

Budget Proposals 2019/20: Eat4Health (Adult Weight Management Service)

Consultation Summary Report

Why we consulted?

Over the last nine years we've had to make savings of £60 million as our central government funding, the Revenue Support Grant (RSG), has reduced and the need for social care support has increased. We've done this by becoming more efficient at what we do, by reducing some of our administrative functions and increasing our income. Throughout this period we have done our best to protect your services.

Six years ago, the RSG was worth £24 million to the council and was reduced to just £100,000 last year. In 2019/20 there will be no grant and our costs will exceed our income. As a result, we'll need to find a further £7 million in savings or income generation. Much of this will come from becoming a more efficient council, however, 14 proposals, amounting to approximately £300,000, have been identified from services that will impact the public.

It was these proposals that made up the Budget Proposals 2019/20 consultation.

Approach

We published all the public facing proposals on our website on 12 November 2018 with feedback requested by midnight on 23 December 2018.

Respondents were directed to a central index pageⁱ, which outlined the overall background to the exercise, and provided links to each of the individual proposals on our Consultation Portalⁱⁱ.

Each individual page included further details on the specifics of what the proposal contained and what we thought the impact might be, along with any other elements we'd taken into account. Feedback was then invited through an online form and a dedicated email address. Hard copies of the proposal documents and surveys were also made available on request.

As well as publishing the consultations on our website, we also emailed members of the West Berkshire Community Panel (around 400 people), notifying them of the exercise and inviting their contributions. Heads of Service also made direct contact with those organisations directly affected prior to them being made publicly available.

Finally, we issued a press release on the 12 November 2018, and further publicised our consultations through our Facebook and Twitter accounts. We also placed posters in our main offices and other council properties e.g. libraries, leisure centres and family hubs, and made them available to WBC Councillors and Parish and Town Councils to put up in the wards/parishes.

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Proposal Background

Healthy eating, along with physical activity, are the main ways of preventing and managing adult obesity. In 2016/17, 62.7% of adults in West Berkshire were overweight or obese. This is compared to an average of 61.3% in England (Public Health England, 2018ⁱⁱⁱ).

Eat4Health^{iv} is a 12 week, group based, weight management course that is available free of charge to individuals in West Berkshire who are over 16 years of age, and have a body mass index (BMI) of over 25, either by GP or self-referral. BMI is a measure of body fat based on the weight and height of the person. A normal range is between 18.5 and 25 (NHS, 2018^v).

We provide Eat4Health with annual funding of £56,575, and this enables 25 courses per year to be run across West Berkshire in community venues.

Legislation Requirements

There is no legislative requirement to provide this service.

Proposal Details

To reduce the annual funding to Eat4Health from £56,575 to £40,000 (a saving of £16,575 or 29%) from 1 April 2019.

Consultation Response

Number of Responses

In total, 13 responses were received.

11 of the respondents identified themselves as residents, one as employed by West Berkshire Council, one as a Parish/Town Councillor, one as a service provider, two as partner organisations and one as other.

Summary of Main Points

In general, respondents either strongly agreed or agreed (10 or 77%) with the proposed reduction in funding.

Several of the responses suggested that given the low demand for the service, it should be cut further or decommissioned completely.

One respondent stated that they had attended the course and found it ineffective

Respondents who strongly disagreed (3 or 23%) with the proposals stated that obesity is a key public health priority and is mentioned in the NHS Five Year Forward

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View and the West Berkshire Health and Wellbeing Strategy. It is likely to be a financial burden on a range of public services.

Summary of Responses by Question

1. Are you...?

(N.B. respondents were able to tick more than one option)

	Responses		Percent of Cases
	N	Percent	
Or anyone you care for, a user of this service	0	0.0%	0.0%
A resident of West Berkshire	11	64.7%	84.6%
Employed by West Berkshire Council	1	5.9%	7.7%
A Parish/Town Councillor	1	5.9%	7.7%
A District Councillor	0	0.0%	0.0%
A service provider	1	5.9%	7.7%
A partner organisation	2	11.8%	15.4%
Other	1	5.9%	7.7%

2. How far do you agree with the proposal to reduce the annual funding to Eat4Health from £56,575 to £40,000 from 1 April 2019?

	Frequency	Percent	Valid Percent
Strongly agree	7	53.8	53.8
Agree	3	23.1	23.1
Neither agree nor disagree	0	.0	.0
Disagree	0	.0	.0
Strongly disagree	3	23.1	23.1
Total	13	100.0	100.0
Not answered	0	.0	
Total	13	100.0	

3. What do you think we should be aware of in terms of how this proposal might impact people? For example, do you think it will affect particular individuals more than others?

A few comments suggested that as obesity relates to socio-economic status, it is likely that reduced capacity will disproportionately affect the more deprived and vulnerable members of the community.

One respondent commented that some people might not be able to afford to attend commercial weight management groups such as Slimming World or Weight Watchers.

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Several respondents suggested that the reduced funding would not impact on any particular individuals as there were lots of local opportunities that supports weight loss.

4. If the decision is taken to proceed with this proposal, do you have any suggestions for how we can reduce the impact on those affected? If so, please provide details.

A number suggestions were put forward to mitigate the impact of the cuts, which included:

- Developing a digital offer that provided online support, advice and information
- Supporting the creation of volunteer groups that could utilise existing public spaces such as libraries.
- Ensuring there is clear information that signposts the public to other sources of support to manage their weight.

5. Do you have any suggestions on how we might save money or increase income, either in this service, or elsewhere in the council? If so, please provide details.

Some respondents suggested that the council should completely remove all funding associated with the weight management service.

Others suggested that the council could charge for the sessions or develop a digital offer

6. If you, your community group, or organisation think you might be able to help reduce the impact of this proposal, if the decision is taken to proceed with it, please provide your name and email address below.

One respondent provided their contact details.

7. Any further comments?

One resident commented that the consultation process brought the service to their attention and that if the service continues to be available they would look to use the service in the future.

Officer conclusion and recommendation can be found in the associated Overview of Responses and Recommendations document.

Zoe Campbell
Programme Support Officer
Public Health & Wellbeing
09/01/2019

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Please note: *In order to allow everyone who wished the opportunity to contribute, feedback was not sampled. Therefore this wasn't a quantitative, statistically valid exercise. It was neither the premise, purpose, nor within the capability of the exercise, to determine the overall community's level of support, or views on the proposals, with any degree of confidence.*

The feedback captured therefore should be seen in the context of 'those who responded', rather than reflective of the wider community.

All the responses have been provided verbatim as an appendix to this report. Whilst this summary seeks to distil the key, substantive points made, it should also be read in conjunction with the more detailed verbatim comments to ensure a full, rounded perspective of the views and comments are considered.

ⁱ <http://www.westberks.gov.uk/budgetproposals>

ⁱⁱ <http://info.westberks.gov.uk/consultations>

ⁱⁱⁱ <https://fingertips.phe.org.uk/>

^{iv} <https://info.westberks.gov.uk/healthyeating>

^v <https://www.nhs.uk/Tools/Pages/Healthyweightcalculator.aspx?Tag=%5d>

Overview of Responses and Recommendations

Budget Proposals 2019/20: Eat4Health (Adult Weight Management Service)			Head of Service: Matt Pearce Author: Zoe Campbell		14 February 2019 Version 1 (Executive)	
Proposal:	To reduce the annual funding to Eat4Health from £56,575 to £40,000 from 1 April 2019.					
Total budget 2018/19:	£56,575	Initial proposed saving 2019/20	£16,575 (29%)	Recommended saving 2019/20	£16,575 (29%)	
No. of responses:	In total, 13 responses were received. Of those that responded: <ul style="list-style-type: none">• 0 identified themselves as users of the service• 11 as residents of West Berkshire• One as a council employee• One as a Parish/Town Council• 0 as District Councillors• One as a service provider• Two as partner organisations• One as other					
Key issues raised:	In general, respondents either strongly agreed or agreed (10 or 77%) with the proposed reduction in funding. Several of the responses suggested that given the low demand for the service, it should be cut further or decommissioned completely. Respondents who strongly disagreed (3 or 23%) with the proposals stated that obesity should be a key public health priority, and is likely to be a financial burden on a range of public services. One respondent stated that they had attended the course and found it ineffective.					
Equality issues:	No issues were raised during the consultation, that were not already included in the stage one Equality Impact Assessment.					

NB: This Overview of Responses and Recommendations paper should be read in conjunction with the Consultation Summary Report and Verbatim Responses received in relation to this proposal. These can be found in the agenda pack or on our [Consultation Portal](#).

Overview of Responses and Recommendations

Suggestions for reducing the impact on service users:	Suggestion	Council response
	Increase digital support	We are currently reviewing our existing commissioned health improvement services with a view to develop a new model from April 2020. As part of this review we will be exploring whether a digital platform, which would provide advice and support to help people make positive lifestyle changes across a range of providers, can form part of this new offer. Free online weight management programmes are already available through NHS choices.
	Ensure there is clear information that signposts the public to other sources of support to manage their weight.	There continues to be a range of information available to the public to help them manage their weight. This includes NHS Choices and the West Berkshire Directory.
	Support the creation of volunteer groups that could utilise existing public spaces such as libraries.	The council continue to work closely with the voluntary and community sector to support new and existing groups. This work is supported through the Building Communities Together Partnership
Suggestions for saving money or increasing income:	Suggestion	Council response
	Charge for weight management classes	We are currently reviewing our existing commissioned health improvement services with a view to develop a new model from April 2020. As part of this review we will consider whether we could charge service users for weight management services.
Conclusion and recommendation:	<p>Obesity continues to be one of the greatest public health challenges facing our society. We believe that the existing weight management service can be delivered in more cost effective way through greater online support and the introduction of a new weight management service from Autumn 2019. It is anticipated that the new service will enable more people to access a weight management service and provide greater value for money.</p> <p>We also believe that the introduction of the NHS funded National Diabetes Prevention Programme will provide alternative weight management provision for individuals at risk of diabetes.</p> <p>It is therefore recommended that this proposal is progressed.</p>	

NB: This Overview of Responses and Recommendations paper should be read in conjunction with the Consultation Summary Report and Verbatim Responses received in relation to this proposal. These can be found in the agenda pack or on our [Consultation Portal](#).

Stage One Equality Impact Assessment (EqIA 1)

What is the proposed decision?	To reduce the annual funding to Eat4Health from £56,575 to £40,000 (a saving of £16,575 or 29%) from 1 April 2019.
Summary of relevant legislation	The commissioning of healthy lifestyle services is a discretionary component of the Public Health Ring Fence Grant.
Does the proposed decision conflict with any of the council's key strategic priorities?	No
Name of budget holder	Matthew Pearce
Name of Service and Directorate	Public Health & Wellbeing, Communities
Name of assessor	Zoe Campbell
Date of assessment	24/10/2018
Version and release date (if applicable)	V1. 12/11/2018

Is this a...?		Is this policy, strategy, function or service...?	
Policy	No	New or proposed	No
Strategy	No	Existing and being reviewed	Yes
Function	No	Changing	Yes
Service	Yes		

1. What are the main aims, objectives and intended outcomes of the proposed decision and who is likely to benefit from it?	
Aims:	To reduce spending in line with ring fenced grant reductions and council savings.
Objectives:	To reduce the current provision of funding for this service.
Outcomes:	Reduction in cost toward weight management support services.
Benefits:	Saving of £16,575

2. Which groups may be affected and how? Is it positively or negatively and what sources of information have been used to determine this?

Group affected	What might be the effect?	Information to support this
Age	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Disability	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Gender reassignment	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Marriage and civil partnership	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Pregnancy and maternity	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Race	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Religion or belief	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Sex	There is no evidence to indicate that there will be a greater impact on this group than on any other	
Sexual orientation	There is no evidence to indicate that there will be a greater impact on this group than on any other	



Further comments

Currently courses are not filled to capacity due to lower demand and referrals, for this reason there will be minimal impact. We will also explore any new model across West Berkshire that will aim to increase uptake, target support for those who need it and support a greater number of individuals.

3. Result

Are there any aspects of the proposed decision, including how it is delivered or accessed, that could contribute to inequality?

No

Whilst the number of classes will be reduced, this will not contribute towards any inequalities. It is anticipated that the future service model will ensure a more targeted approach that will likely increase uptake for those with protected characteristics.

Will the proposed decision have an adverse impact upon the lives of people, including employees and service users?

No

There will be no adverse impact upon the lives of people as individuals will continue to be able to receive support through existing service provision and through a range of other support mechanisms.

4. Next steps

EqlA 2 required?

No

Owner of EqlA 2

Timescale for EqlA 2

Number of responses: 13

ID	How far do you agree with the proposal to reduce the annual funding to Eat4Health from £56,575 to £40,000 from 1 April 2019?		What do you think we should be aware of in terms of how this proposal might impact people? For example, do you think it will affect particular individuals more than others? Please refer to the Equality Impact Assessment (EqIA) to see what has already been identified.	If the decision is taken to proceed with this proposal do you have any suggestions for how we can reduce the impact on those affected? If so, please provide details.	Do you have any suggestions on how we might save money or increase income, either in this service, or elsewhere in the council? If so, please provide details.	Any further comments?
	Response	Please tell us the reason(s) for your response.				
1	Strongly disagree	We acknowledge that the Council is in a challenging financial situation and will therefore need to reduce its expenditure. We do however have some concerns about the areas highlighted below, particularly because prevention is one of the main priorities in the NHS Five Year Forward View and the West Berkshire Health and Well Being Strategy. We would also like to continue to explore how we can work together through the Berkshire West 10 to maximise economics of scale across our area. These are the areas of concern and questions we wanted to highlight: In the context of increasing prevalence of diabetes and obesity reducing the number of weight management classes would not be the right approach to tackling these issues. We would encourage the provider to review the times that these classes are held to increase uptake, assess the referral process to ensure that individuals are not excluded from participating and consider self-referral.				
2	Strongly disagree	Obesity and being overweight underly many non-communicable diseases which have substantial cost for this country. Tackling obesity is a public health priority. If the service is considered sufficiently worthwhile to be retained, the cut of 29% will therefore have an impact on the outcomes of the service. The impact may not be exactly proportionate, for instance, if classes are not currently at capacity (but does that not say something about the effectiveness of the programme, rather than the nature of demand?) but that is likely to be marginal. The case has therefore not been made that this short term saving will be less than the increased costs, longer term that result, on the council and on other bodies.	Obesity is patterned according to socio-economic status so this is likely to disproportionately affect the more deprived and vulnerable members of the community.		I do not have sufficient information about the workings of the rest of the council to be able to suggest any better area for cuts. More general options for increasing income would be to increase council tax, holding a referendum, as required by central government, if necessary. The council might also wish to lobby central government and inform them of the harm being done by their cuts. It could also lobby, directly and through the LGA, for a fairer, more sustainable and more decentralised system for funding local government, which increased the extent of local control. One way of reducing costs longer term would be by reducing demand on services through investment in prevention, which is the opposite of what these cuts are doing. The council should be considered social costs more broadly and working more effectively with other bodies, including health, criminal justice etc. to pool resources and invest for longer term benefit, particularly in prevention.	

ID	How far do you agree with the proposal to reduce the annual funding to Eat4Health from £56,575 to £40,000 from 1 April 2019?		What do you think we should be aware of in terms of how this proposal might impact people? For example, do you think it will affect particular individuals more than others? Please refer to the Equality Impact Assessment (EqIA) to see what has already been identified.	If the decision is taken to proceed with this proposal do you have any suggestions for how we can reduce the impact on those affected? If so, please provide details.	Do you have any suggestions on how we might save money or increase income, either in this service, or elsewhere in the council? If so, please provide details.	Any further comments?
	Response	Please tell us the reason(s) for your response.				
3	Strongly agree	I do not view this to be a core responsibility for public spending, through Council Tax. The current provision is not taken up fully and there are many other providers available. I think the reduction is not large enough.	I do not think the reduction will have any effect on individuals. Other provision is available and there is enough warning for people to be helped to move to that provision.	Communicate with the providers as early as is practicable.		
4	Strongly agree					
5	Strongly disagree	You have already made huge and sustained cuts to many support services over the last few years which in many cases have hit the needy the hardest. It's time to stop this, and to focus limited funds on those who need them most. I cannot support any of the above cuts and urge you to find savings elsewhere or re-allocate funds from areas that will not impact the disadvantaged.				
6	Strongly agree	I would go so far as to say remove funding for this scheme. It sounds as though it is under used. I took part in it and found it fairly ineffective. Most GPs can make referrals to Weight Watchers and the like and as you have identified there are also other schemes available. I think this funding could have more impact elsewhere.	Im not convinced it will have a great impact on anyone. Before this scheme existed what did people do? There are other options available (such as Cambridge, Weight watchers, Slimming world and schemes via GP) and with the wealth of information available on the internet now, combining the two gives lots of support for people wanting to eat well/lose weight.	Information on other schemes available. Really impact will be low because people should not be on this scheme for long periods unless they have a huge amount of weight to lose. If they are, they arent taking on board the learning so its not the best scheme for them anyway. Remove the service would be the bests use of money	remove the service.	
7	Strongly agree	In the information provided you say that course places are not taken up. Therefore would it not be more cost effective to scrap the whole service? There are plenty of well known companies which provide the same service - Weightwatchers, Slimmingworld to name but two. Maybe provide a means tested system so that if someone really could not afford the weekly fees they are helped with this? And it seems really obvious - eat less and exercise more if you want to lose weight.	Those who really cannot afford the fees to attend private company weightloss programs.	Suggest that they consider other weightloss programmes.	Make a charge for users of the service.	Having input previous detail, now that I am aware that this service is offered I would use it if I needed to and thus avoid commercial company fees.
8	Agree	I do feel less inclined to offer support to services where people have the ability to help themselves and/or there is considerable information is already available to them in the public domain.				

ID	How far do you agree with the proposal to reduce the annual funding to Eat4Health from £56,575 to £40,000 from 1 April 2019?		What do you think we should be aware of in terms of how this proposal might impact people? For example, do you think it will affect particular individuals more than others? Please refer to the Equality Impact Assessment (EqIA) to see what has already been identified.	If the decision is taken to proceed with this proposal do you have any suggestions for how we can reduce the impact on those affected? If so, please provide details.	Do you have any suggestions on how we might save money or increase income, either in this service, or elsewhere in the council? If so, please provide details.	Any further comments?
	Response	Please tell us the reason(s) for your response.				
9	Strongly agree					
10	Agree	Long term healthy eating is important and helps prevent future need of other services so is very important. However reducing classes especially if they are not full is worthwhile to support other services.	Losing weight is something you need to want to do and be in the right frame of mind for. Reducing number of courses is unlikely to impact on the want to do it and there are of course paid for courses and other ways to make a start in between courses.	Perhaps introduce a online starter pack for in between courses, just to get people started in a gentle way prior to a course.		
11	Strongly agree	I would go further and stop funding this completely and so save £56,575 per annum	Most people accessing such a service already gain the benefit of reduced costs by eating a balanced or more healthy diet. Therefore effectively paying them to access the benefit when other things are more deserved is had to support.	Digital support and volunteer groups are the obvious answer. Using public spaces like the library along with links to existing digital support is far cheaper than direct funding.	Digital support with links to volunteer bodies is the best way forward in my mind.	
12	Strongly agree	I pay for a gym membership, and use it, why should people get it for free	Some people will just use it as an excuse not to do any exercise, then go crying to the NHS with diabetes, and want gastric band ops. We all have a choice, we all have mirrors.	see previous	Stop helping the scroungers	no
13	Agree	This service appears as one of the heart valuable to maintain and could easily be considered to cut further.				