

16 April 2013

Agenda Item: 5

## REPORT OF THE DIRECTOR OF PUBLIC HEALTH

# NOTTINGHAMSHIRE COUNTY OVERWEIGHT/OBESITY PREVENTION AND WEIGHT MANAGEMENT SERVICES

## Purpose of the Report

1. The purpose of this report is to provide a case for the decommissioning of the current overweight/obesity prevention and weight management services across Nottinghamshire County and put in place new arrangements no later than March 31<sup>st</sup> 2015.

## **Information and Advice**

## Definitions

2. In the context of this report, the terms overweight and obesity (excess weight) refers to when weight gain, in the form of fat, has reached a point which affects a person's health. Excess weight gain in adults is caused by an imbalance between 'energy in' and 'energy expenditure'. It is important to maintain weight in a healthy range (rather than having a weight that is too high or too low).

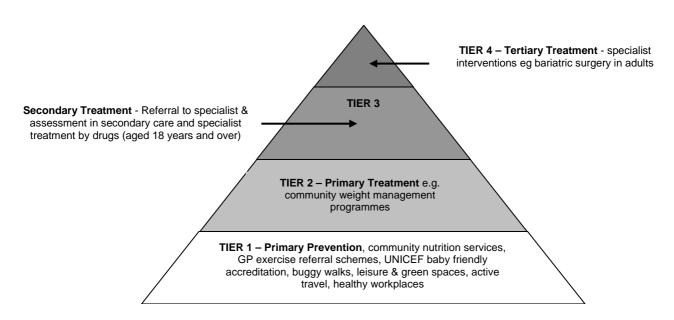
## The Context

3. Excess weight threatens the health and wellbeing of individuals and has a financial burden in term of health and social care costs, on employers through lost productivity and on families because of the increasing burden on long-term chronic disability. It is responsible for an estimated 9,000 premature deaths per year in England.

4. Unhealthy diets combined with physical inactivity have contributed to an increase in excess weight in England and almost a quarter of adults and almost a sixth of children under the age of 11 are obese. It is predicted that by 2050, 60% of adult men, 50% of adult women and 25% of children may be obese. Alongside this, being overweight has become usual, rather than unusual.

5. The Nottinghamshire Health and Wellbeing Strategy has identified excess weight, this complex yet common condition, as a key priority. The complexity and interrelationships of the causes of excess weight require the need for a multi-dimensional approach to deal with it. The Nottinghamshire prevention and management of excess weight model consists of four tiers:

#### Nottinghamshire Prevention and Management of Excess Weight Model



- Tier 1 focuses on the prevention of excess weight for the wider population, with an emphasis on those who are more at risk e.g. lower socio-economic and socially disadvantaged groups, particularly women, people with physical disabilities, people with learning difficulties, people diagnosed with a severe and enduring mental illness and older people.
- Tier 2 focuses on the provision of community weight management services for those who are overweight or obese
- Tier 3 focuses on the provision of a specialist multidisciplinary weight management service for those with complex obesity. This tier includes the use of anti-obesity drugs which should only be considered in adults aged 18 years and over after dietary, exercise and behavioural approaches have been started and evaluated.
- Tier 4 focuses on the provision of weight loss (bariatric) surgery for adults defined as morbidly obese, when all other measures have failed. In the East Midlands, people must have a BMI of 50 kg/m<sup>2</sup> and above may be eligible for surgery. The NHS Commissioning Board will be responsible for the commissioning of bariatric surgery from April 2013.

6. From April 2013, Public Health in the Local Authority will become the responsible commissioner for obesity interventions, locally led nutrition and physical activity initiatives via funding from the Public Health ring-fenced Grant. Nottinghamshire currently invests approximately £960K in overweight/obesity prevention and management services through a large number of different contracts and providers. An additional £540K has been requested from the Public Health ring fenced Grant to meet the current gaps in service provision. Future spend for overweight/obesity prevention and weight management services will therefore be £1.5 million.

## The Rationale

7. In October 2011 the Department of Health issued "Healthy Lives, Healthy People: a call to action on Obesity in England". This sets out the national strategy to tackling excess weight and sets new national ambitions:

- A sustained downward trend in the level of excess weight in children by 2020
- A downward trend in the level of excess weight averaged across all adults by 2020.

8. The new level of ambition involves adopting a 'life course' approach from pre-conception through to older age. There are specific opportunities and challenges at each stage of the life course and action is needed at all ages to avert the short and long-term consequences of excess weight and to ensure health inequalities are addressed. Action needs to encompass an appropriate balance of investment and effort between prevention, treatment and support.

9. The National Institute for Health and Clinical Excellence (NICE) has produced several guidance documents in relation to the reduction of obesity. This guidance is used to inform our local strategic approach and service provision.

10. Obesity prevention and management services in Nottinghamshire have historically been funded and commissioned through a variety of funding streams and managed by various commissioners using different performance frameworks. This has included the separate commissioning and management of obesity prevention and weight management services by NHS Bassetlaw. Developments have tended to consist of extensions or adjustments to existing contracts and across Nottinghamshire there has been no formal procurement exercise to test for value for money.

- 11. A new approach to the prevention and management of excess weight is required as:
  - The current service provision does not meet the identified needs of the local population in which around a quarter of adults are estimated to be obese and one in five children in reception is overweight or obese and nearly one in three children in Year 6 is overweight or obese. Neither does it support the management of obesity during pregnancy. Maternal obesity increases childhood obesity and infant mortality as well as impacting on the mother's immediate (complications of pregnancy) and future health.
  - There are parts of the overweight/obesity pathway in which there are gaps (for example there is no Tier 3 specialist weight management service) and some parts in which there is risk of duplication (Tier1).
  - Resources are not currently aligned to those areas of highest need or to those groups most at risk of excess weight.
  - Currently there is not an appropriate balance of investment and effort between prevention and treatment.
  - There is inequity in current service provision across the county with Tier 2 community weight management services only being delivered in Bassetlaw.
  - Overweight and obesity pathways and services are not currently integrated to ensure they deliver clinically effective outcomes whilst being cost efficient and providing value for money.
  - Current commissioned interventions may not be compliant with NICE national guidance.

12. The short-comings of the current service provision (which consists of many different disconnected service providers across the county) affect both the equity of access and quality of service provision. The commissioning of an integrated overweight/obesity prevention and weight management service should overcome these issues, as well as being more cost efficient and providing value for money.

## **Expected Outcomes**

13. By having new arrangements in place will ensure that future prevention and management of excess weight services are:

- Designed and focussed on improved outcomes for service users, their family members and carers as well as the wider community
- Equitable across the county
- Responsive to (changing) local needs
- Cost effective
- Fit for purpose
- Innovative by creating new models of delivery and ways of working
- Linked to the National Child Measurement Programme and Health Checks (both of which will be mandatory functions of the local authority from April 2013), providing evidence based obesity prevention and weight management interventions that individuals and families can be signposted to.
- Supportive of the outcomes specified in the Nottinghamshire Obesity Strategy currently being refreshed, and the Public Health Outcomes Framework
- Contributing to a reduction in excess weight in children and adults in Nottinghamshire.
- Reducing the need for access to higher tiers of the Nottinghamshire prevention and management of excess weight and therefore the need to use anti-obesity drugs and surgery.

## Other Options Considered

14. **Maintain the status quo.** This option would not address the issues specified in section 11 nor secure the outcomes identified in section 13 above. In addition the Local Authority needs to meet its legal obligations in relation to procurement processes.

15. Internally review services and make changes to the system via variation and/or extensions of current contracts. This option may fail to disentangle the short comings that there are within the current system identified in section 12 above. Without a whole system redesign, it is unlikely to ensure value for money and cost efficiencies may not be maximised. The risk of inequity across the county would potentially remain. Utilising formal procurement options will increase transparency of process and decision making.

16. Consider the provision of an overweight/obesity prevention and management service as part of the Health and Wellbeing Integrated Lifestyle Service proposal. This option may ensure value for money, prevent duplication of work by building on 'making every contact count', may be more attractive to the potential provider market and will again utilise formal procurement options that will increase transparency of process and decision making. However it may mean that a service is not established as quickly as if it was undertaken as a separate project.

## **Statutory and Policy Implications**

17. This report has been compiled after consideration of implications in respect of finance, equal opportunities, human resources, crime and disorder, human rights, the safeguarding of children, sustainability and the environment and those using the service and where such

implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

## Implications for Service Users

18. The local population of Nottinghamshire and those are increased risk of an excess weight will be able to access high quality obesity prevention and weight management services across the county.

## **Financial Implications**

19. The remodelling and re-commissioning of service provision and ways of working will address issues of cost efficiency and value for money. Any expenditure related to the re-commissioning of services will be met within the £1.5m budget allocation.

## **RECOMMENDATION/S**

20. That the Public Health Sub-Committee are asked to:

- i. Approve the review of existing overweight/obesity prevention and weight management services across Nottinghamshire County with a view to decommissioning existing services and commissioning new services no later than March 31<sup>st</sup> 2015.
- ii. Receive a follow up report in 6 months' time to outline progress made and on the commissioning of the proposed new services.

## Chris Kenny Director of Public Health

## For any enquiries about this report please contact: Anne Pridgeon (Public Health)

## **Constitutional Comments (NAB 28.03.13)**

Public Health Sub-Committee has authority to approve the recommendation set out in this report by virtue of its terms of reference.

## Financial Comments (ZM 28.03.13)

The financial implications of re-commissioning the service are outlined in paragraph 19 of this report.

## Electoral Division(s) and Member(s) Affected

All