



# Resource impact statement

Resource impact

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## Indicator

IND220: The percentage of patients with a BMI 27.5 kg/m<sup>2</sup> or more (or 30 kg/m<sup>2</sup> or more if ethnicity is recorded as White) in the preceding 12 months who have been offered referral to a weight management programme within 90 days of the BMI being recorded.

IND221: The percentage of patients with hypertension or diabetes and a BMI 27.5 kg/m<sup>2</sup> or more (or 30 kg/m<sup>2</sup> or more if ethnicity is recorded as White) in the preceding 12 months who have been referred to a weight management programme within 90 days of the BMI being recorded.

## Resource impact

It is estimated that 269 million appointments in general practice were attended in England between 01 January 2019 and 31 December 2019 (see [NHS Digital's Appointments in General Practice](#)), equivalent to around 920 per week for a GP practice assuming a list size of 10,000 people. There are around 56.0 million people in England (Office for National Statistics, 2018). Around 44.0 million people are aged 18 years and over. This is equivalent to around 7,900 people per 10,000 population.

It is estimated that around 31.5% adults (2,500 people per 10,000 population) in the UK currently have their weight recorded in primary care each year ([Nicholson et al, 2019](#)). Around 35.2% (870 people per 10,000 population) have a BMI 27.5 kg/m<sup>2</sup> or more (or 30 kg/m<sup>2</sup> or more if ethnicity is recorded as White).

A theoretical increase in the number of people who have their weight recorded in primary care each year is modelled. The current rate of 31.5% is increased by 1%, 5% and 10%. This could lead to around 30, 140 and 280 consultations being impacted per year for a GP practice. This is around 1,380, 6,910 and 13,820 consultations in a Sustainability Transformation Partnership (STP) area, as shown in table 1. It is expected that inclusion of an offer of having weight taken and performing the measurement in a consultation will extend the duration of the consultation.

**Table 1 Estimated annual resource impact of 1%, 5% and 10% increases in people having their weight taken in primary care each year in the eligible population.**

-	Current activity	1% increase	5% increase	10% increase
Per GP practice (10,000 people)	870	30	140	280
Per STP (500,000 people)	43,540	1,380	6,910	13,820

This assumes a GP practice is 10,000 people and an STP is 500,000 people, and that weight measurements are taken by either a GP or Practice Nurse ([Nicholson et al, 2019](#)). It is anticipated that the weight measurements are taken during an existing consultation and the impact of the indicator is that the consultation may be slightly longer in duration. Weight measurements are used as a diagnostic tool to decide if a referral to a weight management service is appropriate.

If additional people accept and then attend referrals, more weight management programme capacity will be required by providers. This may result in a resource impact for weight management services because of this additional activity. This is not included in the assessment above.