Health Improvement

Lanarkshire Weight Management Service (LWMS) & Type 2 Diabetes Framework Initiatives Flash Report 2022/2023

LWMS brings together a range of existing and new programmes to support weight management, healthy eating, physical activity and green health, with interventions from Tier 1 healthy lifestyle support to Tier 4 bariatric surgery referrals. **This flash report is an update on weight management programmes to support those with Type 2 Diabetes.**

First STEPS

First STEPS (New Diagnosis of Type 2)

First Steps has been re-established as an offering for newly diagnosed diabetes patients during 22/23.

The Diabetes Specialist Dietitian's Team developed a new bespoke education package, upskilled relevant delivery staff and piloted the delivery before progressing with growth in the services. These are offered face-to face-and digitally and engaged 643 patients.

The team continue to offer pathways for patients to be looped into long term weight management support, and where necessary towards lifestyle intervention opportunities in greenspace, leisure, active travel and community opportunities. Patients will also be considered for upward referral towards Tier 3 Step Towards A Healthier You and Counterweight Remission.

643 patients took part in 22/23

Tier 3 – Group and 1 - 1

One to One Sessions

Healthier Together 1 - 1 sessions have continued across 22/23 and is in place to meet the needs of patients who do not meet the criteria for engagement through our group sessions.

Across 22/23 there have been five patients engaged in Healthier Together 1 – 1 with four on the waiting list. Two patients are currently in the maintenance phase.

Group Sessions

69 patients engaged

Both STEP Towards a Healthier You and Healthier Together groups continued to be delivered, evaluated and evolved throughout 22/23. The offerings for established diabetes and complex weight management patients have proven to be successful through the initial deliveries and have now grown to see delivery across several venues via face to face delivery.

Healthier Together

42 patients engaged face-to-face and 17 via digital delivery.

STEP Towards A Healthier You

We ran 2 pilot groups in 22/23:

- Group 2 complete: 4 participants, 100% completion of active and 75% completion of maintenance
- Group 3 in maintenance: 8 participants invited. 6 started - 100% completion of active and 100% now in maintenance.

55 patients engaged

Counterweight Plus

Counterweight Plus is now well established and as such patients are screened and admitted in an ongoing process.

The home delivery service continued throughout 2022/2023 and work is ongoing towards robust monitoring, review and feedback of patient experience as well as onward support upon completion.

286 patients engaged

Let's Prevent

- Let's Prevent returned to a normal way of delivery, via face to face groups, whilst also retaining the function of seeing patients via Near Me, Telephone and also offering Patient online learning module.
- Patients can now access continued support after completion via Second Nature, Weigh to Go and Community based opportunities.
- The programme has been adapted to allow for delivery towards specialist Gestational Diabetes Mellitus groups offering support to aid better outcomes long term for Mum's across Lanarkshire.
- We had 690 people referred into Let's Prevent, with a completion number of 286.

Gestational Diabetes Mellitus (GDM)

- The service has adapted to engage with Mums across the Pre and Postnatal phases and are now building in links for enhanced support through Weigh to Go New Mums and community based support.
- The target to develop and enhance the GDM Service this has been achieved and taken further by supporting and representation on the Scottish Government national group
- Further work has been undertaken to link Let's Prevent for GDM patients.

273 patients assessed

The T2DM Framework team are evaluating delivery and capacity as services are expanded. Where possible we are building our staff resource to match the demands of the service and adapting patient pathways to integrate to better integrated them with clinical and community weight management programmes. For more information please contact Jonathan Cavana, Service Manager, by emailing jonathan.cavana@lanarkshire.scot.nhs.uk.