



Report to Policy Committee

Author/Lead Officer of Report: Jessica Wilson

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Report of: *Director of Public Health*

Report to: *Strategy and Resources Committee*

Date of Decision: *12 July 2023*

Subject: *Sheffield Food Strategy and future commissioning model for improving diet/obesity prevention 2024-2029*

Has an Equality Impact Assessment (EIA) been undertaken?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
If YES, what EIA reference number has it been given? 2212				
Has appropriate consultation taken place?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Has a Climate Impact Assessment (CIA) been undertaken?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
Does the report contain confidential or exempt information?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
If YES, give details as to whether the exemption applies to the full report / part of the report and/or appendices and complete below:-				

Purpose of Report:

The purpose of this report is to provide an overview of and seek approval for 'Fairer, Healthier, Greener' the proposed new Food Strategy for Sheffield. The report invites member input on areas of the Food Strategy that should be prioritised by Sheffield City Council (the Council) during its implementation in order to maximise its contribution to corporate goals including Net Zero, better health and reducing inequalities.

This report also provides an overview of the proposed new commissioning model for improving diet and preventing obesity 2024-29 which forms an integral part of the new Food Strategy's implementation.

This report also then outlines and seeks approval for the recommended initiatives that will be supported by the annual investment proposed of £658k per year for 5 years (£3.29m in total) from the Public Health grant allocation.

Recommendations:

It is recommended that the Strategy and Resources Committee:

1. Approve the food strategy 'Fairer, Healthier, Greener: A Food Strategy for Sheffield'.
2. Commit to developing policy regarding food served in council owned spaces so that it reflects the aspirations set out in 'Fairer, Healthier, Greener'.
3. Acknowledges the Council's commitment to working with local communities and partners to identify spaces where sustainable food production and provision can be accommodated.
4. Approve the 'improving diet, preventing obesity proposed commissioning model 2024-29'.
5. Approve the allocation of £658,000 per year, for the next 5 years, (£3.29m in total) as outlined in this report.
6. Approve the commissioning of the Tier 2 child and adult weight management contract, as outlined in this report.

Background Papers:

Fairer, Healthier, Greener: A Food Strategy for Sheffield

Lead Officer to complete:-		
1	I have consulted the relevant departments in respect of any relevant implications indicated on the Statutory and Council Policy Checklist, and comments have been incorporated / additional forms completed / EIA completed, where required.	Finance: <i>Anna Beeby and Adam Elwis</i>
		Legal: <i>Gemma Beecroft</i>
		Equalities & Consultation: <i>Ed Sexton</i>
		Climate: NA
<i>Legal, financial/commercial and equalities implications must be included within the report and the name of the officer consulted must be included above.</i>		
2	SLB member who approved submission:	<i>Greg Fell</i>
3	Committee Chair consulted:	<i>Cllr Tom Hunt</i>
4	I confirm that all necessary approval has been obtained in respect of the implications indicated on the Statutory and Council Policy Checklist and that the report has been approved for submission to the Committee by the SLB member indicated at 2. In addition, any additional forms have been completed and signed off as required at 1.	
	Lead Officer Name: Jessica Wilson	Job Title: Health Improvement Principal
	Date: 3 rd July 2023	

1. PROPOSAL

This proposal is for a new Food Strategy for Sheffield. This cross-cutting strategy will support the Council's strategic goals including Net Zero, healthy lives, tackling inequalities and providing support through the cost-of-living crisis. A future commissioning model to support the strategy is also proposed. The proposal is to maintain annual investment at the current level of £658k per year for 5 years.

1.1 FOOD STRATEGY

1.2 Why we need a Food Strategy

1.3 Food is central to survival and good health; it also connects us to one another and the land beneath our feet. The food sector provides thousands of jobs in the city, as well as many pathways through education. At the same time, food is the second largest contributor to greenhouse gas emissions and significantly impacts the environment.

1.4 The current food system in Sheffield (and across the UK) does not

support human or planetary health and lacks resilience. If we are going to safeguard our food supply for the long term, we urgently need to change the way we grow, cook, eat and dispose of our food.

- 1.5 Three key challenges which must be addressed in order to improve health, increase social justice, achieve Net Zero and protect nature are:
- 1.6 **Many people in Sheffield can't afford a nutritious diet.** Food poverty is a key issue for the Cost-of-Living emergency response and the Tackling Poverty Strategy. It drives health inequalities and is a social justice issue that affects the ability of communities to be healthy and happy. Healthier food is more expensive per calorie than less healthy food. It is not ignorance or the inability to cook that is the root cause of poor diet and the associated health conditions, it is poverty.
- 1.7 **Processed food harms health and planet but is cheap, abundant, and heavily marketed.** Our food choices are heavily influenced by what's available. Commercial influence is the main driver of consumption (not free choice or personal responsibility). Economically disadvantaged communities are most affected by poor food environment, and this drives health inequalities. We must therefore use all of the levers we have at local level to combat harmful commercial influence and to create healthier food environments.
- 1.8 **Our food system lacks resilience, harms the planet and could better support the local economy.** Recent food price inflation (which is heavily linked to climate change) highlights the lack of resilience in the UK's food system. This is affecting people's ability to afford and access food now and the risk of future shocks will persist without mitigating action. Taking steps to support a more localised and sustainable food system will build resilience and will also support city aspirations for Net Zero and inclusive economic development.
- 1.9 A National Food Strategy was published in 2021. This government-commissioned independent review of the food system was a robust analysis of the UK food system. It covers health and inequalities, food security, climate change, biodiversity loss, land use, and trade. It is broadly accepted that implementing the 14 recommendations made by the National Food Strategy would make a substantial contribution to restoring food related human and planetary health.
- 1.10 The Council are proactively addressing the National Food Strategy's goals to create a food system that:
 - Makes us well instead of sick.
 - Is resilient to withstand global shocks.
 - Helps to restore nature and halt climate change.
 - Meets the standards the public expect on health, environment, and animal welfare.
- 1.11 **Why focus on food rather than obesity?** Many areas choose to

develop strategies primarily aimed at preventing overweight and obesity. Sheffield has a Food Strategy rather than an obesity prevention strategy because A) Overweight and obesity are conditions that are contributed to by modifiable health behaviours, predominately the food we eat and so that is where the focus should be; B) A healthy, well-balanced diet brings a range of health and wellbeing benefits for those of all body sizes. Food also contributes to a wider set of goals e.g. Net Zero, nature recovery, social justice and strong local economy.

1.12 **Overview of Fairer, Healthier, Greener – A Food Strategy for Sheffield**

1.13 Fairer, Healthier, Greener: A Food Strategy for Sheffield sets out how the Council and partners can take a whole systems approach to creating a local food system that is fair, resilient, supports health, restores nature and contributes to Net Zero.

1.14 The strategy sets out aspirations for a Sheffield that is:

Fairer - Everyone has access to safe, affordable, nutritious food that meets their cultural needs.

Healthier - The food system actively promotes better physical, social and emotional wellbeing.

Greener - Food is produced and distributed in a way that restores nature and contributes to Net Zero.

1.15 The Strategy focuses on the levers that the Council and partners can use to bring about system change. For example, through the food we purchase at scale or that is sold within our venues; through helping people to take up food related benefits such as free school meals or the Holiday Activities and Food Programme; or by working in partnership with community food initiatives that share our aims.

1.16 Priorities for action are set out under three themes that link back to the challenges outlined earlier in this report:

- **Implement the Food Access Plan so people can afford nutritious food:** The Food Access Plan has been approved by the Council's Strategy & Resources committee. It continues to be developed and implemented and connects to the citywide cost-of-living emergency response.
- **Create environments where healthier and more sustainable food choices are accessible and abundant.**
- **Feed tomorrow as well as today - increase the sustainability and resilience of our food system.**

1.17 The strategy is broad in scope and sets out a number of areas where the Council could develop food policy. Feedback from members is sought regarding where they would prioritise further policy development. It is specifically recommended that development of a

healthy and sustainable policy for food that is sold and served in council owned venues and spaces is prioritised. It is also specifically recommended that the Council commits to working with local communities and partners to identify spaces where sustainable food production and provision can be accommodated. Both commitments have the potential to bring wide ranging impacts, contributing to better health, Net Zero and local economic development.

1.18 **IMPROVING DIET AND OBESITY PREVENTION COMMISSIONING MODEL 2024-2029**

1.19 The current obesity prevention commissioning model and related contracts come to the end of their natural terms between April 2024 and September 2024. It is proposed that as current contracts come to an end a new model is implemented that aligns with the new Food Strategy and takes account of; learning from current initiatives; the latest evidence; service user feedback; and the changing delivery context (particularly post Covid and during the cost-of-living crisis).

1.20 In 2018 Cabinet approved funding of £658k per year from the Public Health Grant for initiatives that support improved nutrition and obesity prevention. Current spend is £648k per year (reflecting weight management support coming under budget following a procurement exercise). It is proposed that investment is increased back to £658k per year. It should be noted that due to inflationary pressures this modest increase in investment reflects real terms cuts to services and this may impact outcomes.

1.21 **Current improving diet and obesity prevention commissioning model**

1.22 The current commissioning model (2019-2024) sought to strike a balance between population level interventions and interventions that support individuals to make healthier choices. Interventions address the known influences on food choices and the evidence base on effective ways to change dietary behaviours on a large scale. They can be grouped under the following themes:

1.23 Theme 1: Improving food environments. This was implemented via the Eat Smart initiative delivered by Learn Sheffield that supports schools to implement a whole school approach to food. And the Healthy Early Years award scheme, delivered by the Council, supporting early years settings to develop health promoting environments. This settings-based approach reflects the evidence that a healthier food environment is key to supporting healthier food choices. A focus on schools and early years settings reflects a preventive, early intervention approach. Evidence shows that whole school/setting approaches to food can lead to an increased uptake of school meals, an increase in healthy eating behaviours, increased cooking and growing skills and more knowledge about nutrition.

- 1.24 Theme 2: Mass media and marketing campaigns. Mass media and social marketing campaigns using evidence-based techniques have the potential to change behaviour on a large scale thus making them cost effective. There are examples of successful campaigns that have been used to reduce sugary drinks consumption. The Sheffield is Sweet Enough brand was developed to raise the profile of actions that are being taken citywide to improve food environments and to engage wider stakeholders including businesses and local residents.
- 1.25 Theme 3: Increasing access to healthy food for those experiencing food poverty. The ability to afford nutritious food is one of the greatest barriers to accessing a healthy diet being faced by households on low incomes. Most recently work has focussed on the provision of School Holiday Hunger “Healthy Holidays” programmes, ensuring a level of provision across all school holiday periods – the Department for Education funded Holiday Activities and Food Programme can only be delivered during Easter, summer and Christmas school holidays. There was also an additional £200k made available during 22/23 to support the implementation of the Food Access Plan.
- 1.26 Theme 4: Support individuals to improve their diet and achieve/maintain a healthy weight. Weight management and healthy lifestyle support is provided for adults, school age children and parents with very young children. Support is targeted towards those living in areas of deprivation or from underserved communities. Training for frontline staff is provided as part of this offer to ensure the workforce are equipped to deliver compassionate and supportive brief interventions to those who have overweight or obesity.
- 1.27 Current funding and contract arrangements are outlined below and in section 4, table 3.
- 1.28 Table 1

Initiative	Theme supported	Annual spend	Provider and funding mechanism	Contract end date
Start Well and Healthy Early Years - Support for Early Years settings to adopt healthy early years standards, deliver training to early years staff and deliver Start Well family programmes	1 and 4	£50k*	Council – internal service level agreement	NA
Tier 2 child and adult weight management and delivery of Brief Intervention training	4	£290k	Zest – contract awarded following open tender	March 2024
Whole School Approach to Food (Eat Smart)	1	£123k	Learn Sheffield – contract via	August 2024

			direct award	
Mass media and marketing (Sheffield is Sweet Enough)	2	£75k	The Foundry - contract awarded following open tender	June 2024
Food Poverty initiatives / Food Access Plan	3	£100k	Multiple community organisations - grant	various, all during 2023
Unallocated – historic underspend from the Start Well initiative, currently used to support Food Access Plan and ShefFood partnership coordination	3	£10k	various	NA
		£648k		

*£32,000 of this supports a 2 year pilot role linking Start Well, the 0-9 service and the family hubs work

1.29 **Health trends and impact of current initiatives**

- 1.30 Rates of overweight and obesity in reception and year 6 are relatively stable. 23.2% of children in reception in Sheffield were overweight or very overweight in 2021/22 (similar to national average) rising to 39.6% by year 6 (statistically worse than the national average). Trends within Sheffield have seen inequalities between the most and least deprived 10% of children widening which is a worrying trend.
- 1.31 Rates of overweight and obesity in adults in Sheffield have been relatively stable but declined slightly to 60.4% in 2021/22 (statistically lower than national average).
- 1.32 Only 30.5% of adults in Sheffield report consuming the recommended 5 portions of fruit and veg a day in 2021/22 (statistically lower than national average)
- 1.33 The causes of poor diet, overweight and obesity are complex and wide ranging. It is therefore difficult to evaluate the effectiveness of local services by looking at changes in levels of overweight and obesity or in dietary habits. External factors such as the impact of the pandemic, the cost-of-living-crisis and a lack of national regulation that would support our local efforts are likely to have a greater impact than local initiatives. This doesn't mean that local initiatives aren't making a difference and it is difficult to tell what the situation would be without their mitigating impact.
- 1.34 Examples of the impact and reach of existing local initiatives to improve diet and reduce obesity are:
- 336 family and 2479 adult referrals to weight management support (2022/23)

- 176 front line staff trained in conducting compassionate brief interventions about weight (2022/23)
- 70 local schools have enrolled for the Food For Life award (of these 13 have achieved Bronze Award and one school has achieved Silver)
- 115 families were supported by the Start Well early years programme and 43 new early years settings attended Healthy Early Years training and met or maintained Healthy Early Years Standards (2022/23).
- Food Access plan delivered additional advice in reach to food banks, creation of food store, over 20 additional Food Works partner hubs, established partnership working via Food Ladders network

Gap analysis

- 1.35 The following areas of work have been identified as gaps in capacity/focus locally based on the core elements of a whole systems approach to obesity/healthy diet.
- 1.36 Food environment and food retail: Fairer, Healthier, Greener prioritises improving people’s physical access to nutritious food and protecting people from harmful commercial influences on diet. There are a number of policy levers and strategic influences that the Council can use to achieve this objective, for example developing a modern advertising and sponsorships policy, placing controls on new fast-food outlets opening near to secondary schools, and making healthier food a requirement in contracts and leases for venues that serve food. We are also supporting key settings – early years and schools, to have the best possible food environment. However, the majority of commercial food outlets will fall outside of our influence. Promised government restrictions such as those on product placement and promotions have largely been delayed or are only applied to the largest employers. An area of work that could be developed is voluntary schemes with food businesses and wholesalers to explore ways to make healthier choices easier and more accessible to customers without impacting on overall profitability. This work could be focussed in areas of deprivation and near to secondary schools to have maximum impact on prevention and inequality.
- 1.37 Targeted weight management support: Utilising additional NHS funding made available in 2021/22 we were able to pilot a different approach to delivering weight management support that prioritised underserved communities. The result of this was improved uptake and outcomes amongst these groups plus additional expertise and capacity relating to nutrition and weight being developed in local community organisations. It is proposed that the new weight management service model for adults builds on this learning. It is also recommended that the children and families aspect of weight management support aligns closely with Family Hubs and the broader 0-19 offer in order to support families holistic needs.
- 1.38 Policy capacity: A large focus of Fairer, Healthier, Greener is on developing and utilising the public sector’s influence to create a healthier and more sustainable food system, which will in turn have population-

wide benefits. This work will require additional staffing capacity to develop policy and to work alongside relevant stakeholders. Funding from the improved nutrition and obesity prevention budget could be allocated to support this activity.

1.39 Proposed commissioning model 2024-2029

1.40 It is proposed that the broad areas of activity remain largely the same as at present. They continue to reflect the evidence base and the priorities of the new food strategy Fairer, Healthier, Greener.

1.41 However, the gap analysis highlights where the objectives of Fairer, Healthier, Greener could be more fully addressed by slight changes in emphasis. There are also inflationary cost pressures that affect some initiatives more than others, particularly front-line services. For these reasons adjustments to funding are proposed in table 2.

1.42 Proposed areas of investment under the new improving nutrition and obesity prevention commissioning model are outlined in the table below.

1.43 Table 2: Proposed funding allocations, new commissioning model

Initiative	Theme supported	Annual value	Funding method	Comments
Start Well - Support for Early Years settings to adopt healthy early years standards, deliver training to early years staff and deliver Start Well family programmes	1 and 4	£50k, possibly reducing to £18k from 25/26*	Council	Continue to deliver within the Council, ensure close alignment to family hubs and 0-19 service
Tier 2 child and adult weight management and delivery of Brief Intervention training	4	£390k	External contract	There will be a requirement for the lead provider to subcontract with community organisations
Whole School Approaches to Food/ schools focussed initiatives	1	£100k	TBC	Efficiencies and reprioritisation will enable budget reduction
Implementation of Food Access Plan (food poverty initiatives)	3	£100k	Grants	Continuation of existing schemes including Healthy Holidays, collaborative food sourcing and affordable food clubs

Contribution to ShefFood coordinator post	1 and 3	£10k	Grant	Role supports food policy development in relation to growing, food poverty and local food economy.
unallocated	-	£8k in 24/25, possibly increasing to £40k from 25/26*		A review of the Sheffield is Sweet Enough campaign and options appraisal will inform a future decision regarding the use of this funding
		£658k		

*Pending evaluation of 2 year Family Hub pilot role

- 1.44 Ongoing evaluation, stakeholder consultation and market testing will be undertaken as required to determine the scope and delivery model of each intervention. Additional decisions regarding specific initiatives will be sought as necessary, following the scheme of delegation.
- 1.45 **Rationale for new commissioning model and summary of proposed changes**
- 1.46 Increase in weight management funding by £100k per year
The cost of delivering this type of intervention has increased in the last 5 years due to inflation and that is reflected in the increased funding allocation.
- 1.47 Learning from the service evaluation and public consultation shows that a multi provider approach will support better engagement from underserved communities. This should improve outcomes and impact positively on inequalities but carries additional management requirements. A competitive tender process will provide assurance of quality and value for money.
- 1.48 Reduction in funding for the whole school approach to food/ schools focussed initiatives by £23k per year
This work remains an important part of the commissioning model and food strategy. It focuses on prevention through its work in schools and also prioritises a systems approach including supporting improved food environment and culture in schools. These interventions are supported by the evidence base and align with the priorities in the new food strategy.
- 1.49 The required savings could be made in 2 ways:
- a) Simplify the contract requirements – currently the provider is asked to work with primary and secondary schools plus additional non-school settings. The new model could focus on schools with work to improve

food in other settings being led by the public health team within the Council in partnership with ShefFood (good food economy workstream)

- b) Develop a new funding agreement for the supporting resources. These are currently purchased from Food For Life via Learn Sheffield. The current suite of resources and support is not being fully utilised and therefore a new agreement could be negotiated that better reflects the needs of the project and the schools it serves.
- 1.50 The current contract with Learn Sheffield is in place until 31st August 2024. A service evaluation, stakeholder consultation and options appraisal will inform a new service model from September 2024. This report (12th July 2023) asks Strategy and Resources Committee to approve funding for this broad area of activity. Additional member consultation, and relevant decision-making processes will follow to inform the development of the service model from September 2024 onwards.
- 1.51 Pause in mass marketing and campaign activity pending evaluation and review
The current contract for this work comes to a natural end in June 2024. The Council has the intellectual property for all campaign assets and can continue to use these after the contract end date. As this is not a front-line service there is no risk posed by a gap in delivery. If the campaign was to continue it would be on a reduced scale due to the proposed redistribution of funding to other initiatives (table 2). However, as many resources and assets were produced during the initial phase of the campaign, the requirement for new resources will be lower.
- 1.52 An evaluation of the impact of the campaign will be undertaken alongside an options appraisal that considers the gap analysis outlined in this paper. This will inform future recommendations regarding whether this campaign continues and in what form. Relevant decision-making processes will be followed at this stage.
- 1.53 Provide recurrent match funding for ShefFood coordinator role
It is proposed that the Council makes a £10k recurrent contribution to this role. The partnership will also seek to bring in funding from additional sources (e.g. they have just secured synergy collaborative research funding) over the period of investment as part of their sustainability model, with the council contribution providing stability. The Council is part of the ShefFood steering group.
- 1.54 The ShefFood partnership is integral to the implementation of Fairer, Healthier, Greener and maintains cross-sector working groups delivering on food growing, local food economy, food and health, food poverty and creating a good food movement for Sheffield. It also adds much needed capacity to support local food policy development, one of the gaps identified by the gap analysis.
- 1.55 Maintain Start Well and Healthy Early Years programmes
The delivery of these programmes is now embedded in the work of the

Council's Community Early Years Practitioners. Funding via the improving nutrition and obesity prevention programme supports the delivery of specific aspects of this programme in particular the Start Well Family programmes. Intervention in the early years is high priority and fits with the Great Start in Life Strategy and the development of Family Hubs. A 2 year pilot role with a focus on early years healthy weight is being funded partly by public health grant funding and partly by Family Hubs funding. After the initial period recommendations will be made regarding whether this dedicated role should continue or be incorporated into mainstream delivery.

1.56 Maintain funding for initiatives aligned to Food Access Plan

Food poverty remains high priority due to the cost-of-living crisis and rising costs of food, particularly nutritious food. Since the previous commissioning strategy was approved in 2018/19 the Council has developed its Food Access Plan which was approved by Strategy and Resources Committee in July 2022 and forms part of the cost-of-living emergency response. Ongoing funding will enable the Council to fund a range of initiatives that support the ongoing implementation of the Food Access Plan.

1.57 **Impact on Health Inequalities**

1.58 Poor diet and unhealthy weight are the biggest contributors to ill health and early death in our city. The health consequences of poor diet include increased risk of chronic diseases such as obesity, heart disease, diabetes, high blood pressure and cancer. The most deprived communities in the city are eating the least healthily and are more likely to experience the negative health consequences of this. For example:

- 1.59
- More than 1 in 5 Sheffield children were overweight or obese when they started school (age 4/5 years), this increases to more than 1 in 3 by the time they reach Year 6 (age 10/11 years). There is a strong social gradient in childhood obesity rates and the gap has been widening in Sheffield (OHID)
 - More than 2 in 5 Sheffield children experience tooth decay by age 5. Children in Sheffield are more than twice as likely to have teeth removed than the national average and rates are highest in areas of deprivation. (OHID)
 - 22% of adults in Sheffield were estimated to have experienced a degree of food insecurity in 2021 (Blake and Moretti, 2021). The poorest 10% of UK households would need to spend 74% of their disposable income on food to meet the Eatwell Guide costs. This is compared to only 6% of disposable income in the richest 10% (Food Foundation, 2022)
 - Five-year-olds in Britain are on average up to seven centimetres shorter than their equivalents in other wealthy nations, with poor diet being a major contributing factor.

1.60 By focussing predominantly on addressing affordability and availability of

nutritious food (rather than on individual behaviour change) the Food Strategy seeks to address the systemic causes of and therefore the systemic inequalities in diet related ill health.

- 1.61 The initiatives funded through the revised commissioning model will have a focus on reducing inequalities. For example, Eat Smart will target schools in the most deprived parts of the city and where child obesity levels are higher than average. Weight Management support will be located in areas of deprivation and community providers with reach into specific underserved communities will be engaged.
- 1.62 The Food Strategy also aims to reduce the climate impact of our local food system which will help the Council to achieve Net Zero. Climate change is a major contributing factor in recent food price inflation. If we don't play our part in tackling climate change these trends will continue to impact the poorest in society and widen inequalities.

2. HOW DOES THIS DECISION CONTRIBUTE?

- 2.1 An effective Food Strategy and the initiatives that underpin it will support every Council Strategic goal.
- 2.2 Net Zero: The Food Strategy supports the Council's Net Zero goal by outlining ways that we can use our influence and assets to reduce the environmental impact of our food system e.g., household food waste collection, sustainable catering policies, supporting local food production. Alongside a reduction in carbon emissions, the environmental benefits of local food production include improvements in soil health, biodiversity, flood protection and urban temperature control.
- 2.3 Fair, inclusive and empowered communities; Reducing inequalities in access to food and reducing health inequalities that are driven by poor nutrition are key aims of the Food Strategy and the initiatives that will be commissioned to support its implementation. Initiatives will be developed with specific objectives to engage underserved communities.
- 2.4 Strong and connected neighbourhoods which people are happy to call home; The role of food as a tool for community development is a theme within the food strategy, in particular the work on tackling food poverty. Schemes such as social eating, community food growing initiatives and affordable food clubs all support connected neighbourhoods.
- 2.5 Tackling inequalities and supporting people through the cost-of-living crisis; The Food Access Plan forms part of the Food Strategy and focusses on improving financial access to food and supporting people through the cost-of-living crisis and beyond. Poor diet is a major cause of health inequalities, leading to ill-health and early death. In general, healthier foods tend to be more expensive than less healthy, calorie dense processed foods and are therefore less accessible to those on the

lowest incomes. Factors such as child and adult obesity, proportion of children and adults consuming 5-A-Day and child tooth decay are far more prevalent in lower socio-economic groups and sustain inequalities throughout the life course by impacting on wider determinants of health including school attainment and employment. This proposal aims to reduce inequalities caused by poor diet by investing most heavily in those areas and groups where the negative health impacts are greatest and by putting additional emphasis on structural changes that are known to have a positive impact on health inequalities.

- 2.6 Healthy Lives and Wellbeing for all; Poor diet is the leading cause of preventable ill health in the UK. The strategy and commissioning model aim to improve diet at population level and therefore reduce the negative health consequences associated with poor diet, including obesity.
- 2.7 Clean economic growth; The Food Strategy outlines a number of ways in which the Council and our partners can support a more localised and sustainable food system, creating jobs and growth in a way that does not harm people or planet.
- 2.8 Happy young people who have the start they need for the future they want; The Food Strategy and the initiatives that will be commissioned to support its implementation have a large focus on early intervention and on children and young people. Start Well, Healthy Early Years, Eat Smart and Children and Young People's weight management support are all aimed at this age group. Related programmes such as Holiday Activities and Food all contribute to a good start in life and reducing inequalities in opportunity.

3. HAS THERE BEEN ANY CONSULTATION?

- 3.1 There is no statutory requirement to consult on this proposal. Discussions have taken place with a range of stakeholders during the development of the strategy and have informed the proposals. These include the Food and Obesity board partners and other key stakeholders.
- 3.2 Market testing has taken place to inform the re-commissioning of the Weight Management Services for Adults and Children. A public consultation has also been carried out regarding weight management support with targeted approaches to specific communities who are at risk of being underserved by services. Feedback from both exercises has been incorporated into our recommended approach and will be built into future service models.
- 3.3 Further consultation with key partners will take place as the specific initiatives set out the commissioning strategy are further developed. Service users will be engaged in the development of services/interventions and ongoing evaluations. Service user feedback is routinely incorporated into service Key Performance Indicators.

4. RISK ANALYSIS AND IMPLICATIONS OF THE DECISION

4.1 Equality Implications

- 4.1.1 Food/diet is still the biggest preventable driver of disease, death and health inequalities. The new Food Strategy and commissioned services aim to positively impact this.
- 4.1.2 The EIA identifies many ways in which the strategy is intended to impact positively on different cohorts. People are expected to be impacted across almost all the categories assessed by the EIA:
- Protected characteristics – Age, Disability, Gender Reassignment, Pregnancy/Maternity, Race, Religion/Belief, Sex, Sexual Orientation
 - Other equality interests – Carers, Cohesion, Health, Partners, Poverty & Financial Inclusion, Voluntary/Community & Faith Sectors
- 4.1.3 Services and initiatives will continue to be tailored and targeted to those in high priority groups (as identified by the Health Needs Assessment and Equalities Impact Assessment) including:
- Food security: people living in areas of deprivation; BAME communities, women, single parent households, people living with disabilities; pregnant women, carers, LGBTQ community
 - Healthy weight and diet: people living with overweight or obesity; people living in areas of deprivation; pregnancy; early years, people living with disabilities, BAME groups
- 4.1.4 Specific measures that will positively impact on equalities are:
- Continue to implement upstream measures that improve our food environment including Food Access Plan (poverty)
 - Develop a community-based approach to delivering weight management services that reduces barriers to accessing the service and improve health outcomes (partners, VCFS, poverty, disability, race)
 - All services and place-based interventions will collect equalities monitoring data and will target areas of deprivation and BAME groups, with KPIs and contract monitoring used as tools to ensure equity of access (race, age, gender, poverty, disability)
 - Service specifications will set out that operators must have robust EDI policies and that staff are trained appropriately in the importance of health inequalities and equity, and services are culturally appropriate (race, disability, LGBTQ)
 - Public facing resources will be developed in a variety of languages with translation services and easy read formats where necessary. Appropriate services will also aim to employ local BAME organisations to do translation where possible to foster trust and familiarity for local populations (disability, race, poverty)
 - Focus on work early in the life course – (age)
 - Strengthen relationships with local stakeholders that predominantly work with SEN and disabilities (disabilities, cohesion, partners)

- The re-commissioned Tier 2 Weight Management Service will screen for Binge Eating Disorder, which is recognised as a serious mental health condition by DSM-5 (disability)
- We will continue working with local stakeholders to improve maternal pathways, and the new service specification for Adult Tier 2 Weight Management Services will include eligibility criteria for pregnant women, with the aim to support women with implementing healthy habits and behaviours (pregnancy)

4.2 Financial and Commercial Implications

4.2.1 Table 3: Current budget

Budget 2023/2024	Q1	Q2	Q3	Q4	Annual budget
Weight management	£72,500	£72,500	£72,500	£72,500	£290,000
Eat Smart	£30,750	£30,750	£30,750	£30,750	£123,000
Start Well	£15,000	£15,000	£15,000	£15,000	£60,000
Sheffield is Sweet Enough	£18,750	£18,750	£18,750	£18,750	£75,000
Food Access Plan	£25,000	£25,000	£25,000	£25,000	£100,000
					£648,000

4.2.2 Table 4: Budget 2024-2025

Budget 2024/25	Q1	Q2	Q3	Q4	Annual budget
Weight management	£97,500	£97,500	£97,500	£97,500	£390,000
Eat Smart*/ school focussed activity	£0	£8,333	£25,000	£25,000	£58,333
Start Well	£12,500	£12,500	£12,500	£12,500	£50,000
Sheffield is Sweet Enough	£18,750	£0	£0	£0	£18,750
Food Access Plan	£25,000	£25,000	£25,000	£25,000	£100,000
ShefFood coordinator	£10,000	£0	£0	£0	£10,000
Food environment, campaigns and internal policy work					£30,917
					£658,000

*Apr-Aug funded through existing project underspend. New contract to commence 1st Sept 2024

4.2.3 Table 5: Budget 2025/2026, 2026/2027, 2027/2028 and 2028/2029

Budget 2025/26	Q1	Q2	Q3	Q4	Annual budget
Weight management	£97,500	£97,500	£97,500	£97,500	£390,000

School focussed activity	£25,000	£25,000	£25,000	£25,000	£100,000
Start Well	£12,500	£12,500	£12,500	£12,500	£50,000*
Food Access Plan	£25,000	£25,000	£25,000	£25,000	£100,000
ShefFood coordinator	£10,000	£0	£0	£0	£10,000
Food environment, campaigns and internal policy work					£8,000*
					£658,000

*Up to £32,000 Start well money may be reallocated to food environment, campaigns and internal policy work at the end of the 2 year Family Hub role pilot

4.2.4 The changes proposed require a further £10,000 to be sought from the Public Health grant allocation, which has sufficient funds to cover the increase. Committing to maintain investment in improved nutrition and obesity prevention demonstrates a strong commitment to these issues as two of the most serious public health challenges of the 21st century.

4.2.5 All procurement and contract award activity will be delivered via a procurement professional from Financial and Commercial Services. This will be in line with Contract Standing Orders and the Public Contracts Regulations 2015. The Weight Management tender will be a 5-year contract and we have already done market engagement activity which shows that there is a market for this service.

4.2.6 Existing external contracts end on the following dates:

- Weight management 31st March 2024
- Eat Smart (whole school approach to food) 31st August 2024
- Sheffield is Sweet Enough, 30th June 2024

4.2.7 The Council will not incur additional costs when these contracts end. Any new contract(s), grants or service level agreements will be monitored against agreed objectives or performance indicators to ensure value for money and effective use of the Public Health budget.

4.2.8 The Food Strategy has no direct financial implication beyond the commissioning model that is outlined in this report. A range of policy options are proposed by the Food Strategy. Where these have funding implications a business case will be developed, and the scheme of delegation will be followed to allow decisions to be taken on a case-by-case basis

4.3 Legal Implications

4.3.1 In accordance with Section 2B of the National Health Service Act 2006, *'each local authority must take such steps as it considers appropriate for improving the health of the people in its area'*.

4.3.2 Different steps detailed within the act are able to be taken to achieve this, this includes but is not limited to providing information and advice,

providing services or facilities designed to promote healthy living, providing financial incentives to encourage individuals to adopt healthier lifestyles and making available the services of any person or any facilities.

- 4.3.3 The Food Strategy and proposed commissioning model outlined in this report will support the Council in achieving this and improving the health of the people in Sheffield.
- 4.3.4 Any contracts proposed within this report must be procured and awarded in accordance with the Councils Contract Standing Orders and the Public Contracts Regulations 2015 (or any successor legislation).
- 4.3.5 Any grants that are proposed must be assessed in accordance with the Subsidy Control Act 2022.
- 4.3.6 The Council must comply with all applicable legislation and regulations including but not limited to UK GDPR, the Data Protection Act 2018, Equality Act 2010 and the Subsidy Control Act 2022.

4.4 Climate Implications

- 4.4.1 An explicit aim of Fairer, Healthier, Greener is for the Council to use our influence and leadership to restore nature and halt climate change. The overall impact of the strategy is expected to be a reduction in CO₂e emissions compared to before, helping the Council to achieve Net Zero. Fairer, Healthier, Greener is a high-level strategy and therefore tangible outputs are not yet known. Full CIA's will be undertaken for specific projects and initiatives as required as part of the strategy's implementation.
- 4.4.2 Strategy and Resources Committee are also asked to approve the 'Improving diet, preventing obesity proposed commissioning model 2024-29.' There are ways in which the Council can reduce the CO₂e emissions of services that are commissioned through procurement and contract management processes. For example, bidders will be required to provide their carbon reduction strategy and examples of how this is being implemented.

4.5 Other Implications NA

5. **ALTERNATIVE OPTIONS CONSIDERED**

- 5.1 Renew the 2018 Food Strategy.
The 2018 Food Strategy had a primary focus on nutrition. A motion was passed in 2021 which committed the Council to develop a new Food Strategy which a broader set of outcomes. The new Food Strategy also

better reflects the Council's Net Zero aspirations and has been updated to take account of the significant impact of the pandemic and subsequent cost of living crisis on people's ability to access nutritious food.

5.2 Re-commission or extend current contracts and initiatives at the current level of funding.

The broad approach to tackling poor diet and obesity is to remain the same as it continues to reflect an evidence based, whole-systems approach. However, as outlined in this report, service reviews and analysis of Sheffield's programme for improving diet and preventing obesity identified some cost pressures, opportunities for efficiencies and gaps in activity which can be partially addressed through re-profiling of funding across the priorities.

5.3 Bring weight management services in house.

It is recommended that weight management services be put out to open tender as has been the case since these services were first established. Going through an open tender process will enable us to ensure value for money and secure an external provider with specialist expertise and experience delivering this service.

6. REASONS FOR RECOMMENDATIONS

6.1 The proposal set before the Strategy and Resources Committee is the preferred option because:

6.2 Poverty, poor diet and the impacts of climate change are some of the most serious public health challenges of the 21st century. Current local trends for dietary indicators and obesity are worsening in many cases and inequalities are widening. Without action, the health of individuals and of our planet will continue to worsen, health inequalities associated with poor diet obesity will persist and the economic and social costs will increase to unsustainable levels.

6.3 The proposed improving nutrition and obesity prevention commissioning model 2024-2029 is based on analysis of local need, reviews of existing local initiatives, service user feedback, and draws on good practice and evidence of what works. It builds on learning from the 2019-2024 commissioning strategy and represents a refinement of this approach within the available funding rather than being a radical departure.