

Assessment No	1264	Owner	mjcardno
Resource	HSCP	Service	Joint
	FirstName	Surname	Job Title
Head Officer	Margaret-Jane	Cardno	Head of Strategy and Transformation
Members	HSCP Senior Management Team		
	<i>(Please note: the word 'policy' is used as shorthand for strategy policy function or financial decision)</i>		
Policy Title	Removal of Health Improvement Senior (0.8 FTE) Vacant Post		
	The aim, objective, purpose and intended out come of policy		
	To achieve a saving, whilst protecting the wider health improvement provision through the management of savings through vacancies.		
	Service/Partners/Stakeholders/service users involved in the development and/or implementation of policy.		
	HSCP Senior Management Team Health Improvement Team Leads		
Does the proposals involve the procurement of any goods or services?			No
If yes please confirm that you have contacted our procurement services to discuss your requirements.			No
SCREENING			
<i>You must indicate if there is any relevance to the four areas</i>			
Duty to eliminate discrimination (E), advance equal opportunities (A) or foster good relations (F)			Yes
Relevance to Human Rights (HR)			No
Relevance to Health Impacts (H)			Yes
Relevance to Social Economic Impacts (SE)			No
Who will be affected by this policy?			

The combined impact of the removal of this post and using the Health Improvement Lead as a turnover saving means that there is no capacity to undertake work in relation to physical activity and nutrition.

The HSCP Strategic Needs Assessment 2022 shows that 71% of adults in West Dunbartonshire are overweight or obese, 62% of adults meet the guidelines for moderate or vigorous physical activity, this translates to only 52% of women and 72% of men.

The decision not to pursue preventative physical activity and nutrition interventions can have several significant impacts on service users:

Increased Health Risks: Without these programs, individuals may face higher risks of chronic diseases such as obesity, type 2 diabetes, heart disease, and certain cancers. Physical activity and proper nutrition are crucial in preventing these conditions.

Mental Health Decline: Regular physical activity is known to improve mental health by reducing symptoms of depression and anxiety. Removing these programs could lead to a decline in mental well-being.

Higher Healthcare Costs: Preventative programs help reduce the incidence of chronic diseases, which in turn lowers healthcare costs. Without these programs, there could be an increase in medical expenses due to the higher prevalence of preventable diseases.

Reduced Quality of Life: Physical activity and good nutrition contribute to overall well-being and quality of life. Service users may experience a decline in their quality of life without access to these programs.

Increased Health Inequalities: Preventative programs often target vulnerable populations who may not have access to other resources. Removing these programs could widen health inequalities, affecting those who need these services the most.

Who will be/has been involved in the consultation process?

HSCP Senior Management Team
Health Improvement Team Leads

Please outline any particular need/barriers which equality groups may have in relation to this policy list evidence you are using to support this and whether there is any negative impact on particular groups.

Specific group to consider	Needs	Evidence	Impact
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Age	Physical activity and nutrition are crucial for older people for several reasons: Chronic Disease Prevention: Regular physical activity and a balanced diet help prevent and manage chronic conditions such as heart disease, type 2 diabetes, and certain cancers. Mental Health: Exercise can improve mood and reduce symptoms of depression and anxiety. Proper nutrition supports brain health and can help prevent cognitive decline. Bone and Muscle Health: Physical activity strengthens bones and muscles, reducing the risk of osteoporosis and falls. Adequate nutrition, including sufficient calcium and vitamin D, is essential for maintaining bone health. Weight Management: Staying active and eating a healthy diet help maintain a healthy weight, reducing the risk of obesity-related health issues. Independence: Regular exercise improves strength, balance, and coordination, helping older adults maintain their independence and perform daily activities more easily. Immune Function: Emerging research suggests that physical activity may boost immune function, helping older adults fight off illnesses more effectively. Overall Quality of Life: Good nutrition and regular physical activity contribute to overall well-being, enhancing the quality of life for older adults.	Between 2018 and 2043, the 0-15 age group is projected to see the largest percentage decrease (-19.5%) to a population of 12,646. The working age population will also decrease by 11.4%. The population of pensionable age and over is projected to increase by 17.7%. The 75 and over age group is projected to see the largest percentage increase (+67.8%) to 11,836. In terms of size, however, 45 to 64 is projected to remain the largest age group, despite decreasing in size by -17.4% to 21,744 by 2043.	Negative
Disability	Physical activity and nutrition are especially important for individuals	Approx 458 individuals in West Dunbartonshire with a learning disability are known to HSCP	Negative

	with disabilities for several reasons: Chronic Disease Management: People with disabilities are at a higher risk for chronic conditions such as heart disease, diabetes, and obesity. Regular physical activity and proper nutrition can help manage and reduce the risk of these conditions. Improved Mobility and Independence: Exercise can enhance strength, flexibility, and balance, which are crucial for maintaining mobility and independence. This is particularly important for individuals with mobility impairments. Mental Health Benefits: Physical activity can improve mood, reduce symptoms of depression and anxiety, and enhance overall mental well-being. Good nutrition also supports brain health and cognitive function. Enhanced Quality of Life: Engaging in regular physical activity and maintaining a balanced diet can lead to a better quality of life by improving physical health, increasing energy levels, and promoting social interaction. Weight Management: Proper nutrition and regular exercise help maintain a healthy weight, which is important for preventing obesity-related complications. Reduced Risk of Secondary Conditions: Physical activity can help prevent secondary conditions such as pressure sores, respiratory issues, and joint problems, which are common among individuals with disabilities.	learning disability services. Learning disability rates are above the Scottish average. Individuals with learning disabilities have some of the poorest health outcomes of any group in Scotland.	
Gender Reassign			

Marriage & Civil Partnership			
Pregnancy & Maternity			
Race			
Religion and Belief			
Sex	Overweight and obesity are defined as abnormal or excessive fat accumulation that may impair health. Body mass index (BMI) is a simple index of weight-for-height that is commonly used to classify overweight and obesity in adults. It is defined as a person's weight in kilograms divided by the square of their height in meters (kg/m²). For adults, WHO defines overweight and obesity as follows: overweight is a BMI greater than or equal to 25; and obesity is a BMI greater than or equal to 30. Scotland has one of the highest prevalence rates of obesity among developed countries and is a significant public health issue. Obesity is associated with an increased risk of diseases including thirteen common cancers, cardiovascular disease, type 2 diabetes, Alzheimer's disease and dementia.	62% of adults in West Dunbartonshire met the guidelines for moderate or vigorous physical activity (MVPA) of at least 150 minutes of moderate physical activity, 75 minutes of vigorous physical activity, or an equivalent combination of the two levels per week. These levels are similar to those in NHS GGC (63%) and Scotland (65%). However, when broken down by sex, this drops to 53% of women compared to 72% of men. 71% of adults in West Dunbartonshire are overweight or obese. Rates of overweight/obesity are higher for men than women. Rates in West Dunbartonshire are higher than for Scotland or NHS GGC.	Negative
Sexual Orientation			
Human Rights			
Health	The cost of obesity relates not only to health but also indirect economic costs as a result of loss of productivity associated with impaired quality of life along with increased absenteeism.	8.7% of people in West Dunbartonshire use active travel for their journey to work The proportion using active travel (walking or cycling) is lower than the Scottish average (14.6%). West Dunbartonshire has the 8th lowest proportion of active travel to work of the 32 Scottish local authorities.	Negative
Social & Economic Impact			

Cross Cutting

Actions

Policy has a negative impact on an equality group, but is still to be implemented, please provide justification for this.

Justifying the removal of preventative health services, especially when the impact on protected groups is negative, is a complex and sensitive issue. However, given the IJB is experiencing severe budget constraints a reduction in this service means that steps can be taken to (a) prioritise immediate and critical care health and social care services over preventative measures and (b) prioritise other preventative work streams which may have a more significant impact on the population.

It is recognised that the entire sector is under pressure but there may be other methods of delivering preventative care which might be explored. For example, leveraging technology, community-based initiatives, or third sector partnership where other areas of work such as young people's mental health may incorporate aspects of nutrition and physical activity.

Will the impact of the policy be monitored and reported on an ongoing basis?

Given the preventative nature of this work the impact is unlikely to be manifested in the short term. It is acknowledged that the long-term consequences of this decision could outweigh the short-term benefits, leading to increased health inequalities and higher healthcare costs in the future. This will be monitored via the HSCPs joint strategic needs assessment which is undertaken every three years.

Q7 What is your recommendation for this policy?

Introduce

Please provide a meaningful summary of how you have reached the recommendation

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