## **B&D Weight Management Services**



Commissioned Weight Management Services Check full eligibility criteria & suitability for programme			Diabetes Prevention/Programmes for Patient with Type 2 Diabetes Check full eligibility criteria & suitability for programme					
<ul> <li>Tier 1: Eat Well, Live Well, Feel Great</li> <li>B&amp;D residents with learning disabilities</li> <li>Tier 1: NHS Weight Loss Plan app</li> <li>B&amp;D residents with overweight/obesity</li> <li>Tier 2: Lean Living</li> <li>B&amp;D residents with overweight/obesity</li> <li>Tier 3: Not currently commissioned</li> <li>Tier 4: Not currently commissioned within BHR, referred across London, if needed.</li> </ul>			<ul> <li>Diabetes Prevention Programme         <ul> <li>Pre-diabetes or previous gestational diabetes</li> <li><u>NHS Type 2 Path to Remission Programme</u> <ul></ul></li></ul></li></ul>					
U N I V E R S A L	Local Sports & Leisure Facilities Everyone Active: Abbey Leisure Centre, Becontree Heath Leisure Centre, Jim Peters Stadium. School Leisure facilities: Barking Abbey School Leisure Centre, Barking and Dagenham College Leisure Centre, Castle Green Leisure Centre, Robert Clack School Leisure Centre, Sydney Russell Leisure Centre. See links for community based physical activity programmes below: Physical activity to keep you healthy   London Borough of Barking and Dagenham (Ibbd.gov.uk) Community Physical Activity Programme 2023.pdf (Ibbd.gov.uk)	<ul> <li>NHS</li> <li>Loss</li> <li>NHS</li> <li>Cout</li> <li>Active</li> <li>Her</li> <li>This</li> </ul>	Resources & Ap S 12 Week Weigh S Plan S Live Well ch to 5K ve 10 Spirit s girl can en outdoor gym	ht	Other Fitness Opportunitie Park run: Barking St Chads bowls club Health Walks Good Gym Green Gym	>	Discounted Gym Memberships 1. Through Better Health Campaign with free online library of health resources 2. Through Exercise Referral Scheme	
Upo	dated November 2023							

Service Details									
Service	Target Population	Overview	Intervention Length	Eligibility criteria	Exclusion criteria	Referral Process	Referral Route		
NHS Digital weight management https://www.engla nd.nhs.uk/wp- content/uploads/2 021/06/The-NHS- Digital-Weight- Management- Programme- General-Practice- Toolkit.pdf	Type 2 diabetes with overweight/ obesity and/or hypertension	A 12-week online behavioural and lifestyle programme. People can access it via a smartphone or computer with internet access. This programme offers digital weight management support via a 12 week intervention at 3 intensity levels: • Level 1: Digital support only • Level 2: Digital support + human coaching • Level 3: Digital support + enhanced human coaching The 'Referral Hub' triages patients to one of three levels of intervention based on demographic features associated with greater likelihood of non-completion of a weight management programme (based on evidence from the NHS Diabetes Prevention Programme). Service users will have a choice of provider for a 12-week digital weight management service.	12 weeks	<ul> <li>Over the age of 18</li> <li>Has a BMI of 30+ (adjusted to ≥27.5 for people from Black, Asian and ethnic minority backgrounds)</li> <li>Has a diagnosis of diabetes (Type 1 or Type 2) or hypertension or both.</li> </ul>	<ul> <li>Currently pregnant</li> <li>Diagnosed eating disorder</li> <li>Significant unmanaged comorbidity</li> <li>Bariatric surgery within the past 2 years</li> <li>Moderate/severe frailty (as recorded on frailty register)</li> <li>For patients aged &gt;80, further supporting information requested from GP to ensure suitability</li> </ul>	Trained health care professional via GP surgery	Referrals via ERS		
NHS Type 2 Path to Remission https://oviva.com/ uk/en/for-primary- care-t2dr/	Type 2 diabetes with overweight/obesity	<ul> <li>A 12 month treatment programme with the aim of achieving diabetes remission. The programme is lifestyle-led health management, rather than a medication first approach. It supports patients with significant weight loss (15kg), improvement in HbA1c and reduction in medication needs. Patients are offered a choice of digital or F2F care and their Oviva clinician supports them in 1:1 sessions through:</li> <li>Oviva Change - 12 weeks of total diet replacement, 800-900 calories a day. Followed by 6 weeks of food reintroduction, tailored to the patient.</li> <li>Oviva Sustain - 34 weeks of establishing new healthy habits</li> <li>Patients are guided to use our unique digital tools and Oviva learn content to support their journey and can continue to access these once they have completed the programme.</li> </ul>	12 months	<ul> <li>Criteria is based on <u>DiRECT Trial</u>.</li> <li>Min age of 18 and max age of 65 years old</li> <li>Min BMI of 27kg/m<sup>2</sup> (25kg/m2 in people of ethnic minority origin).</li> <li>BMI obtained from self-measured weight is acceptable for referral. If this cannot be obtained, a clinic-measured value within the last 12 months may be used, provided there is no concern that weight may have reduced, such that the individual would not be eligible for the programme at present.</li> <li>Diagnosed with within the last 6 years</li> <li>HbA1c eligibility, most recent value, which must be within 12 months:</li> <li>If on diabetes medication, HbA1c 43-87 mmol/mol</li> <li>If there is any concern that HbA1c may have changed since last measured, such that repeat testing may indicate that the individual would not be eligible for the programme at present.</li> <li>Wust have attended for monitoring and diabetes review when last offered, including retinal screening, and commit to continue attending annual reviews, even if remission is achieved. This does not exclude newly diagnosed patients.</li> </ul>	<ul> <li>Current insulin use</li> <li>Pregnant or planning to become pregnant within the next 6 months</li> <li>Current breastfeeding</li> <li>Significant physical comorbidities: active cancer, heart attack or stroke in last 6 months, severe heart failure defined as equivalent to the New York heart Association grade 3 or 4 (NYHA), recent eGFR &lt;30 mls/min/1.73m2, active liver disease (non-alcoholic fatty liver disease (NAFLD) is not an exclusion), a history of hepatoma or &lt;6 months of onset of acute hepatitis Active substance use disorder</li> <li>Active eating disorder (including binge eating disorder)</li> <li>Porphyria</li> <li>Known proliferative retinopathy that has not been treated</li> <li>Had bariatric surgery (those on the waiting list not excluded)</li> <li>Patient has been discharged from the programme previously within the last 12 months</li> <li>Health professional assessment that the person is unable to understand or meet the demands of the treatment programme and/or monitoring requirements</li> </ul>	Trained health care professional via GP surgery	Complete the referral form which is embedded into your clinical system and send it to: ovivauk.t2dr@nhs.net.		
NHS Diabetes Prevention Programme <u>https://healthiery</u> <u>ou.org.uk/</u>		<ul> <li>The Healthier You: NHS Diabetes Prevention Programme is a 9-month tailored, personalised programme offering support to reduce risk of type 2 diabetes through holistic wellbeing support underpinned by behaviour change with education around the five pillars of health: nutrition, mindset, movement, sleep &amp; alcohol.</li> <li>Patients can choose from 3 programmes: <ul> <li>In person group programme.</li> <li>Digital programme delivered by Second Nature.</li> <li>Tailored remote courses for specific cohorts of patients.</li> </ul> </li> </ul>	9 months	<ul> <li>Be aged 18 or over.</li> <li>Has 'non-diabetic hyperglycaemia' (NDH) identified by blood test within the last 12 months.</li> <li>Non-Diabetic Hyperglycaemia (NDH)</li> <li>HbA1c of 42-47.9mmol/mol (6.0%-6.4%),</li> <li>Fasting Plasma Glucose (FPG) of 5.5-6.9mmol/l</li> <li>If the patient has a history of Gestational Diabetes Mellitus (GDM) then HbA1c can be below 42 or FPG below 5.5</li> </ul>	<ul> <li>Pregnant</li> <li>Has blood results suggesting type 2 diabetes.</li> <li>Bariatric Surgery within the last 2 years.</li> <li>Active Eating Disorder.</li> </ul>	<ul> <li>Trained health care professional via GP surgery</li> <li>Patient can self-register with the following information: <ul> <li>Blood Test Result (either your HbAtc or FPG reading)</li> <li>Date of Blood Test (must be within the past 12 months)</li> <li>NHS Number</li> </ul> </li> </ul>	Complete the referral form which is embedded into your clinical system and send it to: <u>healthier.you@nhs.</u> <u>net.</u> Self-referral: <u>0333 047</u> <u>9999</u> or https://healthieryou.org.uk /register/		

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Service	Target Population	Overview	Intervention Length	Eligibility criteria	Exclusion criteria	Referral Process	Referral Route	
Exercise on Referral https://www.lbb d.gov.uk/physic al-activity-to- keep-you- healthy	Individual with physical or mental health conditions	A12 week programme which provides discounted access to gyms whilst working with a lifestyle coach on a 1-1 basis. The programme is open to people who have a physical or mental health condition. Individuals are required to attend twice a week and if they complete the programme is eligible for discounted leisure centre membership.	12 weeks	<ul> <li>Residents 18+ with at least one of the following:</li> <li>cancer</li> <li>chronic obstructive pulmonary disease (a group of lung diseases)</li> <li>diabetes type I or II controlled</li> <li>hypercholesterolemia (high cholesterol)</li> <li>hypertension</li> <li>mild to moderate depression, osteoporosis, rheumatoid arthritis, stress or anxiety</li> </ul>	<ul> <li>Unstable angina.</li> <li>Resting BP +180/100.</li> <li>Significant drop in BP while exercising.</li> <li>Resting HR +100bpm.</li> <li>Ventricular or aortic aneurysm.</li> <li>Uncontrolled or acute heart failure.</li> <li>Uncontrolled arrhythmias.</li> <li>Temporary febrile illness.</li> <li>Unexplained dizziness or loss of consciousness</li> <li>Poorly controlled or severe diabetes.</li> <li>Uncontrolled respiratory conditions (asthma, COPD/Emphysema).</li> <li>Established symptomatic cerebra-vascular disease.</li> <li>Recent (- 6months) cardiac event</li> </ul>	Trained health care profession al via GP surgery	Referrals via ERS Service Contact Healthy Lifestyles Team Tel: 020 8724 8018, Email: healthy.lifestyles@lbbd. gov.uk	
Eat well, Live well and Feel Great https://www.lbb d.gov.uk/physic al-activity-to- keep-you- healthy	B&D residents with learning disabilities	For adults living in Barking and Dagenham with a learning disability, aims to : • achieve a sustainable weight loss • reduce further weight gain • get into a regular healthy eating pattern • learn portion control and reduce overeating • become more physically active • learn new long-term healthy lifestyle skills	1 year	Residents 18+ with one of the following conditions; • cancer • chronic obstructive pulmonary disease (a group of lung diseases) • diabetes type I or II controlled • hypercholesterolemia (high cholesterol) • hypertension • mild to moderate depression • osteoporosis • rheumatoid arthritis • stress or anxiety	<ul> <li>Currently pregnant women</li> <li>Individuals who do not live in Barking and Dagenham</li> <li>Pre-existing bariatric surgery</li> <li>Individuals who have already been through the programme with the last 12 months</li> <li>Any individual with one of the following</li> <li>serious uncontrolled disease, e.g. angina, asthma, COPD, heart failure, aortic stenosis</li> <li>recent complicated Myocardial infarction and/or awaiting further investigation</li> <li>uncontrolled arrhythmia that compromise cardiac function</li> <li>blood pressure at rest above 180mg Systolic, 120mg Diastolic</li> <li>unstable psychiatric disorder including self, harm &amp; suicidal behaviours</li> <li>alcohol / substance misuse</li> <li>acute infection</li> </ul>	Trained health care profession al via GP surgery OR Patient self- referral	Service Contact Healthy Lifestyles Team Tel: 020 8724 8018, Email: healthy.lifestyles@lbbd. gov.uk	
Lean Living https://www.lbb d.gov.uk/eat- healthier	General population with overweight/obesity	Learning, exercise and Nutrition! A 8 or 12 week online or face to face behavioural and lifestyle programme. The programme covers key nutrition topics and works to support adults to improve their physical activity levels.	8 or 12 weeks	<ul> <li>Over the age of 16</li> <li>Has a BMI of 25+ (adjusted to ≥23.5 for people from Black, Asian and ethnic minority backgrounds)</li> <li>Barking and Dagenham Resident</li> </ul>	Same as above	Patient self- referral Online	Service Contact Healthy Lifestyles Team Tel: 020 8724 8018, Email: healthy.lifestyles@lbbd. gov.uk	
NHS Weight Loss Plan app Lose weight - Better Health - <u>NHS</u> (www.nhs.uk)	General population with overweight/obesity	free 12-week diet and exercise plan. The plan, which has been downloaded more than 7 million times, is designed to help you lose weight safely – and keep it off.	12 weeks	<ul> <li>Over the age of 18</li> <li>Has a BMI of 25+ (adjusted to ≥23.5 for people from Black, Asian and ethnic minority backgrounds)</li> <li>Has controlled type I or type II diabetes</li> <li>Has hypertension</li> <li>Barking and Dagenham Resident</li> </ul>	<ul> <li>An individual who:</li> <li>is currently pregnant</li> <li>has moderate or severe frailty</li> <li>has an active eating disorder</li> <li>Had has bariatric surgery within the last 2 years</li> </ul>	Freely available on the App Store and Google Play.		

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