

To the Chair and Members of Exeter Health and Wellbeing Board

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AGENDA FOR EXETER CITY COUNCIL EXETER HEALTH AND WELLBEING BOARD

The Exeter Health and Wellbeing Board will meet on WEDNESDAY 29 JANUARY 2014, commencing at 2.00 pm, in the Rennes Room, Civic Centre, Paris Street, Exeter. If you have an enquiry regarding any items on this agenda, please contact Howard Bassett on Exeter 265107.

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DATE OF NEXT MEETING

The next **Exeter Health and Wellbeing Board** will be held on Tuesday 18 March 2014 at 2.00 pm

EXETER HEALTH AND WELLBEING BOARD

Tuesday 12 November 2013

Present:-

Councillor Owen (in the Chair)

Councillor Edwards

Councillor Prowse

Councillor Westlake

Exeter City Council

Exeter City Council

Exeter City Council

Devon County Council

Dr Virginia Pearson Public Health, Devon County Council Ruth Dale Public Health, Devon County Council Patsy Temple Public Health, Devon County Council

Gillian Champion Clinical Commissioning Group

Hannah Ellis-Murdock Chamber of Commerce

Superintendent Chris Eastwood Devon and Cornwall Constabulary

Simon Bowkett Exeter CVS

Robert Norley Exeter City Council
Sarah Ward Exeter City Council
Dawn Rivers Exeter City Council
Jayne Hanson Exeter City Council
Robert Norley Exeter City Council

Also Present

Julian Tagg and Jamie Vittels Exeter City Football Club

10 CHAIR

In the absence of Councillor Edwards at the beginning of the meeting, the meeting was chaired by Councillor Owen.

11 APOLOGIES

These were received from Councillors Hannaford and Leadbetter and Bindu Arjoon.

12 <u>MINUTES OF THE MEETING HELD ON 24 SEPTEMBER 2013</u>

Subject to an amendment showing Virginia Pearson, Ian Tearle and Patsy Temple as representatives of Public Health, Devon County Council and not the NHS, the minutes of the meeting held on 24 September 2013 were agreed as a correct record.

13 PRESENTATION FROM EXETER CITY FOOTBALL CLUB AND FOOTBALL IN THE COMMUNITY CHARITABLE TRUST

The Chair welcomed Julian Tagg, Vice Chairman of Exeter City FC and Jamie Vittels, the Club's Head of Community.

Julian Tagg spoke to the presentation which provided an overview of the operation of Exeter City Football Club, the only supporters run Football Club in the country. His presentation covered the format and membership of the Trust and Club Boards

and, in particular, the Football in the Community Charity Trust Board. It also set out the operational pyramid of the Club covering the First Team, YTS, College Academy, Centre of Excellence, the Development and Advance Development Centres and Football in the Community. The latter two reached out to thousands in the community both in Exeter and beyond offering participation in football as well as other sports.

Jamie Vittels provided an overview of the community engagement work of the Trust and spoke about the strands of work being undertaken in Devon in relation to participation in sport, education, health and social inclusion. He advised that a lot of the work was delivered in Exeter.

Members felt that the work being undertaken by the Trust was very impressive and inspiring. They acknowledged that the Club's work was well known and respected and that grant support was therefore merited and, as in other areas, would benefit from long term funding commitments. Julian Tagg identified a shortage of suitably surfaced areas within the City to further develop many of the football programmes, some of which were designed to encourage those who would not normally gravitate to the traditional 11-a-side game. Jamie Vittels advised that there was a need to further develop ladies football in the City. As data analysis and evidencing outcomes would be of value to secure future funding, the Club would work with the University to monitor the various schemes.

The Chair thanked Julian Tagg and Jamie Vittels for their presentations and, on behalf of the Board, invited Julian to serve as a Board Member. This was moved by Simon Bowkett and seconded by Councillor Westlake.

RESOLVED that Julian Tagg be appointed to the Board.

14 <u>EXETER PUBLIC HEALTH PLAN AND JOINT HEALTH AND WELL BEING</u> STRATEGY

The Public Health Specialist presented the first draft Exeter Joint Health and Wellbeing Strategy. The four priorities for developing co-ordinated actions were:-

- (1) increased physical activity;
- (2) reduced alcohol misuse;
- (3) reducing falls and cold homes; and
- (4) health of the most disadvantaged.

She advised that the Strategy outlined for each issue the position in Exeter, the evidence of effective interventions and the focus of actions for each area. A number of key health and wellbeing issues of note for Exeter would continue to be monitored by the Board and the priorities chosen would be reviewed for relevance in the light of data, evidence and progress on an annual basis.

Time frames beyond three years were envisaged, if necessary, to achieve real measurable progress against priorities. Priorities and progress would be monitored and reviewed through an annual action plan and regular reporting to the Board.

Members felt that focussing on more than one priority would be of value in order to achieve a number of 'early wins' and acknowledged that, whilst 2, 3 and 4 would largely fall within the remit of individual partners, the first priority was one which could be achieved through momentum brought by the Board itself.

The value of Clinical Commissioning Group involvement was acknowledged through, for example, encouraging GP referrals to physical activity groups and the introduction of health checks for all.

It was suggested that the existence of the Exeter Health and Wellbeing Board and Joint Health and Wellbeing Strategy could be publicised through the forthcoming CCG Exeter Sub Locality Health Fair at the Guildhall on 29 November where the CCG would be consulting on the current vision for future health care for residents of Exeter.

RESOLVED that:-

15

- (1) the draft Exeter Health and Wellbeing Strategy be approved for engagement/consultation. Any comments/feedback on the draft to be submitted to the Public Health Specialist by 3 December 2013 via email pasty.temple@devon.gov.uk;
- (2) the strategy, with all corrections and amendments made, be reported back to the January meeting of the Board for final approval; and
- (3) consideration be given to the public consultation/engagement needed on the strategy at the CCG Exeter Sub Locality Health Fair.

GETTING EXETER ACTIVE PROJECT

The Assistant Director Environment presented the report proposing the formation of a project group to increase the participation rate in physical activity for Exeter's citizens.

Ruth Dale, Public Health, Devon County Council, spoke about adopting a social marketing approach to the Get Exeter Active work programme. Placing the residents of Exeter at the centre of the work at scoping stage would seek to understand who in Exeter was not active and why, using all relevant data to segment the population. Different people would require different approaches and it was important that local planning recognised this from the outset. Sometimes, barriers to participation were not the obvious ones people think they area. One Council had found from undertaking such work that the reason young girls were not using leisure centre facilities to exercise was because there were no hair drying facilities and they were worried about their appearance upon leaving the centres post exercise.

Initial work would be around understanding what services and interventions were already there to enable planning to maximise existing resources and pull together overlapping areas of work within organisations. Sport England had already done some segmentation of the population from a physically active perspective. This was available at an Exeter level and displayed visually in map and graphical form. There was also data on participation levels mapped against deprivation in the City.

Public perception of sporting, leisure and recreational opportunities was considered to be poor and a major thrust of the work would be to increase public awareness of such opportunities in the City, embracing the use of open spaces and parks which were free, as well as opportunities in arts and culture. City and County Councillors' membership of the group would be valuable.

RESOLVED that:-

(1) the formation of a "Getting Exeter Active" project group be approved; and

- (2) the Getting Exeter Active Group comprise:-
 - Councillor Owen (Exeter City Council)
 - Councillor Westlake (Devon County Council first year
 - Councillor Leadbetter (Devon County Council) second year

and representatives from:-

- Exeter City Council Community Involvement, Parks and Open Spaces, Leisure Facilities Management
- Devon County Council Public Travel Team
- Public Health Public Health Specialist, Social Marketing Programme Manager
- Clinical Commissioning Group
- Exeter CVS
- Westbank to be confirmed
- Football in the Community Charitable Trust
- Active Devon Sports Partnership
- Rugby World Cup 2015 Legacy Group

16 <u>COLLABORATIVE APPROACHES TO IMPROVING HEALTH AND WELLBEING - UPDATES FROM THE CLINICAL COMMISSIONING GROUP AND EXETER CVS</u>

CCG

Gill Champion explained the work, remit and recent initiatives of the CCG. Work had commenced on refreshing the CCG's Devon Strategy of Health which would have a focus on prevention and self care. A social marketing policy was also being developed, a meeting involving representatives of the County and City Councils, Exeter CVS, Age Concern etc. set for 11 December.

Exeter CVS

Simon Bowkett reported on the changing role and work of Exeter CVS which operated as an infrastructure body in support of a wide range of voluntary bodies and charities. There had been a significant shift towards working in an open market environment based on service level agreements and contracts with charities and bodies funded increasingly on a short term basis.

A more collaborative approach was required, resulting in the creation of Devon Live, a local infrastructure for voluntary sector organisations set up by Exeter CVS in conjunction with the Devon Community Forum, ECI, Voluntary Services for Young People in Devon and others providing a single point of contact, funding and advice for the voluntary sector. A key element was the creation of a "communities of practise" bringing together various charities and bodies under separate headings including health and wellbeing, criminal justice and children and young people to assist with the procurement of services. This was the first of its kind in the country.

He referred to specific projects such as Ecomind aimed at helping those with mental health issues by encouraging participation in out of door, environmental projects. There was a need to move away from offering medical solutions to social problems by encouraging creative and educational activity and increased social interaction, for example, the introduction of a 'Cultural Passport' to encourage engagement in the arts.

RESOLVED that the updates be noted.

17 THE NEW HEALTH LANDSCAPE - OVERVIEW OF THE NEW STRUCTURES

A Structure Plan of the NHS landscape had been circulated. A joint presentation on this and the CCG structure at the next meeting was requested. A Member also suggested that leaflets on the work and remit of CCG's could be usefully displayed in GP surgeries.

RESOLVED that:-

- (1) Dr Virginia Pearson and Gill Champion explain the respective NHS and CCG structures at the next meeting on 28 January 2014; and
- (2) Gill Champion arrange for the circulation to GP surgeries of information on the operation of CCG's.

18 **DATES OF FUTURE MEETINGS 2014**

The following were agreed as dates for future meetings, all commencing at 2.00pm.

Wednesday 29 January 2014 Tuesday 18 March 2014 Tuesday 8 July 2014 Wednesday 3 September 2014 Tuesday 11 November 2014

(The meeting commenced at 2.00 pm and closed at 4.00 pm)

Chair

EXETER CITY COUNCIL

EXETER HEALTH & WELLBEING BOARD 29TH JANUARY 2014

GETTING EXETER ACTIVE - FORMATION OF WORKING GROUP

1 PURPOSE OF REPORT

1.1 The purpose of this report is to advise the Board of proposed arrangements for a working group to realise the ambitions of the Board in respect of Exeter being the most physically active city in the South West by 2018.

2 BACKGROUND

- 2.1 At the last Board meeting on 12th November 2013, the Board agreed the recommendation to form a multi-agency working group to develop and realise the principal priority set by the Board in relation to physical activity.
- 2.2 Officers have engaged with existing bodies and propose to join and expand with one (Exeter Sports Development Group – led by Active Devon) whilst strengthening links with another (Exeter Prevention and Self Care Group – led by NEW Devon CCG) where there is great potential for synergistic work.

3. RELEVANCE OF EXISTING GROUPS

- 3.1 Following the aforementioned report to the Board in November 2013, officers identified that there was a relatively new group that had formed to further sports and physical activity in Exeter and link with legacy work associated with the Rugby World Cup 2015; this was the Exeter Sports Development Group. The membership of the group already included many of those proposed by the Board, together with other key partners and therefore officers assessed that it was more beneficial to build upon this existing group than to form a separate group with the risk of duplication.
- 3.2 Following a meeting with representatives of Active Devon, Exeter earlier this month, work has progressed with officers meeting again to develop the social marketing approach (contained in a separate report to this Board). The expanded group is due to meet on 5 February 2014, when jointly agreed terms of reference and objectives will be developed that support the Board's ambition on physical activity. It is proposed to call this expanded group the Exeter Physical Activity Development Group (ExPADG).
- 3.3 Officers have also met with the Exeter Prevention and Self Care Group which consists of a steering group made up of Public Health, CCG and the City Council, with a wider membership of agencies across the city from the statutory and the voluntary sector who provide services and activities that support peoples' health and wellbeing. The relevance of this group is to enable the Exeter Health and Well Being Board to have a good understanding of the range of services and activities that are available in the city

that help to promote health by encouraging involvement and inclusion in local community based initiatives. It is important to help build these initiatives where possible and avoid duplication with any new provision. .

4 PROPOSAL

- 4.1 It is proposed to build upon existing structures to form the Exeter Physical Activity Development Group (ExPADG). Membership of ExPADG includes the following:
 - Active Devon
 - Exeter City Council
 - St Lukes School Sport Partnership
 - Exeter City FC Football in the Community
 - Exeter Chiefs RFC
 - Exeter College
 - University of Exeter
 - Parkwood Leisure
 - Public Health Devon County Council
 - Members (Cllrs. Owen and Westlake)
- 4.2 The key role of the group will be to identify, develop and promote physical activity initiatives that will include different segments of Exeter's citizens, in order to raise the general physical activity level.
- 4.2 Representatives from this group (Public Health Specialist and ECC Community Involvement Officer) will form the link with the Prevention and Self Care Group in order to share understanding and optimise opportunities for collaboration and the realisation of physical activity and other health and wellbeing benefits for residents in the city.

5. RESOURCE IMPLICATIONS

5.1 The work of the ExPADG and linking work with the Exeter Prevention and Self Care Group will be carried out within existing resources, together with development work that it is proposed to fund from the £20,000 Public Health Fund (subject to another report to this Board, and its approval).

6 RECOMMENDED

That the Board:

- (1) notes the progress made; and
- (2) endorses the proposal contained in the report.

ASSISTANT DIRECTOR ENVIRONMENT Originator: R. Norley, Assistant Director Environment

<u>Local Government (Access to Information) Act 1972 (as amended)</u>
Background papers used in compiling this report:Titles of supporting documents

Date





Getting Exeter Active increasing physical activity levels in Exeter Outline of the Behaviour Change Scoping Review

1. Background

- 1.1 Low levels of physical activity and increasing levels of obesity in adults and children are associated with increased risk of ill health and developing long term conditions with increasing health and social care costs
- 1.2 Population estimates for adult obesity show that over 21.7% of the adult population in Exeter are obese. Whilst this is the lowest level in Devon it will still have an impact on long term health outcomes
- 1.3 Exeter is higher than the England average for participation in physical activity. 2009-2011 data indicates physical activity levels in the city were at 13%. However this means that 87% of the adult population are not being active enough to receive physical or mental health benefits.
- 1.4 In order to increase the number of adults in Exeter being physically active enough to receive physical or mental health benefits we need to understand why individual do not participate in physical activity. What the barriers are to their participation and what would make them take more physical activity.
- 1.5 Exeter Health and Wellbeing Board has chosen Increasing physical activity levels in the city as 'Priority One' in its Joint Health and Wellbeing Strategy Making Exeter the most active city in the south west by 2018
- 1.6 Interim data for 2013/14 from the active people survey places Exeter second to Plymouth in terms of the number of adults who regularly participate in 3 lots of 30 minutes of moderate to intense physical activity a week. The Chief Medical Officers recommendation for receiving physical or mental health benefits is at least 150 minutes each week of moderate intensity physical activity in bouts of 10 minutes or more.
- 1.7 A Social Marketing approach will provide a framework for taking this work forward that will ensure a behavioural focus is retained throughout the process. It will also ensure the voice of the residents is central to future decision making. It offers opportunity to segment the population to ensure that all future messages and activities are tailored to reach specific segments of the population and it has a strong focus on outcomes and evaluation.



Figure 1: The National Social Marketing Centre Social Marketing customer triangle will put the Exeter residents at the center of the process

2. Behaviour Change Objective

- 2.1 This Scoping Review seeks to evaluate how to change behaviour with regards to increasing physical activity levels in the city, particularly in the areas of highest deprivation. The focus is on understanding the public behaviour and attitude towards being physically active.
- 2.2 The specific behaviour which will leverage change will be identified in the scoping phase and in tandem with the design of the evaluation to ensure any change is measurable.
- 2.3 The scoping review document will be used to inform the design of interventions within the city to address the barriers identified to being physically active.

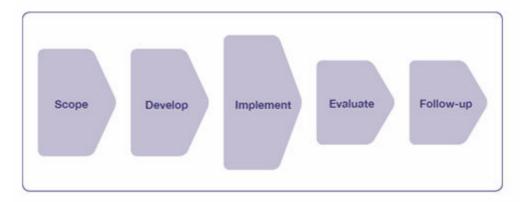
3. Scoping Objectives

- 3.1 This review seeks to understand:
 - What do we mean by physical activity? What is the desired behaviour?
 - What is known about the general public's knowledge and attitude towards physical activity?

- What is known about what motivates people to be physically active who live in disadvantaged areas? What are the benefits for them to changing behaviour?
- How insightful is local and published intelligence on the barriers to change and motivations for participation in physical activity with regards to this segmented group?
- Are there any existing interventions that have successfully increased levels of physical activity in these segments?
- How can the public be further segmented to focus on those most at risk of being physically inactive?
- What is the current exercise and leisure provision provided by Exeter City Council, voluntary groups and partners within the city? Who are they used by and who are they targeted at with particular reference to our target audience?

4. Methodology

4.1 A 'Behaviour Change Scoping Review' is the first stage in the social marketing 'Total Planning Process.' This process, developed by the National Social Marketing Centre consists of five stages:



4.2 This approach has been adopted to ensure the review retains the focus on measurable behaviour change that evaluates both process and outcomes.

Scoping Steps

- **1.3. Step One:** The scoping review will use local intelligence and desk (secondary) research to:
 - a. understand known about the general public attitude and knowledge towards physical activity and being physically active
 - b. what motivates people to participation in physical activity?
 - c. to segment the general public and enable targeting of resources, for example, to the group of people most vulnerable to physical inactivity

- 4.4 **Step Two:** Primary research i.e. quantitative or qualitative such as community engagement or focus groups will be undertaken to further understand, for example why those with physical activity opportunities on their doorstop or those in the most deprived areas do not participate in physical activity and what would motivate them to participate.
- 4.5 **Step Three:** Through stakeholder interviews expert opinion will be collated and a virtual 'expert opinion' group formed to support the Total Planning Process. It is proposed that this 'expert opinion group' be the newly established Exeter physical activity development group.
- 4.6 **Step Four:** Behavioural theory will be researched and applied to the behaviour change we are looking at increasing physical activity levels in the city.
- 4.7 **Step Five:** The evaluation will be designed in the scoping phase and will be based on available data sets. No change initiative will be proposed that cannot be evaluated.

5. Timeline

- 5.1 The initial literature review, stakeholder mapping and desk research will be undertaken by public health staff and a core 'physical activity' working group in January and early February 2014.
- 5.2 The findings of the desk research will be presented and the decision to invest in primary research will be undertaken by the Exeter Health and Wellbeing Board and the Exeter Physical Activity Development Group in late January/ early February. Primary research could include focus groups with Exeter residents to identify the barriers and motivators and also to test out the solutions identified with individuals.
- 5.3 Stakeholder interviews and commissioning of primary research would take place in February. Primary research would be carried out in early March.
- 5.4 Full scoping report would be completed by end March 2014 early April 2014.

6. Finance

- 6.1 Exeter City Council was given a grant of £20,000 from Public Health, Devon County Council for the period April 1st 2013 31st March 2014. This is intended to enable the council to undertake some specific public health focused work locally.
- 6.2 It is proposed that this grant is used to address this priority of 'Getting Exeter Active'.
- Primary research is proposed to take place with members of the segment population to ensure that Exeter resident voices are captured and central to this process. These can be commissioned in good time through the Devon County Council preferred supplier list at a cost of approximately £5,000 (excluding VAT).

- 6.4 It is proposed that the remainder of the grant be carried forward to 2014-15 to be spent against the Getting Exeter Active priority.
- In order to be able to demonstrate progress against our objective of making Exeter the most active city in the South West we need to establish a baseline of Exeter residents' levels of physical activity. This can be done through establishing an evaluation mechanism at the primary research stage. It is proposed that a proportion of the public health grant be earmarked for this and the future evaluation of the project (this proportion is yet to be defined).
- Any remaining grant is recommended to be channelled through the recently established Exeter Physical Activity Development Group, to support activities that will help get Exeter residents physically active to levels that will provide them with physical and mental health benefits. The use of the remaining grant will be subject to this Board's agreement in respect of each activity supported.

7. Recommendations

- 7.1 It is recommended that the Board:
 - i) Approves the social marketing scoping review project work as proposed in this paper; and
 - ii) Approves the Exeter public health grand spend proposed in this paper.

Patsy Temple
PUBLIC HEALTH SPECIALIST (EXETER)
PUBLIC HEATLH DEVON

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