

# REPORT TO ENVIRONMENT COMMITTEE

## HEALTH AND WELLBEING

**Report Reference** EN-20-08  
**Meeting Date** 22<sup>nd</sup> March 2021  
**Agenda Item** 7  
**Prepared by** Town Clerk

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### 1.0 BACKGROUND

In January, the committee agreed that a discussion paper be prepared to enable the committee to consider how the council can best support the town's health and wellbeing. This report outlines research on a number of the current public health challenges in the UK where the town council could undertake work to support health and wellbeing. Whilst public health is the statutory responsibility of Cheshire East Council, the NHS and GPs are increasingly looking to measures which prevent health issues arising and a number of town councils are becoming more directly involved in supporting their town's health and wellbeing.

The Knutsford Neighbourhood Plan commits the council to working with relevant partners to prepare a preventative health strategy for Knutsford with the aims of making Knutsford one of the borough's healthiest towns to live, work and play, reducing illnesses and improving quality of life.

### 2.0 CURRENT HEALTH CHALLENGES

This section is just a surface deep overview of just some of the health challenges where the town council could undertake meaningful work to support health and wellbeing. There will be more, and GPs will have knowledge of issues which are more prevalent locally.

It is generally recognised that the main challenges to health and wellbeing in the modern age have moved from infectious diseases to psycho-social diseases arising from unemployment, lack of social support and poor education (Rigler, 2019). Many of these problems are related to unhealthy aging, obesity, substance abuse, alcoholism, loneliness and poverty.

Loneliness is one of the most significant health concerns being as detrimental to as smoking and worse than obesity (Holt-Lunstad et al, 2010); surveys have found GPs regularly see patients who do not require medical attention but are lonely, with one survey suggesting as many as 3-5 patients per day attend primarily due to loneliness (Loft et al, 2021). The House of Commons research briefing, *Tackling Loneliness* also notes that those suffering isolation are at higher risk of scams and fraud (Loft et al, 2021). In 2018 the government adopted a strategy to combat loneliness, it highlights the role of community infrastructure to empower social connections, discussing the importance of ensuring the availability of community spaces and a varied network of green spaces. The strategy also notes the importance of public transport in enabling people to access services and spaces. The strategy also notes the success of social prescribing<sup>1</sup> in reducing GP visits for loneliness and other health conditions.

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<sup>1</sup> Social prescribing enables organisations to refer people to a range of services that offer support for social, emotional or practical needs. This could include feelings of loneliness, as well as for debt, employment or housing problems, or difficulties with their relationships.

The Department for Health and Social Care reports that 63% of the adult population is overweight with around half of those (28%) being obese; in children 33% of 11-year-olds are overweight and 20% are obese. Obesity is a risk factor for several chronic diseases, including diabetes, cardiovascular diseases and cancer (Obesity UK, ND). Balogun et al (2020) notes that obesity is most prevalent in deprived areas and those with poor education but the focus is often on the factors within a person's control with little recognition of social or environmental determinants (Obesity UK, ND). (Obesity UK, ND).

The NHS (ND) reports that 25% of adults and 10% of children experience mental ill health and recently the Centre for Mental Health predicted that almost 20% of the UK population will require new or additional mental health support as a result of the coronavirus pandemic (O'Shea, 2020). Mental ill health is more prevalent in groups such as the LGBT+ community, carers and those suffering from domestic violence and it has a number of associated social determinants such as debt, poverty and unemployment (Mental Health Foundation, 2016). Strong communities have been shown to help counteract the effects of deprivation with a 2014 study showing the neighbourhoods with higher social cohesion experience lower rates of mental health problems independent of socioeconomic factors (Fone et al, 2014 in Mental Health Foundation, 2016). An inquiry into mental health and wellbeing in later life identified a number of determinants for mental wellbeing in older populations including participation in meaningful activity and continuing to have good personal relationships with others (Lee, 2006).

Dementia affects 1 in 14 people over the age of 65 and 1 in 6 people over the age of 80 (NHS (2), ND). The Alzheimer's Society reports that those affected by dementia often withdraw from their community as the condition progresses, partly due to a lack of general awareness from those they interact with on how to support those living with dementia (Alzheimer's Society, ND). Training can be provided to businesses and organisations; in Knutsford this was previously provided by a former PCSO. The Alzheimer's Society operates a 'Dementia Friendly Communities' programme which aims to create communities which make daily living and activities easier and more accessible to people living with dementia. A number of towns in Cheshire are recorded as dementia friendly communities (e.g. Crewe, Congleton, Poynton and Holmes Chapel).

## **3.0 RECOMMENDATIONS**

### **3.1 HEALTH AND WELLBEING WORKING GROUP**

The council has previously appointed a health and social care working group; initially created in 2011 the activity of the working group waned since 2015 and has not met in the current council term. It is recommended that the committee re-establishes the working group, renamed as the Health and Wellbeing working group, with a terms of reference as per Appendix B and a requirement to regularly report to the committee.

The remit of the working group would be to identify areas that the council can deliver initiatives to support the town's health and wellbeing, develop a preventive health strategy and review and secure modern health facilities for the town.

### **3.2 COMMUNITY FAIRS**

The council could look to organise a health and wellbeing fair. The aim of such an event is to provide residents with an easy opportunity to discover the services that are available to them and their families and a number of town councils have organised similar events (East Grinstead, Poynton and Malvern are three examples)

It would comprise exhibitor spaces bringing local service providers, wellbeing practitioners and support groups to the community. It would also include taster sessions on activities such as Zumba and mindfulness, and free NHS health checks (e.g. blood pressure).

The council could also organise a community or volunteers fair; similar to the health and wellbeing fair but with a focus for promoting the third sector organisations operating in the town (e.g. friends groups, charities not working in the health arena etc) This would aim to strengthen the community sector by raising awareness of existing community organisations allowing them to reach new volunteers / committee members. It could also provide an opportunity for those with an idea for new community organisations to connect with other residents.

If the committee support this idea a detailed proposal would be prepared for approval.

### **3.3 IMMEDIATE ACTIONS**

There are two immediate and simple actions the council can take to as part of its commitment to supporting health and wellbeing of its residents. Firstly, officers will identify relevant national/local campaigns and utilise the council's communication channels to promote initiatives and awareness.

Secondly, a health and wellbeing section will be created on the council website to signpost to local support groups and agencies

### **4.0 DECISION REQUIRED**

The committee should consider the four recommendations in section three.

## APPENDIX A: REFERENCES

- Alzheimer's Society (ND) 'What is a dementia-friendly community?' [Online] Available at: <https://www.alzheimers.org.uk/get-involved/dementia-friendly-communities/what-dementia-friendly-community> (accessed 15<sup>th</sup> March 2020)
- Balogun, B. Baker, C. Conway, L. Long, R. and Pwell, T. (2021) 'Obesity' *House of Commons Briefing Paper 9049*.
- DCMS (2018) *A Connected Society: a strategy for tackling loneliness*
- Holt-Lunstad, J. Smith, T. and Bradley-Layton, J. (2010) 'Social Relationships and Mortality Risk: A Meta-analytic Review' *PLOS Medicine* 7(7)
- Fields in Trust (2018) *Revaluating Parks and Green Spaces*.
- Lee, M. (2006) *Promoting Mental Health and Well-being in later life*. Age Concern and the Mental Health Foundation: London.
- Loft, P. Foster, D. Hirst, D. Rough, E. Grimwood, GG. Woodhouse, J. Conway, L. Brooke-Holland, L. Macdonald, M. Harker, R. Cracknell, R. Long, R. Hubble, S. Powell, T. and Wilson, W. (2021) 'Tackling Loneliness' *House of Commons Briefing Paper 8514*.
- Mental Health Foundation. (2016). *Fundamental Facts About Mental Health 2016*. Mental Health Foundation: London.
- NHS (ND) 'Mental Health' [Online] Available at: <https://www.england.nhs.uk/mental-health/> (accessed 15<sup>th</sup> March 2020)
- NHS 2 (ND) 'About Dementia' [Online] Available at: <https://www.nhs.uk/conditions/dementia/about/> (accessed 15<sup>th</sup> March 2020)
- Obesity UK (ND) 'What is obesity' [Online] Available at: <https://www.obesityuk.org.uk/what-is-obesity> (accessed 2<sup>nd</sup> March 2020)
- O'Shea, N. (2020) *Forecasting needs and risks in the UK* [Online] Available at: <https://www.centreformentalhealth.org.uk/publications/covid-19-and-nations-mental-health-october-2020> (accessed 2<sup>nd</sup> March 2020)
- Rigler, M. (2019) 'Clerks can be health professionals too' *The Clerk*. 50(5) pp. 35

## **APPENDIX B: HEALTH AND WELLBEING WORKING GROUP**

1. The Working Group will consist of 4 councillors, determined by the Environment and General Purposes committee and the Town Clerk in an advisory capacity.

Membership is to be reconfirmed / changed by the parent body at its first meeting at start of a new Mayoral year.

The working group may invite members of the public to attend meetings in an advisory capacity on an ad-hoc or permanent basis.

2. At its first meeting (or first in a new Mayoral year) the working group members shall:
  - a. Review these terms of reference for approval as appropriate.
  - b. Appoint an elected member as Lead Member who should ensure the entire working group's members are kept informed and involved with progress and act as the primary reporting channel back to the parent body.
3. In line with the task set by the Environment and General Purposes committee, the purpose and remit of the working group is to:
  - a. Develop a Preventative Health Strategy for Knutsford
  - b. Identify areas in which the council can deliver initiatives to support the town's health and wellbeing
  - c. Secure modern health facilities for Knutsford
4. The group does not have delegated powers to make decisions on behalf of the committee or the Town Council nor should exceed its purpose and remit (above) without the parent body's sanction to a change to this Terms of Reference
5. The group reports to the Environment and General Purposes Committee.
6. The group shall provide timely reports to the parent body in the following manner
  - a. Verbal (or written) reports to each committee meeting
  - b. Proposals for initiatives as necessary
7. Meetings of the working group are not usually but may be public meetings.