

Topic:	Focus on Healthy Lifestyles – Diabetes Prevention
Date:	10th December 2015
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Report Type	For consideration and decision

1 Purpose of the report

- 1.1 Performance against healthy lifestyle indicators such as excess weight, inactivity and healthy eating are a continued cause of concern in Staffordshire, particularly as trends also show a continued increase in diabetes prevalence.
- 1.2 The current estimated cost to the local health and care system as a result of diabetes is £222 million every year, which if current trends go unaddressed, is predicted to increase to £273 million by 2020.
- 1.3 The purpose of this report is to provide members of the Health and Wellbeing Board with an overview of healthy lifestyles in Staffordshire and Stoke-on-Trent based on key performance indicators to inform the development of the:
 - prevention and early intervention objectives of the Health and Wellbeing Board
 - “Fit & Well” work stream of the Collaborative Commissioning Congress
- 1.4 The report looks at the implications of performance in this area on the health economy and wider public sector through a particular look at the prevalence of diabetes. Specifically the report explores:
 - performance of healthy lifestyle indicators in Staffordshire and Stoke-on-Trent
 - the contribution of lifestyle factors to prevent or delay the onset of diabetes
 - the projected costs to the Staffordshire and Stoke-on-Trent health economy should trends in obesity and unhealthy lifestyles go unaddressed
 - the current provision of healthy lifestyle programmes and interventions
 - public perceptions, patient experience, knowledge and awareness

2 Key challenges

- 2.1 Declines in mortality rates have not been matched by similar declines in ill-health. Therefore there is a need to systematically focus efforts on the causes of ill-health as well as preventable mortality. This includes supporting healthy behaviours to prevent or delay the onset and severity of long-term conditions.

- 2.2 There are significant lifestyle issues across Staffordshire and Stoke-on-Trent. Whilst the burden of ill-health from smoking appears to be improving the impact of poor diets and inactive lifestyles is considerable and is predicted to increase. There appears to be a gap in local preventative and community-based solutions to keep the population healthier and active for longer that can be provided at scale.
- 2.3 Residents do not appear to be well informed about the lifestyle risk factors and their contribution to both preventing and managing type 2 diabetes. There is scope for improving early intervention in this area and providing more consistent information across Staffordshire and Stoke-on-Trent.
- 2.4 Performance data indicates there are inequalities in care and treatment for diabetic patients across Staffordshire and Stoke-on-Trent. Residents also feel that services need to be more integrated so that standards are consistent.

3 Recommendations

- 3.1 Leadership through the Staffordshire Strategic Partnership, Local Enterprise Partnership and the Health and Wellbeing Board to support a whole system approach to healthy eating and physical activity in Staffordshire and Stoke-on-Trent
- 3.2 Identify and align local policies and plans to creating the right environment locally to support healthy lifestyles, e.g. planning for health and creating local healthy food system and environment through rural, economic, climate change, transport planning and spatial planning policies and plans
- 3.3 Identify gaps and implement solutions within own organisations to support healthy living
- 3.4 Secure population-wide physical activity and healthy eating opportunities across Staffordshire (e.g. community-wide approach to build on or enhance existing community assets)
- 3.5 Capitalise on opportunities to raise public awareness of the risks of unhealthy lifestyles and excess weight across all settings and actively promote opportunities available to support citizens to maintain a healthy weight using easily accessible information, advice and guidance (for example supporting a wider and more innovative use of technology)
- 3.6 Implement interventions which effectively target and achieve successful behaviour change in higher risk populations
- 3.7 Reduce inequalities in primary care across the diabetes pathway from identifying pre-diabetics through initiatives such as NHS health checks programmes to care and treatment of diabetic patients to ensure they receive good outcomes