

REPORT OF HEALTH IN HACKNEY SCRUTINY COMMISSION		
Coronary Heart Disease Prevention Reducing the risk factors	Classification Public	Enclosures
	Ward(s) affected All	

1. FOREWORD

- 1.1 Smoking, eating and physical activity are so-called lifestyle matters. Should any body of any kind do more than give information or provide education? May not people choose the way they behave without external constraints? This argument has surface appeal. Its weakness lies in the fact that people do not make choices in true freedom from outside influences. We need to create an environment that will enable people to make healthier choices and so improve their health
- 1.2 In November 2004 the Secretary of State for Health, Dr John Reid said ‘People do not make decisions about their health under conditions of their own choosing. Some people live in circumstances that make it harder for them to make healthy choices’.
- 1.3 The European Health Commissioner, Markos Kyprianou, was quoted as saying, on 20 January ‘We used to regard obesity as only an American problem. Today obesity is on the rise in Europe, especially among children. I am concerned that advertising of foods high in fat, sugar and salt should not target vulnerable consumers like children’.
- 1.4 The Health Select Committee of the House of Commons has referred to ‘the cynical exploitation of the pester power’ of the advertising of unhealthy food advertising that costs £300M a year in the UK.
- 1.5 The Commission viewed a Channel 4 programme, the Fat Pushers. This illustrated the extent to which children are the target of advertisements for unhealthy foods. Some of these foods are linked by the advertisements to sporting activities yet their consumption and physical fitness are in opposition to each other. This kind of advertising makes it harder for children to make healthy choices.
- 1.6 People may indeed make poor choices through persuasive and costly advertising and lack of good information, but many are also disadvantaged through lack of money and poorer access to cheaper or fresher food.
- 1.7 Those interested in promoting health and preventing disease have a tightrope to walk between blaming people for their unhealthy lifestyles and failing to listen to them before offering them the services and opportunities that would help them change the way they live.

- 1.8 For example, smokers may persist in their practice not because they do not wish to give up but because they are addicted to nicotine to such an extent that they need skilled support as they experience withdrawal symptoms.
- 1.9 In scrutinising the reduction of the main risk factors for coronary heart disease we recognised that we were looking at a rapidly changing scene. Changing, because the need to address smoking, nutrition and physical activity is of such importance nationally, not just in Hackney. The government requires the NHS to be smoke free by the end of 2006. The extent of collaboration between many agencies is huge, as for example in the development of the City & Hackney Healthy Choices Strategy. It has been impossible to learn about everything that is happening, far less to offer any kind of evaluation.

In its recommendations the Commission has concentrated on seeking to encourage the creation of environments in which there is no smoke pollution and in which children, in particular, may have access to the kind of food that is health promoting and may have additional interesting and challenging opportunities to be active.

- 1.10 All the recommendations are made in the knowledge that in 2004 Hackney was found to be the most deprived Borough in England. Every ward is in the top 10% of the most deprived wards in England. This conclusion was reached by the application of seven indicators: income; employment; health deprivation and disability; education, skills and training; barriers to housing and services; crime and disorder and the living environment.

2. INTRODUCTION

- 2.1 The Department of Health's Overview and Scrutiny of Health Guidance stresses that the "focus of health scrutiny is on health improvement." In Hackney there is need for such improvement with reference to coronary heart disease.

- 2.2 The Strategic Vision 2005 -2008 of the City & Hackney Teaching Primary Care Trust records that coronary heart disease is a major cause of death in Hackney. Although such deaths are diminishing in number throughout England and Wales deaths from this cause in those under 65 are higher in Hackney than nationally: 43 per 100,000 and 33 per 100,000 respectively. These data contribute to the all causes mortality of those aged 15 – 64 years which is 31% above the England and Wales average.

The Commission also heard powerful evidence, presented by the PCT that CHD results in a wide variety of societal costs. These include 18m sick days a year. The cost to the whole economy in 2010 is expected to be £3.6b with a reduction of nine years from average life expectancy.

- 2.3 In the National Service Frameworks Reviews for Coronary Heart Disease the first two standards are as follows:

Standard 1 - The NHS and partner agencies should develop, implement and monitor policies that reduce the prevalence of coronary risk factors in the population and reduce inequalities in the risks of developing heart disease.

Standard 2 - The NHS and partner agencies should contribute to a reduction in the prevalence of smoking in the local population.

The main risk factor for coronary heart disease is smoking. Others of major importance are poor nutrition and insufficient physical activity.

2.4 The Health in Hackney Scrutiny Commission addressed this topic in five meetings held at the Town Hall between September 2004 and January 2005. We were grateful for the willing participation of all who made presentations to us.

There were visits to East London Food Access, Thomas Fairchild Community School, Queensbridge and Dalston Sure Start and the Brenner Community Centre.

2.5 The terms of reference to the Commission were as follows:

Review of the services offered and promoted, within the Hackney area, in order to help prevent individuals from developing Coronary Heart Disease. This investigation will include a review of services provided by the City and Hackney Primary Care Trust, NHS trusts, the Council, the Learning Trust and contributors from the voluntary sector that contribute to the reduction of the risk factors. (See 2 below).

- a) *Exploration of the extent to which statutory authorities are maintaining smoke free premises; the ways in which employees are helped to quit smoking; the role of Occupational Health Services in this matter and a review of the extent to which significant public venues in the Borough are smoke free.*
- b) *All aspects of the health promotional policies of the Learning Trust,*
 - *The nutritional value of school meals and their variety, the provision of 'tuck shops' and drink dispensers, the free fruit scheme*
 - *Smoke -free policies, availability of help for young people wishing to give up smoking*
 - *Physical activity strategies*
- c) *The Council's own policies concerning smoke-free workplaces and support for Quit Smoking courses and leisure and physical activity strategies and health promotion schemes.*
- d) *The development of links with as many cultural and religious groups as possible to learn how health promoting messages may better be offered to Hackney's multi-ethnic population and to note health concerns with reference to smoking, overweight and lack of activity which are raised with the Commission.*

2.6 It will be noted that the Commission did not tackle obesity directly despite local concern. The Primary Care Trust estimates that in City and Hackney nearly 20% of young people are obese and that 15% are overweight. The Commission dealt with

the prevention of these problems, rather than their management, through concentration on healthy eating and the encouragement of physical activity.

3. SUMMARY & RECOMMENDATIONS

During the Scrutiny Investigation the Health in Hackney Scrutiny Commission has discovered much about the way services aimed at limiting and preventing the advance of CHD are delivered.

The Commission proposes that its recommendations be put out for consultation with partners, accompanied by a request for a response which will explain whether such proposals are accepted and, if so, identify how they will be financed and which of the various funding partners will be responsible for implementation. It is envisaged that such a response would be received in time for the Commission's scheduled meeting in July 2005 and would not only allow Members to be informed how and if their recommendations will be taken forward but also fulfil the Council's requirement for financial probity and prudence.

This Commission makes a number of recommendations which appear in the relevant sections of the report's findings.

For ease of access the recommendations are also listed as appendices to this document by institution.

4. COMMENTS OF THE FINANCIAL CONTROLLER

- 4.1 Some of the recommendations in this report, if implemented by the relevant agencies, will have financial consequences. In particular recommendations 3, 10, 11, 14, 16 and 17 are likely to have a budgetary impact for the Council. The costs and the source of funding will need to be established and reported through the relevant organisations approval process. In the case of the Council this may require specific reports to be submitted to Cabinet before the implementation can be agreed.

5. COMMENTS OF THE MONITORING OFFICER

- 5.1 The Local Authority (Overview and Scrutiny Committee Health functions) Regulations 2002 provide that an Overview and Scrutiny Committee may review and scrutinise matters relating to the planning, provision and operation of health services in the area and make recommendations to local NHS bodies.

The report of the Scrutiny Commission explains how smoking, nutrition and a lack of physical exercise are major factors which can cause coronary heart disease. The terms of reference of the Commission reviewed how the City and Hackney Primary Care Trust, the NHS Trust, the Council, the Learning Trust and the Voluntary Sector can all work together to reduce the level of coronary heart disease in the Community.

The report makes several recommendations to the Council and the Learning Trust detailing what steps they could take to reduce smoking, improve information about nutrition to patients and students and to increase the opportunity for children to take physical exercise at school or during their leisure time.

Current Government policy and legislation support the recommendations contained in this report.

Under the Health and Safety and Work Act 1974, employers were under a legal duty to provide a safe working environment for their employees. This would include ensuring that employees are protected from the harmful effects of passive smoking.

The Children Act 2004 imposes a duty on the Children's Service Authority to make arrangements with a view to promoting the wellbeing of children within their area. In addition, other agencies including Health and Education are under a duty to co-operate with the Children's Services Authority to improve the wellbeing of children and young people. The wellbeing of children would include their physical health and protecting them from harm and neglect.

The Licensing Act 2003 also provides that the Council must carry out its licensing functions with a view to promoting the 4 licensing objectives. One of those objectives is the protection of children from harm. The Council's statement of licensing policy provides that licensed premises must in their operating schedule, detail arrangements to prevent children being exposed to cigarette smoke and that the Council may expect where necessary, a no-smoking area to be set aside for use by children.

Recent Bills which have been before Parliament also show a move towards the Government taking more interest in preventative measures to reduce obesity in children. During the last few months a Private Members Bill was placed before Parliament which included a provision to remove vending machines from school and improve the nutritional quality of school meals. Although the Bill received widespread support it was not included in the Queen's Speech.

The recommendations contained within this report are consistent with Government Policies about improving the life chances of the more deprived sectors of the population by tackling health issues and improving people's awareness of the link between smoking, nutrition, lack of physical activity and health problems. The recommendations contained within this report are also consistent with current legislation.

The recommendations contained in this report will be considered by Cabinet and Council before being sent to the other Statutory Agencies for comment.

6. FINDINGS

6.1 The Commission received evidence from a variety of sources and by a variety of means. This report cannot contain all such information. Some of the documents listed were distributed with the proceedings of the Commission. Others were referred to by those speaking at the meetings or were referred to by others. As far as possible these documents are listed in the bibliography.

It is hoped that the report, though selective, is not only of interest but is seen to lead logically to the recommendations.

6.2 *Smoking*

Smoking is the single greatest cause of preventable illness and premature death in the UK. It is a major factor in the burden of health inequality suffered by disadvantaged groups and is therefore a particular concern in London.

This Commission heard that smoking kills 120,000 people a year in the UK. In Hackney it is estimated that 29% of the adult population smokes and that 500 people die prematurely every year through smoking. Estimates show that smoking related disease costs the NHS in Hackney more than £7million a year. Additional costs are associated with lost working days. The PCT is actively seeking to show City firms the effect this has on their 'bottom line'.

Different sections of the population smoke at different rates. For example, Turkish and Kurdish men tend to smoke more than average as do those who have lower incomes. Nationally, 25% of the adult population smokes.

The link between smoking and lung cancer was first demonstrated over fifty years ago and since then the evidence for the harm that is caused by tobacco has increased year by year. More recently, the ill-effects of smoke pollution have been demonstrated. It increases the risk of cancer as well as heart disease by 25% and of asthma in children by 50%. 17,000 under five year olds are admitted to hospital every year in England because of breathing problems caused by smoke.

Smoking is the one certain cause of low birth weight that itself tends to increase perinatal death. This is of interest in Hackney because of the above average infant and perinatal mortality rate.

It is essential in saving life and reducing ill health for all agencies to seek to provide smoke free environments and to encourage people to give up smoking in other ways.

Not all smokers wish to give up: they enjoy their habit. Some of those who give up find their addiction hard to break. They experience one or more withdrawal symptoms: depressed mood, insomnia, difficulty concentrating, irritability, restlessness, frustration, anxiety and increased appetite. There are some who overcome these feelings by sheer willpower. Others are greatly helped by nicotine supplements, with or without being a member of a supportive group. Ex-smokers notice benefits. Their sense of smell is no longer dulled by the reek of smoke on clothes and in the home. Breathing may be easier, especially when challenged by physical activity. The time spent on obtaining tobacco and using it is

available for other purposes. The ex-smoker will also have money to spend on other pursuits though may deny that having more disposable income caused them to decide to give up.

Despite all that has been known it has taken years for any campaign to develop to create smoke free workplaces. The hospitality industry still tends to be resistant, so Hackney Empire is to be warmly congratulated on declaring its refurbished premises smoke free.

- 6.2.1 The London Borough of Hackney has recently re-established its smoke free policy and is promoting smoke-stop courses for its employees. Members of the Council have also been informed about these courses.

The Trading Standards department of the London Borough of Hackney contributes to keeping smoking down and the environment safe by monitoring the way cigarettes are advertised, the extent to which minors may be allowed to buy smoking materials and by confiscating counterfeit cigarettes. This project is supported by the City & Hackney Primary Care Trust.

Other institutions have had and indeed are still having difficulty in establishing wholly smoke free premises. This is even the case for the National Health Service whose policies one would expect to set an example in health promotion.

- 6.2.2 The City & Hackney Teaching Primary Care Trust (CHTPCT) has succeeded in the past twelve months in becoming smoke free in all its premises. Staff are asked not to smoke in any location if they are in uniform.

The CHTPCT is the lead organisation in offering smoke stop courses and in training others to so that expertise may be available more widely than could be achieved by PCT staff alone. The Commission heard that over 1400 people received assistance in 'giving-up' smoking in 2003/4

A network of stop smoking advisers has been trained. There has been extensive collaboration with the local acute NHS Trusts, the Midwifery service and Sure Start and the Learning Trust. The Commission believes that such inter-agency collaboration is critical as is working with community groups such as Halkevi.

A three-day campaign around No Smoking Day in March 2004 attracted much interest. People from sport and music were featured and supported the message that smoking adversely affects people's skills and talents in these areas.

In 2004 the Healthcare Commission examined the progress made by CHTPCT with respect to Standards 1 and 2 of the National Frameworks Reviews for coronary heart disease. They found many examples of good practice and progress including the prevention services. They noted, for example, that the percentage of the estimated smoking population setting a quit date in 2002/3 is above average and that the relative spend on health promotion is high.

6.2.3 The difficulties inherent in establishing smoke free workplaces are exemplified by two important local services;

- 1) The London Ambulance Service (LAS) still has designated smoking areas except in newly built ambulance stations.
- 2) The London Fire Brigade (LFB) also has agreed areas for smokers although both the LAS and LFB say they have a smoke free policy at work.

The Metropolitan Police does not allow smoking at all in any workplace, including the public areas.

There is no doubt that smoke free policies protect the non-smoking majority and are a cost-effective way of reducing smoking prevalence.

6.2.4 The Homerton University Hospital is preparing to become smoke free but at present is proposing that smoking is allowed in 'shelters' outside the main buildings.

The Commission recognises that hospitals must address the needs of staff and patients alongside the restriction of smoking on the premises. Although some may just need the loss of opportunity to smoke for them to stop, others need group or one to one support and nicotine replacement. The Homerton Hospital is promoting these activities.

6.2.5 Any mental health trust starts from a worse position than other NHS Trusts. For many years heavy smoking has been the norm amongst long-stay patients. Staff have been much more free to smoke, even, on occasion, alongside the patients for whom they have been responsible.

The Commission therefore understands that a higher acceptance of smoking amongst staff and patients in psychiatric institutions has existed but was encouraged to learn that a senior officer of the East London & the City Mental Health Trust was given the task of starting to promote a smoke free policy throughout the Trust. The involvement of this officer in smoking cessation is to end in mid 2005 as there has been appointed by the London Health Inequalities Collaborative a staff member who will give two and a half days a week to ELCMHT. This time is to be devoted to patients. A physical care nurse is to be appointed to address staff needs. This will include the use of nicotine replacement therapy. Such developments should be welcomed.

In recent months primary health care has become available to the John Howard Centre patients through the part-time appointment of a General Practitioner with a Special Interest. This service provides health assessment and necessary treatment as well as smoking cessation advice that includes nicotine replacement therapy. The Commission welcomes this development.

The ELCMHT is to become a smoke free employer in August 2005. Their premises will not become wholly smoke free then because many patients smoke. The John Howard Centre, part of the Forensic Service of the East London & the City Mental Health Trust, is consulting early in 2005 about having smoke free premises. The

Centre faces greater challenges than other NHS workplaces since at least 80% of the patients are smokers.

6.2.7 The Learning Trust is committed to delivering the several different policies relating to healthy schools. Recently, the DfES Healthy Living Blueprint declared that healthy schools are 'central to the Government's vision'. The target is for every school to become a 'healthy school' by 2006. The LBH smoke-free policy applies to all the school buildings the Borough owns together with the grounds within the school boundary.

The Learning Trust's guidelines on PSHCE (physical, social, health and citizenship education) contribute to targets in various plans including addressing smoking, healthy eating and physical activity. At the Learning Trust it is the responsibility of the Healthy Schools Co-ordinator to ensure that schools promote staff and pupil health and well being in a smoke free environment.

The Commission has learned that a recent edition of the weekly bulletin sent to all schools and Chairs of Governors had a page devoted to the Big Smoke Debate, a London Health Commission programme. Londoners are being asked whether they would prefer to see enclosed public spaces being declared smoke free. "Such programmes have been shown to cause a 30% drop in consumption amongst people who work in smoke free venues. In the long term, making enclosed public places smoke free will help prevent young people from starting smoking."

6.2.8 Recommendations - SMOKING

Recommendation 1

Homerton University Hospital NHS Foundation Trust

- a) Facilities for smokers should not be provided nor should smoking be permitted on the premises or anywhere in the grounds of the Homerton University Hospital
- b) Efforts should continue to recruit staff to Stop Smoking groups, providing nicotine replacement as required
- c) Similar proactive help needs to be made available to all patients, whether in-patients or out-patients
- d) Staff in uniform should be asked not to smoke anywhere
- e) The Occupational Health Service is recommended to make smoking cessation a main objective in 2005/6
- f) All midwives should receive training in smoking cessation techniques as a matter of urgency and be allowed time to practise them
- g) It is recommended that paediatricians routinely enquire about the smoking status of parents, explain how help may be found in giving up as well as explaining how harmful smoke pollution is, especially to babies and young children

Recommendation 2

East London and the City Mental Health NHS Trust

- a) Staff should not smoke on the premises of the East Wing.
- b) Minimal smoking opportunities should be available for patients, if felt to be absolutely unavoidable, bearing in mind the harm caused to others by smoke contamination.
- c) Efforts should be made to recruit staff to Stop Smoking groups, providing nicotine replacement as required.
- d) Pro-active help should be offered to all patients, giving priority to in-patients, with nicotine replacement being made freely available.
- e) Visitors should not be allowed to smoke anywhere in the buildings or in the grounds.
- f) The Occupational Health Service of ELCMHT as a whole should make the reduction of smoking for staff and patients a priority for 2005/6.

Recognising the particular challenges facing the John Howard Centre, the Commission recommends

- a) Staff should not smoke on the premises of the John Howard Centre.
- b) That the key service newly provided in primary care by a General Practitioner with a Special Interest should be increased and be put on a firmer footing as a priority. It was apparent to the Commission that this service is proving effective in enabling patients to give up smoking as well as identifying other needs.
- c) For the time being minimal arrangements should be made for patients who wish to smoke.
- d) That the training of smoke stop advisers should be further developed.
- e) The recruitment of patients and staff to stop smoking groups, with nicotine replacement as needed, should proceed as rapidly as possible.
- f) Visitors should not smoke anywhere in the buildings or in the grounds.

Recommendation 3

The London Borough of Hackney is recommended;

- a) To continue to make Stop Smoking courses available to staff and actively seek enrolment of staff and members of the Council.
- b) To enable Occupational Health staff to receive training in supporting those giving up smoking and to learn the use of nicotine supplements or refer staff to a pharmacist or their general practitioner.
- c) To ensure that the smoke free policy is observed

Recommendations 4

The City & Hackney Teaching Primary Care Trust is recommended;

- a) To enable Occupational Health staff to receive training in supporting those giving up smoking and to learn the use of nicotine supplements or refer staff to a pharmacist or their general practitioner.

- b) To ensure that the smoke free policy is observed

Recommendations 5

The Learning Trust is recommended;

- a) To arrange for trained advisers to attend Sure Start Centres so that young mothers, in particular, may be offered appropriate support in stopping smoking in order to benefit the smokers themselves, their children and those not yet born.
- b) To arrange for the distribution to all schools of the Borough's Smoke Free policy
- c) To ensure that school buildings and school grounds are smoke free at all times
- d) To advise all schools how smoke stop courses may be accessed by staff, and, as necessary, by young people
- e) At least one further smoke stop course should be offered to the staff of the Learning Trust headquarters.

6.3 *Nutrition*

In Hackney there is wide availability of take-away and fast food outlets selling fat rich but relatively cheap foods. But these are not exclusively available in such outlets – the whole environment is food-rich. The marketing of 'fast foods' in grocery stores and the development of new items of confectionery continues. Instant calories are therefore easy to find. It is not possible to ration either the outlets or the foods themselves and yet it is obvious that the environment influences what we eat. The places where food can be controlled are limited but need to be addressed.

Hackney has an array of shops selling fresh foods with diverse cultural emphases. The key to good health, including cardiovascular health, is to eat more fruit and vegetables. Adding one portion of fruit or vegetables daily reduces the risk of CHD by 4% and that of stroke by 6%. Indirectly, insofar as fruit and vegetables displace foods that have higher calorie values, weight management or weight reduction is assisted.

The East London Food and Nutrition Strategy 2003 lists over sixty Food and Nutrition Services and Projects in City and Hackney alone, funded in diverse ways. Each one will achieve benefit for someone but the Commission has concentrated on the ways larger scale effects may be produced.

The Government devised a 5-a-Day scheme, advising that people should aim to have five portions a day of a variety of fruit or vegetables. It is estimated that in England the average amount eaten is only three portions and that it is lowest among children, people on low incomes and those lacking social support. Hackney therefore needs the five a day message. Access, availability and cost can be barriers to eating in this way but attitudes and awareness are also important. It is clear that all statutory agencies have an obligation to support the fulfilment of such targets.

Bearing in mind the diversity of foods eaten worldwide the Commission believes that children can come to enjoy most foods. This happens as their palate begins to be educated as they are weaned. If a child always has sweetened drinks or is given salty foods then the child's tastes are developed accordingly. It is of the highest importance that parents and carers receive early encouragement about the way they feed their children. Support will be needed because it is difficult to introduce an infant to foods that the adult does not care for or which are unfamiliar. Sure Start is a key organisation. With midwife support for breast feeding there then can follow a serious focus on developing healthy nutrition for toddlers.

Food Co-operatives, sponsored by East London Food Access, of which there are three in Hackney at the time of writing, supply fruit and vegetables obtained from Covent Garden on the morning the co-operatives meet and sell them at the lowest possible prices. ELFA handles all paperwork and deliveries and gives intensive training and support to volunteers for the first twelve weeks. The co-operatives also have the social benefits that arise when people living near each other work in collaboration for the benefit of the community.

The prevalence of obesity and those overweight is evidence of poor nutrition. These have been increasing rapidly over the past two decades in the developed world. The Health Survey for England showed that between 1996 and 2001 the proportion of overweight children aged 6 - 15 increased by 7% and that of obese children by 3.5%. These findings were based on a body mass index (BMI) above the 95th percentile to represent obesity and a BMI between the 85th and 95th percentiles to represent overweight.

The Health Select Committee of the House of Commons recommended that the Government should support measures that do not promise overnight results but "constitute a consistent, effective and defined strategy." The Committee was supportive of the school fruit and vegetable scheme and the provision of better school meals.

6.3.1 The City & Hackney Primary Care Trust reports that in their area 20% of young people under 19 years are obese and a further 15% are overweight.

There is evidence that some degree of success in prevention can be achieved by a multi-faceted school based approach: nutrition education, physical activity promotion, reduction in sedentary behaviour, teacher training, curriculum material and modification of school meals and tuck shop provision.

Treatment is far more difficult and there is limited evidence for successful programmes. Family-based interventions may have some success but they are intensive, expensive and hard to maintain because change is slow.

The difficulties people have in losing weight in our food rich environment are confirmed by the success of the multi-million pound corporations that enrol those who want to try to lose weight and by the astronomical sales of books proclaiming the best ways to slim.

- 6.3.2 In East London in 2003 young people of 13-16 years were found to be eating twice the saturated fat, sugar and salt they required yet only a quarter of the fruit and vegetables that they needed for their current and future well-being.

Research of this kind has led to the development of papers such as the Healthy Living Blueprint which was launched at Hackney's Shacklewell Primary School. The Blueprint covers all aspects of food and drink during the school day. Healthy eating is to be addressed in different ways but includes attention to school caterers and involves pupils themselves in action learning such as the development of 'healthy' tuck shops.

Parents are to be encouraged to provide healthy packed lunches. A Food Standards Agency study carried out in September 2004 found that most lunch boxes contain food that is rich in fat, sugar and salt: chocolate bars, biscuits and crisps, cheese products and sandwiches or rolls made from white bread. These might be needed less often if parents had greater confidence in school meals and children found them more attractive. Whilst the support of statutory authorities is important, it is this Commission's view that the influence of the family and the home in making healthy choices is of highest importance.

The Learning Trust has wide opportunities to influence what children and young people eat. The research report School Meals in Secondary Schools in England shows how desperate the situation is in most schools. It demonstrates the lack of training in healthy eating and cooking of three quarters of head cooks and catering managers. Contracts were inadequate and nearly all meals failed the Caroline Walker Trust guidelines for school meals which have been endorsed by the Department for Education and Skills. The research showed that unless the choices available are constrained many pupils will not choose healthy options.

At the Thomas Fairchild Community School, in Hackney, there is in-house responsibility for meals. All meat is organic and as far as possible other ingredients are organic also. Water (tap water!) is freely available and children may keep it in the classroom. There is evidence that pupil attainment, attention and behaviour have improved as a result. The Head, Alasdair Friend, instigated these achievements.

In Hackney many children are entitled to free school meals. If these pupils can easily be identified at meal time there is a disincentive to take the meal and a nutritional opportunity is lost.

The Hackney Strategic Partnership has expressed concerns about vending machines in schools. Characteristically these supply high fat/high sugar items and expensive bottled water.

- 6.3.3 The Commission understands that the Homerton Hospital has been reviewing its meal provision, as has the John Howard Centre of the East London & the City Mental Health Trust. At the John Howard Centre a dietitian is working with the catering department and is supporting the fruit and vegetable 5-a-day programme.

6.3.4 The London Borough of Hackney has been enhancing the quality of the Meals on Wheels service and the Commission is seeking assurances that the meals are in keeping with recognised guidelines.

Such activities as described in 6.3.3 and 6.3.4 (above) should be recognised as positive advancements but in order to achieve improvements in health these need to be maintained as part of a continuing policy.

6.3.5 **Recommendations** - **NUTRITION**

Recommendation 6

The Commission recommends that the Learning Trust, taking into account the flow of Government directives on school meals,

- a) Acts on the findings of research, School Meals in Secondary Schools, adopting the **evidence based** recommendations:
 - i. National Nutrition Standards for school food must be compulsory and based on a combination of food-based and nutrient-based guidelines.
 - ii. Lunch as chosen must be a combination of foods that meet the Balance of Good Health
 - iii. The range of choice must be restricted to a range of healthier options, based on menus balanced over one week
 - iv. Documentation and monitoring–
 - All schools must have written documentation with specifications relating to the nutritional quality of school lunches, and they must be specific, quantitative, measurable and time-bound
 - The standards must be monitored
 - Resources to support the framing of nutritionally relevant specifications must be provided for those developing written documentation
 - v. Training and resources - All head cooks and catering managers must have certified training in healthy catering and how to meet the revised standards

It is hoped that by now resources (training sessions, websites, software, recipes, portion size and food composition data), will have been provided by the DfES .The Learning Trust should avail themselves of this assistance.

- b) Examines the provision of meals to primary schools and seeks energetically to promote the adoption of the approach developed at Thomas Fairchild Community School.
- c) Introduces a cashless method of on the spot payment, for all, in order to encourage uptake by those who are entitled to free school meals.
- d) Ensures the availability of and access to drinking water for all pupils.
- e) Promotes the establishment of a fruit and vegetable co-operative at the Children's Centre being established at the premises of Queensbridge and

- Dalston Sure Start and assesses its performance with a view to development at other centres.
- f) Promotes and further develops the work of dietitians linked with Sure Start so that parents and carers can become confident about establishing healthier patterns of eating by their infants and toddlers
 - g) Supports through the work of Sure Start and its associated projects the development of cook and eat sessions as kitchens are established in the Children's Centres.
 - h) Considers the promotion of Cookery Clubs as an after school activity.

Recommendation 7

That the Homerton Hospital, the East London & the City Mental Health Trust and the London Borough of Hackney demonstrate that the changes made recently in the food they provide are in accordance with *published guidelines* for quality for staff as well as patients and residents of the Borough. This Commission requests access to such data prior to the summer recess 05/06.

Recommendation 8

That the Homerton Hospital further demonstrates that the meals provided for children are consonant with the guidelines of the Caroline Walker Trust

Recommendation 9

That the City and Hackney Primary Care Trust reviews the food provided in the canteen at St Leonard's and demonstrates that appropriate standards are in place.

Recommendation 10

Vending machines - The Commission recommends that **all** vending machines should be removed from the premises of; NHS Trusts, London Borough of Hackney, Schools and the Learning Trust headquarters.

6.4 *Physical Activity*

"The lack of physical activity is a major underlying cause of death, disease and disability. Preliminary data from the WHO study on risk factors suggests that a sedentary lifestyle is one of the ten leading global causes of death and disability . More than two million deaths are each year attributable to physical inactivity." The rise in obesity and overweight is associated with a reduction in physical activity

In producing this report reference to 'exercise' has been avoided because it conjures up pictures of people jogging or enrolling at sports centres. Whatever benefits some obtain in these ways they are not taken up by the majority, sometimes because of perceived risk or cost, inappropriateness or unattractiveness.

The Department of Health supports the following recommendations:

- For adults – at least 30 minutes of physical activity on five or more days of the week of moderate intensity, similar to brisk walking. This can be taken in sessions of 10 to 15 minutes.
- For young people – all should participate in physical activity of at least moderate intensity for one hour per day. This can be made up from a variety of activities including organised sport, play, walking or cycling, physical education or planned exercise.

Physical activity promotes health and a sense of well being in many ways. The promotion of more physical activity in normal daily life is very important. Climbing stairs is a health promoting activity of daily living that is encouraged if stairs are easily accessible and attractive.

The development of the Hackney Sport and Physical Activity Strategy 2004 - 2009 will provide opportunities for improving health. The Hackney Parks Services Three Year Action Plan has even wider application for the promotion of healthful physical activity for the whole population and in particular by walking. Hackney's Sports Team is promoting walks in collaboration with voluntary groups.

Walking is the commonest form of physical activity. The Walking Programme of the Borough recognises the need to create an environment which is safe and convenient for walking, It is recognised that foot paths need to be kept in good repair and that street crossings need to be safe. Every piece of work that makes parks and open spaces more attractive and user friendly promotes walking and contributes to well-being and the health of the population. The Commission welcomes the recruitment of Park Rangers for the warmer months of the year.

This Commission commends the Cabinet for the adoption of these plans and strategies and would ask the Cabinet Member responsible to ensure they are delivered together with the development of a strategic pricing review of leisure facilities – ensuring access is available to all.

- 6.4.1 The Healthy Schools co-ordinator, of the Learning Trust, reported that in East London the level of activity by children leaves much to be desired. 60% boys and 40% girls are moderately active for an hour a day. 30% boys and 57% girls are reported to do less than one hour of physical activity *a week*. It seems that obesity has increased not just because of the food-rich environment but because activity has diminished.

Hackney Council, in partnership with the Learning Trust, is helping schools develop School Travel Plans with the help of Sustrans, the sustainable transport charity. This will enable measures to be put in place to help pupils and staff walk, cycle or use public transport to travel between home and school. Over twenty schools are currently involved.

Hackney has been involved in the Kids Swim Free scheme that started at Easter 2004. The number of under 16 years olds taking part has been encouraging,

considerably increasing in school holidays the use of the Britannia Leisure Centre and the King's Hall. All such increased activity is health promoting.

Although special schemes for a few overweight children are attractive to some – and indeed almost anything will help someone – this Commission believes the key to prevention lies in a whole school - healthy school approach as the Healthy Living Blueprint envisages.

Four Space for Sports and Arts schemes on primary school sites have been completed and in total nine capital programmes funded by the Big Lottery Fund will benefit schools and the wider community. Sixteen school playground improvement projects are to be developed in order to increase the activity levels of children.

The aim is to enable all schools to have the opportunity to become part of the Schools Sports Programme from September 2005 so that three-quarters of children from 5 to 16 years will have a minimum of two hours a week of high quality Physical Education and school sport beyond the curriculum. A full time School Sports co-ordinator funded by the DfES (formerly Sport England) is enabling the development of these programmes in clusters of schools.

- 6.4.2 Outdoor play is to be promoted at Children's Centres.
- 6.4.3 NHS Trusts have responsibilities under the Improving Working Lives directives. The Homerton Hospital has encouraged the establishment of a sports and social committee. There are weekly opportunities for staff to attend football, badminton and netball clubs – all at local facilities.
- 6.4.4 John Howard Centre staff have access to Occupational Health advice about physical activity and gym membership is subsidised. The centre is seeking through sports therapists to devise attractive exercise regimes for patients including outdoor activities in the limited available space.
- 6.4.5 In any of the institutions mentioned in this report everyone should be encouraged to use the stairs. In any housing development the ease of access to and the accessibility and attractiveness of staircases should be promoted.

6.4.6 Recommendations – *PHYSICAL ACTIVITY*

The Commission recommends

Recommendation 11

That the Borough continues to support the Kids Swim Free scheme. The need to provide access to all of LBH's diverse communities should be communicated to the GLA.

Recommendation 12

That in Secondary Schools where an extended day is already in operation additional resources should be commissioned to offer greater varieties of physical activity, chosen in consultation with the pupils.

Recommendation 13

In Primary Schools the Commission notes the development of playgrounds that has been taking place, as for example described in the Hackney Sports and Physical Activity strategy, with age-appropriate equipment. The Commission recommends the appointment of facilitators – perhaps volunteers – who will promote the use of the equipment rather than just being 'on duty'.

Walking to and from school should be promoted, through continuing collaboration with the Council.

Recommendation 14

The importance of physical activity should be promoted by the Occupational Health Services of the NHS Trusts and the LBH.

The importance of affordable access to leisure facilities for both residents and staff should be recognised as important and factored into the Strategic Pricing Review of Leisure Facilities

Recommendation 15

The London Borough of Hackney's planning department is urged to take note of the design of new buildings with reference to stair accessibility when considering planning applications. This should be borne in mind during the development of the LBH Local Development Framework.

Recommendation 16

The Commission also recommends the placement of signs alerting people to the location of staircases on or by lifts in all buildings owned or operated by the statutory agencies consulted by this report.

Recommendation 17

That the Community & Leisure and Environment Directorates explore the possibility of promoting walking to work in summer 2005 payslips.

Recommendation 18

Access to playgrounds and or fields be factored into the design of Academies, Building Schools for the Future and Children's Centre proposals, after hours, providing that site security can be maintained.

6.5.1 Recommendations – STATUTORY AGENCY COLLABORATION

The Commission has witnessed the high degree of collaboration between the agencies involved in this scrutiny exercise. We have become aware of deep concern about health inequalities. It is not clear what can be done about this. The general level of health and life expectancy continue to rise but the differences between those most deprived and the rest stubbornly remain. We think that the recommendations, if adopted, will have some influence in Hackney in the long run.

A forthcoming report from the Office of the Deputy Prime Minister on the use of Neighbourhood Renewal Funding is expected to identify four broad general principles for the allocation of future resources. The first of these reads "the NRF should be more effectively targeted on the most deprived areas." These areas can be identified by the use of the deprivation indices noted above (see 1.10). They have populations of about 1,500 persons.

Recommendation 19

The Commission recommends that one, or at most two, of the neediest areas is selected and a strategy devised to pay detailed and respectful attention to the needs of the people living there so that strenuous efforts may be made to meet them.

7 CONCLUSION

- 7.1 This has been the third investigation conducted by the Health in Hackney Scrutiny Commission. The Commission's perception of the difficulties currently being faced in the reduction of smoking, the promotion of healthy nutrition and of physical activity has been increased. The recommendations have been made in the confidence that there are opportunities to be grasped that will lead to the improvement in health of the people of Hackney.

Lead Councillor: Cllr Muriel Purkiss

Scrutiny Officer: Ben Vinter, ☎ 020-8356 3441

Agreed by the Health in Hackney Scrutiny Commission 9 March 2005

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8 CONTRIBUTORS

The following attended the Commission meetings and gave evidence. Informal contributions were made by others present, both officers and members of the public. The Commission is grateful to all participants. Any omissions or errors are the responsibility of the Commission.

- Dr David McCarthy, Reader in Human Nutrition, London Metropolitan University – 13 September
- Josile Munro, Acting Director Trading Standards, London Borough of Hackney – 20 October
- Elizabeth Kelly, Healthy Schools Co-ordinator, The Learning Trust – 20 October
- Nicola Baboneau, Assistant Director, Children's Services, The Learning Trust – 20 October, 22 December and 17 January.
- Richard Parkes, Director of Life Long Learning, The Learning Trust – 20 October
- Dr David Sloan, Director of Health Improvement, City and Hackney Teaching Primary Care Trust – 18 November
- Kay Eilbert – Senior Public Health Strategist, City and Hackney Teaching Primary Care Trust – 18 November
- Mary Packer, Deputy Director of Health Improvement, City and Hackney Teaching Primary Care Trust – 18 November
- Donna Thomas, Sure Start & Children's Centre Coordinator, The Learning Trust - 22 December
- Tracey Fletcher, Director Service Development, Homerton University Hospital - 22 December
- Richard Gourlay, General Manager for the Directorate of Medicine and Rehabilitation, Homerton University Hospital - 22 December
- Keith Miller, Head of the Corporate Health and Safety Unit, London Borough of Hackney – 18 November
- Leeanne McGee, Forensic Service Director, East London & the City Mental Health Trust – 17 January
- Dr Lucja Kolkiewicz, Consultant Forensic Psychiatrist, ELCMHT – 17 January
- Dr Lucy Carter, General Practitioner, working with Forensic Services, ELCMHT – 17 January
- Carole Stewart, AD Culture and Leisure, LBH - 17 January

The following provided information outside the Commission meetings either in person or by correspondence.

- Mandy Dixon, Hackney Police Borough Business Manager
- Tim Duane, Geographical Information Services officer, LBH
- Alasdair Friend, Head Teacher, Thomas Fairchild Community School, Hackney.
- Steve Hill, East London and City Mental Health Trust
- Sascha House, Neighbourhood Renewal Fund Administrator, CHTPCT
- Graham Howgate, Divisional Officer, Borough Commander, London Fire Brigade (Hackney)
- Netsai Idehen, Programme Manager, Queensbridge & Dalston Sure Start

- Mrs Rachel Levy, Jewish Health Council
- Les Moore, Director, East London Food Access
- Ian Quigley, Stop Smoking Programme Manager, CHTPCT
- Mrs Eve Schiffer, Jewish Health Council
- Margaret Vander, Development Manager (Policy and Partnerships) London Ambulance Service NHS Trust.

9. Membership of the Scrutiny Commission

9.1 Elected Members up to 11/05/05

- Councillor Muriel Purkiss (Chair)
- Councillor Ian Rathbone (Vice -Chair),
- Councillor Vivian Amaran
- Councillor Daniel Kemp
- Councillor Alan Laing
- Councillor Lindsay Montgomery,
- Councillor Sharon Patrick
- Councillor Joseph Stauber

- Scrutiny Officer Ben Vinter

9.2 Co-opted Members

- William G Marks

9.3 External Adviser

- Mrs Elizabeth Taylor

Background papers

The following documents have been relied upon in the preparation of this report or were presented to the Scrutiny Commission as part of the investigation:

- Overview and Scrutiny of Health Guidance, Department of Health, May 2003
- City and Hackney Teaching Primary Care Trust Strategic Vision 2005 - 2008
- European Journal of Public Health Vol 14 No1 (April 2004) pp 95-100 (Rasmussen, Prescott, Sorensen, Sogaard – The Lifetime Costs of Smoking.)
- School Meals in Secondary Schools in England. Michael Nelson, Jane Bradbury, Jenny Poulter et al King's College London, National Centre for Social Research, RR557 Food Standards Agency and Department for Education and Skills. 2004
- CHD NSF Review North East London, Healthcare Commission, June 2004
- Health in Hackney Scrutiny Commission proceedings
- 5-A-Day Initiative – Just Eat More (fruit and veg) Dept of Health 2003
- RELACHS (Research East London Adolescent Community Health Study) 13-16 year olds 2003
- East London Food and Nutrition Strategy 2003
- Every Child Matters – next steps Department of Education and Skills 2004
- Nutrition + Food Poverty – National Heart Forum 2004
- The management of obesity and overweight: and analysis of reviews of diet, physical activity and behavioural approaches - Health Development Agency 2003
- City & Hackney Teaching Primary Care Trust Corporate Business Plan 2004/5
- Hackney Sport & Physical Activity Strategy 2004 – 2009 'Hackney Physically Active'
- Hackney Parks Services Three Year Action Plan 2004
- Health and Inequality, Sarah Curtis, SAGE 2004
- Improving People's Health, Health Development Agency, 2004

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CHD Report	1

Recommendations to the City and Hackney Primary Care Trust

Recommendations 4

The City & Hackney Teaching Primary Care Trust is recommended;

- a) To enable Occupational Health staff to receive training in supporting those giving up smoking and to learn the use of nicotine supplements or refer staff to a pharmacist or their general practitioner.
- b) To ensure that the smoke free policy is observed

Recommendation 9

That the City and Hackney Primary Care Trust reviews the food provided in the canteen at St Leonard's and demonstrates that appropriate standards are in place.

Recommendation 10

Vending machines - The Commission recommends that **all** vending machines should be removed from the premises of; NHS Trusts, London Borough of Hackney, Schools and the Learning Trust headquarters.

Recommendation 14

The importance of physical activity should be promoted by the Occupational Health Services of the NHS Trusts and the LBH.

The importance of affordable access to leisure facilities for both residents and staff should be recognised as important and factored into the Strategic Pricing Review of Leisure Facilities

Recommendation 16

The Commission also recommends the placement of signs alerting people to the location of staircases on or by lifts in all buildings owned or operated by the statutory agencies consulted by this report.

Recommendation 18

Access to playgrounds and or fields be factored into the design of Academies, Building Schools for the Future and Children's Centres proposals after hours providing that site security can be maintained.

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Recommendations to the Homerton University Hospital

Recommendation 1

Homerton University Hospital NHS Foundation Trust

- a) Facilities for smokers should not be provided nor should smoking be permitted on the premises or anywhere in the grounds of the Homerton University Hospital
- b) Efforts should continue to recruit staff to Stop Smoking groups, providing nicotine replacement as required
- c) Similar proactive help needs to be made available to all patients, whether in-patients or out-patients
- d) Staff in uniform should be asked not to smoke anywhere
- e) The Occupational Health Service is recommended to make smoking cessation a main objective in 2005/6
- h) All midwives should receive training in smoking cessation techniques as a matter of urgency and be allowed time to practise them
- i) It is recommended that paediatricians routinely enquire about the smoking status of parents, explain how help may be found in giving up as well as explaining how harmful smoke pollution is, especially to babies and young children

Recommendation 7

That the Homerton Hospital, the East London & the City Mental Health Trust and the London Borough of Hackney demonstrate that the changes made recently in the food they provide are in accordance with *published guidelines* for quality for staff as well as patients and residents of the Borough. This Commission requests access to such data prior to the summer recess 05/06.

Recommendation 8

That the Homerton Hospital further demonstrates that the meals provided for children are consonant with the guidelines of the Caroline Walker Trust

Recommendation 10

Vending machines - The Commission recommends that **all** vending machines should be removed from the premises of NHS Trusts, London Borough of Hackney, Schools and the Learning Trust headquarters.

Recommendation 14

The importance of physical activity should be promoted by the Occupational Health Services of the NHS Trusts and the LBH.

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Recommendations to the East London and City Mental Health Trust

Recommendation 2

East London and the City Mental Health NHS Trust

- a) Staff should not smoke on the premises of the East Wing.
- b) Minimal smoking opportunities should be available for patients, if felt to be absolutely unavoidable, bearing in mind the harm caused to others by smoke contamination.
- c) Efforts should be made to recruit staff to Stop Smoking groups, providing nicotine replacement as required.
- d) Pro-active help should be offered to all patients, giving priority to in-patients, with nicotine replacement being made freely available.
- e) Visitors should not be allowed to smoke anywhere in the buildings or in the grounds.
- f) The Occupational Health Service of ELCMHT as a whole should make the reduction of smoking for staff and patients a priority for 2005/6.

Recognising the particular challenges facing the John Howard Centre, the Commission recommends

- a) Staff should not smoke on the premises of the John Howard Centre.
- b) That the key service newly provided in primary care by a General Practitioner with a Special Interest should be increased and be put on a firmer footing as a priority. It was apparent to the Commission that this service is proving effective in enabling patients to give up smoking as well as identifying other needs.
- c) For the time being minimal arrangements should be made for patients who wish to smoke.
- d) That the training of smoke stop advisers should be further developed.
- e) The recruitment of patients and staff to stop smoking groups, with nicotine replacement as needed, should proceed as rapidly as possible.
- f) Visitors should not smoke anywhere in the buildings or in the grounds.

Recommendation 7

That the Homerton Hospital, the East London & the City Mental Health Trust and the London Borough of Hackney demonstrate that the changes made recently in the food they provide are in accordance with *published guidelines* for quality for staff as well as patients

and residents of the Borough. This Commission requests access to such data prior to the summer recess 05/06.

Recommendation 10

Vending machines - The Commission recommends that **all** vending machines should be removed from the premises of NHS Trusts, London Borough of Hackney, Schools and the Learning Trust headquarters.

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The importance of physical activity should be promoted by the Occupational Health Services of the NHS Trusts and the LBH.

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Recommendations to the London Borough of Hackney

Recommendation 3

The London Borough of Hackney is recommended;

- a) To continue to make Stop Smoking courses available to staff and actively seek enrolment of staff and members of the Council.
- b) To enable Occupational Health staff to receive training in supporting those giving up smoking and to learn the use of nicotine supplements or refer staff to a pharmacist or their general practitioner.
- c) To ensure that the smoke free policy is observed

Recommendation 7

That the Homerton Hospital, the East London & the City Mental Health Trust and the London Borough of Hackney demonstrate that the changes made recently in the food they provide are in accordance with *published guidelines* for quality for staff as well as patients and residents of the Borough. This Commission requests access to such data prior to the summer recess 05/06.

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That the Borough continues to support the Kids Swim Free scheme. The need to provide access to all of LBH's diverse communities should be communicated to the GLA.

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The importance of affordable access to leisure facilities for both residents and staff should be recognised as important and factored into the Strategic Pricing Review of Leisure Facilities

Recommendation 15

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That the Community & Leisure and Environment Directorates explore the possibility of promoting walking to work in summer 2005 payslips.

Recommendation 18

Access to playgrounds and or fields be factored into the design of Academies, Building Schools for the Future and Children's Centre proposals after hours providing that site security can be maintained.

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Recommendations to the Learning Trust

Recommendations 5

The Learning Trust is recommended;

- a) To arrange for trained advisers to attend Sure Start Centres so that young mothers, in particular, may be offered appropriate support in stopping smoking in order to benefit the smokers themselves, their children and those not yet born.
- b) To arrange for the distribution to all schools of the Borough's Smoke Free policy
- c) To ensure that school buildings and school grounds are smoke free at all times
- d) To advise all schools how smoke stop courses may be accessed by staff, and, as necessary, by young people
- e) To offer at least one further smoke stop course to the staff of the Learning Trust headquarters.

Recommendation 6

The Commission recommends that the Learning Trust, taking into account the flow of Government directives on school meals,

- a) Acts on the findings of research, Schools meals in Secondary Schools, adopting the **evidence based** recommendations:
 - i. National Nutrition Standards for school food must be compulsory and based on a combination of food-based and nutrient-based guidelines.
 - ii. Lunch as chosen must be a combination of foods that meet the Balance of Good Health
 - iii. The range of choice must be restricted to a range of healthier options, based on menus balanced over one week
 - iv. Documentation and monitoring–
 - All schools must have written documentation with specifications relating to the nutritional quality of school lunches, and they must be specific, quantitative, measurable and time-bound
 - The standards must be monitored
 - Resources to support the framing of nutritionally relevant specifications must be provided for those developing written documentation

- v. Training and resources - All head cooks and catering managers must have certified training in healthy catering and how to meet the revised standards

It is hoped that by now resources (training sessions, websites, software, recipes, portion size and food composition data), will have been provided by the DfES .The Learning Trust should avail themselves of this assistance.

- b) Examines the provision of meals to primary schools and seeks energetically to promote the adoption of the approach developed at Thomas Fairchild Community School.
- c) Introduces a cashless method of on the spot payment, for all, in order to encourage uptake by those who are entitled to free school meals.
- d) Ensures the availability of and access to drinking water for all pupils.
- e) Promotes the establishment of a fruit and vegetable co-operative at the Children's Centre being established at the premises of Queensbridge and Dalston Sure Start and assesses its performance with a view to development at other centres.
- f) Promotes and further develops the work of dietitians linked with Sure Start so that parents and carers can become confident about establishing healthier patterns of eating by their infants and toddlers
- g) Supports through the work of Sure Start and its associated projects the development of cook and eat sessions as kitchens are established in the Children's Centres.
- h) Considers the promotion of Cookery Clubs as an after school activity.

Recommendation 10

Vending machines - The Commission recommends that **all** vending machines should be removed from the premises of NHS Trusts, London Borough of Hackney, Schools and the Learning Trust headquarters.

Recommendation 12

In Secondary Schools where an extended day is already in operation additional resources should be commissioned to offer greater varieties of physical activity, chosen in consultation with the pupils.

Recommendation 13

In Primary Schools the Commission notes the development of playgrounds that has been taking place, as for example described in the Hackney Sports and Physical Activity strategy, with age-appropriate equipment. The Commission recommends the appointment of facilitators – perhaps volunteers – who will promote the use of the equipment rather than just being 'on duty'.

Walking to and from school should be promoted, through continuing collaboration with the Council.

Recommendation 16

The Commission also recommends the placement of signs alerting people to the location of staircases on or by lifts in all buildings owned or operated by the statutory agencies consulted by this report.

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Recommendation to the Hackney Strategic Partnership

Recommendation 19

The Commission recommends that one, or at most two, of the neediest areas is selected and a strategy devised to pay detailed and respectful attention to the needs of the people living there so that strenuous efforts may be made to meet them.

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