

# Public Document Pack

# Blackpool Council

25 February 2020

To: Councillors Benson, Blackburn, Brookes, Campbell, Jackson, Kirkland, Smith, I Taylor and L Williams

The above members are requested to attend the:

## EXECUTIVE

Wednesday, 4 March 2020 at 6.00 pm  
in Committee Room A, Town Hall, Blackpool

## A G E N D A

### 1 DECLARATIONS OF INTEREST

Members are asked to declare any interests in the items under consideration and in doing so state:

(1) the type of interest concerned either a

- (a) personal interest
- (b) prejudicial interest
- (c) disclosable pecuniary interest (DPI)

and

(2) the nature of the interest concerned

If any member requires advice on declarations of interests, they are advised to contact the Head of Democratic Governance in advance of the meeting.

### 2 COUNCIL TAX 2020/21 (Pages 1 - 22)

To consider Proposals for Blackpool Council's level of Council Tax for 2020/21 and the General Fund Revenue Budget 2020/21 for recommendation to the Council meeting on the 9 March 2020.

### 3 HEALTHY WEIGHT SCRUTINY REVIEW FINAL REPORT (Pages 23 - 52)

To consider and offer a response to the recommendations of the final report of the

## Healthy Weight Scrutiny Review.

**Venue information:**

First floor meeting room (lift available), accessible toilets (ground floor), no-smoking building.

**Other information:**

For queries regarding this agenda please contact Lennox Beattie, Executive and Regulatory Manager, Tel: (01253) 477157, e-mail [lennox.beattie@blackpool.gov.uk](mailto:lennox.beattie@blackpool.gov.uk)

Copies of agendas and minutes of Council and committee meetings are available on the Council's website at [www.blackpool.gov.uk](http://www.blackpool.gov.uk).

<b>Report to:</b>	<b>EXECUTIVE</b>
<b>Relevant Officer:</b>	Steve Thompson, Director of Resources
<b>Relevant Cabinet Member:</b>	Councillor Simon Blackburn, Leader of the Council
<b>Date of Meeting:</b>	4 March 2020

## COUNCIL TAX 2020/21

### 1.0 Purpose of the report:

1.1 Proposals for Blackpool Council's level of Council Tax for 2020/21 and the General Fund Revenue Budget 2020/21.

### 2.0 Recommendation(s):

2.1 To consider all information received since the meeting of the Executive on 10 February 2020 including the Final Settlement Funding Assessment announced on 6 February 2020 and to determine whether or not to confirm the Executive's recommendation to Council regarding the General Fund Revenue Budget 2020/21.

2.2 To recommend to Council approval of a level of Blackpool Council's Council Tax for the year 2020/21 of £1,618.39 at valuation band D equivalent (an increase of 3.99% including the 2% Adult Social Care Precept).

2.3 To recommend to Council the level of net expenditure for the General Fund Revenue Budget 2020/21 of £142,084,000.

2.4 To note that the Police and Crime Commissioner for Lancashire's precept for the financial year 2020/21 was agreed on the 20 February 2020 as £211.45 at valuation band D equivalent an increase of 4.96%.

2.5 To note that the Lancashire Combined Fire Authority met on the 24 February 2020 to set its precept for the financial year 2020/21, this was agreed as £70.86 at valuation band D equivalent an increase of 1.99%.

### 3.0 Reasons for recommendation(s):

3.1 The Executive is required to consider the outcome of consultation meetings and surveys before finalising its Budget proposals.

The setting of the General Fund Revenue Budget and the level of Council Tax is consistent with the principles approved by the Executive at its meeting on 10 February 2020.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? NO

3.2b Is the recommendation in accordance with the Council's approved budget? Not applicable – the report once approved will become the Council's new approved Budget

3.3 Other alternative options to be considered:

Although one of the eight guiding principles of the Council's Medium-Term Financial Sustainability Strategy 2016/17 – 2021/22 is "to keep Council Tax levels as low as possible", Government funding reductions alongside increasing service demands and inflationary pressures on the Council's Budget in 2020/21, in particular Children's Social Care pressures, prevent a Council Tax level any lower than the capped level being prudent or practicable.

The council tax level recommended balances all eight principles with the need to fund and maintain core services. Although the level of Council Tax at valuation band D that is recommended is £1,618.39, the profile of hereditaments in Blackpool with bands A and B comprising 74% of the total means that the average Council Tax payable per dwelling in 2020/21 is estimated at £841.

#### 4.0 Council Priority:

4.1 The report covers both of the Council priorities:

- "The economy: Maximising growth and opportunity across Blackpool"
- "Communities: Creating stronger communities and increasing resilience"

#### 5.0 Background Information

5.1 At its meeting on 10 February 2020, the Executive considered a report of the Director of Resources that recommended to Council approval of a net expenditure for the General Fund Revenue Budget of £142,084,000 that would result in a level of Council Tax for the year 2020/21 of £1,618.39 at valuation band D equivalent. This is an increase of 3.99% including the 2% Adult Social Care Precept.

- 5.2 The Final Settlement of Blackpool Council's 2020/21 Settlement Funding Assessment was announced by the Ministry of Housing, Communities and Local Government on 6 February 2020. There were no changes to the Provisional Settlement Funding Assessment of £63,300,000 for 2020/21.
- 5.3 As part of the final Local Government Finance Settlement the threshold for 'excessive' Council Tax increases for 2020/21 was confirmed at 4%, an increase of 4% or more requiring a local referendum to be held. This 4% threshold includes the additional 2% allowed for expenditure on Adult Social Care and 2% for other expenditure. The level of Council Tax recommended in this report will not invoke this requirement.
- 5.4 Besides the ongoing dialogue with the trade unions throughout the budget-setting process, consultation has taken place via community engagement meetings and the Council has also undertaken two engagement exercises to seek comments and ideas on the Budget, one aimed at individual residents and staff which attracted 127 responses and the other aimed at stakeholder organisations which received 21 responses. Both sought views on Council priorities and services at a broad level and asked for comments on ways in which the Council could save or generate money. Wider consultation has taken place via the Council's extensive corporate communication methods which include media briefings. Also a Budget Scrutiny Panel was held on 24 February 2020 which considered the impact of the 2020/21 Council budget proposals. The minutes from that meeting will be circulated separately to members once produced.
- 5.5 The precepts of the Police and Crime Commissioner for Lancashire was agreed on the 20 February 2020 as £211.45 at valuation band D an increase of 4.96%. The Lancashire Combined Fire Authority's precept for the year 2020/21 was agreed on the 24 February 2020 as £70.86 at valuation band D equivalent an increase of 1.99%.
- 5.6 Does the information submitted include any exempt information? No
- 5.7 **List of Appendices:**
- Appendix 2a: Equality Analysis (EA)
- 6.0 **Legal considerations:**
- 6.1 There is a duty for major precepting authorities to issue a precept for 2020/21 before 1 March 2020. For other local authorities including Blackpool Council there is a duty to set 2020/21 budgets before 11 March 2020.

**7.0 Human Resources considerations:**

7.1 Human Resources considerations were outlined in the General Fund Revenue Budget 2020/21 report.

**8.0 Equalities considerations:**

8.1 In the course of developing this year's Council Tax proposal, officers have considered whether there could be unintended adverse impacts on people because of shared characteristics protected by the Equality Act.

8.2 The Council believes the policy will not have any adverse or indirectly discriminatory effects. In particular, we have analysed the impact on vulnerable groups and people who share the protected characteristics under the Equality Act.

8.3 A full Equality Analysis report into the detailed budget proposals within the Revenue Budget has underpinned this consideration. This analysis, together with other information available to us gives us a picture of the needs of a community that consistently is ranked at the top of the most deprived in England in terms of income, employment and health.

8.4 In regard, to impact, the Council believes the proposals are the best that we can do to continue to protect core services to vulnerable people and communities, together with the need to balance the budget and move to a greater self-sufficiency with regard to income and tax-raising given the future reductions in central government grant support outlined in the Medium-Term Financial Sustainability Strategy.

8.5 A summary of the Council's equalities analyses of the consequences of the budget proposals on services and their users is attached at Appendix 2a.

**9.0 Financial considerations:**

9.1 As outlined in this report.

**10.0 Risk management considerations:**

10.1 A Risk Analysis was produced for the General Fund Revenue Budget 2020/21 report to the Executive on 10 February 2020 - this remains applicable.

**11.0 Ethical considerations:**

11.1 In the context of a budget savings requirement of £19.65m in 2020/21 with inevitable reductions to some services, a Council Tax increase of 3.99% which will yield £2.31m is a necessary contribution to ensure that key Council services are maintained.

**12.0 Internal/ External Consultation undertaken:**

12.1 Consultation meetings on the broad budget position facing the Council have always been undertaken with the community equality groups. The Council's Director of Resources or his representative has often personally attended and briefed a number of these groups over this period.

12.2 Wider communication has also taken place via the Council's extensive corporate communication methods, which include website, social media, media briefings, press statements and interviews.

12.3 Once specific proposals were published in January 2020, detailed consultations with all affected stakeholders - amongst them staff, service users and communities of interest/equality groups – have taken place. The outcomes of these consultations have been considered by key decision makers and accordingly have informed the final proposals contained in the budget.

12.4 Consultation with the trade unions with regards to staffing issues has been embedded into normal working practices and has also met all formal consultation requirements.

**13.0 Background papers**

13.1 Budget working papers and above consultation minutes and feedback.

**14.0 Key decision information:**

- |      |   |         |
|------|---|---------|
| 14.1 | Is this a key decision?   | Yes     |
| 14.2 | If so, Forward Plan reference number:                               | 29/2019 |
| 14.3 | If a key decision, is the decision required in less than five days? | No      |
| 14.4 | If <b>yes</b> , please describe the reason for urgency:             |         |

**15.0 Call-in information:**

15.1 Are there any grounds for urgency, which would cause this decision to be exempt from the call-in process? No

15.2 If **yes**, please give reason:

**TO BE COMPLETED BY THE HEAD OF DEMOCRATIC GOVERNANCE**

**16.0 Scrutiny Committee Chairman (where appropriate):**

Date informed: 25 February 2020      Date approved: N/A

**17.0 Declarations of interest (if applicable):**

17.1

**18.0 Executive decision:**

18.1

**18.2 Date of Decision:**

**19.0 Reason(s) for decision:**

**19.1 Date Decision published:**

**20.0 Executive Members present:**

**21.0 Call-in:**

**22.0 Notes:**

22.1



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**Equality Analysis (EA) Record Form**  
Formerly Equality Impact Assessment



**February 2020**

Department: **Corporate**

Team or Service Area Leading Assessment:

**Coordinated by Senior Equality and Diversity Advisor**

Title of Policy/ Service or Function:

**Council Budget 2020-2021**

Committee:

**Executive**

Lead Officer:

Director of Resources

**STEP 1 - IDENTIFYING THE PURPOSE OR AIMS**

1. What type of policy, service or function is this?

**New/ proposed**

2. What is the aim and purpose of the policy, service or function?

The proposals are intended to support the management of a reduction in funding which have led to a gap of £19.65 million in 2020/21 and further pressures anticipated in future years, as set out in the Medium-Term Financial Sustainability Strategy and in the main Executive report.

The purpose of this equality analysis is to:

1) Describe the work and decision making processes which assess potential impacts on key equality groups (protected characteristics) of the Budget proposals and highlight potential areas of adverse impact that could constitute discrimination.

2) Set out actions to ensure procedures are in place to continue to monitor and review the Equality impact of reduced revenue funding and consequent service and staff reductions.

Background and legal context

The Council has a statutory responsibility under section 149 of the Equality Act 2010, known as the "Public Sector Duty". This requires a conscientious and systematic examination of impacts on equality issues on all relevant decisions. This is set within the context of our overarching requirement under Equality law, as a designated public authority to have "due regard" to the need to:

- Eliminate discrimination, harassment, victimisation and other prohibited conduct
- Advance equality of opportunity

- Foster good relations between different (defined) groups

### Council commitment to Equality and Diversity

The Council's priorities and commitments are contained in a). The Equality Objectives <sup>1</sup>b) The Council Plan 2019-2024.

These documents describe the importance of this agenda to the Council and set out four specific Objectives.

### The Councils approach to Equality Analysis of the 2020-21 Budget proposals

As with previous budgetary cycles the Council has implemented a multi-level approach to the equality analysis exploring the impact of the Budget decisions arising from the Government's financial settlements.

This is in recognition of the complex effect on service users, staff, citizens and visitors of these decisions. This process involves a number of elements , key stages are summarised as :

- Initial service level proposals and scoping of equality issues. Focus is on the expected and known impact of service reduction proposals on key equality groups / protected characteristics; this work is led by the Senior Leadership Team responsible for the services, guided by advice by the Senior Equality and Diversity Advisor. The work is to identify the scope of possible impacts, in order to inform Chief Officer's deliberation and Elected Members selection of proposals to take forward to consultation.
- Briefing sessions with all Chief Officers to explore possible scope and impact of specific proposals on key Equality issues.
- Concurrently, initial engagement on the likely scope of the overall Budget position has been conducted with the Community wide Equality Engagement groups including the town wide Disability Partnership and Faith Forum.
- All budget related proposals with significant equality implications are identified to decision makers, an appropriate level of impact work is commissioned through data analysis and consultation with service users, and other stakeholders affected.
- Assessing staffing impacts. At this stage we are able to assess the effects of budget reductions on staff diversity issues. We do this by preparing a benchmark analysis of the current levels of workforce diversity for each of the key equality characteristics – Race, Gender, Disability, Age, Religion and Belief, and Sexual Orientation. This is then compared to the demographic profile of the pools of staff that have been placed at risk of redundancy through the specific service proposals, and any significant variances highlighted and investigated.

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<sup>1</sup> The Council's Equality Objectives are :

**Services** – We will deliver services that are fair – measured by more people telling the Council they experience fair treatment by Council services

**Staff** – We will ensure that the workforce is more representative of the community the Council serves and equality and diversity is embedded in our staff culture

**Decision making** – We will involve people from diverse backgrounds in decision making at every level

**Cohesion** – We celebrate the growing diversity in Blackpool and increase respect and understanding for all

This work is important for two reasons, firstly, to ensure there is no discrimination through the selection process and secondly, to track our process in working towards a workforce that better represents the community we serve. The assessment forms the basis of discussion and consultation with staff representatives through the Trade Union JCC structures.

- At appropriate stages, all the above is communicated and discussed with Chief Officer and the Executive Members. This in turn informs the final decisions, which are included within the finalised 2020-21 Revenue Budget report.

#### Ongoing Departmental Equality review and compliance monitoring

To reinforce specific analysis of budget related decisions, the Council operates a rigorous Equality performance and compliance process, which applies to all departments. This process aims to reinforce the annual work on budget equality analysis by focusing on the systems and procedures in place across the councils departments that ensure compliance with the Public Equality Duty, as well as wider good practice in equality and diversity.

3. Please outline any proposals being considered.

Funding and budgetary proposals as set out in the Executive report entitled General Fund Revenue Budget 2020/21 and in the report's other appendices.

4. What outcomes do we want to achieve?

To manage the impact of a further reduction in funding which have led to a funding gap of £19.65 million in 2020/21 and further pressures anticipated in future years as set out in the Medium-Term Financial Sustainability Strategy.

5. Who is the policy, service or function intended to help/ benefit?

Many of the Council's services specifically addressing social and economic inequalities and have a wide impact on inclusion and community cohesion in Blackpool.

6. Please summarise the main data / research

#### **Population Demographics**

The population of Blackpool is estimated as 139,305, with a larger proportion of residents aged 60+ compared to national age structure. Residents are mostly of White British ethnicity. Black and Minority Ethnic groups, including Irish and European residents, are estimated to make up 6% of the population approximately 8,500 people, compared with the estimated proportion for England of 20%.

According to the most recent estimates the population of Blackpool continues to gradually fall year on year. This goes against both the regional and national trend as the population of the North West and England are both seeing gradual increases each year.

**1. Table 1: Population Demographics**

Age <sup>ii</sup>	Blackpool %	England %
Aged 0-17 years*	20.8	21.4
Aged 18-24 years	7.8	8.6
Aged 25-59 years	45	46.5
Aged 60+	26.5	23.6
Ethnicity <sup>iii</sup>		
White British	94	80
White Other e.g. European, Irish	3	6
Mixed/multiple ethnic groups	1	2
Asian/Asian British	2	8
Black/African/Caribbean/Black British	0.2	3
Other ethnic group	0.2	1
Tenure <sup>iv</sup>		
Owned or Shared Ownership	62	64
Social Rented	11	18
Private Rented	26	17

\*Totals may not add up to 100% due to rounding

The most recent data for Blackpool shows a higher percentage of residents who are described as separated or divorced, 12.5%, compared to 9.2% in the North West region and 8.7% in England & Wales.<sup>v</sup>

## Age

Blackpool has a slightly older demographic in comparison to the regional and national average with 20.4% of people over the age of 65 compared to 19.1% for the North West and 18.2% for England. The percentage of people who are of working age in Blackpool is below that of the regional and national averages with 61% of people aged between 16 and 64 compared to 61.9% in the North West and 62.6% for England. The number of people aged under 16 in Blackpool is also slightly lower with 18.6% of people in Blackpool aged below under 16 compared to 19% in the North West and 19.2% for England.<sup>vi</sup>

## Race and Ethnicity

Blackpool has a predominantly white population with 94% of people describing themselves as White British compared with 80% for England. The Black and Asian community make up 3% of Blackpool's population, whilst another 3% of the population are of Eastern European origin.<sup>vii</sup>

According to the 2011 census 94.6% of people living in Blackpool were born in the United Kingdom as opposed to 91.8% regionally and 86.6% nationally. Of those born outside of the UK, the highest percentages were born in Europe (2.5%) and Asia (1.4%).

Ethnic Group	Blackpool %	England %	North West %
White British/other	96.6	85.5	90.2
Mixed ethnic groups	1.2	2.2	1.6
Asian	1.2	6.2	5.6
Black	0.2	3.4	1.3
Arab	0.1	0.4	0.3
Other	0.1	0.6	0.3

### Gender and Transgender

Blackpool's population is composed of 49.6% men and 50.4% women (similar to the national gender balance).<sup>viii</sup> The census does not currently include questions relating to Transgender. National Government estimates the total number of Tran's people in the UK as within the range of 200,000 to 500,000.

However, Blackpool has a significant LGBT community therefore; the numbers of transgender people who visit and live in the town are likely to be significantly higher than the national average.

### Religion or Belief/Faith Communities

The majority of the Blackpool population are Christian, with 67.2% of people describing themselves as Christian compared with 67.3% in the North West and 59.4% in England. Over 24% of people in Blackpool describe themselves as having no religion. This is similar to the national figure of 24.7%. However, the percentage of people with no religion in the North West is smaller with only 19.8%.

The remaining population is relatively small with only 0.7% of people describing themselves as Muslim, this equates to just over 1,000 people in Blackpool. This is significantly lower than the figures for both the North West and England with 5.1% and 5% respectively. Blackpool also has lower proportions of its population who describe themselves as Buddhist, Hindu, Jewish and Sikh compared with the rest of the country. <sup>ix</sup>

Religion	Blackpool	North West	England
Christian	67.2	67.3	59.4
Buddhist	0.3	0.3	0.5
Hindu	0.2	0.5	1.5
Jewish	0.2	0.4	0.5
Muslim	0.7	5.1	5.0
Sikh	0.0	0.1	0.8
Other religion	0.4	0.3	0.4
No religion	24.5	19.8	24.7

## Sexual orientation

There is anecdotal evidence to suggest that Blackpool has one of the largest gay and lesbian populations outside of the country's largest cities. The 2011 Census shows that 0.5% of the Blackpool population aged 16 and over was registered as being in a same sex civil partnership. The figure for England and Wales was 0.2%. In 2017, there were 605 marriages carried out in Blackpool, 6.9% of which were same sex civil ceremonies.<sup>x</sup>

## Health and Disability

Blackpool has poor life expectancy, with life expectancy at birth for males the poorest in England at 74.5 years compared to 79.6 years for the rest of England. Life expectancy for females is equally poor, at 79.5 years, compared to 83.2 years for the rest of England.<sup>xi</sup> Blackpool has the lowest life expectancies for both men and women of all upper tier local authorities. The gap in life expectancy between those who live in the most deprived quintile in Blackpool and those who live in the least deprived is estimated to be 10 years. The biggest contributors for both men and women are circulatory diseases [heart disease or strokes for example] (21.8% in males, 24.1% in females), cancer (15.7% in males, 15.6% in females), respiratory diseases [flu, pneumonia and chronic obstructive respiratory disease] and digestive diseases including chronic liver disease and cirrhosis (14.5% in males, 15.9% in females). These four areas contribute over half of the overall life expectancy gap in Blackpool.<sup>xii</sup>

In Blackpool, from July 2018 to June 2019, 22.8% of working age people are classed as economically inactive, this is a similar figure to that of the North West and England which have 22.9% and 20.9% respectively of working age people classified as economically inactive in the same period. From July 2018 to June 2019, 51% of economically inactive people in Blackpool were classed as being 'long-term sick' compared with 26.1% of people in the North West and England which have 25.9% and 22.1% respectively.<sup>xiii</sup>

Substance and Alcohol misuse is high, with alcohol-related mortality the highest for males in England and 2<sup>nd</sup> highest in females in England<sup>xiv</sup>. Admissions to hospital in Blackpool for alcohol-related conditions (narrow definition) are much more prevalent than the regional and national average. With 1,521 per 100,000 compared to 700 in the North West and 632 in England.<sup>xv</sup> Further estimates suggest that the prevalence of opiate (e.g. heroin, morphine or codeine) and/or crack cocaine use in Blackpool was 23.45 per 1,000 population amongst 15-64 year olds<sup>xvi</sup>. Blackpool has the highest drug prevalence rate across the North West region, and has the second highest rate nationally, second only to Middlesbrough.

The number of people registered with severe long-term mental health problems and who are actively accessing treatment is higher than the regional and national average. Blackpool's prevalence of GP diagnosed depression amongst those aged 18 and over is the highest in the North West at 17.3%, significantly higher than the national average of 10.7%<sup>xvii</sup>. Within the Blackpool NHS CCG area, Projecting Adult Needs and Service Information (PANSI) estimates that by 2020 amongst 18-64 years

old, 1,963 (2.4%) adults are estimated as having a borderline personality disorder, 2,751 (3.4%) as having an anti-social personality disorder and 371 (0.5%) people being diagnosed with a psychotic disorder. 7.2% of Blackpool's 18-64 population are estimated as having two or more psychiatric disorders.<sup>xviii</sup> NHS Blackpool CCG GP practices have some of the highest rates of prescribing anti-depressants in England.<sup>xix</sup> Blackpool has the seventh highest rate of suicide in England with 13.7 per 100,000 cases per year.<sup>xx</sup>

Conception rates in Blackpool females under 18 year old, are the third highest in England (32.9 conceptions per 1,000 females aged 15-17).<sup>xxi</sup> In addition, Blackpool has a lower proportion of teenage pregnancies leading to abortion (33.8%) compared to England (52%).<sup>xxii</sup> This implies a greater relative proportion of teenagers go on to become parents. Teenage conceptions have associated risks for both parent and child's health and social wellbeing.

The Royal National Institute of Blind People (RNIB) estimate that across 2016/17 there are 1,560 people registered blind or partially sighted in Blackpool.<sup>xxiii</sup> According to NHS England, in 2020, 24% of Blackpool adults aged 18 and over are estimated to have hearing loss of 25 dHBL or more. According to the Department of Education, most children with hearing and visual impairments are educated within the mainstream school system and do not generally attend special schools.<sup>xxiv</sup>

As of January 2019, there were a total of 642 children or young people with a statement of SEN (Special Educational Needs) or EHC (Education, Health and Care) plans. This is approximately 3.3% of pupils in Blackpool and is roughly in-line with the proportions for England and the North West.<sup>xxv</sup> The largest grouping of children and young people in Blackpool with an EHC plan are aged 11-15 (38.7%) with those aged 5-10 representing 31.6% of the total number of children and young people with EHC plans. Analysis of School Census data by Blackpool Council shows that SEN is more prevalent among boys than girls. As of January 2019, 65.5% of all SEN pupils are boys compared to 34.5% girls.<sup>xxvi</sup>

When looking at the number of children who require SEN support (children identified as having Special Educational Need but do not necessary have a SEN statement or EHC plan). Blackpool supports around 3,957 children. This is around 20.4% of all pupils in Blackpool, higher than England (14.9%) and the North West (15.2%). 83.8% of pupils with SEN receive SEN support, greater than England (79.4%) and the North West (79.1%).<sup>xxvii</sup>

### **Learning Disabilities**

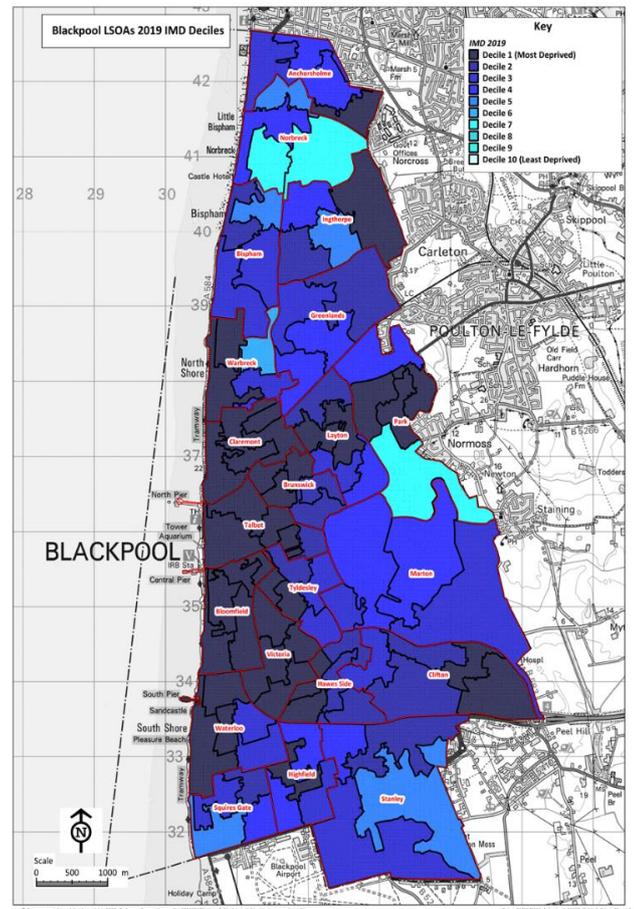
The Blackpool adult population has a higher prevalence of learning disabilities compared to the national figure with 4.44 adults per 1,000 people with a learning disability getting long-term support from local authorities compared to 3.38 per 1,000 people in England and 3.84 per 1,000 people in the North West.<sup>xxviii</sup> As of May 2019, 846 people in Blackpool (0.6%) claimed a Disability Living Allowance for learning disabilities, which is slightly higher than the national average and the North West (0.5% respectively).<sup>xxix</sup> There are relatively few children with severe learning difficulties in the mainstream education system; in Blackpool, 24% of all special school pupils have severe learning disabilities. In addition a large proportion (26.3%) of special school SEN pupils are considered autistic.<sup>xxx</sup>

People with learning disabilities and autism are one of the most excluded groups in the community and more likely to be living in poverty than the general population, partially because they are less likely to be in paid employment. Analysis by ONS of the Annual Population Survey revealed that in 2018, the pay gap in median pay between disabled and non-disabled workers was 12.2%.<sup>xxxii</sup>

## Poverty and Deprivation

Blackpool has a large proportion of residents living in deprived areas and is currently ranked the most deprived authority in England under the Indices of Deprivation 2019<sup>xxxiii</sup>, based on the following criteria; the average LSOA score, concentration of deprivation measures and rank of average score measure. Additionally, Blackpool has the highest proportion of neighbourhoods in the most deprived 1% (22 out of 94) in the country. In the 2010 and 2015 Indices, Blackpool ranked 1st for the concentration of deprivation within the town.

Poverty is a significant factor in Blackpool. Across the Income Deprivation affecting Children measure, Blackpool is now ranked 2nd bottom (down from 9<sup>th</sup> in 2015). Data from End Child Poverty estimates that from 2017/18, 37.8% of children are estimated to be in poverty (after housing costs). This is higher than the UK-wide figure of 30% of children reported to be living in poverty and 32% in the North West (average of authorities in the North West).



### 7. What are the impacts or effects for Key Protected Characteristics?

#### **General impacts covering protected characteristics**

In drawing together the detailed proposals the authority has been mindful of the need to assess the Equality impacts and wherever possible and mitigate any adverse effects on service provision.

Although the scale and continuing annual cycle of cuts have made it impossible to protect all services to the most vulnerable children and adults in our community, we have made these decisions having regard to the impact this will have on people who share protected characteristics, and have tried to mitigate and reduce impact, wherever we can.

The collective long-term effects on people and groups of combined service cuts alongside other government initiatives such as welfare reform are difficult to judge at this stage and will only really become apparent over time. The opportunity for these issues to be explored further through consultation and engagement with key community groups and service providers will be important in the period ahead.

The effect of the Budget in respect of the Council's workforce diversity will continue to be measured

and assessed for the impact on the overall composition of employees, compared with the Blackpool population. This will help us to assess progress towards our target of becoming an employer that better reflects the composition of the community we serve.

### ***Specific impacts***

As the budget report explains, the approach is based on securing the Council's sustainability through implementing our Medium-Term Financial Sustainability Strategy (MTFSS.) The plan makes clear that service reductions and cuts were the last resort and only considered after other options have been exhausted.

As in previous years, some of the specific proposals taken forward at this stage could affect equality issues and protected groups. These specific equality issues and impacts have been – and will continue to be – explored in detailed Equality Analysis, which has informed the final decision making process.

It is also recognised that continued year on year cuts to services, can and does have a real impact on the response times and quality of front line public services. These impacts, although spread across all service users and residents, will affect vulnerable people and groups more, given that many Council services are disproportionately used by them. The Council has been very conscious of this during the process of developing these proposals and as a consequence, reductions in staffing have been considered only as a last resort, when all other options to reduce budgets have been explored.

### ***Relationships between or within communities (cohesion)***

The continued reduction in Council funding for deprived communities across much of Blackpool will have an inevitable effect on services and support for these neighbourhoods, and therefore could add to the pressures and tensions within these areas. The Council will keep a close dialogue with key community groups and leaders, to monitor this, and react if / when required.

The Council will also continue to fulfil obligations and responsibilities in recording and monitoring Hate Crime and related incidents.

Monitoring the levels and patterns of Hate Crime will be a very important means of tracing the effects on community tensions of the reductions in the wider public sector spend in Blackpool in the period ahead.

8. What do you know about how the proposals could affect levels of socio –economic inequality, in particular poverty?

Given the widespread and deep levels of deprivation in Blackpool, and the effects of multiple years of cuts to the Council's revenue budget. Further cuts, can at best only serve to reduce the scope of the Council to address these matters. These issues have been considered by decision makers throughout this process, however in the final analysis the Council is obliged to set a balanced budget.

9. What can be done to improve the policy, service, function or any proposals in order to reduce or remove any adverse impact or effects identified?

Significant budget reductions on this scale, by their very nature, have an unavoidable adverse impact

on service delivery and people. However, the decisions on individual service areas, as far as possible, have been made with regard to the impact on particular vulnerable groups and people sharing protected characteristics.

The impact on staff sharing protected characteristics will also be equality monitored to ensure, groups do not suffer disproportional adverse impact due to this and make sure that our policies do not indirectly discriminate on people who share protected characteristics.

In due course, further Equality engagement will be important as the effect of combined service cuts are difficult to measure at this stage and will only really become apparent over time. The budget reductions over the last few years are unprecedented in scale and the opportunity for these issues to be explored further through consultation and engagement with key community groups and service providers will be important in the year ahead.

The effect of the reduction in budget in respect of the workforce diversity will be measured and assessed and the long term impact on the staffing profile in respect of the overall balance of the workforce will be tracked.

## 10. Consultation

Consultation briefings on the broad budget position facing the Council have been undertaken with the community equality groups during 2011/12, 2012/13, 2013/14, 2014/15, 2015/16, 2016/17, 2017/18, 2018/19, 2019/20 and 2020/21 budget cycles. The Council's Director of Resources or his representative has often personally attended and briefed a number of these groups over this period.

Communication and a budget related engagement survey has also taken place via the Council's extensive corporate communication methods – which include website, social media, media briefings & press statements and interviews.

Once the specific proposals were published in January 2020, specific consultations with all affected stakeholders-amongst them staff, service users and other key stakeholders – have taken place. The outcomes of these consultations have been considered by key decision makers, and accordingly have informed the final proposals contained in the budget.

Consultation with the Trades Unions with regards to staffing issues has been embedded into normal working practices and has also met all formal consultation requirements.

## ACTION PLAN

Issues/ adverse impact identified	Proposed action/ objectives to deal with adverse impact	Targets/Measure	Timeframe	CLT Lead	Comments
1. Need for continued dialogue and engagement with vulnerable groups / communities and providers on the long term impact of budgetary reductions	To maintain support for structures of community engagement in equality and diversity	To engage key groups over the long term impact of service reductions on specific Equality issues in Blackpool	On-going throughout 2020.	Director of Resources	
2. Need for a full examination of the effect of service reduction on workforce diversity and continued dialogue and engagement with staff over budgetary reductions in future years	To conduct equality monitoring on staff at risk of redundancy and take appropriate action if adverse impacts are identified  To track staff equality monitoring data to ensure an accurate picture of current workforce diversity.	To mitigate any disproportional effect on staff who share protected characteristics, and monitor the target of becoming a more diverse employer.	Within current and any future redundancy processes	Chief Executive	
3. Need for detailed examination of the effect of service reductions on specific service users and continued dialogue / engagement with them over budgetary reductions in future years	To conduct equality analysis as part of service redesign /commissioning review proposals and take appropriate action if possible to mitigate adverse impacts are identified	To mitigate any disproportionate effect on service users who share protected characteristics if possible, and monitor the outcome of changes.	Within current and any future budget reduction exercises	Corporate Leadership Team	

## ARRANGEMENTS FOR MONITORING AND REVIEW

Please outline your arrangements for future monitoring and review below.

Agreed action	Monitoring arrangements	Timeframe	CLT Lead	Comments
1. To maintain current support for structures of service user and provider engagement.	To be built into the Directorate Business planning and Compliance review processes	2020 and ongoing	Corporate Leadership Team	
2. To conduct equality monitoring on staff at risk of redundancy and take appropriate action if adverse impacts are identified To track staff equality monitoring data to ensure an accurate picture of current workforce diversity.	To be built into the Directorate Business planning and Compliance review processes	2020 and ongoing	Corporate Leadership Team	
3. Where appropriate to conduct equality monitoring on service changes and take appropriate action if adverse impacts are identified	To be built into the Directorate Business planning and Compliance review processes	2020 and ongoing	Corporate Leadership Team	

<sup>i</sup> ONS Mid-Year Population estimates 2018

<sup>ii</sup> ONS Mid-Year Population Estimates 2018

<sup>iii</sup> ONS Census 2011, Ethnicity, 2011

<sup>iv</sup> ONS Census 2011, Tenure, 2011

<sup>v</sup> ONS Census 2011, Living Arrangements, 2011

<sup>vi</sup> ONS Mid-Year Population Estimates 2018

<sup>vii</sup> ONS Census 2011, Ethnicity, 2011

<sup>viii</sup> ONS Mid-Year Population Estimates 2018

<sup>ix</sup> ONS Census, Religion, 2011

<sup>x</sup> Blackpool Registrars, 2017

<sup>xi</sup> ONS Life Expectancy, 2016-18

<sup>xii</sup> Public Health England based on ONS death registration data and mid-year population estimates, and Ministry of Housing, Communities and Local Government, Index of Multiple Deprivation, 2015

<sup>xiii</sup> Economic inactivity (Jul 2018-Jun 2019), Nomis (2019)

<sup>xiv</sup> Alcohol-related mortality, Public Health England (based on ONS source data), 2018

<sup>xv</sup> Calculated by Public Health England: Health and Social Care Information Centre - Hospital Episode Statistics (HES) and Office for National Statistics (ONS) - Mid Year Population Estimates, 2019

<sup>xvi</sup> Opiate and crack cocaine use: prevalence estimates by local area, Public Health England, 2019

<sup>xvii</sup> Depression: Recorded prevalence (aged 18+) 2018/19, Quality and Outcomes Framework (QOF), NHS Digital, 2019

<sup>xviii</sup> Blackpool JSNA based on Projecting Adult Needs and Service Information (PANSI) data, 2020

<sup>xix</sup> 'Antidepressants prescribed far more in deprived English coastal towns', Gayle, Damien,

<https://www.theguardian.com/society/2017/apr/14/antidepressants-prescribed-deprived-seaside-towns-of-north-and-east-blackpool-sunderland-and-east-lindsey-nhs>

<sup>xx</sup> Suicide registrations in England and Wales by local authority, 2016 to 2018, 2019

<sup>xxi</sup> Conception statistics, England and Wales, Office for National Statistics, 2019

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- <sup>xxii</sup> Under 18s conceptions leading to abortion (%), Conceptions in England and Wales: 2017, Office for National Statistics, 2019
- <sup>xxiii</sup> Registered Blind and Partially Sighted People, NHS Digital, 2017
- <sup>xxiv</sup> Statements of SEN and EHC plans: England, Department for Education, 2019
- <sup>xxv</sup> Special educational needs in England: January 2019, Department for Education, 2019
- <sup>xxvi</sup> SEND Census Data 2016-2019, Business Intelligence Team, August 2019
- <sup>xxvii</sup> Special educational needs in England: January 2019, Department for Education, 2019
- <sup>xxviii</sup> Adults (18 and older) with learning disability getting long term support from Local Authorities, NHS Digital Adult social care activity and finance report, Short and Long Term Care statistics 2017/18, 2019
- <sup>xxix</sup> DLA by condition, Department of Work and Pensions, May 2019
- <sup>xxx</sup> Special educational needs in England: January 2019, Department for Education, 2019
- <sup>xxxi</sup> Disability pay gaps in the UK: 2018, ONS, 2019
- <sup>xxxii</sup> End Child Poverty, Poverty in Your Area, 2019. Figures based on Households below average income 2017/18, Department for Work and Pensions, 2019

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<b>Report to:</b>	<b>EXECUTIVE</b>
<b>Relevant Officer:</b>	Sharon Davis, Scrutiny Manager
<b>Relevant Cabinet Member</b>	Councillor Simon Blackburn, Leader of the Council and Cabinet Member for Adult Social Care and Health
<b>Date of Decision</b>	4 March 2020

## HEALTHY WEIGHT SCRUTINY REVIEW FINAL REPORT

### 1.0 Purpose of the report:

1.1 To consider the Healthy Weight Scrutiny Review final report.

### 2.0 Recommendation(s):

2.1 To consider the report and offer a response to the recommendations contained within the Action Plan, forwarding the recommendations to the relevant organisation for consideration and implementation.

### 3.0 Reasons for recommendation(s):

3.1 The recommendations contained within final report seek to deliver improvements in service.

3.2a Is the recommendation contrary to a plan or strategy adopted or approved by the Council? No

3.2b Is the recommendation in accordance with the Council's approved budget? Yes

3.3 Other alternative options to be considered:

The Executive must consider the recommendations outlined in the Scrutiny Review but may accept them, reject them or vary them.

### 4.0 Council Priority:

4.1 The relevant Council priority is: "Creating stronger communities and increasing resilience".

## **5.0 Background Information**

5.1 At the Adult Social Care and Health Scrutiny Committee in February 2019, Members considered an update on Healthy Weight. At that meeting, it was agreed that due to the significant level of work ongoing around healthy weight and the importance of the topic in Blackpool, that an in depth scrutiny review be carried out.

5.2 A large amount of preparatory work was undertaken for the meeting and an in depth report provided containing the range of work undertaken to date and the initiatives in place to address obesity and unhealthy lifestyles.

5.3 Consideration was given to the range of contributors required for the review from NHS representatives, Public Health, Leisure Services, Community Groups to service users themselves. In order to gather input the valuable input from service users, a number of testimonials were sought from clients of various programmes.

5.4 The final report details the findings and recommendations of the Panel and is attached at Appendix 3(a).

5.5 In accordance with the Overview and Scrutiny / Cabinet Member Relations Protocol, the final report has been considered by the Adult Social Care and Health Scrutiny Committee, which approved the report for consideration by the Executive, and subsequently relevant partners. Councillors Simon Blackburn, Maria Kirkland and Lynn Williams as the relevant Cabinet Members, have provided their comments on the recommendations contained within the report.

5.5 Does the information submitted include any exempt information? No

### **5.6 List of Appendices:**

Appendix 3a: Healthy Weight Scrutiny Review final report.

### **6.0 Legal considerations:**

6.1 Contained within the body of the report.

### **7.0 Human Resources considerations:**

7.1 Not applicable.

### **8.0 Equalities considerations:**

8.1 Not applicable.

**9.0 Financial considerations:**

9.1 Contained within the report at Appendix 3a.

**10.0 Risk management considerations:**

10.1 Contained within the report at Appendix 3a.

**11.0 Ethical considerations:**

11.1 Not applicable.

**12.0 Internal/ External Consultation undertaken:**

12.1 Contained within the report at Appendix 3a.

**13.0 Background papers:**

13.1 None.

**14.0 Key decision information:**

14.1 Is this a key decision? No

14.2 If so, Forward Plan reference number:

14.3 If a key decision, is the decision required in less than five days? No

14.4 If **yes**, please describe the reason for urgency:

**15.0 Call-in information:**

15.1 Are there any grounds for urgency, which would cause this decision to be exempt from the call-in process? No

15.2 If **yes**, please give reason:

**TO BE COMPLETED BY THE HEAD OF DEMOCRATIC GOVERNANCE**

**16.0 Scrutiny Committee Chairman (where appropriate):**

Date informed:

Date approved:

**17.0 Declarations of interest (if applicable):**

17.1

**18.0 Executive decision:**

18.1

**18.2 Date of Decision:**

**19.0 Reason(s) for decision:**

**19.1 Date Decision published:**

**20.0 Executive Members present:**

20.1

**21.0 Call-in:**

21.1

**22.0 Notes :**

22.1



**HEALTHY WEIGHT SCRUTINY REVIEW  
FINAL REPORT**

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## 1.0 Foreword

- 1.1 Healthy Weight is a massive issue in Blackpool and is something I have a real interest in personally. When we received an item to Committee early in 2019 looking at the impact of weight on health, lifestyle and public services, the scale of the problem was apparent and the Committee felt it necessary to explore the issues in much more detail and set up this review to do just that.
- 1.2 I would like to thank my fellow Members for taking part in this review, the importance of Member engagement and enthusiasm in scrutiny reviews is paramount and without that we would not have been able to come to the conclusions and recommendations that we have done. Recommendations that I hope will make a real difference to residents when implemented.
- 1.3 I would also like to thank all those in attendance who contributed to the evidence presented to Members and answered our questions at the Panel meeting, your contribution was vital to Members' understanding of the key issues presented and allowing us to come to those conclusions and recommendations.

Councillor Hobson  
Chairman, Adult Social Care and Health Scrutiny Committee

## 2.0 Background Information

- 2.1 At the Adult Social Care and Health Scrutiny Committee in February 2019, Members considered an update on Healthy Weight. At that meeting, it was agreed that due to the significant level of work ongoing around healthy weight and the importance of the topic in Blackpool, that an in depth scrutiny review be carried out.
- 2.2 A large amount of preparatory work was undertaken for the meeting and an in depth report provided containing the range of work undertaken to date and the initiatives in place to address obesity and unhealthy lifestyles.
- 2.3 Consideration was given to the range of contributors required for the review from NHS representatives, Public Health, Leisure Services, Community Groups to service users themselves. In order to gather input the valuable input from service users, a number of testimonials were sought from clients of various programmes.
- 2.4 This review relates to the following priority of the Council:

Communities: Creating stronger communities and increasing resilience.

### 3.0 Methodology

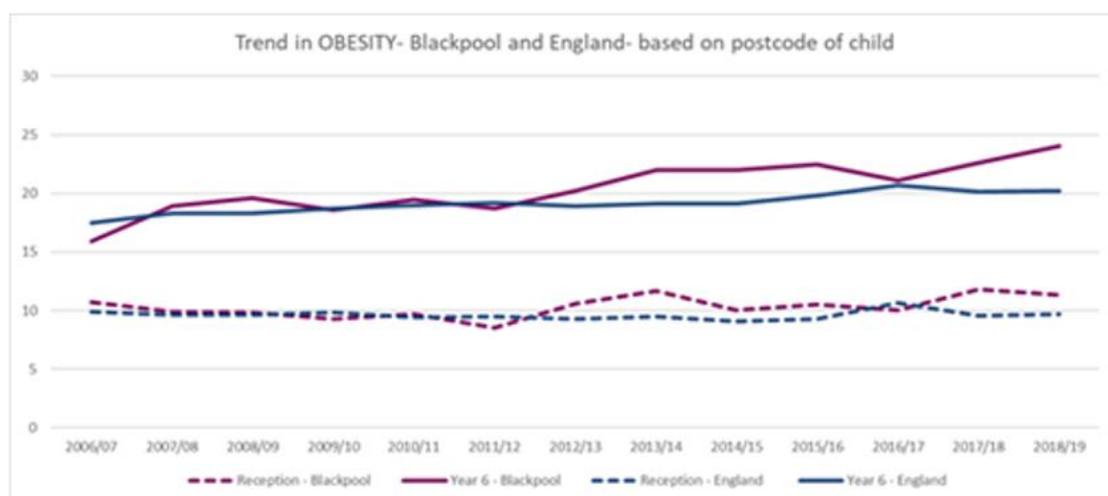
3.1 The Review Panel used an in a day approach to scrutiny and held one meeting to consider Healthy Weight, as follows:

Date	Attendees	Purpose
19 November 2019	<p>Councillors Hobson (in the Chair), Hunter, Hutton, O'Hara, Mrs Scott and Wing.</p> <p>Councillor Lynn Williams, Cabinet Member for Adult Social Care and Health.</p> <p>Dr Arif Rajpura, Director of Public Health            Ms Nicky Dennison, Consultant in Public Health            Ms Lisa Arnold, Head of Parks, Leisure and Catering Services            Ms Laura Ivinson, Sports Development Manager            Ms Vicky Hepworth-Putt, Specialist Registrar, Public Health</p> <p>Ms Berenice Groves, Interim Executive Director Of Operations, Blackpool Teaching Hospital NHS Foundation Trust</p> <p>Mr Jason White, Head of Community Programmes Blackpool FC Community Trust            Mr Marc Joseph, Head of Early Years and Primary Provision, Blackpool FC Community Trust</p> <p>Ms Rosie Newton, Health Officer, Blackpool FC Community Trust</p> <p>Mrs Sharon Davis, Scrutiny Manager</p>	<p>To receive information relating to Healthy Weight.</p> <p>To identify conclusions and recommendations.</p>

## 4.0 Detailed Findings and Recommendation

### 4.1 Context of the Review

- 4.1.1 Obesity is one of the most serious public health challenges in England and has been recognised as a complex problem with multiple causes and inequalities. Obesity is one of the leading causes of ill health in England and has an impact on people's lives across the life course in relation to quality of life, the risk of developing chronic diseases such as Type-2 diabetes and links to mental health disorders.
- 4.1.2 The Government has stated that its ambition is to halve childhood obesity by 2030 in England. Many children who are obese or overweight suffer physical issues including Type-2 diabetes, asthma, musculoskeletal pain and can also experience mental health problems. These affect the quality of children's lives, their education and their life chances. In later life it can reduce their productivity, earnings and shorten life expectancy by approximately nine years in comparison to those of a healthy weight<sup>1</sup>. Obesity disproportionately affects children living in deprived areas and some ethnic minority groups.
- 4.1.3 In Blackpool, in 2017/2018 it was reported that 66.5% of adults<sup>2</sup> were overweight or obese. This is similar to the national average of 62%. In relation to children, the 2018/2019 National Child Measurement Programme reported that 28.6% of reception children were overweight or obese, in comparison to the national average of 22.6%. This is an increase from 27.1% on the previous year. In relation to Year 6 children, 38.6% were reported as overweight or obese in comparison to the national average of 34.2%, an increase on the previous year of 37.8%.



<sup>1</sup> [www.blackpooljsna.org.uk/Living-and-Working-Well/Healthy-Lifestyles/Adult-obesity.aspx](http://www.blackpooljsna.org.uk/Living-and-Working-Well/Healthy-Lifestyles/Adult-obesity.aspx)

<sup>2</sup> Figure based on BMI recorded at GP surgery

4.1.4 Local authorities have a key role to play in promoting healthy lifestyles, working with partners and stakeholders to directly influence the health of the population. In January 2016, Blackpool Council made a commitment to promote healthy weight and improve the health and wellbeing of the local population by signing a Local Declaration on Healthy Weight. The aim of the declaration is for the Council to demonstrate a commitment to reduce unhealthy weight in the community, protect the health and wellbeing of staff and the local population and to make an economic impact on health and social care in the local economy.

4.1.5 There are also a number of local strategies with an aim of addressing unhealthy lifestyles:

**Healthy Weight Strategy 2015**, providing direction on the appropriate actions to be taken to help the population achieve a healthy weight.

**Active Lives Strategy**, a new strategy to be produced to replace the Sport and Physical Activity Strategy 2013 to cover a wider remit looking at Active Lives in its broadest sense.

**Green and Blue Infrastructure Strategy**, a ten year strategy adopted in 2018 focussed on enhancing existing green spaces and delivering new spaces. One of the strategic aims in the Strategy being 'engaging people in health and wellbeing'.

4.1.6 The Panel was informed that work had been undertaken with stakeholders taking a whole system approach to consider the causal factors of obesity in Blackpool, identify interventions and action already undertaken and a gap analysis of what still needs to be done. The next stage in the work will be to action plan what work is still required.

4.1.7 Members considered that the Council must be a leader in healthy lifestyles, supporting its staff to eat and live healthily, and considering the health and wellbeing needs of residents in all decisions taken. To fully lead and set an example for staff, residents and other employers, the Council must ensure that healthy lifestyles and weight are a consideration in all aspects of service provision, however small, such as the rewards on offer to young people for attendance at school from the Pupil Welfare Service (previously a reward of sweets had been given), the request made to staff to contribute items to the Care Leavers' Christmas Hampers (other than socks all requests were for chocolate, sweets and crisps) and the food on offer at staff conferences and other events.

#### **Recommendation One**

**That the Council build on the healthy weight declaration and improve itself as a leader in healthy weight and lifestyle:**

**a) That all Services receive information from Public Health on the Council's role in being a leader in building a healthy lifestyle amongst staff and residents and support in order to**

**address any alterations to be made in provision to ensure healthy lifestyle is at the heart of everything the Council does.**

**b) To promote further the offers already available to staff such as the Corporate Leisure Scheme and that the offer to staff be explored further to determine whether provision of activities such as yoga and pilates (as provided by the Hospital's Trust to staff) before and after work could be supported.**

## **4.2 Diet and Nutrition**

- 4.2.1 The two key aspects of a healthy weight and healthy lifestyle were noted as a good diet and nutrition and a physically active lifestyle. The Director of Public Health suggested that the current food landscape was creating an obesogenic environment whereby it was easy and cheap to access unhealthy food. In order to provide a healthier food environment the Council was working with local businesses to provide healthy options and had bestowed a Healthier Choices Award on 118 local businesses since 2017. A new junior version of the scheme was also launched in 2019 to encourage businesses to support infant feeding, complimentary feeding and offering free water and milk to children, to which 30 businesses have already signed up to.
- 4.2.2 Other schemes and campaigns in relation to healthy eating were Refill which provided water points to refill bottles, Give Up Loving Pop (GULP) which aimed to reduce the consumption of sugary drinks and a Ministry of Food Programme to teach dads to cook more at home and make healthier choices. The success of all these initiatives was considered and it was noted that healthy weight and lifestyle was a secondary benefit for many and it was difficult to demonstrate the impact of individual projects on healthy weight. What could be demonstrated was the individual success of initiatives and it was noted that the number of fizzy and sugary drink free days for children involved in the GULP challenge in 2018/2019 was 15,140 and that improvements had been seen in the dental health of children in Blackpool since the introduction of the initiative.
- 4.2.3 The Panel was advised that the Council has a clear challenge in balancing healthier environments and the demand for thriving and vibrant high streets. In particular, the food environment, as previously mentioned, plays a key role in promoting a healthy diet including an individual's proximity to food retail outlets and the type of food available. The food environment is constantly evolving with a wide range of choice of what to eat and when to eat. Whilst not all fast food is unhealthy it is typically high in saturated fat, salt, sugar and calories. It was considered that maintaining choice was important, as was supporting residents to easily identify health options.
- 4.2.4 It was reported that Public Health had been working with the Planning Service to look at how to tackle the number of fast food takeaways. Blackpool has decided to include the restriction on fast food takeaways as part of the Planning Local Plan. The proposal is to prevent the development of A5 (hot food takeaways) uses in or within 400 metres of wards where more than 15% of the Year 6 pupils or 10% of reception pupils are classified as very overweight.

4.2.5 It was considered that a large number of factors relating to diet and nutrition were responsibilities of national government and it was noted that Council Officers regularly lobbied the Government on issues from labelling of food to food advertising, in these areas the control and influence of the Council was limited.

### **4.3 Healthy Lifestyle Programmes**

4.3.1 A large number of healthy lifestyle programmes were in place and ranged from the 'Making Changes' family weight management programme delivered by Leisure Services which works with families to educate them on how to lead a healthy lifestyle, to school based initiatives detailed in section 4.5 below, to Family Fit2Go which worked with 526 families over three weeks to support parents to make healthier choices for the whole family.

4.3.2 A key project discussed was Fit Fans, a free 13 week weight management programme delivered to adults, taking place at the football stadium and typically aimed at football fans who collectively formed bonds and connections based on their shared interest, which sustained their involvement and motivation. The first year of the pilot engaged with 72 people, of which 58% completed the programme. Collectively they lost 35.6 stone and reduced their waist size by 314.4cm. Members considered that although the initiative had been successful for participants the number of participants in this scheme, as well as a number of others, was low and that due to the high number of obese adults in Blackpool a more universal provision or improved communication could be required.

### **4.4 Early Years**

4.4.1 The Panel discussed the initiatives in place for 0-4 year olds, noting the importance of working with parents and instilling a healthy lifestyle at an early age. It was considered waiting until school age was too late, given that the statistics demonstrated that 28.6% of children in Blackpool were overweight or obese at reception age. The Panel noted the new initiative 'Learn to feed' a new peer led messaging service around infant feeding, Better Start Fit2Go which focussed on children aged between two and four years in the key wards, 'Little Feet' encouraging parents and nursery age children to walk to nursery and Better Start Move, Play and Grow, again working with children aged two to four in the Better Start wards.

4.4.2 Members noted that all initiatives bar one were provided by Better Start and that no information had been received that suggested any universal provision of services to pre-school children or early years' settings. This presented as a gap in service provision in a key age group which required further investigation.

#### **Recommendation Two**

**That Public Health explores the universal support and provision for children aged 0-4 years old and their parents on healthy weight, eating and lifestyle in order to identify any gaps and how those gaps in provision could be met.**

## 4.5 Primary Schools

- 4.5.1 The Department for Education updated the guidance to school governing bodies in March 2019 through the 'School Food in England; Advice for Governing Bodies' document. The document states that; *'The Government encourages all schools to promote healthy eating and provide healthy, tasty and nutritious food and drink. Compliance with the School Food Standards is mandatory for all maintained schools. We also expect all academies and free schools to comply with the standards, and since 2014 we have made this an explicit requirement in their funding agreements. These school food standards are to ensure that food provided to pupils in school is nutritious and of high quality; to promote good nutritional health in all pupils; protect those who are nutritionally vulnerable and to promote good eating behaviour.'*
- 4.5.2 The Panel was informed that Blackpool has a total of 34 primary schools, of which 20 are academies and seven secondary schools, all of which are academies. The schools use a total of six different catering providers – Blackpool Catering Services (Blackpool Council), Mellors, P&A, Chartwells, Lancashire County Council and Aspens. The quality of food provision varies greatly across these providers and it is evident that a number of schools are not meeting the School Food Standards as required by central government, according to research undertaken by the Council's Public Health and Catering Services Teams. With 31% of children and young people eligible for free school meals across Blackpool, the food provision can contribute significantly to the overall food consumption for pupils during term time.
- 4.5.4 The Public Health Team has undertaken some work in schools such as 'Healthy Lunch Boxes' and a resource has now been developed which will be utilised by Blackpool FC Community Trust to support and guide parents in producing a healthy lunchbox. Public Health also commissions the universal free school breakfast scheme. Initial evaluation of the scheme suggested that children felt happier and more alert after the breakfast. Members noted the concerns with the scheme in relation to the quality of the breakfast being provided and the new approach to delivery to be taken.
- 4.5.3 Members noted a wide range of initiatives provided to children of primary school age such as Sport4Champions, the School Games Programme attended by over 28,000 young people in 2018/2019 and a particular scheme of note to the Panel was the Fit2Go project – a programme which is being delivered to every Year 4 class in Blackpool by Blackpool Football Community Trust. The project is delivered over six weeks and looks at healthy eating, physical activity and how to live a well-balanced lifestyle. It was considered that a universal provision such as Fit2Go which could impact on every child in Blackpool was extremely beneficial and, if the future of the programme could be protected, it would guarantee that all children could continue to receive a healthy lifestyle education at an age that it could make an impact on the rest of their lives.
- 4.5.5 Provision during school holidays was also being addressed, with a new Summer Holiday Activity Scheme funded by the Blackpool Opportunity Area providing a wide range of activities in six areas. The key findings of the scheme:
- In total 567 children attended at least one session, with 1,900 sessions attended
  - Of these, 27 children were not of school age

- Of the children who were school age attending, 58.1% were eligible for free school meals
- The majority of children were aged seven to 11 years

It was further noted that the impact on those attending had been wider than being active, with levels of reported anti-social behaviour reducing in the areas covered by the scheme.

### **Recommendation Three**

**That Blackpool Council aspires to all schools using a catering provision that meet the expected healthy eating standards:**

**a) That the Adult Social Care and Health Scrutiny Committee writes to all Chairs of Governors of schools not meeting the School Food Standards as prescribed for schools to challenge them to make improvements and to offer the schools the opportunity to work with Public Health in order to develop a healthy and balanced menu.**

**b) That the Council explores how to improve working with other providers of catering services to schools in order:**

- **To improve their menus and ensure they are healthy and balanced**
- **To gather information on the uptake of children receiving free school meals across both key stages and those opting to have universal free school meals in key stage 1**
- **To offer children taking a packed lunch the opportunity to access the salad bar provided for children eating school meals.**

### **Recommendation Four**

**That the Council recommend that the Fit2go scheme be prioritised for continued funding by Blackpool Council, Blackpool CCG and Blackpool FC Community Trust to ensure that it continues and that the organisations be requested to determine whether a longer contract for provision could be supported.**

## **4.6 Our Children**

4.6.1 The Panel was presented with information relating to specific provision of support to Our Children and Foster Carers in relation to achieving a healthy lifestyle. This was highlighted as an area of concern to Members with it considered that some children entering care already had unhealthy relationships with food. They may have a poor nutritional status

and demonstrate anxiety around food linked to early experiences of either abuse or neglect. Reports that children are not able to use cutlery and are picky eaters are common. From a nutrition perspective many of the children appear to be undernourished and may well be deficient in vitamins and minerals. Once in care, some children will hoard food especially if food was sparse at home or food is locked away in the care setting itself. Many looked after children show signs of being emotional eaters either over eating or restricting food. Establishing appropriate support for those employed or living in a care setting could help to address these challenges.

**Recommendation Five**

**That Public Health work with Children's Services to provide an offer of healthy eating support and education to children in care, foster carers and those that work in care settings.**

**4.7 Young People**

- 4.7.1 Members discussed the difficulties in ensuring that young people at high school had the opportunity to create a healthy lifestyle. Concerns were raised regarding the timings of school days and the food on offer to students at their morning break. It was also noted that many of the schemes discussed at the review meeting had been aimed at children under the age of 11 and adults leaving a gap in provision for young people.
- 4.7.2 After discussing potential options available to the Council in addressing the gap in provision for young people it was considered that the feasibility of providing free gym access to young people aged 11 to 18 should be considered. It was noted that the Council's gyms were quieter at certain times of the day and that the new e-gym equipment was easy and safe to use by young people, potentially providing an opportunity to engage with young people over fitness and wellbeing.

**Recommendation Six**

**To explore the feasibility of providing free gym access to young people aged 11 to 18.**

**4.8 Physical Activity and Health Interventions for Adults**

- 4.8.1 Members noted the resources on offer in Blackpool such as the beach, promenade and excellent parks and the importance of encouraging people to utilise those resources to increase their own wellbeing. It was also considered that in addition to all the initiatives and support provided a key aim must be to increase the resilience of people so that they could continue to lead a healthy lifestyle once the initiative they had taken part in had

come to an end. The majority of programmes were time limited due to funding and it was therefore not sustainable to provide an initiative without also teaching people how to do it on their own.

- 4.8.2 The Active Blackpool Programme was noted as a key initiative in supporting adults to lose weight and achieve a healthy lifestyle and the Panel heard a number of testimonials from service users as to the success of the initiative. Active Blackpool is an open-ended health referral programme aimed at individuals who would benefit from a more active lifestyle. Traditionally, referrals have been received into the programme from health professionals such as GPs, however, a number of partners can refer people and in 2018/2019 there were over 65,000 attendances. The service can be accessed for life, making it one of the few initiatives not time limited. The Programme also has strong links to the Cardiac Rehabilitation Service at Blackpool Victoria Hospital and received 1,270 referrals in 2018/2019 for clients with a cardiac condition and, in September 2019, a neuro rehabilitation programme commenced funded by the Stroke Association as part of a 12 month pilot.
- 4.8.3 Other programmes available for adults include 'Man v Fat' which aims to increase physical activity in overweight men, Steps to Health, providing seven walks each week from various locations in Blackpool, the Feel Good Factory to which there were over 71,000 attendances in 2018/2019 and a total inch loss of 6,490 and Health and Fitness subsidies for local residents at the Council's three large fitness facilities.
- 4.8.4 The Panel was also provided with information on the Specialist Weight Management Service and the National Diabetes Prevention Programme which provided interventions for individuals identified as being at high risk of developing Type 2 diabetes. To date there had been 683 referrals into the programme of which 455 had chosen to participate.

#### **4.9 Domiciliary Service Users**

- 4.9.1 Adult Services work with a number of care at home providers through the Quality Monitoring Team that provide services to a large number of adults in Blackpool. It is known that time is restricted for visits and that often meals need to be provided in a short amount of time, which does not necessarily lend itself to a healthy meal being provided, and microwave meals are often utilised. It was presented to the Panel that there was an opportunity to improve the nutritional states of older adults living in the community and also to upskill carers employed in the Town.

#### **Recommendation Seven**

**That Public Health work with Adult Services to identify opportunities to improve the provision of meals for adults receiving care in the home.**

#### 4.10 Partnership working

- 4.10.1 Throughout the review meeting the importance of partnership working was reiterated along with the importance of communicating a collective message. In order to tackle the high levels of obesity a whole systems approach was required with a view of the whole town – planning, highways, active transport and many other areas. To that end Public Health had undertaken two workshops to map activities and facilities in order to identify interventions and gaps in provision. It was noted that wide scale impact took time and that instant success across the population was not possible.
- 4.10.2 The influence of partners and schools in particular on healthy weight could not be underestimated and strategic engagement across the partnership was required to have any real impact. However, this engagement was difficult and working with schools to identify children requiring support and disseminating information could be improved. The use of social media had also not yet been fully explored.
- 4.10.3 Reducing the prevalence of being overweight and obesity by just 1% each year below the predicted trend would save £300 million<sup>3</sup> in NHS healthcare and NHS social care costs in the year 2035 alone. This level of reduction in obesity rates could also lead to the avoidance of around 64,200 new cases of cancer between 2015 and 2035.<sup>4</sup> It is therefore imperative that the NHS play their part in working to improve healthy weight and increase physical activity. It was considered by the Panel that this would be best undertaken at a local level – the Fylde Coast Integrated Care Partnership (ICP) and the Primary Care Networks.
- 4.10.4 Unfortunately, representatives of Blackpool Clinical Commissioning Group (CCG) were not in attendance at the review meeting. They have provided the following written information to be fed into the report:

In relation to the CCG/ICP role in prevention, there is a clear ‘must-do’ around prevention within the NHS Long Term Plan, including obesity in adults and children. The Plan states that more NHS action on prevention and health inequalities is required and that action by the NHS is a complement to, not a substitute for, the important role of local government.

The global Burden of Disease (GBD) study quantifies and ranks the contribution of various risk factors that cause premature deaths in England. The top five are: smoking, poor diet, high blood pressure, obesity, and alcohol and drug use. Air pollution and lack of exercise are also significant. These priorities guide our renewed NHS prevention programme.

The Plan also talks about access to weight management services in primary care, the diabetes prevention programme, action on healthy NHS premises, and an

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<sup>3</sup> <http://obesityhealthalliance.org.uk/wp-content/uploads/2017/10/OHA-briefing-paper-Costs-of-Obesity-.pdf>

<sup>4</sup> UK Health Forum and Cancer Research UK, Tipping the Scales: Why preventing obesity makes economic sense, January 2016

improvement in training in medical schools. Locally, the CCG/ICP needs to determine how to work in partnership with the Council. The ICP is developing a Strategic Plan, which will include actions on health improvement and reducing health inequalities that is expected to be completed in draft form in December 2019. This will also include priorities for initiatives that will require funding. When a working draft of the Strategy has been agreed the ICP will aim to engage widely with key partners, including the local authority and Scrutiny Committee, to refine the Strategy and support its implementation.

- 4.10. Blackpool Teaching Hospitals NHS Foundation Trust has also made a Healthy Weight Declaration and has supported events in the Public Health calendar including nutrition and hydration week, walking month and bike to work week. The Trust also hosts events throughout the year across multiple sites delivering health checks for staff and volunteers which includes blood pressure testing, blood cholesterol testing and BMI measurements. During these events community organisations that focus on health eating, boosting physical activity, stopping smoking, looking after your mental wellbeing and alcohol intake are invited to come along and speak with staff about the offer and sign them up to services.
- 4.10. The Hospitals Trust has also advertised walking routes, promoted meditation walks and introduced a range of activities such as pilates, yoga and resistance sessions all available at the workplace just before or after working hours.

#### **Recommendation Eight**

**That Public Health carry out an exercise to consider whether the message from the Council and partners regarding healthy weight and lifestyle is delivered consistently and in doing so:**

- Explore the effectiveness of FYI in informing residents of the initiatives available and whether any alternative methods of communication would be more successful.**
- Explore with partners how messages regarding healthy weight and lifestyle can be communicated jointly and consistently.**

#### **Recommendation Nine**

**To receive an update from the Clinical Commissioning Group on their progress in working with the Council to support healthy weight in the population.**

#### **Recommendation Ten**

**That the Committee receive an update on all approved recommendations in approximately six months.**

## 5.0 Summary of Recommendations

### Recommendation One

That the Council build on the healthy weight declaration and improve itself as a leader in healthy weight and lifestyle:

- a) That all Services receive information from Public Health on the Council's role in being a leader in building a healthy lifestyle amongst staff and residents and support in order to address any alterations to be made in provision to ensure healthy lifestyle is at the heart of everything the Council does.
- b) To promote further the offers already available to staff such as the Corporate Leisure Scheme and that the offer to staff be explored further to determine whether provision of activities such as yoga and pilates (as provided by the Hospital's Trust to staff) before and after work could be supported.

### Recommendation Two

That Public Health explores the universal support and provision for children aged 0-4 years old and their parents on healthy weight, eating and lifestyle in order to identify any gaps and how those gaps could be met.

### Recommendation Three

That Blackpool Council aspires to all schools using a catering provision that meets the expected healthy eating standards:

- a) That the Adult Social Care and Health Scrutiny Committee writes to all Chairs of Governors of schools not meeting the School Food Standards as prescribed for schools to challenge them to make improvements and to offer the schools the opportunity to work with Public Health in order to develop a healthy and balanced menu.
- b) That the Council explores how to improve working with other providers of catering services to schools in order:
  - To improve their menus and ensure they are healthy and balanced
  - To gather information on the uptake of children receiving both the free school meals across both key stages and those opting to have universal free school meals in key stage 1
  - To offer children taking a packed lunch the opportunity to access the salad bar provided for children eating school meals.

**Recommendation Four**

That the Council recommend that the Fit2go scheme be prioritised for continued funding by Blackpool Council, Blackpool CCG and Blackpool FC Community Trust to ensure that it continues and that the organisations be requested to determine whether a longer contract for provision could be supported.

**Recommendation Five**

That Public Health work with Children's Services to provide an offer of healthy eating support and education to children in care and those that work in care settings.

**Recommendation Six**

To explore the feasibility of providing free gym access to young people aged 11 to 18.

**Recommendation Seven**

That Public Health work with Adult Services to identify opportunities to improve the provision of meals for adults receiving care in the home.

**Recommendation Eight**

That Public Health carry out an exercise to consider whether the message from the Council and partners regarding healthy weight and lifestyle is delivered consistently and in doing so:

- Explore the effectiveness of FYI in informing residents of the initiatives available and whether any alternative methods of communication would be more successful.
- Explore, with partners, how messages can be communicated jointly and consistently.

**Recommendation Nine**

To receive an update from the Clinical Commissioning Group on their progress in working with the Council to support healthy weight in the population.

**Recommendation Ten**

That the Committee receive an update on all approved recommendations in approximately six months.

## **6.0 Financial and Legal Considerations**

### **6.1 Financial**

6.1.1 With regard to the financial implications for Blackpool Council, the majority of the recommendations relate to the existing work of Public Health and will be incorporated within existing budgets. The feasibility and impact on the budget of offering free gym access to 11-18 year olds will need to be explored.

### **6.2 Legal**

6.2.1 There are no legal implications.

**Healthy Weight Scrutiny Review Action Plan**

Recommendation	Councillors Blackburn, Williams and Kirkland, Cabinet Member Comments	Rec Accepted by Executive?	Target Date for Action	Lead Officer	Committee Update	Notes
<p><b>Recommendation One</b></p> <p><b>That the Council build on the healthy weight declaration and improve itself as a leader in healthy weight and lifestyle:</b></p> <p><b>a) That all Services receive information from Public Health on the Council’s role in being a leader in building a healthy lifestyle amongst staff and residents and support in order to address any alterations to be made in provision to ensure healthy lifestyle is at the heart of everything the Council does.</b></p>	<p>Councillor Blackburn</p> <p>Currently reviewing the commitments, undertaking whole systems mapping work, reviewing current actions and identifying any gaps. Producing a new Healthy Weight Strategy and working with partners to ensure healthy lifestyles is at the heart of all public sector work.</p>		<p>As per recommendation 10 – six months</p>	<p>Nicky Dennison</p>		

<p><b>b) To promote further the offers already available to staff such as the Corporate Leisure Scheme and that the offer to staff be explored further to determine whether provision of activities such as yoga and pilates (as provided by the Hospital's Trust to staff) before and after work could be supported.</b></p>						
<p><b>Recommendation Two</b></p> <p><b>That Public Health explores the universal support and provision for children aged 0-4 years old and their parents on healthy weight, eating and lifestyle in order to identify any gaps and how those gaps could be met.</b></p>	<p>Councillor Blackburn</p> <p>Working with Better Start to look at Diet and nutrition in our 0-4 year olds.</p> <p>Currently exploring bring introducing the Henry programme.</p> <p>Working with PHE to launch the weaning campaign week commencing 27 February 2020.</p>		<p>As per recommendation 10 – six months</p>	<p>Nicky Dennison</p>		

<p><b>Recommendation Three</b></p> <p><b>That Blackpool Council aspires to all schools using a catering provision that meets the expected healthy eating standards:</b></p> <p><b>a) That the Adult Social Care and Health Scrutiny Committee writes to all Chairs of Governors of schools not meeting the School Food Standards as prescribed for schools to challenge them to make improvements and to offer the schools the opportunity to work with Public Health in order to develop a healthy and balanced menu.</b></p> <p><b>b) That the Council explores how to improve working with other providers of catering services to schools in order:</b></p> <p><b>- To improve their menus and ensure they are healthy and balanced</b></p>	<p>Councillor L Williams</p> <p>Through our school led improvement team we will raise awareness , challenge any concerns and offer any relevant support to our schools.</p> <p>Councillor Blackburn</p> <p>The Public Health team would be able to support with the development of the letter and provide the support to the Schools.</p> <p>Healthy Lifestyle Nutritionist to work with the School catering providers to support them in</p>		<p>As per recommendation 10 – six months</p>	<p>Nicky Dennison</p> <p>Nicky Dennison</p>		
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<p>- To gather information on the uptake of children receiving both the free school meals across both key stages and those opting to have universal free school meals in key stage 1</p> <p>- To offer children taking a packed lunch the opportunity to access the salad bar provided for children eating school meals.</p>	<p>meeting the School Food Plan.</p>					
<p><b>Recommendation Four</b></p> <p>That the Council recommend that the Fit2go scheme be prioritised for continued funding by Blackpool Council, Blackpool CCG and Blackpool FC Community Trust to ensure that it continues and that the organisations be requested to determine whether a longer contract for provision could be supported.</p>	<p>Councillor Blackburn</p> <p>Currently supported by Public Health, Blackpool CCG and Blackpool FC Community Trust. This is very well embedded in schools and we need to actively work with all partners to ensure this funding continues.</p>		<p>As per recommendation 10 – six months</p>	<p>Nicky Dennison</p>		

<p><b>Recommendation Five</b></p> <p><b>That Public Health work with Children’s Services to provide an offer of healthy eating support and education to children in care and those that work in care settings.</b></p>	<p>Councillor Blackburn</p> <p>This would be a new piece of work for the Public Health Team to deliver against. The Healthy Lifestyle Nutritionist is keen to start work in this area to look at how we can support Foster Carers and Children’s homes provide healthy options</p> <p>Councillor L Williams</p> <p>We are currently re visiting our commissioning strategy and service specifications with independent providers for in care and care experienced so that facilitates an</p>		<p>As per recommendation 10 – six months</p>	<p>Nicky Dennison</p>		
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	<p>opportunity to re visit expectations. Via our commissioning monitoring we can challenge and support. There is currently a health task group via the corporate parenting board that will incorporate the relevant messages from this review.</p>					
<p><b>Recommendation Six</b></p> <p><b>To explore the feasibility of providing free gym access to young people aged 11 to 18.</b></p>	<p>Councillor Kirkland</p> <p>Happy to support the service exploring the feasibility of this as an option.</p>		<p>As per recommendation 10 – six months</p>	<p>Lisa Arnold</p>		

<p><b>Recommendation Seven</b></p> <p><b>That Public Health work with Adult Services to identify opportunities to improve the provision of meals for adults receiving care in the home.</b></p>	<p>Councillor Blackburn</p> <p>Work is underway with Quality monitoring officers and Public Health to look at how meals could be improved.</p>		<p>As per recommendation 10 – six months</p>	<p>Nicky Dennison</p>		
<p><b>Recommendation Eight</b></p> <p><b>That Public Health carry out an exercise to consider whether the message from the Council and partners regarding healthy weight and lifestyle is delivered consistently and in doing so:</b></p> <ul style="list-style-type: none"> <li>- Explore the effectiveness of FYI in informing residents of the initiatives available and whether any alternative methods of communication would be more successful.</li> <li>- Explore, with partners, how messages can be communicated jointly and consistently.</li> </ul>	<p>Councillor Blackburn</p> <p>This work will be undertaken as part of the review of the Healthy Weight Declaration commitments and development of the Healthy Weight strategy, as per recommendation one.</p>		<p>As per recommendation 10 – six months</p>			

<p><b>Recommendation Nine</b></p> <p>To receive an update from the Clinical Commissioning Group on their progress in working with the Council to support healthy weight in the population.</p>			<p>As per recommendation 10 – six months</p>	<p>David Bonson</p>		
<p><b>Recommendation Ten</b></p> <p>That the Committee receive an update on all approved recommendations in approximately six months.</p>						