





Promoting healthy weight in children, young people and families: A resource to support local authorities

Practice examples

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Contents

Introduction	4
Table of practice examples and associated briefings	5
Public Health and Audit: A Cross-Council Approach to Childhood Obesity in Hul	II7
Local Authority Declaration on Health Weight in Blackpool	10
Improving the hospital food environment: Helping NHS staff and visitors make healthier purchases – Chase Farm Hospital	13
Creating a Healthier Food Environment in Gloucestershire	16
Flying Start Strategy - Life-course approach to a healthy weight in Luton	21
Every day support for children with learning disabilities in West Suffolk	24
Give Up Loving Pop (GULP) in Sefton	26
Improving School Food in Manchester	30
Improving Body Image in Manchester	32
Bicester Healthy New Town Programme	34
Bath Sports and Leisure Centre Junior Gym Sessions	38
Health by Stealth Story Walks in Wakefield	40
Spatial Planning for the Health and Wellbeing of Nottinghamshire	44
Eat Out Eat Well in Buckinghamshire and Surrey	48
Parks for People Programme in South Gloucestershire	51

Introduction

This document showcases a wide variety of actions which can be taken by local authorities to tackle childhood obesity and has been designed to support the resource *Promoting weight in children, young people and families: a resource to support local authorities.* The practice examples provide local authorities with advice and information about the different ways local authority leaders, departments and partners such as the NHS and voluntary sector can work together to take positive action.

The practice examples have been selected because they demonstrate early signs of progress and could be comprehensively adopted across the country without requiring high levels of investment to replicate. The template used for each of the practice examples summarises the benefits, challenges and outcomes providing officers with a real understanding of the work that would be required to deliver them. Each practice example has been linked to the relevant briefings from the resource to support local authorities. In some cases the examples can be used for more than one briefing.

The contact details provided in each example were correct at time of publication but may have changes subsequently.

Table of practice examples and associated briefings

	Practice example	Briefing associated to the practice example
1.	Public Health and Audit: A cross-council approach to childhood obesity in Hull	Links to all briefings
2.	Local authority declaration on healthy weight in Blackpool	Links to all briefings
3.	Improving the hospital food environment: Helping NHS staff and visitors make healthier purchases – Chase Farm Hospital	Elected members; Health and Social Care; Public Health teams; Education, schools, and Post 16 education; Leisure, sport and culture; Park and Green Space; Regulatory services, environmental health and licensing
4.	Creating a healthier food environment in Gloucestershire	Links to all briefings
5.	Flying start strategy – Life course approach to a healthy weight in Luton	Elected members; Health and Social Care; Public Health teams; Children's services – early years, looked after children and children with disabilities
6.	Every day support for children with learning disabilities in West Suffolk	Elected members; Health and Social Care; Public Health teams; Children's services – early years, looked after children and children with disabilities
7.	Give up loving pop (GULP) Sefton	Elected members; Public Health teams; Education, schools and post 16 education; Leisure, sport and culture; Communication and marketing
8.	Improving school food in Manchester	Elected members; Public health teams; Education, schools and post 16 education; Procurement; Communications and marketing
9.	Improving body image in Manchester	Elected members; Public Health teams; Education, schools, and post 16 education; Communications and marketing

10.	Bicester Healthy New Town Programme	Elected members; Public Health teams; Economic development, regeneration and employment, Planning
11.	Bath sports and leisure centre Junior gym sessions	Elected members; Public Health teams; Leisure, Sport and Culture; Marketing and Communications
12.	Health by stealth story walks in Wakefield	Elected members; Leisure, sport and culture; Planning; Marketing and communication
13.	Spatial Planning for the health and wellbeing of Nottinghamshire	Elected members; Public Health teams; Leisure, sport and culture; Planning; Marketing and Communications
14.	Eat out eat well in Buckinghamshire and Surrey	Elected members; Public Health; Regulatory Services, environmental health and licensing
15.	Parks for people programme in South Gloucestershire	Elected members; Public Health teams; Leisure, sport and culture

Public Health and Audit: A Cross-Council Approach to Childhood Obesity in Hull

Brief Summary

Childhood obesity continues to be a priority Public Health action area in Hull with rates of excess weight at 27.9 % in 4-5 year olds and 36.1% in 10-11 year olds (2016-17); significantly higher than the England average. To address this issue across the council Public Health in Hull are trialling a new 'programme audit' approach with Corporate Audit colleagues.

The Assistant Director of Public Health brought the concept of the childhood obesity audit to other senior council leaders for discussion, where it was welcomed and a pilot encouraged. Public Health and Corporate Audit colleagues identified all of the NICE guidance related to childhood obesity that fell within the scope of the Council's influence. The identified guidance was then further prioritised to produce a set of evidence-based audit questions that related to the full range of the local authorities function and responsibilities. The criteria used to select the specific recommendations/questions to include in the audit tool from the vast amount of related NICE guidance were:

- is the issue within the 'gift' and control of the council?
- is it a Quality Standard? (Quality Standards comprise the key NICE recommendations, developed in collaboration with health and social care professionals, practitioners and services users)
- is it overarching and strategic?
- is it judged to be of high importance?
- does it have sound basis in evaluated evidence?
- is it judged to reduce pressure on services?

Key stakeholders

The following departments were involved across Hull City Council:

Project Design

- Public Health
- Corporate (Audit)

Audited

Public Health

	T
	Early Years and Looked After ChildrenPlanning
	Communications
	Hull Culture and Leisure (Leisure Provider)
Time scales	The audit is in progress and is due to be completed by the end of July 2018.
What did you asking	
What did you achieve and what was the key	The primary goals of the initiative were to:
to success	 improve the council-wide approach to addressing childhood obesity determine whether the wider services across Hull City
	Council have considered/applied NICE guidelines in relation to childhood obesity to their policies and delivery
	 identify how Council services incorporate NICE guidelines into their working practices
	 determine the use of a cross-council approach to audit for non-traditional subject matters such as public health
	develop an action plan, on completion of the audit, to address any areas for development
	 evaluate the process and understand if this methodology is viable and can be adapted for use in other public health areas or by different council directorates
	introduce NICE guidance into a new Local Authority setting where it may not be used at present
	What worked well:
	 being clear that this is a benchmarking exercise trying to use language recognisable to that area, not always 'health' language approach in a non-threatening way
	approach in a non-timeatening way
	The audit is in progress and is due to be completed by the end of July 2018. The results will help to form future activity on childhood obesity across the council with an aim for each area to have some ownership of those actions and outcomes.
What were the key	Some of the key challenges were:
challenges	Como or the Roy originarigos word.
onanongeo	using the method of audit in a different format as it is mostly used in a quantitative way rather than qualitative one
	 framing the questions to be meaningful and positive determining which NICE guidelines were applicable to each area and the service also agreeing that it was applicable

	 changing the language of the NICE guidance to make it understandable and relevant interpersonal skills needed to change the perception of audit being threatening
Advice to others	 build in planning time to develop the questions build in a good few months for the audit to take place frame the questions in a positive way as audit can be seen as something done to people rather than a process leading to positive changes
Next steps	 develop an action plan, on completion of the audit, to address any areas for development evaluate the process and understand if this methodology is viable and can be adapted for use in other public health areas or by different council directorates
Rationale for selecting practice example	 childhood obesity briefing the cost for this initiative has been officer time for Public Health Practitioners and Corporate Audit it could be used across other LAs depending on the outcome
Useful links and contacts	Claire Farrow, Behaviour Change Lead, Public Health, Hull County Council: Claire.farrow@hullcc.gov.uk

Local Authority Declaration on Health Weight in Blackpool

Brief summary	The Local Authority Declaration on Healthy Weight provides local authorities with the opportunity to lead on local action in tackling obesity and promoting the health and well-being of local communities. The declaration is a strategic commitment made across all council departments to reduce unhealthy weight in local communities, protect the health and wellbeing of staff and the population and to make an economic impact on health and social care and the local economy. The healthy weight declaration is based on a similar model previously developed in tobacco control by Action on Smoking and Health (ASH). The declaration on healthy weight was developed by Food Active in
	partnership with the North West Directors of Public Health, Public Health leads; epidemiologists and Public Health academics from North West Universities.
Key stakeholders	 Blackpool Council Public Health Team elected members Health and Wellbeing board Council Departments eg planning, leisure services, procurement, commissioning council arm lengths bodies eg Blackpool Transport schools Public Sector Partners
Time scales	The project was launched on 15 August 2015 with the signing of the declaration taking place on the 16 January 2016. The work of the declaration continues to be implemented across the Council and wider stakeholders.
What was the key to success	 to take action on obesity within Blackpool due to the levels of obesity in both adults and children the process for signing off the declaration was straight forward dedicated officer working on the agenda within the Public Health Team framing conversations appropriately to shape and influence decision making an elected member to champion the declaration ownership of the declaration by the Health and Wellbeing Board engagement of local businesses and larger private sector organisations improved working relationships with the public health team and other council departments the commitments of the declaration also link to the

Whot were the key	 healthy weight strategy action plan and actions are reported to the Health and Wellbeing board to measure the progress the work of the healthy weight strategy and healthy weight declaration are reported to the health overview and scrutiny committee Food Active have undertaken a qualitative piece of research on the Blackpool Local Authority Declaration on Healthy Weight
What were the key challenges	 the easier commitments have been achieved, the challenge is now to deliver on some of the more complex
Chancinges	commitments
	working with the commercial aspects of the council is
	challenging due to income generation demands
	 convincing all departments within the council that they have a role to play in supporting the healthy weight agenda
	 it is 2 years since signing the declaration and the
	challenge is keeping the momentum for work to progress
Testimonials/	"There is a clear recognition that we can't do it by ourselves. It
quotes	needs a concerted effort across the sector. What I don't want is for people to sign the Declaration and not do anything. I want to
	be able to say, we want to hold you to account and question
	people and say, you have signed the Declaration, what have
	you actually done to make a difference" - Cllr Graham Cain,
	Cabinet Secretary – Resilient Communities, Blackpool Council.
	"It was important that the momentum from signing the Local
	Authority Declaration on Healthy Weight was kept going. If that
	hadn't happened, that would have been a negative, but it has
	been effectively addressed" - Dr Arif Rajpura, Director of Public
Advice to others	 Health. the signing of the declaration is probably the easy step in
	the process
	 the hard work is keeping the momentum and ensuring
	that actions are implemented
	 it is important to have a Councillor as a Champion for shaping and influencing others in the Council
	 an evaluation tool is currently being developed by Food
	Active to support the work by local authorities
Next steps	short-term: to review what has been achieved and what
	still needs to be achieved. Working with Food Active to
	develop the evaluation tool kit for the declaration
	 medium-term: to map the work of the LA declaration with the work of Leeds Beckett University and the whole
	systems approach
	creation of Blackpool's own system map to review the
	causal factors of obesity for the town to identify further
	local commitments that need to be tackled

•	long-term: to continue the work towards achieving all the
	commitments of the declaration

Rationale for selecting practice example

- elected Members briefing
- the cost for this initiative has been the work of the Senior Public Health Practitioner and relative low cost to implement
- the work of the Declaration can be implemented by other local authorities and public sector organisations
- at the present time 10 Local Authorities in the North West have adopted this approach; Yorkshire and Humber are implementing the declaration with the first wave involving 6 local authorities and the South West PHE area is currently exploring this approach

Useful links and contacts

Nicky Dennison, Senior Public Health Practitioner, Public Health, Blackpool Council: nicky.dennison@blackpool.gov.uk

Local Authority Declaration on Healthy Weight: www.foodactive.org.uk/projects/local-authority-declaration

Blackpool Local Authority Declaration on Healthy Weight – Evaluation Report:

www.foodactive.org.uk/wp-content/uploads/2017/06/Food-Active-Blackpool-Report.pdf

Healthy Weight, healthy futures; Local government action to tackle childhood obesity:

www.local.gov.uk/sites/default/files/documents/childhoodobesity-has-bee-c95.pdf

Improving the hospital food environment: Helping NHS staff and visitors make healthier purchases – Chase Farm Hospital

Brief summary	Healthy work environments benefit both employers and employees as they foster productivity while reducing absenteeism and its related costs. NHS food environments can be structured in a way that supports and promotes healthier choices and this can be done with the application of behavioural insights and choice architecture principles. Simple rearrangements such as making healthier foods more salient and convenient whilst reducing the visibility of less healthy options can help people make better food choices. The Royal Free NHS Foundation Trust made the decision to implement some of these principles to the Chase Farm hospital restaurant, providing an opportunity to evaluate their impact on overall restaurant sales, as well as customers' food purchasing behaviour. 1) Bottled water and fruit were made more visible by moving them to a salient location near the restaurant entrance and 2) crisps and confectionery were made less visible by moving them to a location behind a pillar.
Key stakeholders	 Public Health England's Behavioural Insights Team Hospital restaurant catering managers Director of Public Health at the Royal Free Trust Department of Health & Social Care NHS England
Time scales	The ad-hoc analyses of restaurant sales data was
	performed using data over a 6 week period (31 December 2014 to 30 June 2015) to examine whether altering product location (after 13 weeks) impacted purchasing behaviour.
What did you achieve and what was the key to success	 the aims of the study were: first, to determine if changing the layout of some food products at the hospital restaurant would affect the restaurant's overall sales; second, to assess if these changes increase the purchases of healthier products, while decreasing the sales of less healthy ones we used weekly restaurant sales data comparing averages before and after implementation and conducted interrupted time series analyses to

	evaluate changes in sales trends
	 repositioning the products appeared to positively impact healthier purchasing behaviour to some extent: average weekly sales of fruit increased by 67% (p=0.003) but sales trends did not change significantly pre versus post-intervention. average weekly sales of water increased by 63% (p<0.001) and sales trends increased significantly at a rate of 5 units per week (p<0.05) post-intervention (although not supported by sensitivity analyses). no effect on crisps sales or sales trends average weekly sales of confectionery decreased by 23% (p=0.017) with a significant drop in sales of 107 units (p=0.003) immediately post-intervention (although this drop did not remain in sensitivity analyses) average weekly revenue did not differ significantly before and after the intervention
What were the key	There were particularly low sales volumes in Week 14,
challenges	likely as a result of onsite construction and the Easter holidays affecting footfall. This impacted our analyses of sales trends before and after the intervention. Sensitivity analyses excluding Week 14 suggested different trend directions, with confectionery, crisps and fruit showing a decreasing trend post-implementation. Initial plans were to compare sales of products targeted in the intervention to sales of 'pseudo-control' products: sandwiches, salad, hot drinks, smoothies and soft drinks. These were later considered to be too different from the intervention products to justify valid comparisons.
Advice to others	 stakeholder engagement and involvement is key to designing a locally feasible intervention it is important to be aware of contextual factors which may impact data quality and the interpretation of results a before and after analysis is a simple way to evaluate the effect of changes made but a trial would provide a better standard of evidence
Next steps	 short-term: the intervention will be incorporated into a PHE report for NHS Trusts on the hospital food environment medium-term: other trusts will hopefully be inspired
	to adopt similar low-cost interventions and to collect

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Rationale for selecting practice example	 data to allow efficacy to be evaluated long-term: hospital food environments will be more healthily arranged as the default, helping to improve the health and wellbeing of NHS staff and visitors the NHS is the largest employer in the UK, with over 1.4 million staff
	 preventing obesity and promoting a healthy NHS workforce is a priority for Public Health England (PHE), NHS England (NHSE) and the Department of Health and Social Care (DHSC) PHE were requested by NHSE and DHSC to work with NHS hospitals in 2015/16 and 2016/17 to implement interventions to increase healthier purchasing amongst staff and visitors this was a low-cost initiative simply involving product rearrangement easily implemented changes that can be adopted in other locations
Useful links and contacts	Tim Chadborn, Behavioural Insight, Public Health England: Tim.Chadborn@phe.gov.uk "Improving the hospital food environment guidance" is due to be published. "Getting the balance right - tackling the obesogenic environment by reducing unhealthy options in a hospital shop without affecting profit": academic.oup.com/jpubhealth/advance-article/doi/10.1093/pubmed/fdy053/4964040

Creating a Healthier Food Environment in Gloucestershire

Brief	summary

Gloucestershire County Council is working with Leeds Beckett University and other local authorities as a pilot site for PHE's national whole systems obesity programme. As part of this programme local healthy weight leads in Gloucestershire are applying whole systems methodology, using the developing process and tools to adopt a system wide approach to improving the local food environment. This provides a framework for stakeholders to come together to develop a collective understanding of the local system - including key determinants and local assets and activities. It encourages partners to look at the 'bigger picture' ie how the system is working as a whole, rather than focusing on individual services and interventions. A 'causal map' is produced, based on a similar model to the 'Foresight Map' but applied to the local area. This enables partners to consider where in the system it might be feasible to intervene, and to collectively agree what action will be taken to bring about change. It also enables stakeholders to see their role in the system and to own the actions that are relevant to their role and ambitions. The approach will initially be piloted within one local neighbourhood and insight research is underway to understand the local system from the perspectives of residents. Stakeholders, including local residents and community groups, will remain involved as the work progresses. They will be consulted regularly to share intelligence on how the system is responding including any 'unintended consequences', and to agree how the local response should adapt.

Key stakeholders

- Gloucestershire County Council including Public Heath, Communities and Infrastructure and Education Leads
- elected members
- community and voluntary sector organisations
- District Council Departments eg health and wellbeing, community development
- Gloucestershire Clinical Commissioning Group
- Gloucester City Homes
- G-First, Gloucestershire's Local Enterprise Partnership
- HealthWatch Gloucestershire (provided by Evolving Communities)
- local residents and community groups
- schools

This list is not exhaustive. Additional stakeholders will be	
identified as the work evolves.	

Time scales

This work started in October 2017 with a stakeholder 'system mapping' workshop

community insight research is underway to strengthen the systems map by including residents' perspectives. Research findings due to be reported in late September 2018.

A follow up stakeholder workshop will take place in October 2018. This will bring residents and other stakeholders back together to co-develop an action plan and secure commitment for its delivery. A 'systems network' will be convened with mechanisms for regular engagement to share intelligence and monitor progress. The ultimate aim is to create a long-term programme of activity to improve and mitigate the local food environment. The programme will evolve over time as the system adapts and changes.

What did you achieve and what was the key to success

Primary goal:

to take a whole systems approach to creating a healthier food environment.

What worked well:

- it's invaluable to have a structured, systematic process to follow. With good forward planning to maintain momentum, a whole systems action plan can be developed and a systems network set up and run for ongoing development and review, in around 3-6 months
- stakeholder engagement in the process has been positive; a wider group of stakeholders is engaged including the local enterprise partnership, housing associations and leaders of place
- appreciative inquiry is used to understand stakeholders' motivations and explore local assets. This enables conversations to be framed appropriately and develop a collective understanding of key drivers and opportunities
- elected member involvement, particularly at neighbourhood level
- governance arrangements reviewed to create a more agile healthy weight working group linked to an engaged network of stakeholders
- HealthWatch Gloucestershire (Evolving Communities) is undertaking community based insight research to explore the aspirations of the community and local assets and challenges from the community's perspective

Benefits:
 greater strategic fit – enables the issue to be defined collectively within the mix of priorities and actions of stakeholders better use of resources – identifies all the assets in the system – not just those owned or known to 'usual' stakeholders; mobilises and aligns resources more effectively
 strengthens working relationships between statutory healthy weight leads and stakeholders across the wider system
 promotes ownership of the issue, and local action by the whole system; potential to deliver a more resilient response – less reliant on a few key players
 enables everyone to see their role in the system builds in mechanisms for capturing strategic learning, identifying unintended consequences and adapting local action accordingly
 moves from individual isolated actions to a mix of actions designed to impact on the system as a whole process, tools and learning are transferrable to other complex issues
Key challenges to date
 dedicated project officer and administrative time needed to manage process and outputs maintaining momentum and stakeholder engagement changing mind-set (for Public Health leads) - from a top-down approach to a more facilitative role; learning to 'let go' moving from stakeholder engagement in the process to ownership and commitment to action developing indictors and mechanisms to meaningfully appraise the effectiveness of the local programme. Traditional performance indicators that assess the impact of an isolated intervention on a single outcome (eg weight status, physical activity level of a 'captive' group) are not sufficient on their own – areas need to develop mechanisms to assess the effectiveness of collective efforts in changing the causal system ie indicators of systems change rather than changes in outcomes
"Previous efforts to address obesity levels at a local level
have been ineffective – a different approach is needed. We are all aware of the need to take a 'whole systems approach' to tackling complex issues like obesity, but didn't know how to do this in practice. Having a structured

	process to follow has been invaluable" – Sarah Scott, Director of Public Health, Gloucestershire County Council.
	"We need to work together to make it easier for individuals and families to be a healthy weight. Getting together with stakeholders, including local residents, to better understand this issue from their perspective is the first step towards working out what we need to do. The next challenge will be to secure everyone's commitment to
	doing what they can to make a difference"
	 Cllr Tim Harman, Cabinet Lead for Public Health and Communities, Gloucestershire County Council.
Advice to others	a whole systems approach is not about throwing multiple interventions at a problem – it is about looking at the bigger picture, considering how the whole system is working, and aligning collective efforts to bring about change
	make sure you identify dedicated officer and administrator time to manage the process and outputs – and to maintain the momentum
	 plan how you are going to ensure communities are meaningfully engaged throughout the process, including sharing intelligence about local assets, and how the system is working
	be realistic - you might want to test a whole systems approach in one district or neighbourhood before trying to implement more widely
	 focus efforts on building strong relationships across the system – and maintaining effective communication
	 be open to a long-term iterative, action learning approach
Next steps	short-term: to develop and test this approach in one local neighbourhood. Work with local systems network to develop an approach to monitoring progress and changes
	medium-term: to maintain momentum in working towards the action plan, sharing learning, identifying any unintended consequences and adapting local response
	long-term: scale up - replicate process in other neighbourhoods
Rationale for selecting practice example	whole systems route map and tools to be published in 2019
	process and tools have been tried and tested by Local Authorities working on healthy weight – but are equally transferrable to other complex issues eg mental health
	applying a whole systems approach to the healthy weight agenda requires dedicated practitioner, project management and administrative time but does not necessarily require additional commissioning budget to

implement – it is more about aligning actions and making best use of existing resources than
commissioning more interventions

Sue Weaver, Lead Commissioner (Health Improvement); Prevention, Wellbeing and Communities Commissioning Hub, Gloucestershire County Council: sue.weaver@gloucestershire.gov.uk Margie Van.Djik, Scientific Officer (Nutrition Science), Public Health England: Margie.van.djik@phe.gov.uk Making obesity everybody's business: A whole systems approach to obesity: www.local.gov.uk/making-obesity-everybodys-businesswhole-systems-approach-obesity Links to WSO website and to sign up to the Community of

Learning to receive updates by email:

www.leedsbeckett.ac.uk/wholesystemsobesity

Flying Start Strategy- Life-course approach to a healthy weight in Luton

Rey stakeholders	Flying Start is Luton's 10 year Early Years strategy that aims to make positive and systematic changes to the lives and life chances of babies and young children from pregnancy to 5 years. One of the 3 key outcomes areas of the strategy is nutrition and diet with the long term aim that 'babies will have improved birth outcomes; with fewer women obese in pregnancy, improved understanding of nutrition and healthy behaviours, breastfeeding will be increased and fewer children are obese or have dental decay, with improved health and wellbeing into adulthood.' The strategy aims to develop collaborative partnerships between all services delivering outcomes for children to create systems change. A life-course approach to a healthy weight is a key element to achieving this outcome and as part of this a core offer of evidence based interventions focused on obesity prevention have been developed and delivered by key partners and children's centres across Luton. • Luton Borough Council • Pre-school Learning Alliance
	 Luton Clinical Commissioning Group Luton and Dunstable University Hospital University of Bedfordshire (UOB)
	Public Sector Partnerscommunity organisations
Time scales	The project was launched in 2014 and is a 10 year strategy. The strategy continues to be implemented across Luton largely delivered through Flying Start Children Centres.
What did you achieve and what was the key to success	 collaborative partnerships and systems change to tackle obesity a core offer of interventions to support a healthy weight across the life-course focusing on key touch points from pregnancy to 5 years a whole systems approach to obesity, working with early years settings to create healthy environments that promote a healthy weight training and education across early years services to ensure consistent messages and confident practitioners in tackling weight related issues robust evaluation of all programmes to ensure making a difference

	 embedding UNICEF Baby Friendly across organisations
What were the key challenges	 delivering the strategy with limited resources has meant we have had to be creative, reviewing how services are delivered, using current investment and aligning services and budgets to deliver positive outcomes engaging partners and developing relationships to influence systems change takes time and demonstrating short term impact on obesity is a challenge
Testimonials/quotes	'During 2015 we saw some good progress particularly working with midwifery, developing the schools programme and taking forward our priority on nutrition. We continued to show some improving public health outcomes, such as reduced rates of infant mortality, teenage conceptions and obesity in reception class.' Gerry Taylor, Director of Public Health, Luton Borough Council.
	'It is so easy to get bogged down with dealing with day to day issues; one of the strengths of being part of the Flying Start Partnership is that we are able to look at the bigger picture, the trends, examples of evidence based work and different ways of doing things and knowing that the Flying Start team are here to help when we need it'. Rob Burton, Director, Centre for Youth and Community Development, Community Member of the Flying Start Partnership
	Testimonial about our programme:
	'I enjoyed the programme, it taught me to cook healthier for my kids, it's good for learning new things and applying these lessons. I have got plenty of ideas to keep my family healthy. We are eating healthier. I've improved my parenting skills, we're more active. I am more focused on our emotional well-being. The HENRY programme is great for a good start in life'. Parent on the HENRY programme.
Advice to others	 it is key to have senior stakeholder engagement from the start ensure there is an accountability governance structure as this helps to develop the shared vision plan, test, review
Next steps	 short term: continue to monitor and review interventions, develop pathways across services and identify any gaps medium term: embed collaborative partnerships and develop and test interventions long term: to measure impact using national

Promoting healthy weight in children young people and families: A resource to support local authorities – Practice examples October 2018

	indicators and evaluation from the UOB
Rationale for selecting practice example	 childhood obesity the strategy has focused on working in partnership, changing systems and pooling resources to improve outcomes using current investment obesity is complex and requires a partnership approach to make changes across the system. The local authority is best placed to lead this approach but needs to work collaboratively with partners to ensure a shared vision and responsibility
Useful links and	Louise Morrissey Flying Start Diet & Nutrition Lead:
contacts	louise.morrissey@pre-school.org.uk www.flyingstartluton.com

Every day support for children with learning disabilities in West Suffolk

Brief	When a child is referred who is underweight or overweight to the
summary	Specialist Community Nurse team for Children and young people
	with learning disabilities in Suffolk, contact is then made with
	relevant agencies such as school, community dieticians, respite
	facilities along with the family to make a full assessment of needs.
	Once this is complete a plan is formulated and reviewed regularly.
Key	 specialist Community Nurse team for children and young
stakeholders	people with learning disabilities
	dieticians at Great Ormond Street or West Suffolk
	Community (if involved with family)
	Suffolk Special School nursing team
	Suffolk Schools
Time scales	work will continue to be ongoing in relation to this need
What did you	to improve the health of children with learning disabilities
achieve and	regular visits (weekly or fortnightly)
what was the	 comprehensive advice on health eating eg healthy swaps
key to	and portion size
success	 health benefits to the young people including other health
	needs such as improved bowel movements following
	increased fibre/wholemeal products
	working collaboratively with other agencies
	regular weigh-ins every fortnight
	 photographs taken every month of the young person
	weight loss
What were	 sometimes obtaining weight measurements was tricky, if the
the key	young person doesn't want to get on the scales. Also some
challenges	schools no longer have an on-site special school nurse
	which means relying on teachers taking and submitting
	weight measurements or a member of the specialist team
	family and staff being consistent
	 not giving in to challenging behaviour when a food request
	has been denied
Testimonials/	"This child is breathing better at night"
Quotes	"This child is moving around school more easily"
	teaching staff reporting "this child is happier"
Advice to	ensure you regularly visit the young person and family
others	 ensure that you regularly weigh the young person at least
	monthly
	 give positive praise to everyone working towards the same
	goal (Health, Education, Social care and families)
Next steps	the team will continue to work with families who require
140AL SLOPS	specific support
	σρεσιπο συρροπ

Rationale for selecting practice example	 this is a low cost initiative due to it being integrated in to everyday practice it is possible for this to be replicated across other local authorities 	
Useful links	Lisa Smith LD NURSE Child Health Centre, Hospital Rd, Bury ST	
and contacts	Edmunds, IP33 3ND	
	Lisa.Smith@suffolk.gov.uk	
	Telephone: 07904 121 648	
	onelifesuffolk.co.uk	
	infolink.suffolk.gov.uk/kb5/suffolk/infolink/advice.page?id=HZvkphK	
	zrHc	

Give Up Loving Pop (GULP) in Sefton

Brief summary	To raise general awareness of the amount of sugar in sugary drinks and to reduce the number of such drinks consumed by the target group by increasing knowledge and understanding of the associated health harms. The Sefton campaign was school-based with two main areas of focus: 1. Secondary schools and to young people aged 13-14 years (year 9) as they consume the most Sugar-Sweetened Beverages (SSBs) within the target age range. 2. Primary schools and to children aged 8-11 years (years 5 and 6) to embed messages before they reach the age of highest consumption levels.
	A number of resources were commissioned directly for this project, including the Key Stage 2 toolkit and the Sugary Drinks Policy Toolkit. A flexible and varied approach to delivery in schools was taken, given the existing resource within the Active Sefton team and the interest in utilising community coaches from Everton to deliver sessions in a number of schools.
Key stakeholders	 Sefton Council Active Lifestyles Active Sports team Public Health Food Active Everton in the Community Sefton schools
Time scales	The project began in April 2016 and is continuing to be delivered and promoted in schools and learning communities across the borough throughout the 2017/18 academic year.
What did you	Campaign materials and activity
achieve and what was the key to success	 provision of school resources including lesson plans, sugary drinks policy toolkit, an inter-school competition and an awareness raising assembly to every local Primary and Secondary school programme of activities including delivery of lessons by Everton in the Community and Active Sefton provision of GULP PSHE lesson plans and materials. encourage young people to sign up to a 28 day #GULPchallenge
	Campaign Evaluation
	The Sefton campaign is ongoing, with activities continuing through the academic year.

School delivery

Active Sefton

Following a training session by Food Active, GULP was embedded across the Active Sefton pathway via targeted and universal programmes. GULP branding and social media was utilised to help spread messages.

Everton in the Community

Following a training session by Food Active, community coaches from Everton in the Community (EitC) delivered the three Key Stage 2 sessions across Sefton. The sessions comprised of classroom theory-based work and physical activity, using games to reinforce the messages.

Data was collected via a short quiz, both prior to the first GULP session and following the final session. Key findings were:

- 46% of students had reduced their consumption of sugary drinks
- 65% of students had increased knowledge on sugar content of sugary drinks
- 82% of students stated they checked sugar content of drinks

Inter-school competition

Primary school students were invited to design and record a school assembly to fellow students on the benefits of swapping SSBs to water and milk.

There were 4 fantastic entries featuring songs, raps, dances and class-made props and resources. The winning school received £500 to spend on health promotion activities, whilst the remaining three were highly commended, receiving a prize of £250 per school.

Media coverage

The campaign received front page coverage on the Southport Visitor, along with further coverage in a range of other publications both online and in print.

There was a strong focus on social media engagement, with many schools engaging via Twitter.

What were the key challenges

- the term 'pop' is not a widely used term for fizzy/soft drinks in the locality in which the project was delivered
- the alternatives of water and low-fat milk were, for many participants accessing the project, too restrictive. Refocusing attention to making simple swaps and healthier alternatives proved to be more accessible and achievable (eg Cola to diet cola)

Testimonials/ quotes

Teacher feedback

"Delivering sessions on sugary drinks at KS2 is essential before

children become accustomed to the taste of liquid sugar. The GULP sessions were smart, encouraging the children to be inquisitive and question the world around them, but also gave pupils the knowledge and skills to make up their own minds about sugary drinks and what is best for their education and for playing sport". "The use of football coaches to deliver the sessions was very effective. It always helps when sessions are delivered by others, especially when linked to sports - many of the children are big football fans which helped, and the coaches were great at interacting with the children". Coach feedback "All students enjoyed the practical sessions - it was a good split between theory and practical delivery. Power points helped delivery as students seemed to respond to the visual resource". "Giving children the information as to how many sugar cubes was in each drink was a good way of getting the message across and easy for them to understand". "The physical activity sessions worked really well, it was fun using the structured activities and the children also came up with some games themselves which really showed they had taken the messages on board". Advice to adopt key GULP messages into existing healthy lifestyle others programmes amend the resource to make it suit learning objectives or needs of the group. Differentiated activities can support the learning of all children and create an inclusive and positive environment work closely with other partners and teams to maximise the project's outreach. From school nursing teams, children centre staff and parents/guardians of children at the schools; all members of a learning community can positively contribute to the programme with the right support and resources using promotional material in areas and venues that the target audience regularly access helps bring the health messages from the classroom into other areas of life (eg stands and displays set up at leisure centres and other community spaces) **Next steps** ensure key health messages delivered remain integral to future healthy lifestyle programmes and interventions continue to evaluate behaviour change and generate new ways and ideas to help maintain positive choices look to work with different target groups and support schools in sustaining healthier choices for their pupils

Promoting healthy weight in children young people and families: A resource to support local authorities – Practice examples October 2018

Useful links and contacts	Steve Gowland: Public Health Lead (Wellness and Mental Health): steve.gowland@sefton.gov.uk
	Lewis Parry: Development Coordinator (0-19 Children and Young People) lewis.parry@sefton.gov.uk
	www.giveuplovingpop.org.uk
	www.activelifestyles-sefton.co.uk

Improving School Food in Manchester

Drief automora	Due to the Cohool Food Ctanderds and combined to
Brief summary	Due to the School Food Standards not applying to academies founded between 2010-2014, Manchester
	Healthy Schools (the Health Improvement Service for
	Children and Young People) have been working with
	secondary academies to encourage them to meet the
	School Food Standards. Meeting the School Food
	Standards is part of the Manchester Healthy Schools
	Health Check and schools receive support around this.
	Schools are now being encouraged to exceed the School
	Food Standards, such as only selling water throughout the
	school day and removing foods such as pizza from the
	break time offer.
	This is in addition to the work in primary schools eg reducing the number of puddings on the menu and
	encouraging schools to provide water or milk only to drink.
Key stakeholders	Manchester School Health Service
Troy Cramerioraere	Manchester Healthy Schools
	school staff
	school pupils
	• parents
	catering services
Time Scales	The project runs continuously based on which schools
	have prioritised Healthy Lifestyles each academic year as
	part of the Healthy Schools Programme.
What did you achieve	We have different achievements dependent on the school's
and what was the key	needs. This includes:
to success	 removing all drinks apart from water and milk from the school catering
	 improving break time catering offer – increasing the fruit
	and vegetable options whilst reducing the frequency
	items such as paninis and garlic bread appear on the break time offer
	 reducing the number of puddings on the school menu or removing them all together
	 alternatives include cheese and crackers or yogurt and
	fruit
What were the key	catering staff are sometimes opposed to changes to
challenges	improve the nutritional content of school meals.
	Manchester Fayre, the City Council catering provider
	runs an annual training programme where the
	importance of healthier choices is discussed to build
	support for healthier school meal initiatives
	pupils may be resistant to changes and buy unhealthy food outside of school to bring in rather than purchase.
	food outside of school to bring in rather than purchase school meals. To overcome this, Healthy Schools work
	Sonoor meals. To overcome this, Healthy ochools work

	with School Councils to capture pupil voice and involve them in changes to catering. Healthy Schools also ensure schools have a well embedded food and drink policy so pupils do not bring in unhealthy food and drinks • parents may be resistant to changes. Healthy Schools can offer parents sessions around healthy eating and encourage caterers to provide tasters of the school meals for parents to try
Advice to others	work with partner agencies to ensure a combined approach to improving school meal
Novt stone	include pupil, parent and staff voice wherever possible Continue to appearage schools to improve the putritional.
Next steps	Continue to encourage schools to improve the nutritional quality of school food. Share good practice at Healthy
	School events to promote the positive impact of catering
	changes on pupils' health and behaviour.
Rationale for selecting	This is a low cost scheme which could be implemented in
practice example	other local authorities.
Useful links and	Emma Schneider (Health Improvement Specialist):
contacts	emma.schneider@mft.nhs.uk
	www.manchesterhealthyschools.nhs.uk
	www2.myschoollunch.co.uk/manchester/primary-
	schools/about-manchester-fayre

Improving Body Image in Manchester

Brief summary	Local primary schools reported that children were suffering from low body image, as a consequence of the increased use of social media and pressure from the extensive weighing and measuring programme delivered in Manchester. This resulted in children withdrawing from the weighing and measuring due to the low self-esteem. Manchester Healthy Schools decided to tackle this by producing a resource and training aimed at improving body image amongst primary school children. The PSHE Association believes teaching about positive body image helps to tackle obesity, since people who value themselves and their bodies are more likely to achieve and sustain a healthy weight.
Key stakeholders	 Manchester School Health Service Manchester Healthy Schools school staff school pupils parents University of West England
Time scales	The resource consists of three lessons for Year 5 and 6 along with some extension activities. External training runs for school staff once a year and can be delivered in-house as part of a staff INSET.
What did you achieve and what was the key to success	Manchester Healthy Schools adapted and extended an existing evidence based resource for Year 5 and 6 called <i>Happy Being Me</i> , with the permission of the University of West England. Sessions included activities around media literacy, body talk and the comparison trap, identity, challenging stereotypes and food and mood. Staff training was offered before using the resource in October 2017. Feedback from teachers using the resource has been very positive such as 'children were able to relate to all activities and found them interesting', 'children gained a lot from discussing fat talk', 'the children enjoyed watching the video and were very engaged', 'children really enjoyed comparison trap'. The resource is being piloted in Manchester schools over the upcoming academic year and the University of West England are hoping to secure funding to evaluate this pilot study. The original study conducted by the University of West England found for girls, participants in the intervention condition reported significant improvements in

	risk factors for negative body image, eating behaviours and intervention topic knowledge at post-intervention, although changes were not all sustained at three month follow-up. For boys, participants in the intervention condition reported significant improvements in risk factors for negative body image at post-intervention, but were not maintained.
What were the key	finding time in the curriculum to teach about body
challenges	image
	improving teacher confidence in teaching body image
Advice to others	use an evidence based resource
Next steps	 roll out the intervention to more Manchester primary schools
Rationale for selecting	This is a low cost scheme which could be implemented in
practice example	other local authorities.
Useful links and	Emma Schneider (Health Improvement Specialist):
contacts	emma.schneider@mft.nhs.uk
	www.manchesterhealthyschools.nhs.uk eprints.uwe.ac.uk/16499

Bicester Healthy New Town Programme

Brief summary	Bicester Healthy New Town Programme is a place-based prevention programme, using the opportunities presented by population growth to test innovations in the built environment, new models of care, and community activation to improve health and wellbeing. The aim is that Bicester becomes a place where healthy behaviour is easy, fun and affordable - where being active, eating healthy food and being a good neighbour are part of normal daily life. The programme has adopted a systems based approach to delivering change to promote health and wellbeing for the whole population.
Key stakeholders	The programme is a partnership led by Cherwell District Council, Oxfordshire Clinical Commissioning Group, Oxford Academic Health Science Network, and A2 Dominion (local housing provider), supported by a further 25 different community organisations, health and care providers and Bicester schools and businesses.
Time scales	The programme started in May 2016 and is still running.
What did you achieve and what was the key to success	The programme's aim is to radically rethink the approach to health and wellbeing, enabling people who live or work in Bicester to live healthier lives in order to prevent illness in the future. Its 2 key priorities are:
	 to reduce the number of people who are overweight or obese in order to prevent future health problems to reduce the number of people who feel socially isolated or lonely in order to improve mental wellbeing
	The programme aims to improve both the physical and mental health of everyone in Bicester – the existing community as well as those moving to the town – by enabling residents to take more control over their wellbeing. A range of innovations are being delivered within three key work streams:
	 The Built Environment: making best use of Bicester's built environment and green spaces to encourage healthy living Community Activation: helping local people to live healthier lives with the support of community groups, schools, and employers New Models of Care: delivering new approaches to

Promoting healthy weight in children young people and families: A resource to support local authorities – Practice examples October 2018

care closer to home and minimising hospital-based care

A number of initiatives have focused on promoting healthy eating and increasing physical exercise in schools, workplaces and through use of the built environment. In addition, the Healthy Bicester Facebook page has been used to promote uptake of Public Health England apps and to engage residents with national health promotion campaigns.

The following outcomes have been delivered:

Enhanced collaboration between partners

Businesses/schools/public services/voluntary sector/developers/residents to actively promote healthy behaviours, eg Cherwell District Council walk leaders are taking referrals from GP practices for people with long term conditions to do Health Walks along the Health Routes.

Increase in community assets

Linking community groups with local businesses and schools is increasing their capacity, eg 150 sixth form students attended a volunteer's fayre involving 20 local groups to identify volunteering opportunities that will also enhance students' employment prospects.

Increase in social cohesion

Parents and children from 'hard to reach' families have taken part in an active play programme at one primary school, resulting in the formation of new friendships.

Improvement in population health and wellbeing.

Residents are increasing their levels of physical activity eg 469 people regularly do weekly guided walks, and participation in school holiday clubs has increased by 453. There is a 27% increase in pedestrian traffic on three new 5K Health Routes.

The Walk to School Week had the highest participation in Oxfordshire and five primary schools have introduced the Daily Mile resulting in 2,000 children now running a mile every school day.

Increased confidence in people to take responsibility for their own care.

414 new users of Public Health England self-care Apps

What were the key challenges

Challenges

to ensure that people feel that it is 'their programme'

rather than an NHS initiative. Co-production of the programme and ongoing resident engagement has addressed this. The Facebook page "Healthy Bicester" has more than 1,100 active followers. For example calls to make our events car-free in exchange for goodie bags, have always been successfully answered, with dozens of bags given away

- cuts in public services caused residents to question how Bicester can be a 'Healthy Town' if services that address social isolation are being cut. A summit of relevant stakeholders across public services, community groups, and the voluntary sector was held to identify how different sectors can work together to address unmet needs due to changes in provision. In this way, the programme has acted as a catalyst to enable different parts of the community to work together in new ways, especially building the capacity of voluntary groups to increase community resilience
- national funding for such an ambitious programme has been relatively limited but the programme has used its 'demonstrator status' to secure additional investment. The enthusiasm of its partners has enabled the programme to secure additional grant funding and to leverage resources in kind, making sure that public funding represents real value for money
- competing priorities. Schools have many priorities to deliver and as a result promotion of health and wellbeing can be seen as requiring additional work and not central to delivery of core priorities. The benefits of exercise and eating well need to be linked to improved concentration in class and ability to learn
- Parents' confusion about what healthy eating means and a reluctance to offer healthier food as children do not like it and it can be more expensive. We have sought to address this by increasing cooking skills in parents from more disadvantaged communities and promoting family fun time to engage parents and children

Testimonials/quotes

This quote was posted on the Healthy Bicester Facebook Page by a resident:

"Can I just say that I think the current initiatives, with the blue lines and cycling routes and events are wonderful. As an unfit, overweight middle aged woman, even I have been inspired to get my bike out and ride again after a 40 year break, so many thanks for all the hard work that's gone into this".

"Did the 5K round Langford today what a beautiful
route. I've lived in Bicester for 17 years and saw places I'd
never seen before!"

Advice to others	There are some key ingredients which are central to the success of healthy place making, namely being: • place based • asset based – building on existing relationships and community resources • population based • co-production of the programme with local stakeholders and residents • evidence based • effective communication • dedicated project management • political leadership The value of the programme lies in its role as a catalyst - bringing together different partners from different sectors. Change is delivered through the interaction of
	the built environment, community activation, and new
	models of care to achieve system change.
Next steps	The challenge for the third year of the programme is to
	sustain engagement and to ensure that partnership working across sectors becomes 'business as usual'. To achieve long term change in health and wellbeing there is a need to 'mainstream' this activity across the local authority; discussions are underway as to how it can inform the District and County's prevention strategy.
Rationale for selecting	Healthy place making is an issue for most LAs given their
practice example	responsibility for housing growth, planning policy, community development and the health and wellbeing of residents.
Useful links and	Rosie Rowe, Bicester Healthy New Town Programme
contacts	Director: rosie.rowe@cherwell-dc.gov.uk
	Healthy Bicester Facebook Page:
	www.facebook.com/healthybicester
	Eco Bicester website:
	www.cherwell.gov.uk/info/206/bicester-
	developments/429/healthy-new-town

Bath Sports and Leisure Centre Junior Gym Sessions

Brief summary	As a result of Sport England research that suggested that teenagers' motivations for being active were shifting from being sporty to being fit at an earlier age than previously thought, Bath Sports and Leisure Centre launched some supervised junior gym sessions for 11-15 year olds. The staff member would ensure the children were only given appropriate exercises and was on hand to offer advice and goal setting throughout the session. The member of staff was initially funded by Sportivate funding following a successful application to our County Sport Partnership, Wesport.
Key stakeholders	Bath and North East Somerset Council
	Greenwich Leisure Limited (GLL)
	Wesport (SE Funding)
	 Schools via school sport partnership (marketing support)
	Public Health - Health in Schools co-ordinator
Time scales	 as a Sportivate project the sessions ran from April 2016-March 2017
	 the sessions continued without the funding and are still running to date
What did you achieve	The main goal of launching the sessions was to increase
and what was the key to success	our junior usage. One of the benefits of running the session after school meant it utilised a historically quiet slot in the gym.
	The fitness instructors were booked out solely to support the Junior Gym participants. The instructors were suitably trained to work with this age group. Sportivate projects require evidence of DBS checks, safeguarding attendance and proof of qualifications, all of which were supplied during registration of the project.
	A standardised Sportivate registration form was used which included parental consent. All junior participants also completed a gym induction form which included a physical activity readiness questionnaire (PARQ).
	Usage was monitored by our computer software "Legend". At Bath Sports and Leisure Centre junior usage went from 1,290 visits in April 2016 to 1,795 visits in April 2017.

What were the key	The main challenge was that our gym staff worked on a 3
challenges	week rota, this meant that some continuity was lost as new
_	participants would have to introduce themselves three
	times to different instructors and explain their goals again.
	As the participants became regulars this became less of an
	issue as time went by.
Advice to others	Whilst the above challenge wasn't a huge issue, it would
	be suggested to have one instructor overseeing the
	session to build a stronger rapport with the participants and
	maintain continuity between sessions.
Next steps	The sessions were then rolled out to other local centres in
	Keynsham, Chew Valley and Bath. Whilst some of these
	sessions are not as popular as Bath Sports and Leisure
	Centre, they have received enough interest to justify a
	permanent place on their respective centre timetables.
Rationale for selecting	The Offer was linked to our Physical Activity strategy Fit for
practice example	Life and included in contract with GLL so there were no
	extra costs.
	Promotion was via schools and the school sport
	partnership
	Concessionary/subsidised pricing used to ensure access
	from priority groups
Useful links and	Mark Harrison, Community Sport Manager, GLL:
contacts	Mark.Harrison@GLL.ORG
	Dethat INIty II Foot Occupant Fit foot Vo Otasta
	Bath and North East Somerset Fit for Life Strategy:
	www.bathnes.gov.uk/services/sport-leisure-and-
	parks/health-and-fitness/fit-life
	Sport England Youth Incight:
	Sport England Youth Insight:
	www.sportengland.org/research/understanding-
	audiences/sport-and-age

Health by Stealth Story Walks in Wakefield

Brief summary

Having seen the Gruffalo trail in a forestry commission site it was decided to try something similar in one of the country parks in Wakefield. The forestry commission had exclusive rights to use the Gruffalo however other stories by Julie Donaldson were available to use in this way. 'Room on the Broom' was chosen and an artist was commissioned to make wooden sculptures depicting the story which were then installed around a 2 mile route.

Some research came out as the idea was being formulated which showed people engaged in an 'activity walk' went on to eat more over the rest of the day compared to those who took part in an 'interest walk', therefore any wording related to exercise, walking or activity was avoided and the concept of health by stealth via a story walk was born.

While the trail was being developed we worked with libraries to raise the profile with story time in all libraries around the district focusing on this story and with extra copies of the story available to loan. The profile was also raised within the district's primary schools with assemblies in the local schools and information disseminated to schools to include in newsletters and on their website.

The story trail was launched on world book day with a local school invited to take part in a walk around the trail with an actor playing the park of the witch.

A story trail pack was developed which included games to play en-route and including an evaluation form with the chance to win prizes if completed and submitted. Families were also encouraged to post pictures and comments in relation to the trail.

Following the success of this story trail we have developed 2 further trails in the district. The first working with a 'friends of' group allowing them to lead the concept and style of the trail, which resulted in a 'gnome roam' with gnomes depicting the members of the friends group and their roles in helping maintain and develop the site.

For the third story trail we engaged a local author and illustrator to develop a bespoke book about another

Key stakeholders	country park in the district, 'blown away' at Pugneys Country Park. The key concepts from the book have then been developed into play features within the park, launched in spring 2018. Magic light pictures – who own the rights to Julie Donaldson books
	 Streetscene – council department who manage the country park councillors local schools – especially primary schools sculptor/artist/author creative services – council department who create our printed and digital resources
Time scales	The story was launched in March 2015 following approximately 8 months planning and development with 1 person working on it exclusively 3 days per week. The trail is continuingly monitored and replaced or repaired as necessary. Further improvements to the paths are planned to make them more suitable for all weather use. People counters have been installed for the Room on the Broom route.
What did you achieve and what was the key to success	 to be an interactive adventure walk for families to increase participation and use of walks to be intergenerational to be more than a walk and to encourage 'health by stealth' to link green space activity with culture and libraries to get Wakefield recognised for its innovation Success was measured by numbers visiting the park (via people counters) and evaluation/feedback from users including via Facebook and evaluation forms – which included a question "what would you have been doing if you weren't here today doing the story trail?" Around 30% of people self-reported they would have been at home/doing nothing. Using a well-known story worked extremely well, although some story boards were installed because although many children knew the story, some adults didn't. Working with Magic Light was positive and challenging! They allowed use of the story free of charge, but were very precise about the style which initially created a great deal of conflict with our internal design team who wanted it to

Promoting healthy weight in children young people and families: A resource to support local authorities – Practice examples October 2018

Working with libraries massively increased interest and they benefited too from increased use of library services.

Promotions via Facebook were brilliant and we got a lot of great/useful feedback this way. However, we think lots of Facebook marketing happened between friends and families without us being in any way involved – great for publicity but not so great for trying to capture impact.

The project was relatively cheap to deliver – initially costing around £25k (without staff time).

Results

4 weeks after the launch:

- Over 10,000 miles walked
- 90% visits are for the trail
- 100% would recommend it
- 57% first time visitors
- Average 785 visitors per day
- 24% would have been at home or doing nothing
- 99% would do it again

After 6 months:

- Over 200,000 miles walked
- Over 110,000 visitors
- 66% first time visitors
- Average 1,049 visitors per day
- 34% would have been at home or doing nothing

After 4 weeks:

- Over 13,600 reach on Facebook
- Almost 19,000 web page hits
- Website visits increased by 200% per month

What were the key challenges

Timescales, weather and newts! Trying to sculpt wood in minus temperatures is apparently impossible, then when we were ready to do the installation a fingertip survey of each site was required to ensure no newts were squashed! It was so popular in the summer holidays that parking at the country park became an issue and the council had to hire a field from a local farmer to cope with demand. Site staff were initially overwhelmed by the demand. The people counters should have been installed a year before the project occurred in order to have a whole year of baseline data on site usage.

Testimonials/Quotes	Yorkshire tots voted it #1 free activity in West Yorkshire in
	2015.
	www.tripadvisor.co.uk/Attraction_Review-g190729-
	d4753011-Reviews-
	Waterton_Discovery_Centre_and_Angler_s_Country_Park-
	Wakefield_West_Yorkshire_Engl.html comments on trip
	advisor.
	A Jewel in Wakefield's crown
	"We did not plan on visiting the park but I drive past the
	sign for it every day so me and my partner decided to have
	a little look. We weren't disappointed!! What a little gem!!"
	"We travelled 45 mins and it was worth it. My daughter
	loved the room on the broom trail, the walk around is 2
	miles and my 3year old managed to walk 95% of it".
	"Came here with my husband and 3 children and had a
	fantastic time! The room on a broom trail is amazing! It
	encourages them to walk and it's nice to be in the
	outdoors!"
	"One of the second of the second of the second seco
	"Came here for the room on the broom trail. The lake is 2
	miles round which I thought my 5 year old would get bored half way round but he never moaned once."
	Hall way round but he never mouned once.
	"I've lived near here for so long but never been. We went
	for the room on a broom trail with kids from 3 to 11 and
	they all loved it. I must admit we did too."
Advice to others	Do it! Find a book that works for your site and then find a
	way to make it come to life. Get staff at the site on board
	early and agree pricing (eg parking, any packs etc.) early
Novt stone	as these need to be set within a pricing policies. Short term: to evaluate it and see if it was successful,
Next steps	especially in engaging inactive families, which our
	evaluation showed it was.
	Medium term: to ensure the trail is well maintained and add
	new elements each year to encourage repeat visitors.
	Long term: (based on results of the evaluation) to consider
	rolling this out to other sites in the district.
Rationale for selecting	Low cost initiative, focused on inactive families.
practice example	Can be generalised and used across other LAs.
Useful links and	Amy Sharp, Health and Wellbeing manager:
contacts	asharp@wakefield.gov.uk 01924 304264 Email: healthImprovement@wakefield.gov.uk
	Website: www.wakefield.gov.uk/sport-and-leisure/parks-
	and-countryside/room-on-the-broom
	and country older toom on the broom

Spatial Planning for the Health and Wellbeing of Nottinghamshire

Brief summary

Our vision is for spatial planning to be a positive force for the health and wellbeing of Nottinghamshire residents, so that the places where people live contribute to longer healthier lives.

Developing the relationship between spatial planning and health was identified as a priority for the Nottinghamshire Health and Wellbeing Board following a Peer Review of the Nottinghamshire Health and Wellbeing Strategy in 2015. A Spatial Planning and Health document which set out the rationale of working together was developed by the County Council Public Health & Planning teams with District and Borough Councils and presented to the Health and Wellbeing Board in May 2016.

In March 2017 a Spatial Planning & Health Engagement Protocol between local planning authorities and health partners was endorsed by the Health and Wellbeing Board. The aim of the Protocol is that health is fully embedded into planning processes to maximise health and wellbeing and ensure that health/social care infrastructure requirements are considered to serve the growth requirements of the population of Nottinghamshire. The Protocol explains and provides tools for how local Planning Authorities, the Public Health Division and NHS organisations can work together through the planning process for Local Plans and individual planning applications.

The Protocol includes a Nottinghamshire Rapid Health Impact Assessment Checklist which is used by Public Health to give advice on draft Local Plans as part of the County Council's response. Spatial Planning and Health is now recognised a priority in the new 2017-2021 Health and Wellbeing Strategy's Ambition to develop Healthy and Sustainable Places. The documents are being updated in 2018 based on learning from the use of the first version.

Key stakeholders

- Health and Wellbeing Board
- Elected members
- Development Management and Planning and Policy teams (Two Tier system - county council, district/ borough councils)
- Public Health Nottinghamshire County Council
- Commissioner- Six Clinical Commissioning Groups and NHS England.
- Local Estates Forums linked to the Nottingham and Nottinghamshire Sustainability and Transformation Partnership

Time scales

The Spatial Planning for Health & Wellbeing of Nottinghamshire started in 2015 followed by the Planning and Health: Engagement protocol 2017. Both policies were approved by the Health and Wellbeing Board and are also Health and Wellbeing Strategy priorities. There are current

plans underway to update and merge both documents to reflect new guidance and structures.

What did you The planning and health agenda continues to be one of the main achieve and ambitions of the health and sustainable places of the what was the Nottinghamshire Joint Health and Wellbeing Strategy 2018-2022 key to Nottinghamshire Council and Mansfield District Council supported success a national initiative by Town and Country Planning Association (TCPA) about Developers and Well-being: gaining a business perspective on building healthy places. The aim of the initiative was to better understand the Developer perspective and help leverage a public-private sector consensus on achieving shared ambitions for healthy places Engagement and working partnerships between public health, planning policy and development management teams at a county and district-wide level Positive changes to planning policies based on advice given by Public Health To ensure the positive impact on health and wellbeing is fully realised, a What were the kev shared approach within the planning and development process is challenges essential. The collaborative work between partners/teams is progressing; the challenge is the balance of managing relationships positively in a 2 tier system with eight planning authorities, many NHS organisations and one Public Health Division. Testimonials/ A quote that demonstrates the use of the policies to support local quotes development plans at a district level. Tracey Tucker, a Senior Planning Policy Officer at Mansfield District Council. "We are currently working with the public health team to ensure that our emerging local plan does all it can to contribute towards improving the health and wellbeing of Mansfield district's residents. A heath impact assessment is currently being undertaken in accordance with the protocol and we intend to embed any recommendations from this into the plan when finalising our publication draft". John Wilcox, Senior Public Health and Commissioning Manager at the county council, said: "We know planners have lots of competing priorities from economic development to social housing – and health partners may not always understand the process and the role they can play. These documents help address both and are helping to ensure health is properly considered at all the stages". Advice to Engagement of elected members through the Health Wellbeing others Board Inclusion as a priority within the Health and Wellbeing Strategy Face to face meetings with the planning policy and development management disciplines to gain a clear understanding of their perspectives

Promoting healthy weight in children young people and families: A resource to support local authorities – Practice examples October 2018

Next steps	 Short term: to update both documents into one new document to reflect new guidance and structures Medium term: to incorporate food environment links to planning process to support and facilitate healthier food choices to improve diet and obesity in Nottinghamshire. In addition to looking at ways to include Sport England and Public Health England active design guidance as part of this process Long term: to continue working collaboratively with planning and development management teams to maintain the health improvement momentum
Rationale for selecting practice example	 Health and Wellbeing Board Chair Report – briefing to elected members and partners Involved the work of the public health team accountable to a public health consultant's portfolio agenda A dedicated Planning Policy officer identified to assist with advice and support

Useful links and contacts

John Wilcox, Senior Public Health & Commissioning Manager: john.wilcox@nottscc.gov.uk

Jenny Charles Jones, Public Health and Commissioning Manager, Nottinghamshire County Council jenny.charles-jones@nottscc.gov.uk

Healthy weight, healthy futures: Local government action to tackle childhood obesity (update 2018)

https://www.local.gov.uk/sites/default/files/documents/22.16%20%20Health%20weight%2C%20healthy%20futures_WEB.pdf

TCPA Report (February 2018): 'Securing constructive collaboration and consensus for planning healthy developments. A report from the Developers and Wellbeing project'

PHE Conference 2017 Poster:

phe.multilearning.com/phe/2017/eposters/186680/jenny.charlesjones.spatial.planning.for.health.26.wellbeing.html?f=menu=6*ce_id=12 48*ot_id=18069*media=2

Eat Out Eat Well in Buckinghamshire and Surrey

Brief summary	The Healthy Eating Award Scheme (known as 'Eat Out Eat Well'), run by Surrey Trading Standards Service in partnership with Surrey Public Health and several Environmental Health Services, launched in the summer of 2009. The purpose of the 'Eat Out Eat Well' (EOEW) scheme was to increase the number of food businesses offering healthy options to their customers, or in their staff canteens, thereby influencing consumer food choice and an increased uptake of healthier foods. There were three levels of the award, Bronze, Silver and Gold. 'Eat out Eat Well' contributes to the wellbeing objectives at Surrey County Council which is to ensure that everyone in Surrey has a great start to life and can live and age well.
Key stakeholders	Surrey and Buckinghamshire Trading Standards
	23 Local Authorities
	Environmental Health Officers
	Public Health Surrey
	Public Health England
	Surrey's Healthy Weight Alliance
	Surrey University
Time Scales	The scheme was originally developed in 2009 as part of the Change4Life campaign and had 3 levels. In 2017, the award criteria was updated to encompass the GBSF, which resulted in a new platinum level of the award. A new award for Early Years is being developed which will be available later in 2018.
What did you	The award aims to encourage food businesses to provide
achieve and what was the key to success	healthier options to customers, through the use of healthier catering practices, increasing fruit, vegetables, and starchy carbohydrates, and decreasing fat, especially saturated fat, sugar and salt. It also recognises provision of healthy options for children, and rewards staff training and promotion and marketing of healthier options:
	 The overall attitude towards the award is positive among providers and consumers. In an evaluation of the award the majority of those surveyed acknowledged the award's potential to contribute to a healthier lifestyle Participation in the award scheme has increased providers' own personal interest in healthy eating and sense of responsibility towards their consumers Consumers who were aware of the healthy eating

- scheme stated they would be more likely to choose a catering establishment with the award
- The main strengths of the award were its practicality, flexibility and adaptability, the impact on business and staff motivation and the fact that there is no charge for participating in the award process. In addition, free publicity is provided for award holders
- Another key strength reported was regarding the effective management of the scheme and that the assessors acted as 'champions' of the award by promoting it to food businesses
- The additional support from steering group members was also recognised for supporting related activities eg accredited nutrition training. These so called 'champions' are key to the ongoing success of the award
 - The award scheme brought together a range of health professionals, public and private sector organisations across Surrey
 - To date there are over 300 members of the scheme in Surrey and Buckinghamshire, including an NHS Hospital, leisure centres, National Trust properties, prisons, non-local authority schools, workplace restaurants and chain and independent sandwich bars
- An approach was made by Greggs with regard to their new healthy range of take-away products; they achieved an award in all their Surrey shops. They now wish to have the other shops in areas covered by EOEW assessed. Eventually they would like to roll this out nationwide
- We worked in conjunction with BaxterStorey to roll out the award to British Gas/Centrico offices and call centres throughout the country – achieving the highest level of platinum in two of its offices
- 23 local authorities now operate the scheme and the number of businesses achieving the award continues to increase and is currently at 1083
- There is ongoing interest in the scheme from other LAs

What were the key challenges

- Varying levels of engagement and interest in the award on the part of both food service providers and consumers
- Difficulty in reaching certain types of establishments such as small takeaways and sandwich shops
- Wider recognition of the award logo would help to increase the effectiveness of the scheme and increase the public's knowledge of premises offering

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Testimonials/ Quotes Advice to others	 Changing food choice behaviour Some food service providers reported that their existing customer base were not receptive to healthy options, despite a reported personal interest in healthy eating among consumers Ensuring a funding stream so the scheme could continue "We are proud to have six cafes that have achieved this prestigious award and will continue to develop and promote a range of healthier cooking methods and food for our customers". Chris Cregg, Places for People Leisure. "With our national reach and millions of customers every week, we believe we are in a unique position to help improve the health of the nation. We are proud to achieve the Eat Out Eat Well silver award for our Surrey shops in recognition of our commitment to customer health and all of the work we are doing to help our customers to manage their fat, salt and sugar intake, whilst also ensuring the great taste of our food". Jonathan Jowett, Corporate Affairs Director at Greggs.
Next steps	 ensure a sustainable income stream to run the project consistent promotional activities to ensure consumer awareness of the award. the ongoing involvement of Environmental Health Officers (EHOs) in the award process has been useful to support the work of the Surrey Trading Standards Officers this support is particularly important for reaching takeaways and sandwich bars as they have more regular contact with these food businesses visiting the food premises in person to explain the scheme has proved more successful then contact by e-mail/telephone We are piloting an early years setting version of the
Next steps	scheme now and longer term the scheme can be adapted to meet other needs eg we may look at older people settings such as care homes.
Rationale for	The scheme can be used across different Local Authorities
selecting	whatever their social and business profiles. It can also be
practice example	adapted but retaining the underlying principles and aims.
Useful links and	David Pickering, Buckinghamshire and Surrey Trading
contacts	Standards
	David.pickering@bucksandsurreytradingstandards.gov.uk
	eatouteatwell.org

Parks for People Programme in South Gloucestershire

Brief summary

Page Park is an urban park which has become a successful community active lifestyle and wellbeing hub in a deprived area of South Gloucestershire.

The area of Staple Hill includes the most deprived Lower Super Output Areas (LSOA) in South Gloucestershire and contains a LSOA within the most deprived 20% in the country. Residents experience relatively poor health, lower educational attainment, poor employment opportunities, higher crime rates and poor housing. It has been designated a priority neighbourhood.

In 2015, South Gloucestershire Council, working in partnership with the Friends of Page Park, were awarded a Heritage Lottery Fund 'Parks for People' grant of £1.67 million over five years with further funding provided by the Suez Communities Trust, Enovert Community Trust (formerly Cory Environmental Trust in Britain), Ibstock Enovert Trust (formerly Ibstock Cory Environmental Trust), the People's Postcode Trust and Sport England. Match funding included £100,000 capital funding from South Gloucestershire Council and £160,000 section S106 funding secured through the planning process for public open space enhancements.

Of this funding £142,000 was for delivery of the Page Park project activities plan re activity and interpretation projects in the park.

The aim of the project is to restore Page Park and build engagement to optimise the parks role as an important resource for the whole community. Work is well underway with many improvements already in place:

- a new café/community building (with new toilets) which has won the Best Public Service Building Award (West) 2018
- new toddlers play area
- refurbishment of tennis pavilion
- paths and access improvements
- restoration of drinking fountain
- a comprehensive programme of activities and events to widen and increase the participation of

local people in the park

 training and skills development for new and existing volunteers to become involved in the care and management of the park

A wide range of outdoor activities are in place and in development:

- Walking for Health (twice a week) over 30 people per walk, mostly local older people with high numbers of mobility aid users. Includes walks shared with local preschool and special school to support intergenerational physical activity.
- Junior parkrun weekly, started August 2017.
 Regularly over 150 runners/week.
- Park Yoga (free outdoor weekly sessions) pilot has been running since May 2018 and has seen up to 150 people a week. Funded by the Fine Family Foundation. An evaluation report will soon be available.
- Activities for children include Streetgames, Fit and Fed holiday programmes and preschool Forest school sessions, Play Streets and Active Family club.
- A downloadable outdoor learning and play resource pack is being developed in partnership with local education settings to support engagement in the park by schools, youth groups and families.
- Gardening group weekly and community planting events
- Park Wombles group weekly park clean up group
- Excellent partnership work with SportsPound (a South Gloucestershire Council Community Sport team managed project funded by Sport England) who deliver buggy fit, Back to Exercise, Couch to 5 K, Couch to a mile, social table tennis and other highly popular activities in the park. Twice weekly social running groups now ongoing as a result.

Working in partnership with the South Glos. Dementia Action Alliance to achieve Dementia Friendly park status. Dementia friends training has been delivered for volunteers and staff working in the park and interpretation and signage developed to be dementia friendly.

An accessible photo trail is being developed in

- partnership with the Field Fare Trust to improve access for people with disabilities.
- Many more groups promote keeping active, such as a social running group, Staple Hill runners, the bowls club, football and cricket clubs, Nordic walking, LushTums (outdoor prenatal yoga) and tennis for people with disabilities.
- Other community events include bandstand music events, Summer in the Park community fun day, Pumpkin Patch, Fun Dog Show and Carols around the Clock tower.
- Park interpretation projects include the Park Life Poetry project and Heritage and Tree trails celebrating the life and heritage of the park.

Many indoor activities are running in the new community room which was constructed as part of the project:

Activities include Zumba Gold (free for cancer patients), Writing for wellbeing, Tai chi, Yoga, Wellbeing Choir, table tennis and a social club for over 55s and Get Going Mums Fitness.

Key stakeholders

- Friends of Page Park
- South Gloucestershire Council (SGC) Community Spaces team
- South Gloucestershire Council Public Health and Wellbeing and Community Sport Team
- Executive Member for Housing and Public Health
- Elected members
- Four local Primary Schools
- Staple Hill Children's Centre and Page Park preschool
- Warmley Park Special School
- Keyring group for adults with learning disabilities
- Local residents of all ages
- Staple Hill Quality of Life Project co-ordinated by Bromford (Merlin) Housing - a local partnership project in Staple Hill addressing crime, environment, employment and health and wellbeing
- Social prescribing Community Connectors (Curo)
 work in Staple Hill to signpost residents to local
 social prescribing programmes run by the South
 Gloucestershire Wellbeing College (Bromford coordinated) and other healthy lifestyle and wellbeing
 opportunities in the area including programmes and
 activities in Page Park
- Funders included The Heritage Lottery Fund, Suez Communities Trust, Enovert Community Trust

Time scales	(formerly Cory Environmental Trust in Britain), Ibstock Enovert Trust (formerly Ibstock Cory Environmental Trust), the People's Postcode Trust and SportsPound (Sport England) and South Gloucestershire Council The Lottery funded project ran from 2015, with some
Tille Scales	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	aspects running until 2021.
What did you	The aims/objectives of the project were:
achieve and	
what was the	to restore key heritage features in the park and
key to success	develop new facilities including a new café and
	community room
	 to develop an activities programme to increase and widen engagement of the Staple Hill community in Page Park, to celebrate the parks heritage, to improve health and wellbeing and help tackle health inequalities
	 ensure that all activities/projects are user focussed and driven and can be sustained beyond the end of the Lottery project
	 develop an exemplar community park health and wellbeing hub which delivers strong health, wellbeing and community cohesion benefits within the Staple Hill priority neighbourhood and inspires the optimisation of other green space resources across South Gloucestershire
	What worked well:
	The levels of engagement have exceeded expectations and many outputs will continue beyond the end of the project.
	The new café and community room are very successful and provide a very effective social, creative and wellbeing hub in the centre of the park.
	Benefits of the initiative:
	Strong health versus cost benefits:
	 reduces social isolation encourages community cohesion promotes intergenerational work improves physical health improves emotion and mental health
İ	

Success measures:

- an annual visitor survey is completed and feedback from activities/groups is collected and incorporated into project
- participant feedback cards at activities and events
- social media posts
- a lottery funding report is submitted annually
- an overall evaluation report will be written over the next year

Qualitative and quantitative gains:

An annual survey is completed in the park. Last year's survey (2017) had 329 completed and key points included:

- 97% agreed that The park has a positive impact on the local community
- 91% of those responding agreed with each statement that The park enhances my quality of life and that There is a good community spirit in the local area around the park

What were the key challenges

Challenges:

All programmes are set up to be as sustainable as possible, however Heritage Lottery and SportsPound (Sport England) funding will end at the end of 2018 so ongoing sustainability of programmes in 2019 and onwards is a key consideration.

Testimonials/ quotes

Walking for Health testimonials:

"I can't thank you enough for this morning. I don't get to see anyone and I am mostly on my own. This has been absolutely wonderful".

"It was nice to be walking with other people. I walk across the park occasionally but having the company of others made it more enjoyable".

"I enjoy meeting new people. I enjoy the company and I feel better. The walk leaders are friendly and if you feeling down they will cheer you up! Thank you!"

Park Yoga testimonials:

"I loved every minute! Thank you".

"Just moved to the area and saw you guys this morning, looked fab, I'm there next Sunday".

Page Park Grounds co-ordinator

"This is a great project to be a part of. It's a pleasure to work alongside a community that are so passionate about

	December 1 and 1 a
	Page Park and are so involved with its development. Much
	has changed already since my employment and I'm looking
	forward to being involved in many positive changes yet to
	come".
	Astina Family Olyk tasting wilds
	Active Family Club testimonials
	"Brilliant! Haven't laughed so much! I was worried that it
	was going to be very serious, but it was great fun and
	made me realise that sport with the family can be fun too.
	I've already gone out and bought tennis rackets – first time
	I've been interested in sports since school! Thank you!! –
	Staff were brilliant too".
	"Pam's enthusiasm is infectious she made every day a
	blast even when the weather wasn't the best. Monday was
	our favourite; please do more throughout the year. Thanks
_	to all involved in organising".
Advice to	Investing in parks, improving facilities and developing user
others	determined engagement programmes can deliver excellent
	results for individual health and wellbeing and community
	cohesion, delivering strong return on investment and
	healthier lifestyles which sustain into the future.
	It is vital to meet people where they are in order to develop
	and deliver successful engagement projects. This ensures
	their ideas are heard and key needs are identified for
	activity and programme development.
	The constitution of a control assist both couch as a set halos
	The creation of a central social hub, such as a café helps
	bring people together.
	A so ordinator post halps devalop and drive the project to
	A co-ordinator post helps develop and drive the project, to
	establish user determined programmes which can then be
Newt etems	sustained into the future.
Next steps	Short and medium term: support and training will be
	provided for volunteers and groups to sustain delivery
	beyond the project funding.
	Long term: key aspects of the project are self-sustaining
	and will develop and change in response to the needs and
	ideas of the local community, for example community
Rationale for	events, junior parkrun, Park Yoga and Walking for Health.
	This project contributes to the growing evidence of the role
selecting	parks and green spaces can play in improving community
practice	cohesion, reducing social isolation and improving the
example	physical and emotional health of local residents. Page Park
	has strong intergenerational and inclusive activities and the
	Parks for People programme has provided key investment
	to improve the parks facilities and optimise health,
	wellbeing and community benefits for generations to come.

Promoting healthy weight in children young people and families: A resource to support local authorities – Practice examples October 2018

Useful links and contacts	Grainne Stables, Rowena Kenny and Elizabeth Le Breton: healthylifestyles@southglos.gov.uk
	www.friendsofpagepark.co.uk
	South Gloucestershire Council Page Park
	Park Yoga South Gloucestershire
	www.parkrun.org.uk/pagepark-juniors
	South Gloucestershire Council SportsPound