

Monitoring & Evaluation Form - All Wales Weight Management Pathway Report

Organisation	HDUHB	Allocation	£374,400	Date of Report	5 th October 2023	Report Prepared By	Claire Jones, Weight Management Clinical Pathway Lead
				Updated Report	April 2024		

The Deputy Minister for Mental Health, Wellbeing and Welsh Language agreed funding of £6.5m to support the delivery of Healthy Weight: Healthy Wales, which included £2.9m to deliver Pathway Transformation Plans. The Children and Families Pathway is one in a series of documents laying out the components, standards and guidance to support the development and delivery of weight management services across Wales. The pathway sets out the key elements and principles underpinning the planning, commissioning and delivery of weight management services for the population of Wales.

Reporting Schedule: The Adult and Children's Weight Management Pathways timetable for funding and reporting is detailed below:

- Submission of Draft Plan – 30 April 2023
- Peer Review of Plan – tbc June 2023
- Final Sign Off of Plans – July 2023
- Interim Report – 16 October 2023
- Final Report – 15 April 2024

Progress against the organisation's plan is to be reported bi-annually. This form is to be submitted on:

- 16 October 2023 (covering the period 1 April 2023 to 30 September 2023)
- 15 April 2024 (covering the period 1 October 2023 to 31 March 2024)

Completed form to be returned to: hss.performance@gov.wales

To be completed by Welsh Government on receipt of Monitoring Form

Total allocation	£
Total spend	£
Total agreed	£
Total reimbursement	£

Update on the actions implemented during the current operational year to advance the development of the AWWMP in the health board's day to day activities.

	Key actions planned	Risks to delivery corrective actions & by when including a timeline	What was achieved	Spend actual and planned including a breakdown of resource time	Spend of HB core budget against HWWH	Prevention fund investment into the pathway into level 1 and 2
Planning						
Ethos of Healthy Weight: Healthy Wales is embedded into service change/transformational programmes and service delivery plans	<p>Healthy Weight: Healthy Wales is embedded within Strategic Objective 4 (S04) of HDUHB – to achieve the Best Health and Wellbeing for individuals, families and communities.</p> <p>One of the planning objectives which informs this strategic objective is PO 4G – to implement the Healthy Weight Healthy Wales strategy and ensure weight management services meet the standards set out in the All Wales Weight Management Pathways (AWWMPs)</p> <p>April 2024 The delivery of Healthy Weight Healthy Wales and the All Wales Weight Management Pathways is embedded</p>		<p>Service change and development at Levels 2 and 3 of the All Wales Weight Management Pathway were supported by the HDUHB Enabling Quality Improvement in Practice (EQiP) programme and the evaluation of the assessment process at Level 3 of the AWWMP is part of the Bevan Exemplar programme.</p> <p>April 2024 The Bevan Exemplar programme is now finished and a project report and poster have been submitted to the Bevan Commission. There are plans in place to present this work locally and nationally in June 2024. Additionally, we will work with our local Head of Research, Innovation and Improvement to explore the next steps for the project and further opportunities for innovation within the WMS.</p> <p>The delivery phase of the All Wales Diabetes Prevention Programme is underway. The HDUHB is supporting this project by funding the programme delivery in each GP cluster in addition to the funding being received as part of the national programme. The implementation of this project is being supported by the HB's transformation team and diabetes prevention is now fully aligned with the weight management pathway so that service users are provided with the appropriate support to best meet their individual need.</p>	<p>Planned spend/ grant total = £374,000</p> <p>Actual Spend = £340,239</p> <p>Slippage = £33,770</p> <p>This is the full years spend (April – March)</p>	<p>£259,774</p> <p>This is the full years spend (April – March)</p>	

	<p>in the HB's strategic goal 7: Healthier Communities, and specifically in the Planning Objective 7a - Population Health.</p>		<p>A Diabetes Prevention Steering Group has been established to oversee the delivery of the programme.</p> <p>Regional Whole System Approach (WSA) to healthy weight - A regional Principal Public Health Practitioner (Systems Working) has been appointed and commenced in post on the 1st March and is based with Swansea Bay Public Health Team. There are continued delays in recruitment to the remainder of the regional team. Although Job descriptions have been approved individually in both UHB's the national consistency checking process has resulted in further queries – October 23. Once these are resolved the remaining 3 posts can be advertised.</p> <p>A report summarising the outputs of the 3 system mapping workshops across Hywel Dda has been produced. This contains the system maps and will guide the next phase which will be to try and identify one or two regional sub-system priorities. These are being shared with stakeholders and partners as part of on-going engagement.</p> <p>April 2024</p> <p>Regional Whole System Approach (WSA) to healthy weight –</p> <p>Recruitment to the regional team is now complete. In addition to the regional Public Health Practitioner (1.0 WTE) who took up post on 1st March 2023 there are now two Senior Public Health Practitioners (0.8 WTE in Hywel Dda) and 0.6 WTE in Swansea Bay) took up post on 1st February 2024. The Senior Business Support Officer will take up post on the 15th</p>			
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			<p>April 2024. All 3 post are fixed term to July 31st 2025.</p> <p>Now that the team is fully staffed re-engagement with the Public Services Boards and Regional Partnership Board is taking place. The report summarising the outputs of the 3 system mapping workshops across Hywel Dda is being shared widely. This contains the system maps developed through the three county based stakeholder workshops conducted in 2023 and will guide the next phase of work to identify one or two regional sub-system priorities that will become the focus of collaborative work across the system over the coming 2 years and beyond.</p> <p>The governance structure for the implementation of the HW:HW strategy within HDUHB is via the HB Quality, Safety and Experience Committee.</p>			
Progress against Level 2 services	<p>Overall aim:</p> <p>To continue to develop capacity and resources to support accessible, timely delivery at Level 2 of the AWWMP.</p> <p>Increase provision of HB led level 2 intervention in order to maintain the prudent delivery of the level 3 weight management service.</p>		<p>Our rates of referral into the HDUHB weight management service have continued to increase with the monthly average increasing to 235 per month between April and July 2023, from 164 per month in 2022/23.</p> <p>In order to ensure that people are accessing weight management at a time when it is important to them, from August 2023, we have changed the referral pathway into the service to be 'self referral' only.</p> <p>We have added mitigations to ensure there are no risks associated with this. A standard letter including details of the change to the pathway and a link to our self-referral form is being sent to everyone who we have received referrals for</p>			

		<p>so that they can easily access the service if they wish to do so.</p> <p>In exceptional circumstances such as post private bariatric surgery where there is deemed to be a clinical risk to the patient, we will except referrals from HCPs.</p> <p>The change in pathway has been communicated to all of our primary care colleagues and all HDUHB staff.</p> <p>The new process went live on the 1st August 2023 and we received 178 'self referrals' in August.</p> <p>Alongside this we have increased the level of detail provided via our self referral form to enable people to be triaged to level 2 or level 3 of the AWMS without having to have a telephone assessment appointment. This will ensure the prudent and efficient use of our resource at level 2 of the AWWMP and mean that the release of capacity from the telephone assessment appointments can increase the volume of interventions provided at level 2 of the pathway. It is anticipated that this will have a positive effect on patient flow through the service and enable waiting times for the level 2 WMS to reduce. We expect to be able to discontinue the telephone assessment appointments by early 2024 when all of the people who have accessed the service via HCP referral will have been offered an appointment.</p> <p>Work is underway to streamline the self referral process. We are working with software developers to improve the IT systems that support self referral and triage. This will reduce the administration time needed to triage and process referrals and improve service efficiency.</p>			
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			<p>April 2024</p> <p>Since the introduction of self-referral as the predominant referral route into the WMS, referral numbers have averaged at 176 per month. This is a 25% reduction in the average from April to July 2023.</p> <p>The ability to discontinue the telephone assessment appointments as described above has taken longer than originally planned and we now project it will be early summer 2024 when we have worked through all of the referrals that were made prior to August 2023. This is due to a reduction in the number of telephone assessment clinics that were being delivered between September and December 2023 as a result of a vacancy in the service and staff sickness absence. We are now back to full staffing among the Dietetic Assistant Practitioners who deliver this clinic.</p> <p>The work with software development is ongoing with plans to go live with stage 1 of the process in April 2024. This stage includes changes to our self-referral form and streamlining the triage process. Stage 2 of this work will involve streamlining the administrative processes around the clinical delivery of the service. We anticipate that the time saved as a result of this streamlining will enable us to increase clinical capacity within the level 2 and level 3 service.</p> <p>There have been 303 telephone assessment appointments since April 2023. Of those 56% have been identified as needing the level 3 WMS, 30% have been identified as needing level 2 and 14% have been signposted elsewhere, outside of the WMS.</p>			
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			<p>April 2024</p> <p>There have been 283 telephone assessment appointments since October 2024. Of these 54% have been identified as needing the level 3 WMS, 35% have been identified as needing the level 2 WMS and 11% have been signposted elsewhere, outside of the WMS.</p> <p>The offer as part of the HB WMS at level 2 includes the Foodwise for Life weight management programme and a programme of individual appointments with Dietetic Assistant Practitioners (DAPs).</p> <p>43 people have completed the Foodwise for Life programme over the past year with 90.7% successfully achieving weight loss and 7% maintaining their weight.</p> <p>An evaluation protocol has been established for the DAP led one to one clinics and early outcomes suggest 89.3% of individuals are achieving weight loss with an average weight loss of 4.9%.</p> <p>Following the publication of the Minimum Data sets for Adult Weight Management Services in September 2023, the evaluation protocol will be reviewed to ensure it meets the criteria in the All Wales MDS.</p> <p>We have recruited to the post of 0.5WTE Therapy Assistant Practitioner (TAP). As described in previous reports, given the high proportion of people presenting in the WMS who are identified as needing the level 3 service it was decided to strengthen the offer at Level 2 of the WMS.</p>			
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			<p>In addition to the Foodwise for Life programme we are now offering a more holistic multidisciplinary group called 'Actively Being Well'. This group focuses on dietary and behaviour change in addition to sessions focussing on lower level emotional eating, habit formation, sleep and managing stress among other topics. It is hoped that by offering an option of a more holistic and multidisciplinary level 2 group, this will reduce the proportion of people who require support at level 3.</p> <p>This group has been developed by the MDT including clinical psychology, dietetics, occupational therapy and physiotherapy and will be delivered by the TAP with support from the Assistant Psychologist and DAPs.</p> <p>The first Actively Being Well group commenced in September 2023.</p> <p>April 2024</p> <p>2 Foodwise for Life programmes have been delivered since October 2023 with 13 people completing. Of these 11 successfully achieved weight loss, with an average weight loss of 3.8%. 11 people completed the programme evaluation form, with</p> <p>10 (91%) reporting to be more confident or much more confident in their ability to manage their weight as a result of completing the programme.</p> <p>10 (91%) reporting to have made dietary changes as a result of completing the programme.</p> <p>Participant comments</p> <p><i>'The programme is helping me to lose weight.'</i></p> <p><i>'I found the whole program very helpful.'</i></p>			
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			<p><i>'Great help - class worth attending'</i></p> <p><i>'Amy the tutor was excellent. Very informative and encouraged interaction between the group.'</i></p> <p><i>'I have lost nearly 2 stone during the 9 week course which has made my daily walk a lot less painful on my knee joints.'</i></p> <p><i>'I have reduced the portion sizes for my husband and I. We are eating less red meat but more fruit and vegetables and when shopping I'm more conscious of food labels.'</i></p> <p>We continue to deliver Dietetic Assistant Practitioner led one to one clinics as part of our level 2 WM Service offer. Since October 2023 80% of individuals attending the service have successfully lost weight with the average weight loss being 4.9%.</p> <p>The newly developed level 2 MDT programme, Actively Being Well was piloted between September and December 2023. 6 people completed the initial pilot.</p> <p>4 out of the 6 achieved weight loss and 1 achieved weight maintenance.</p> <p>All 6 participants made improvements to the quality of their diet as measured by the 'Starting the Conversation' questionnaire.</p> <p>5 out of the 6 participants reported an improvement in wellbeing as measured by the Warwick Edinburgh Mental Wellbeing Scale (WEMWBS).</p> <p>Participants comments</p> <p><i>"I enjoyed the programme; the sessions have had a positive impact from the wellbeing session to the understanding of the guilt cycles."</i></p> <p><i>"I wasn't sure what to expect, it surprised me, I was cynical, but it was pitched at exactly the</i></p>			
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	<p>Ensure AWWMP pathways are aligned with the delivery of the All Wales Diabetes Prevention Programme (AWDPP).</p>	<p><i>right pace with useful information and handouts. I enjoyed the programme; it made me think about my barriers and triggers.”</i> <i>“The OT session about kindness really helped.”</i> <i>“I found all the sessions good, but the mindfulness session really helped.”</i></p> <p>A second Actively Being Well programme is currently running and is due to complete in April 2024.</p> <p>The service delivery model for the AWDPP has been established and in HDUHB includes the delivery of the Foodwise for Life programme and the National Exercise on Referral Scheme (NERS) alongside the initial brief intervention appointment as core parts of the service. This ensures that the AWDPP pathway is closely aligned with the level 2 WMS pathway.</p> <p>As the AWDPP service delivery has commenced, we aim to have seamless transition between the AWDPP and AWWMPs depending on need. Examples of this include individuals who self refer to the WMS with prediabetes being offered a brief intervention appointment as part of the AWDPP, to individuals who attend the BI appointment as part of the AWDPP being able to access the level 3 weight management service if they need more intensive support than can be offered as part of the AWDPP.</p> <p>The delivery of the AWDPP is now underway in each of the 7 GP clusters in HDUHB with 318 brief intervention appointments delivered between April and September 2023. 3 Foodwise for Life programmes have completed,</p>			
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	Establish a scalable service at level 2 of the pathway to be delivered within primary care.	Work is delayed regarding the timeline set out in the Forward Plan for 2023/24.	<p>3 are currently being delivered and 2 programmes are due to start in October 2023.</p> <p>April 2024</p> <p>The All Wales Diabetes Prevention Programme continues across all 7 GP clusters in HDUHB. 182 new brief intervention appointments have been delivered with 81 referrals to Foodwise, 3 referrals to the Level 3 Weight Management Service and 40 referrals to NERS. 6 month and 12 month review appointments are now being delivered.</p> <p>25 people have completed Foodwise as part of the local diabetes prevention programme since October 2023. Of those 18 (72%) have lost weight and 3 (12%) have maintained their weight.</p> <p>18 (100%) rated the programme as good or excellent.</p> <p>18 (100%) felt more confident or much more confident in their ability to manage their weight as a result of completing the programme.</p> <p>18 (100%) reported to have made dietary changes as a result of completing the programme.</p> <p>Participants Comments</p> <p><i>‘Excellent course. Always made to feel comfortable by ceri. Realistic suggestions made to change diet and exercise’</i></p> <p><i>‘Very good course’</i></p> <p><i>‘Easy to understand’</i></p> <p>Funding has been received by the Deputy Director of Primary Care via the Strategic Programme for Primary Care fund (SPCC) to</p>			
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		<p>Once the SPPC funded programmes have been established and the delivery commences the aim will be to use them to add to the variety of options at level 2 and to use the evaluation data to inform longer term service provision at level 2</p>	<p>deliver weight management services in primary care and community pharmacies.</p> <p>A strategic group was established to oversee the implementation of these services and to ensure that the services offered as part of the SPPC fund are aligned to a shared set of objectives and values with the HDUHB WMS. The aim will be to re-establish this group once the SPPC funded programmes are operational.</p> <p>April 2024</p> <p>The strategic group has not been re-established and work will now focus on scoping what is being delivered currently in the community and primary care and to link with partners to join this work up. Initial contact has been established with the Fit Fans programme that is being delivered in Aberystwyth with a view to linking this up with the wider clinical pathways. This will be the focus over the coming months.</p> <p>The Public Health Midwifery service did receive some 'Prevention and Early Years' Funding towards supporting smoking cessation in pregnancy which has enabled the recruitment of band 3 Health Care Support Workers (HCSWs) to support women to achieve a healthier pregnancy. The remit of the HCSWs includes brief interventions around weight management and the delivery of the Foodwise in Pregnancy programme. The HCSWs and Public Health Midwife have completed Nutrition Skills for Life training (provided by Health Improvement Dietitians) to enable them to deliver the Foodwise in Pregnancy programme.</p>			
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To develop a maternity specialist weight management pathway/service

			<p>The model being used is to offer all women information on the Foodwise in Pregnancy App at the start of their pregnancy regardless of their weight.</p> <p>Any women presenting with a BMI of > 30kg/m² at the start of their pregnancy will be offered the Foodwise in Pregnancy programme. This will also be offered to women who are identified as having higher than expected weight gain at 28 weeks gestation.</p> <p>The HCSWs will also offer some limited individual support to women, under the supervision and support of the Public Health Midwife.</p> <p>Delivery of the first Foodwise in Pregnancy programmes commenced in September 2023.</p> <p>The longer term plan will be to evaluate this service model and use the outcomes to inform the development of a business case for long term, sustainable weight management support across levels 2 and 3 of the pathway during pregnancy.</p> <p>April 2024</p> <p>There was a delay to the start of the work by the Smoking and Wellbeing Support Workers due to unexpected absence but since November 2024 they have assessed 47 women who had been referred for Foodwise in Pregnancy by their community midwife.</p> <p>A high proportion of these women (36) chose to use the Foodwise in Pregnancy app rather than attend the Foodwise in Pregnancy course. 11 did attend more than 2 sessions of the</p>			
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	<p>To plan, design and cost a sustainable and compassionate model of service provision for children and families at Level 2 and 3 of the AWWMP.</p>	<p>Currently there is no weight management service for children and young people in HDUHB. If the business case is not resourced then this will continue to be an unmet need and we will be unable to comply with the AWWMP for children, young people and families.</p>	<p>Foodwise in Pregnancy programme, with 6 of the 11 completing all 6 sessions. They have also supported 16 pregnant women to attend exercise and wellbeing online sessions and 190 women to attend walks across the 3 counties.</p> <p>A business case to support the establishment of a weight management service for children, young people and families at levels 2 and 3 of the AWWMP has been developed. We are currently waiting for a date to present this business case to the HDUHB via the Children's Board meeting.</p> <p>The Clinical Lead Dietitian for Paediatric Weight Management left post in August 2023. We felt it prudent to wait for the outcome of the business case before advertising the vacant post as the outcome will influence the likelihood of recruitment to that post.</p> <p>April 2024</p> <p>A business case for the development of a weight management service for children and young people was presented to the Children's Working Group on 22nd December 2023. The outcome of the meeting was for the Chair of the Children's Working Group to explore/ consider potential funding streams to support this work.</p> <p>The vacancy for the Clinical Lead Dietitian for Paediatric Weight Management is currently out to advert.</p>			
Progress around Level 3 services	<p>To continue to develop capacity and reach to support accessible, timely service delivery</p>	<p>This is ongoing but the demand for the Level 3 BPS assessment was higher than</p>	<p>Recruitment to the full multidisciplinary team was completed with the band 7 Clinical Lead Physiotherapist coming into post in April 2023 and the band 4 Therapy Assistant Practitioner coming into post in June 2023.</p>			

	<p>at Level 3 of the AWWMP.</p>	<p>originally expected. Resource has been shifted to increase capacity to deliver the assessment appointments but there is a risk that if there were unplanned reductions in staffing due to sickness or staff leaving post for example, this could lead to an increase in waiting times for this part of the service.</p>	<p>The Band 8a Clinical Psychologist has returned from maternity leave and the 2 Assistant Psychologists who were recruited on a fixed term basis to support her maternity cover have now finished in post.</p> <p>The permanent Assistant Psychologist, funded from the core HWWH budget has left post and her vacancy is currently out to advert.</p> <p>One of the Dietitians is due to return from maternity leave in October 2023 and another Dietitian is due to start maternity leave in January 2024.</p> <p>April 2024</p> <p>The permanent Assistant Psychologist came into post in January 2024 and an additional Dietetic Assistant Practitioner to replace the vacancy created by one of the existing DAPs moving into the TAP post, came into post in December 2023.</p> <p>One of the Dietitians is currently on maternity leave until February 2025 but we have a 0.4WTE fixed term post out to advert to cover some of her post.</p>			
	<p>Continue to embed the streamlined assessment process with individuals at level 3 receiving a full biopsychosocial assessment in order to establish how we can meet their needs. Focus on evaluating the impact and outcomes of the new process for</p>		<p>The biopsychosocial assessment as the first contact in the level 3 WMS is now established with all members of the MDT receiving training to do the assessment. This is followed by an MDT discussion re each patient and where their needs might be best met within the suite of options available as part of the level 3 WMS.</p> <p>The introduction of this was supported by the EQlIP programme with the aim of streamlining the assessment process and identifying individual's needs sooner. Prior to the implementation of this process, the median number of appointments an individual would</p>			

	<p>service users and staff as part of the Bevan Exemplar programme</p>		<p>have to attend before they were signposted to a service other than dietetics was 3 appointments. Following the implementation of the biopsychosocial assessment, 100% of individuals had their primary needs identified at their 1st appointment. The introduction of the biopsychosocial assessment was presented as a poster presentation in the category of 'Quality Improvement in Practice' for the Bristol Patient Safety Conference in May 2023.</p> <p>The process has also been accepted onto Cohort 4 of the Bevan Exemplar Programme with the aim of building on the progress achieved so far and focussing on the evaluation of the assessment process.</p> <p>With the support of the Bevan Commission, a full evaluation protocol is being established with a view to being ready for presentation in March 2024.</p> <p>With support from the Value Based Healthcare (VBHC) team we have set up an automated Patient Reported Experience Measure (PREM) to gather feedback from individuals regarding their experience of the assessment appointment.</p> <p>Initial feedback from the BPS assessment shows 92% of individuals reported that they 'always' felt listened to and understood during the assessment appointment. 75% of the individuals rated their overall experience of the appointment as a 9 or 10 on a scale of 1 to 10,</p> <p>Examples of participant comments include '<i>i didn't feel judged or pressurised</i>', '<i>i was listened to and not judged</i>', '<i>... listened with compassion and was very kind</i>', '<i>a pleasant, non judgemental conversation</i>',</p>			
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			<p><i>'felt listened to and received great advice', 'understood my thoughts and feelings well'</i></p> <p>April 2024</p> <p>The Bevan Exemplar Programme has now completed and a detailed project report and poster have been developed which will be presented both locally within HDUHB and nationally in June 2024.</p> <p>Patient experience outcomes continue to be positive for the BPS assessment appointments.</p> <p>97% of those who responded to the PREM described 'always' feeling listened to in the appointment.</p> <p>80% of those who responded rated their experience of the appointment as a 9 or a 10 on a scale of 1 – 10.</p> <p>Thematic analysis of the responses from the PREM highlighted that service users felt listened to in the appointment. They also described feeling empowered and being treated as equal participants in the conversation with the clinicians. The themes of the clinicians being non judgemental, kind and compassionate were also highlighted as positive.</p> <p>On the theme of feeling listened to, service users described how they felt understood and that the clinicians listened with compassion and the want to fully understand the service users thoughts and feelings. Additionally service users responded that they did not feel judged or embarrassed which enabled them to talk freely about some difficult and traumatic experiences.</p>			
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			<p>Participant Comments</p> <p><i>'I felt very comfortable and very quickly had a positive rapport with the lady I dealt with. I was listened to and not judged'</i></p> <p><i>'X had good understanding about me, my struggles and strengths and was really helpful'</i></p> <p><i>'I felt extremely anxious about the meeting but during its course I was made to feel at ease and was really listened to, also that my situation was fully understood.'</i></p> <p><i>'I found the experience very helpful, I'm disabled and very unwell so travelling to appts can be daunting and difficult. Having a zoom call was easy and convenient. My clinician was so kind and easy to talk to and it was the first dietitian meeting that I've had where I didn't feel judged and defeated. I came away feeling hopeful and positive that changes can be made and that I can be helped and supported in making those changes.'</i></p> <p><i>'Both staff present at my assessment were kind and made me feel at ease. I felt validated and a clear lack of judgement from both staff was hugely beneficial to my ability to open up and divulge some extremely personal, traumatic information about my history. I was given a clear run down of services offered and the pros and cons of each service. I felt like I was given a choice, which was empowering.'</i></p> <p>Additionally, clinicians completed a short questionnaire to ascertain their perceptions of the BPS assessment process.</p> <p>They rated the overall experience as positive with the average score on a scale of 1 to 5 being 3.86 and reported to be confident in their ability to deliver the assessment appointment and</p>			
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			<p>accurately assess people's needs, rating their confidence as 4.4 on a scale of 1 to 5.</p> <p>Positive themes reported by the clinicians included the impact they felt the assessment process was having on the service users with the clinicians reporting that they were able to give the service users time so they felt heard and were able to share their experiences. They found the patient centred nature of the appointment and the holistic, whole person approach to be positive.</p> <p><i>'Patients are given the opportunity to speak and feel heard',</i></p> <p><i>'I like to think the patients genuinely feel listened to'.</i></p> <p><i>'Their experiences and difficulties are validated from being part of this process'.</i></p> <p>A second theme was the level of information they were able to collect from the assessment. They highlighted the ability to complete a thorough and comprehensive assessment, to get to know the patients well and to be able to gather enough information to inform what interventions will best suit service users as positives.</p> <p><i>'Able to complete a thorough assessment',</i></p> <p><i>'Able to gather comprehensive information to inform what intervention or signposting is needed within the service'.</i></p> <p>Negative themes reported by the clinicians included the processes associated with the delivery of the biopsychosocial assessment clinics with the amount of time that the whole process takes from the administration to the</p>			
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			<p>multidisciplinary team meeting and report writing after that highlighted.</p> <p><i>'Difficult to gather all the information within timeframe',</i></p> <p><i>'Report writing but that is getting easier'.</i></p> <p>Work is underway with software development to streamline the administrative processes which will reduce the amount of time clinicians spend doing administrative tasks. This in turn will enable us to increase capacity for an additional assessment appointment per clinic.</p> <p>380 biopsychosocial (BPS) assessment appointments have been carried out since we started in April 2022. The individuals undergoing the BPS assessments have presented with a high level of complexity. 50% reported experiencing at least 1 Adverse Childhood Experience (ACE). 57% of individuals presented as having levels of psychological distress that ranged from moderate to severe using the CORE 10 questionnaire.</p> <p>63% of individuals presented with poor wellbeing using the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS), 92% presented with physical and psychological weight-related comorbidities.</p> <p>The complex needs of the individuals presenting at level 3 demonstrates the need for a range of multidisciplinary interventions to meet individual patient needs at this level.</p> <p>A database has been established to ensure the ability to map each individual's journey through the level 3 service and a full evaluation protocol for the whole level 3 service is being established. This will be reviewed to ensure it meets the</p>			
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	<p>We will increase the provision of all services offered at level 3 as we recruit to the full MDT. We will focus on the development of occupational therapy and physiotherapy pathways in addition to the existing dietetic, psychology and medical pathways.</p>	<p>standards set out in the Minimum Dataset, which has just been published.</p> <p>April 2024</p> <p>118 biopsychosocial (BPS) assessment appointments have been carried out since October 2023.</p> <p>Of the individuals undergoing the BPS assessment</p> <p>60% reported experiencing at least 1 Adverse Childhood Experience (ACE).</p> <p>47% of individuals presented as having levels of psychological distress that ranged from moderate to severe using the CORE 10 questionnaire.</p> <p>61.5% of individuals presented with poor wellbeing using the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS),</p> <p>94% presented with physical and psychological weight-related comorbidities.</p> <p>The range of interventions offered at Level 3 of the WMS now includes:</p> <p>Food for Thought' Dietetic led group programme</p> <p>'Mind Over Food' Psychology led group programme.</p> <p>Guided Self-help for binge eating.</p> <p>CBT-E for binge eating disorder.</p> <p>Fatigue management</p> <p>Dietetic support</p> <p>Psychology support</p> <p>Occupational Therapy support</p> <p>Physiotherapy support</p> <p>Specialist MDT Weight Management Clinic – medical support included</p>			
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		<p>Additionally, work is underway to develop a multidisciplinary group as part of our suite of options for the level 3 weight management service. It was noted that upon MDT discussion post the level 3 BPS assessment, many individuals were identified as needing a number of different interventions from different disciplines within the service. In order to meet this need, the MDT is developing a group that will combine input and support from dietetics, clinical psychology, occupational therapy and physiotherapy. This group will be piloted in January 2024. It is hoped that this intervention will reduce the demand for the profession specific interventions and improve flow through the level 3 service.</p> <p>Outcomes from the level 3 interventions are positive.</p> <p>Mind Over Food demonstrated reductions in emotional eating (80%); anxiety (73%); depression (80%); weight (73). 87% reported increased self-efficacy in relation to eating</p> <p>Clinical psychology interventions for Binge Eating over 12 months showed 14/15 people (93%) reported binge eating was resolved.</p> <p>Clinical Psychology are developing a group based programme for binge eating disorder.</p> <p>Snapshot data from the Dietetic led one to one interventions demonstrates 75% achieving weight loss with average weight loss of 4%.</p> <p>The Dietetic led Food for Thought group has demonstrated 89% of participants achieved weight loss or maintenance, 71% reported an improvement in the quality of their diet, 69% reported improved regulation of their eating behaviour.</p>			
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			<p>Feedback from the Food for Thought group included</p> <p><i>'Felt that the course brought out the best in me and able to utilise helpful tools I have learned.'</i></p> <p><i>'Helpful to share experiences'</i></p> <p><i>'Felt less lonely, others going through same thing'</i></p> <p><i>'Feeling I am not alone, easy to understand and follow '</i></p> <p><i>'More aware of impact of anxiety on food choices '</i></p> <p><i>'Course was very helpful, very happy that is wasn't you must eat this mustn't eat that approach'</i></p> <p><i>'More knowledgeable, feeling supported in making changes'</i></p> <p>Development of the Occupational Therapy pathways are ongoing. Progress to date has included -</p> <p>Participation in MDT clinic at level 3 to screen for appropriate clients. Enhancing the delivery through OT home visits for clients who are unable to access the clinic due to mobility or transport issues and providing signposting and onward referral to community therapy teams, expert patient programmes, 3rd sector services and carers support networks.</p> <p>1:1 fatigue management interventions delivered with service users. Patient reported outcomes have included improvements in Hospital Anxiety and Depression Scale and Modified Fatigue Impact Scale scores as well as a reported reduction in alcohol consumption, improved satisfaction in managing fatigue, increased physical activity and improved assertiveness.</p>			
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		<p><i>"I can say to family about my boundaries, when I can't do something and need help I can ask that now".</i></p> <p>Ongoing involvement in the wider occupational therapy service development and delivery of a multi-morbidity "Living with Fatigue" group with clients from the adult weight management service attending alongside clients from other occupational therapy specialist areas. Involvement in this wider service offers a prudent way of reaching this client group with sessions running throughout the year. This will be evaluated in due course.</p> <p>Ongoing work with the integrated community equipment stores in the Carmarthenshire area to source specialist providers of bariatric equipment to accommodate the needs of clients. Clients have benefited from the provision of equipment allowing them to engage safely and independently in activities of daily living, such as showering, cooking, toileting, going up and down stairs and getting outdoors. This involvement with integrated equipment stores will be expanded to the rest of the health board localities as the service develops and the need arises.</p> <p>Evaluation protocols are still being developed, and OT is linking with a network of occupational therapists working in weight management services across the UK and Ireland to review current practice, and in discussions with researchers in Copenhagen surrounding current evidence based practice on the role of OT in weight management services to help structure delivery and support.</p> <p>Progress regarding the physiotherapy pathways has included -</p>				
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	<p>We will develop evaluation protocols for all interventions within the level 3 WMS and we will ensure that these are consistent with the All Wales minimum dataset when it is launched.</p>		<p>Development of physiotherapy component of level 2 and 3 MDT group interventions</p> <p>Attendance at Level 3 MDT Clinic to identify and establish physiotherapy MDT provision within this setting</p> <p>Delivery of Physiotherapy perspective for level 3 MDT treatment planning and support</p> <p>Understanding of physiotherapy pathways across HDUHB services including referral routes</p> <p>Initial scoping and network development in relation to wider community-based PA opportunities</p> <p>Planning of education and awareness of WM service/issues for wider physiotherapy service</p> <p>April 2024</p> <p>The multidisciplinary group 'Strive' has now been developed and a pilot programme is currently being delivered which is due to complete in April 2024. This group has been designed by the MDT including dietetics, psychology, occupational therapy and physiotherapy. This group takes place over 12 weeks and includes a one to one session to reassess each individual's needs after completion. The initial pilot has been delivered jointly by a dietitian, clinical psychologist, occupational therapist and physiotherapist but training has been planned for April and May to ensure that the full level 3 MDT can deliver any of the sessions. This will ensure that the group is sustainable and resilient to any staffing issues. A full evaluation of the pilot group will take place in April.</p> <p>Clinical Psychology</p>			
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			<p>Patients engaging in one to one psychology interventions also reported improvements in their relationship with food, reductions in emotional eating, gaining more control over their eating behaviours, as well as improved body image.</p> <p>Feedback from one to one patients included:</p> <p><i>"I'm in a good place now. I'm not perfect but I've got the skills I need to take me forward."</i></p> <p><i>"I feel more in control of my eating now."</i></p> <p><i>"I'm able to respond more compassionately to myself when I've had a blip in my eating – I never could have done that before."</i></p> <p>Clinical Psychology are currently in the process of developing a group-based programme for patients experiencing significant binge eating symptoms. This is based on a CBT-E approach and will run for a period of 10-12 weeks. The aim is to pilot this group in late Spring.</p> <p>Dietetics</p> <p>Data from the dietetic one to one appointments demonstrated that 68% of participants successfully achieved weight loss with a further 22% maintaining their weight. Weight maintenance is often the first treatment goal for individuals with complex obesity who present in the level 3 WMS. Of those who achieved weight loss, the average loss was 6.2% of their body weight.</p> <p>2 Food for Thought programmes, with a total of 18 participants have completed since October 2023. A further programme is due to complete in April. Of the participants who have finished the programme,</p> <p>83.5% successfully achieved weight loss</p>			
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			<p>79% reported an improvement in the quality of their diet as measured by the 'Starting the Conversation' questionnaire.</p> <p>69% reported improved regulation of their eating behaviour as measured by the Self Regulation of Eating Behaviour questionnaire.</p> <p>Occupational Therapy</p> <p>Since October 2023 the focus of the occupational therapy work has been</p> <p>Overseeing the development and evaluation of the Level 2 Actively Being Well group alongside the newly appointed Therapy Assistant Practitioner.</p> <p>Creating and delivering occupational science informed content for level 2 and 3 multidisciplinary groups and upskilling team members in areas such as occupational balance, functional activity, and grading activity</p> <p>Home visits to complex and house bound clients who attend the specialist MDT clinic with functional difficulties, alongside weight management needs, which are limiting their engagement in physical activity, activities of daily living and work.</p> <p>Education on the weight management service and referral pathway to the wider Community Resource Teams in the Carmarthenshire, Pembrokeshire and Ceredigion localities, and ongoing work with community equipment stores identifying suitable equipment providers that can meet the needs of this client group.</p> <p>Multimorbidity OT Living with fatigue group has been delivered and evaluated. Outcomes from WM patients included an average attendance at 7 out of 8 sessions and improvements in Warwick Edinburgh Mental Wellbeing Scale and</p>			
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			<p>General self-efficacy scale outcome measures. Weight loss was not a measure in this group, but clients did report improved ability to engage in weight management behaviours such as increased physical activity and being able to plan and meal prep healthier options.</p> <p>Feedback from the weight management clients in the group included:</p> <p><i>"I am able to do more, as I now understand pacing and when to rest. I've started yoga!"</i></p> <p><i>"I feel better able to manage my condition. I now have the tools."</i></p> <p><i>"It was so beneficial to meet and speak to others in the same position as me. It can be lonely, so it was nice to feel seen"</i></p> <p>Focus for the next 6 months will be on refining criteria and interventions for timely occupational therapy input and integrating the therapy assistant practitioner into the level 3 occupational therapy pathway.</p> <p>Physiotherapy</p> <p>Since October 2023 the focus of the physiotherapy work has been the further development of the biopsychosocial assessment model to include more physiotherapy screening and identification of need.</p> <p>To maximise initial impact of the physiotherapy, offer educational and therapeutic group content had been developed and delivered across level 2 and 3 of the WM service.</p> <p>Physiotherapy has also been integrated into the specialist MDT clinic including provision of physical activity assessment and advice and</p>			
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			<p>collaborative decision making for referral to level 4 services.</p> <p>The next phase of the service development will look at defining pathways from BPS assessment screening and MDT group participation into individual specialist assessment and treatment.</p> <p>Specialist MDT Weight Management Clinic Since October 2023 the focus of this clinic has been the establishment of pathways for patients who are due to commence wegovy. The clinics have been set up with group medication starts. Between 8 and 10 individuals who have already been assessed within the specialist MDT clinic as suitable for wegovy, and who have already completed at least one of the other level 3 interventions have attended a group based education session where they start their medication. They are then monitored via a monthly questionnaire which enables the MDT to identify if anyone needs additional support before they would be due for their routine review in clinic. Since January 2024, 55 people have commenced wegovy. Evaluation data is being gathered and will report after 6 months.</p> <p>We have communicated with all referrers across primary care and informed them of the new referral pathway. We have also communicated with our secondary care partners and utilised the HDUHB global email system to ensure everyone within the HB is aware of the service, the access criteria and the referral pathway.</p> <p>We will keep reinforcing the messaging re the referral pathways as when referrals are received from HCPs they are returned to them with a</p>			
	<p>As per level 2 we will develop our communication strategy, specifically focusing on raising awareness with our referrers of the self-referral pathways.</p>					

	<p>We will link with work already underway on developing the pathway interface between primary and secondary care to ensure the inclusion of the weight management pathways, thereby ensuring that patient facing practitioners in primary care are clear re the appropriate referral pathways for people living with obesity.</p> <p>As per level 2 we will continue to develop our Hywel Dda WMS internet page with the aim being that this will act as a digital resource for individuals attending, alongside signposting to the national Healthy Weight Healthy You website and other self-directed resources.</p> <p>To plan, design and cost a sustainable and compassionate model</p>		<p>letter explaining the referral pathway. At the same time, the individual who has been referred receives a letter with the link to refer themselves should they wish to.</p> <p>We have worked with the community pathways team and have ensured that information re a tiered approach to WM in line with the standards of the AWWMP are included. We have provided information on initial signposting followed by providing information and the self referral details to the WMS.</p> <p>April 2024 The work described above is ongoing</p> <p>This work is planned for the 2nd half of 2023/24 so we will link with the communications team re updating our internet page in the coming months</p> <p>April 2024 This work has not been completed due to operational pressures but it is planned to have a significant focus on our digital presence over the coming 6 months.</p> <p>This is described under level 2 as the work will span levels 2 and 3 of the pathway.</p> <p>As discussed in level 2, work is underway to develop a business case to support the development of a weight management service for children, young people and families.</p> <p>April 2024 As described in level 2, a business case for the development of a weight management service</p>			
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	of service provision for children and families at Level 2 and 3 of the AWWMP.		for children and young people was presented to Children's Board on 22 nd December 2023.			
Comments/updates on Level 1 and Level 4	Delivery of Nutrition Skills for Life programmes		<p>The HDUHB Dietetics Team continues to deliver the Nutrition Skills for Life programmes focussing on prevention and early intervention. These programmes are targeted at providers of childcare, education settings, parents and families.</p> <p>Since April 2023 we have delivered 5 Level 2 Community Food & Nutrition Skills courses to 35 learners</p> <p>Types of learners include – school nurses, midwifery teams, MH & LD DAP's, Food & Fun facilitators, Community Wellbeing team, school catering team</p> <p>100% of the learners reported learning something new about nutrition with themes of new knowledge including Eatwell Guide recommendations, portion sizes, nutrition for different population groups e.g. older adults and pregnancy, food labels, dietary fats.</p> <p>63% of learners rated the course as excellent and 37% rated it as good</p> <p>26 Quality assurance visits were provided for Food & Fun programmes across HDUHB</p> <p>April 2024</p> <p>Level 2 Community Food & Nutrition Skills: 24 participants have been through the course with 7 gaining accreditation (awaiting sign off of 14 who are just finishing)</p>			

	Signposting to self directed support	<p>Level 2 Community Food & nutrition Skills for Early Years: 19 have been through the training with 2 gaining accreditation (awaiting sign off for 15 as courses finished this month)</p> <p>Level 1 Preparing Healthy Meals: 4 participants (awaiting sign off for accreditation)</p> <p>The Weight Management Team has put together a list of self help resources including the Healthy Weight Healthy You website, which are provided to people who are on the waiting list to access the WMS. The list includes a variety of websites where people can access a range of support to begin to consider behaviour change and their weight management needs. Work is underway to ensure that people will automatically receive these resources when they self refer into the WMS.</p> <p>The Weight Management Team continues to link with local projects such as Health Coaches in primary care and Smoking Cessation Services who are providing support around healthy lifestyle behaviours and have ensured that they are able to signpost people into the Weight Management Service.</p> <p>April 2024</p> <p>As part of the work that is ongoing in maternity services the Smoking and Wellbeing Support Workers have been providing infant feeding and breast feeding support. This has included giving infant feeding support to women in:</p> <p>32 tongue-tie clinics = 256 women approximately and 38 specialist Infant feeding</p>			
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			<p>breast feeding coordinator (IFC) clinics =304 women approximately</p> <p>They have delivered 7 Infant feeding training sessions for staff midwives and health care support workers supporting the IFC's sessions</p> <p>They have provided 162 (from Dec) follow up calls to women after discharge from hospitals and 43 intensive breast feeding support sessions on the ward</p> <p>They have also held 17 online antenatal infant feeding classes.</p> <p>Level 4 –</p> <p>HDUHB continues to refer people to level 4 services via the agreed referral pathways. Work is underway on a national basis to improve communication and promote joint working between levels 3 and 4 of the AWWMP.</p>			
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	Key actions planned	Risks to delivery corrective actions & by when including a timeline	What was achieved
Standards			
<p>Health Boards are asked to provide sufficient evidence of their progress against the Standards.</p> <p>Each Health Board publishes a strategic weight management pathway development plan, agreed with Welsh Government. The plan should set out: an assessment of need to inform priorities for action; a phased development plan; a</p>	<p>Following on from the original Hywel Dda UHB Healthy Weight Strategic Development Plan submitted to WG in May 2021, which detailed an assessment of need and the priority actions for 2021/2022, a forward plan has been submitted annually which builds on the actions and achievements from the original plan. The most recent Forward Plan for 2023/24 was submitted to WG in July 2023.</p>		<p>The progress against the priorities set out in the 2023/24 plan have been described above.</p>

	Key actions planned	Risks to delivery corrective actions & by when including a timeline	What was achieved
<p>description of services at each level of the All Wales Weight Management Pathway for adults, children and those with specific needs e.g. pregnant women.</p> <p>Health Boards can demonstrate how services in the strategic weight management pathway development plan will meet the needs of the population and reduce inequalities in outcomes.</p>	<p>The details of how services in the strategic weight management pathway development plan meet the needs of the population and reduce inequalities were documented in the annual plans, most recently in the 2023/24 plan. As the plan is implemented, we will evaluate and report on capacity at each level of the pathway.</p> <p>Capacity and demand analysis that was carried out as part of the development of the Children & Young People's business cases, showed that the demand for services will be higher in areas of greater deprivation. This need for potentially targeted interventions will be considered when services are being planned.</p>	<p>It was highlighted previously that there is a risk to capacity within the level 3 Specialist Multi-disciplinary clinic and the wider Weight Management Service due to the potential demand for new medications such as saxenda (liraglutide), which can only be prescribed via the Level 3 WMS. This risk has increased with the launch of semaglutide (wegovy) which follows the same pathway for prescription. We are experiencing a sustained increase in demand for weight management services and feel this is in part likely to be due to the extensive publicity via national media on the availability and effects of the medication.</p> <p>The increased demand is leading to longer waiting times to access the WMS, longer in service waits and difficulty meeting patients expectations.</p> <p>Corrective Actions</p> <p>Currently we are maintaining our service pathways as the likelihood of successful, long term weight loss is reduced if the factors contributing to an individuals difficulty managing their weight is not addressed.</p>	<p>An SBAR regarding the potential demand for saxenda was taken to the HB's Effective Clinical Practice Advisory Panel. Work is underway to consider the projected demand for semaglutide (wegovy) within HDUHB.</p> <p>An All Wales group has been established with Level 3 Weight Management Services to consider how services can manage the demand for these medications.</p> <p>April 2024</p> <p>As described above, utilising group sessions to start people on wegovy and virtual monitoring has enabled us to prescribe wegovy for 55 people since January 2023. This will not be sufficient to meet the demand for the medication in a sustainable way however.</p>

	Key actions planned	Risks to delivery corrective actions & by when including a timeline	What was achieved
<p>People with higher body weights are treated with dignity and respect and do not feel stigmatised due to a lack of appropriate equipment or facilities. This includes patient transport and emergency services.</p>	<p>Weighing guidance review.</p> <p>Training to other HCPs regarding supporting people with obesity when they access HB services.</p>	<p>We are adding information regarding the pathways and eligibility criteria for the new medications to our 'self referral' form. This is to ensure we can manage patient's expectations from the time they enter the service. We have added a list of 'self-help' resources to be automatically sent to people after they submit their self-referral form so they can access some self-directed support while they wait.</p> <p>The funding allocation for the implementation of the WM pathways is focussed on the implementation of the Adult Level 3 Service. A business case has been written to support the development of weight management services for children, young people and families. A risk to the ability of the strategic weight management development plan being able to meet the needs of the population will be if the business cases for children and young people does not get approved.</p>	<p>The reviewed weighing guideline is being implemented, ensuring that people living with obesity are treated with dignity and respect during any procedure including weighing.</p> <p>Training and awareness raising has been provided by members of the Weight Management MDT to other HCPs re the appropriate management of people living with obesity within their services.</p>

	Key actions planned	Risks to delivery corrective actions & by when including a timeline	What was achieved
<p>Planning, commissioning, evaluation and delivery of services actively engages with and involves people living with overweight and obesity.</p> <p>The Weight Management Pathway in the local area is managed and co-ordinated. Services delivering elements of the pathway have a clear understanding of roles and responsibilities and mechanisms to facilitate movement of individuals within the pathway in a seamless manner as needs change.</p> <p>The Health Board adopts a continuous improvement approach</p>	<p>Ensure people living with overweight and obesity have the opportunity to contribute to the design and implementation of all new weight management services as they are set up.</p> <p>The Weight Management Pathway is co-ordinated by the Clinical Pathway Lead.</p> <p>A strategic group is being established, with representatives from Primary Care, Public Health, Weight Management, and the Executive Team to ensure that services across the AWWMP including those based within the HB WMS, Primary Care and the AWDPP align around a shared set of values and objectives and that individuals can move seamlessly between the different services and across the different pathway levels.</p>	<p>Due to the variety of different pathways for weight management support within primary care and community services at level 2 of the AWWMP, it can be difficult to achieve join up between the full range of services available.</p> <p>The Pathway Lead will continue to link with colleagues in Public Health and Primary Care with a view to joining up services across the pathway.</p>	<p>Feedback from service users is a core part of the WMS evaluation protocol. During the development of the business case for a weight management service for children, young people and families, support was provided by the Patient Experience Team to engage with families via questionnaires and focus groups.</p> <p>Initial meetings have been held to consider the strategic oversight of the implementation of services particularly at level 2 of the pathway and to ensure the aims, objectives and values of the services that have been funded through the SPPC fund align with those of the rest of the Weight Management Pathways</p> <p>The work of the AWDPP is aligned to the Weight Management Clinical Pathways with processes agreed to map people's journeys between the 2 services so that people who wish to access the WMS following identification of a need within a brief intervention as part of the AWDPP can seamlessly transfer over to the WMS and that journey can be mapped to inform the evaluation of both the WMS clinical pathway and the AWDPP.</p> <p>This work forms part of the annual reporting to WG. Evaluation protocols are now established for services at levels 2 and 3 of the Adult Weight Management Pathway and we expect to be able to</p>

	Key actions planned	Risks to delivery corrective actions & by when including a timeline	What was achieved
<p>to service quality and outcomes using the minimum dataset and other mechanisms including patient stories.</p> <p>Protocols informed by the All Wales Child Protection Procedures (2008) are followed when childhood obesity is a cause for professional concern, regarding wellbeing and risk of harm.</p> <p>Staff working within the Health Board receive training to enable them to offer compassionate, psychologically informed care that avoids stigma and discrimination. All staff are able to engage in supportive conversations with patients regarding weight management in line with Level 1 of the pathway.</p> <p>Weight management services share their learning with colleagues within and beyond weight management services.</p>	<p>This will be written into evaluation plans as services are developed.</p> <p>Child protection protocols informed by the All Wales Child Protection Procedures (2008) will be followed.</p> <p>Training is in place for all staff working within the Weight Management Service. This includes training and supervision provided by our Weight Management Psychology Team to ensure all of the staff within the Weight Management Team are skilled and confident in the provision of psychologically informed services and interventions across levels 2 and 3 of the Weight Management Pathway. The members of the MDT provide training to their own professions in order to empower staff to feel confident supporting people living with obesity across the wider HB services.</p> <p>Will take part in peer review process with other Weight Management Services Will continue to communicate with local and national stakeholders re the outcomes and learning from weight management services within HDUHB. Will maintain strong links to national structures and organisations such as WG,</p>		<p>continue to report on outcomes for future reports.</p> <p>All staff currently have to undergo child protection training as part of their HB mandatory training.</p> <p>The values of the WMS are that it is a patient centred and compassionate service that addresses the needs of individuals and offers a range of psychologically informed services to individuals dependent on their specific needs.</p>

	Key actions planned	Risks to delivery corrective actions & by when including a timeline	What was achieved
	the HWHW implementation board and its subgroups and PHW.		

Relevant Strategies and Guidance

AWWMP Guidance <https://gov.wales/adult-weight-management-pathway-2021>

<https://gov.wales/weight-management-pathway-2021-children-young-people-and-families>

Weight Management Standards <https://gov.wales/weight-management-services-standards>

Welsh Government Healthy Weight: Healthy Wales Strategy <https://gov.wales/healthy-weight-strategy-healthy-weight-healthy-wales>

Delivery Plans <https://gov.wales/healthy-weight-healthy-wales-delivery-plan-2020-2022>

Welsh Government 'A Healthier Wales' <https://gov.wales/healthier-wales-long-term-plan-health-and-social-care>