Annex G: Specialist Weight Management Service survey

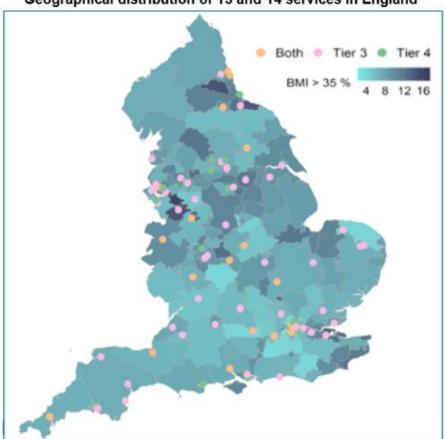
2024 survey

- This survey was distributed to all known Specialist Weight Management Services in April 2024, for an initial period of six weeks, the extended to eight weeks.
- In total, 34/42 (80%) of ICBs provided a response to this survey.

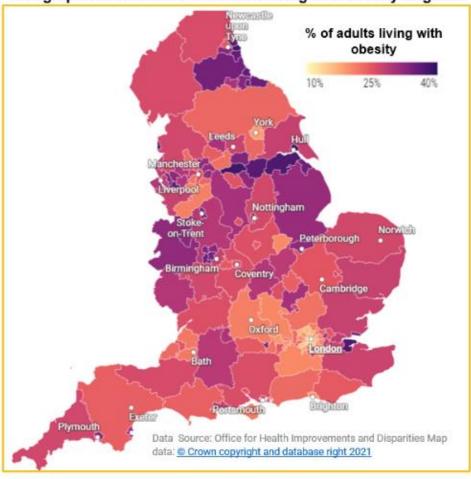
Findings

Commissioning of Tier 3 and Tier 4 Specialist Weight Management Services
(SWMS) across England is variable. Provision of services are not necessarily
distributed to the areas of highest clinical need. This variation inevitably risks
exacerbating health inequalities and bring challenges in the current service provision
and pathway to meet demand.

Geographical distribution of T3 and T4 services in England



Geographical distribution of adults living with obesity England



Tier 3 SWMS

Commissionina

- 76% of ICBs commissioned a Tier 3 SWMS.
- 7% did not commission a Tier 3 SWMS. 7% had a local agreement with neighbouring ICB and 9% had an alternative local suitable equivalent.

Service Delivery

- Average waiting list time for treatment is 16 months.
- 40% separating into pharmacotherapy (~2yr) & non-pharmacotherapy waiting lists
 (~1yr)
- Average 1200/year new patient capacity per ICB (range of 250-2500).
- Average 18-month treatment pathway duration in Tier 3 service.
- Hybrid delivery (e.g. face to face and digital) accounts for 77% of Tier 3 delivery.

Access criteria and stratification

- Variability in eligibility criteria mainly centred around Body Mass Index (BMI). BMI
 >35 + comorbidities most common threshold.
- 50% if services using risk stratification tools to manage access.

Tier 4 SWMS

Commissioning

- 85% of ICBs commissioned a Tier 4 SWMS.
- 12% who did not commission a Tier 4 SWMS had a local agreement with neighbouring ICB.

Service Delivery

- Average waiting list time of 12 months.
- Average 180 new patients capacity per year per ICB.
- Average post operation monitoring lasting 24 months.

Access criteria and stratification

- Variability in eligibility criteria mainly centred around BMI. BMI >40 + most common threshold for access to treatment.
- 50% of services using risk stratification tools to manage access.

Consideration

• Tier 4 services prescribe weight loss pharmacotherapy while a patient is prepared for surgical intervention. However, it is unclear whether this is initiated at assessment for surgery or is a continuation of therapy initiated in Tier 3.