



**Dorset
Clinical Commissioning Group**

NHS Dorset Clinical Commissioning Group

Obesity and Tier 3 Weight Management Programme Criteria Based Access Protocol



Supporting people in Dorset to lead healthier lives

NHS DORSET CLINICAL COMMISSIONING GROUP

OBESITY AND TIER 3 WEIGHT MANAGEMENT CRITERIA BASED ACCESS PROTOCOL

1. INTRODUCTION AND SCOPE

- 1.1. NHS England's national Clinical Policy: Complex and Specialised Obesity Surgery outlines the model of care for managing obesity as follows:
- Tier 1 – Primary care with community advice.
 - Tier 2 – Primary care with community interventions.
 - Tier 3 – A community/primary care based multi-disciplinary team (MDT) to provide an intensive level of input to patients (Tier 3 Weight Management Programme).
 - Tier 4 - Specialist obesity services including surgery.
- 1.2. Tier 1 - GPs are required to collect data on any patient with a BMI of 30 or more and offer lifestyle advice.
- 1.3. Tier 2 - The GP practice of a patient identified as having morbid obesity should identify a health professional who will act as the advisor to each patient and who will assist in drawing up a specific programme of non-surgical measures. Regular assessment should be undertaken to review progress. Non-surgical resources available to control obesity include:
- counselling;
 - psychological assessment and programme;
 - medication;
 - exercise programmes;
 - dietician input.
- 1.4. Patients and GPs can access additional Tier 2 services through LiveWell Dorset:
www.livewelldorset.co.uk/index.html
- 1.5. Tier 3 - The GP practice will support the patient in a co-ordinated way (Tier 2) for at least two years prior to considering referral to the Tier 3 Weight Management Programme (WMP).
- 1.6. Subject to the criteria outlined in 3.1, referral to the Dorset Tier 3 WMP can be made by the patient's GP or other appropriate Health Care Professional i.e. dietician or diabetes specialist nurse supported by the GP and using the Tier 3 referral form. Where form doesn't fully evidence co-ordinated Tier 2 support it will be returned and referral can only be considered as an Individual Patient Treatment request.

- 1.7. Tier 4 - On completion, the Tier 3 WMP will provide recommendations for each individual regarding future weight management including appropriateness of referral for bariatric surgical assessment.
- 1.8. NHS England currently commission Tier 4 bariatric surgery services and require that all individuals have attended and complied with a local Tier 3 WMP before referral to Tier 4 bariatric surgery services can be considered.

2. DEFINITIONS

- 2.1. Any definitions related to this Criteria Based Access Protocol are included as a Glossary at Appendix A.

3. TIER 3 ACCESS CRITERIA

- 3.1. All patients referred to Tier 3 WMP must meet the NICE guidance for bariatric surgery:
 - BMI of >35, in the presence of diabetes and/or other significant co-morbid conditions; or
 - BMI >40 without the presence of diabetes and/or other significant co-morbid conditions.
- 3.2. Patients will only be accepted by the Dorset Tier 3 WMP if evidence is presented to demonstrate sustained and co-ordinated Tier 1 and 2 community interventions have been tried and failed.
- 3.3. Patients will be aged 16 years or over.
- 3.4. Patients that have already undergone bariatric surgery can be considered for referral to Tier 3 WMP. However, they will need to have been supported within primary care in line with the access criteria.
- 3.5. Patients who do not meet the access criteria above may be considered on an individual patient basis by the Dorset CCG IPT team as outlined in 4.1. and 4.2.

4. CASES FOR INDIVIDUAL CONSIDERATION

- 4.1. Should a patient not meet the criteria detailed within this protocol, the Policy for Individual Patient Treatments (which is available on the NHS Dorset Clinical Commissioning Group website or upon request), recognises that there will be occasions when patients who are not considered for funding may have good clinical reasons for being treated as exceptions. In such cases the requesting clinician must provide further information to support the case for being considered as an exception.

- 4.2. The fact that treatment is likely to be effective for a patient is not, itself a basis for exceptional circumstances. In order for funding to be agreed there must be some unusual or unique clinical factor in respect of the patient that suggests that they are:
- significantly different to the general population of patients with the particular condition; and
 - they are likely to gain significantly more benefits from the intervention than might be expected for the average patient with the condition
- 4.3. In these circumstances, please refer to the Individual Patient Treatment Team at the address below:

First Floor West
Vespasian House
Barrack Road
Dorchester
DT1 1TG
Telephone no: 01305 368936
Email: individual.requests@dorsetccg.nhs.uk

5. EXCLUSIONS

- 5.1. The following clinical conditions may exclude patients from referral to the Tier 3 WMP:
- serious uncontrolled disease, e.g. angina, asthma, COPD, heart failure, aortic stenosis
 - Recent complicated Myocardial infarction and/or awaiting further investigation
 - Uncontrolled arrhythmia that compromise cardiac function
 - Blood pressure at rest above 180mg Systolic, 120mg Diastolic.
 - Clients with an unstable psychiatric disorder
 - Acute infection
 - Where the patient is pregnant, GPs and primary care professionals should contact the service for support and guidance on assisting patients during the antenatal period.
- 5.2. Any patient that meets NICE guidance for bariatric surgery but is identified as clinically inappropriate for Tier 3 WMP in the presence of serious uncontrolled disease or unstable psychiatric disorder may be considered by NHS England IPT team for direct referral to Tier 4 bariatric services for assessment and advice:
England.ifrsouth@nhs.net

6. INFORMATION FOR PATIENTS

- 6.1. GPs and referrers should provide patients with information about the Tier 3 service prior to referral including the Tier 3 Patient Information Leaflet.

7. CONSULTATION

- 7.1. Prior to approval from Dorset CCG's Clinical Commissioning Committee this Protocol was reviewed by the Long Term Conditions, Frail Elderly and End of Life Clinical Delivery Group which includes commissioners, clinicians and other relevant stakeholders.
- 7.2. An Equality Impact Assessment for this Criteria Based Access Protocol is available on request.

8. RECOMMENDATION AND APPROVAL PROCESS

- 8.1. As documented in NHS Dorset CCG's 'Procedure for the management and development of procedural documents', the Criteria Based Access Protocols was formally recommended by the Clinical Delivery Group responsible for the protocol, prior to formal approval by the Clinical Commissioning Committee.

9. COMMUNICATION/DISSEMINATION

- 9.1. Following approval of Criteria Based Access Protocols at Clinical Commissioning Committee the Protocol has been uploaded to the CCG's Intranet, Internet and was circulated through the GP Bulletin.

10. IMPLEMENTATION

- 10.1. Following review of this Criteria Based Access Protocol it was agreed there were no new aspects to be included in this version and there was therefore no requirement for an implementation plan.

11. DOCUMENT REVIEW FREQUENCY AND VERSION CONTROL

- 11.1. This Criteria Based Access Protocol requires a review every three years, or in the event of any changes to national guidance or when new guidance is issued.

FREQUENTLY ASKED QUESTIONS

N/A

GLOSSARY

N/A

APPENDIX C

A DOCUMENT DETAILS	
Procedural Document Number	93
Author (Name and Job Title)	Ruth Doe, Programme Lead
Clinical Delivery Group (recommending group)	Long Term Conditions, Frail Elderly and End of Life
Date of recommendation by CDG	12 January 2016
Date of approval by CCC	17 February 2016
Version	V1
Review frequency	4 years
Review date	January 2019

B CONSULTATION PROCESS			
Version No	Review Date	Author and Job Title	Level of Consultation
V1	Dec 2019	Ruth Doe, Programme Lead	Patients, GP's, Specialist providers

C VERSION CONTROL					
Date of recommendation	Version No	Review date	Nature of change	Approval date	Approval Committee
January 2016	1.0	January 2016	Review and format change.		CCC

D ASSOCIATED DOCUMENTS
<ul style="list-style-type: none"> • Policy for Individual Patient Treatment, NHS Dorset CCG • Making sense of Local Access Based Protocols, NHS Dorset CCG • Dorset Tier 3 WMP Referral Form • Dorset Tier 3 WMP Patient Information Leaflet

E SUPPORTING DOCUMENTS/EVIDENCE BASED REFERENCES		
Evidence	Hyperlink (if available)	Date
<p>(NICE) Clinical Guideline 43: Obesity; guidance on the prevention, identification, assessment and management of overweight and obesity in adults and children, December 2006.</p> <p>The NHS England Clinical Policy: <i>Complex and Specialised Obesity Surgery</i></p>	<p>https://www.nice.org.uk/guidance/cg43</p> <p>https://www.england.nhs.uk/wp-content/uploads/2013/04/a05-p-a.pdf</p>	

G DISTRIBUTION LIST			
Internal CCG Intranet	CCG Internet Website	Communications Bulletin	External stakeholders
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DORSET CCG TIER 3 WEIGHT MANAGEMENT PROGRAMME
REFERRAL PATHWAY

