and reducing childhood obesity
- Support Early Years settings to enable a structured physical activity offer and healthy food policy
- Support the introduction of school food policies including lunchbox policies



Food Poverty

- Working with community organisations and stakeholders in order to increase effectiveness and approaches to identify, advise, refer and support those at risk of food poverty and adverse nutritional status
- Develop a Food Poverty Network to reduce food poverty and tackle malnutrition in all settings

Access to Healthy and Sustainable Food

- Develop a Food Charter for the Borough to promote healthy and sustainable food in a local economy
- To achieve Sustainable Food Places status

Workplace

- Supporting workplaces to increase engagement with staff around physical activity, healthy weight and healthy eating
- Promoting access to healthier food and drinks in canteens and vending machines, and advocating to reduce access to unhealthy food and drinks
- Promote workplace health with local employers and voluntary sector organisations, via rollout of the Workplace Wellbeing Charter.

Partnership working

- Develop a healthy weight forum to engage a broad spectrum of partners in tackling excess weight across the borough
- Considering weighted/financial support for 'healthier' retail (e.g. greengrocers, co-operatives etc.) in deprived areas
- To be a designated Sugar Smart Town

Campaigns

- Undertake a social marketing campaign with young adults to promote healthy weight.



Above: Year 9 pupils in Salford pledge to 'Give Up Loving Pop'



Out of home offer

- Work with take away restaurants to make the food they sell healthier.
- Working with commercial outlets within all public sector premises to develop a food and drink policy.

Physical Activity

- Support the introduction of 'Mile a Day' and 'Couch to 5k' in primary and secondary schools respectively
- Promote Active Travel and use of Rights of Way across the Borough to increase physical activity, for social and employment opportunities and minimise air pollution
- Support 'Street Play' initiatives through exploring the implementation of periodic temporary street closure orders and other innovative sites for play

THE STEPS TO ADOPTING THE HWD

As a number of local authorities have been through the process of successfully passing the HWD, through sharing their respective learning, we have compiled a series of steps. Although the steps presented below are numbered, they are not necessarily chronological. However, each step is key, and from experience we know that they need to take place at some point in the adoption process.

From building support, to passing the HWD through full council, the process can take between six to twelve months depending on the cycle of council meetings and timings of political events within the calendar. The list of stakeholders engaged at each stage is not definitive, however provides an indication of those officers and members that will help in guiding and supporting the process.

PHASE ONE: Scoping and building support	Stakeholders	Timeframes
<p>STEP 1: Help frame the problem. Make sure you provide a clear evidence base using local data.</p> <p>Make a compelling case for why action is required in your area. Use the HWD as a tool to meet local priorities as identified in your health and wellbeing or obesity strategies.</p> <p><i>See Blackpool’s case study on framing the issue.</i></p>	<ul style="list-style-type: none"> • Director of Public Health • Public Health Intelligence • Wider Public Health Team • Chair of the Health and Well-being (HWB) Board • CCG 	<p>1 – 3 months from the start date of the process.</p>
<p>STEP 2: Work with your elected members. Ensure they identify with the issues and appreciate how the council is able to support their local communities through the HWD. Identify a champion to help the HWD through the democratic process.</p> <p>(Note: step 2 and step 3 might take the format of an event, meeting or series of meetings. You may wish to consider peer support from another local authority officer/member who has successfully adopted the HWD)</p> <p><i>See Devon and Lancashire’s case studies on identifying opportunities and a HWD champion.</i></p>	<ul style="list-style-type: none"> • Council Leader • Lead Member for Health and Well-being • Other elected members • LA HWD (HWD) Champion 	<p>Dependent on the cycle of council meetings: 1- 3 months from completion of step 1.</p>

PHASE TWO: Implementation of the HWD	Stakeholders	Timeframes
<p>STEP 3: Make sure all sections of the council are involved, not only public health. Everyone has a part to play. Work with departments to diagnose and implement agreement on key gaps.</p> <p>Use your champion to garner support from all local authority departments. Health and wellbeing is cross-cutting. Leisure services, planning, transport and environmental health are often keen to support.</p> <p><i>See Cheshire West and Chester’s case study on how to work across departments and partners</i></p>	<ul style="list-style-type: none"> • LA HWD Champion • Chief Officer for each department • DPH • Lead Member for Health and Well-being • Chair of HWB Board • Council Officers 	<p>1 to 3 months in total. There may be overlap between step 2 and step 3.</p>
<p>STEP 4: Establishing local priorities, work with the Health and Wellbeing Board and a Healthy Weight Steering Group (if you have one).</p> <p>Refer to your local strategies and identify how the HWD can help you to meet these. It may also be useful to consider working with NHS bodies in determining local priorities. For example, when considering those programmes/services that are jointly commissioned, you may wish to build support from your local CCG.</p> <p><i>See Leeds’s case study on how to determine local commitments</i></p>	<ul style="list-style-type: none"> • LA HWD Champion • Health and Well-being board • Healthy Weight Strategy steering group or other relevant group • CCG 	<p>1-2 months.</p>

PHASE THREE: Communications	Stakeholders	Timeframes
<p>STEP 5: Sign up and celebrate! Share your commitment with the media and establish ownership. Develop communications plans to maximise internal and external communications around HWD.</p> <p><i>See Blackburn with Darwen case study on effective communications.</i></p>	<ul style="list-style-type: none"> • LA Comms Team • LA HWD Champion • Council Leader • DPH, Lead Member HWB • Elected Members 	<p>1-2 months.</p>

PHASE FOUR: Keeping the HWD Alive	Stakeholders	Timeframes
<p>STEP 6: Make sure you maintain the momentum once the HWD is signed and make people accountable for their actions. Review progress and link across to strategy and implementation plan for initial implementation period e.g. 12 month plan. Continue to identify and work with new stakeholders in developing actions against the commitments from within and outside the council.</p> <p>Consider external stakeholder engagement and support using tools such as the HWD Partner Pledge & Schools HWD.</p> <p><i>See Blackpool's case study on reviewing progress and maintaining engagement from stakeholders.</i></p>	<ul style="list-style-type: none"> • HWD Stakeholder group • LA Champion • DPH • Chief Officers • Health and Well-being board • CCG • Town Centre Management • Chamber of Commerce • Police, Fire Service, third sector organisations 	<p>Ongoing: regular communications and monitoring will aid in maintaining momentum and reviewing action.</p>

PHASE FIVE: Evaluating impact	Stakeholders	Timeframes
<p>STEP 7: Monitor and evaluate the HWD. By developing implementation plans, linking the HWD to healthy weight strategies the HWD Monitoring tool is available to evaluate progress against the commitments and identify future planning.</p> <p>Complete the annual HWD Audit & Validation Tool to demonstrate impact.</p> <p><i>See section on monitoring and evaluation.</i></p>	<ul style="list-style-type: none"> • HWD Stakeholder group • LA HWD Champion • DPH • Lead Member for HWB • CCG • Health and Well-being board • Council Officers 	<p>Ongoing: from the start date of the process in step 1.</p>

SENIOR LEADERSHIP AND STAKEHOLDER ENGAGEMENT

It is widely accepted that healthy weight is everyone’s responsibility, and requires concerted effort from within the council and externally to bring about change. Support for and endorsement of the HWD from full council is required in agreeing sign off, this can take significant engagement and time. It should be acknowledged that senior public health officers and the wider public health team are the golden thread that enables the facilitation of this process.

Two key areas of learning from the adoption process are the importance of senior leadership and identification of a champion within the Local Authority to raise the issue of healthy weight as a priority and challenge and hold the council to account. This has worked particularly well with the support of a lead member, and it has helped to garner more widespread support across directorates where the Local Authority HWD has been passed through full council and successfully embedded within the councils plans and strategies.

Internal Stakeholders

Stakeholder engagement is key in raising awareness of the HWD amongst a wide variety of council departments and personnel. These may be departments or teams who may not have previously or traditionally considered healthy weight as an issue that they may have influence over.

Stakeholder engagement, through a range of medium, is key in opening up dialogue to consider new approaches to addressing healthy weight providing officers with the opportunity to contribute to solutions.

Keeping the wide range of stakeholders involved in reviewing progress against the commitments in the HWD and engaging wider recognition and support from outside the council is also important in maintaining momentum.



Above: The HWD presented at a Yorkshire and Humber public health leads meeting, Summer 2019

External stakeholders

There are a small number of Local Authorities who have engaged with their CCG's to build support for the HWD, for example Blackburn with Darwen CCG have signed up to the Councils HWD. There are also two examples of NHS Trusts, who working with their respective councils, have adopted their own HWDs; Blackpool Teaching Hospitals NHS Foundation Trust and East Lancashire Hospitals NHS Trust.

Food Active is developing a specific NHS HWD, this is initially a pilot for a number of South West authorities, currently underway. It is anticipated, once evaluated, Food Active can share the learning from the pilot with the ambition that the NHS HWD, will be available for use within any locality in early 2021.

We also recognise that many NHS and wider public sector, charity sector and even private sector organisations may wish to support the principles of the Local Authority HWD, and the leadership shown by Authorities in adoption of the HWD.

We have therefore developed a supplementary 'Partner Pledge' for organisations working alongside councils who wish to support commitments within a local HWD, thereby building a groundswell of support across a local area. Co-developed with partner organisations and local authority colleagues, the partner pledge comprises of eight core commitments which can be supplemented by organisational commitments. The partner pledge supports a consultative approach across an organisation and is supplemented by a detailed support pack.

Further to the Partner Pledge, we are in the process of developing a HWD which is specific to school and educational settings, this is being developed in partnerships with the Healthy Schools programme delivered by Leeds City Council and will be launched in late summer 2020.

For further information regarding the 'Partner Pledge', the NHS HWD or the Schools HWD, please contact Food Active.



Above: Cheshire West and Chester Council's Eat Well Be Active group sign the HWD Partner Pledge, January 2020

LEARNING FROM EXPERIENCE

Presented below are a number of case studies that provide more detailed experiences of how local authorities have navigated the process of adopting the Local Authority HWD on Healthy Weight. From looking through the examples, it is possible to identify the steps referred to in the previous table and some of the key priorities around leadership, engagement and communication. Each case study attempts to present some unique learning in relation to a specific consideration.

The case studies currently reflect the experiences of local authorities predominantly in the North West, with the exception of Devon and Leeds representing the South West and Yorkshire and Humber regions respectively. As the HWD continues to expand in these regions as well as the North East, this document will be updated to provide nationwide experiences.

In addition to the case studies presented below; Food Active has also developed other supporting documents these include; a range of 'Perspective Pieces' which present evidence from local authority departments (other than Public Health) and other public sector organisations (concerned with; activity, walking, cycling, sports, economic regeneration, local transport and fire and rescue services) on good practice in terms of tackling overweight and obesity. The focus of the 'Perspective Pieces Report' is to identify and learn, on an ongoing basis, about plans and actions relating to the promotion of healthy weight, share good practice and address the importance of healthy weight in all policies. For further information on the Perspective Pieces please see the appendices.

Food Active's '[HWD Impact and Influence Case Study Report](#)', provides additional insight into the impact and influence the HWD has had within different councils, each with their own political structures, priorities, barriers and opportunities.

The HWD has also be referenced in the World Cancer Research Fund International's NOURHSING Policy Framework. This is an extensive overview of implemented policy actions from around the world to promote healthy diets and reduce obesity. The HWD was featured as part of the 'H' framework, which represents policies that 'harness the food supply chains and actions across sectors to ensure coherence with health'. For further information see appendices.



Above: HWD Impact and Influence Report

LEARNING FROM EXPERIENCE

Blackburn with Darwen: How Communications can Provide Support and Impetus in the Adoption Process and Maintain Momentum

Blackburn with Darwen Council share how they have used effective communication channels and messages to raise awareness of the HWD and demonstrate their commitment to tackling unhealthy weight.

Background

Blackburn with Darwen's joint Declaration on Healthy Weight was signed in July 2017 by both Council and the CCG, and this was followed by the NHS Trust adopting their own HWD. Work is continually evolving to support the commitments set within it and in 2019 an evaluation was commissioned to share progress and learning. There is acknowledgement that there is much to do, however this presents the opportunity to positively impact on healthy weight outcomes. Progress to meet the commitments requires support from other council departments and CCG colleagues to ensure healthy weight features in all policies and communication.

Learning

Since adoption to current date, there have been a number of press releases across both print and social media to highlight the signing off the HWD. Sharing this within media channels of both partners and the 'Eat Well, Move More, Shape Up' Strategy* enables awareness to be raised about the commitment to tackling unhealthy weight in the borough. Strong leadership from the Council and the CCG and members of the Health and Well-being Board remains the lynchpin to success in the coming years with ongoing strategic support crucial to the progress on healthy weight in Blackburn with Darwen. The leadership on this agenda has been essential in driving progress across a number of programmes, including the Pennine Lancashire Childhood Obesity Trailblazer.

Future Aspirations

Three years into the HWD, there is a refresh planned in with the new HW local commitments. Priorities for the coming year include a focus on working across departments in the Council to identify healthy weight champions. These Champions will be critical in ensuring a whole systems approach to tackling unhealthy weight and will be part of the Council's response to the COVID-19 pandemic. A further focus will be on developing a fundamental skills programme across the BwD in Early Years and KS1 children to embed the essentials for long term physical activity participation. The HWD will also provide a focus for the Healthier Place Healthier Future Childhood Obesity Trailblazer programme developments. There will also be a recommendation that the CCG moves to sign their own NHS Declaration in early 2021.



Above: Blackburn with Darwen and the CCG sign the HWD in July 2017.

Changing both a workplace and societal culture shift will require support and 'buy in' from staff across organisations and will take some time to become the norm. Communication and identification of good practice in the organisations and the benefits of this will be vital to success.

Additional Information

- Local press <https://theshuttle.org.uk/healthy-weight-declaration-signed-in-blackburn-with-darwen/>
- CCG website <http://www.blackburnwithdarwenccg.nhs.uk/local-authority-declaration-healthy-weight/>
- Breastfeeding Friendly Borough http://www.lancashiretelegraph.co.uk/news/15657440.Borough_aims_to_be_breast_feeding_friendly/

- Council website

<http://www.blackburn.gov.uk/Pages/Eat-Well-Shape-Up-Move-More-Strategy.aspx>

- Food poverty <https://theshuttle.org.uk/food-power-programme-aims-to-tackle-food-poverty-in-blackburn-with-darwen/>

Contact

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**'Eat Well, Move More, Shape Up' is Blackburn with Darwen's strategy to encourage positive lifestyle changes and promote health and well-being within the borough.*



Above: Blackburn with Darwen holds a Healthy Weight Summit at Ewood Park to mark two years since adopting the HWD in March 2019.

LEARNING FROM EXPERIENCE

Blackpool: The Journey to a Local Authority Declaration on Health Weight: Two Years On

This case study reflects on how Blackpool made a strong case, in building support internally for adopting the HWD. It also demonstrates how a range of ‘healthy weight summits’ in Blackpool have supported monitoring and maintaining momentum in relation to progress.

Background

Following support from Food Active, the council team first presented the concept of a HWD to the portfolio holder for public health in August 2015 alongside a review of the local healthy weight strategy. Childhood obesity was featuring frequently in the media, by focusing on this issue, poor child dental health and the impact on workload of health and well-being partners, support for the HWD grew. Framing the messages in straightforward terms was key; the number of adult residents who are overweight or obese in Blackpool out of a population of 142,000, is around 84,000 people, this figure is very stark.

Following initial discussion and with the support of the portfolio holder for public health, subsequent presentations and involvement of the Health and Well-being Board led to the engagement of Blackpool’s HWD champion, Councillor Cain. A paper was presented to the authority’s Corporate Leadership Team and meetings facilitated with key Directors (including Director of Place), and service heads from Procurement, Planning, Transport, and Operational/Leisure Services. A process of consultation with the Healthy Weight Steering Group and senior managers from across all directorates was established to determine the local areas for action. In January 2016, only five months after the first discussions the Local Authority Declaration on Healthy Weight was formally presented and signed in a full council meeting.

Learning

A series of Healthy Weight Summits have been held which have focused on engaging and securing commitment from a range of partners. The initial focus was on internal partners on the Health and Well-being Board, subsequently this has extended to local businesses and major employers, schools, and the councils arms-length bodies. Blackpool’s recent summit focused on celebrating success, sharing good practice with partners and learning about the progress organisations have made with their own HWDs.

“There is a clear recognition that we can’t do it by ourselves. It needs a concerted effort across the sector”.

Cllr Graham Cain, Cabinet Secretary – Resilient Communities, Blackpool Council



Above: Coaches at Blackpool Football Club Community Trust deliver GULP to year 4, 5 and 6’s in the borough

The Department for Work and Pensions has worked with the Council since its first Healthy Weight Summit and have been able to share their learning and the work they had undertaken over the past 12 months at a recent event. Commenting on being involved in the event they said:

“Thank you for allowing us to do it! It’s been really good for us, we didn’t realise just how much work we had done! We are all now joined together and working as one which gives us all more opportunities and that happened because of the work you have been doing at Blackpool Council, it’s great to feel a part of the local community. You have helped give us the support, expertise and inspiration. We have really enjoyed working with you all, embraced the speakers and all events and look forward to carrying on working with you in the future”.

Susan Sheldon, HEO Disability Services, Department for Work and Pensions

PR, campaigns and communications have assisted in raising the profile of the council’s commitment to supporting the HWD. There has been much local interest around the #GULPchallenge, Blackpool’s campaign encouraging teens to ‘give up loving pop’. GULP has been a cornerstone providing high profile activity, receiving considerable media coverage, including a filmed piece on national BBC News. Blackpool’s work to develop a HWD has also featured as a case study in the Local Government Association publication on child obesity.

During the COVID-19 Pandemic, the Public Health team have been focused on providing a full response to supporting the community at this very difficult time. In particular the team led the work round the development of the Community Hubs which was responsible for delivering food parcels to the vulnerable. The food parcels were developed with the Councils catering team and the parcels include fruit and vegetables to help people

prepare healthy meals. Additionally, physical activity information sheets were included within the food parcels to encourage people to continue to be active during the lock down. The council was concerned about the children who were on Free School Meals, and therefore worked with the schools to establish a food parcel delivery service. In total 22 schools took part in the scheme ensuring families had sufficient food whilst their children were not able to go to school.

Future Aspirations

Although there were some anxieties about potential impacts on the economy and revenues, there was a clear acceptance that supporting healthier weight in Blackpool was the right thing to do. Cllr Cain, Chair of Blackpool’s Health and Well-being board, plays a key role in driving and maintaining momentum, willing to challenge and ensuring the issue of healthy weight is kept on the agenda at every opportunity. Blackpool Council has a specific priority to ‘build resilience’; in terms of where this agenda sits and through Cllr Cain’s role as an elected member, he is in a unique position to not only encourage people to lead healthier lifestyles, but also to support officers in the delivery of their work relating to this issue.

As we move in to the second phase of the pandemic and move to the new normal, the public health team will move to pick up the work of the Whole systems approach. It will be considering the new evidence and the impacts of the lock down on the residents to understand what the next steps will be to develop the work and continue to build on the progress made.

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See Appendixes for further information on the Blackpool Evaluation Report.

LEARNING FROM EXPERIENCE

Cheshire West and Chester Council: How to engage a range of partners in delivering the Declaration

This case study describes how Cheshire West and Chester Council's Eat Well Be Active Partnership group are collectively delivering on the Healthy Weight Declaration.

Background

Cheshire West and Chester Council officially adopted the HWD on 4 February 2019. The HWD was driven by the Cabinet Member responsible for health and wellbeing through the Council's Eat Well Be Active (EWBA) group. EWBA is a partnership group for west Cheshire, established in 2015 that aims to encourage greater levels of healthy eating and physical activity across the borough. The group is made up of representatives from the Council, NHS partners, Education providers and a range of Voluntary and Community organisations and Service Providers from across the borough.

Following the adoption of the HWD, Cheshire West and Chester Council worked closely with Food Active to develop the HWD Partner Pledge through workshops and consultation with the EWBA group. The Partner Pledge was then launched at an event on Thursday 9 January 2020 with nine partners from across the borough signing up. The Partner Pledge contains a set of commitments which organisations pledge to work towards to impact on the health and wellbeing of their staff, clients and the wider community. The pledge aims to support the actions of the Council's Declaration which was adopted the previous year. Members of the EWBA group who have already pledged their support include Active Cheshire, Brio Leisure, Chester School Sport Partnership, Edsential, Ellesmere Port School Sports Partnership, Healthbox, The Mersey Forest, The Welcome Network and Vale Royal School Sport Partnership.

Learning

Taking a partnership approach to the HWD has meant that it has been straight-forward to engage further partners in the healthy weight agenda. It has also raised the profile of the HWD across the borough, ensured that partners from different sectors and beyond public health are working together to support the Council's HWD. A collective, system-wide approach will be key to supporting healthier weight across west Cheshire.

Engagement with partners, establishing and maintaining relationships has been crucial. EWBA meetings are scheduled every two months and venues are rotated to ensure that all members have an opportunity to host a meeting.

Future Aspirations

- Work with more partners across the borough to sign up to the Partner Pledge
- Hold photo call at EWBA meetings to recognise new partners on board
- Work with EWBA partners to encourage schools to sign up to the Partner Pledge
- HWD Partner Pledge update at September 2020 Health and Wellbeing Board meeting
- Organisational pledges to be incorporated into EWBA workplan and progress reported

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LEARNING FROM EXPERIENCE

Devon County Council

Devon County Council became the first local authority in the South West to adopt the HWD, signing in October 2019. This case study looks at how the HWD has helped to forge new cross-departmental relationships to help work on the healthy weight agenda.

Background

Devon County Council held an event in November 2018 where we invited a range of wider stakeholders across Devon and promoted the HWD and Whole Systems Approaches- this helped connect organisations together and initiated momentum. We are proud to have become the 1st Local Authority in the South West to sign the HWD on 7th October 2019, as part of a region-wide roll out of the HWD, funded by Public Health England South West. Our top 3 priorities are to make water freely available, engage with the food industry of Devon and help prevent inappropriate advertising and marketing of foods and drink to children and work with schools.

Learning

The activity over the past 18 months has helped Public Health forge relationships with Trading Standards where we conducted a mystery shopping exercise to test the adherence of the voluntary ban of energy drink sales to u16's. In working with our Economy partners, we have gained access to 2 awards schemes whereby we are looking to explore the potential for including awards linked to product reformulation, assess and share good practice related to product reformulation. The insights work we did, meant Public Health worked alongside Libraries, Children Centres and Oral Health Education to use our Social Media platforms to promote National Smiles Month and Pyjamarama.

Waste management colleagues have devised guidance on healthy and low waste packed lunches. Internally in Public Health we have adopted a SUGAR SMART office challenge for 2019 whereby colleagues make voluntary donations to charity and we share SUGAR SMART recipes. A Health and Wellbeing event followed the signing of the HWD and this helped the workforce identify community support services that aid behaviour change and promotion of active travel.



Above: Devon Public Health host a healthy weight summit, November 2018

The insights work has certainly helped consider the impact of food and drink on weight, oral health, behaviour and mood. Our academic partners at the University of Exeter are looking to support networks across Wider Devon to share good practice and identify strategic priorities.

The biggest challenge was in navigating a route through the Council. The process initially gained the support of the Co-PHEP Leadership Group and consent was given to approach elected members for their support by inviting interested individuals to volunteer as Champions. We were really pleased to get the support of 5 champions.

On reflection this would have been strengthened by a briefing to all elected members to help them to understand the aims of the HWD. That said the elected members we have been excellent in identifying additional connections to make and opportunities for action.

Next steps and aspirations for the future

- Raising staff awareness and seeking workforce and departmental aspirations for change.

- Work with Trading Standards and Economy to explore opportunities of promoting the Buy with Confidence scheme to Food Businesses in Devon.
- Identify and encourage good practice relating to product reformulation across the food industry in Devon.
- Promote the Partner Pledge to food businesses and organisations who are demonstrating good practice and ethos related to food sustainability, healthier product ranges, age appropriate portion sizes, waste management and wider health and wellbeing benefits (i.e. oral health).

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Above: Devon County Council officially adopt the HWD in October 2019, at a celebration event.

LEARNING FROM EXPERIENCE

Lancashire County Council: A Perspective from a Two Tier Authority – Building a Case for Support Across the County

Lancashire’s case study discusses the importance of identifying a champion engaged in the healthy weight agenda to demonstrate leadership. Lancashire also discuss the relevance of identifying opportunities to link with other cross cutting strategies in building support and how the HWD acts as a lever to bring about action to address healthy weight priorities.

Background

Lancashire County Council followed on from Blackpool Council's lead in taking forward a HWD. The difference being that Blackpool is a neighbouring unitary authority rather than the two tier structure of Lancashire.

Much of the evidence for building the case for local adoption of the HWD, was already available. These were; a local JSNA on obesity, a county wide health behaviours survey, and of course the stakeholder engagement report for ‘Active Lives Healthy Weight’ (Lancashire’s commission for a universal offer for managing excess weight and increasing activity). Supported by the experiences of Blackpool, where there was concern from local councillors about oral health rather than childhood obesity per se; the burden of poor dental health in Lancashire was also included in the rationale.

Learning

In building support, the majority of engagement and communication was through individual conversations, it was opportune as community activities relating to this agenda, across Lancashire, had already attracted some interest from Council membership. A Councillor representing community interest in food and physical activity was identified as Champion to take the HWD forward. At this time local elections were due to take place this gave the impetus for approval of the HWD, which was feasible since there were no explicit or direct pecuniary implications from the policy.

It was also taken up in a time of challenging budgetary constraints.

At this time discussion was also taking place with Food for Life representatives to consider a food strategy for Lancashire, building on the work with the school meals service that had already been achieved (a Soil Association Silver, Food for Life award), and how best to engage our District Councils.

Since the adoption of the HWD, Lancashire County Council considered what it has achieved and reviewed the articles under the HWD internally with departments and staff.



Above: Lancashire County Council adopt the HWD

Consultation revealed that the commitments remained valid and that it will set the trust of work going forward across Lancashire County Council, albeit that some issues were considered more of a priority than others. Acknowledging the role of whole systems approaches in tackling obesity means that a wider engagement strategy is required and particularly in relation to the decommissioning of our behavioural weight management programme Active Lives Healthy Weight. Discussions have been held internally and with partners as to how that will look going forward.

Future Aspirations

Lancashire County Council is working closely with and supporting the work of Pennine Lancashire’s ‘Healthier Place Healthier Future’ childhood obesity trailblazer programme. Pendle Council signed in late 2019 with the other four districts in East Lancashire following suit in 2020. In addition, Lancaster City Council are currently in the process of discussing the merits of adoption of the HWD. As mentioned previously, the County Council is moving its healthy weight services focus from a

behavioural based programme to supporting a whole-systems approach through working more closely with our partner districts at a neighbourhood level. We will be supporting early years and school-based work within settings in addressing the wider and more complex issues relating to building healthier weight friendly places. This will be through a combination of activity with our Children Family and wellbeing services and schools through the Food For Life award schemes. There will be a targeted approach to children's teeth acknowledging common risk factors for both obesity and poor oral health. The role of nutrition and food security in building immune function and healthy bodies is important. Prevention then is a significant priority given the prominence of COVID19 as a health threat. A greater emphasis will be given to addressing these concerns in the coming months.

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Above: Lancashire County Council’s ‘Love To Ride’ Scheme in operation.

LEARNING FROM EXPERIENCE

Leeds City Council

This case study shares perspectives from a large unitary authority in Yorkshire and Humber – the first local authority in the region to adopt the HWD, Leeds City Council this case study focusses on work to improve the food environment.

Background

Leeds City Council was the first authority to adopt the HWD in the Yorkshire and Humber region, as part of a region-wide roll out of the HWD funded by the Association for Directors of Public Health in Yorkshire and Humber. The HWD was first discussed in July 2017 followed by a programme of work including an audit of the Council's current activity to support the 14 commitments, a consultation event with staff to agree six local priorities and meetings with a range of stakeholders.

This work culminated in the adoption of the HWD in September 2018 and then a launch event in February 2019 in which Cllr Rebecca Charlwood, Executive Member for Adults and Health and Ian Cameron, Director of Public Health formally signed the HWD.

Learning

Influencing the food environment is one of the six HWD priorities chosen for Leeds. Delivering action to implement this priority involves a range of Council Teams including Catering, Civic Enterprise, Human Resources, Procurement and Leisure Services. The HWD helped to increase the importance of this priority for the Council and develop Public Health's working relationship with Council Teams. The HWD is well recognised as a key Council initiative which should be considered across all Council Business.

This has shifted the emphasis from Public Health advocating for change to a willingness to work together on a Council Initiative adopted by Executive Board.

Our first objective for this priority was to review the Council's vending contract to enable healthy food choices with the opportunity to influence the planned vending re-procurement. Whilst Leeds City Council recognises that Local Authorities can have a significant role to play in improving the food and drinks offered to staff and visitors, balancing different agendas from stakeholders can be challenging.

Using the HWD to bring stakeholders to the table and having an open dialogue about the considerations for change led to the agreement to undertake research to explore improving the quality of snacks and review how any changes impact on the profits generated. This work included involvement from the vending provider who shared experience from other areas and was very open to making changes. The research undertaken has helped to inform the re-procurement of the Council's vending which now includes health promotion standards based on the Governments Buying Standards for food from July 2019.



Above: Deborah Lowe, Advanced Public Health Specialist presents Leeds’s experience in adopting the HWD at the #FoodActive2020 Conference, November 2019.

Future aspirations

The next steps for this priority include the development of Food Procurement Guidelines to influence the Council’s food and drink purchasing and the products sold in café outlets within Council premises. This work will also help evidence our action to support the HWD commitments.

More broadly our work is focused on raising the profile of the HWD amongst Council Staff which we are currently progressing via a staff survey.

Contact:

Emma Strachan, Health Improvement Specialist, Leeds City Council

Emma.strachan@leeds.gov.uk

FAQs

Obesity is a complex problem. Will a local authority declaration make a difference?

There is no one size fits all solution to obesity, it is going to take action at many different levels before we have any significant progress. However local authorities have an important role to play. They control planning, public and environmental health, leisure and recreation and regeneration and this HWD is a vehicle to take the sort of whole-systems approach needed to tackle this complex issue. The HWD can have an impact across local authority departments, making sure the council works as one to achieve maximum impact, and ideally will by working with other local partners, have an impact far beyond council controlled areas.

What about the economic impact of the HWD?

The role of the local authority is to work for the wellbeing of the population, this responsibility does not only sit with public health, it needs to be considered across all departments. The local authority and other public sector bodies need to balance the long term costs to the health and care services against the short term costs of turning down sponsorship or vending deals. Sponsorship and advertising, vending or others may be a source of income locally and for the local authority but supporting healthier food is the right thing to do.

“We’ve recognised that a community that’s unwell and reliant on lots of services is a drain on resources and a drain on the economy, so really to have a healthy, resilient population will help us with our other objective of regenerating Blackpool”. Dr Arif Rajpura, Director of Public Health, Blackpool.



Above: Healthy food and drink served up at a primary school in Knowsley as part of their commitment to healthier food in public owned establishments.

Where can I get data to support the HWD?

You will need to make a compelling case why action is needed at a council level. Much of the information can be found in the supporting documents we have prepared, including the toolkit, the evidence base and the evaluation. You will need to evidence local data which can be found in recent public health reports, public health outcomes online and/ or healthy weight strategies. When preparing your case, think about all of the departments who can influence healthy weight, both directly and indirectly.

Who needs to be involved in the process of adopting the HWD?

There are many healthy weight stakeholders in each local area who will have an interest in the HWD and what signing up to it might mean for the local council. It is useful if they have a good understanding of the content and purpose of the HWD so they can support the process. Local stakeholders might include:

- Director of Public Health
- Lead Member for Health
- Chair of the Health and Wellbeing Board
- Clinical leads
- Consultants in Public Health/Health Improvement Leads
- Clinical Commissioning Groups
- GPs, dietitians

What happens once the HWD has been passed?

It is important to keep momentum going. Keep an action log so that you can refer to progress made. Set up a stakeholder group to decide upon and push forward next steps.

Consider a follow-up event to engage with council colleagues and other organisations in the locality.

Our authority already has a Healthy Weight/Food Strategy, will there be duplication of work if we adopt the HWD?

There is an appreciation that some councils will already be working to meet the actions/priorities set out within individual healthy weight plans, food or physical activity strategies. The HWD can be used to coordinate all activity linked to these agendas and provide an umbrella and a focus. By signing up to the HWD, a council is able to demonstrate strategic leadership on this agenda and develop methods of engaging wider stakeholders and hold the relevant partners within the council to account. The HWD should also act as a lever to engage external partners such as NHS bodies, third sector organisations and private providers to consider their role in supporting healthy weight plans and strategies.



Above: Bristol City Council and Partners sign up to the HWD, February 2020.

MONITORING AND EVALUATION

As a number of local authorities have now adopted the Local Authority HWD on Healthy weight and are making progress to embed their commitments within council workplans and strategies, Food Active is currently considering how those authorities can monitor, evaluate and review the impact that the HWD has had to date.

So far, from sharing good practice, we have learnt that the HWD aims to enable local authorities to:

- **highlight problems caused by unhealthy weight (local issues/concerns/priorities)**
- **review their policies and how they impact on healthy weight**
- **provide an umbrella and focus for a number of healthy weight, food and nutrition strategies**
- **open up dialogue across a wide range of council departments to acknowledge the councils commitment to reducing unhealthy weight**
- **take leadership but also challenge partner organisations (to consider their own accountability) in addressing unhealthy weight**
- **consider existing and new ways of working to reduce unhealthy weight in local communities and across the workforce**

A 'HWD Implementation, Monitoring and Evaluation Toolkit' has been developed and aims to support authorities to:

1. **Develop appropriate action plans (linking to existing healthy weight/food strategies)**
2. **Review and evaluate progress against commitments in the HWD**
3. **Identify and share best practice**

The toolkit also offers a method of collating qualitative information that might demonstrate how changes in processes, communication, stakeholder engagement etc significantly impact on progress. This approach helps to review efficacy of the HWD as an impetus or mechanism to improve healthy weight outcomes This element of the tool also aims to:

- Enable shared learning and acknowledges that longer term objectives are part of a stepwise process
- Be utilised as learning within a Local Authority but also to share with other authorities as best practice



Above: HWD Monitoring and Evaluation Toolkit

The monitoring and evaluation tool is complementary to this support pack; offering resources for a range of Local Authorities dependent on where they might be in the adoption process whether this be considering adopting the HWD, building support, developing subsequent action plans or monitoring of progress. Ideally the tool should be utilised as part of a 'live process' and ongoing cycle of review and action planning.

HWD Audit & Validation Tool:

In response to ongoing consultation with stakeholders and commissioners and the recent review of the HWD, a light-touch 'audit tool' has also been developed to assist with process

monitoring. Feedback from stakeholders has suggested that the Monitoring & Evaluation Toolkit is particularly useful in the earlier stages of adoption, implementation and action planning. However, there was request for a simple and flexible method of audit and validation that could help authorities demonstrate or signal where progress has been made against the HWD commitments, and to assist in validation for internal stakeholders. This has subsequently been developed and is recommended as an annual audit process against all commitments that have been adopted.

For further information please contact Food Active.



***Above:** Liverpool City Council and Partners adopt the Local Government Declaration on Healthy Weight and Partner Pledge, November 2018*

HOW FOOD ACTIVE CAN HELP YOU

The Health Equalities Group has over 13 years' experience of working in tobacco control in the North West and we regularly draw on this in the design and delivery of our healthy weight campaign, Food Active. Working with our public health and academic partners, Food Active has been responsible for the development of the Local Authority Declaration on Healthy Weight to support local government to exercise their responsibility in developing and implementing policies which promote healthy weight.

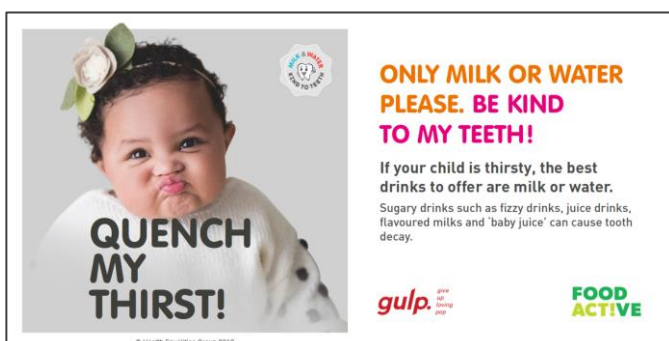
In support of this there are a number of documents and papers referred to throughout this support pack to assist Local Authorities in engaging their members, officers and communities around the issue of healthy weight.

In addition we offer mechanisms by which to engage the public on health matters such as the successful sugary drink campaign 'Give Up Loving Pop': www.giveuplovingpop.org.uk. Launched in 2015, the campaign aims to raise awareness of the harms of consuming too many sugary drinks in children, young people and families. As part of our comprehensive programme of work on sugar and unhealthy weight, the early years campaign 'Kind to Teeth' was also launched in 2018. The campaign aims to support Local Authorities to raise awareness, within communities, of the health impact of sugary drinks consumption in babies and children aged 0-4 years and to increase parent's and carer's knowledge of suitable drinks in the early years. We have also developed a suite of resources to support schools around a whole-school food approach along with resources for those living in food insecurity.

Food Active have also produced a number of resources to support Local Authorities and partners in meeting their healthy weight commitments, many of which have been referenced throughout this support pack, of particular value and interest include a suite of Position Statements available on a range of topics including:

- Children living in food poverty
- The benefits of drinking water
- Outdoor advertising of less healthy food and drink
- Takeaways and healthy weight
- Active travel and healthy weight
- Healthier vending
- Energy drinks
- Health harms of high street giveaways
- Food as a safeguarding issue
- Healthy weight in the early years
- Healthy weight in pregnancy
- Healthy weight in preconception
- Sugar sweetened beverages
- Junk food marketing to children
- Childhood obesity

If you would like further support regarding any of the above or healthy weight and the following; lobbying and advocacy, agenda setting, policy guidance, public facing campaigns, educational resources/briefing documents please contact the Food Active Team. See our contact details on the last page of this pack.



Above: Food Active's Kind to Teeth Campaign

APPENDICIES

Appendix 1: Whole Systems Approach to Obesity and the HWD: a joint narrative

FOOD ACTIVE

Public Health England’s whole systems approach to obesity and Food Active’s HWD: understanding how the approaches can work together

Public Health England (PHE) and Food Active (FA) are both supporting local areas to work across the local system to reduce levels of overweight and obesity and to promote healthy weight through their own respective programmes: the whole systems approach (WSA) to obesity and the local authority HWD (HWD). To stimulate connectivity and provide clear and practical support at a local level, PHE and FA have developed this joint narrative, which explains how the approaches can be used together. As we learn more from local areas we will look for other opportunities to develop this further.

Bringing the two approaches together

The “[whole systems approach to obesity](#)” is very much a process, as opposed to a pre-existing framework of commitments. This is deliberate so that it is universal and inclusive, which means connectivity with programmes like the HWD should prove of mutual value.

Since launching the HWD in 2015, it has been acknowledged that local authorities (LAs) who have adopted the HWD can strengthen the impact of the 14 commitments on the health of the local population by considering them within a WSA. A new commitment advocating systems working has therefore been added to an updated set of 16 standard commitments, which continue to be supported by those that have been locally identified.

Using whole systems process and resources

The HWD is based on a series of commitments which support LAs in utilising a number of levers within the local system to address obesity, providing a good starting point to apply the WSA to obesity process and tools. These support LAs to understand the specific drivers of obesity in their local area, and to identify, prioritise and align actions as part of their local place based healthy weight strategy. When considering and working towards a WSA, additional [support and resources](#) include the following:

- the action mapping tool can help identify gaps in current actions in relation to the wider determinants of health;

- the workshop material and systems mapping tools can enable wider stakeholder engagement outside the local authority, including communities and support wider ownership and buy-in of the approach;
- the action planning phase can support the identification of a wider set of actions that influence different levels of the system; supporting and building on the HWD commitments;
- the activities described in phase 6 of the process can support stakeholders to continuously monitor and adapt their local approach, reflecting changes in the local and wider systems, and to maintain momentum. This can support the HWD commitment to ‘monitor the progress of our plan against our commitments and publish the results’ alongside the light touch audit tool and full-scale monitoring and evaluation tool.

Further examples of how the two approaches can be brought together to strengthen local strategies to reduce overweight and obesity and promote healthy weight are detailed below.

Engaging partners

Both approaches recognise the potential of all partners across the local system, both internally across LA departments (planning, education, leisure and transport) and externally (food and drink sector, NHS organisations, academic institutions and communities) to contribute to reducing obesity and promoting a healthy weight and contain materials to support LAs to achieve this engagement.

Within the WSA, the HWD can be used as an identity, communications and an advocacy tool to generate buy-in and strategic commitments for the healthy weight agenda from elected members and across LA departments. It also has additional commitments to support the engagement of partners across the wider system through a partner pledge, an NHS HWD and a schools HWD.

The WSA contains resources to support both the identification of departments, local organisations and specific individuals currently engaged in supporting work around obesity and those that are missing (network analysis tool). The WSA also includes links and resources to help make a convincing case to secure their buy-in (data recommendations, tailored briefings, workshop plans).

Identifying and aligning actions

The WSA supports LAs to undertake action planning to help local areas identify, prioritise, agree and align actions with stakeholders across the local system. Ensuring actions reflect the local context, building ownership and enabling stakeholders to see their place in the system and the role they can have in changing it.

The HWD commitments can provide a great starting point for LAs undertaking action planning as part of their WSA. The WSA action planning process can help LAs consider the HWD commitments within the local system as well as identify additional local actions/commitments.

As this narrative demonstrates, the WSA and HWD programmes complement each other and LAs already implementing one programme can use the other to help build on and strengthen their local approaches to reducing overweight and obesity and promoting a healthy weight.

APPENDICIES

Appendix 2: Template press release

XX has become the latest council to sign a declaration to promote healthy weight across the borough through improved food and drink provision

Councillors voted in favour of a Local Government Declaration on healthy weight at the Full Council/Cabinet meeting held XXX.

The Council's declaration shows a commitment to reducing overweight and obesity in XX by helping residents to make better choices. Overweight and obesity in XX is currently at a staggering level (enter stats).

Developed by North West based Food Active, the declaration was first adopted by Blackpool Council in 2016 where it has been shown to have made a positive impact on policy at local authority level. Dozens of local authorities have now adopted, and the Declaration continues to gain recognition as a useful tool in helping councils to promote healthy weight across

Council leader XXX, along with Public Health Director XXX, met with representatives from Food Active to put the Council's commitment down in writing by signing a declaration that will be proudly placed in the Council building.

Cllr XXX, Cabinet Member for XXX, said: "Obesity is a huge problem for us in XXX. XX% of children in the borough are overweight or obese by the time they start secondary school (complete using National Child Measurement Programme borough level data).

"It is important to have such a commitment to healthy weight at a council level, to work with all departments to ensure healthy weight is included in all policies. I'm really pleased that this council has taken this positive step.

"Our work will focus on ... (complete with actions the council is committing to under the declaration)

Robin Ireland, Research Director at Food Active and the lead for this project, said: "Congratulations to XXX Council for taking this stand.

"We all know how difficult it is to make the right choices when we are surrounded by unhealthy food, the wrong advertising messages and when sugary drinks are cheaper than water. I am delighted that XX Council is doing everything they can to help their residents, workers and pupils eat healthier.

"I hope other councils will follow XX's example".

For more details on the Local Government Declaration on Healthy Weight visit:
<http://www.foodactive.org.uk/projects/local-authority-declaration/>

APPENDICIES

Appendix 3: Links to useful information

Publications and Briefing Papers

1. Local Authority Declaration on Healthy Weight Briefing Paper: Healthy Weight Why Local Authority Action is Needed. Nicola Calder. Food Active. Summer 2020.
2. Blackpool Local Authority on Healthy Weight Evaluation Report. Robin Ireland. Food Active. June 2017. Available to download at: <http://www.foodactive.org.uk/wp-content/uploads/2017/06/Food-Active-Blackpool-Report.pdf>
3. Perspective Pieces Report: Promoting healthy weight across all area's. Food Active. March 2018. Available to download at: <http://www.foodactive.org.uk/perspective-pieces-report-promoting-healthy-weight-across-all-policy-areas/>
4. Food Active: Local Government HWD Impact and Influences Report. Alex Holt & Beth Bradshaw. Food Active. November 2019. Available to download at: <http://www.foodactive.org.uk/wp-content/uploads/2019/11/HWD-Impact-and-Influence-Report-November-2019-FINAL.pdf>
5. Healthy Weight Healthy Futures. Local Government Action to Tackle Childhood Obesity. Case Studies. Local Government Association. February 2016. Available to download: <https://www.local.gov.uk/sites/default/files/documents/childhood-obesity-has-bee-c95.pdf>
6. Obesity Health Alliance Joint Position Paper on Obesity. December 2017. Available to download at: <http://obesityhealthalliance.org.uk/wp-content/uploads/2017/12/Policy-Position-Statement-Dec-2017-final.pdf>
7. Local Government Declaration on Sugar Reduction and Healthier Food initiative. Visit: <https://www.sustainweb.org/londonfoodlink/declaration/>
8. World Cancer Research Fund International NOURHSING Policy Framework. February 2018. Available to download at: https://wcrf.org/sites/default/files/7_Harness%20Supply%20Chain_Feb2018_FINAL.pdf
9. Promoting Healthy Weight in Children, Young People and Families. Public Health England.2018. Available to download at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/750679/promoting_healthy_weight_in_children_young_people_and_families_resource.pdf

APPENDICIES

Appendix 3: Links to useful information

10. Whole Systems Approach to Obesity. Local Government Association. November 2019. Available to download at:
https://www.local.gov.uk/sites/default/files/documents/1.100_Whole_systems_approach_to_obesity_WEB.pdf
11. Whole Systems Approach to Obesity. Public Health England. July 2019. Available to download at:
<https://www.gov.uk/government/publications/whole-systems-approach-to-obesity>
12. Stigma Free Image Bank. World Obesity Federation. Available at:
<https://www.worldobesity.org/resources/image-bank>
13. Food Active Local Authority Declaration on Healthy Weight Hub. Available at:
<http://www.foodactive.org.uk/the-healthy-weight-declaration-resource-hub/>
14. Food Active & Public Health England Joint Narrative on Whole Systems Approaches to Obesity
15. Food Active Weight Stigma Guidance: http://www.foodactive.org.uk/wp-content/uploads/2020/02/Weight-Stigma-Briefing_Food-Active_July-2020.pdf

Blogs and Media Coverage

- <http://www.foodactive.org.uk/bristol-city-council-adopts-the-healthy-weight-declaration-with-partner-pledges-signed-by-five-local-nhs-organisations/>
- <http://www.foodactive.org.uk/cheshire-west-and-chester-councils-eat-well-be-active-group-officially-launch-food-actives-healthy-weight-declaration-partner-pledge/>
- <http://www.foodactive.org.uk/city-of-york-council-becomes-the-latest-council-to-adopt-the-healthy-weight-declaration/>
- <http://www.foodactive.org.uk/pendle-becomes-the-20th-council-to-sign-up-to-the-local-government-declaration-on-healthy-weight/>
- <http://www.foodactive.org.uk/blog-the-story-behind-the-local-government-declaration-on-healthy-weight/>
- <http://www.foodactive.org.uk/devon-county-council-become-the-first-local-authority-in-the-south-west-to-adopt-the-healthy-weight-declaration/>
- <http://www.foodactive.org.uk/the-healthy-weight-declaration-sharing-the-learning-kirklees-council/>
- <http://www.foodactive.org.uk/the-healthy-weight-declaration-sharing-the-learning-devon-county-council/>
- <http://www.foodactive.org.uk/the-healthy-weight-declaration-sharing-the-learning-leeds-city-council/>

APPENDICIES

Appendix 4: References

1. Cabinet Office. Food Matters: towards a strategy for the 21st century. Strategy Unit. July 2008. Accessed on 29/05/2020. Available at: http://webarchive.nationalarchives.gov.uk/+http://www.cabinetoffice.gov.uk/media/cabinetoffice/strategy/assets/food/food_matters_es.pdf
2. Public Health England: Health Matters: Whole systems approach to obesity. July 2019. Available at: <https://publichealthmatters.blog.gov.uk/2019/07/25/health-matters-whole-systems-approach-to-obesity/>
3. The economic burden of ill health due to diet, physical inactivity, smoking, alcohol and obesity in the UK: an update to 2006–07 NHS costs Peter Scarborough¹, Prachi Bhatnagar¹, Kremlin K. Wickramasinghe¹, Steve Allender^{1,2},
4. Charlie Foster¹, Mike Rayner¹. Journal of Public Health | Vol. 33, No. 4, pp. 527 –535 | doi:10.1093/pubmed/fdr033 | Advance Access Publication 11 May 2011.
5. Public Health England. Adult Obesity Patterns and Trends. (2020). Accessed on 29/05/20 Available at: <https://www.gov.uk/government/publications/adult-obesity-patterns-and-trends>
6. Public Health England. Child Obesity Patterns and Trends. (2020). Accessed on 29/05/20. Available at: <https://www.gov.uk/government/publications/child-obesity-patterns-and-trends>
7. Public Health England. Child Oral Health. Applying All Our Health. Accessed on 29/05/2020. Available at: <https://www.gov.uk/government/publications/child-oral-health-applying-all-our-health/child-oral-health-applying-all-our-health>
8. Public Health England. Whole Systems Approach to Obesity. July 2019. Available at: <https://www.gov.uk/government/publications/whole-systems-approach-to-obesity>
9. Public Health England. Public Health Outcomes Framework. Accessed on 29/05/2020. Available at: <https://fingertips.phe.org.uk/profile/public-health-outcomes-framework/data#page/3/gid/1000042/pat/15/par/E92000001/ati/6/are/E12000004/iid/93077/age/164/sex/4/cid/4/page-options/ovw-do-0 car-ao-0 eng-vo-0 eng-do-0 car-do-0>

THIS SUPPORT PACK HAS BEEN PREPARED BY:

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ORIGINALLY PRODUCED IN JUNE 2017.

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FOR REVIEW: Summer 2021.

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**FOOD
ACTIVE**

**HEALTH
EQUALITIES
GROUP**



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**LOCAL AUTHORITY
DECLARATION ON**

**healthy
weight**



Report of:	Executive Member for Finance and Governance Director of Legal and Governance Services
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Submitted to:	Executive
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Date:	19 July 2023
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Title:	Risk and Opportunity Management Policy
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Report for:	Decision
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Status:	Public
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Strategic priority:	All
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Key decision:	No
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Why:	Decision does not reach the threshold to be a key decision
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Urgent:	No
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Why:	Not Applicable
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Executive summary	<p>This report sets out the Risk and Opportunity Policy 2023-2026.</p> <p>The policy forms part of the corporate governance policy framework underpinning the Council's Strategic Plan and sets out how the Council will ensure that risks are effectively managed, and opportunities exploited to deliver strategic priorities for the town.</p>
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Purpose

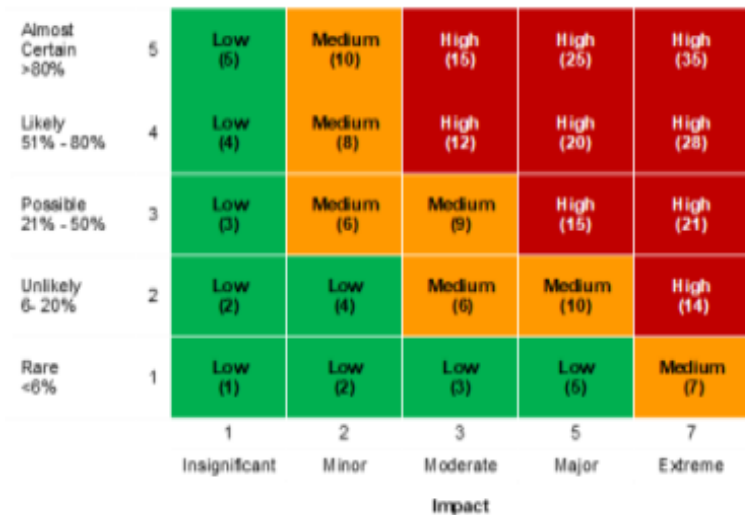
1. The purpose of this report is to seek Executive approval for the refreshed Risk and Opportunity Management Policy.

Background and relevant information

2. The Risk and Opportunity Management policy sets out the Council’s approach to risk and opportunity management to ensure there is an effective, consistent and joined up approach to risk across the Council that will:
 - ensure that proactive risk and opportunity management is embedded within the culture of the Council, and is integral to the business planning and performance management;
 - ensure that the risk and opportunity management cycle and associated processes are implemented consistently and proportionately across the Council; and
 - communicate the Council’s approach to risk and opportunity management to all employees and stakeholders.
3. The Policy sets out the Council’s risk appetite and the cycle that is in place to ensure risk and performance are managed.

The risk appetite as set out in the policy states that:

- Any current RED risks (with a current score of above 12 on the Council’s risk matrix) must be wherever possible managed down to the lowest practicable level immediately.
- Any current AMBER risks (with a current score of 6-10) must be wherever possible managed down to the lowest practicable level within three months.
- Any current GREEN risks are accepted and no specific action is required



4. The Council has in place three levels of risk management within the scope of this policy as set out below. Movement within the Strategic Risk Register is reported to members of Executive on quarterly basis:

- Level 1 Strategic Risks
- Level 2 Directorate level risks
- Level 3 Project/Programme level risks.

5. Operational risk is managed separately, within the Health and Safety policy framework.

What decision(s) are being recommended?

6. That the Executive approves the Risk and Opportunity Management Policy 2023- 2026 which is appended to this report at Appendix One.

Rationale for the recommended decision(s)

7. The policy is being updated to ensure the content remains relevant and complies with latest legislation and best practice.

Other potential decision(s) and why these have not been recommended

8. Not applicable.

Impact(s) of the recommended decision(s)

Legal

9. The policy enables the Council to continue to manage risk in relation to statutory compliance and service delivery.

Strategic priorities and risks

10. The Risk and Opportunity Management policy provides a framework for management of risk across the Council, aligned with the Council’s current financial and performance position. Quarterly reporting of the strategic risk register and associated estimated financial exposure will be reported to Executive and Overview and Scrutiny Board on a quarterly basis.

Human Rights, Equality and Data Protection

11. Not applicable.

Financial

12. The policy is deliverable within the currently approved budget.

Actions to be taken to implement the recommended decision(s)

Action	Responsible Officer	Deadline

Appendices

1	Risk and Opportunity Management Policy
---	--

Background papers

Body	Report title	Date
Executive	Delivery the Strategic Plan 2020 – 2023	18 February 2020

Contact: Ann Marie Johnstone
Email: ann-marie_johnstone@middlesbrough.gov.uk



Risk and Opportunity Management Policy

Creator	Author(s)	Ann-Marie Johnstone, Strategy, Information & Governance Manager		
	Approved by	Executive		
	Department	Legal and Governance Services		
	Service area	Policy, Governance and Information		
	Head of Service	Ann Marie Johnstone		
	Director	Charlotte Benjamin		
Date	Created	21/52/2023		
	Submitted	19/07/2023		
	Approved	TBC		
	Updating Frequency	3 years		
Status	Version: 2.0			
Contributor(s)	Head of Governance, Policy and Information (SIRO); Data Protection Officer; Risk and Business Continuity Business Partner, Director of Finance			
Subject	Risk and Opportunity Management			
Type	Policy			
	Vital Record		EIR	
Coverage	Middlesbrough Council			
Language	English			
Document Control				
Version	Date	Revision History		Reviser
0.1	2020/01/16	First draft		AM Johnstone
1.0	2020/02/10	Agreed policy		P Stephens
2.0	18/07/2023	Policy revised and updated		S McIntyre
Distribution List				
Version	Date	Name/Service area		Action
0.2	2020/02/10	Executive		Approval
2.0	18/07/2023	Executive		Approval
Contact:	Ann-Marie_Johnstone@middlesbrough.gov.uk			

Summary

1. This policy is part of the corporate governance policy framework underpinning the Council’s Strategic Plan and sets out how the Council will ensure that risks are effectively managed and opportunities exploited to deliver strategic priorities for the town.
2. The following sections outline:
 - the purpose of this policy
 - definitions
 - scope
 - the legislative and regulatory framework
 - policy statement
 - roles and responsibilities
 - supporting policies, procedures and standards; and
 - monitoring and review arrangements.

Purpose

3. The purpose of this policy is to set out a corporate approach to risk and opportunity management to ensure there is an effective, consistent and joined-up approach across the organisation.
4. This will deliver the following benefits:
 - ensure that proactive risk and opportunity management is embedded within the culture of the Council, and is integral to the business planning and performance management;
 - ensure that the risk and opportunity management cycle and associated processes are implemented consistently and proportionately across the Council; and
 - communicate the Council’s approach to risk and opportunity management to all employees and stakeholders.
5. Effective implementation of the policy will significantly enhance prospects of delivering the Council’s strategic, tactical and operational objectives; continuous improvement in service delivery and continued compliance with legislation and the principles of good governance.

Definitions

Corporate governance	The systems, processes and values by which local authorities operate and by which they engage with, and are held accountable to, their communities and stakeholders.
Issue	An event that <i>has</i> occurred and should be addressed (as opposed to a risk, which has not yet, or may not, occur).
Risk	The possibility that an event could occur.
<ul style="list-style-type: none"> • Compliance risks 	Risks relating to the contravention of legal duties.
<ul style="list-style-type: none"> • Hazards 	Risks relating to health and safety and emergency planning.

• Operational risks	Risks arising from the day-to-day operation of services.
• PPM risks	Risks arising from the programme or project environment.
• Strategic risks	Risks to the Council's strategic objectives.
Opportunity	Positive risk, which if exploited could enhance the delivery of organisational objectives.
Risk analysis	A systematic use of available information to determine risk likelihood and impact.
Risk appetite	The amount of risk the Council is willing to accept and its posture for treating those risks.
Risk impact	The effect a risk would have if its occurred.
Risk likelihood	A measure of how likely it is that some event will occur in a given time.
Risk and opportunity management	The practice of identifying, analysing and controlling risks and opportunities in the most effective manner.
Risk matrix	A model which visibly displays the relationship between risk likelihood and impact and provides a guide for scoring of risks to ensure consistency.
Risk maturity	The effectiveness of the organisation's risk and opportunity management.
Risk mitigation	The process by which an organisation introduces specific measures to address risks outside of its appetite.
• Risk Terminate (Avoidance)	A risk response that seeks to eliminate a threat by ceasing to carry out the activity concerned.
• Risk Transfer	A response whereby a third party takes on responsibility for an aspect of the risk.
• Risk Treatment	A response that seeks to reduce the probability and / or impact of the risk.
• Risk Tolerate	A response that means the organisations takes the chance the risk will occur.
Risk profile	A summary of identified risks and assessment of their seriousness.
Risk proximity	How far away in time a risk may occur if it materialises.
Risk registers	Working documents that record and quantify risks, assess them and set out mitigation.

Scope

6. This policy applies to all employees (both permanent and temporary), contractors and consultants working for, or on behalf of, the Council.
7. In respect of partnerships and shared services, the risk and opportunity management policy of the lead organisation will apply. Where this is not the Council, managers must ensure that arrangements are in line with the key principles of this policy. The Council has in place a separate Partnership Governance Policy and supporting register of key partnerships and their governance arrangements.

Legislative and regulatory framework

8. Key elements of the legislative and regulatory framework relevant to risk management are set out below.

Civil Contingencies Act 2004	Requires the Council to have risk arrangements in place to manage the risk of emergencies occurring and impacting on the public.
Local Government Act 1999	General requirement to achieve value for money. The effective management of risk and opportunity reduces unnecessary expenditure and increases the likelihood of delivering organisational priorities.

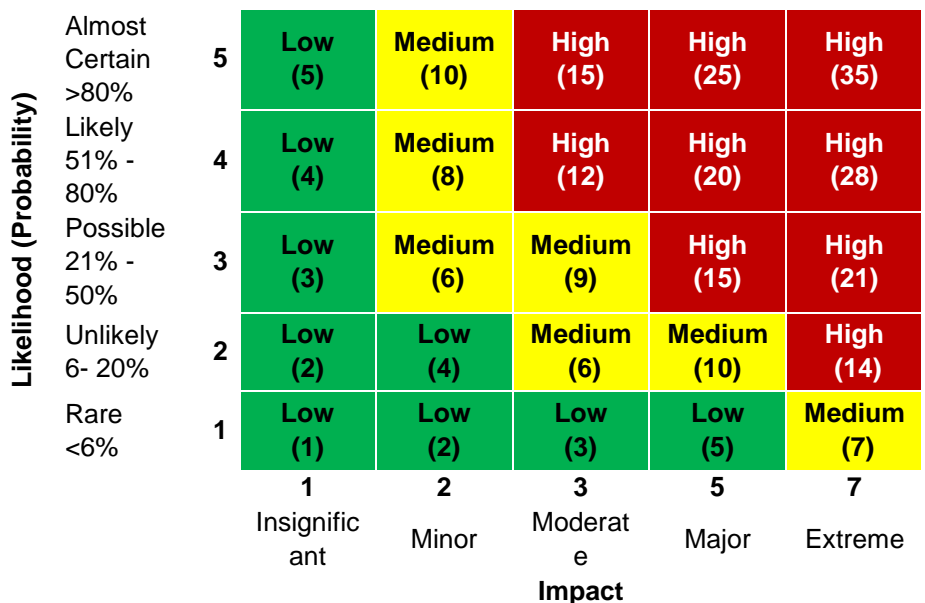
Policy statement

9. The Council has established a clear risk appetite statement, that:

- sets out the amount and type of risk it is willing to seek or accept in the pursuit of its strategic objectives;
- ensures that the risks if it is exposed to are proportionate to the opportunity / reward to be gained;
- staff understand how to judge which risks are acceptable, and which are not;
- the response to risks is proportionate, avoiding over the top or lax reactions to risk; and
- appropriate escalation where the Council’s appetite for risk is exceeded.

10. The risk appetite is the cornerstone of risk management within the Council and provides a framework for informed decision-making. It will be reviewed annually by the Leadership Team.

11. The Council’s risk appetite is illustrated via the below risk matrix. Guidance on the use of this matrix, and all associated risk management activity, is set out in the manager’s risk management toolkit.



12. In summary, the appetite is:

- Any current RED risks (with a current score of above 12 on the Council’s risk matrix) must be wherever possible managed down to the lowest practicable level immediately.
- Any current AMBER risks (with a current score of 6-10) must be wherever possible managed down to the lowest practicable level within three months.
- Any current GREEN risks are accepted and no specific action is required.

13. Subject to the above:

- At least 90% of business plan objectives must be achieved annually
- Programmes and projects must be managed within 5% tolerance
- At least 90% of risk mitigation plans must be achieved
- At least 75% of key performance targets must be achieved annually
- Budgets must be managed within 5% tolerance.

14. In addition to adverse risk, there are occasions when there are opportunities to exploit an issue to have a positive impact on the Council’s strategic priorities. The Council’s appetite for opportunity is illustrated in the matrix below, using the same thresholds as those used for risk scoring:

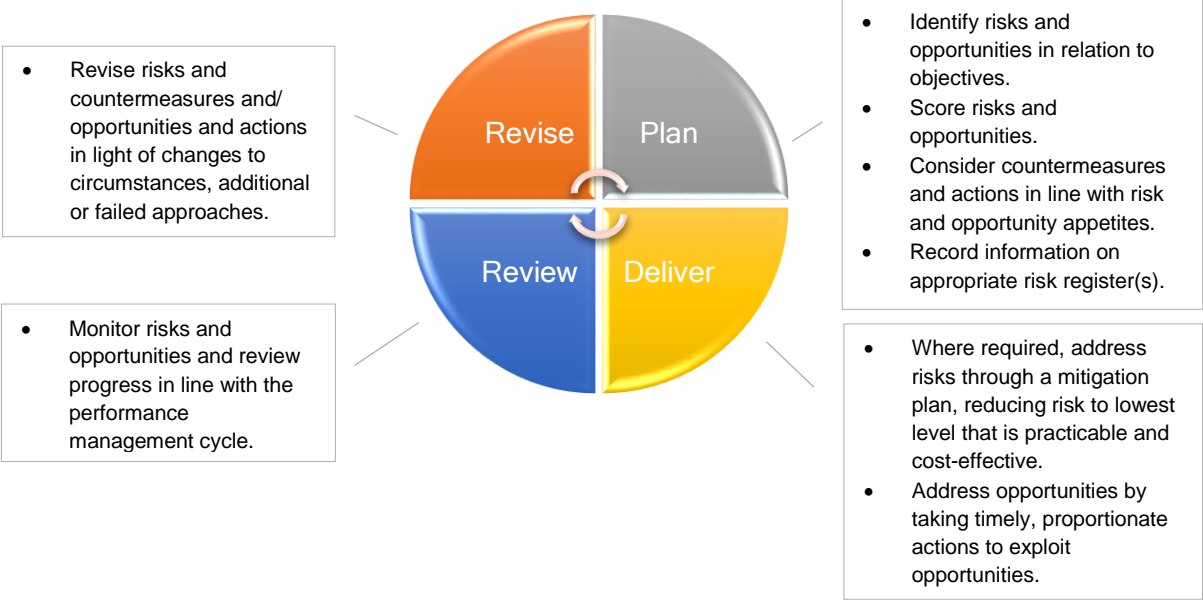
Likelihood (Probability)	Almost Certain >80%	5	Low (5)	Medium (10)	High (15)	High (25)	High (35)
	Likely 51% - 80%	4	Low (4)	Medium (8)	High (12)	High (20)	High (28)
	Possible 21% - 50%	3	Low (3)	Medium (6)	Medium (9)	High (15)	High (21)
	Unlikely 6- 20%	2	Low (2)	Low (4)	Medium (6)	Medium (10)	High (14)
	Rare <6%	1	Low (1)	Low (2)	Low (3)	Low (5)	Medium (7)
			1	2	3	5	7
			Minimal	Minor	Moderate	Major	Maximum
			Impact				

Risk and opportunity management cycle

15. The Council’s risk and opportunity management cycle is based on the best practice outlined in A Risk Management Standard (IRM/AIRMIC/ALARM: 2002), ISO31000 Risk Management principles and guidelines, and other associated documents.

16. There is a clear similarity between the objectives and core processes of risk and performance management, which can essentially be viewed as two sides of the same coin. Both systems support the achievement of the Council’s strategic objectives, with performance management identifying and monitoring what is required to achieve objectives, and risk management addressing those hazards that may occur to prevent this.

17. As such the Council’s risk and opportunity management cycle supports, and is integrated within the Council’s performance management cycle, with all risks and opportunities being identified, reviewed and mitigated or exploited through the Council’s performance management processes. The key elements of the cycle are set out in the following graphic:



18. The Strategic Risk Register sets out risks and opportunities to the Council’s strategic objectives and appropriate countermeasures.

19. As for business plans, risk and opportunity registers will also be developed, managed and reviewed on at least a quarterly basis at the three most senior management levels of the organisation:

- Level 1 Strategic Risks
- Level 2 Directorate level risks
- Level 3 Project/Programme level risks.

20. The more volatile the risk or opportunity, the more closely it must be monitored and managed. Managers are responsible for identifying and recording the countermeasures / actions required to address risks and opportunities and maintaining those details within the Council’s risk management solution. Countermeasures to risk will include actions to terminate, transfer, treat or tolerate the risk. Actions in relation to opportunity will include exploitation (fully or partially) or avoidance.

21. When, following review, risk or opportunity scores move outside of the Council’s appetites, or where controls have failed, or are no longer effective in reducing a risk or exploiting an opportunity as intended, this must be escalated by the risk or opportunity owner to the next level of management as soon as possible and appropriate mitigation plans put in place to ensure that the risk or opportunity complies with the Council’s appetites as soon as practicable.

Roles and Responsibilities

The Mayor and Executive	Overall responsibility for effective risk management, including agreeing the Council's Risk and Opportunity Management Policy, and ensuring that both it and the Council's strategic risk register are monitored and reviewed regularly.
Corporate Affairs and Audit Committee	Review the effectiveness of risk and opportunity management and receive an annual assurance report on progress being made.
Elected members	Ensure that risks and opportunities are being identified and effectively managed. Scrutinise the Executive's decisions to ensure that they meet the requirements of this policy.
Chief Executive and Leadership Team	Lead, coordinate and champion effective risk and opportunity management across the Council, ensuring that the Council fully complies with all corporate governance requirements; regularly review the Council's risk appetite and strategic risk register, utilising the Council's risk management solution to do so.
Section 151 Officer	Supporting the effective governance of the authority through development of: <ul style="list-style-type: none"> • corporate governance arrangements, risk management and reporting frameworks • corporate decision making arrangements. <p>The section 151 officer must ensure that financial and risk implications of policy initiatives have been analysed and appropriately addressed.</p>
Executive Director and Strategic Director	Own and manage Level 1 strategic risk register and ensure that the risk management framework is implemented within department and directorates
Directors	Own and manage Level 1 Strategic risk register and Level 2 Directorate risk registers and ensure that the risk management framework is implemented within department and directorates.
Senior Information Risk Owner (SIRO)	Responsible for the overall management of information risk within the Council, advising the Chief Executive, management team and Information Asset Owners, and ensuring that staff training is available and fit-for-purpose.
Information Strategy Group	Operational group of key officers led by the SIRO responsible for implementing the Information Strategy, in conjunction with Information Asset Owners (Heads of Service).
Risk Management Group	Group of senior officers responsible for ensuring the Council has in place an approach to risk and opportunity management that complies with this policy. The group has reporting lines to enable risks in relation to this policy and other issues to be escalated by the SIRO and other risk owners to be considered as necessary.

Governance, Policy and Information Service	Provides guidance and coordinates the Council's approach to risk and opportunity management, maintaining oversight over all risk registers.
Internal Audit	Ensures that internal controls are robust and operating correctly, audits the key elements of the risk management process and ensures that risk work undertaken across the Council informs the overall audit plan.
Heads of Service	Adopt a risk-based approach to service planning, own and manage service risk and opportunity registers, utilising the Council's risk management solution to do so.
Middle Managers	Adopt a risk-based approach to service planning, own and manage team risk registers, utilising the Council's risk management solution to do so.
Frontline Managers	Adopt a risk-based approach to service planning, manage day-to-day risks, utilising the Council's risk management solution to do so.
All employees	Understand the level of personal performance that is expected and deliver on this. Ensure data is entered accurately and in a timely manner.
Programme Managers	Own and manage Level 3 Project/Programme risk register and ensure that programmes are managed within established tolerances for acceptable risk and that programme boards take ownership of and manage programme risk registers.
Project Managers	Own and manage Level 3 Project risk register and ensure the projects are managed within established risk tolerances, manage the project risk register, and facilitate appropriate escalation and de-escalation of risks between programme and project risk registers.

Supporting policies, procedures and standards

22. The following policies, procedures and standards will be implemented across the Council to support effective risk and opportunity management.

Information Governance Framework	Sets out a framework for effective information governance within the Council, meeting all legal obligations and underpinning the achievement of strategic objectives.
Manage your Risks – Pentana User Guide	Guidance on how risks and opportunities are stored and updated within risk software.
Opportunity impact matrix guidance	Guidance that provides parameters for the scoring of opportunities to ensure consistency across the organisation.
Opportunity Profile Form	Form utilised for profiling and collecting data on opportunity.
Risk impact matrix guidance	Guidance that provides parameters for the scoring of risks to ensure consistency across the organisation.
Risk Profile Form	Form utilised for profiling and collecting data on risk.

Partnership Governance Policy	Sets out the Council's approach to developing and managing partnerships to ensure that their contribution to strategic aims and priorities are maximised.
Performance Management Policy	Sets out how the Council will ensure that performance is effectively managed to deliver strategic priorities for the town.
Project and Programme Management Policy	Sets out how the Council will manage its portfolio of programmes and projects to ensure delivery to scope, cost, time and quality.
Project and Programme Management Framework	Provides more detailed guidance and templates to be used within the life cycle of programmes and projects.
Project Risk Guide	Guidance on the PPM framework and standard project risks.
Project and Programme Management risk impact matrix	Sets out guidance on risk and opportunity scoring within the PPM environment to ensure consistency and appropriate escalation.

Monitoring and review arrangements

23. The Council's expectations around risk and opportunity management are clearly set out within its corporate values and associated competency frameworks. All managers and employees are required to comply with this risk and opportunity management policy to ensure that the Council effectively manages risks and exploits opportunities in pursuit of its strategic objectives. Managers and employees will be provided with a range of resources, and where appropriate, training, to support the effective implementation of this policy.
24. An annual assurance report on the Council's risk and opportunity management arrangements will be submitted to Corporate Audit and Affairs Committee. This will be supported by a targeted internal audits as appropriate, which will be listed in the Council's annual audit plan.
25. The SIRO and other risk owners will provide quarterly updates to the Council's Risk Management Group, and annual reports to management team and Corporate Audit and Affairs Committee.
26. LMT will review the Council's strategic risks on a quarterly basis or more frequently where they are volatile and ensure that any risk whether it be negative or positive affecting the strategic objectives is reviewed and actioned where necessary.
27. The implementation and effectiveness of this policy and its supporting procedures will be reviewed annually, using the following metrics:
- availability of registers against corporate profile;
 - availability of information to support regular tracking;
 - the proportion of risk mitigation plans achieved annually;
 - effectiveness of mitigations in delivering targeted risk scores; and
 - the number of risks that become live issues for the organisation.
28. This policy will be reviewed every three years, unless there is significant development that would require a more urgent review e.g. new legislation.

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MIDDLESBROUGH COUNCIL	
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Report of:	The Mayor and Executive Member for Adult Social Care and Public Health Chief Executive
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Submitted to:	Executive
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Date:	19 July 2023
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Title:	Governance Improvement: Next steps – Resourcing the Financial Recovery and Resilience and Cultural Transformation programmes
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Report for:	Decision
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Status:	Public
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Strategic priority:	Quality of service
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Key decision:	Yes
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Why:	Decision(s) will incur expenditure or savings above £150,000
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Urgent:	Yes
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Why:	Due to the significant financial pressures it is impracticable to defer the decision until it has been included in the forward work programme
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Executive summary
<p>The purpose of this report is to set out the funding ask to support delivery of the financial recovery and resilience and cultural transformation programmes of work that will underpin the Council's corporate governance improvement plan. Other reports will be brought forward as necessary to set out resourcing requirements of the overall programme structure and delivery of other workstreams.</p> <p>For the Executive to consider and approve proposals to draw down from the Corporate Budget, in order to resource the activities identified as part of the next phase of the Corporate Governance Improvement journey, detailed within the Corporate Governance Improvement Next Steps report approved at full Council on 5 July 2023 and as follows:</p>

Executive are asked:

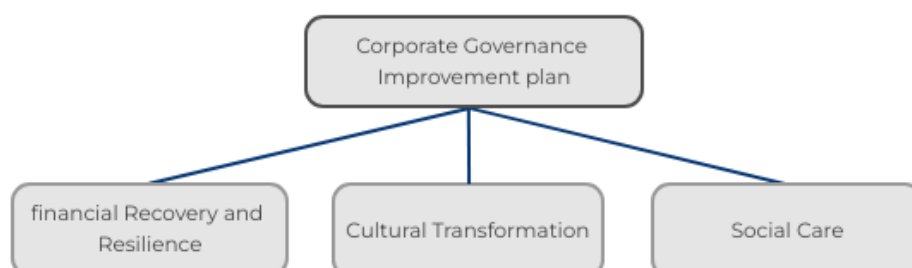
- to note the requirement of additional resources across corporate support services to support delivery of the financial recovery and resilience programme of work within the Corporate Governance Improvement Plan
- to note the requirement for initial funding to commence elements of work within the Cultural Transformation programme of work within the Corporate Governance Improvement Plan
- to approve the funding of up to £491,800 of additional expenditure to secure these additional staff resources, along with the necessary procurement activity to be funded from the available Corporate Contingency Budget.

Purpose

1. The purpose of this report is for the Executive to consider and approve proposals to draw down from the Corporate Contingency Budget in order to fund additional resources to deliver elements of activities identified as part of the next phase of the Corporate Governance Improvement journey, as identified in the Corporate Governance Improvement: Next Steps report approved at full Council on 5 July 2023.

Background and relevant information

2. The Council faces significant financial challenges during 2023/24 and over the medium-term, as reflected by the conclusion in the recent CIPFA review reported in February 2023 and in the External Auditor's Annual Report for 2020/21, considered by the Corporate Affairs and Audit Committee, on 29 June 2023.
3. Phase 3 of the Council's Corporate Governance Improvement Plan was reported to Council for information on 5 July 2023. The diagram below sets out its structure. This report seeks funding to support action in relation to two of the programmes of work that will be delivered by the overall improvement plan. As the Plan continues to be scoped and developed collaboratively with the Advisory Panel that was outlined in the 5 July 2023 Council meeting, there may be further reports brought forward on resourcing to this body. Reports on progress against the plan, scoping etc will be taken to Corporate Affairs and Audit Committee and full Council.



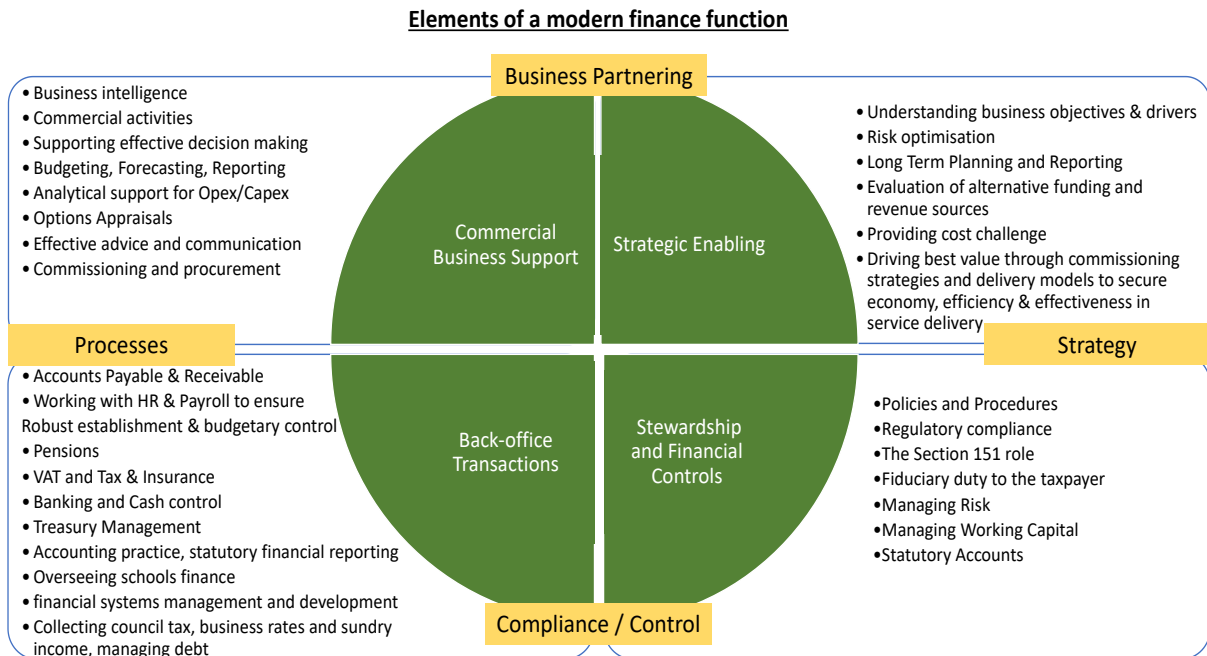
Financial Recovery and Resilience Programme

4. Within the financial recovery and resilience theme there are four specific areas of focus for the next 12 months, critical to the future success of the Council:

- Strengthen grip on budgetary control, savings delivery and assurance processes to maintain financial balance.
- Improve the quality and timeliness of internal and external financial reporting.
- Strengthen financial governance and secure compliance.
- Rebuild financial sustainability through the development of a robust 3-year Medium-Term Financial Plan (MTFP) and associated strategies.

Medium-term vision for Finance

5. The Finance Directorate delivers a range of critical services which underpin the delivery of financial management arrangements across the Council. The diagram below sets out the range of services that a modern finance function should offer:



6. The current service focusses resource on compliance, control and operational process management. Whilst essential activities delivering the foundations of robust financial stewardship, there is potential to realise efficiencies in these operations through more effective use of financial systems, driving cross-organisational compliance with financial processes to deliver timely, accurate and complete financial information which supports strategic decision-making.

7. Over the medium-term, it will be necessary to review the Finance service to develop an operating model capable of delivering a more balanced approach to all aspects of financial management. This will require a shift in ownership and accountability for financial management to budget holders, providing Finance staff with additional capacity to deliver more efficient transactional and control activities thereby focusing their activities in areas which add greater value through, i.e. driving more effective financial strategy, value for money in decision-making and an integrated approach to financial, performance and risk management.

Short-term priorities for Finance

8. In the short-term, it is essential that the Finance Directorate is adequately resourced to enable the organisation to achieve financial recovery and resilience under Phase 3 of the Corporate Governance Improvement Plan. Currently, the accountancy function within the Finance Directorate lacks sufficient capacity and capability to support at the pace required over the course of the 2023/24 financial year, as a result of reductions in staff resources over several years due to budget reductions which has seen some essential accountancy practices being reduced or stopped. Further details are set out below.
9. The current Section 151 officer has been appointed on a 6 month contract, a separate report has been submitted to the Chief Officers Appointment Committee for their consideration which proposes that this term is extended until the end of June 2024 in order to provide leadership stability in that area. The costs for the extension, where they exceed the budget for the post, are included within this report for in principle approval, though the decision to extend the appointment remains with Chief Officers Appointment Committee.

Budgetary controls

10. The recent work required to re-establish monthly budget monitoring and introduction of budget challenge clinics has produced a critical assessment of the Council's financial position and early development of a plan to establish the management actions required to maintain financial balance. However, this has placed a significant strain upon the Finance Business Partnering Team given that services are currently dependent upon finance staff to provide financial information reports and interpret the budget position.
11. To establish a firmer grip upon the financial position, Directors and their management teams will be enabled to access and own their budgetary information more directly and independently of the finance team. Currently, the finance system is not managed and operated in a form that is directly accessible to Budget holders and is instead a tool for accountants, requiring manual intervention to produce financial management reports meaning, budgetary control is heavily dependent on Finance Business Partners. There is therefore an immediate need to supplement Business Partner capacity, to support critically important budgetary control and forecasting work, alongside addressing barriers for budget holders to access financial management information.
12. While work progresses to develop business cases for transformational service models during the 2024/25 budget process, a skilled and experienced business partnering approach will be essential to the development of the supporting financial and economic business cases required. Supplementing experienced capacity in this area will be key to progressing transformation plans.

Medium-term financial planning

13. The development of a robust Medium-term financial Plan (MTFP) for 2024/25 to 2026/27 is dependent upon complex and iterative financial modelling, forecasting and scenario planning based upon varying combinations of assumptions. There is significant work involved in consolidating the overall budget position from across all Directorates, incorporating the various iterations of budget proposals throughout the Council planning and budget-setting process, as the Executive and LMT work together

to develop budget proposals. There is currently only one FTE in the staffing establishment for Financial Planning to undertake such work, which is not sufficient to meet the anticipated workload over the period of the 2024/25 budget development period.

Financial reporting audit and control systems

14. The Council is currently not meeting statutory requirements for financial reporting which require draft accounts for the year ending 31 March each year, to be published by 31 May with the external audit completed by 30 September, each year. The 2020/21 financial statements were recently signed off by the external auditor in April 2023 and the 2021/22 audit is in progress and expected to conclude before 31 December 2023. The 2022/23 financial statements have not yet been published in draft and the External Auditor is not expecting to be able to commence the audit until February 2024 with completion anticipated between June and September 2024.
15. This situation is typical of the national position in many local authorities, with delays to statutory financial reporting and audit delays, as a result of shortfalls in resources in local authority finance teams to meet the increased and more onerous financial reporting and audit requirements in recent years. There is a crucial requirement for temporary additional resources to recover reporting and audit backlogs which cannot be achieved within the existing resources of the Finance team.
16. The Council and external stakeholders must be assured of the Authority's financial position and its financial resilience, therefore recovering this backlog, and achieving timely statutory financial reporting and an audit opinion on the accounts, is an urgent priority in terms of meeting statutory Section 151 Officer responsibilities.
17. The Finance and Investments Team lacks sufficient senior capacity to respond in a timely manner to audit enquiries, which are high in volume and complexity due to the increased work being undertaken by the External Auditor in-line with their risk assessment of the Council. This team also delivers Treasury Management, cash management, systems and financial control functions of the Council that must operate daily to ensure business continuity. It is not possible to cease such activities to focus solely on the accounts and audit, therefore supplementing the team with a suitably experienced accounts closure specialist is necessary for a period of a minimum of 6 months, to recover the backlog.
18. The External Auditor has also made specific recommendations in relation to the Council's arrangements for accounting for infrastructure assets and leasing which need to be addressed to ensure compliance with accounting standards ahead of the 2024/25 financial year. These are complex and detailed pieces of work that can currently only be undertaken by the Head of Service and given the other competing demands, it is necessary to commission specialist technical resources to complete these packages of work under senior management direction.
19. Responsibility for review and updating the Council's financial regulations and contract procedure rules which provide the financial control environment also sits with the Head of Finance and Investment. This work needs to be undertaken as part of the progressing updates to the Constitution and which requires specialist resource to deliver as soon as possible, to develop stronger financial controls, driving compliance across the Council.

20. In order to deliver on these objectives at pace during 2023/24, the priorities of the existing permanent team are being revised to focus on these areas.
21. Alongside this, real-time reporting of the organisation’s financial position is critical, which will be enabled through the development of a financial dashboard for budget holders, to encourage both budget accountability and financial performance improvement.
22. To address the shortfall in capacity in the areas outlined above, it is proposed that the following resources are required, to supplement the permanent accountancy teams to provide increased resilience.
23. Professional finance interims with relevant experience of turning around local authority finances are in high demand in the sector, bring with them a wealth of knowledge and experience, adding significant value in terms of ability to deliver at pace, drive improvement whilst engaging in skills and knowledge transfer of the permanent team to provide a sustainable approach as they exit at the end of their contracts. The packages of work for consultancy require specialist technical skills, which are also in high demand. This is reflected in the estimated total cost for these resources.

Resource requirements	Area of focus	Estimated total cost (£)
Interim staff	Financial improvement; accounts closure and audit, financial reporting, systems, and control	104,000
Interim staff	Financial improvement; financial strategy, business partnering and value for money	104,000
Interim staff	Section 151 Officer post including oncosts	130,000 ¹
Consultancy	Package of work; income policy, fees and charges review, accounting standards compliance	24,000
Consultancy	Package of work; infrastructure, assets and leasing	28,000
Consultancy	Package of work; review of financial and contract procedure rules	24,000
In-house	Outsource an element of wider dashboard development to crease inhouse capacity in the short term Development and implementation of a Corporate Finance Dashboard	n/a
Consultancy	Delivery of essential Qlikview migration from Alteryx to Power BI	21,600
IT licensing	Purchase of Power BI Licenses	4,200
		439,800

24. It is proposed that costs are met from the Corporate Contingency base budget that Council agreed following recommendations of the previous Section 151 officer, for meeting unforeseen service demand pressures. With no specific budget provision for delivering the Corporate Governance Improvement Plan and the requirement for pace in delivery causing extreme pressure upon corporate services such as finance,

¹ Additional cost required over and above current budget for the post.

corporate performance, Human Resources previously impacted by austerity measures, additional capacity in these areas, is critical.

Cultural transformation

25. As set out in the Council report of 5 July 2023, there are significant ongoing actions required to ensure the culture of organisation reflects the characteristics of the best councils so that there are:

- Positive member to member and member to officer relationships that are well developed, strong and this is the norm across the whole Council
- That staff and members have the skills to be able to fully deliver their roles
- Roles and responsibilities are fully understood and respected
- There is a stable senior management structure that can deliver the ambitions of the Council Plan.

26. While work is being undertaken to develop a proposal to deliver a new People Strategy in the medium term, an initial ask has been developed to commence delivery of existing commitments around corporate governance training.

27. This additional cost is set out below and it is proposed to be met from the Corporate Contingency Budget. It will complement existing training, extending coverage and enable the service to extend training beyond e-learning solutions to ensure key good corporate governance practices are embedded and improve compliance with policy requirements:

Resource requirements	Area of focus	Estimated total cost up to (£)
Consultancy / resourcing	Corporate Governance Improvement training for managers and members	52,000

What decision(s) are being recommended?

That the Executive:

- to note the requirement of additional resources across corporate support services to support delivery of the financial recovery and resilience programme of work within the Corporate Governance Improvement Plan
- to note the requirement for initial funding to commence elements of work within the Cultural Transformation programme of work within the Corporate Governance Improvement Plan
- to approve the total additional expenditure of up to £491,800 associated with these additional resources, along with the necessary procurement activity to be funded from the available Corporate Contingency Budget.

Rationale for the recommended decision(s)

28. The Corporate Governance Improvement Plan ensures an inclusive approach to addressing the issues identified in the CIPFA diagnostic work and EY's Value for Money judgement and that the Council's commitments are appropriately resourced to support successful delivery of the essential activity with the Corporate governance

improvement plan. Failure to effectively tackle the fundamental issues identified by the Council’s External Auditors, CIPFA and the Council could result in government intervention.

Other potential decision(s) and why these have not been recommended

29. Other options relating to the use of existing finance staff and the recruitment of suitably experienced permanent staff to undertake the work required were considered however, the lack of existing capacity and the requirement to deliver improvements at pace, as outlined in this report, have meant that these options are not suitable at this current time.

Impact(s) of the recommended decision(s)

Legal

30. There are no direct legal implications, as a result of this report.

Strategic priorities and risks

31. This report demonstrates a continued positive impact on the strategic priority of ‘Quality of Service’, also addressing the strategic risk of ‘failure to achieve good governance’.

Human Rights, Equality and Data Protection

32. Not applicable.

Financial

33. It is proposed that the total cost of up to £491,800 detailed in the report be met from the contingency fund of £1.3m per annum, within the base budget; that Council agreed following the recommendations of the previous Section 151 officer, for meeting unforeseen service demand pressures.

34. With no specific budget provision for delivering the Corporate Governance Improvement Plan and the requirement for pace in delivery causing extreme pressure upon corporate services such as finance, corporate performance, Human Resources previously impacted by austerity measures, additional capacity in these areas, is critical.

Actions to be taken to implement the recommended decision(s)

Action	Responsible Officer	Deadline
Undertake necessary recruitment to ensure additional resources are in place	Director of Legal Services and the Director of Finance	31 August 2023

Appendices

Not applicable.

Background papers

Body	Report title	Date
Corporate Affairs and Audit Committee	Lessons Learnt: Best Value Inspection of Liverpool City Council	5 Aug 2021
Corporate Affairs and Audit Committee	Boho X: Draft findings from internal audit and proposed management response	6 Apr 2022
Corporate Affairs and Audit Committee	Audit Results Report 2020/21	22 Jul 2022
Corporate Affairs and Audit Committee	Statement of Accounts 2020/21	22 Jul 2022
Corporate Affairs and Audit Committee	Lessons learned: Best Value and external assurance within other councils.	22 Jul 2022
Corporate Affairs and Audit Committee	Commencing a corporate governance improvement journey	22 Jul 2022
Council	Corporate Governance Improvement Journey: CIPFA findings and next steps	19 Oct 2022
Council	Corporate Governance Improvement Plan and progress update	30 Nov 2022
Corporate Affairs and Audit Committee	External Audit: Value for Money Governance Update	5 Dec 2022
Council	Corporate Governance Improvement Plan and progress update	18 Jan 2023
Corporate Affairs and Audit Committee	Statement of Accounts 2020/2021	28 Apr 2023
Corporate Affairs and Audit Committee	Auditor's Annual Report – Year Ended 31 March 2021	29 Jun 2023
Council	Corporate Governance Improvement Next Steps	5 Jul 2023

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