

Newham Weight Management Services

Commissioned Weight Management Services

- [NHS Digital Weight Management Programme](#)

The NHS Digital Weight Management Programme

Level 3: Digital with human coaching plus

Level 2: Digital with human coaching

Level 1: Digital only

Obesity (BMI 30+ with adjustment for ethnicity) with a current diagnosis of Diabetes +/- hypertension

- [Live Well Newham](#)

Live Well Newham

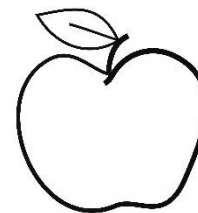
Diabetes Prevention/ Programmes for Patients with Type 2 Diabetes

- [Diabetes Prevention Programme](#)
- [Type 2 Path to Remission Programme](#)

HEALTHIER YOU
NHS DIABETES PREVENTION PROGRAMME

Universal Services

- [Physical Activity Offers](#)
- [Physical Activity Online Offers](#)



Service Details

Service	Target Population	Overview	Intervention Length	Eligibility criteria	Exclusion criteria	Who can refer	AccuRx Template & Coded	Referral Route
<p>NHS Digital weight management</p> <p>https://www.england.nhs.uk/wp-content/uploads/2021/06/The-NHS-Digital-Weight-Management-Programme-General-Practice-Toolkit.pdf</p>	Type 2 diabetes with overweight/ obesity and/or hypertension	<p>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:</p> <ul style="list-style-type: none"> Level 1: Digital support only Level 2: Digital support + human coaching Level 3: Digital support + enhanced human coaching <p>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.</p>	12 weeks	<ul style="list-style-type: none"> Over the age of 18 Has a BMI of 30+ (adjusted to ≥ 27.5 for people from Black, Asian and ethnic minority backgrounds) Has a diagnosis of diabetes (Type 1 or Type 2) or hypertension or both. 	<ul style="list-style-type: none"> Currently pregnant Diagnosed eating disorder Significant unmanaged comorbidity Bariatric surgery within the past 2 years Moderate/severe frailty (as recorded on frailty register) For patients aged >80, further supporting information requested from GP to ensure suitability 	• Via GP Surgery	Yes	Referrals via ERS
<p>NHS Type 2 Path to Remission</p> <p>https://oviva.com/uk/en/for-primary-care-t2dr/</p>	Type 2 diabetes with overweight/obesity	<p>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:</p> <ul style="list-style-type: none"> Oviva Change - 12 weeks of total diet replacement, 800-900 calories a day. Followed by 6 weeks of food reintroduction, tailored to the patient. Oviva Sustain - 34 weeks of establishing new healthy habits <p>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.</p>	12 months	<p>Criteria is based on DiRECT Trial.</p> <ul style="list-style-type: none"> Min age of 18 and max age of 65 years old Min BMI of 27kg/m² (25kg/m² in people of ethnic minority origin). 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. Diagnosed with within the last 6 years HbA1c eligibility, most recent value, which must be within 12 months: <ul style="list-style-type: none"> If on diabetes medication, HbA1c 43-87 mmol/mol If not on diabetes medication, HbA1c 48-87 mmol/mol 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, HbA1c should be rechecked before referral is considered. Must 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. 	<p>Current insulin use</p> <ul style="list-style-type: none"> Pregnant or planning to become pregnant within the next 6 months Current breastfeeding 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 <30 mls/min/1.73m², active liver disease (non-alcoholic fatty liver disease (NAFLD) is not an exclusion), a history of hepatoma or <6 months of onset of acute hepatitis Active substance use disorder Active eating disorder (including binge eating disorder) Porphyria Known proliferative retinopathy that has not been treated Had bariatric surgery (those on the waiting list not excluded) Patient has been discharged from the programme previously within the last 12 months Health professional assessment that the person is unable to understand or meet the demands of the treatment programme and/or monitoring requirements 	Trained health care professional via GP surgery	Yes	Complete the referral form which is embedded into your clinical system and send it to: ovivauk.t2dr@nhs.net .
<p>NHS Diabetes Prevention Programme</p> <p>https://healthieryou.org.uk/</p>	Pre-diabetes	<p>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 & alcohol.</p> <p>Patients can choose from 3 programmes:</p> <ul style="list-style-type: none"> In person group programme. Digital programme delivered by Second Nature. Tailored remote courses for specific cohorts of patients. 	9 months	<ul style="list-style-type: none"> Be aged 18 or over. Has 'non-diabetic hyperglycaemia' (NDH) identified by blood test within the last 12 months. Non-Diabetic Hyperglycaemia (NDH) HbA1c of 42-47.9mmol/mol (6.0%-6.4%), Fasting Plasma Glucose (FPG) of 5.5-6.9mmol/l If the patient has a history of Gestational Diabetes Mellitus (GDM) then HbA1c can be below 42 or FPG below 5.5 	<ul style="list-style-type: none"> Pregnant Has blood results suggesting type 2 diabetes. Bariatric Surgery within the last 2 years. Active Eating Disorder. 	Trained health care professional via GP surgery Patient can self-register with the following information: <ul style="list-style-type: none"> Blood Test Result (either your HbA1c or FPG reading) Date of Blood Test (must be within the past 12 months) NHS Number 	No	Complete the referral form which is embedded into your clinical system and send it to: healthier.you@nhs.net Self-referral: 0333 047 9999 or https://healthieryou.org.uk/register/

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LBN Live Well Newham-Weight Management and physical activity https://xylahealthandwellbeing.com/our-services/weight-management/live-well-newham/	All Newham residents with overweight/obesity	<p>12 weeks culturally appropriate programme which achieves long-term behaviour change and personalised packages of support for priority groups.</p> <p>Service users will be fully supported by their Health Coach & Exercise Specialists throughout their journey.</p> <p>12 face-to-face and online learning modules and access to the wellbeing way app.</p>	12 weeks	<ul style="list-style-type: none"> Newham resident Over the age of 18 BMI of 25+ for White residents or 23+ for residents of South Asian, Chinese and Black African Caribbean ethnicities 	<ul style="list-style-type: none"> Accessing Low Calorie Diet Programme or NDPP Pregnancy (but not postpartum) Already accessed a Tier 2 Weight Management service twice in the last year Have an underlying medical cause for obesity and would benefit from more intensive clinical management than a Tier 2 service. 	<ul style="list-style-type: none"> Via GP Surgery Patient self-referral 	Yes	<p>Referrals via ERS</p> <p>Patients can also self-refer using the link https://xylahealthandwellbeing.com/our-services/weight-management/live-well-newham/self-referral/</p>
Nutrition Kitchen-Cooking Classes for Adults, families and young people	All Newham residents with overweight/obesity	<p>12 weeks culturally appropriate cooking classes for residents who are overweight/obese. Includes cooking classes for families and young people.</p> <p>Sessions are delivered face to face at Nutrition Kitchen, East Ham Leisure centre, Catherine Road community centre and other locations with a kitchen facility.</p>	12 weeks	<ul style="list-style-type: none"> Newham resident BMI of 25+ for White residents or 23+ for residents of South Asian, Chinese and Black African Caribbean ethnicities 	<p>Currently accessing LWN.</p> <ul style="list-style-type: none"> Pregnancy (but not postpartum) 	<ul style="list-style-type: none"> Patient self-referral Joy and Well Newham Hib 		<p>https://forms.office.com/r/G4k94GMXfl Or call 07931786697 to refer self</p>

Newham Universal Offers

Physical Activity Offers	<p>https://www.newham.gov.uk/community-parks-leisure/physical-activity</p> <p>Live Fit Newham Free Weight Management Programme in Newham (xylahealthandwellbeing.com)</p>
Physical Activity Online Offers	<p>https://www.newham.gov.uk/coronavirus-covid-19/covid-19-advice-support/11</p> <p>Live Fit Newham Free Weight Management Programme in Newham (xylahealthandwellbeing.com)</p>