

MANCHESTER CITY COUNCIL

Committee: Health and Well Being Overview and Scrutiny Committee
Date: 15th November 2007
Subject: Obesity in Manchester
Report of: Public Health Consultant, Manchester Primary Care Trust (PCT)

Purpose of Report:

The committee received an overview report on obesity in September. This report focuses specifically on the potential contribution of public sector agencies to tackling obesity in Manchester.

Recommendations:

The Committee is asked to:

- i) note the report
- ii) identify the priority areas for workplace action that should be addressed by the City Council and local NHS.

Contacts:

Barry Gillespie
Public Health Consultant
Manchester PCT
Tel: 0161 958 4144
Email: barry.gillespie@manchester.nhs.uk

Jan Dawson
Head of Nutrition and Dietetics
Manchester PCT
Tel: 0161 205 4796
Email: jan.dawson@manchester.nhs.uk

Frank Wolstenholme
Health and Welfare Manager
Manchester City Council
Tel: 0161 234 1837
Email: f.wolstenholme@manchester.gov.uk

Background Documents

Obesity in Manchester: Overview Report to HWBOSC on 6 September 2007

1. Introduction

- 1.1 Obesity is now recognised as an increasing threat to the health of individuals and communities and is viewed as a major public health issue. There are clear indications of rising rates of overweight and obesity: recent statistics suggest that about 66% of men and 55% of women are either overweight or obese, with 22.9% and 23.4% being obese respectively.
- 1.2 There is a wide range of health problems associated with excess weight including heart disease, type 2 diabetes and high blood pressure. These conditions produce knock-on effects in terms of human and financial costs to the economy, including:
 - deaths linked to obesity shorten lives by an average of 9 years;
 - obesity costs the economy at least £2.5 billion every year, including costs to the NHS and costs to industry through sickness absence.
- 1.3 Individuals become overweight or obese when they consume more energy from food and drink than they use up in daily activities. A broad range of social and individual lifestyle factors interact to contribute to the problem, but the main reasons are the increasing consumption of high fat, high sugar foods, increasing levels of alcohol consumption and the reduced levels of physical activity throughout the population.
- 1.4 An organisation's policies and incentive schemes can help to create a culture that supports healthy eating and physical exercise. Evidence based action will not only improve the health of employees but also have economic benefits for the organisation (e.g. less sickness absence and greater productivity).
- 1.5 Manchester City Council employs 24 500 people, with a significant number of those in sedentary, lower paid work. In addition the local NHS employs 22 000 people. Obviously not all of these employees are Manchester residents but 60% are (approx. 30 000) and many will have partners, family, friends and relatives to take home positive messages to.
- 1.6 Tackling the problem of obesity through the local public sector workforce is therefore a potential area for development. This report describes current action and sets out options for extending such work in the future.

2. Current relevant activity

- 2.1 At present Manchester City Council has an Employee Health Policy that includes a statement of intent and outlines the Council's commitment to protect and promote the health of all employees.
- 2.2 Health checks are provided for members; for employees, an annual health fair is organised by the Occupational Health Department. These Fairs are held at the Town Hall and are well attended with up to 600 employees visiting over the course of the day. However, the employees attending tend to be those who are already adopting healthy lifestyles and are reasonably well informed of the health issues. Further action is required to target the section of the workforce most at risk.

- 2.3 The health of the workforce is addressed to some extent in a number of City Council policies such as the Health and Safety Policy and the Green Policy. There are small scale initiatives being developed and implemented within the City Council but they do not tend to be co-ordinated across the Council or taken up by a significant percentage of staff (e.g. reduced rate gym membership, exercise classes, cycle to work schemes).
- 2.4 Manchester PCT provides employees with 15 hours health bank time a year. Staff are encouraged to use this time to undertake health promoting activity. The PCT does not have a Healthy Workforce Policy but does address health to some extent its Managing Stress at Work Policy, Health and Safety Policy and Tobacco Control Policy.
- 2.5 In the past, Central Manchester PCT provided a “body MOT” service to employees: the new PCT is now looking at the possibility of providing a similar service to all of its employees.
- 2.6 There are examples of good practice, notably at Withington Community Hospital, but initiatives are not widely promoted or available and take-up is proportionally very small. Where initiatives have been more successful is when a person has been employed to co-ordinate and promote the intervention.
- 2.7 There are several initiatives to try and increase the use of bicycles to and within work. Both the PCT and City Council provide a cycling rate for those who use their bicycles within work. This rate has increased in recent years but is still less than the rate given to car users. The PCT are looking into providing tax-free bikes for purchase by employees and providing more bike lockers, which are very popular and over subscribed.

3. Possible future direction

- 3.1 The National Institute for Health and Clinical Excellence (NICE) has identified the following recommendations for major employers to consider:
 - a. Policies and working practices
Ensure policies encourage activity and healthy eating; for example, travel expenses should encourage walking and cycling to work and between work sites.
 - b. Building design
Provide showers and secure cycle parking to encourage active travel. Improve stairwells to encourage use of stairs.
 - c. Physical activity
Support out-of-hours activities such as lunchtime walks and the use of local leisure facilities.
 - d. Workplace food provision
Actively promote healthy choices in restaurants, hospitality, vending machines and shops for staff and clients, in line with Food Standards Agency advice. For example, use signs, posters, pricing and positioning of products to encourage healthy choices.

e. Education and promotion

Any incentive schemes should be sustained and part of a wider programme to encourage healthy eating, weight management and physical activity. Examples of schemes include:

- travel expenses policies
- policies on pricing food and drink
- contributions to gym membership.

Offer tailored education and promotion programmes to support any action to improve food and drink in the workplaces (including restaurants, hospitality and vending machines). To be effective, schemes need:

- commitment from senior management
- an enthusiastic catering department
- a strong occupational health lead
- supportive pricing policies and heavy promotion.

f. Health checks

If employee health checks are offered, they should address weight (diet and physical activity) and other lifestyle issues or concerns

One approach does not fit all. There is a need to develop a healthy workforce strategy and action plan that incorporates a number of diverse initiatives that are well co-ordinated, made widely available and extensively promoted. On the basis of these broad NICE recommendations, the following options may be worth further action in Manchester.

- 3.1.1 The development of a comprehensive workplace health strategy for the city council and PCT, backed up by a commitment to increase investment and capacity to deliver on the action identified.
- 3.1.2 Use the Council and PCT intranet sites more widely and effectively to promote healthy lifestyles and health promoting messages. Use City council alerts and PCT email to send out health information to all employees who access a computer. Stop Smoking support was promoted in this way and has been very successful in helping people attempt to quit.
- 3.1.3 Ensure that as many workplaces as possible support active travel through investment in secure cycle storage, adequate showering/changing facilities, and incentive schemes such as cycle mileage and loans to purchase equipment.
- 3.1.4 A review of catering facilities available to staff to ensure that they provide good quality healthy food throughout the working day.
- 3.1.5 Improvements to stairwells and other forms of encouragement for people to take stairs rather than lifts.
- 3.1.6 Identification of workplace health champions who can support the strategy in individual offices. This approach is already being used for “Green Champions”.

- 3.1.7 Establish a Fruit on Desks scheme where fruit is sold on a reception desk of workplace, leisure centre, health centre or within offices and is a way of drawing attention to important health messages and improving access to fruit as snacks.
- 3.1.8 Ensure that initiatives and policy join up and are supported by existing campaigns and initiatives such as 'Getting Manchester Moving' and the Department of Health's 'Life Checks Online'.
- 3.1.9 Develop short health walks mapped out from each of the main council buildings in order that staff could leave the building at lunch-time and participate in a mapped out walk alone or with friends. Provide maps of the walks, with points of interest, and make available as an information leaflet or map via the council intranet. Launch initiatives by giving away step-o-meters.

4. Conclusion

- 4.1 Between them, the City Council and PCT have the potential to impact on over 45,000 employees with a range of targeted action aimed at improving diet and increasing levels of physical activity.
- 4.2 Clearly the range of activity that could support this is wide. The Committee is asked to recommend areas for priority future action.