

OBESITY INTERVIEW SCHEDULE FOR LOCAL CONTACTS

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 Role: Health Improvement Practitioner
 NHS Board area: NHS Shetland
 Date of completion:

Food

Question 1: Are there any local plans or activities to improve engagement with healthy food? If not, please state the barriers. For example:

	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
I. Implementation of national policy (route map 2010) by (e.g.) environmental health?		x				
II. Implementing nutritional standards for the vulnerable elderly in care settings?				x		

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III. Action on the Scottish Grocers Federation Healthy living Programme?				x		
IV. Award of Healthy Living awards?		x				
V. Working with small and medium sized food enterprises to find high impact interventions?				x		
VI. Improving access to healthy food in deprived areas, for example through community education?		x				
VII. Community growing or retailing their own food projects?	x					Unst URGE project is a community growing project that provides fruit and vegetables to community. Polytunnel project are run throughout Shetland in different communities. Individuals or groups share polytunnels to growth their own fruit ad vegetables. Local group, ' Transition Shetland' is a community group that has been set up and is concerned with imagining and planning for Shetland's future. They run education sessions about growing your own.
VIII. Fast food near schools?				x		Lack of interest from Planning Department. Difficult to influence during economic downturn.

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IX. Does your health board area have a strategic plan for healthy food? (please if possible include a copy with your response)		x				
X.Anything else?						

Please give an example of good practice in improving engagement with healthy food for obesity prevention from your health board area below:

Economic environment

Question 2: Are there any local plans or activities to change the local economic environment? If not, please state the barriers. For example:

	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
I. Vending machines in schools? (Please state the issues if there are any differences in the policies for staff and for children)					x	No vending machines
II. Any Action on the local economic environment in Public buildings (not just vending machines)?		x				
III. Any Action on the local economic environment in Workplaces (not just vending machines)?		x				
IV. Implementation of national policy (by, for example, food standards officers)?						
o labelling clearly identifies ingredients (and is there a traffic light system)?		x				
o Reformulation?				x		

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	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
o portion sizes?				x		
V. Anything else?						

Please give an example of good practice in changing the local economic environment for obesity prevention from your health board area below:

Socio-cultural environment

Question 3: Are there any local plans or activities to change the socio-cultural environment? If not, please state the barriers. For example:

	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
I. Reducing television viewing? (because of marketing of unhealthy food, sedentary time and snacking opportunity),		x				Reducing sedentary time addressed one-one as part of child healthy weight interventions and through school CHW interventions
II. Media and educational campaigns to encourage physical activity – including mass events?					x	
III. Implementation of exercise referral schemes?			x			This was implemented in the past but has since ceased due to lack of funding to support service. Planned to review as part of Obesity & Active Lives Strategies

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	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
						– possibly to use voucher scheme rather than Exercise referral.
IV. Implementation of social prescribing schemes?				x		
V. Roll out of counterweight programmes?	x					Counterweight currently rolled out and is available in 9 out of the 10 health centres in Shetland as well as available through Health Improvement. Counterweight programme is supported by Dietetics and Health Improvement. Barriers to implementation have been:- 1. Alternative weight reduction service already being delivered in practice. 2. Having a buddy Dietician in place to initially support practices.
VI. Action on promoting active travel?			x			
VII. Healthy diet?			x			
VIII. Anything else?						

Please give an example of good practice changing the socio-cultural environment for obesity prevention from your health board area below:

Physical activity

Question 4: Are there any local plans or activities to increase physical activity levels for children, adults and adults in later life? If not, please state the barriers. For example:

	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
I. Are integrated impact assessments built in to planning procedures around improvements to cycling and walking routes?			x			Not yet, but under development.
II. Is active travel prioritised in planning?			x			New Local development Plan states 'car free designs may be considered acceptable' in new building developments
III. Has there been any action locally to progress the delivery of the cycle action plan for Scotland?		x				
IV. Has there been action on making green space other than play areas safe so as to encourage its use for physical activity?			x			
V. Has there been any action on the creation of pathways connecting the encouragement of the use of local leisure services by children at school to their continued use after they leave school and by the wider community?				x		
VI. Have there been any Institute for Sport, Parks and Leisure (ISPAL) physical activity accreditation awards					x	
VII. Have you implemented a Healthy Weight Community Project?* (Please comment on your sustainability plan)		x				Not EPODE, NHS Shetland has developed their own Community Fund where groups who cater for young people aged between 2-15years can apply for up to £1000 for projects that have both a

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						physical activity and healthy eating element.
VIII. Any involvement with 'Paths to health'?	x					
IX. Any involvement with 'Jog Scotland'?	x					
X. Any involvement with 'Living streets'?				x		
XI. 'Active schools'?	x					Good relationship with Active Schools in the past, but they seem to be moving more towards promoting excellence rather than inclusion and participation.

XII. 'Play@home'?	x					
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*HWC based on the EPODE model and piloted by the Scottish Government ending March 2012

XIII. Any involvement with BTCV led 'Green Gyms' programme?						
XIV. Other action on:						
a. local transport plans						
b. school travel plans						
c. facilities for children to be active						
d. supporting young women and families to be active?						
XV. Does your health board area have a strategic plan for physical activity? (please if possible include a copy with your response)		x				Active Lives Strategy 2012 for Shetland currently awaiting approval of NHS board. Sports Strategy 2012 also developed and awaiting approval. Real battle in persuading Sport Strategy Development to be inclusive rather than focus on excellence and exclusivity.

Please give an example of good practice to increase physical activity levels for children, adults and adults in later life from your health board area below:

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Early years

Question 5: Are there any local plans or activities to reduce obesity/establish obesity preventing behaviours in infants and young children? If not, please state the barriers. For example, has there been any local action on:

	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
I. maternal obesity?	x		x			Counterweight currently being delivered as part of Fertility clinic by maternity staff to those who qualify. The Maternity service is in the process of implementing pre-pregnancy plan for women with obesity and has developed an antenatal care pathway for those who present with obesity.
II. encouraging breastfeeding?	x					Gilbert Bain Hospital holds UNICEF Baby Friendly award and NHS Shetland have recently passed stage 1 of the Community Baby Friendly. Breastfeeding Network has also established a group for peer supporting breastfeeding women.
III. parental education about healthy diets and exercise for children?	x					Public Health Nurses attend parents evening to give information about healthy lifestyles. Information sent home as part of Child healthy Weight School based programme. Exercise classes for early years provided by some leisure centres e.g. baby gym. Information on healthy diets given by oral health nurses as per delivery of child smile. Also Counterweight Families

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	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
IV. Broadening tastes in the early years? (including from nursery years onwards)	x					Baby –led weaning promoted by health visitors. Free fruit in schools P1 & 2 and nursery promote healthy snacks
V. Food education ‘from plough to plate’?	x					One or 2 Junior high schools do this, but good uptake of eco-schools.
VI. Child healthy weight intervention programmes?	x					Two one-one family based interventions currently being delivered, SCOTT and Counterweight Families, as well as school based programme.
VII. ‘Active schools’?	x					Active Schools currently run classes throughout Shetland Schools. Also link in with the Child Healthy Weight Schools Programme and deliver activity part of this.
VIII. ‘Cooking buses’?					x	
IX. ‘Play@home’?	x					Play@home books given out by health visitors to all mother with encouragement to use. Books also promoted at local family events such as Children and Family Day.
X. Does your health board area have a strategic plan for obesity prevention in children and young people? (please if possible include a copy with your response)		x				Draft Obesity Strategy currently out for consultation.

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Please give an example of good practice in obesity prevention in infants or young children from your health board area below:

Breastfeeding promotions and education are taken up highly in Shetland, these give children the best nutritional start in life and play a essential role in preventing obesity in future. Engagement with parents at this early stage also gives the opportunity to provide them with relevant information for appropriately feeding their child in the future.

Working lives

Question 6: Are there any local plans or activities happening around obesity prevention in local workplaces? If not, please state the barriers. For example:

	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
I. How is participation in the Healthy Living Award being encouraged locally?	x					Healthy Living Award is promoted as part of HWL with all business that take part.
II. Are public health and occupational health encouraging healthy weight management partnerships?	x					Counterweight is promoted and delivered through public health and occupation health. Employee health checks used as point of assessment.
III. How is access to public sector land being encouraged locally for walking and cycling?		x				Bike racks have been put into place to promote employees to cycle to and during work.
IV. How are local businesses being encouraged to support employees' participation in 'Active Nation'?		x				Through Healthy Working Lives
V. Are interactive employee-use weight tracking tools in use in any local workplace?						None that we are aware of.
VI. Does your health board area have a strategic plan for obesity prevention in local workplaces? (please if possible include a copy with your response)		x				Draft Obesity Strategy currently out for consultation which includes workplace plans.

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Please give an example of good practice in obesity prevention obesity prevention in local workplaces from your health board area below:

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Other activity updates

Question 7: What other local obesity prevention plans or activities are there in the health board area? If not, please state the barriers.

	In place	In progress	Planned	No Plans	N/A	Details and Comments on response
Has any existing obesity prevention activity mentioned in the local health board area in the response to SOAR 2007 progressed further or ceased? Please refer to the response from your board to be found on the weblink below, naming each changed activity in a separate row within the relevant one of the five sections from the 2007 questionnaire below, and giving the new status. Please add rows within each section as necessary.						
7.1 Prevention in schools?		x				Child Healthy Weight School programme being rolled out in schools. Work currently being undertaken to develop healthy living education packs for schools that link with Health and Wellbeing aspects of Curriculum for Excellence. Oral Health department are currently undertaking a review into school tuckshops throughout Shetland, an action plan will be developed on completion to put in place any prevention and education measures.

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7.2 Prevention in nurseries?		x				Adventures in Foodland
7.3 Prevention in the community?			x			Draft Obesity Strategy is looking to influence policy design and making to have a positive effect of planning in the wider community. Obesity prevention and Child Healthy Weight written into Shetland Parenting Strategy (against much opposition!)
7.4 Prevention in public buildings and workplaces?	x					Prevention work through Healthy Working Lives. The three largest employers for Shetland -NHS Shetland, Shetland Islands Council (SIC) and BP Sullom Voe Oil Terminal – have all signed up to Healthy Working Lives with NHS and Sullom Voe both currently holding Gold standard and SIC going for Bronze.
7.5 Prevention in other workplaces?	x					Shetland wide information given out through local media and Health centres.
7.6 Has anything else happened on obesity prevention activity in the local health board area since mid 2007?						Mainly Counterweight and Child Healthy Weight Interventions
8. Is there anything else you would like to tell us about?						Real struggle in terms of stigma & people (professionals and decision makers) not wanting to talk about Obesity. E.g. not felt to be appropriate to include in Parenting Strategy. No sign up or support (or even understanding!) from Sports and Leisure services. How do we

						influence decision makers?
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Monitoring and Evaluation

Question 8: Please describe how you:

a) evaluate the effect of local obesity interventions?	Counterweight reports gathered from Health Centers routinely. Motivational sessions organized with practices who require more input.
b) monitor obesity?	Senior Planning and Information Officer currently looking into pulling data from all health centers to gain a true picture of obesity status in Shetland. This data can then be used to monitor obesity throughout Shetland and effectiveness of interventions given.