

WKHWB Obesity T&F Group

Meeting 1st November 2016

Present: Heidi Ward, Val Miller, Yvonne Wilson, Malti Varshney, Sally Allen, Wayne Gough and Sarah Lovell Jane Heeley

1. Actions from 20/7/16

- Commissioning T3/4 - KCC will produce an options paper for consideration by CCG early 2017. Expected that T3 will be commissioned by CCG as per NICE standards
- T4 current provider likely to continue
- T2 commissioning needs to link into NDPP.
- NHS England funding for T has not yet been allocated
- Numbers of T3 individuals presenting on T2 programmes needs to be considered. T2 is not a substitute for this programme.
- Work still needed on pathway – KCC/CCG

2. Diabetes Prevention Pathway

- There is likely to be overlap between T2 and the NDPP, the key considerations are GI and BMI. Guidance is that those presenting with both high should be referred to DPP.
- Ignius is the Kent provider (also include Sussex and Surrey)
- There is a local incentive scheme in place to which most WK GP's have signed up to.

3. National Childhood Obesity

- Report to WKHWB – Bob Bowes met with LCPG leads who have highlighted concerns over XS weight as a priority and expressed that the key is to early intervention and need better understanding of maternity and health visiting services and Prevention Pathways WK HWB has a role therefore in influencing the commissioning of children's and maternity services.
- All LCPG Groups need a formal connection with NCMP groups (name change to Childhood Obesity Operational Groups, which will now consider age 0-19) – VM

- MECC issue to consider here – YW asked how MW/HV incorporate lifestyle discussions with clients?
- How do we know population level outcomes are taking place? There needs to be an unpicking of the extent to which organisational boundaries are barriers to progress and how the transformational approaches that are needed at operational levels are being communicated to health professionals.
- Health Visitor procurement process was discussed
- Suggestion that there is a WK Childhood Obesity Symposium to review and challenge current practice.
- ACTION: Lynne Weatherly write to BB requesting there is an obesity audit in all commissioning plans and that NICE quality standards are included.

4. Campaigns update – joined by Wayne Gough and ??

- KCC commissioned Agency continues to work on C4L messaging, in particular 3 major areas:
 - Continuing to promote C4L in Kent – radio campaign signposting to website, physical activity planner/healthy lunchbox suggestions for schools
 - Support for front line staff – working with HV's; Children's Centres; Healthy Living Staff and GP's – testing out what a good conversation looks like, what support/resources are needed and whether they use C4L and to what extent.
 - Support for the wider system – tweets for partners and partner resource hub.
- How is success and ROI being measured? Reviewing numbers of visits to the C4L local site and numbers of apps and downloads as well as the sign up to various elements. Looking at post campaign evaluation.
- **ACTION – WG to send details**
- **NMCP work - VM** – 36 schools have been identified in each District and 75% of these have engaged with the Sugar Smart programme. Evaluation is currently taking place. ACTION – Sarah to provide details around ROI and what was most successful in triggering behaviour change.
- Healthy Start – to what extent can District Revs and Bens Teams help promote the take-up of free vitamins and vouchers? ACTION: JH/WG to explore with TMBC Revs and Bens Manager.

5. MECC

- There is currently a Housing pilot running in Kent. What is the feedback from this? **ACTION:** JH to liaise with TMBC Housing.
- Need to keep an eye on PH(E) plans to deliver MECC and MV is meeting with them next week to discuss how different professional groups can be engaged and what approaches might work best for each. **ACTION: MV to feedback.**
- MV also meeting with the workforce lead for the STP and look at how MECC can be incorporated into that. **ACTION: MV to feedback at next meeting.**