



PWYLLGOR IECHYD A DIOGELWCH HEALTH & SAFETY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	09 May 2022
TEITL YR ADRODDIAD: TITLE OF REPORT:	Bariatric Update
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Mandy Rayani, Director of Nursing, Quality and Patient Experience
SWYDDOG ADRODD: REPORTING OFFICER:	Tim Harrison, Head of Health, Safety and Security

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

This report is presented to the Health and Safety Committee (HSC) to provide an update on the management of bariatric patients in Hywel Dda University Health Board (HDdUHB).

Cefndir / Background

The report focuses on barriers to the safe care of bariatric patients including:

- Inappropriate equipment leading to increased risk of accident or injury for both patient and staff as well as compromised dignity and reduced options for mobility and hygiene.
- Difficulty accommodating larger equipment in standard bedspaces
- Ensuring safe evacuation in the event of fire/emergency
- Healthy weight development plan

Asesiad / Assessment

Current arrangements for bariatric equipment:

In office hours equipment can be ordered from HDdUHB owned stock, stored at Just Wales, Carmarthen.

Out of hours - hire via Direct Healthcare.

There are outlying pieces of equipment in some acute areas which can also be utilised in the first instance as they are more promptly available, however this provision is inconsistent.

It has been identified by Senior Nurses that a small stock of bariatric items per site would be the preferred option. The significant barrier to this is storage. There is also the issue of purchase and ongoing maintenance costs.

A project manager has been appointed (0.2 WTE) to further develop HDdUHB support of bariatric persons.

The project includes work on:

- Improving equipment provision by exploring a hire contract rather than an ad hoc hire process.
- Reducing unnecessary spending on hire equipment by optimising the use of existing Health Board owned equipment.
- Review of current policies and procedures regarding bariatric admission.
- Developing nursing documentation in the form of a bariatric care checklist, to promote the holistic assessment of the persons needs on admission and throughout their care.
- Improving staff knowledge through improved provision of relevant training on bariatric equipment.

The Manual Handling team continue to work in partnership with this project. Bariatric equipment ordering is to be included in the Foundation course in moving and handling attended by all new patient handling staff.

Template manual handling risk assessments are now available for ward areas and include a prompt regarding bariatric patient accommodations and fire evacuation.

A HDdUHB weight development plan has been developed by the Dietetic Weight Management Clinical Pathway team. Appendix 1 outlines the current plan of work.

Audit

With support from the Clinical Engineering team and Health and Safety/Manual Handling teams, the project manager will undertake an audit of Bariatric pathway care to establish whether improvements have been made as a result of improved bariatric equipment resource and clinical pathway.

Argymhelliad / Recommendation

For the Health & Safety Committee to gain assurance that work has progressed, and improvements have been made in relation to Bariatric Equipment and care pathways as detailed within the report.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1 Provide assurance around the UHB arrangements for ensuring the health, safety, welfare and security of all employees and of those who may be affected by work-related activities, such as patients, members of the public, volunteers contractors etc.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	718 Health and Safety Management
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	1. Staying Healthy 2. Safe Care 2.1 Managing Risk and Promoting Health and Safety

Nodau Gwella Ansawdd: Quality Improvement Goal(s):	No Avoidable Deaths Protect Patients From Avoidable Harm From Care Focus on What Matters to Patients, Service Users, Their Families and Carers, and Our Staff
Amcanion Strategol y BIP: UHB Strategic Objectives	2. Living and working well.
Amcanion Llesiant BIP: UHB Well-being Objectives:	10. Not Applicable
Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Not applicable
Rhestr Termau: Glossary of Terms:	Contained within the body of the report.
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Iechyd a Diogelwch: Parties / Committees consulted prior to Health and Safety Committee:	Partnership Forum meetings

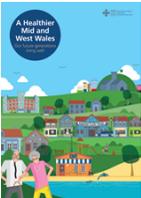
Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Not applicable
Ansawdd / Gofal Claf: Quality / Patient Care:	Potential for quality of patient care to be compromised if large numbers of staff are affected by COVID-19 themselves.
Gweithlu: Workforce:	There is an impact on staff health and wellbeing as well as safety for non-compliance with COVID-19 management arrangements.
Risg: Risk:	Directorate Risk Registers have highlighted a number of the topics covered within this report.
Cyfreithiol: Legal:	A breach of health and safety regulations can result in the issue of prohibition or improvement notices or criminal proceedings.
Enw Da: Reputational:	Prosecutions and claims due to breaches in legislation or personal injury claims can lead to negative publicity
Gyfrinachedd: Privacy:	Not applicable
Cydraddoldeb: Equality:	<ul style="list-style-type: none"> Has EqIA screening been undertaken? No

Hywel Dda UHB Healthy Weight Development Plan 2021-2022

Background

In line with the ambition set out in the long term strategy to prevent and reduce obesity in Wales, **Healthy Weight:Healthy Wales (2019)** [Healthy weight strategy \(Healthy Weight Healthy Wales\) | GOV.WALES](#) , our vision for Hywel Dda is that:

- Our CHILDREN have the best start in life, and that they and their families are supported and enabled to maintain a healthy weight - making the healthy choice the easier choice.
- ADULTS in Hywel Dda are supported and enabled to achieve and maintain a healthy weight throughout adulthood and as they grow older.



This ambition aligns with the aspirations for the population of Hywel Dda set out in a **Healthier Mid and West Wales** and the **Health and Wellbeing Framework – Our future generations, living well** [Health and Well Being Framework](#) . The framework is founded on the principles of the **Well Being of Future Generation (Wales) Act**, which guide us in focussing on the longer-term, taking a preventative and asset-based approach and in working collaboratively with partners and the people of Hywel Dda to achieve the ambition set out above.

Healthy Weight; Healthy Wales strategy themes



Building on work undertaken over the past 10 years, **A Living Well - Healthy Weight** approach is being developed in Hywel Dda, aimed at mobilising the **whole system**, in driving forward the four themes of the national strategy. These themes are being progressed across Wales through a series of 2-year delivery plans over the course of the next 10 years. Welsh Government have re-focused the current 2020 – 2022 delivery plan in response to the COVID-19 pandemic.

Funding to support the implementation of the strategy has been made available by Welsh Government and £2.9 million of it has been allocated across Health Boards in Wales. This funding is intended to help develop and implement specialist weight management services aimed at supporting people to maintain a healthy weight. Services will be required to meet the standards of the revised **All- Wales weight management pathways** - one for adults and another for children, young people and families.

The provision of specialist weight management services sits within the Healthy People theme of the national strategy, which also commits to action that supports:

- People feeling more motivated, enabled and supported to make healthier choices throughout their lives
- A closing of the health inequality gap amongst our most disadvantaged communities through the targeting and tailoring of services, funding and support
- Health and care services that are compassionate and supported by skilled, confident professionals and volunteers who use each contact with the public to encourage and support them to achieve and maintain a healthy weight
- Fair and equitable access to a **clinical pathway for weight management** with guaranteed access to services for all.

The revised pathways for weight management (which will be published shortly), recommend the provision of services across 4 levels, to address weight management within the population. Levels 1-3 are based within Health Boards in Wales and the Level 4 service for HDUHB is based in the Welsh Institute of Metabolic and Obesity Surgery (WIMOS) at Morrison hospital, Swansea Bay UHB.

- Level 1 - Self-directed support
- Level 2 - Multi-component weight management support
- Level 3 - Specialist multi-disciplinary weight management services and
- Level 4 - Specialist surgical interventions

In its allocation letter to HDUHB (March 2021), Welsh Government outlined their expectations for the £374,000 allocation for 2021-2022 as:

*We would anticipate that in this financial year that all health boards **should have in place level 3 adult weight-management services available, as a minimum.** However, we would also wish to see **progress for adults towards a diversity of evidence based level 2 services including commercial weight-management services**, to meet a range of needs. We would also wish to see **progress towards the establishment of dedicated weight management services for children and families at levels 2 and 3.***

The remainder of this document outlines the HDUHB's existing provision and the plan being put in place against this funding allocation for 2021-2022 to meet the expectations above.

Current service provision

The starting point, in terms of the provision of weight management services for each Health Board across Wales is very different. Some already have established services in place at Level 3, some at Level 3 and Level 2 and others are developing specific services for children and families. Capacity within these services is also very different and is the result of access to different sources of funding over time and the financial position of the Health Board in which they are based. The current funding being made available from Welsh Government provides an opportunity for levelling-up and for the development of more consistent and equitable services within HDUHB and across Wales.

The Level 3 service in HDUHB has evolved over the past 12 years from a successful pilot undertaken in Carmarthenshire. It provides good outcomes for people but requires additional investment in capacity to meet the revised all-Wales weight management pathways for adults and for children, families and young people. A pathway review, [Obesity pathway review](#) undertaken across all Health Boards in 2019 as part of the process to revise the former 2010 Obesity Pathway highlighted the need, in HDUHB, to:

- Address identified gaps in the L3 MDT weight management service, in order to meet the standards of the revised pathways (soon to be published)
- Invest in additional service capacity to meet current excess referral demand
- Address inequity in the availability of the MDT element of the service (offered in Carmarthenshire only)
- Increase opportunities to roll-out of skype consultations and other technological options for patient contacts through Health Board IT infrastructure investment
- Review those pathways into the L3 service which are under-developed or 'on-hold' as a result of limited capacity, for example, maternity services

In addition, it was recognised that the scope of the review was limited to L3 adult services but that there was an urgent need to:

- Strengthen the range and reach of weight management services at Level 2 of the pathway
- Develop services for children and families as there was currently no provision
- Strengthen leadership and governance structures to support the implementation of the of the Healthy Weight:Healthy Wales strategy.

2021-2022 Service Development Plan

The **aim** of the Service Development Plan for 2021-2022 is to recruit to the remaining posts to meet the All-Wales pathway standards for the L3 specialist service and provide capacity to undertake the necessary leadership and co-ordination of service development at L2 for adults and at L3 and L2 for children and families.

The plan is framed around the strategic goals of A Healthier Mid and West Wales, illustrated opposite. This will allow service provision to be sensitive to many transitions and circumstances that evidence tells us have an impact on maintaining a healthy weight throughout life, including, early life experiences; puberty; pregnancy and infant feeding; ageing, as well as major life events.

Assessment of need



The [Obesity compendium](#), developed by the Public Health Team provides a single-access document for information relating to the prevalence of obesity in Wales and HDUHB; it explores the causes of obesity and its effects on health and wellbeing and provides some evidence-based suggestions for action to help promote a healthy weight. It draws on work undertaken by Public Health Wales in the development of the Healthy Weight:Healthy Wales strategy. It will be updated in 2021 to reflect the latest prevalence data, the publication of Healthy Weight Healthy Wales strategy and the revised weight management pathways. It will then be re-distributed and shared widely to inform service planning and partnership priorities. A snapshot of health needs and prevalence of overweight and obesity in HDUHB for adults and children is illustrated below:



Adults

- In 2019/20 61% of adults in Hywel Dda were overweight or obese (including 25% obese)
- Men in HDUHB were more likely to be overweight, but not obese, than women.
- Middle aged adults were more likely to be overweight or obese, as were adults in the most deprived areas.

Source: National Survey for Wales: April 2019 to March 2020, GOV. WALES

Many health outcomes are worse than Wales as a whole in the following areas of high deprivation:

- Carmarthenshire: Glanymor, Tyisha, Lliedi
- Pembrokeshire: Parts of Pembroke, Pembroke Dock and Haverfordwest
- Ceredigion: Cardigan

Source: Welsh Index of Multiple Deprivation, 2019

Whole population

- In 2019 the population of Hywel Dda UHB was 387,284 people. Just under 83,500 people were aged 65-84 years and around 12,400 people were aged 85 years and over
- The Welsh average for life expectancy for men is 78.3 and for women 82.2¹. Each county has a slightly better life expectancy than the Welsh average.
- The greatest percentage of the population in Hywel Dda UHB is White British or Irish at 97.1% (374,300), according to the 2011 census. Black, Asian and Minority Ethnic (BAME) groups. This represents 2.9% (11,200) of the total Hywel Dda UHB Population.

Source: Public Health Wales Observatory (2020) Life Expectancy

‘COVID-19 has had a disproportionate impact on Black, Asian and Minority Ethnic communities in Wales. Alongside ethnicity, the impact of COVID-19 has been greater for those suffering from obesity and multiple health conditions. Having more than one illness or condition is associated with poorer outcomes for COVID-19. Obesity has been seen to be a consistent factor for hospitalisation, admission to intensive care and death’.

Welsh Government (2021) Health and Social Care in Wales – Covid-19: Looking forward

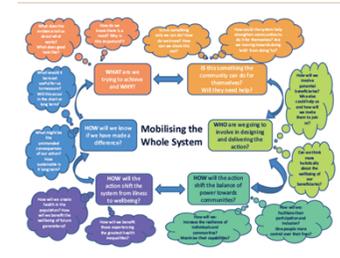
Children

- In 2018/19, 13 % of children aged 4 to 5 years were obese in Hywel Dda, compared with a Wales average of 12.6%
- When combined over five years the percentage of children who are obese is statistically significantly higher than the Wales average of 12.1% in six local Authorities which includes Carmarthenshire at 13.5%
- The prevalence of obesity was significantly higher than the Welsh average in the areas of greatest deprivation and significantly lower in the least deprived areas. The gap between obesity prevalence in the most and the least deprived areas has risen from 5.9% in 2017/18 to 6.9% in 2018/19

Source: Public Health Wales Observatory (2019) using CMP data (NWIS)

Enablers

- **The Health and Well Being Framework and the Wellbeing lens** - The Wellbeing lens is a practical tool designed to help people across the whole system, or across teams and services to 'change the conversation' towards prevention and assets. Moving away from a dependent culture to one of independence and from services to supporting communities to create their own health and wellbeing. We will use the tool to plan and design services that align with the ethos and principles of the Well Being Framework.
- The Director of Public Health has lead responsibility for two **regional strategic priorities**, one on Maternal and Early Years and the other on Social and Green Solutions for Health. Both are currently agreeing priorities and developing structures for planning and delivery. Healthy weight will be a key focus.
- The involvement of the Public Health Team in **Primary Care Clusters** will facilitate more joined-up conversations about planning of Level 2 service provision. Learning from the successful pilot on the prevention of diabetes in Ceredigion and on models of social prescribing (currently being strengthened) across all clusters will inform these plans.
- **Pathfinder** work with children and families is already being undertaken in all three counties. The newly appointed pathway lead will work with these partners to ensure that services are targeted to address those most likely to be impacted by deprivation.
- The Health Board has recently appointed a **BAME outreach team**. Originally employed to focus on COVID-19 vaccination and screening take-up, the remit of the team has now been extended. Links have already been made to maximise opportunities for the intelligence that they gather through engagement with communities to inform the service design and delivery and on-going service improvement.

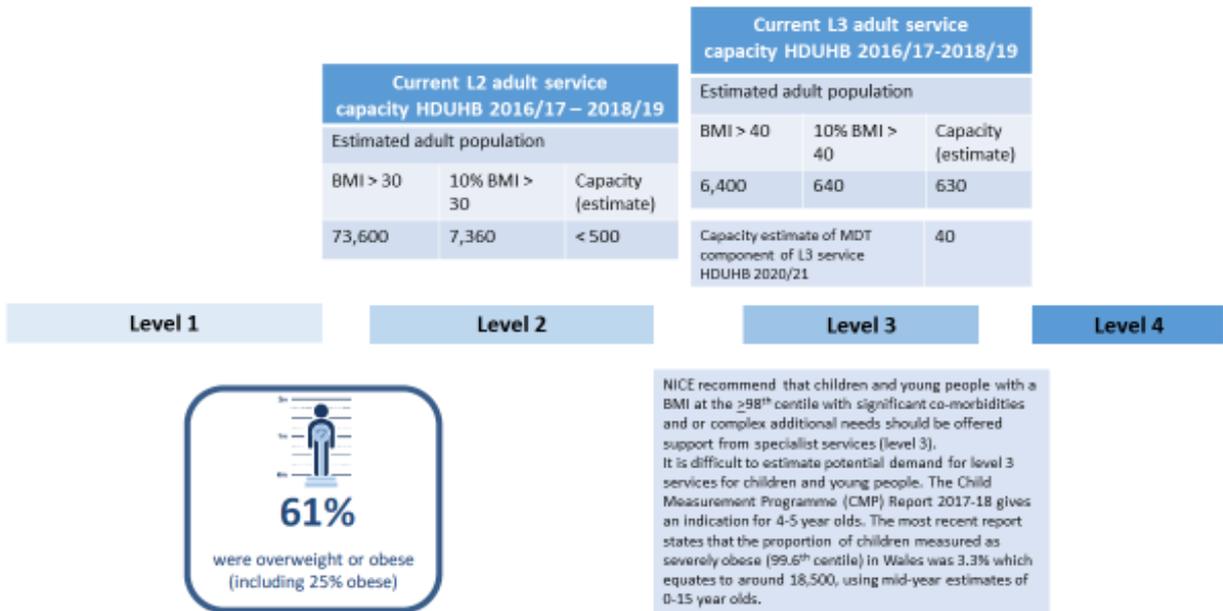


Obesity Pathway Development Plan on a page 2021-22

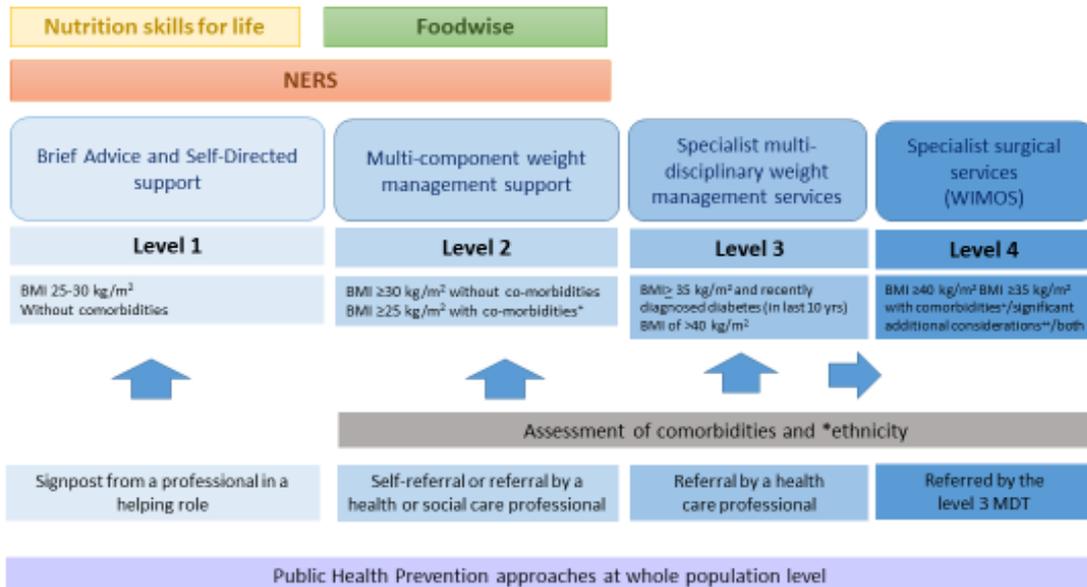
Strategic Objective 4 - Best Health and Wellbeing for individuals, families and communities																		
Planning Objective 4.G - Develop a local plan to deliver Healthy Weight: Healthy Wales' and implement by March 2022																		
PROJECT SCOPE	<p>As part of the implementation of the Healthy Weight:Healthy Wales strategy, £374,000 has been allocated to HDUHB by Welsh Government for 2021-2022 to help develop and implement specialist weight management services. Services will be required to meet the standards of the revised All- Wales weight management pathways - one for adults and another for children, young people and families.</p> <p>We will work together across the system to:</p> <ul style="list-style-type: none"> • Strengthen the capacity and reach of the level 3 weight management service for adults • Develop a diversity of evidence based level 2 services to meet a range of needs • Make progress towards establishing a model of dedicated weight management provision for children and families at levels 2 and 3 of the pathway working with those proximal to the child • Strengthen healthy weight provision for expectant and new mothers <p>Regular update reports will be produced to support internal reporting, and to meet reporting requirements to Welsh Government.</p>	<ul style="list-style-type: none"> • Our CHILDREN have the best start in life, and they and their families are supported and enabled to maintain a healthy weight - making the healthy choice the easier choice • ADULTS in Hywel Dda are supported and enabled to achieve or maintain a healthy weight throughout adulthood and as they grow older. 	VISION															
		<ul style="list-style-type: none"> • A fully staffed Level 3 MDT service that meets the standards of the All-Wales Weight Management pathway for adults • Improved access to weight management support and interventions for adults in HDUHB • Increased capacity at Level 3 to manage excess referral demand and reduced waiting times • A costed model for the expansion of services at Level 2 of the pathway for adults • An agreed model of delivery for healthy weight provision for children and families at level 2 and 3 of the Children, Young People and Families pathway 	OUTCOMES															
		<table border="1"> <thead> <tr> <th>KEY PHASE</th> <th>BY WHOM</th> <th>BY WHEN</th> </tr> </thead> <tbody> <tr> <td>1. Undertake recruitment to newly funded pathway lead post and other MDT posts</td> <td>Joint Head of Nutrition and Dietetics</td> <td>31/07/2021</td> </tr> <tr> <td>2. Develop digital capacity and resources to support COVID secure service delivery</td> <td>Pathway lead</td> <td>30/10/21</td> </tr> <tr> <td>3. Develop a communication plan to publicise the L3 adult service</td> <td>Pathway lead</td> <td>30/11/2021</td> </tr> <tr> <td>4. Convene a task and finish group to plan the expansion of the L2 service offer for adults in line with the adult pathway</td> <td>Pathway lead</td> <td>30/10/21</td> </tr> </tbody> </table>	KEY PHASE	BY WHOM	BY WHEN	1. Undertake recruitment to newly funded pathway lead post and other MDT posts	Joint Head of Nutrition and Dietetics	31/07/2021	2. Develop digital capacity and resources to support COVID secure service delivery	Pathway lead	30/10/21	3. Develop a communication plan to publicise the L3 adult service	Pathway lead	30/11/2021	4. Convene a task and finish group to plan the expansion of the L2 service offer for adults in line with the adult pathway	Pathway lead	30/10/21	KEY DATES & DELIVERABLES
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<p>Responsible Officers: Executive Lead: Ros Jervis, Director of Public Health and Wellbeing Strategic Lead: Megan Harris, Consultant in Public Health</p>	<ul style="list-style-type: none"> 5. Convene a task and finish group to plan and design the model of delivery for children and families in line with the CYP pathway 	30/01/2022																
GOVERNANCE																		

	<p>Delivery Lead: All-Wales weight management pathway lead (to be appointed) Programme oversight through: New Pathway Implementation group to be established</p> <p>Governance through: New strategic oversight group to be established</p> <p>Delivery through: Nutrition and Dietetics: Contribution will also be sourced from colleagues within Workforce & OD, Psychology, Public Health, Children’s Public Health, Paediatrics, Women and Children’s Services</p>	<ul style="list-style-type: none"> • Prudent – using the knowledge and expertise of the specialist team to support others in maximising their role in helping children and families maintain a healthy weight • Focussed on maximising the skills and knowledge of the workforce that are working in the proximity of children and families • Integrated and coordinated • To include a range of evidence-based interventions (to be determined) • Focussed on prevention and early intervention • Psychologically, behaviourally and ACE informed • Whole family approach • Asset-based • Holistic assessment of need • Addresses inequalities • COVID secure 	DESIGN PRINCIPLES		
RISKS	Description	Likelihood	Impact	Score	Mitigating Actions
	Reduction/withdrawal of service provision and risk to posts if Welsh Government funding for Healthy Weight:Healthy Wales is reduced or withdrawn. Funding allocation for Healthy Weight Healthy Wales is for 2021-2022 initially.	Medium	Risk to service delivery and staff		Employ staff on fixed term contracts
Links to HDUHB strategic and planning objectives:	<p>Strategic Objective 4 - Best Health and Wellbeing for individuals, families and communities</p> <p>4.E Implement a plan to train all Health Board Therapists in “Making Every Contact Count”, and offer to their clients by March 2022 (AS)</p> <p>4.N Create and implement a process in partnership with local authorities, PSBs and other stakeholders that engages and involves representatives of every aspect of the food system. The opportunities identified will then need to be developed into proposed planning objectives for the Board and local partners for implementation from April 2023 at the latest (PK)</p> <p>5.L Implement the making nutrition matter – dietetics expansion plan within two years as agreed at Board on 26th September 2019 (AS)</p>	<p>4.F Develop a plan by September 2021 to improve the life chances of children and young people working with the “Children’s Task Force” and begin implementation in April 2022, prioritised on the basis of the opportunity to improve the lives of the most deprived (RJ)</p> <p>4. O Develop and implement a food health literacy programme for Year 5 children with a pilot taking place in 2021/22, with scaling to all 3 counties of Hywel Dda within the next 3 years. The longer term goal will be to make this routine for all children in the area within the next 10 years (AS)</p>			
Impact on WFGA	<p>The Well-being of Future Generations (Wales) Act 2015</p> <p>The proposed actions will contribute to:</p> <p>A Healthier Wales</p> <ul style="list-style-type: none"> • Improve population health through prevention and early intervention, supporting people to live happy and health lives. 				

Estimated adult population BMI and service capacity 2016/17 - 2018/19 and 2020/21



HDUHB Adult Weight Management Pathway



* Lower criteria by 2.5 kg/m² for people from black African, African-Caribbean and Asian groups

