



#### COMMUNITY IMPACT ASSESSMENT

Directorate / Service Area	Officer undertaking the assessment	
Public Health Directorate	Name: Val Thomas	
Service / Document / Function being assessed		
New Countywide Lifestyle Service	Job Title: Consultant in Public Health	
Business Plan Proposal Number (if relevant)	Contact details: val.thomas@cambridgeshire.gov.uk	

### Aims and Objectives of Service

This Community Impact Assessment is for the Lifestyle Service that is currently being procured by the Public Health Directorate. It includes the current Health Trainer Service, Children's and Adult Weight Management Services and the National Childhood Measurement Programme

## The overarching aims of the service are;

- To increase the number of people adopting a healthy lifestyle to reduce the associated risks to health and wellbeing through the provision of integrated Lifestyle service that enables users to access preventative interventions, support for lifestyle change and weight management services according to their needs.
- To reduce health inequalities and lifestyle service inequities between the north and the south of the county and to ensure that the needs of particular population and vulnerable high risk groups are met

### Service objectives;

- Provide an integrated Lifestyles service model that will provide preventative and treatment interventions
  that are connected through clear transparent pathways that will enable individuals to access each service
  according to need. For example a person who has completed a weight management programme will
  continue to receive support from the Health Trainer Service to help with sustaining any weight loss or may
  take part in wider population prevention programme such as a healthy cooking scheme.
- Provide a countywide Health Trainer service that will work with individuals, groups and communities to
  motivate and support them to make healthy lifestyle choices This service will be concentrated in the 20%
  more deprived areas with a partial service in the rest of the county that is proportionate to need
- Provide a range of community based primary prevention activities through the Health Trainer Service
- Provide a higher level of preventative services in areas where there is high prevalence of unhealthy lifestyles and with high risk vulnerable groups
- Undertake the statutory National Childhood Measurement Programme to secure robust data that measures
  any changes in the prevalence of childhood obesity and develop preventative and intervention programmes
  that will link with the Programme, schools, families and communities

Please note the National Childhood Measurement Programme is a national programme of weighing and measuring schoolchildren that was introduced in the 2005–06 school year. Reception and Year 6 children are measured routinely to gather population-level data to increase understanding of weight issues in children and to monitor changes in levels of obesity. The National Child Measurement Programme is a useful way to engage with children and families about healthy lifestyles and weight

- Increase community resilience through providing support and training to community leaders and groups to
  enable them to promote a healthy lifestyle and to increase community member engagement in improving
  their own health
- Provide access to the different tiers of weight management service across the county

Please note that Adult weight management services are divided into Tiers. The new service is planned to incorporate tiers 1 to 3. Tier 1 includes population wide multi-component preventative interventions that support the adoption of a healthy diet and an increase in physical activity. Tier 2 includes multi-component interventions with individuals or groups over several months to support a healthy lifestyle. Tier 3 is a clinical service that provides intensive interventions with individuals with complex needs for several months

- Provide a hub and spoke weight management service model which will include 3 hubs that will offer the
  more intensive Tier 3 services accompanied by a number of spokes that will provide easily accessible Tier
  two services to individuals and groups
- Provide a lifestyles multi-component weight management programme for 7-11 year olds and to develop and evaluate a service for older age groups up to the age of 18 years.
- Increase the uptake of weight management services by those who are overweight or obese through increasing the number of health trainer referrals to the services
- Promote service and healthy lifestyle messages to the local population, via the use of innovative and appropriate media and marketing techniques tailored to specific audiences especially in high need communities
- Target high risk populations through outreach and appropriate media promotion
- Work with a range of partners including communities, voluntary sector, and statutory sectors. There will be
  pathways to different services that will support lifestyle change or address any particular clinical issues e.g.
  Local Authority leisure services or specific clinical services in the case of more complex obesity service
  users.
- Ensure continuous service improvement and user focused services through the involvement of service users and stakeholders in service design, development and on-going evaluation

### What is changing?

# Service Inequity

Currently there is inequity of service provision across the county that will be addressed in the new Service.

- The current Health Trainers work in the 20% most deprived areas of the county. The new service will be partially extended to the rest of the county and be proportionate to need
- There is inequity in the provision of weight management services. Some of the Tier 2 services are only provided in Cambridge City and South Cambridgeshire and the Tier 3 intensive service is only provided at Addenbrookes Hospital. The new service will adopt a Hub and Spoke model with the Tier 3 service being provided in three Hub locations and all the multi-component Tier 2 services, both individual and group, will be provided in different community locations across the county

## **Integration of Services**

Currently the Tiers 2 and 3 weight management services have an integrated model with the services working closely together. The new Service will bring together all the services in the procurement and strengthen pathways between them.

This integrated county-wide service model makes it easier to move or intensify the delivery of services in areas of deprivation, where the prevalence of unhealthy lifestyles is high but demand may fluctuate. In addition the advantage of commissioning an integrated service is that it will establish a network of pathways that includes preventative and supportive lifestyles services as well as more intensive weight management treatment options. Service users can be referred to these services as their needs change. In particular

- The Health Trainer Service that will increase referrals to the weight management services
- Health Trainers will support the ongoing maintenance of weight loss achieved through the weight management services and other wider population prevention programmes
- The National Childhood Measurement Programme identifies children and families in need of support and these can be linked to the Lifestyle Services

- Schools identified through the National Childhood Measurement programme as having a high prevalence of obesity will be targeted and offered support to develop specific interventions such as after schools clubs for children and their families to provide support for healthy lifestyle

### **Targeting of High Risk Vulnerable Groups**

The current Health Trainer service targets areas of deprivation and vulnerable high risk groups. The new Service will increase this targeting to the rest of the county. In addition Health Trainers will be undertaking more outreach work to access and support high risk groups

## **Childhood Weight Management Services**

The current children's weight management service is for children aged 7-11 years of age. This reflected the evidence when this service was developed. The new service will be tasked to develop a service for young people (12 to 16 years ) based on the emerging evidence base

## Who is involved in this impact assessment?

e.g. Council officers, partners, service users and community representatives.

This impact assessment has involved a wide range of officers, service users and community representatives through different fora

### **The Consultation Process**

The consultation for the commission of the new lifestyle service involved obtaining the views of the general public (potential service users), current service providers, stakeholders, past service users, children, people with learning and physical disabilities and their carers.

An online and hard copy survey was developed to gain insight into what components should be considered in the development of the new service, to meet the needs of the people in Cambridgeshire. The survey was distributed through multiple channels including; Facebook advertising, posts to various Cambridgeshire Facebook pages (including pages relevant to groups identified in the Community Impact Assessment, such as LGBT groups), twitter, local websites (such as Healthwatch, CCC and Shape Your Place), a press release and mail shots through various organisations to their service users (e.g. Camsight, for the visually impaired).

Healthwatch delivered focus groups to gain the views of people with disabilities and their carers and children. The focus group for children provided interesting insight by utilising a model that involved voice recording of enthusiastic discussions and asking children to visually express their views through drawings.

Public Health officers met with past service providers to gain their views.

## **Lifestyles Procurement Steering Group**

The procurement is being overseen by Steering Group which has representation from the following Local authority officers from Children and Adult Services (CFA), Information Governance Cambridgeshire and Peterborough Clinical Commissioning Group (Information Governance, clinical Governance, Medicines Management City and District Authority Officers General Practice

Voluntary Sector Healthwatch

# What will the impact be?

Tick to indicate if the impact on each of the following protected characteristics is positive, neutral or negative.

Impact	Positive	Neutral	Negative
Age	√		
Disability	√		
Gender reassignment		√	
Marriage and civil partnership		√	
Pregnancy and maternity	V		
Race		V	
Impact	Positive	Neutral	Negative
Religion or belief		V	
Sex	√		
Sexual orientation		V	

The following additional characteristics can be significant in areas of Cambridgeshire.					
Rural isolation	$\checkmark$				
Deprivation	$\sqrt{}$				

For each of the above characteristics where there is a positive, negative and / or neutral impact, please provide details, including evidence for this view. Describe the actions that will be taken to mitigate any negative impacts and how the actions are to be recorded and monitored. Describe any issues that may need to be addressed or opportunities that may arise.

# **Positive Impact**

### Age

- The current health trainers focus on the adult population, however the new service will include a family based approach that will also address the lifestyle needs of children
- The new Service will develop an additional children's weight management programme that will address the needs of 12 18 year olds.
- The current services are accessed by people over 65 years. The service will have a positive impact on the older age group by ensuring a range of settings and mode of delivery will assist with certain issues an older person may face (e.g. access, income, loneliness).

# **Disability**

• The current Health Trainer Service targets high risk vulnerable groups including those with disabilities. The expansion of the programme to the rest of the county will increase activity with this particular group.

### **Pregnancy and Maternity**

- It is recommended that women who have an unhealthy weight should lose weight before becoming pregnant and also following delivery of the child. The current services do promote these targeted messages.
- The new weight management and lifestyle services will appropriately cater for these critical stages. Service
  design, marketing and resources will reflect these needs of women of child bearing age, in particular those
  living in deprived areas, to reduce the risk of overweight and obesity during and after pregnancy.

### Sex

- Males are characterised as having a low up take of health services. This is a particular challenge for weight
  management services where is evidence that mode of delivery is key with men having a clear preference for
  individual rather than group interventions.
- The new service will ensure that this option is available throughout the county and working closely with the health trainers there will be targeted approaches to engage men. For example health trainers offer services in workplaces with a high proportion of male employees.

#### **Rural Isolation**

- A key objective for the new Service is to provide services in the more rural isolated areas of the county, especially in the Fenland area, where transport facilities are less well developed than in other parts of the county.
- Health Trainers are already based in most of the Fenland areas but the extension of the service will enable the remaining Fenland areas to have health trainer service e.g. Manea. In addition the new service will ensure that there are health trainer activities in the more rural inaccessible villages across the county
- The weight management services model of hubs and spokes will ensure that people in the more rural areas will have access to the Tier 2 services that can be provided in any type of location. The Tier 3 more intensive service requires specific pieces of equipment that will be provided in a central location in different areas i.e.
   Wisbech, Huntingdon and Cambridge City

### **Deprivation**

- Deprivation is associated with poor health outcomes and linked to unhealthy lifestyles. The current and new
  Health Trainer Service is specifically designed to target the more deprived communities where health outcomes
  are poorer. The extension of the service to the rest of the county although less intensive will still include a focus
  on more derived high risk communities.
- A higher prevalence of obesity is associated with deprivation and unhealthy lifestyles. The development of the hub and spoke model will mean that these services will be planned and sited in areas of highest need

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eutral Impact	

Gender reassignment, Marriage and Civil Partnership, Race, Religion or Belief, Sexual orientation

The existing and new Service does and will offer the same service to any of the above groups

# Issues or Opportunities that may need to be addressed

This new services provides a range of opportunities that are reflected in the service model which integrates services so that service users can more easily access services appropriate to their needs and importantly addresses the health inequality and service inequities in the current service models

## **Community Cohesion**

If it is relevant to your area you should also consider the impact on community cohesion.

The new service is able to make contribution to community cohesion

- The model is based on engaging service users with the Lifestyle services but also more widely with services that are provided within their community where they will meet other members of their community. This can increase their identification with their community or neighbourhood
- The current and new Health Trainer Service uses a community development model to engage individuals and communities in taking responsibility for their health and the health of their communities
- Supporting individuals and communities involves providing them the knowledge and skills for them to address their own lifestyle and health needs. It is building social capitol and community reliance. Key elements that support community cohesion