



**Paper for information: Government Updates on Nutrition
Related Activities
DH**

Agenda Item: 6

Please see attached paper for information.

Initiative/ work area	Summary/background of work (No more than 250 words)	Current position	Next steps	EVALUATION (if applicable)		
				Plans for evaluation? (what are the outputs or outcome measures of the initiative)	Date evaluation expected/ completed	Evaluation of process or impact?
Healthy Weight						
National Obesity Observatory	<p>The new National Obesity Observatory for England is being established to provide a single point of contact for wide-ranging authoritative information on data, evidence and practice related to obesity, overweight, underweight and their determinants. This specialist observatory is a member of the Association of Public Health Observatories and sits alongside the South East Public Health Observatory. The National Obesity Observatory will work closely with a wide range of organisations and will support policy makers and practitioners involved in obesity and related issues.</p> <p>National Obesity Observatory for England will undertake work in several key areas:</p> <ul style="list-style-type: none"> • Provide an authoritative source of data and evidence on obesity, overweight and their determinants • Co-ordinate surveillance on obesity and overweight • Analyse surveillance and indicator data, and report on progress against the new ambition set out in HWHL • Gather information on international best practice and develop links to the International Obesity Task Force, WHO, and other supranational bodies as appropriate <p>In addition to this the Observatory will act to coordinate or undertake specific time bound projects for the policy team. For example the HWHL strategy set out</p>	The National Obesity Observatory for England has been commissioned by the Department of Health Obesity Unit to support 'Healthy Weight, Healthy Lives'	<p>NOO to draft technical paper analysing - options for defining child obesity prevalence in England and seek input and comments from relevant SACN members</p> <p>SACN secretariat to set up meeting of relevant subgroup to discuss work</p>	Yes. We will publish an annual report on progress against the commitments in 'Healthy Weight, Healthy Lives', which we will use to develop and intensify our policy focus.		

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	a commitment for the OO to assess the strengths and weaknesses of using the International Obesity Task Force cut-offs for defining BMI against the 1990 UK Growth Reference Standards currently used. Consulting with the expert community as appropriate.					
National Child Measurement Programme	<p>Established in 2005, the NCMP has produced one of the largest collections of data on children's height and weight in the world. As part of the NCMP, children in Reception (aged 4–5 years) and Year 6 (aged 10–11 years) are weighed and measured during the school year, in order to inform local planning and delivery of services for children; and gather population-level surveillance data to allow analysis of trends in growth patterns and obesity.</p> <p>From September 2008, the PCTs will be expected to be routinely sending parents their child's results from the NCMP, or working towards implementing this policy. The NCMP is engaging with children and families about healthy lifestyles and helping parents understand the importance of healthy weight.</p>	<p>Results of the 2007/08 NCMP were published in December 2008.</p> <p>88% of eligible children (nearly 1 million children) were included.</p> <p>There was little or no difference in the prevalence of overweight and obese children in both age-groups, compared with the 2006/07 NCMP. However, it is too early to be confident that the levels of obesity and overweight among children have stabilised.</p> <p>The 2008/09 NCMP is now underway with around 50% of PCTs planning to implement routine feedback of results to parents to all or a sample of their eligible population.</p>	Continue to provide support for PCTs in sending results to parents.	Two phases of research planned. The first around routine feedback between Dec 2008 and Jan 2009, where we want to learn from those PCTs who choose to feedback using our suggested approach (letter/leaflet) – looking at both parents reactions/PCT resources. Then later in 2009, we plan to undertake a full evaluation of the NCMP.	<p>Phase 1: Routine Feedback planned for Dec 2008-Jan 2009. Feedback April 2009</p> <p>Phase2: Whole NCMP: Planned for October 2009. Feedback early 2010</p>	Both process and outcome focused.
Healthy Community	This £30M programme is a commitment in theme 3 of Healthy Weight, Healthy	9 Healthy Towns were announced in	Healthy Town's are now	Research specification out to tender. Response	Tbc	The first phase of the

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Challenge Fund	Lives.	November 09.	developing programme plans, ready for April 09 delivery.	deadline is end Jan 09.		evaluation will look at process
Nutrition						
Healthy Start Note: This scheme operates UK-wide. Most aspects are managed centrally by the Department of Health on behalf of all UK health departments.	<p>Healthy Start vouchers and vitamins replaced Welfare Food Scheme tokens and vitamins across the UK in November 2006. The scheme's purpose is to provide nutritional support and encouragement for breastfeeding and healthy eating to pregnant women and children under 4 years old in disadvantaged families. To qualify, pregnant women and children must be in families getting income support, income based jobseekers allowance, the highest rate of Child Tax Credit (without Working Tax Credit), or – from 27 October 2008 – income-related Employment and Support Allowance. Pregnant women under the age of 18 years old also qualify during pregnancy even if not in families getting any of the qualifying benefits or tax credits.</p> <p>Midwives and health visitors are asked to signpost the scheme to all their clients. A midwife or health visitor (or other registered nurse or doctor) must also countersign an application for the scheme. When signing, they are expected to offer appropriate advice and information on breastfeeding and healthy diet. Resources are provided to assist them in giving this advice.</p> <p>Babies under one on the scheme currently get 2 x £3.00 vouchers per week, and others on the scheme get 1 x</p>	<p>Around 2.4 million vouchers are sent to pregnant women and young children in approximately 410,000 families across the UK. Though queries from the public and requests for the application leaflet made to the Healthy Start helpline have increased in recent months, there has as yet been no identifiable increase resulting from the general economic situation. It is also too early to tell whether the economic situation has impacted on the proportion of issued vouchers that are subsequently used by the families that are sent them. This proportion has remained stable, at around 87% as a UK-average, for the last year.</p> <p>Income-related Employment and Support Allowance was</p>	<p>We now have some management information at a PCT level and are beginning to share this in an ad-hoc way with PCTs and regional food and health leads. We are still analysing this data ourselves and also exploring how it could be made available routinely to NHS organisations in future.</p> <p>We expect to begin publicising the voucher value and income threshold for 2008/9 to beneficiaries and retailers during February 2009. Beneficiaries will be notified through a "news flash" on their usual voucher</p>	An evaluation strategy is being developed.	Evaluation to start in 2009.	Evaluation will be of process and impact.

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	<p>£3.00 voucher per week. All vouchers can be spent on fresh fruit, fresh vegetables, liquid cow's milk or cow's milk based infant formula with a participating retailer. Free vitamin supplements are also available on the NHS to pregnant women and new mothers (containing vitamins C, D and folic acid) and to children on the scheme (containing vitamins A, C and D).</p>	<p>added to the qualifying benefits for the scheme on 27 October 2008.</p> <p>A longer term fraud strategy for the scheme is in development.</p> <p>We are now looking at the potential to extend the scheme to include frozen fruit and vegetables once sufficient assurances are obtained from retailers that an extended range of products would be appropriately policed at point of sale. Based on experience in managing the scheme to date, we do have concerns about how assiduously retailers would check that customers only use vouchers to purchase appropriate frozen products. These concerns must be addressed appropriately as widespread abuse would damage the scheme's effectiveness and integrity.</p> <p><u>HS vitamin Supplements:</u> Based on survey</p>	<p>letters and retailers will be sent revised guidance materials.</p>			

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		recommendations we are making a determined effort to encourage PCTs and claimants to increase HS vitamin supplement uptake by improving general publicity, notification and supply information to claimants and monitoring information to/from PCTs and by spreading good practice widely through a development programme to take place in the autumn.				

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<p>Nursery Milk</p> <p>Note: This scheme operates GB-wide and is managed by the Department of Health on behalf of the 3 GB health departments. Northern Ireland runs a very similar scheme.</p>	<p>The Nursery Milk scheme is the only remaining element of the Welfare Food scheme. It allows early years and daycare provider for children under 5 to register and claim the cost of providing 1/3 pint of milk daily to any child attending for 2 hours or more. Registered providers include LEA and private nurseries, schools with reception classes containing children under 5, and a large number of childminders. Over 20,000 providers are registered and actively claiming.</p> <p>The scheme is universal – the cost of milk given to any attending child can be claimed back, regardless of the home circumstances of the child.</p>	<p>Validation of claimants' data, including their Ofsted registration or similar body in the other countries is complete. The website is active with claimants applying and submitting claims online monthly. Clients can monitor their accounts through a secure section. EU subsidy is being claimed through NMRU for all eligible NM claims.</p>	<p>Any further changes to the system for claiming EU subsidy will be consequent upon the outcome of consultation by Defra with interested parties due to be completed in late spring 2009</p>	<p>There are no current plans to evaluate this longstanding scheme.</p>		
<p>Health Inequalities Funding</p>	<p>The Department of Health has now secured £4million funding under the Health Inequalities Strategy to implement NICE, CHPP and UNICEF Baby Friendly Initiative in areas of low breastfeeding rates and highest population reach as an effective means of increasing breastfeeding rates.</p> <p>The plan is to distribute this funding to the 40 PCTs with the lowest breastfeeding rates or largest no. of non-breastfeeding women in England.</p>	<p>We invited 50 PCTs to submit the proposals and expect to fund 40 PCTs in 2009.</p> <p>We received 46 bids and these have been assessed.</p>	<p>Bidders will be notified by the end of January as to whether they have been successful or not.</p> <p>We plan to distribute the funding to successful bidders and follow up on progress in 6</p>	<p>Periodic 6 monthly reports to monitor the progress of implementing BFI.</p>	<p>Ongoing – every 6 months.</p>	<p>Impact.</p>

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			months.			
Breastfeeding promotion	Breastfeeding is supported with year round PR activity, publications and TV and radio filler advertising. The main focus is National Breastfeeding Awareness Week which is held in May.	Plans are underway for the National Breastfeeding Awareness Week (NBAW) 2009 campaign, which will be held from 10-16 May. The Department is currently updating its key NHS publications – The Pregnancy Book and Birth to five, which will be made available on the DH website.	Develop proposals for 2008/9, integrating with Change 4 Life social marketing campaign	Awareness and attitude tracking took place June 2008; media monitoring and evaluation took place June and Dec 2008 .		
Folic Acid	Awareness of the need for folic acid supplements is low and take up of supplements low. A new leaflet has been produced and will be supported by a PR programme to increase awareness, particularly among young women in lower socio-economic groups and ethnic minorities.	The new folic acid leaflet has been published and is available to on the breastfeeding website.	PR campaign targeting key groups to take place in Feb/Mar 2009			
Vitamin D	Vitamin D: low awareness of supplementation recommendations among health professionals and families	The new Vitamin D leaflet is in the final stages of development and subject to Ministerial approval will be made available to order from early February.	HCP PR to take place Feb/Mar 09			
National Breastfeeding Helpline	The Helpline was launched in February, jointly operated by the Breastfeeding Network and Association of Breastfeeding Mothers. The Helpline provides information and support to mothers about breastfeeding.	There is a steady increase in calls – 1349 in November 08 and 1149 in December 08 (usual dip over christmas period) (up	Further dedicated phone lines to be installed in volunteers homes - some have been installed.	Initial evaluation work consists of statistical analysis of calls. Development of call record sheets to capture demographic details of 1:5	Ongoing.	Process. Impact to follow.

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		<p>from 424 in April 08). Specific action planned to promote the helpline</p> <p>Calls from mobile phones and from London account for 30% of all calls.</p> <p>The bilingual welsh option has been added and has been used.</p>		callers.		
Infant Formula and Follow-on Formula Regulations	When MS(PH) announced the new Infant Formula and Follow-on Formula (England) Regulations 2007 and associated guidance notes, she also made a commitment to review the effect of these new controls on how follow-on formula is advertised and presented. The review will establish whether the new controls have been effective in making it clear to parents/parents to be and carers that the presentation and advertising of follow-on formula relates to formula for babies over 6 months old and not infant formula. SACN have been identified as a stakeholder in the review and, as well as being informed of progress, will have the opportunity to in-put any relevant information.	An Independent Review Panel is currently underway to assess whether the controls are working as expected or whether further action is needed. The review which commenced in June is expected to be completed in October 2009.	DH and FSA have commissioned two pieces of research to inform the review. At the next Panel meeting in February, members will be presented with the progress on the research currently underway.	n/a	n/a	n/a
WHO Growth Standards	In August 2007, a Working Group comprised of representatives from the SACN and RCPCH recommended that the new WHO Growth Standards should be used for the purpose of population surveillance and individual clinical	A pilot study was undertaken by the RCPCH Growth Standards Project Team, funded by the Department of Health,	The charts will be implemented across the UK in 2009.			

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	monitoring of children in the UK. The Department is committed to implementing the WHO Growth Standards as recommended.	to test the practical aspects and training elements prior to implementing them in the UK. The Project Team has developed prototypes for the new merged UK90-WHO charts and the Group have consulted stakeholders on the proposed design. Divergence from the UK90 charts will now occur at 4 years, not 2 years, and this was for logistical reasons.				
Dietary Survey of Infants and Young Children	See FSA update.					
Family Nurse Partnership	<p>The FNP is a preventive, intensive home visiting programme delivered by nurses. Three RCTs in the US have demonstrated significant short and long term benefits for children and family health and well being. It is offered to vulnerable first time young parents and delivered from early pregnancy to 2 yrs. Uses materials and guidelines based on theories of self-efficacy, human ecology and attachment</p> <p>Forms part of the universal Child Health Promotion Programme</p>	<p>The FNP is being tested in 10 sites across England. Over 1000 families on the programme. 57 Family Nurses drawn from health visiting and midwifery</p> <p>Formative evaluation shows can be delivered according to fidelity, acceptable to parents and nurses and some short term impacts including initiation and duration of breast feeding.</p>	<p>Delivery in 20 new sites, coming on line in 08/09 (ten started in September 08, ten in January 09)</p> <p>50 new Family Nurses trained</p> <p>Range of research and development projects</p>	<p>Formative evaluation in 07/08 and 08/09 by Birkbeck looking at:</p> <p>Programme delivery Characteristics of clients Acceptability to client group and nurses Engagement of fathers Views of wider services Short term impacts including smoking in pregnancy, breast feeding, fathers engagement</p> <p>RCT to start April 09 on 17 FNP sites. Individual randomisation</p>	<p>First year report published June 08</p>	<p>Process and some impact</p> <p>Primary impact measures compared with usual services</p>

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Cabinet office strategy unit – review of food policy	<p>The Prime Minister asked the Strategy Unit together with DH, FSA and DEFRA, to take a long-term look at food policy across Government in September 2007. On Thursday 3rd January, the Cabinet Office published a report: 'Food: an analysis of the issues', a discussion paper presenting an analysis of a number of key issues pertaining to food and food policy in the UK.</p> <p>Following this report, the Strategy Unit undertook an analysis of food policy and governance across Government, industry and wider society. These findings were circulated as hard-copy to a limited policy audience within Whitehall.</p>	The Strategy Unit published their final report 'Food Matters: Towards a Strategy for the 21 st Century' in July 2008 and highlighted a list of key actions and policy recommendations for departments across Government.	Each Government department are working to take forward actions relevant to their own policy areas and are liaising with other Government departments and relevant stakeholders.	The Cabinet Office, with agreed time scales, will oversee evaluation.		
5 A DAY Action Plan	<p>The 5 A DAY programme has been successful in raising awareness and changing behaviour, but average consumption of fruit and veg among the population as a whole is still between 3 and 4 portions per day.</p> <p>"Increasing consumption of fruit and vegetables so that more people reach and exceed the 5 A DAY target" was action 5.4 of the Cabinet Office Strategy Unit's 'Food Matters: Towards a Strategy for the 21st Century' report.</p>	We are developing a 5 A DAY Action Plan, which will be agreed with Ministers in January 09.	Once agreed, the Department will take forward to Action Plan and is likely to target messages at specific population groups that are least likely to consume fruit and vegetables, such as young men and low-income families.	An evaluation of the 5 A DAY Action Plan will be developed once an implementation strategy has been agreed.		
Food promotion to children	New restrictions on advertising food and soft drink to children in broadcast and non-broadcast media were introduced on 1 April and 1 July 2007 respectively. The Department of Health continues to monitor the change in the nature and	Stakeholder workshop on next steps in non-broadcast media advertising to children was held on 3 December 2008.	Ofcom's report will be analysed, as will the notes taken at the stakeholder workshop in			

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	balance of food and drink advertising to children in broadcast and non-broadcast media.	Ofcom published its review into the impact of restrictions on food and drink advertising to children on 17 December 2008.	consideration of the next-steps to be taken to re-balance advertising to children.			
Promoting healthier options in convenience stores	<p>The Scottish Executive, working in partnership with food retailers and distributors, launched a <i>Healthy Living Neighbourhood Shops Initiative</i> in April 2004. Its objective is to encourage convenience stores to develop the fresh produce and healthier products they offer to communities in order to help improve the eating habits of people living in Scotland.</p> <p>The former MS(PH) Caroline Flint approved project plans to work with the convenience sector in England to promote healthier food choices, particularly in deprived areas. She met with senior representatives of the major Symbol groups (Spar, Costcutter etc) in May 2007 where it was agreed that the project should closely mirror the Scottish Executive initiative.</p> <p>Phase 1 of the English convenience store project is currently underway in the North East (an area of relatively high levels of child obesity and low adult life expectancy). A Steering Group, comprising of the Association of Convenience Stores, senior representatives of the symbol groups, and Government officials has been set up to oversee the project. The Steering Group have agreed to match fund the</p>	<p>A key success criteria from the Scottish Executive project was to appoint a project co-ordinator with proven experience in the retail sector. In June, DH recruited a coordinator who has a wealth of experience of the convenience store sector.</p> <p>To accelerate the learnings of the Scottish project, we launched 12 'development stores' in November 08. These stores received extra investment from DH to implement the full range of initiatives that have been shown to increase sales of fruit and veg in Scotland.</p> <p>The launch generated fantastic publicity for the project. Sales data collected by the Steering Group showed that the initiative led to</p>	<p>We are currently finalising plans for the roll out of the project across the North East. We will use this trial phase of the project to establish a sustainable model for national roll out.</p> <p>We are also developing plans for further evaluation of the project.</p>	<p>The symbol groups are collecting sales data and will carry out their own evaluation of the project.</p> <p>DH commissioned a consumer evaluation of the initial impact of the development stores, to establish the key criteria for successful store transformation. This evaluation is now available. We plan to extend it to evaluate the sustainability of the impact of the development stores.</p> <p>We are working on plans for a broader evaluation of phase 1, to establish an effective design for a potential national roll-out.</p> <p>We are supporting leading academics from the Public Health Research Consortium who are currently working on a proposal to carry out an in-depth study of the initiative, to establish whether or not it results in behaviour</p>	<p>The initial consumer evaluation of the immediate impact of the 'development stores' is now available.</p>	<p>The consumer evaluation examines the immediate impact of the project. We are planning a further study to evaluate both process and impact, to establish a suitable model for a potential national roll-out.</p>

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	<p>project (£200, 000 for phase one) through 'in kind' contributions. The project forms part of 'Change4Life' (in-store branding and messaging, and aligned PR and marketing activities). We aim to recruit 120 stores to the programme by May 2009. Funding has been allocated until 2010/11, and subject to the success of the project, we aim to roll out nationally.</p>	<p>dramatic increases in the sales of fruit and veg. A DH commissioned Consumer evaluation of the immediate impact of the development stores indicates that the project has changed consumer perception of the stores, raised awareness of healthy eating messages, and led to an increase in claimed fruit and veg consumption. However, a far broader study is required to determine whether this project does in fact lead to increased consumption of fruit and veg, rather than 'displacement' purchases.</p>		change.		
Healthy Food Code of Good Practice	<p>Healthy Weight, Healthy Lives included a theme on promoting healthier food choices, through the Healthy Food Code. Strands of work include front of pack labelling, portion size, reformulation, rebalancing advertising to children, promoting healthier food choices, developing a single set of healthy eating messages and work with the catering sector.</p>	<p>A stakeholder event was held on 28 October, jointly hosted by MS(PH) and Dame Deirdre Hutton. Joint submission updating MS(PH) on progress made to date sent 11 December.</p>		<p>Each element of the strand will have a separate evaluation plan. Progress on the Code overall, together with areas for further action, will be reported in the Healthy Weight, Healthy Lives annual report, the first of which is expected in Spring 2009.</p>	Ongoing	
Physical Activity						
Physical	The Department is drafting a new					

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Activity Plan	physical activity plan for publication in February. The Plan is partially in response to the recent review of Sport England and the Treasury-led review of sport and physical activity. It provides information for local areas on the burden of physical inactivity detail ongoing support for the physical activity delivery structure. It will encourage local areas to address the disparity between what is being spent on addressing inactivity and the cost of sedentary lifestyles locally.					
Free swimming	Over 80% of local authorities have opted to provide free swimming under a £140 million initiative to those aged 60s and over. Some of these have also opted to provide free swimming to those 16 and under.			This will be evaluated – draft scope of work to be agreed.		
Fit for the Future	The “Fit for the Future” pilot scheme to address the drop off in sports and physical activity in young adults will start in five local authorities in April 2009.			This will be evaluated – draft scope of work to be agreed.		