

**TO: DIRECTOR OF ADULT SERVICES, HEALTH & HOUSING  
11 AUGUST 2017**

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## **ADULT WEIGHT MANAGEMENT SERVICE**

### **1 PURPOSE OF REPORT**

- 1.1 To outline the background and recommendation for future procurement of tendering adult Weight Management services in Bracknell Forest

### **2 RECOMMENDATION**

- 2.1 **To advertise for minimum 3 quotations from community based commercial weight management specialist providers (maximum annual contract value £25,000 and estimated 458 clients annually. The contract will be initially for one year, with an option to extend for an additional year subject to financial review (1+1). The service will funded from within existing Public Health Grant resources.**

### **3 REASONS FOR RECOMMENDATION**

- 3.1 The existing contract will come to end in March 2018. Obesity is a major determinant of physical morbidity and disability, and as such, drives demand on health social care services. Previous research and local experience has shown group based programmes effective in producing sustained weight loss among those classified as obese.
- 3.2 The maximum contract value is set at a lower level than in previous years as we will be supplementing the service with new, digital and community-asset based options for weight management support.

### **4 ALTERNATIVE OPTIONS CONSIDERED**

- 4.1 Not procuring a service would leave Bracknell Forest as the only Unitary Authority in the region without funded a weight management service for obese residents. Given the high cost and uncertain quality of many commercial programmes, this would result in many people unnecessarily remaining obese.

### **5 SUPPORTING INFORMATION**

- 5.1 The most recent data from Public Health Outcomes Framework shows the prevalence of obesity (BMI obesity (BMI>30kg/m<sup>2</sup>) is estimated at 23.8% of women and 23.6% of men – approaching 1 in 4 people.
- 5.2 There is consistent evidence that obese people with no intervention will continue to gain weight over time.

## Unrestricted

- 5.3 There are well-documented medical complications arising from obesity, linked to both independent risk factors and worsening of at least 30 common health conditions. An estimated 14% of cancer deaths in men and 20% of deaths in women are due to obesity. People who are obese can also experience social isolation and discrimination and are at increased risk of depression.
- 5.4 The national Adult Obesity Care Pathway contains 4 levels, with the service of concern in this paper being located at Tier 2.
- Tier 1 - prevention and health promotion services
  - Tier 2 - primary care and community interventions
  - Tier 3 - Community Specialist Weight Management Services
  - Tier 4 - supra-specialist interventions (surgical interventions)
- 5.5 During 2016/17 to present (extension period), Public Health worked with the provider and local stakeholders to establish several new referral pathways across the health and social care system. During 2016/17 service use data was collected and examined to establish whether or not these new pathways had led to a sustained increase in uptake without any decrease in service efficacy (including at follow up assessment). This analysis has now been completed. It was found that the local weight management service has seen annual growth of over 500% and has developed links with a number of new referrers e.g. Children centres and school family support workers. Of the 573 people who have used the service to-date, 62% are completers and 58% of the completers achieved 5% weight loss which is medically significant.
- 5.6 Public Health is currently in development of asset based and digital approaches aimed at proving an alternative to the face to face, group programmes. This will provide extra treatment capacity and new, alternative options for residents wishing to find support with weight management. The new support will be designed and delivered 'in-house' by the Public Health team in collaboration with the voluntary sector and residents within our new Public Health social media community (circa 2000 people at time of this report).
- 5.7 The successful provider will regularly report on the number of referral uptakes and the spend on a monthly basis. The provider will also take an active role on working with relevant local stakeholders to promote local services to encourage lifestyle changes.
- 5.8 There will be no risk of overspend, as the contract will be put on a 'payment per user' basis with a maximum number of users set for the life of the contract. Previous experience of programme completion and weight loss percentages indicates that this will provide excellent value for money (average 62% completion and 58% completers achieved 5% weight loss).
- 5.9 Tendering criteria will include business validity, financial standing and performance history of the potential service providers. A decision will be reached in the basis of 60:40 price to quality ratio (in favour of price). The most recent NICE guidance (PH53) recommendations: - Weight Management Lifestyle services for overweight or obese adults will form the bases of the new tendering requirements.

## **6 ADVICE RECEIVED FROM STATUTORY AND OTHER OFFICERS**

### Borough Solicitor

6.1 The relevant legal issues are addressed within the body of the report

### Borough Treasurer

6.2 Expenditure in 2016/17 on weight management services was £49k. Therefore, a contract ceiling of £25k will deliver savings of approximately £24k on current expenditure levels. Public Health funds are ringfenced, so any saving will free up resources within the Public Health budget, but not the wider Council budget.

### Equalities Impact Assessment

6.3 None

### Strategic Risk Management Issues

6.4 None

## **7 CONSULTATION**

### Principal Groups Consulted

7.1 Not applicable

### Method of Consultation

7.2 Not applicable

### Representations Received

7.3 Not applicable

### Background Papers

Weight Management: Lifestyle services for overweight or obese adults  
NICE guidelines (PH53) Published May 2014

### Contact for further information

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