Healthy Weight: Healthy Wales Consultation Response

12th April 2019
Introduction

The Welsh Local Government Association (WLGA) represents the 22 local authorities in Wales. The three national park authorities and the three fire and rescue authorities are associate members.

It seeks to provide representation to local authorities within an emerging policy framework that satisfies the key priorities of our members and delivers a broad range of services that add value to Welsh Local Government and the communities they serve.

We welcome the opportunity to contribute to the Welsh Government’s ‘Healthy Weight: Healthy Wales’ consultation, detailing the ‘national ambitions to prevent and reduce obesity in Wales’.

General comments

Throughout this response, the proposals and questions posed in the consultation are included for ease of reference.

All good practice examples listed under the response to the Leadership and Enabling Change (LEC) proposals are collated in the Appendix at the end of this response.
Leadership and Enabling Change

LEC1: Core principles

What Matters?

LEC1. Developing a long term, whole system approach to address obesity based upon the core principles of:

1. Delivery of the ‘Healthy Weight: Healthy Wales’ plan to be led by a national implementation board which will be accountable to Ministers.

2. Create a strengthened role for public health leaders in Local Health Boards so that they can work with Public Service Boards to develop regionally based approaches to implementing the plan.

3. Prioritise and focus resources to make sure that current investments are delivering and where resources are available they are used in a sustainable way. Support must be focussed on enabling the system to act.

4. Higher priority for early intervention as well as the prevention of overweight and obesity. This will include clearer leadership, accountability, strategy and management structures. We will ensure that obesity is a tier 1 target for Local Health Boards. This aligns with ‘A Healthier Wales: Our Plan for Health and Social Care’ to shift resources to focus upon prevention.

5. Engagement with stakeholders, including a multi-level stakeholder engagement and communication programme which will ensure that we can engage all sectors of Welsh society in achieving our goal and maintain that engagement and commitment over time.

6. Long-term, sustained interventions which will build on international learning. Public Health Wales and the Public Health Directors Leadership Group, with clinical and allied health leaders will agree a ‘menu’ of effective strategies based on the review of evidence, which will drive local delivery. Local action will be determined and prioritised according to local need, assets and opportunities and will recognise that each area of Wales starts in a different place.

7. Ongoing evaluation and a focus on continuous improvement, which will enable us to learn from our work, adapt and change. This will include a review of the data from the Child Measurement Programme, including to develop a second measurement to consider how we can measure change effectively.
Question: Do you agree that a whole system approach could enable change to take place? If not, why? What are the opportunities, risks and barriers to effective leadership?

The principle of enabling a whole system approach to deliver improved outcomes towards a healthy Wales is something with which the WLGA completely agrees.

Such an approach should be fully inclusive and include local authorities as key partners. This approach will require effective leadership within and across organisations, sufficient and sustainable levels of resourcing, ultimately leading to more people in Wales able to manage their own and their families’ health. It is at that point where savings potentially accrue, leading in turn to opportunities for resource re-allocation.

The shift in resources towards more preventive measures has to be seen as longer term, but the need to continue with current prioritising and targeting, particularly where evidence shows schemes work well, has to be maintained.

That is a challenge in the prevailing financial climate, and the creation of new priorities by Welsh Government and its partners and stakeholders has to look hard at resource allocation and additional investment from Welsh Government where there are increased, or new responsibilities placed on public services.

Some of these themes are picked up later in information relating to Healthy Environments (HE), Healthy Settings (HS) and Healthy People (HP) proposals.
LEC 2: Understanding what works

What matters?

LEC2. Understanding what works. We want to review the impact and scale of delivery of community based programmes to determine which have the greatest merit and work with partners to scale programmes as part of a systems based approach.

Question: Are you aware of any good practice locally? How can we build upon and maximise existing practice and resources to support population change across Wales?

Yes, see the following examples, referenced in this response, and detailed in the Appendix:

HE6: Health Impact Assessments
HS4: Move More Sit Less
HS4: Foodwise for Life
HP1: National Exercise Referral Scheme (NERS)
HP1: Resource development PARQ+/PreCise
HS3: Raised BMI Pathway in Pregnancy
Healthy Environments

HE1: Reformulate and develop healthier food choices

What Matters?

HE1. Supporting Welsh business to reformulate and to develop healthier food choices by providing increased help through Food Innovation Centres. We support the reformulation programme delivered for the UK Government by Public Health England and will monitor progress. We will consider additional measures if necessary, including the use of further taxation powers in Wales, if the scale and pace of change by industry is not sufficient.

Question: Do you agree that the proposals set out in HE1 would make our food and drink environment healthier? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA completely agrees with this aim.

Suppliers and manufacturers of food in schools in Wales appear to be on board with this.
HE2: Limiting the promotion of unhealthy foods

What Matters?

HE2. Limiting the promotion of unhealthy foods. The UK Government has committed to consult on TV and online advertising to children of products high in fat, sugar and salt. We wish to support a 9pm watershed, and to go further, such as banning the use of brand generated and licensed character/celebrity endorsement of products across all media. We also want to utilise our powers in Wales by limiting the use of advertising and promotion of unhealthy food in public places. This includes, but is not limited to, train and bus stations/bus stops/on buses and at sporting and other events.

Question: Do you agree that the proposals set out in HE2 would make our food and drink environment healthier? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA sees the sense in restricting advertising of certain food and drink products, and therefore agrees with the principle. Local authorities may presumably have a regulatory role to play in terms of granting permissions or monitoring in terms of advertising in public places and would need to understand the implications.
HE3: Making healthy food affordable

**What matters?**

HE3. Creating a level playing field and making healthy food an affordable option. By regulating **price promotion and discounting practices** that lead to higher consumption of unhealthy foods, and encouraging the food industry to apply these approaches, we hope to incentivise healthier food purchasing in Wales. We will consult on how we could do this and wish to work with the UK Government to ensure there are consistent and clear expectations for businesses across boundaries.

**Question:** Do you agree that the proposals set out in HE3 would make our food and drink environment healthier? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA **agrees** the principle but points out that consumer protection legislation on product pricing are regulated by local authority Trading Standards Officers, so WLGA would advocate their involvement in discussions, and would be well placed to offer advice on this area, both to Welsh Government and businesses.

In response to specific questions as to how these aims may be achieved, further comments follow:

**How?**

- In schools, the current free breakfast scheme, whilst not universal, does ensure that significant numbers of children have a healthy breakfast.
- ‘Increase take up of co-operative community food programme.’ Preventing Childhood Obesity Steering Group (2015).

**Barriers?**

There are trends in society which tend to be reflected in schools, and those highlighted below may be barriers to creating and sustaining a healthier food environment:

- Secondary school pupils often demand hand held / ‘grab and go’ items in school, which tend to be less wholesome (e.g. burgers, bacon rolls, pizza …) than a plated meal (e.g. meal of the day). However, some ‘grab and go’ options are healthier and investigating how best to expand these should be looked at.
• Part of the challenge in moving people to thinking differently about the way they eat, remains trying to persuade pupils to take healthy choices in school. Even those taking packed lunches, and those who prepare the lunches, need to consider carefully what these contain.

• Pressures on the school day in terms of finances and timetabling can have unintended consequences in terms of times available for breaks. Local determination of school times is supported by local authorities, and the WLGA, but it may be that these wider factors also need to be taken account of when school governors and management are considering changes.

• The NPS had the potential for maximising purchasing power but this did not materialise and often local authorities or schools not procuring food and drink through the NPS were able to negotiate better food prices with suppliers.

• Not all children entitled to FSM take up that opportunity.

• A Brexit ‘no deal’ is likely to increase food prices.

**Facilitators?**

• ‘As part of the Welsh Government’s wider school meals agenda in Wales, local authorities and governing bodies have the power to operate flexible charging for school meals. This means that offers and promotions can be used to make school meals more attractive by lowering prices or offering discounts for time limited periods.’ Welsh Government (2014). One local authority implements flexible charging. This sort of scheme can be used to target particular food and drinks.

• It is possible to consider trial/case studies of whole-school approaches to healthy eating in secondary schools with healthier food and drink provision available, and targeted/priced attractively. The whole school aspect here is key, with all involved playing an appropriate part, including those providing meals. Pupil voice is part of that approach too, and a curriculum with opportunities for children/young people to understand and be part of food production. Using schools with a good track record would be a sensible starting point.

• Returning to local or regional purchasing consortia is expected to help negotiate better food prices with suppliers.
HE4: Giving people accessible information

What matters?

HE4. Giving people accessible information so that they can make an informed choice.

- We want to consult on mandating calorie labelling for food purchased and eaten outside of the home, which will help to inform consumer choice and may encourage reformulation.
- We want to consider further opportunities to improve consumer information on labelling which may arise following European Exit, including on front of pack nutrition labelling, and encourage Welsh producers to provide the most effective nutrition information on their products.
- We want to consider how we could support businesses and stimulate an increase in healthier food establishments.

Question: Do you agree that the proposals set out in HE4 would make our food and drink environment healthier? If you agree, how do you think these could be implemented and what support will be required? If not, why?

Mandating calorie labelling
Improving consumer information

The WLGA believes that these may be technically difficult areas upon which progress can be easily agreed across some sectors. Whilst the idea of ensuring that people are generally better informed is welcomed, and here again local authority Trading Standards Officers would play a key role in advising and enforcement.

Examples of different ways of thinking about what seems, on the face of things, an eminently sensible proposal are encapsulated in the following issues that have been raised in discussions on this response:

- Calorie information would also only be useful per portion (not per 100g).
- Carefully consider whether the benefits of calorie labelling outweigh the barriers and risks (e.g. development of eating disorders).
- Gather evidence about the impact of calorie labelling on the eating behaviours for children and young people before making a decision about legislation.
- Currently only the lunch provision and cakes and biscuits are nutritionally analysed by catering services in line with The Healthy Eating in Schools (Nutritional Standards and Requirements) (Wales) Regulations 2013 (‘Regulations’). Analysis of the
remaining food and drink provision (breakfast and morning break) would take some time and expertise/training to undertake and maintain. Inputting errors are common and catering staff do not always follow recipes’ ingredient weights and yields, which have been nutritionally analysed.

- Pressure on the person responsible for managing this centrally.
- Updating information, where products are substituted.

**Healthier food establishments**

Securing a position where the numbers of healthier food establishments flourish is desirable, and in principle something with which the WLGA would **agree**.

**How?**

Current means of preventing supermarkets, shops and other food outlets located near schools selling unhealthier foods to pupils is a problem area, probably not capable of resolution by current planning laws. This needs a wider debate focussed on changes in behaviour and attitudes by providers and consumers of food, and possibly offering incentives to business to change, particularly when located close to schools.

**Barriers?**

Food retailers operate in a competitive environment and trying to alter behaviours by regulation and prevention is (a) difficult, and (b) can bring unintended consequences such as legal challenges or relocation for example. Incentivisation seems a better use of time and resources for bringing about change.
HE5: Encourage healthier drinking habits

Question: Do you agree that the proposals set out in HE5 would make our food and drink environment healthier? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA completely agrees with this proposal.
### HE6: Creating healthy weight environments

**What matters?**

HE6. **Creating healthy weight environments.** By working with local authorities, health boards Public Health Wales and Transport for Wales we can create environments that facilitate active travel, physical activity, access to healthier food, high quality open spaces, green infrastructure and opportunities for play, sport and recreation, are prioritised as part of the **planning process.** This will be supported by the following:

- Promote the use of **health impact assessments** and the development of regulations and guidance on the use of these assessments by public bodies, to enable delivery.
- Public Health Wales to develop and disseminate **resources to support local action** to achieve place making that proactively supports healthy weight. Resources may include evidence reviews, guidance, blueprints and example policies.

**Question:** Do you agree that the proposals set out in HE6 would provide an environment with more opportunities to be active? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA **completely agrees** with this proposal. Please see the Appendix for details about a good practice example relating to health impact assessments.
HE7: Infrastructure

What Matters?

HE7. To work with local authorities, local health boards, Transport for Wales and partners to ensure that key infrastructure investments in our towns and cities are connected and support the development of healthier weights, this includes:

- Ensure the design of infrastructure including new housing and regeneration sites, South Wales Metro, and new health care sites support active environments.
- Continue investment in Active Travel and scale support to increase walking and cycling routes across Wales. This will include considering the potential for our new powers over national speed limits to be used to improve road safety and increase active travel.
- Use our Green Infrastructure, Sustainable Management Scheme and the new Enabling Natural Resources and Well-being Grant (ENRaW)\textsuperscript{36} to increase access and use of the countryside (parks, forests, beaches, national trails, rights of way and rivers) and make use of the land available for community use to support and promote active lifestyles.
- Community sport infrastructure to increase access to high quality provision, such as 3G pitches, including reviewing the delivery of the Sports Facilities Capital Loan Scheme. We will work to ensure access to advice and finance for small physical activity-related businesses and clubs and increase capacity for Sport Wales to provide proactive planning advice to encourage best practice.
- Play provision which supports our Children and Families (Wales) Measure 2010. This includes working with local authorities and partners to develop approaches in our most disadvantaged areas through Play Sufficiency Assessment and Play Action Plans.

Question: Do you agree that the proposals set out in HE7 would provide an environment with more opportunities to be active? If you agree, how do you think these could be implemented and what support will be required? If not, why?

Creating and maintaining infrastructure on a scale and of a type to support the notion of a healthy Wales is one with which the WLGA completely agrees.

Our natural and built environments can be used to offer opportunities in rural, urban and city areas for many types of physical activity and improved wellbeing.
However, there are costs to providing and maintaining suitable and sufficient local environments that support such ambition, and all local authority budgets are stretched already. So future developments mean additional resources.

One area traditionally used to secure amenities for communities have been Section 106 Agreements, commonly referred to as planning gain, and these will continue to be a source which local authorities can tap into.

There are though some problems with over reliance on this means of funding under current arrangements:

- Demographics and differences across areas mean that some areas of growth can attract funding, whilst some (often more socially deprived areas) have greater difficulties, so there is not an even playing field, nor under current arrangements can there be one.
- Moves by housing developers to set up, with local authority agreement, some form of management company for future asset management can work well, but there have been examples outside of Wales of unequal treatment of residents in social housing as distinct from private, which is unethical and unfair.

These are matters we have to explore jointly in order to secure outcomes which are mutually desirable for national and local government across Wales. The current initiatives set out in the consultation document are good examples of what can be achieved.
Healthy Settings

HS1: Healthy and Sustainable Pre-School Scheme

What matters?

HS1. Building strong foundations in our early years settings. Strengthening the Healthy and Sustainable Pre-School scheme could support positive practices in settings through food, physical activity and play. This will be supported through a range of areas to develop healthy early years environments:

- Work with the local authorities, childcare organisations and Care Inspectorate Wales to embed the best practice guidance on Food and Nutrition for Childcare.
- Work with the childcare sector to promote the importance of physical activity and play and to recognise the contribution it makes to children’s emotional, physical, social, language, intellectual and creative development.
- Embed the importance of physical activity and well-being in the Foundation Phase and work with practitioners to identify and share excellence in practice in both childcare settings and in primary schools, working with the Foundation Phase Excellent Network.

Question: Do you agree with the proposals for the early years (HS1) setting? If you agree, how do you think these could be implemented and what support will be required? If not, why?

This is agreed by the WLGA, as strong foundations for children at pre-school settings is an admirable aim which will lead into Foundation Phase requirements on physical activity and wellbeing.

Costs, including developing and enhancing the skills of staff in the sector and potential capital outlay in some settings, would need to be explored.
HS2: Whole school healthy weight environments

What matters?

HS2. Support schools to create whole school healthy weight environments, including the modelling and reinforcement of healthy weight behaviours. This will be facilitated by the following:

- **Strengthen school programmes** to ensure it provides tailored support to schools to create whole school healthy weight environments. This includes Natural Resources Wales, Public Health Wales and Sport Wales to focus on the collective opportunities for education and learning based interventions to maximise the potential of existing programmes of work on physical activity and to accelerate the pace of change.

- **Strengthen pupil’s voices** to drive healthy change in schools and work with School Councils and Youth Ambassadors to develop local approaches.

- One of the four purposes of the new curriculum is that learners develop as healthy, confident individuals who take part in physical activity and apply knowledge about the impact of diet and exercise on physical and mental health in their daily lives. The Health and Well-being Area of Learning and Experience will draw on physical activity, physical well-being, healthy eating and cooking. This will support learners to maintain healthy, balanced diets and physical activity for life.

- Update the **Healthy Eating in Schools (Wales) Regulations 2013** to reflect current government nutrition recommendations. Work with the Welsh Local Government Association, local authorities and schools to strengthen implementation.

- We will fund the **School Holiday Enrichment Programme** in summer 2019/20 to support children from participating schools to receive nutritious food and education, which includes increasing opportunities for physical activity, whilst working with parents to promote healthy behaviours.

- **Embed daily physical activity at an early stage** within primary schools. This includes expanding programmes such as The Daily Mile and strengthening opportunities through the physical environment in and around schools, such as playground design and access to green spaces.

- **Work with local authorities to support active travel to school**. This includes enhancing safe routes to schools by working with local communities to design appropriate solutions and supporting behaviour change through the Active Journeys programme.
Question: Do you agree with the proposals for the schools (HS2) setting?
If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA completely agrees with these principles, some of which are known to be in place in schools in some local authority areas. The idea of a ‘healthy school’ is wholly consistent with Welsh Government’s aspirations set out in this consultation document. The ‘healthy weight environment’ is complementary, and a natural extension of creating a healthy school.

Welsh Government and WLGA will be mindful of the fact that discussions have been renewed on teacher workload in Wales, and this could have an impact upon any changes proposed.

Additional comments on the detail follow:

**Strengthen pupil’s voices**

**How?**

- Schools should have machinery in place to ensure that pupil voices are sought and constructively used in making school policy and decisions of note. In 2010, Welsh Government said ‘... pupils should be engaged in decisions that will affect them about the school meals service [and dining experience] for example: managing queues, introducing pre-ordering, where to site outside eating areas ... seating [primary school] pupils together in friendship groups ... establishing (where possible within the school grounds) alternative selling points for [secondary school] pupils ... restricting access to offsite eating ... informing and contributing to the design of the new food and drink ... tasting sessions ...’.
- As Regulations change, might an ‘easy to read guide’ be a quick and easy way of raising awareness for pupils, parents and staff, and help secure a degree of consistency in understanding across all schools?

**Facilitators?**

- Trial/case studies of whole-school approaches to healthy eating in secondary schools with healthier food and drink provision.
New curriculum

How?

- Within current or future curricular arrangements, any specifics suggested below should preferably be delivered on an integrated basis, i.e. cross-curriculum, using a variety of skills, and enabling a number of learning outcomes to be secured from a co-ordinated activity. These can include practical healthy eating skills and messages.
- Look at current practice and policy likely to be transferable when the curriculum changes.
- Training for teachers and teaching assistants to enable changes specifically around healthy schools. For secondary school teachers this may involve separating out ‘home economics’ from design technology teacher training (as per curriculum suggestion).
- Whole school means exactly that and should routinely involve school meal providers in discussion and delivery of food related learning.
- ‘Support the wider roll out of existing healthy eating initiatives (e.g. Nutrition Skills for Life).’ Obesity Alliance Cymru (2017).
- ‘Seek increased progression through the WNHSS (e.g. more schools achieving NQA).’ Preventing Childhood Obesity Steering Group (2015).
- Estyn are currently reviewing schools’ provisions for health and well-being across the whole school day, with a report and dissemination events in summer 2019. However, the last Estyn report on how well schools were promoting healthy eating and physical activity was in 2009. There are no effective practice cases studies on healthy eating. Welsh Government may wish to consider whether a new report or sampling would help schools and local authorities to learn from schools with evidence of good practice/experiences?

Barriers?

- There is good practice in many schools, but it is not universal, and school leaders with good experiences in terms of managing healthy schools should be encouraged to share these.
- Schools are often not undertaking and maintaining enough actions to promote healthy eating and drinking to make progress on this aspect of the WNHSS.

Facilitators?

- ‘Any revenue raised through the [Soft Drink Industry] Levy should be redirected to programmes that tackle childhood obesity.’ (Obesity Alliance Cymru, 2017).
• Direct UIFSM funding, delegated to the Welsh Government each year, towards healthy eating in school initiatives.
• Trial/case studies of whole-school approaches to healthy eating in secondary schools with healthier food and drink provision.

Regulations

How?

• Updating the Regulations will not be sufficient to make further progress on the healthy eating in schools’ agenda. A review of the Regulations and underpinning Healthy Eating in Schools (Wales) Measure 2009 (‘Measure’) is required.
• Special schools and PRU’s are already covered by the Measure and Regulations but there is a need for specialist support.
• Meaningful consultation with catering services in the design of 21st Century Schools.
• Re-enforce the maxim ‘In undertaking self-evaluation ... schools should take every opportunity to draw on and make linkages with work undertaken in relation to [healthy eating in schools].’ Welsh Government (2010).
• Review the exemptions to the Regulations and make them consistent with a whole-school approach, particularly rewards, social occasions, religious occasions and fundraising events. Review exemptions to ensure consistent messages in line with Eat Well Guide and new curriculum.
• ‘At least one lead from within the school staff, reporting to the head teacher, should be identified to coordinate widespread engagement around school food within the parameters of the guidelines, incorporating a whole-school approach and pupil participation and bringing a learning dimension to this engagement.’ Welsh Government (2010).
• The WNHSS and WLGA have an established system in place for monitoring compliance with the Regulations, which should be known to Estyn (e.g. accreditation, NQA, Certificate of Compliance), who may benefit from co-operating on this, but this could be broadened and strengthened.
• ‘Support the wider roll out of existing healthy eating initiatives (e.g. Nutrition Skills for Life).’ Obesity Alliance Cymru (2017).
• ‘Expand the Child Measurement programme for Wales ... to evaluate the success of interventions designed to tackle childhood obesity.’ Obesity Alliance Cymru (2017). A second measurement may be useful if the process and results are used effectively (e.g. targeted interventions, signposting).
• Consideration might be given to how best local authorities and others ‘champion’ and embed the importance of healthy school meals by working with and supporting partners, particularly head teachers. This reflects Welsh Government thinking (2010).
• The food and drink requirements should be simplified to food groups, in line with the Eat Well Guide. Thought may need to be given to nutrient standards applying to school meals.

Facilitators?

• ‘Any revenue raised through the [Soft Drink Industry] Levy should be redirected to programmes that tackle childhood obesity.’ (Obesity Alliance Cymru, 2017).
• Direct UIFSM funding, delegated to the Welsh Government each year, towards healthy eating in school initiatives.
• Harness the power of cashless payment systems to investigate the spending habits (food and drink choices) of secondary school pupils at breakfast, morning break and lunch break, with a comparison between paying pupils and those eligible for FSM.
• Revising nutrient standards would allow greater professional judgment about portion sizes. Older children are more likely to complain about small portion sizes and catering services see greater waste among younger children.
• Trial/case studies of whole-school approaches to healthy eating in secondary schools with healthier food and drink provision.

School Holiday Enrichment Programme

The School Holiday Enrichment Programme (SHEP) is good practice on the ground, and is already successfully demonstrating how, during school holidays, children and young people can be meaningfully engaged in a range of activities with healthy eating at the core.

How?

• A commitment for further Welsh Government funding for SHEP until at least 2022 will enable local authorities to continue delivering and growing the programme, despite increasing local authority and school budgetary pressures, and will enable full research into its medium- and long-term impacts.
• Ensure that all holiday provisions in Wales are mapped and co-ordinated and that all publicly funded programmes should be assessed based on social return on investment and adhere to quality assurance, including safeguarding, that ensures appropriate and nutritious food provision and healthy lifestyle messages.
• ‘Support the wider roll out of existing healthy eating initiatives (e.g. Nutrition Skills for Life).’ Obesity Alliance Cymru (2017).
Barriers?

- Uncertainty over future funding places schools in a difficult position, determining whether to start up SHEP or not.
- Some school staff may be reluctant to commit to working during the school holidays if their benefits are affected.
- School governors may see SHEP as too much of a strain on the school budget.
- Identifying SHEP Coordinators at local authority level due to capacity issues of existing personnel.

Facilitators?

- The Pupil Development Grant may be used to assist schools fund SHEP, although some head teachers are informed that this is not allowed under existing guidelines.
- Trial an electronic benefits transfer (card system) that allows parents to access holiday provision including healthy food. This would facilitate both paid and free provision without stigma and promote partnership working.
- A commitment to further funding would enable employment of ‘Holiday Provision Coordinators’ at local authority level to effectively map, evaluate, quality assure and develop the provision across all sectors.

Daily Mile

How?

- The Daily Mile is a simple and straightforward initiative that has been acknowledged for reducing childhood obesity and recognised within the UK Government’s 2018 Childhood Obesity Strategy.
- We recommend schools introduce The Daily Mile to children as a run or jog, not as a walk. If implemented as per Core Principles, almost all children will be able to run for most, or all, the way after around 4 weeks. This level of fitness will be maintained or improved over the coming months and years.

Facilitators?

- The Daily Mile is a free, effective initiative that any school can implement without the need for staff training. Its impact can be transformational – improving not only the children’s fitness, but also their concentration levels, mood, behaviour and general wellbeing. [http://thedailymile.cymru/research/](http://thedailymile.cymru/research/)
HS3: Healthy Colleges and Universities Framework

What matters?

HS3. Recognising that our young people are at risk of becoming overweight or obese as they move to tertiary education. Implementation of the Healthy Colleges and Universities Framework could improve opportunities for healthy food provision, facilities and participation in physical activity. This could be achieved by:

- Working with Colleges Wales, Universities Wales and Student Unions to support implementation and opportunities.
- Reviewing and strengthening current programmes to increase physical activity and promote healthy eating opportunities across campuses, including active travel to campus for students and to develop campaigns and support around healthy eating and preparing basic and nutritious meals for students.

Question: Do you agree with the proposals for the higher/further education (HS3) setting? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA completely agrees with these proposals.

How?

- The WLGA NERS Manager in her role as Honorary Senior Lecturer at Cardiff Met has attended workshops and seminars explaining about the benefits of physical activity and its links to reducing the risk of developing chronic conditions.
- Offered advice at student information days on accredited continuing professional development to enter the Exercise Referral/Personal trainer profession, which whilst very informative for students and have had some promising results they are:

Barriers?

- Time consuming.

Facilitators?

- Well qualified and experienced NERS staff across Wales if resources were available to roll out to all universities of Wales.
HS4: Businesses

What matters?

HS4. Supporting businesses to develop good practices on healthy eating and physical activity. This could includes:

- Promote the use of our Economic Contract\(^4\)\(^5\) to encourage employers to support the health and wellbeing of their workforces.
- Encourage employers to participate in national schemes to promote healthy weight, including developing motivational campaigns and supporting employees to access evidenced based weight management programmes.

Question: Do you agree with the proposals for the workplace (HS4) setting? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA completely agrees with the proposals for workplaces but is mindful that many small businesses would possibly require additional external support if they were to be successful in implementing these. Please see the Appendix for details about a good practice examples relating to ‘Move More Sit Less’ and ‘Foodwise for Life’.
HS5: Local Health Boards and Trusts

What matters?

HS5. Local Health Boards and Trusts should act as an exemplar and support their workforces to be **healthy and active workforces**. This might include increasing active travel, promoting routine daily physical activity and providing weight management services for NHS staff. We also want health and care environments to be healthy through proposals to:

- **Align and mandate food and nutrition standards** for food and drink provision for staff and visitors.
- Develop a national **Hospital Retail Standard**, which will increase healthier options in retail outlets on NHS estates.

**Question:** Do you agree with the proposals for the NHS (HS5) setting? If you agree, how do you think these could be implemented and what support will be required? If not, why?

This is a matter for the NHS to consider, but it is in line with proposals for other sectors.
HS6: Public sector settings and contract specifications

What matters?

HS6. Supporting public sector settings to promote healthy food and drink options for staff, visitors and customers by developing guidelines and exploring opportunities to use contractual arrangements to drive change. We also want to work with the Welsh National Procurement Service (NPS) and other regional purchasing consortia to embed stricter nutrition and food criteria in contract specifications for food and food products.

Question: Do you agree with the proposals for the public sector (HS6) setting? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA would broadly agree on this proposal as it is consistent with local government’s commitment to joint working.

How?

- In the local authority sector, for example, authorities should work to common standards across service areas in promoting and providing healthy food and drink options for employees and visitors.

Barriers?

- The NPS had the potential for maximising purchasing power but this did not materialise and often local authorities or schools not procuring food and drink through the NPS were able to negotiate better food prices with suppliers.

Facilitators?

- Returning to local or regional purchasing consortia is expected to help negotiate better food prices with suppliers.
Healthy People

HP1: Understanding and behaviour change

What Matters?

HP1. Understanding what will encourage or prevent people from adopting a healthier diet or being physically active. We will work with Public Health Wales to design and deliver effective and high impact behaviour change programmes based on the evidence of what is effective for specific groups.

Question: Do you agree that proposals HP1 will support behavioural change and increase conversations about healthy weight through front line services? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA would completely agree with this proposal. Please see the Appendix for details about a good practice examples relating to the National Exercise Referral Scheme (NERS) and resource development PARQ+/PreCise.
HP2: Making Every Contact Count (MECC)

What Matters?

HP2. Ensuring that relevant front line health and care staff have undertaken core Making Every Contact Count (MECC) training on healthy weight and will have the skills and confidence to hold conversations with individuals about their weight and signpost to appropriate support services. This includes strengthening opportunities to develop and reinforce the knowledge and skills of staff working across a range of roles in the community, to include:

- Staff in childcare and foundation phase education
- Staff in primary, secondary and social care
- Community development and third sector staff
- National Education bodies, e.g. Health Education and Improvement Wales (HEIW) and Social Care Wales to ensure nutrition and physical activity (and where appropriate healthy weight) education is included as a core element in the training of health and social care professions.

Question: Do you agree that proposals HP2 will support behavioural change and increase conversations about healthy weight through front line services? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA completely agrees with these proposals.

Staff in primary, secondary and social care

How?

- The NERS team across Wales have all received the MECC training and utilise it during their consultations and interactive physical activity sessions.

Barriers?

- Funding to allocate additional time to roll out to other leisure staff

Facilitators?

- Local PH team trainers & NERS Professionals
HP3: 10 Steps to a Healthy Weight

What Matters?

HP3. The 10 Steps to a Healthy Weight programme will provide practical support and information for parents via a range of evidenced based interventions and positive parenting campaigns. To include:

- Evaluation and implementation of a range of evidenced based programmes, particularly to support mothers who are overweight or obese within pregnancy.
- Ensuring professionals have appropriate skills and consistent resources to hold positive conversations about healthy weight. This includes utilising holistic programme of advice and support that will enhance children’s health and developmental potential to parents and children in the early years, including through Flying Start (and outreach).
- Implementation an all Wales breastfeeding action plan, to create positive conditions and the right support for women to choose to breastfeed and increase the numbers of women who breastfeed for at least six months.
- Support for families on lower incomes, including working with the UK Government to consider consultation findings from the Healthy Start Scheme, which aims to help pregnant women and children under five in low-income families to eat healthily and also includes an option to obtain free vitamins. Moving forward we wish to consider how funding for welfare foods could be best delivered across Wales.

Question: Do you agree that proposals HP3 will enable children and families to support a healthy weight? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA completely agrees with these proposals. Please see the Appendix for details about a good practice examples relating to the ‘Raised BMI Pathway in Pregnancy’.
HP4: Children and Families programme

Question: Do you agree that proposals HP4 will enable children and families to support a healthy weight? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA completely agrees with this proposal.
HP5: Review and implement a clinical obesity pathway

**What Matters?**

HP5. Review and implement a clinical obesity pathway ensuring it meets current standards, provides clear definitions, sets clear transition points across each level and that there is explicit governance and accountability for delivery. This includes reviewing current delivery and implementation barriers, setting minimum standards at each level and agreeing a minimum national dataset to help monitor impact by working with Local Health Boards.

**Question:** Do you agree that proposal HP5 will develop a clinical pathway to ensure those who are overweight or obese can access the right kind of support? If you agree, how do you think these could be implemented and what support will be required? If not, why?

The WLGA would support this proposal.

**How?**

- The NERS Weight Management Pathway provides safe and effective community-based exercise opportunities suitable to client base that complies with National Standards.

**Barriers?**

- Lack of funding, this would benefit enormously from additional funding by increasing the population numbers able to access the scheme, reducing waiting lists and allowing the physical activity component of NERS to operate alongside the Foodwise for Life educational sessions with improved outcomes.

**Facilitators?**

- NERS Exercise Professionals. All Exercise Professionals operating the programme are trained to NVQ Level 3, have an Accredited Exercise Referral Qualification, and hold a Level 4 Weight Management Certificate and have completed the OCN level 2 Nutrition course.
Question: This question relates to the impact the proposals might have on certain groups. Do you think the proposals in this consultation document might have an effect on the following?

- Those living in rural areas No
- Welsh language No
- Equality
  - Age No
  - People with disabilities No
  - Sex No
  - Transgender No
  - Marriage or civil partnerships No
  - Pregnancy and maternity No
  - Race No
  - Religion No
  - Sexual orientation No
  - Children and young people No
References

Obesity Alliance Cymru (2017). *A national strategy on preventing and reducing obesity.*

Preventing Childhood Obesity Steering Group (2014). *Turning the Curve on Childhood Obesity in Wales.*

Public Policy Institute for Wales (2016). *Asymmetric School Weeks.*

South Wales Food Poverty Alliance (2019). *Food Poverty in South Wales - A Call to Action.*


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Appendix: Details on examples of good practice referred to in this response

HE6: Health Impact Assessments

- By employers embracing a Corporate Health Standard, which is a continuous journey of good practice and improvement, it can be used as a tool to support the development of health impact assessment policies that promote the health and well-being of employees.
- By employers embracing a Corporate Health Standard, which is a continuous journey of good practice and improvement, it can be used as a tool to support the development of health impact assessment policies that promote the health and well-being of employees.
- Taking an organisational development approach, which is the most effective way of promoting sustainable health improvement, the Standard promotes good practice and supports businesses/organisations in taking active steps to promote the health and well-being of their employees.
- The main aim of the events is to ensure that employees could access information on how to improve their health and wellbeing in their workplace in a relaxed environment and identify those with underlying health issues requiring signposting to a health professional.

Barriers?

- This successful initiative would require longer term additional funding for the NERS programme to enable it to be rolled out across Wales by providing some training for local health and wellbeing champions, possibly an investment from the health and or business sectors.

Facilitators?

- NERS Professionals across Wales are all trained to deliver an evidenced based Health and Wellbeing check like the one developed and delivered in Pembrokeshire as a Corporate Health and Wellbeing Promotion.
- A full evaluation of the Cooperate Health assessments delivered in Pembrokeshire is available from the WLGA.
HS4: Move More Sit Less

- Focusing on workplace intervention involving working populations of employers. By Employers increasing awareness of the risks of a sedentary lifestyle, support individual capacity to make lifestyle changes, and motivate others to spread the message

- By supporting and working in partnership with leading employers to develop innovative ways to encourage less sedentary ways - Healthy workplace adds value to organisations by promoting better health and increasing the motivation and engagement of employees, which in turn helps to drive increases in productivity (Dame Carol Black, 2006)

- Occupational Health teams of those organisations would need to be engaged, and there will need to be clear messages and campaigns developed in partnership with the marketing departments

- The delivery would be through 1-hour Workshops:
  - 1st half an hour with presentation on Sedentary Behaviour Brief Intervention
  - 2nd half an hour interactive session, where groups are given scenarios of a typical ‘day in the life’ of someone and will be asked to identify what opportunities that person would have to be less sedentary throughout their day.
  - The final part of the Workshop will be for each participant to use what they have learned/practiced to help identify ways in which they could be less sedentary every day.
  - They will fill in a questionnaire to identify how sedentary they are and will make a few simple ‘pledges’ of changes that they feel able to make. Taking the pledges with them as a reminder.
  - They will also be able to register to use a ‘Fitball’ or ‘Varidesk’ at this point
  - An evaluation form will be completed at the end of the workshop

- Information leaflets have been researched and designed by NERS Coordinator:
  - ‘How Sitting Too Long Affects the Body’ – has 10 tips to support you being more active in the workplace and some exercises to do in the workplace
  - ‘How To Start Standing At Work’- requires funding to purchase standing desk (Varidesk)
  - ‘Active Sitting’- requires funding to purchase exercise stability balls to sit on. (Stability ball)

- Training on resource use – could also be available to reduce the burden on NERS Professionals.

- Move More Sit Less concept originated in Pembrokeshire through the Creating an Active Wales steering group. A full evaluation on the delivery is available from the WLGA.
Barriers?

- This successful initiative would require longer term additional funding for the NERS programme to enable it to be rolled out across Wales, possibly an investment from the health and or business sectors.

Facilitators?

- Selected NERS Professionals across Wales.

**HS4: Foodwise for Life**

- Employers informing their workforce with a chronic condition, who may need the support of a specialist instructor and require support to take up physical activity, about the NERS programme and the referral process to gain access to the weight management programme
- The ‘Foodwise for Life’ eight-week structured programme, which utilises evidence-based approaches to weight management, could be delivered by NERS professionals in the work environment or as a bolt on to the delivery of the established exercise programmes
- The aim is to provide individuals with basic knowledge and skills of food and weight management for their direct benefit to help them make informed choices. By the end of the eight-week programme the participants will be able to:

<table>
<thead>
<tr>
<th>Week 1: Preparing to Change for Life</th>
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<tbody>
<tr>
<td>1. State the reasons why weight loss is important to them as an individual</td>
</tr>
<tr>
<td>2. Demonstrate an understanding of the myths and facts around weight management</td>
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<thead>
<tr>
<th>Week 2: Eatwell plate</th>
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<tbody>
<tr>
<td>1. Demonstrate an understanding of the ‘Eat Well Plate’ and its role in weight management</td>
</tr>
<tr>
<td>2. Suggest healthy eating tips in relation to each food group and individual food diaries</td>
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<tr>
<th>Week 3: Portion Sizes &amp; You</th>
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<tbody>
<tr>
<td>1. Discuss portion sizes of commonly eaten foods in relation to Eatwell plate</td>
</tr>
<tr>
<td>2. Discuss the concept of energy balance in relation to weight management</td>
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<tr>
<th>Week 4: Up &amp; about</th>
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<tbody>
<tr>
<td>1. List 5 benefits of physical activity and 3 ways in which they could increase their levels of activity</td>
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<tr>
<th>Week 5: Food Labels</th>
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<tbody>
<tr>
<td>1. Identify which packaged foods are high or low in fat, sugar, salt and saturated fat</td>
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<tr>
<td>2. Demonstrate an understanding of choosing healthier options</td>
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<tr>
<th>Week 6: Focus on Your Food</th>
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<tbody>
<tr>
<td>1. Discuss the importance of regular meals</td>
</tr>
<tr>
<td>2. Suggest strategies on how planning ahead can support weight management</td>
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<tr>
<td>3. Demonstrate an understanding of the differences between hunger and craving and managing these.</td>
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<tr>
<th>Week 7: Food &amp; Drinks Swaps</th>
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<tbody>
<tr>
<td>1. Suggest suitable swaps for high calorie food and drinks</td>
</tr>
<tr>
<td>2. Suggest ways to make healthier swaps when choosing a takeaway/ eating out</td>
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</table>

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<tr>
<th>Week 8: Changing for Life</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Discuss the importance of sources of support and rewards</td>
</tr>
<tr>
<td>2. Suggest possible strategies to manage weight long term</td>
</tr>
</tbody>
</table>
• 'Foodwise for Life' is written by Public Health Dieticians in Wales (PHDiW)
• The programme is designed to be delivered by suitable qualified people, trained to Agored Cymru level 2 and the attendance at a dietician led group facilitation training day, and contributes towards activity at Levels 1 and 2 of the Welsh Government 'All Wales Obesity Pathway.

Barriers?

• This would require additional funding for the NERS programme

Facilitators?

• NERS Professionals across Wales. The 22 local authority schemes could deliver the physical activity element of the weight management programme alongside the 'Foodwise for Life' education intervention.
• Peer training could also be provided to reduce the burden on NERS longer term.

HP1: National Exercise Referral Scheme (NERS)

• NERS is a Public Health Wales (PHW) funded scheme which has been in development since 2007. The Scheme targets clients aged 16 and over who have, or are at risk of developing, a chronic disease. The scheme is centrally managed by WLGA and has secured funding until March 31, 2020.
NERS is an evidenced based health intervention that incorporates physical activity and behavioural change to support people in Wales to independently make and maintain healthier lifestyle changes, reducing the avoidable burden of preventable disease.

https://www.wlga.gov.uk/national-exercise-referral-scheme-ners

The two distinct but interlinked elements of NERS:

- Exercise Professionals that are registered at Level 3 of Register of Exercise Professionals (REPs) provide ‘generic’ NERS sessions for ‘low risk’ population groups that need some support to increase fitness and reduce general risks of developing chronic conditions. (16-week programme)
- Exercise Professionals that are registered at level 4 are qualified to deliver more specialist NERS sessions for population groups deemed to be ‘higher risk’ and who need to undertake tailored exercise sessions as part of their rehabilitation following an intervention by the NHS or to manage a chronic condition and use physical activity as a means of secondary prevention (16-48 weeks).

The principal aims of the scheme:

- To offer a high-quality National Exercise Referral Scheme across Wales
- To increase the long-term adherence of clients to physical activity
- To improve the physical and mental health of clients
- To determine the effectiveness of the intervention in increasing clients’ activity levels and improving their health

Quality standards:

- All protocols used on the Scheme represent the best current known practice and meet with current national guidance. All exercise professionals operating the Scheme are appropriately trained and registered.
- Developed as part of an RCT Evaluation https://gov.wales/evaluation-national-exercise-referral-scheme-wales-0
- Central data collection
- WLGA centrally manages delivery.

Barriers?

- Short term funding, Local Authorities are not able to commit to additional developments without additional, longer term funding contracts.
Facilitators?

- Operates in all 22 local authorities in Wales – 1 x National Manager and 1 Policy Support Officer based at WLGA / 1 x Local Coordinator per local authority.
- Approximately 96 whole time equivalent specialist Exercise Referral Professional Instructors across Wales.

HP1: Resource development PARQ+/PreCise

- In 2011, at the request of Welsh Government, the WLGA’s NERS Manager part funded, out of the NERS grant, the development of an improved Physical Activity Risk Assessment Tool.
- Commissioned the British Heart Foundation and Loughborough University to validate the Canadian PARQ+, using a Delphi system approach, in collaboration with Clinical registrars.
- To agree a comprehensive set of pre-exercise health screening questions. These questions would capture information on an individual’s medical history and to explore whether any medical issues that have been identified may limit their ability to be active. Based upon the individual’s response to the questions the most suitable physical activity pathway is recommended, i.e.
  - cleared for unrestricted physical activity
  - cleared with a recommendation to seek the support of a suitably qualified exercise professional
  - recommended to keep moving, but to seek medical advice before becoming more physically active.
- Reducing the burden on GP practices by reducing the numbers requiring health clearance prior to becoming more active and by highlighting which elements of the persons health need to be checked, before beginning an exercise programme.
- The questions have been used to develop a prototype digital pre-exercise health screening tool renamed ‘The PreCise Tool’
- User testing has been undertaken with potential users to check that the questions and process used are user friendly.
- The feedback on the tool has been overwhelmingly positive with many ‘would be exercisers’ indicating that they would feel extremely confident with the recommendation they received after completing the pre-exercise health screening questionnaire.

Barriers?

- In October 2018 Loughborough withdrew from the project development
• WLGA NERS Manager is in contact with the prototype digital platform ‘Sky Lab’ are investigating what would be the cost involved to complete the digital platform.

Facilitators?

• Primary Care Practitioners more confident to safely signpost their patients to the correct physical activity intervention.
• Local Community Walk leaders able to safely screen new members who haven’t been screened elsewhere to check their suitability to undertake outdoor activity.
• General population to check their suitability to take up activity and open the door to ‘self-referral to appropriate physical activity interventions such as the NERS.

HS3: Raised BMI Pathway in Pregnancy

• The NERS Manager has developed a Raised BMI Pathway in Pregnancy which is targeted at women with a BMI over 30 at their first Antenatal appointment to provide support and encouragement to those women whose health could benefit from a more active lifestyle.
• NERS along with Hywel Dda Local health Board have developed two booklets to offer advice to both Midwives and pregnant women about the benefits of being physical activity during pregnancy and NERS also support mums with post-natal advice at last consultation. More information is available from the WLGA.

The aims of the Raised BMI Pathway in Pregnancy:

• To offer a systematic and safely controlled system of referral to exercise.
• To increase the long-term participation of pregnant women in physical activity.
• To help improve the physical and mental health of pregnant women.
• To help reduce the risks to pregnant women and their babies by increasing activity levels and helping to manage appropriate weight gain.

Barriers?

• Due to funding constraints this pathway can only be offered if local health boards are prepared to fund additional staff resources.

Facilitators?

• NERS suitably qualified Exercise Professionals. In many areas NERS have worked collaboratively with Flying Start Professionals to reach out to women in areas of deprivation and encourage them to take up the programme.