

Mid and South Essex Integrated Care System (MSE ICS) Integrated Weight Management Services Pathway Redesign

Collaborative Working Project – Outcomes Report

Project title	Mid and South Essex Integrated Care System (MSE ICS) Integrated Weight Management Services Pathway Redesign
Project timeframe	January 2023 – December 2023
Project Partner(s)	Mid and South Essex ICS (MSE ICS) Novo Nordisk Ltd
The Challenge	The provision of weight management services across MSE – like many health systems nationally – has been fragmented. The challenge at a local level was that patients moved systematically through weight management 'tiers' rather than being seen in the most appropriate care setting.
	MSE ICS has an ambitious vision to transform the provision of weight management services across its ICS footprint. It aspires to deliver genuinely integrated care to ensure people across Essex get access to an appropriately personalised weight management service at the right time, with demonstrable outcomes. This forms a central part of MSE ICS's Health and Care Partnership's efforts to enhance its contribution towards enabling healthy behaviours for all residents, and providing targeted support for those who need it.
The Objective	The partnership aimed to deliver a more integrated and transparent Weight Management Service (WMS) across the MSE footprint. For patients, the ambition was to create:
	A more personalised and smoother patient experience of weight management services which was:
	 Available and offered to a higher proportion of the eligible population; and Reduced barriers to accessing care in Tier 2 and 3 services
	Measuring the project outcomes – key performance metrics The success of the project was measured according to the following criteria:
	 Vision for change: Clear understanding of the current state of Adult Weight

UK24OB00013 Date of preparation: March 2024

- Current pathway, handover points between services, budget and resources mapped across the pathway
- Build a shared understanding of an integrated, personalised pathway, including referral, triage, treatment and support, and evaluation across system partners

Weight management service redesign:

- A specification for, and delivery of, a more integrated, personalised weight management service offer capable of delivering improved individual, population and system outcomes
- A simpler referral process, to lower barriers to referral

Outcomes and evaluation

 A new outcome and evaluation framework focused on individual outcome and experience measures, population-level and system metrics, enabling future development of a WMS dashboard

What we did

Following the recruitment of a project manager and project support manager – which led to dedicated capacity to support transformation – a new governance structure was established. This included a weight management Steering Group that touched every part of the system and reported to the MSE ICS Population Health Improvement Board.

The Steering Group, chaired by MSE ICB Associate Director, Health Inequalities and Prevention, met monthly and secured representation from the following partners as required by the Terms of Reference that were agreed at the first meeting:

- MSE ICB
 - i. Associate Director, Health Inequalities and Prevention
 - ii. Assistant Medical Director
 - iii. Business Intelligence, Finance, Contract and Communication support
- Essex County Council
- Southend-on-Sea City Council
- Basildon and Brentwood Alliance
- South East Alliance
- Thurrock Alliance
- Thurrock Council
- NHS Arden and GEM CSU
- Novo Nordisk Ltd

Under the Steering Group, work was taken forward in three areas:

- Service and gap analysis
- Outcome and evaluation framework
- Service specification

Contributions made by each partner to the project include:

Novo Nordisk:

- Project management support, including:
 - Co-creating project plan and timeline
 - Mapping current and future pathway based on MSE ICS data analysis and desktop research
 - Developing local and national stakeholder map, and support of stakeholder interviews
 - Drafting internal communications plan
 - Patient and clinical involvement and engagement plans
 - Input into Steering Group meeting agendas and presentations, and co-presentation agenda items
 - Facilitating meetings with national experts on weight management services
 - Attendance at monthly Steering Group meetings and fortnightly planning meetings
- Financial contribution to recruit and cover the salaries of two new, dedicated roles within the MSE ICS Prevention team for 12 months:
 - Weight management programme manager: (AfC Band 8a, 1 FTE)
 - ii. Weight management programme support: (AfC Band 5, 0.6 FTE)

MSE ICS

- Source baseline data across all services (Tiers 1 4) to provide clear understanding of current services and pathways, including capacity, activity and budgets
- Review of population need and gap analysis summary of current service provision
- Establishment of weekly operational group to meet milestone deliverables
- Service improvement activities to increase access to weight management services with targeted interventions to reduce health inequalities
- Development of weight management service dashboard to create linkable system data across health (primary care and Tier 3) and local authority data (Tier 2)
- Project management of Steering Group, including facilitation, materials and follow-up
- Create and build consensus around five-year vision and roadmap to outline how the system will move from current to future state
- Development of communication platform and supporting materials to engage with residents regarding transformation of weight management services
- Secure additional resource to dedicate to project delivery:
 - i. Health economic support via interim resource to support future decision-making on stewarding resources
 - ii. Finance and Performance and Contracting support
 - iii. Business intelligence support secured to create draft BI dashboard and capability

	iv. Internal communications resource to support uptake of pathway, and outcome and evaluation framework
	A decision was taken at the end of 2023 to not proceed into phase two of the project as it was acknowledged that the ambition and objectives of phase one could take several years to realise and embed. As such, phase one set an important foundation for future change, and has implemented new ways of collaborating across the ICS.
Outcomes	Vision
	 Consensus achieved on long-term (five-year) system-wide vision for weight management services Roadmap to achieve short-term service transformation developed and endorsed by all partners
	Weight management service redesign
	New service pathway mapped, based on best practice for
	adoption into a new service specification
	 Feasibility of a single point of access pilot in one locality to simplify pathway for patients being explored
	Group now working in partnership with NHS England re-
	gion and national teams to pilot a self-referral pathway into digital weight management services.
	Outcomes and evaluation
	 New weight management services dashboard established to track delivery, and integration of NHS and local author- ity data
	A review into patient access criteria completed, with fund-
	ing for health economist support secured
	Tier 2 outcomes aligned across all local authorities
	Alignment and system partnership
	Overview of current services and pathways, including ca-
	pacity, activity, budgets and specifications developed
	 Gap analysis report identifying opportunities for improved integration, personalisation and utilisation
	Alignment of service specifications across Tier 2 providers
	so the service offer to residents is improved
	 Opportunities identified to expand the footprint in Tier 2 to cover a greater proportion of the population
Lessons learned	More time than anticipated was required to build relation-
	ships and trust across the system following the creation of the Steering Group. This was fundamental to sharing data
	in particularSenior management commitment from both MSE ICB and
	Local Authorities was essential to commit resources
	Collaborative working has been a catalyst towards integra-
	tion

 There is a need for a data platform that allows integration of NHS and Local Authority data to enable a patient path- way view and to support the monitoring of outcomes