

JOINT SCRUTINY TASK GROUP FOR S&ELCP

Joint Scrutiny of the Healthy Living Action Plan



served by One Team

South & East Lincolnshire Councils Partnership

Final Report of the Task Group

Acknowledgements

The following people were involved in this scrutiny review.

Councillors ELDC:

- Terry Aldridge
- Roger Dawson
- Dick Edginton (Chair)

Councillors BBC:

- Suzanne Welberry
- Neil Drayton
- Jyothi Arayambath

Councillors SHDC:

- Mark Le Sage (Vice Chair)
- Ingrid Sheard
- Nanette Chapman

Officers:

- Emily Spicer (Assistant Director, Wellbeing & Community Leadership)
- Roxanne Warrick (Healthy Living Strategic Lead)
- Rebecca James (Scrutiny & Policy Officer)

Guest Witnesses:

- Roxanne Warrick (Healthy Living Strategic Lead)
- Phil Perry (Assistant Director, Leisure & Culture)
- Emma Tatlow and Joanna Blackwell (Active Lincolnshire)

Background and Introduction

The Scrutiny Task Group were asked to review the Health and Wellbeing offer across the sub-region. Following the approval of a single aligned Health & Wellbeing Strategy (HWS) and accompanying action plan for the sub region, a S&ELCP Healthy Living Board (HLB) was formed to assist in prioritising activities to address health inequalities and the wider determinants of health. A key focus for the HLB is to review the accompanying Healthy Living Action Plan (HLAP). The latest version of this can be found at **Appendix C**.

Key lines of enquiry for the task group were as below, and the full scope can be found at **Appendix B**:

1. Review the Health and Wellbeing offer across the sub-region currently, including any existing strategies and policies;
2. Review the action plan, conduct a sense check to ensure it is achievable and relevant to our residents and communities;
3. Research data on health inequalities in the sub-region, including links to the wider determinants of health;
4. To investigate offerings in areas with similar issues of health inequality and deprivation to see what best practice we can learn from.

The Task Group met 6 times and interviewed 5 witnesses, asking them a number of questions regarding both the content and delivery of the HLAP.

The Task Group were advised that there were 5 key ‘Lever Areas’ that make up the HLAP. The 5 areas are:

<p><u>Housing and homelessness</u></p> <p>Improve the supply, quality and coordination of services to meet housing needs and demands</p>	<ul style="list-style-type: none"> • Address the underlying causes of homelessness so that it becomes rare, brief and non-recurring • Improving the supply of housing needs and demands • Improving the quality of existing accommodation to secure an overall improvement in the health and wellbeing of residents • Coordination of partnership activity to provide improved housing choices
<p><u>Activity and wellbeing</u></p> <p>Address inactivity across the county – improving access and opportunity for all residents to be active and participate by leveraging District knowledge and connection with people and places</p>	<ul style="list-style-type: none"> • Active place - creating environments for people, of all ages, to have equitable access to safe places and spaces, in which to take part in regular physical activity • Active people – providing opportunities across the county for residents to participate in activity – in leisure, culture and community • Active system - working across the system in a co-ordinated way to tackle health inequalities, address long term health conditions and improve opportunities for prevention

<p><u>Environment and climate</u></p> <p>Improve understanding of the links between environment and health and maximise opportunities to deliver on both simultaneously</p>	<ul style="list-style-type: none"> • Tackle climate change – including improving air quality and reducing carbon emissions • Awareness and education • Maximising open / green space provision - Licensing and provision of healthy, sustainable food options • Maximise potential of Local Plan reviews to deliver for environment and health together, capturing the above areas
<p><u>Economic inclusion</u></p> <p>Reduce economic inequality and alleviate poverty as a fundamental driver for improving mental and physical health and wellbeing</p>	<ul style="list-style-type: none"> • Supporting those in employment to improve their overall health and resilience to future potential health issues • Supporting transitioning/adaptation of businesses/sectors/employees most susceptible to economic change and transition • Develop a wide ranging and innovative programme with partners to enable residents to improve digital skills and access • Increase the number of residents who are economically active by ensuring those that have health conditions/disabilities can take advantage of the opportunities for more flexible/remote employment opportunities • Health attraction interventions to develop the health and care sector to increase recruitment/retention and support business growth
<p><u>Working with Communities</u></p> <p>Leverage unique links at place level to enable and support local communities</p>	<ul style="list-style-type: none"> • Capture and build on district community engagement knowledge and expertise • Expand district participation in current sector discussions / forums • Strengthen sector oversight and assurance - Enhance and sustain voluntary sector engagement and contribution • A strategic commissioning approach in Lincolnshire • Review opportunities to further develop districts preventative approach, using Wellbeing Lincs as a proven and trusted mechanism for collaboration and innovation

Following initial discussions, they chose to focus their review on the following:

- Activity and Wellbeing
- Working with Communities

The group did originally decide to look at a third lever area ‘Economic Inclusion,’ but as the review progressed, they chose to focus primarily on the 2 lever areas mentioned above, while still being mindful of the issue of affordability surrounding participation in activities outside the home. The newly agreed Sub-Regional Strategy for the S&ELCP helps reinforce this choice,

as the chosen 'lever areas' link directly to 3 of the aims under the 'Healthy Lives' priority for the Partnership. Those aims are:

- Work with the Healthy Living Board to deliver the Healthy Living Action Plan (Housing & Homelessness; Activity & Wellbeing; Environment and Climate; Economic Inclusion; Working with Communities);
- Reduce health inequalities for the social and economic benefit of our communities through voluntary and community sector engagement;
- Target resources, with partners and linking back to economic development and funding opportunities, to improve access to health services and to improve health facilities.

Research, Findings and Analysis

The Group received an introductory presentation on Healthy Living and the Partnership's role in Health and Wellbeing, which can be found at **Appendix D**. The joined up approach means that priorities for each of the Councils can be fed right through to county level, through the following means:

The District Health and Wellbeing Strategy (HWS) – this is a Lincolnshire-wide document and sets the overall aims and objectives for direction. All 3 Councils have adopted the Lincolnshire District Council Health & Wellbeing Strategy. The Joint Health and Wellbeing Strategy aims to inform and influence decisions about the commissioning and delivery of health and care services in Lincolnshire, so that they are focused on the needs of the people who use them and tackle the factors that affect everyone's health and wellbeing. The strategy is structured around five 'lever' areas where districts are uniquely positioned in the system to influence – and therefore where they can most effectively work with partners to deliver sustainable change.

The S&ELCP Healthy Living Board (HLB) helps keep an overview across the three partnership authorities in terms of aims/objectives for the strategy. This Healthy Living Board brings together key people from the health and care system to work together to reduce inequalities and improve the health and wellbeing of the people of Lincolnshire. The HLB meet to develop the action plan to meet the priorities for Lincolnshire. HLB has many partners, and S&ELCP officers feed residents' priorities to them. There are NHS, leisure operators, districts, boroughs attending, plus the Board also engage with and invite others.

The Healthy Living Action Plan (HLAP) helps focus attention on key priorities for our three authorities. HLAP is about priorities for the partnership and how they feed into the county-wide priorities to help ensure they are acted on and delivered by LCC and partners. It is important to note that this is not about what the Councils are delivering themselves, but where they are working with partners to deliver projects and improve quality of life for residents.

This Task Group investigated how district councils can influence the health and wellbeing agenda. The South & East Lincolnshire Councils Partnership is able influence the action plan to ensure it reflects the priorities for South Holland, East Lindsey, and Boston. The activities that sit under the following headings go towards ensuring those priorities are reflected.

- Housing and homelessness
- Activity and wellbeing
- Environment and climate
- Economic inclusion
- Working with communities

Task Group Focus 1 – Activity and Wellbeing

PHYSICAL INACTIVITY

Physical inactivity is the fourth greatest risk factor for premature death. It has a bigger impact than obesity. It is responsible for one in six UK deaths. Meeting recommended physical activity levels can cut the risks of Type 2 diabetes, colon cancer, CHD, stroke, falls and hypertension

by at least 30%. Being active reduces the risk of Alzheimer's, osteoarthritis, hip fractures and depression by between 20% and 80%.

OBESITY

Childhood obesity presents immediate and long-term negative effects on a child's physical and social wellbeing, educational attainment, and mental health. Obese children and adolescents are more likely to be obese in adulthood, consequently at greater risk of adult health problems such as heart disease and Type 2 diabetes, stroke, and cancers. Being overweight or obese is a major public health crisis through its link with serious long-term conditions including; Type 2 diabetes, heart disease, stroke, liver disease and cancer. Obesity is estimated as the third largest risk factor for premature death. The risk of poor health and wellbeing outcomes increases sharply with increasing Body Mass Index (BMI).

S&ELCP activity statistics:

Boston: 36% doing less 30 minutes each week, only 52% achieving government guidelines*

South Holland: 28% doing less than 30 minutes each week, 60% achieving government guidelines*

East Lindsey: 33% inactive, 54% achieving government guidelines (14% fairly active) *

England average: those achieving guidelines of 150 minutes a week is 63%*

**Source: Sport England Active Lives data 21/22*

Task Group Focus 2 – Working with communities

Internal witnesses provided an insight into the work they and their teams do to deliver on health and wellbeing across the 3 Council areas. There are 3 areas of work across the partnership linked to this:

- Leisure contracts
- Cultural offering
- Sports development

SHDC – contract with Parkwood Leisure to 04/25

BBC – contract with Parkwood leisure to 12/26 (there is also property lease sports arena with One Life now bought out by Parkwood Leisure)

ELDC – Funding and Management Agreement with Magna Vitae to 2039

As part of the Annual Delivery Plan, the Partnership Councils are looking at how they can work more efficiently and effectively across the partnership, potentially with a single operator. Any decision on this is likely to be made later this year.

Leisure and Culture contracts support the partnership's health ambitions and ensure a broad section of the community can access facilities at a reasonable price. We work with One You Lincs, Public Health, Glogi, Active Lincs, Sports England and others on variety of initiatives.

Sports and healthy activities across the Partnership:

ELDC – Magna Vitae run these activities for us under a 3 year funded programme;
BBC – GMLC and club development initiatives;
SHDC – various initiatives in collaboration with clubs/groups.

Where possible, the Council provides support for clubs, such as set-up and funding opportunities, grants etc. to assist with the development of sites / offerings. Examples of partners we work with include:

- Active Lincolnshire,
- Sport England,
- Football Foundation and Lincolnshire FA
- One You Lincs
- Public Health
- Glogi

Task Group Discussions

Discussions centered around how the three Councils could best influence work being done in their areas and what key things to try and influence were. Key points raised as issues across the three areas were as follows:

- Affordability;
- Access for children and their parents to activities;
- Education for young people on healthy and active lives;
- Equality – to ensure access for all – including those with disabilities (including physical, mental and hidden disabilities);
- Equality of access, including consideration of economic disadvantage.

Conclusion

The task group realised that although this is not a statutory area for district and borough councils, we nevertheless have an enormous amount of ‘soft influence’ particularly now we are a Partnership. It is important for residents of all 3 Councils that the partnership uses its influence to continue to work closely with external partners to facilitate opportunities and provision for Health and Wellbeing, focusing on the identified priorities for residents.

Following discussions, the task group have made a number of recommendations for consideration as the Healthy Living Action Plan continues to develop and evolve. These can be found on page 9 of this report. They primarily focus on actions that are already in the HLAP as this gives a steer to officers and Councillors on the S&ELCP HLB on what the priorities for residents in the three partnership areas are.

Recommendations

1. To make better use of green spaces to maximise opportunities for residents and visitors to be active;
2. To review green open space in our communities and explore ways of using it better by working in partnership;
3. To develop opportunities to positively influence internal / corporate decision making;
4. Community engagement **at all levels** to increase the trust and confidence of residents;
5. To ensure equality of access for people from diverse backgrounds, for example those with disabilities, both hidden and visible, or language barriers;
6. Bring together current discussions and approaches around community development, the role of leisure and culture and future collaboration;
7. Further develop District Councils preventative approach;
8. More active promotion of local services in each area of the Partnership;
9. To review progress in 6 months with the Healthy Living Board and report back to members via an all-member briefing session.

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