

Transforming obesity prevention Obesity Review Consultation

23rd May 2018

Purpose of session

- We want to work together to collectively refine and shape our commissioning plans
- Opportunity to influence the development and design of the service model
- Consider Social Value opportunities
- Cooperative working is an essential part of delivering our outcomes - delivering these requires collective effort and mutual support

Part 1:

Background and context

Prevalence

Population

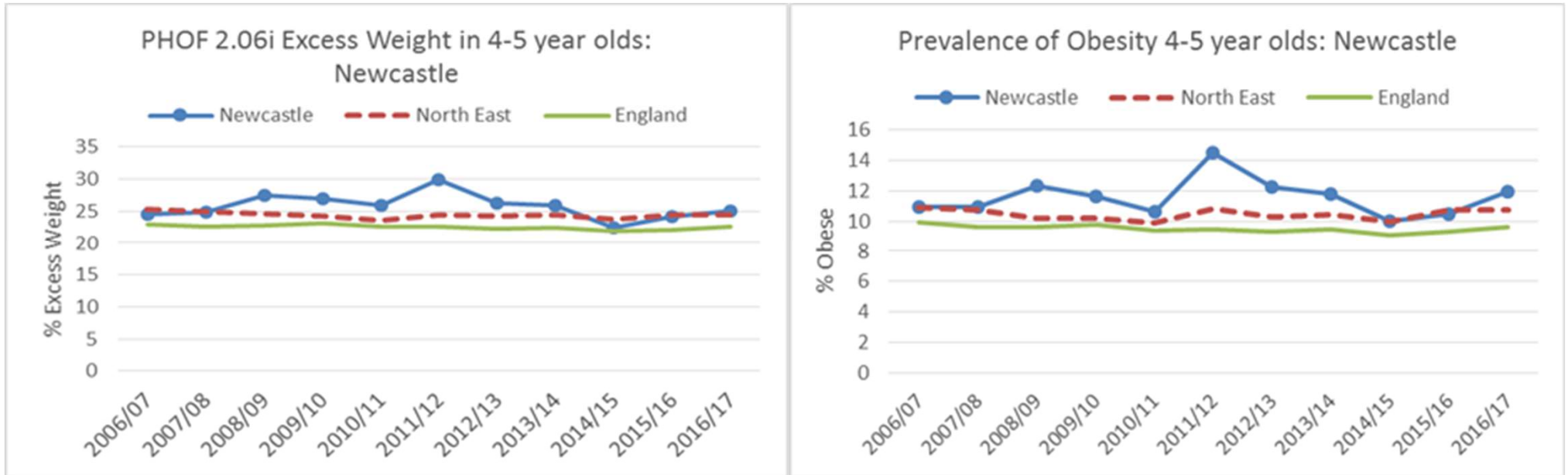
- Estimated 68,503 children and YP residing in Newcastle upon Tyne in 2016 aged between 0-19 (23% of the overall estimated Newcastle population).
- Estimated to increase to 77,090 by 2026 (12.5% increase).
- Across Newcastle 61,048 0-18 year olds registered with Newcastle GP's in April 2017

Age Group	Census 2011	2016 Mid yr. pop Est. (ONS)	Projection 2026 (2014 ONS)
0-4 years	16,500	17,154	19,074
5-14 years	28,500	31,240	35,039
15-19 years	22,400	20,183	22,977
Total	67,400	68,503	77,090

Obesity Prevalence: Estimates

- The 2016 Health Survey for England found that in 2 to 15 year olds 16% were classified as obese and 12% were Overweight .
- If applied to the Newcastle population estimates it means a potential **7130** children are obese and a further **5347** are overweight.
- This means an estimated **12,477** two to 15 years olds in Newcastle are either obese or overweight , which could increase to 13,973 in 2026 based on current population projection.

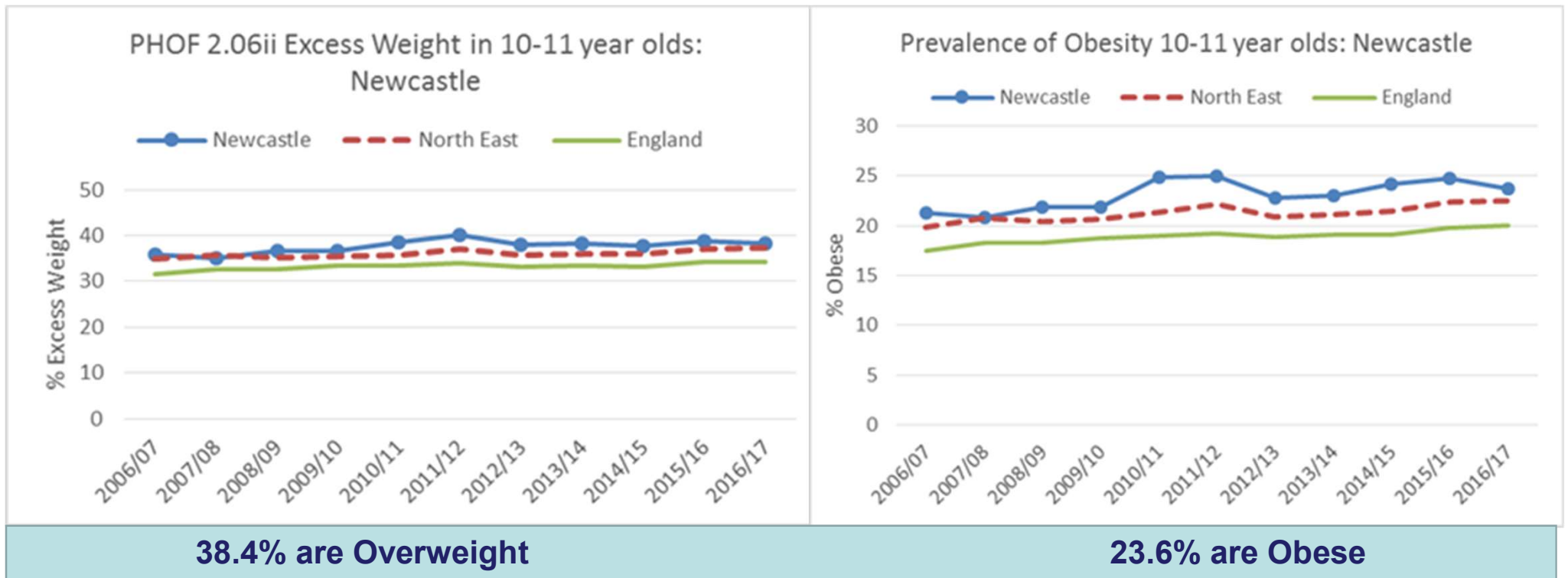
Newcastle NCMP - Reception



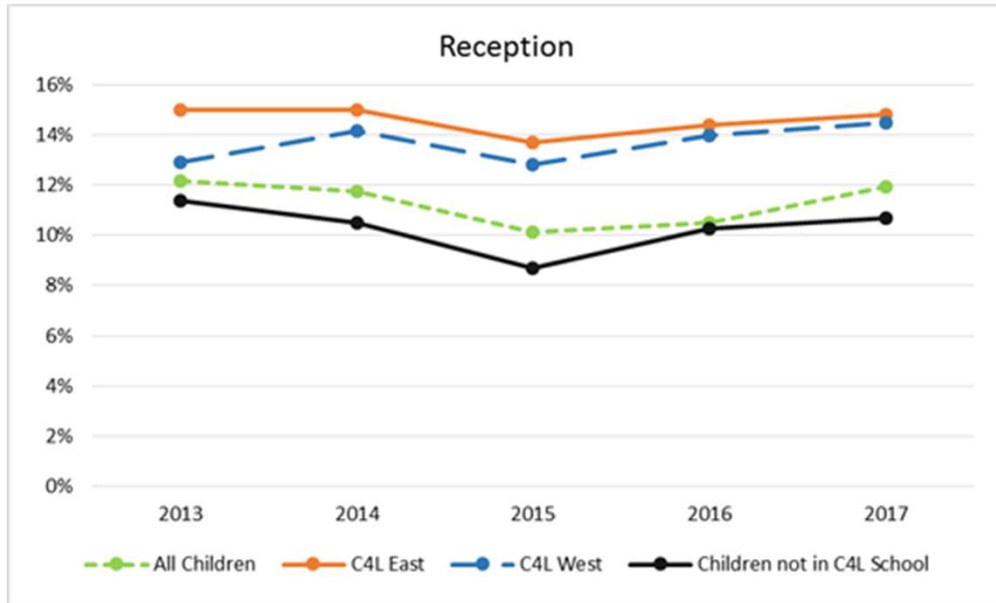
25% of children are overweight

12% of children are Obese

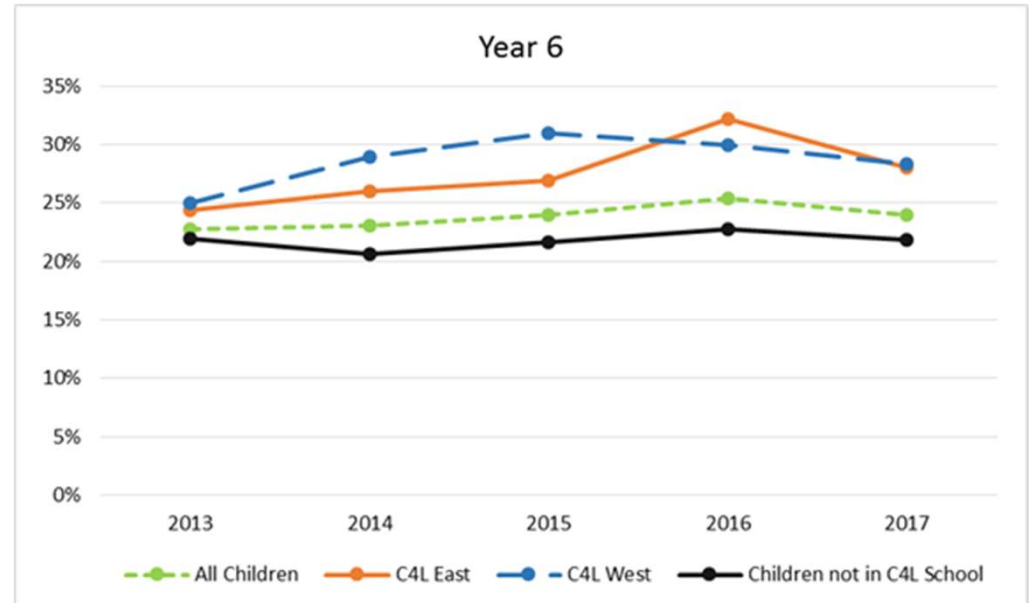
Newcastle NCMP – Year 6



Newcastle Change4Life

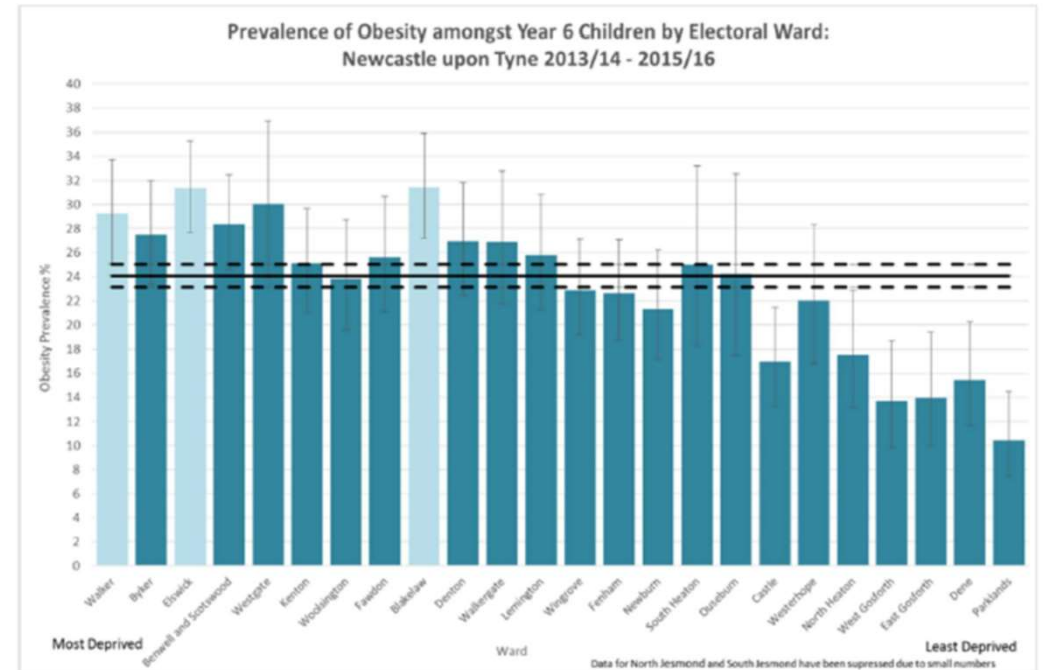
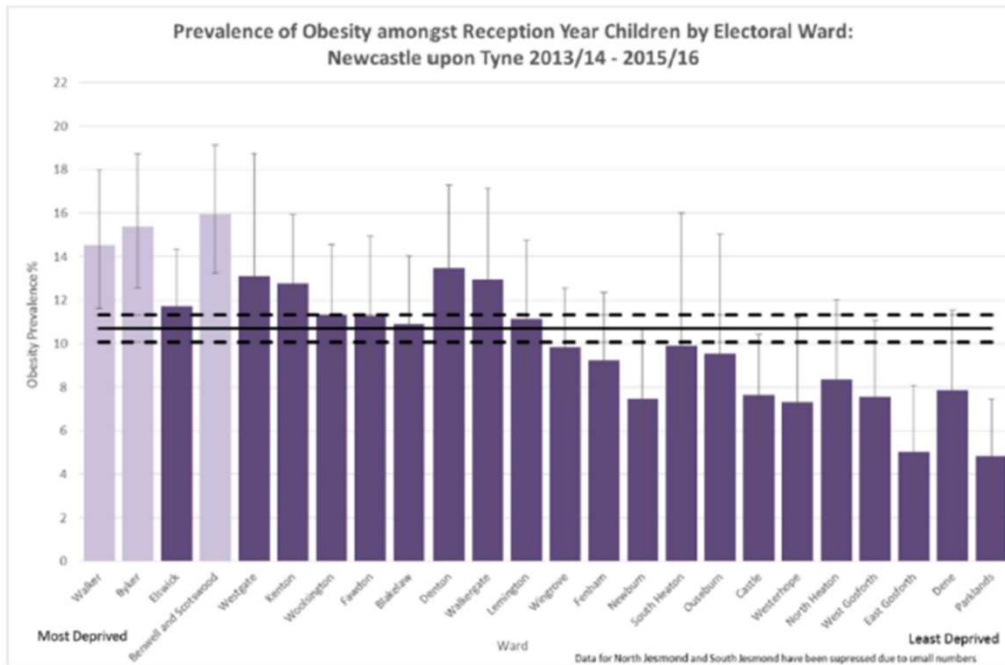


C4L areas 14.6% and Non C4L areas 10.7% Obese



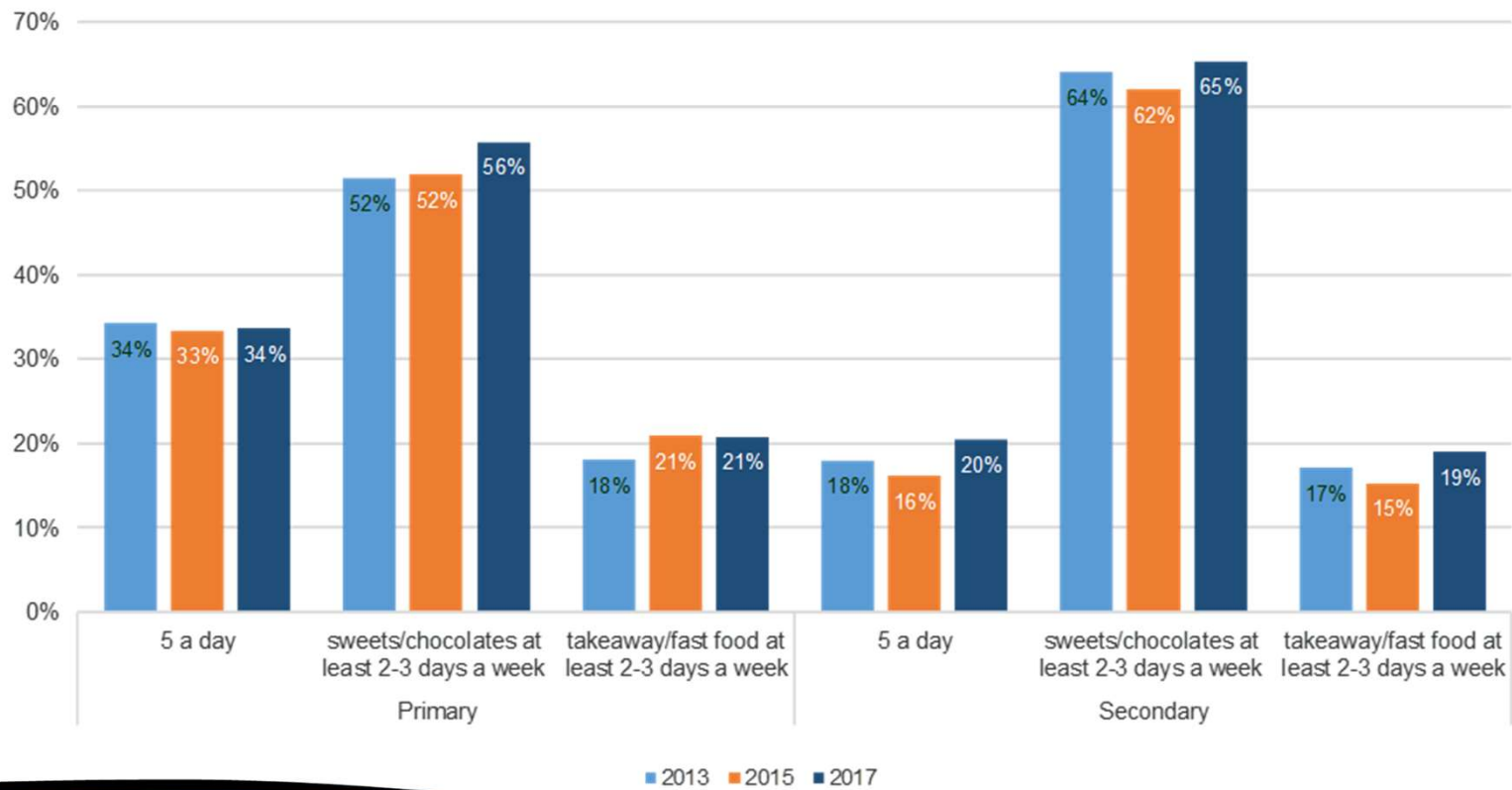
C4L areas 28% and non C4L areas 22%

Obesity Prevalence: Ward & Deprivation



HRBQ

Nutrition Trends



Whole Systems Obesity Prevention

What is the Whole Systems Approach

- **Recognition of complexities of obesity**
- **No single solution**
- **Single solutions do not work at a population level**
- **Whole Systems Obesity Programme (PHE Commission)**
- **Joined up approach across local authorities and external partners**

Stakeholders

Internal

- **Planning**
- **Transport**
- **Environmental Health**
- **Communities Team**
- **Housing**
- **Social Care**

External

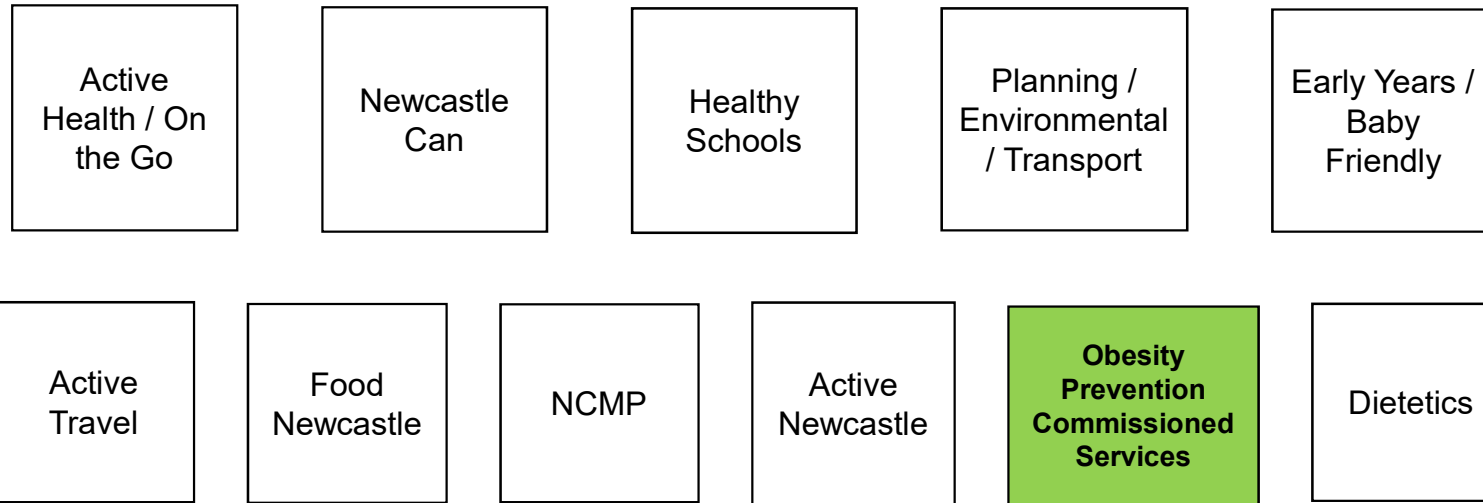
- **CCG**
- **NHS Trust**
- **Community Groups**
- **Third sector Providers**
- **Local business**

Common themes

- **Planning a healthier food environment**
- **School and childcare setting**
- **Increasing healthy food consumption**
- **Planning and creating an environment that promotes activity including active travel**
- **Providing access to weight management support**
- **Creating healthy workplaces**
- **Educating people about the benefits of healthy eating and exercise and promoting opportunities in the local community**

Current provision

Current System



Current Commissioning Model

- 19 separate contracts, delivered by 10 separate providers – challenges in coordination across the city and greater risk of fragmentation
- Disproportionate focus across the city due to funding Change4Life areas - not reflecting existing need
- Duplication of activities in schools
- Are we reaching the right people?

Organisation	Programme	Target Area	Target Demographic
Food Nation	Change4Life East Coordination	East Change4Life area	Organisations & Workers
	Community Food Initiatives	City Wide	All
	Food Adventures	East Change4Life area	Children 5-11
	Cooking Skills / Ministry of Food / Cooking Club for Teens / Under 5s Family Service	City Wide	All
	Sustainable Food Cities	City Wide	All
Hat Trick	WAGS & Street Skillz	East Change4Life area	Children & Young People
HealthWorks	Change4Life West Coordination	West Change4Life area	Organisations & Workers
	Change4Life Champions Coordination	West Change4Life area	Organisations & Workers
	Early Years Health Trainers	East & West Change4Life areas	Under 5s & Families
Kids Kabin	Cycling Activities	East Change4Life area	Children & Young People
Newcastle Eagles Foundation	Hoops for Health	East Change4Life area	Children & Young People
	Women Get Set Go	City Wide	Women & Children
Newcastle Nutrition	Specialist Dietetic Service for Under 5s & Training Programme (to 31 March 2018)	West Change4Life area (but covers whole city)	Organisations & Workers
Newcastle United Foundation	Match Fit	East & West Change4Life area	Children & Young People
	Youth Worker for Obesity Prevention	City Wide	Children & Young People
North East Dance	Dance & Physical Activity	East & West Change4Life areas	Children & Young People
	Dance Provision in Schools	Newcastle West	Children 2-11
West End Women and Girls	Seeds for Health	West Change4Life area	Children & Young People
	Obesity Prevention Cook	City Wide	Women and Girls
YMCA Newcastle	Bizibodis Peer Project	East Change4Life area	Children & Young People

Summary results from meetings with funded partners (1)

Meetings with funded partners took place during December 2017 and January 2018

Partnerships

- Differences exist between the two Change4Life (C4L) partnerships
- The structure of C4L results in repetition of partnership events
- Majority of funded partners work well together
- Separate to the C4L funding, some partners charge for courses while others subsidise funding

Summary results from meetings with funded partners (2)

School based activity

- Most activity takes place in Key Stage 2
- Proxy measures capture: changes in knowledge, skill level and confidence, unable to measure any sustained improvement
- Unclear if activity complements or replaces school compulsory PE offer
- Limited contact made with parents / families
- Signposting children into local clubs is limited

Summary results from meetings with funded partners (3)

Community focused activity

- Cooking skills, food growing and gardening are popular
- Difficult to compare one funded activity with another
- Partners admitted difficulty targeting without stigma
- Many positives: e.g. community cohesion; tackling loneliness
- Further insight necessary to measure impact on obesity

Recommendations

- Consult with wider stakeholders and partners across Newcastle
- Review the geographical allocation of funding
- Develop a whole systems approach, addressing wider inequalities in health
- Remove school focus – primary schools receive PE and Sport Premium
- It is important not to lose the positive relationships built by partners and organisations within the communities they serve

Further insight and investigation

- Has Change4Life resulted in a culture of dependence and inequality between the targeted areas and the rest of the city?
- Further insight:
 - i. obesity and EHWB
 - ii. obesity and food poverty
 - iii. effective engagement with families
 - iv. targeting without stigma
 - v. effectiveness of food growing initiatives, cooking and budgetary skills
 - vi. impact of 'time limited' programmes
 - vii. holiday hunger programmes and learn from research being undertaken by Northumbria University on the Child Poverty North East pilots

Part 2:

Moving towards a new commissioning model

Social Value

Social Value

- **Social Value is value that accrues in our local communities, normally categorised around economic, environmental or social impact**
- **It is what city residents say is valuable to them, for example sustainable employment, a decent place to live, and equal access to a range of quality services in the local area**
- **As a public body we need to think about how we can secure wider social, economic and environmental benefits from the early commissioning stage**
- **In 2015, the Council collaboratively developed a Social Value Commitment with partners which set out 5 key principles**

Social Value

- **Think, Buy, Support Newcastle**

Spending money locally generates value across our supply chain, and effectively delivers it to local people. For instance, research by the Federation of Small Businesses suggests that every £1 spent by a local authority with local Small and Medium Enterprises (SME) generated an additional 63p of benefit for the local economy.

- **Community Focussed**

We will seek to understand and deliver value that local people recognise. We will not assume that we know what people in the City want, but instead, we will ensure that we have mechanisms in place for local people and partners to feedback to us on a regular basis and use this feedback to shape our practice.

- **Ethical Leadership**

We understand that Social Value is not just about CSR or legal obligations, but is integrally linked to our ethics and beliefs. We will therefore seek to work with businesses that employ high ethical standards within their practice, and those who want to work to improve their ethical approach.

- **Green and Sustainable**

As well as ensuring our own high performance in this area as part of our Climate Change Commitment, and our commitment to prepare for its impacts we will work with partners and providers to promote green and sustainable practice in the work that we commission and procure.

- **Enabling Change**

ensuring people understand not only our high level principles, but also what Social Value might look like in their context and, critically, what they might personally do to create it.

Commissioning model options

What do we want to achieve?

- Increased family participation
- Engagement across the life course with person centred approach
- Long term sustained reduction in childhood obesity
- Joined up interventions
- Community driven and community focused delivery
- Linked to the wider system
- Better data

Key components

Food and Nutrition Skills

- Healthy Eating / Cooking Skills / Education / Food Growing
- Family programmes

Physical Activity

- Community based programmes
- Non-traditional physical activity programmes

Community development

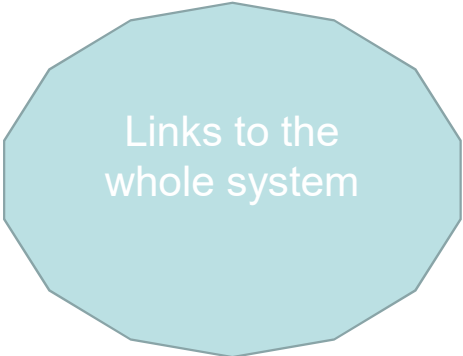
- Using effective methods for encouraging and enabling behaviour change
- Embedding physical activity in everyday life
- Targeting and tailoring activities, using local knowledge to meet the needs the population, recognising that some groups may need more support than others
- Asset based approaches

Coordination

- Links across the system and networks
- Whole systems approach – coordination of activities and contribution to whole systems working

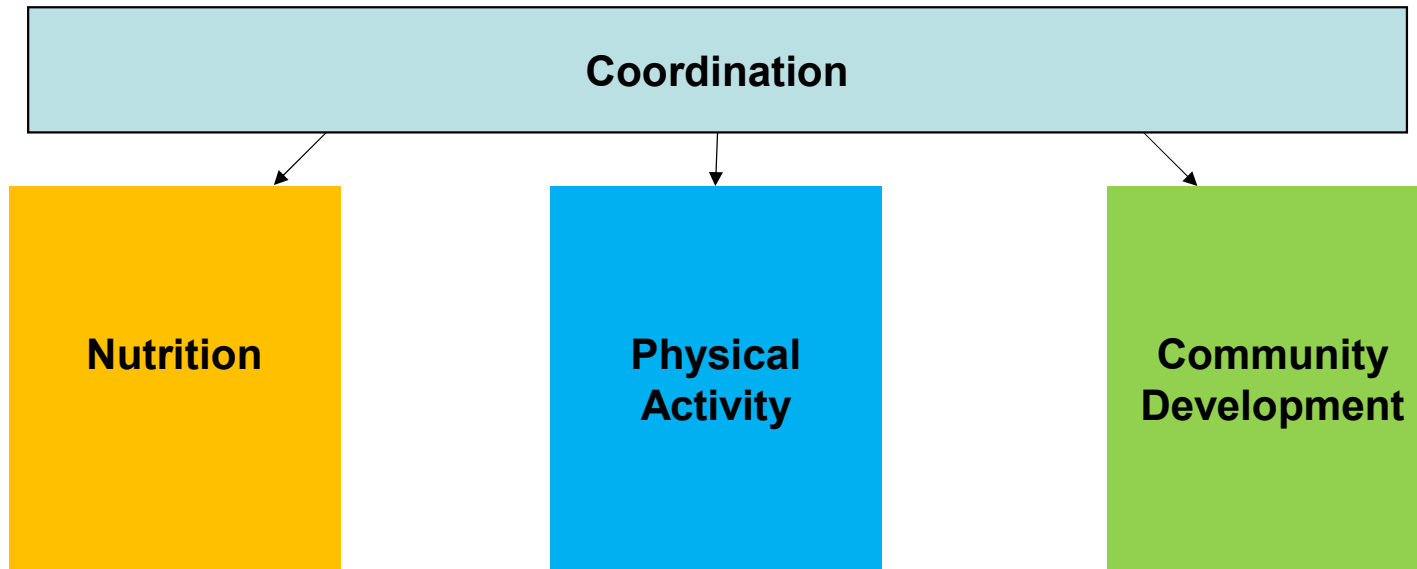


Underpinned by evidence



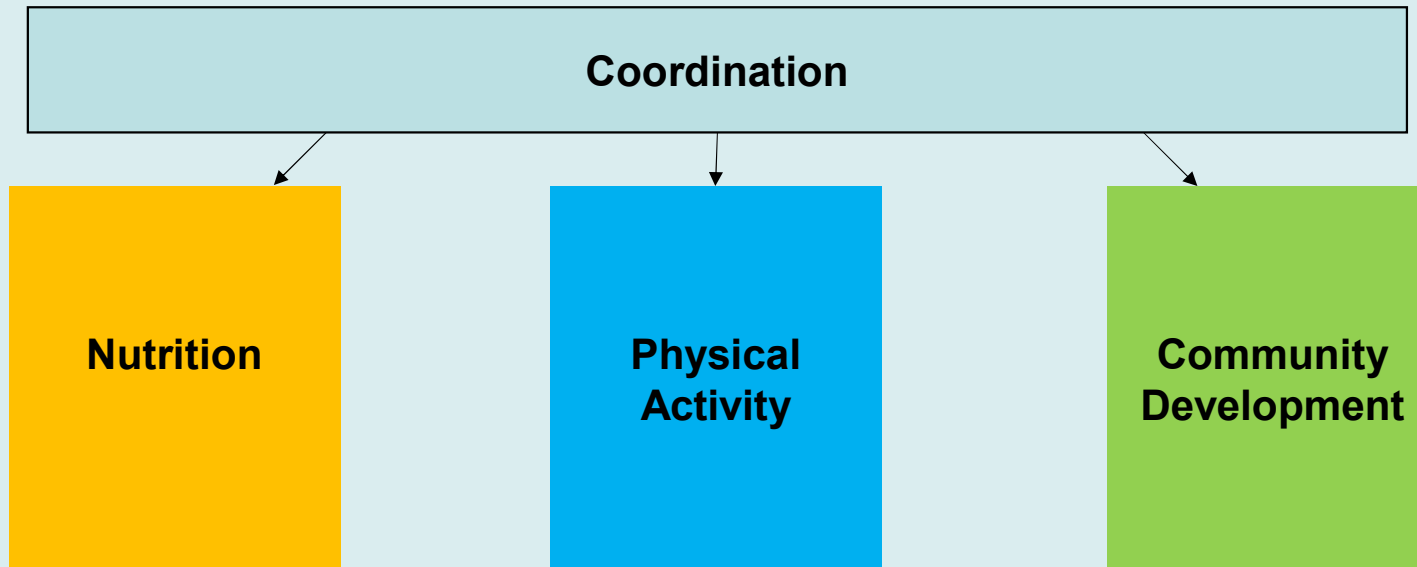
Links to the whole system

Model 1 – Single, integrated model



Model 1 – Single, integrated model

- Single, integrated contract delivering all 4 components

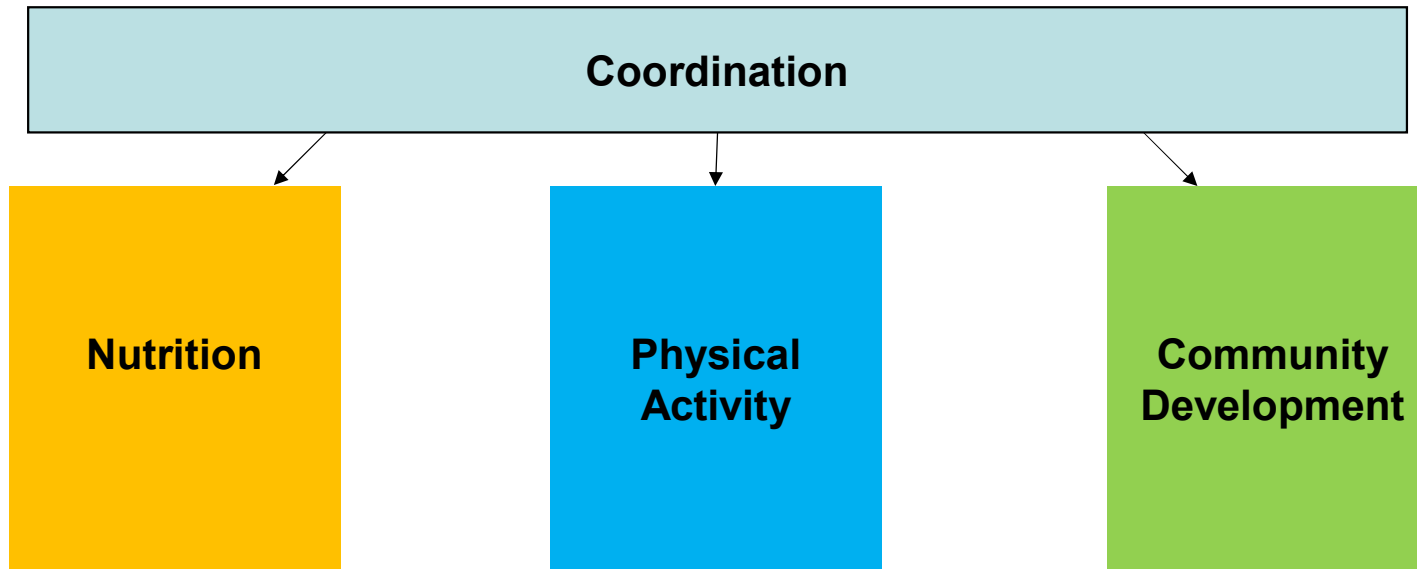


Proposed Model 1 – Single, integrated model

Opportunities

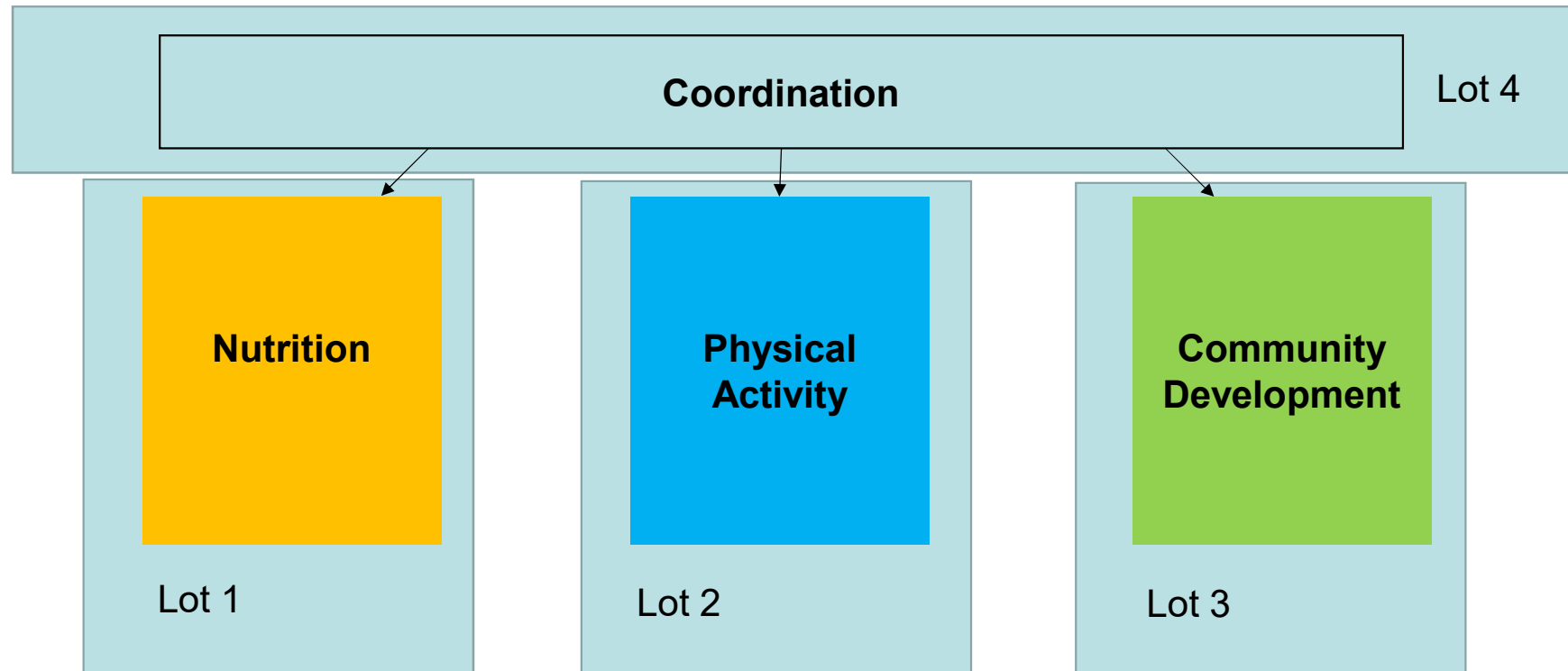
- **Greater flexibility in delivery to respond to community needs**
- **Integrated model which better facilitates person centred working**
- **Simplification of coordination**
- **Streamlined management opportunities**
- **Strengthen communication among partners**
- **Easier integration into system**

Model 2 – Modular approach



Model 2 – Modular approach

- A separate contract 'lot' for each component



Proposed Model 2 – Modular approach

Opportunities

- **More flexible approach to delivery**
- **Ability to spread any risks**
- **Conditions for innovation**
- **Streamlined management opportunities**
- **Strengthen communication among partners**
- **Potential for more diverse provider base**

Group Discussion 1

- **Are the components right (coordination, nutrition, physical activity, community development)?**
- **How do we engage with the right people?**
- **Do we need to move the focus away from obesity towards promoting healthy eating and physical activity?**
- **How do we measure success?**

Collaboration

How might partnerships or consortia be constructed to deliver the models

Commissioning for collaboration

We would like to explore opportunities for organisations to work together to bid for and deliver the contract or contracts.

The objectives that we are trying to achieve in facilitating environments for collaboration are:

- To maintain a mixed economy in Newcastle in order to deliver high quality provision
- To maintain existing skills and experience which is firmly placed within communities and is responsive to the needs of our local communities
- Accrue social value
- To draw out innovative proposals for new responses

Benefits of constructing partnerships or consortia

- Broader range of skills, experience and expertise being brought to the bid
- Working in isolation a single provider may find it difficult to offer all of the services required in the specification, or working with another provider with specific expertise in an area would complement your own service offering, hence making the bid more attractive
- Opportunity to spread risks and costs
- Better chance of winning with the resources of more than one organisation coming together

Structuring your partnership or consortium

- How you decide to structure your partnership will depend on a number of factors – you should take your own legal advice on what is best for your particular circumstances
- Need to understand and accept the legal implications of any partnership agreements.

Formal examples

- Creating a new joint venture for the purpose of the contract, for example:
 - the creation of a legal partnership – these are set up to comply with the Partnerships Act 1890
 - another example of a formal arrangement is the creation of a company in which the partners have interest
- **Establishing a formal legal partnership is a complex matter and you should seek legal advice if you intend to establish this sort of trading arrangement**

But there are other options...

Other examples

- Other examples include:
 - Becoming the lead organisation in a consortium
 - Joining a consortium led by another
 - Prime contractor/sub contractor arrangements
- We can only contract with a legal entity
- Where members have not set up together as a partnership or company that is a legal entity to enter into contracts, we will expect one member to act as the lead member when submitting the tender
- We will still need to understand who ALL the members of the partnership or consortium are, and the part of the service each member will provide
- If the bid is successful, we will enter into a contract with the lead member. We will also pay the lead member for the provision of the service
- Other members of the partnership or consortium will need to have a form of agreement with the lead member (MoU; Sub contractor agreements)

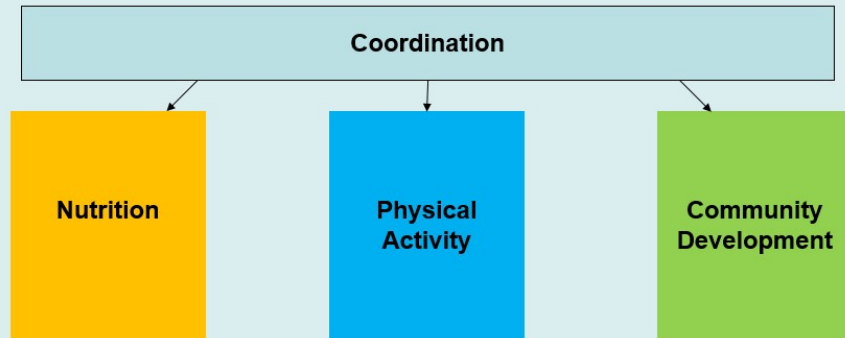
Things to consider...

- Important that the process of developing partnerships or consortia arrangements and identifying members / partners **starts early** – it should be in advance of the tender being issued
- Clarify your objectives in collaboration
- Identify potential members / partners
- Identify any potential threats to help form the basis of an open discussion between members
- Review risks, conflict of interest and due diligence up front
- Create a shared vision – vital that all members are working towards the same vision
- Formulate a written agreement – with professional legal advice
- Establish clear leadership and management structures
- Each member should expect to contribute to the formation of the collaboration, tender preparation and tender submission – all members should sign off the bid

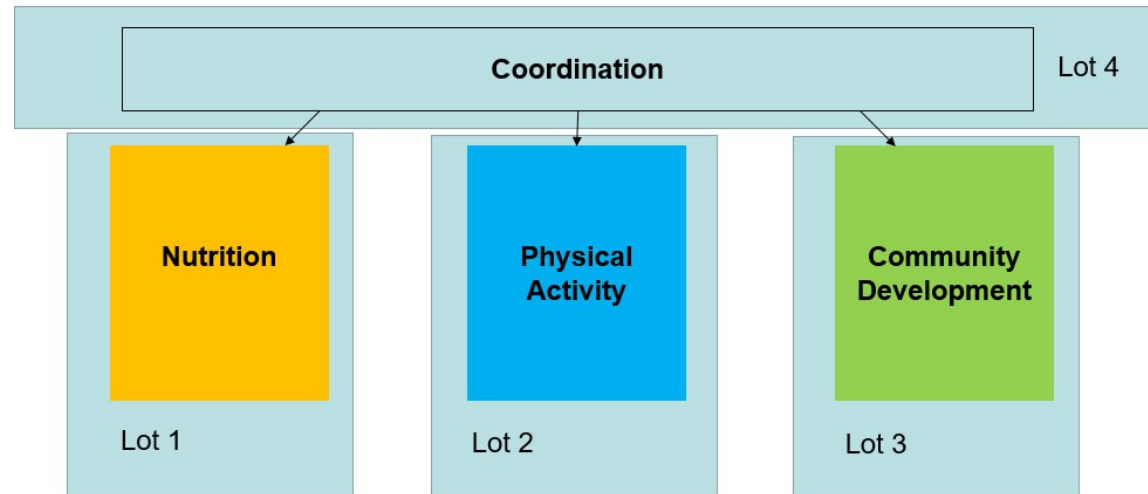
Group Discussion 2

- What benefits would arise if a local organisation was delivering in response to the service?
- How can Model 1 or Model 2 best support Think, Buy and Support Newcastle? Consider purchasing, employment, using local assets
- How will Model 1 or Model 2 involve the community (including but not only users of the service) Consider location, employment, volunteering, skill building / social benefits
- What whole system benefits do we expect to grow as a result of the service, and who will benefit from these? If there are multiple choices, how would we prioritise among them?
- How can ethical best practice be ensured within the Models?
- How could these be resolved, and what benefits would accrue to the community if this was achieved?
- How can each Model maximise opportunities for environmental sustainability within the service?
- How could these be resolved, and what benefits would accrue to the community if this was achieved?

- Single, integrated contract delivering all 4 components



- A separate contract 'lot' for each component



Close and next steps

- May 18: three stakeholder events plus
- June 18: wider engagement via Let's Talk and consultation with wider public
- End June 18: Consultation closes
- July 18: Consultation feedback and final proposal and IIA published
- July 18: 'Tender ready' sessions
- August 18: ITT published
- April 19: New arrangements commence

THANK YOU!

Any questions

