

# North Yorkshire Adult Weight Management Service

Annual report 2021



North Yorkshire  
County Council

# Adult Weight Management Annual Report 2021

## - A year of recovery

This report provides an overview of the Tier 2 Adult Weight Management Service in North Yorkshire, from 1st January to 31<sup>st</sup> December 2021.

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# 1. Glossary

## BMI (Body Mass Index) (1) -

Body Mass Index (BMI) is a measure that uses your height and weight to work out if your weight is healthy. The BMI calculation divides an adult's weight in kilograms by their height in metres squared. For example, A BMI of 25 means 25kg/m<sup>2</sup>.

## BMI Ranges -

For most adults, an ideal BMI is in the 18.5 to 24.9 range. If your BMI is:



**below 18.5 –  
you're in the  
underweight range**



**between 18.5 and  
24.9 – you're in the  
healthy weight range**



**between 25 and  
29.9 – you're in the  
overweight range**



**between 30 and  
39.9 – you're in  
the obese range**

There are three obesity classifications. A BMI between 30.0 and 34.9 is Obese Class I, 35 to 39.9 is Obese Class II, and a BMI above 40.0 is Obese Class III.

The term 'excess weight' refers to any BMI over 25.

You can calculate your BMI on the NHS BMI Healthy Weight Calculator at [www.nhs.uk/live-well/healthy-weight/bmi-calculator](https://www.nhs.uk/live-well/healthy-weight/bmi-calculator)

## Co-morbidities

The presence of one or more additional conditions which co-occur with a primary condition. A comorbidity is each additional condition. For example comorbidities of Obesity include High Blood Pressure, Obstructive Sleep Apnea, Arthritis, and Type-2 Diabetes.

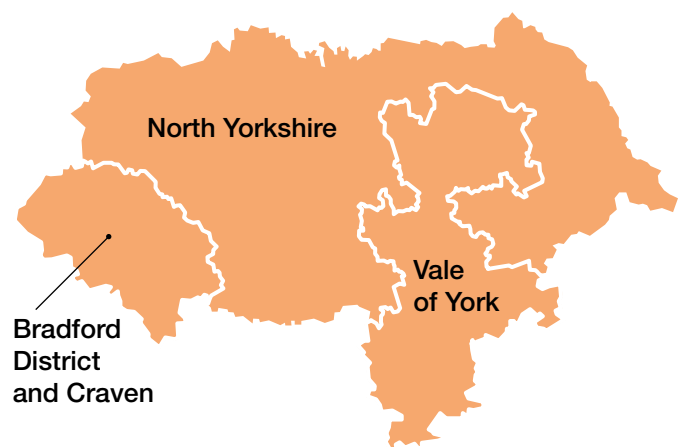
## CCG (Clinical Commissioning Group)

Clinical Commissioning Groups are responsible for implementing the commissioning roles as set out in the Health and Social Care Act 2012. They are clinically-led statutory NHS bodies responsible for the planning and commissioning of health care services for their area.

In 2021 North Yorkshire had three Clinical Commissioning Groups:

- NHS Bradford District and Craven CCG – covers Craven district  
(Note: *Bentham Practice* is covered by *Morecombe Bay CCG*)
- Vale of York – covers Selby district
- North Yorkshire CCG – covers Hambleton, Harrogate, Richmondshire, Ryedale, Scarborough and Whitby districts.

## Clinical Commissioning Groups in North Yorkshire



## 2. Introduction

2021 was the fourth year of service for North Yorkshire's commissioned Tier 2 Adult Weight Management Service. In the previous year (2020), due to the COVID-19 pandemic the service undertook major adaptations to how it offered support, with Providers mobilising remote delivery solutions. Throughout this, the quality of delivery was maintained and although referral and completer numbers were lower, weight loss outcomes were maintained at pre-pandemic levels.

At the start of 2021, the Country was once again in Covid lockdown, with schools, shops and entertainment closed. As the Government's Roadmap out of lockdown was announced in February 2021 (2) and the vaccination rollout gathered pace, planning for recovery of the service began. A communications campaign was planned by the commissioners and delivered by the North Yorkshire County Council Communications Team in May and June 2021.

Following a Government commitment to invest more in weight management support (3), the County Council received a 12 month Government Grant in April 2021 to enhance and develop Adult Weight Management Services. A plan for the investment of this fund was put in place which was influenced by experiences during the pandemic and had a focus on addressing inequalities. Providers began delivering using this grant funding in June 2021, further detail is included in the report.

It was recognised early on in the pandemic that excess weight puts people at greater risk of illness and death from Covid-19 (4) and alongside investment in weight management services, in 2021 the Government also invested in the Better Health social marketing campaign, launched the NHS Digital Weight Management Programme and committed to other measures to address the food environment such as introducing calorie labelling on menus. From April 2021, GP Practices were able to sign up to an Enhanced Service Specification for adult weight management, which meant they could be paid for each referral to weight management support. With a national focus on weight management and new support

options available, the commissioners worked in 2021 to communicate and strengthen the pathway of adult weight management support.

Whilst there was greater focus on weight management support with the dissemination of the Government Grant, it should be noted that access to the right, personalised, weight management support is just one part of North Yorkshire's Healthy Weight, Healthy Lives Strategy (5); which takes a whole systems approach to obesity and recognises the impact of the wider food and physical activity environment; as well as people's social and economic circumstances and their mental health, on excess weight.

## 3. Purpose of Report

This report covers the performance of the service for the fourth year of the contract for the majority of providers of the Adult Weight Management service (Selby contract period is different to all other districts, being 6 months ahead).

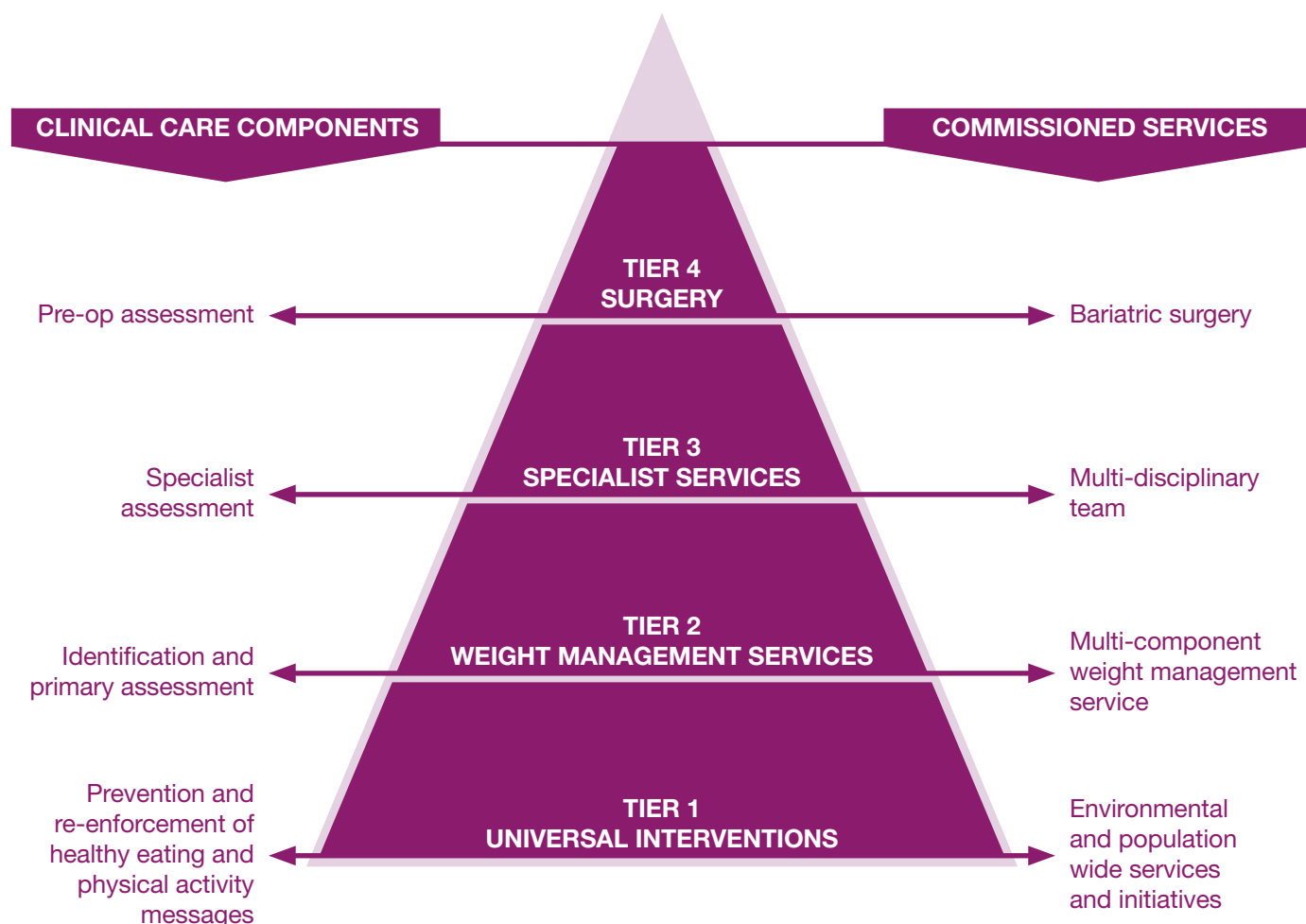
The report will present client outcomes for the County against modelled and predicted outcomes. North Yorkshire level data will be used for the whole service and a reporting period of 1st January to 31<sup>st</sup> December 2021 for participant data.

The report will also cover the work that was carried out in 2021 to recover the service following the lifting of Covid restrictions and gradual return to face to face delivery. It will include experiences and case studies of both providers and participants of the service. The report will also describe the use of the Government Grant funding, the outcomes of this investment will be explored in the next annual report.



## 4. Background to the Service

The provision of weight management services is crucial in supporting people to make positive behaviour changes associated with food and physical activity. Clinical guidelines recommend a stepped approach to weight management depending on the level of obesity and whether a patient has weight-related co-morbidities. The obesity pathway highlights the recommended interventions at each level.



The North Yorkshire Adult weight Management Service was formally procured in 2017. The service launched in Selby in July 2017 and the remaining districts in January 2018.

The current service incorporates a structured assessment process from referral; triaging clients to assess eligibility and readiness to change, and supporting clients to set and review weight loss plans and physical activity agreements with their weight management advisor at an initial health assessment, 12-week and 24-week assessments. Clients are supported to achieve 5% weight loss at 12-weeks and sustain 5% weight loss at 24-weeks. The providers offer clients weekly weigh-ins, structured nutritional education and advice, and a free facilitated physical activity offer.

The service accepts referrals for any adult aged 18 or over who lives, works or is registered with a GP in the county of North Yorkshire. The BMI threshold for referral is 30 or BMI 25 for those from BME groups or those with co-morbidities. This was amended in 2020 and is in line with NICE guidance (6).



An overview of the providers delivering the Service in each district area is illustrated:

District	Name of service	Service provider
Craven	Healthy Lifestyles	Craven District Council
Hambleton	Take That Step	Hambleton District Council
Harrogate	Fit 4 Life	Brimhams Active (leisure providers of Harrogate Borough Council)
Richmondshire	Choose to Lose	Richmondshire District Council
Ryedale and Scarborough	NHS Weight Management Service	Humber NHS Foundation Trust
Selby	Move It, Lose It	Inspiring Healthy Lifestyles

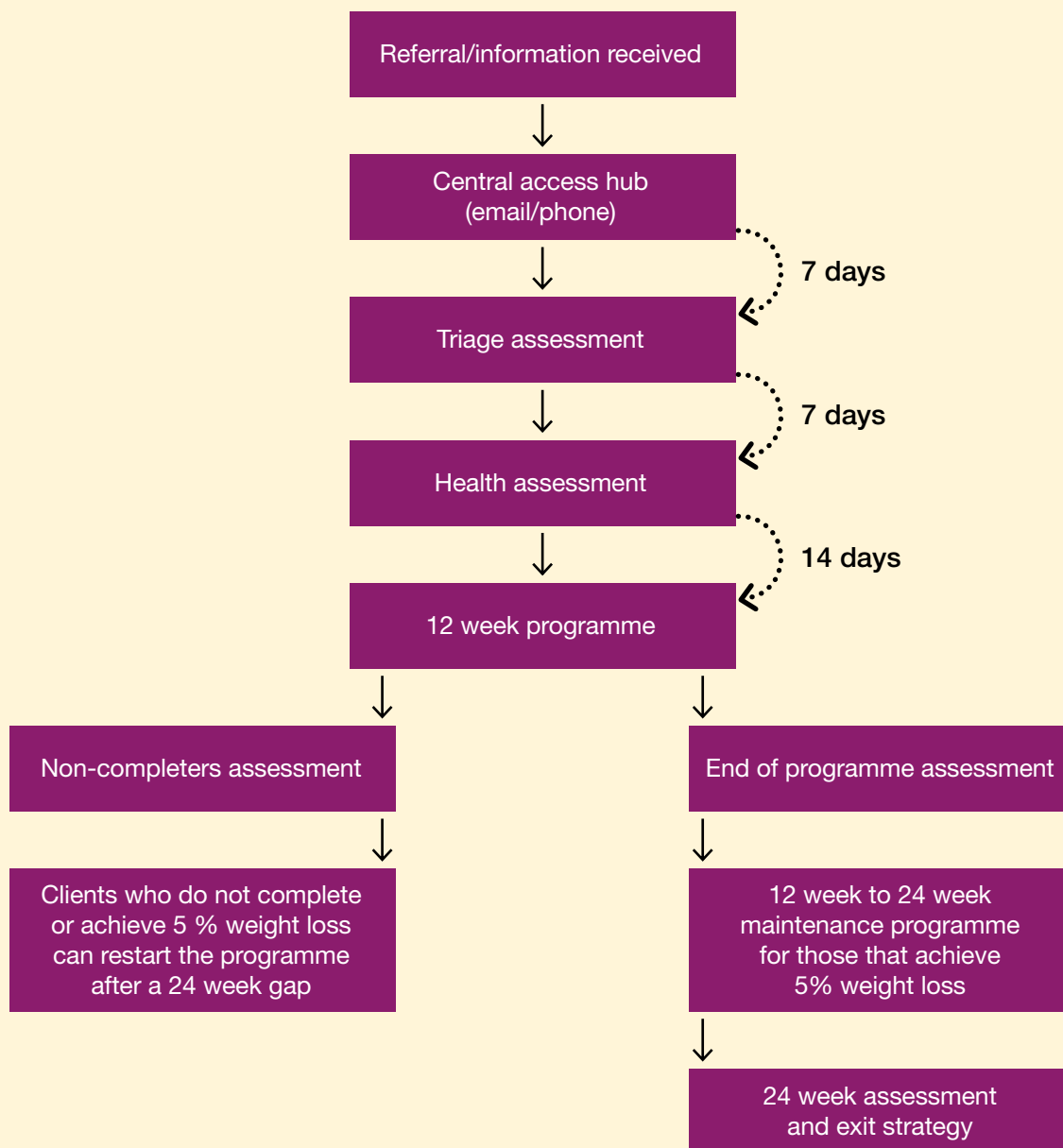
Individuals meeting the following criteria should be excluded from this service:

- under the age of eighteen
- have a BMI of less than 25
- are pregnant, or breastfeeding
- have a diagnosed eating disorder
- have an underlying medical cause for obesity and would benefit from more intensive clinical management from a tier 3 service
- have a significant unmanaged co-morbidity\* or complex needs as identified by their GP or other healthcare professional
- have had bariatric surgery in the last two years.

\*e.g. type 2 diabetes, cardio vascular disease, chronic obstructive pulmonary disease (unmanaged meaning not on medication and/or not subject to regular clinical review, or not completed a management programme such as diabetes management or cardiac rehabilitation). Each referral where a co-morbidity is identified should be assessed case by case and advice sought from the client's GP where appropriate.

Clients who do not meet the eligibility criteria are managed appropriately by the service Provider(s), which may include a referral back to the GP/health care professional, referral into a tier three weight management service (where available), and/or sign posting to local tier one community activities.

The current service is delivered as a rolling programme by all providers. The client journey from referral to exit (at 12 or 24-weeks) is shown in the below diagram:



Throughout 2021, the service delivery evolved following adaptations that were made as a result of the Covid-19 pandemic. By the end of 2021, all Providers were offering both face to face and remote programme delivery to suit people's individual circumstances.

More information on the service and providers can be found at [www.northyorks.gov.uk/step-up](http://www.northyorks.gov.uk/step-up)

## 5. National, regional and local prevalence data – adult obesity








### Excess weight - Overweight and obese

In England, 2020/21 data highlights the prevalence of excess weight (overweight and obese BMI 25 and above) in adults is 63.5%, still increasing slowly year on year.




North Yorkshire continues to have less adults living with excess weight (61.4%) than the England average and has the lowest percentage in the region, however, this still equates to just over 300,000 adults across North Yorkshire living with excess weight (BMI>25). Losing and keeping off 5% of body weight can reduce the risk of developing diabetes and lower blood pressure (6), therefore there are great health gains in supporting people to manage weight and preventing weight gain.

The diagram below illustrates the district level prevalence from 2015/16, to the latest 2020/21 data for North Yorkshire. There is no comparison made for 2012-2014 data as the method of data collection for this period was for ages 16 and above, as opposed to aged 18 or above for 2015 onwards.

#### Excess weight in adults, 18+ (%), North Yorkshire and its districts, 2015/16 to 2020/21:

	2015/16 %	2016/17 %	2017/18 %	2018/19 %	2019/20 %	2020/21 %
England	61.4	61.5	62.0	62.1	62.8	63.5
North Yorkshire	61.3	60.3	61.4	62.5	61.6	61.4
Craven	57.3	55.9	57.2	60.7	53.7	55.0 
Hambleton	61.8	60.4	62.6	63.0	63.8	64.1 
Harrogate	52.6	58.9	57.3	58.2	54.9	59.4 
Richmondshire	68.4	59.6	61.4	59.6	61.9	64.4 
Ryedale	58.9	64.9	57.8	56.5	63.1	62.3 
Scarborough	70.2	59.9	62.8	66.2	70.8	59.3 
Selby	63.6	65.5	70.6	72.8	61.0	66.3 

#### Key

	Statistically significantly worse than the England average
	Statistically similar to the England average
	Statistically significantly better than the England average

Source: Office for Health Improvement and Disparities Fingertips Public Health Data

PLEASE NOTE: data from 2015/16 to 2019/2020 has been amended from previous reporting. The Office for Health Improvement and Disparities have used an updated method of adjusting the self-reported height and weight data to bring it in line with the method developed by University Central London for the Health Survey for England data.

[Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk)



## North Yorkshire

In North Yorkshire, excess weight in adults (aged 18 and above) has remained very similar from 2019/20 (61.3%) to 2020/21 (61.4%). The prevalence in 2020/21 remains statistically similar to England (63.5%).

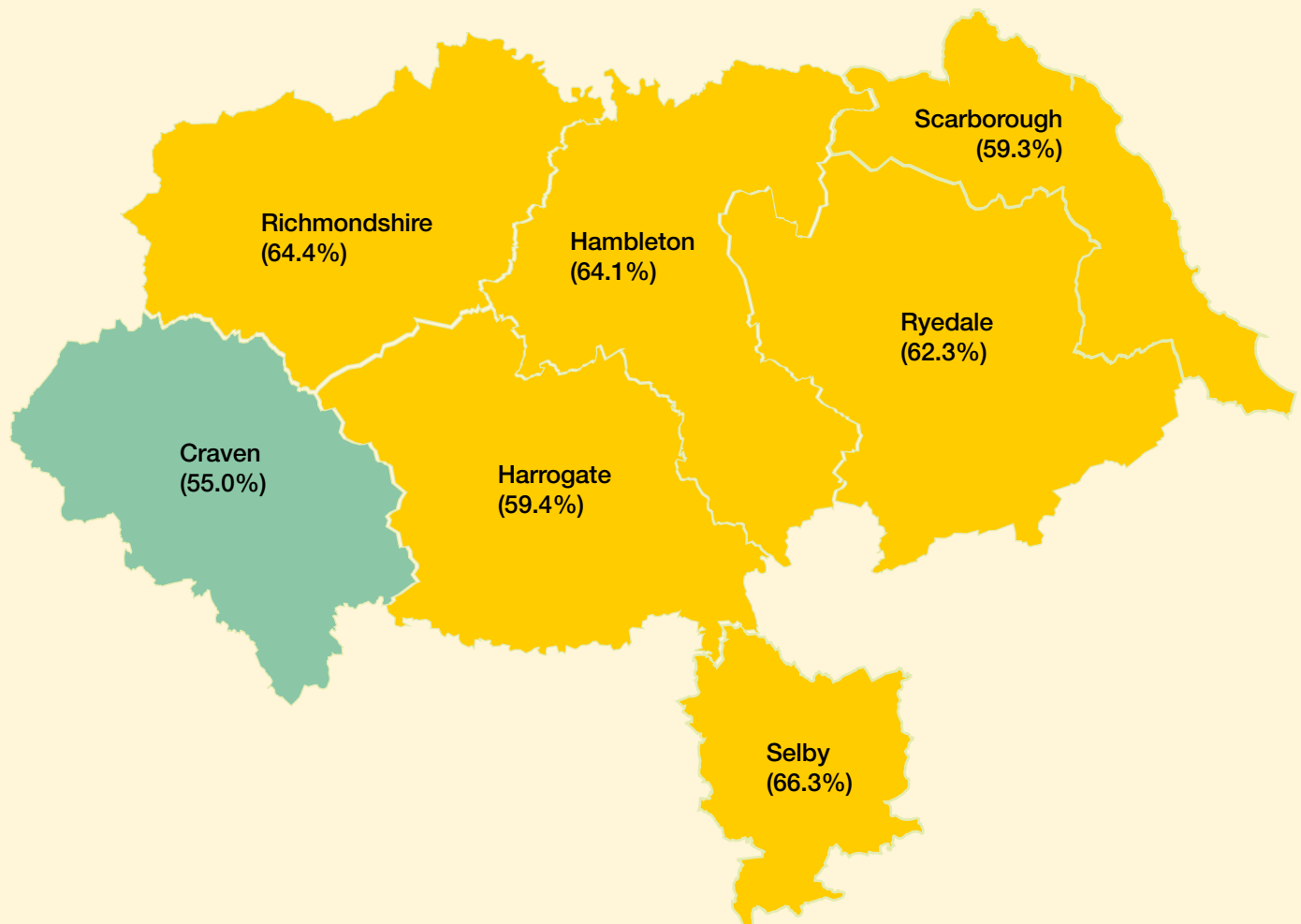
At a district level, 2020/21 data highlights Selby (66.3%), Ryedale (62.3%), Scarborough (59.3%), Hambleton (64.1%), Richmondshire (64.4%), and Harrogate (59.4%) being statistically similar to England (63.5%) and North Yorkshire (61.4%) averages. Craven (55.0%) is statistically significantly better than England and North Yorkshire.

Prevalence has risen from 2019/20 to 2020/21 in Selby, Hambleton, Richmondshire, Harrogate and Craven. Although Craven is statistically better than the England average, it still sees an increase in prevalence from 2019/20 data.

Prevalence has reduced in Scarborough and Ryedale from 2019/20 to 2020/21.

More work needs to be done to understand the fluctuations in trends within district areas, particularly in Scarborough and Selby. Please see Appendix A for graphs of trends of Excess weight in each District compared to England trends.

### Excess weight in adults in North Yorkshire 2020/21 compared to England (63.5%)



## Obesity (BMI>30)

The best indicator of obesity prevalence for adults (BMI >30) comes from the Health Survey for England (last data published 2019), which uses measured heights and weights to calculate BMI. However the survey sample size is not sufficient to produce robust estimates at a local level (7).

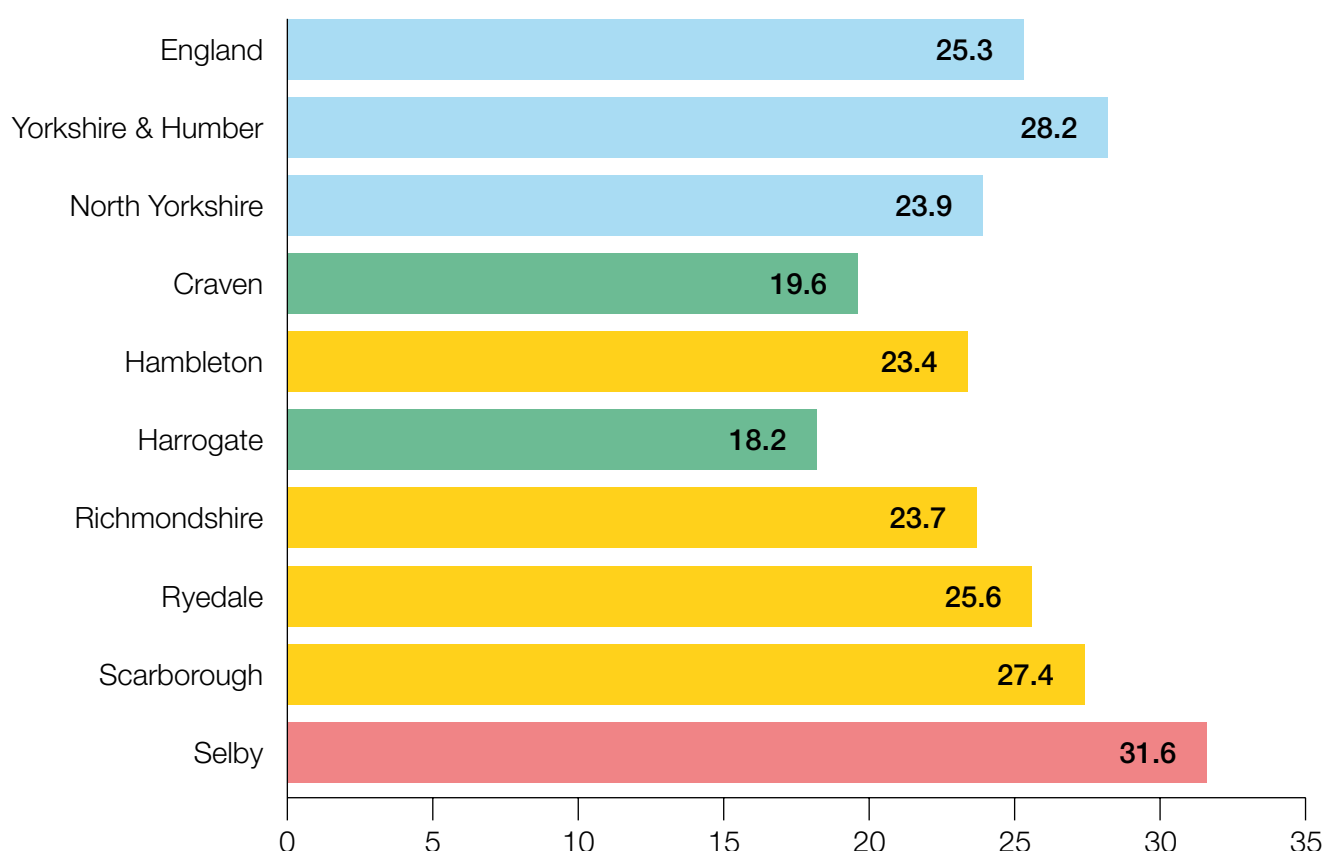
New obesity data has been presented in the Public Health Outcomes Framework which uses self-reported height and weights from the Sport England Active Lives Survey, adjusted to be the equivalent of measured heights and weights. The sample size is large enough to produce estimates at a local level.

We can therefore now view this for our Districts:

### Obesity prevalence adults aged 18+ 2020/21

Source: <https://fingertips.phe.org.uk>

#### 2020/21 Obesity % (BMI>30)



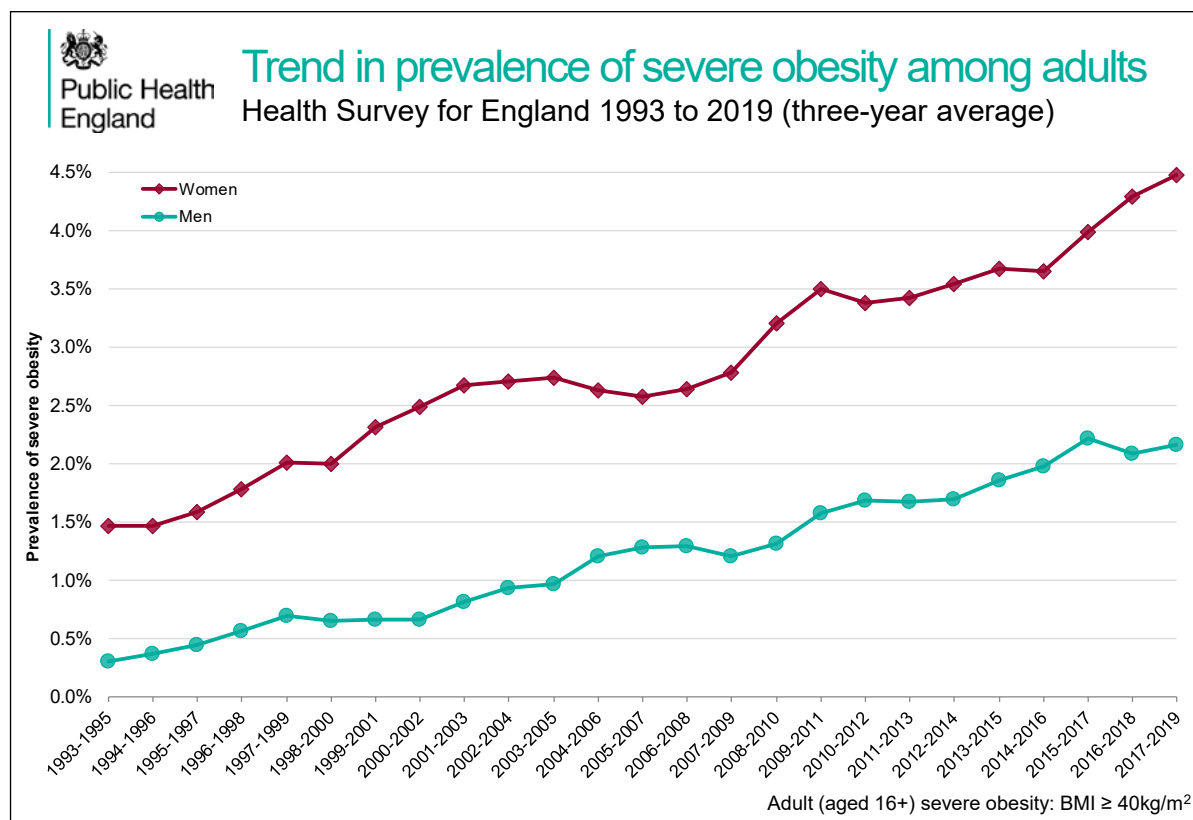
#### Key

- Statistically significantly worse than the England average
- Statistically similar to the England average
- Statistically significantly better than the England average

Similarly to the prevalence of combined excess weight (overweight and obese), Selby has the highest prevalence in the County (31.6%) and Craven the lowest (19.6%). Scarborough has the second highest in the County (27.4%), considerably higher than Harrogate (18.2%) although they have a similar excess weight prevalence in 2020/21 (59.3% and 59.4%) respectively). This indicates that a much higher proportion of those in Scarborough with excess weight, have a BMI over 30.

## Focus on: Gender differences and severe obesity (BMI >40)

As detailed in previous service Annual Reports, there are differences in population prevalence of obesity in the population nationally by age, gender, deprivation and ethnicity. Our most recent **national** data (8) shows men have a higher prevalence of **excess weight** (68.2%) than women (60.4%). However for **obesity** (BMI>30), the prevalence for women (29.1%) is slightly higher than men (27%). For severe obesity or Obesity class III this gap widens further, with 4.5% of women and 2.2% of men with a BMI over 40. Data shows this prevalence has been increasing quite significantly over the last 25 years, see graph below:

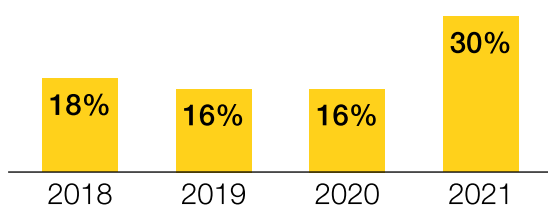


Source: Patterns and trends in adult excess weight. PHE, 2021

It is likely that this gender difference has not changed and possibly even widened due to Covid-19 – an ONS report (9) states that although more men than women have died from Covid-19, women's well-being was more negatively affected during the first year of the pandemic.

In North Yorkshire, the referrals to the Adult Weight Management service, show a sharp increase in the proportion of participants referred with a BMI over 40 in 2021.

### % of referrals BMI>40



There could be a number of possible reasons for this, for example the effect of Covid-19 on the number of people seeking support for their weight, with perhaps more individuals who felt they were more severely affected by obesity and needed to take more urgent steps to seek support being referred. There is also a possibility that it is due to a general increase in the prevalence of obesity (BMI>30) in North Yorkshire, which was 22.5% in 2017/18 (10) and 23.9% in 2020/21.

## Population health in 2021

In previous annual reports the health impact of obesity has been explained and the links between Covid-19 and obesity have been explored. In this report we will take a brief look at the Yorkshire and Humber profile of the Health Profile for England 2021 (11), the recent trends in adult health leading up to the pandemic and impact of the pandemic on adult health in the region.

Increases in life expectancy stalled in 2011 and in 2020, due to Covid-19, fell to 77.6 years in males and 81.7 years in women – the lowest since the early 2000s; this mirrors national trends. Yorkshire and Humber has the third lowest life expectancy compared to other regions, however there are inequalities within the region, which are closely linked with relative deprivation.

Data on healthy life expectancy in the region – the time spent in good health, or quality of life – is available prior to the pandemic. This shows males living in good health an average of 61.2 years with then an average of 17.6 years spent in poor health (2017-2019). For females, years lived in good health was 61.9 years with an average of 20.6 years spent in poor health.

The biggest risk factors for ill health in Yorkshire and the Humber are high BMI, tobacco, high fasting plasma glucose (associated with diabetes), alcohol use, drug use and occupational risks. The risk factors making the biggest contribution to deaths are tobacco, systolic blood pressure, dietary risks, obesity, high fasting plasma glucose and high LDL cholesterol. Aside from tobacco, all these risk factors can be improved through modifications in diet and exercise, which the adult weight management programme supports.

In terms of diet, regionally 53.5% of adults were meeting the recommended 5-a-day fruit and veg in 2019/20, lower than the England average (55.4%) however there is again great regional variation and North Yorkshire is at 59.4%.

Covid-19 changed our eating habits – although there were positive impacts for some, for example families eating more together, there were negative impacts also. People were forced to access more of their food through supermarkets and shops which were themselves affected by high demand, capacity restrictions and staff shortages, this affected people's access to food and availability of food. The virtual food environment (online takeaway delivery) expanded and this has been maintained largely through 2021, making it easier to access unhealthy foods (high in fat, salt and sugar). Food insecurity increased due to pressures on people's income and higher expenditure on food, for example having children eating at home all the time. For many people their mental health was affected by the lockdowns, which impacted their food choices.

During 2021 restrictions were gradually lifted which alleviated for some, the physical access barriers to food, however food insecurity continued to rise – a Food Foundation survey showed an increase from almost 10% of households (nationally) experiencing food insecurity in January 2021, to over 15% at the end of the year. The changing of restrictions and ongoing concern about Covid-19 continued to affect people's mental health in 2021 which will have affected eating habits. The Health Profile reports that regionally, 1 in 4 reported feeling high levels of anxiety in 2020/21 compared to 1 in 5 in 2018/19, with North Yorkshire having slightly lower rates than others in the region. Our Providers of the adult weight management service continued to note an increase in the numbers reporting mental health concerns, this helped shape the investment in the Government Grant funding received in April 2021.

There continue to be inequalities in diet and physical activity levels by disability, ethnicity and socio-economic status, exacerbated by the pandemic. Although the long term impact of these on obesity is unknown, an increase and widening of inequalities of obesity is likely.

## 6. North Yorkshire Adult Weight Management Service data (Year 4 Jan-Dec 2021)

### Service uptake

<b>Eligible population</b> (Total NY population aged 18+ with BMI 25 or above)	<b>Predicted uptake</b> (1.25% of eligible population)	<b>Actual referrals</b> (number)	<b>Actual uptake rate</b> (%)
308, 110	3852	1674	0.54%

### Client completions (attending 9 out of 12 sessions of initial 12 week structured programme)

<b>Predicted completers</b> (number)	<b>Actual completers</b> (number)	<b>Predicted completion rate</b> - referrals that complete (%)	<b>Completion rate</b> - referrals that complete (%)
2311	673	60%	40%

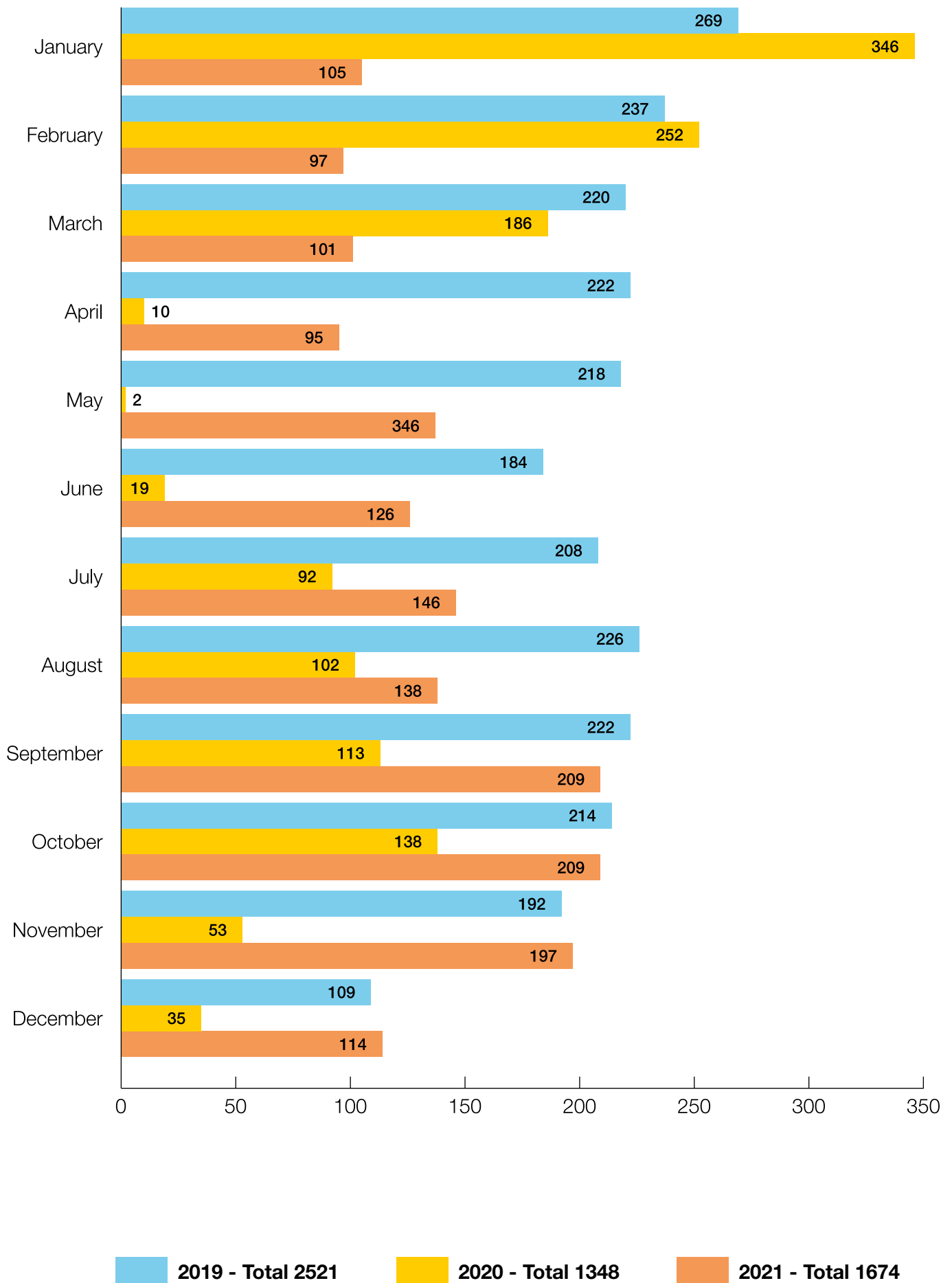
### 5% weight loss achievements at 12 weeks

<b>Predicted 5% weight loss achievements</b> (number)	<b>Actual 5% weight loss achievements</b> (number)	<b>Predicted 5% weight loss achievement rate</b> - 5% weight loss achievement of those that complete (%)	<b>5% weight loss achievement rate</b> - 5% weight loss achievement of those that complete (%)
693	421	30%	63%

### 5% sustained weight loss at 24 weeks

<b>Predicted sustained 5% weight loss achievements</b> (number)	<b>Actual sustained 5% weight loss achievements</b> (number)	<b>Predicted sustained 5% weight loss achievement rate</b> - (%)	<b>Sustained 5% weight loss achievement rate</b> (%)
347	256	50%	61%

## Referrals - 2019 to 2021





## Performance data – additional narrative

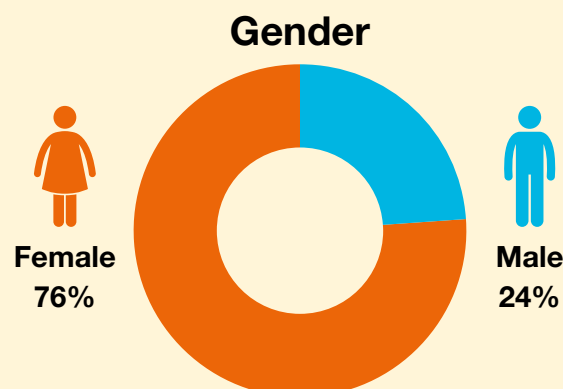
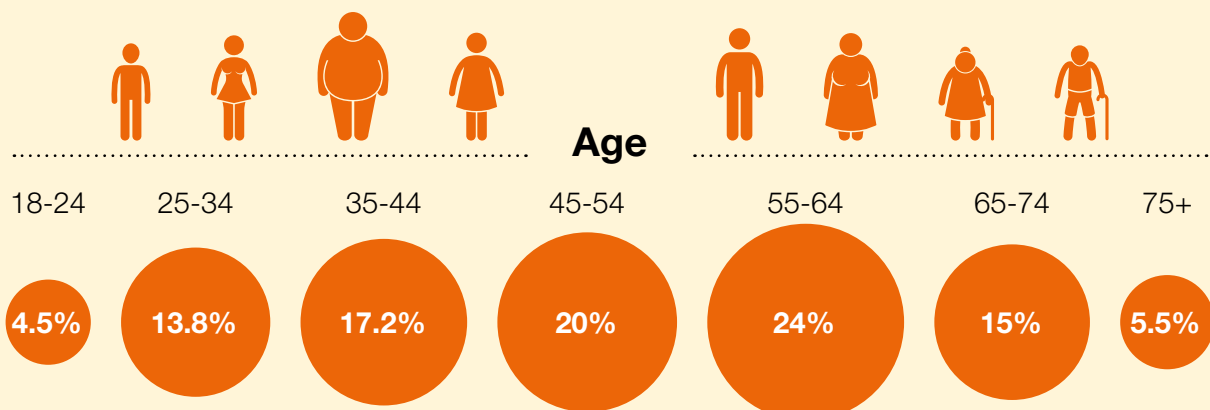
Although referral numbers recovered in September and October 2021 to more like pre-pandemic levels, overall there were lower than expected numbers of referrals in 2021 (1674) - slightly higher than in 2020 (1348), but still much lower than pre-pandemic numbers (2521 in 2019). Indication from 2022 shows a strong recovery in referral numbers from January 2022. Referral numbers were also affected by the interruption in service of one of the providers - Inspiring Healthy Lifestyles were unable to support new referrals until August 2021 due to changes within their organisation.

The completion rate was also again lower than pre-pandemic (40% in 2021 compared with 57.55% in 2019). It is likely that participants continued to be affected by conflicting priorities (work, caring), uncertainty around changes in Covid restrictions and illness. Providers reported that they continued

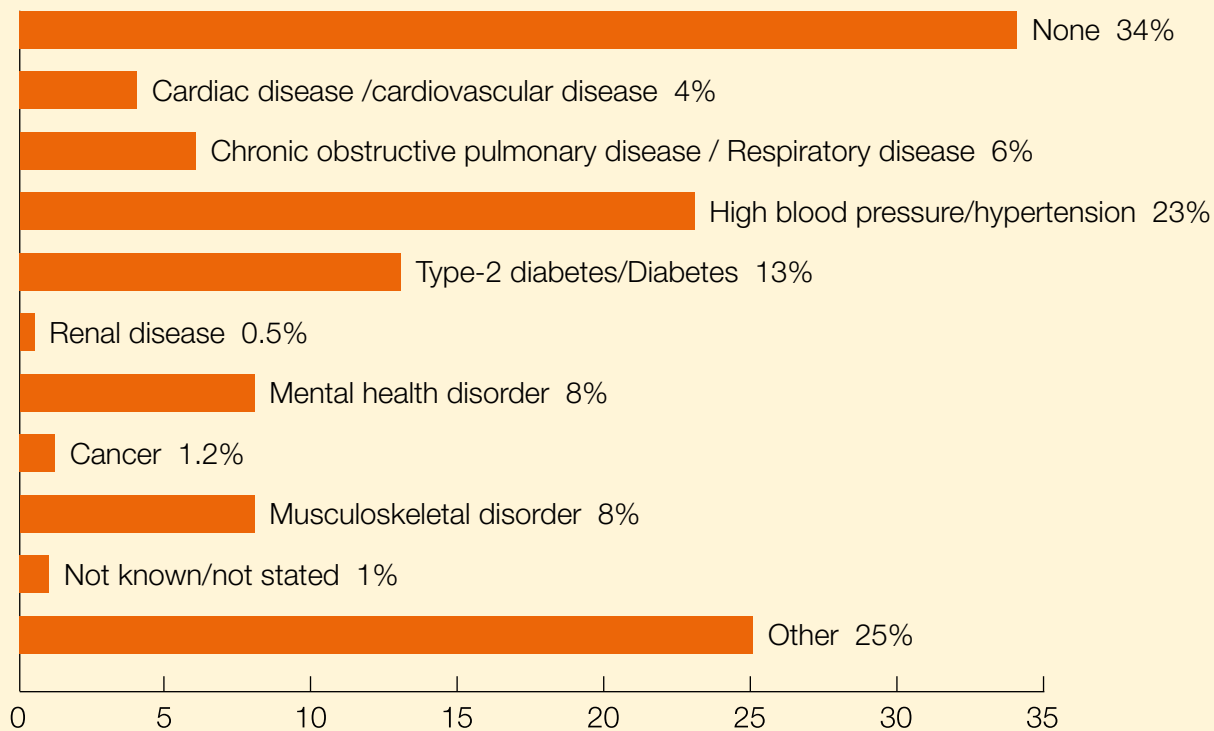
to receive referrals for participants who were suffering with mental health problems. In April 2021 co-morbidity information collected was expanded to meet the requirements of reporting for the Government Grant, this showed that from this time until Dec 2021, just under 9% of those referred were suffering with mental ill health, almost 1 in 10.

Although referral numbers were lower than pre-pandemic and despite the changes in delivery of the programme (due to Covid-19) that the providers had to continually adapt to, weight loss outcomes remained strong. 63% of those completing the 12 week programme achieved 5% weight loss which exceeds the modelled 30%. 61% of those completing and losing 5%, sustained their weight loss at 24 weeks, again still higher than the modelled 50%. This demonstrates that for those who did participate, the support was still highly effective.

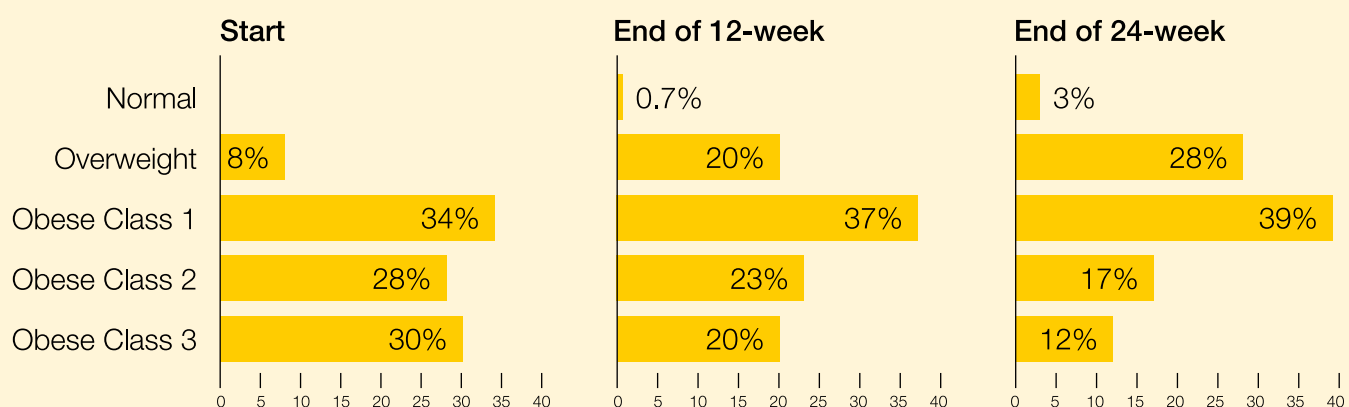
## Population accessing the service in 2021



## Co-morbidities



## BMI Classification



## Satisfaction rate



In 2021 there was a slightly more even spread across the ages of participants accessing the service compared to previous years. 18.3% of participants were 18-34 in 2021 compared to 15.9% in 2020 and 15% in 2019.

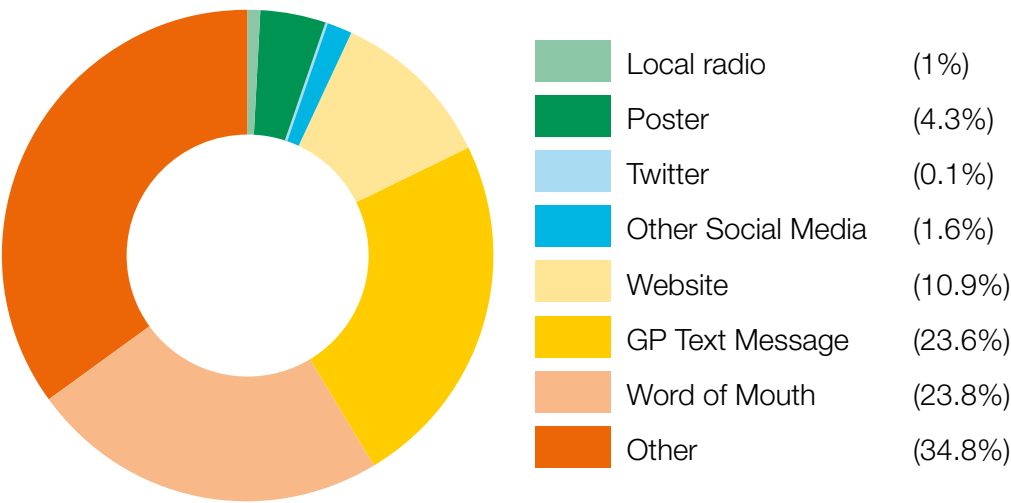
In May 2021 the co-morbidities categories recorded were expanded to meet the requirements of data collection for the Government Grant received in April 2021. The Providers were consulted to establish which of the categories they came across most often. The percentages displayed are an amalgamation of the former and new categories, please note that some participants have more than one co-morbidity. In general, this years' data shows a lower number of participants with no co-morbidities (34% in 2021 compared to 48.2% in 2020 and 50% in 2019). It shows a slightly higher percentage have diabetes and hypertension; and for the first time (as discussed earlier) shows the number living with mental ill health.

In terms of BMI, the main difference in 2021, as discussed earlier in the report, is the rise in the percentage of those joining the service with a BMI over 40 – 30% in 2021 compared to 16% in 2020 and 2019.

### Where did you hear about us?

In May 2021 a question was added in addition to Referral Source to establish where the participants found out about the service. This was prompted by the Spring 2021 Communications campaign (detailed in the report), which used a number of different media channels – radio, social media etc. to promote the service. Referral *source* remained similar to previous years, with GP and Self-referral still the largest proportions.

### Analysis of where you hear about the service



## 7. Covid-19 2021: provider experience

The national lockdown at the start of 2021 saw the Providers revert again to a full virtual offer. Leisure facilities began to open up in April 2021 however capacity was still restricted and in community settings, social distancing and face coverings were still in place. From May 2021, Providers gradually re-introduced face to face sessions for those who preferred it, by the end of the year most were offering a choice of either remote or face to face groups, with the exception of Selby who, after re-mobilising their service in August 2021, offered face to face only.

Many participants were still apprehensive about face to face and balancing the service offer to suit all and adapting to changing restrictions, whilst growing referral numbers and supporting those who needed some additional 1:1 support, was challenging for the Providers. Their hard work is evident in the referral numbers which began increasing slowly again from May 2021 and weight loss outcomes achieved were similar to previous years.

Despite the challenges of 2020 and (particularly the first half) of 2021, the Providers have identified many positives of the adaptations they were forced to make.

***“The “Hybrid” delivery model proved to be effective. Using a combination of online/remote support and face to face sessions, not only were we able to maintain the quality of support, feedback suggest that it enhanced the service.”***

***“We now have an established social media page, we have optional WhatsApp groups for peer support, we have a bank of online workouts that clients can access, and we have the procedures in place if/when the need for online programme.”***

***“We are much more accessible now with our hybrid service so more clients can attend a variety of classes. The virtual classes will now be a permanent feature of our offer meaning that we can offer more classes than ever before with the same amount of staff.”***

Through the ‘keep in touch’ calls during lockdowns, Providers recognised their role in supporting participants’ mental health and well-being as well as weight management. Providers have now trained more support staff in mental health first aid.

***“We are now far more aware of the challenges faced by clients AND the team in relation to personal circumstances, MH issues etc.”***



## 8. Government Grant - Adult Weight Management Services

In April 2021 North Yorkshire County Council Public Health received a one-off Government Grant of £180,601 for the financial year 2021/22. This was to expand and develop Adult Weight Management services and was part of a £70 million Government investment in adult weight management following the Obesity Strategy in 2020, of which £30.5 million was offered to local authorities, the allocation being dependent on population size, obesity prevalence and deprivation level.

For North Yorkshire this was a fantastic opportunity to test out new ways of working, offer targeted support and address inequalities. Public health proposed to use the funds for 3 interventions:

1. To offer additional 1:1 support to participants whose lives have been affected by the pandemic or are facing other barriers to completion. These sessions would allow more individualised behaviour change strategies to recognise more challenging circumstances.
  - An allocation of funding for additional 1:1 support was calculated and offered to ALL providers, based on expected number of referrals plus a sum for training and set-up. They began offering this additional support from June 2021.
2. To address health inequalities, provide community outreach or bespoke programmes for specific target groups, for example those living with learning disabilities, ethnic minority communities and those living with mental health problems.
3. To provide community outreach/bespoke programmes for specific target groups that historically have engaged less with the Adult Weight Management Service – men and younger adults aged 18-24.
  - For the above two interventions, Providers were invited to express interest in delivering an intervention for specific target groups and were awarded a sum to develop and deliver these.

### Bespoke programmes

Following expressions of interest, Providers were awarded grants to offer programmes for the following target groups:

- People Living with Learning Disabilities - x2 Scarborough; x1 Ryedale; x1 Harrogate
- Ethnic minority communities- x1 Craven
- Men - x1 Harrogate
- 18-24yr olds - x1 Craven
- Older people - x1 Harrogate; x1 Hambleton
- People living with mental illness - x1 Hambleton
- People living with long term conditions - x1 Hambleton

These took variable amounts of time to develop and set up, the Providers took time to ensure they were adapted to the needs of the target groups. The first started in November 2021. The next annual report will cover the evaluation of the interventions funded by the Government Grant funding.

**LOOKING FOR HELP TO LOSE WEIGHT?**

**FREE 12 WEEK WEIGHT MANAGEMENT PROGRAMME**

**Do you have a BMI of 25+ AND are in a black or minority ethnic group?**

**HEALTHY LIFESTYLES**

Our **FREE** programme will **motivate** and **support** you to achieve a healthy weight, eat more healthily and increase your physical activity.

**Tuesday 1.30-2.45pm**  
Broughton Road Community Centre

HEALTHY COOKING WORKSHOPS | LADIES ONLY | NUTRITIONAL ADVICE | EXERCISE | WEEKLY FREE SWIM | WEIGHT MANAGEMENT

To sign up or for more information go to our website:  
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**A BETTER YOU IN 2022! CRAVEN LEISURE**  
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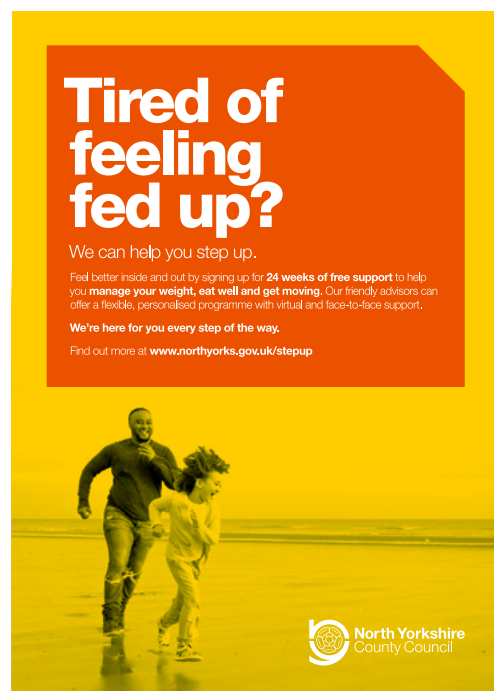


## 9. Communications - campaign 2021

### and pathway development

A significant communications campaign was planned and launched in May 2021 to aid the recovery of the Adult Weight Management service. The Public Health team worked with NYCC Communications team who developed a communications strategy and assets focussing on the role the service has in not only supporting people to lose weight but also how it impacts on other aspects of their well-being.

- Participants stories were put together in a powerful video which can be accessed via the website **Adult Weight Management - YouTube**. Individual video stories were also used on social media. The 'library' of video stories has since been further added to as new case studies have come forward.
- A new, more catchy url was created for the service webpage **[www.northyorks.gov.uk/stepup](http://www.northyorks.gov.uk/stepup)**.
- Social media and poster assets were created for use by both NYCC and the Provider's marketing teams – they could be adapted with specific service logos and details.
- Radio adverts were scheduled, featuring participant stories.
- The Communications team supported Providers to put together text about the service to share with their local GP surgeries so they could send SMS texts to potentially eligible participants.



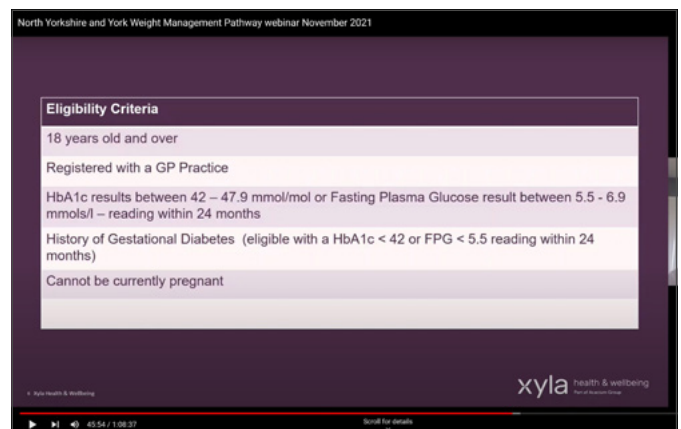
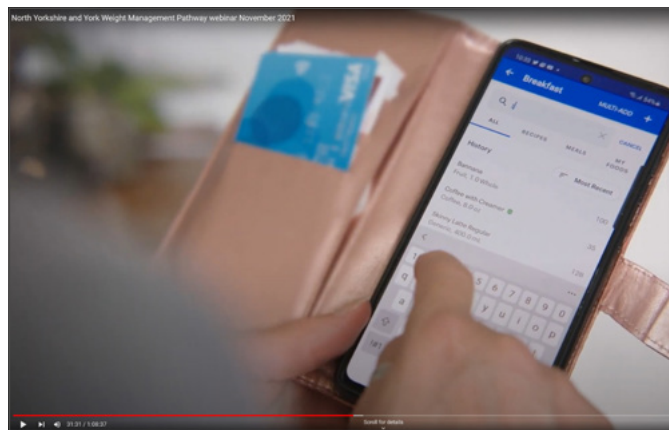
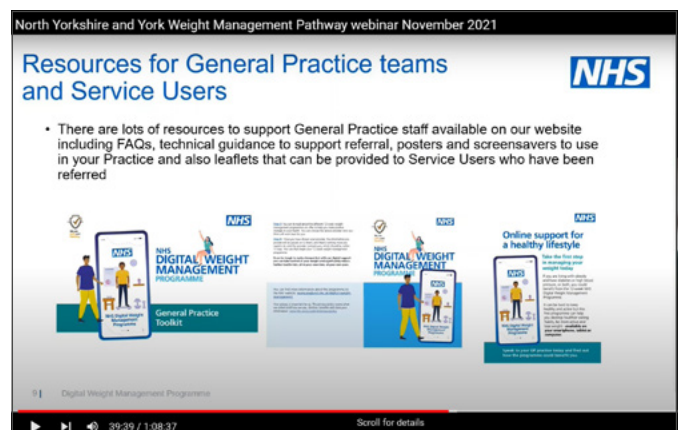


## Pathway development

To strengthen the Adult Weight Management pathway in Primary Care and raise the profile of the service, in 2021 the Public Health team worked with Primary Care colleagues and service managers to create a 'Pathway on a Page' for North Yorkshire CCG and Vale of Yorks CCG (N Yorks areas). A webinar which covered Adult Weight Management Pathways in all three of the CCG areas covering North Yorkshire was also created. This includes details of the identification and assessment of obesity, managing the conversation about weight with patients; and referral pathways into all four Tiers of weight management.

The webinar was shared widely within Primary Care and can be found here: [https://youtu.be/lcnb7\\_\\_09s8](https://youtu.be/lcnb7__09s8)

### North Yorkshire Adult Weight Management Service pathway - Vale of York CCG coverage



## 10. Case Studies and testimonials

### Case studies (not real names)

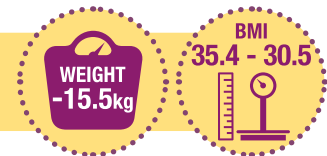
#### 1. Geoff

Geoff joined the virtual programme in 2021, he had been shielding throughout 2020 due to an underlying health condition and had picked up a knee injury which restricted his ability to walk without pain. His goal was to lose 10% of his starting weight in order to get a referral for surgery. Alongside a 5:2 diet, with the support of the programme Geoff made changes to his activity levels and alcohol consumption.



##### Body measurement changes

Geoff lost 15.5kg and reduced his BMI from 35.4 to 30.5



##### Changes and Impact

- Reduced alcohol intake
- Cut out chocolate
- Exercising regularly at home on an exercise bike



**Geoff says:** “I have seen some benefits having reached 110kg as it is noticeable that I do not get out of breath when exercising or climbing stairs. I will carry on now with the incentive of having treatment on my knee and then set myself a new target.”



#### 2. Martin

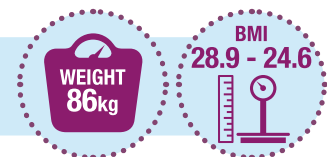
Martin was referred by the dietician at Whitby Hospital due to him having Type 2 Diabetes. He is a carer for his wife who he feels he is unable to leave. He doesn't sleep very well and is worried about his wife. He eats a lots of snacks, especially biscuits.

He joined the virtual programme so he did not have to leave his wife, he enjoyed the company of the online group and found the ideas for exercising at home helpful.



##### Body measurement changes

Weight reduced from 101kg to 86kg. BMI reduced from 28.9 to 24.6



##### Changes and Impact

- Martin no longer buys biscuits, he used to have a packet a day
- He is drinking more water, is eating more fruit and veg; and more lean meat and fish.
- He can now walk round the block without getting out of breath



**Martin's advisor says:** “Martin and his wife have found the confidence for him to be able to leave her for very short periods and get outside for short walks, which he enjoys. He is very pleased with his HBA1c as he wants to remain well so he can care for his wife as well as he can.”



### 3. Greg

Greg joined the virtual programme during lockdown. Although he walked a lot as part of his job and occasionally cycled, he felt his general health was deteriorating - had trouble sleeping, suffered with IBS and headaches. He took medication for high blood pressure and his GP advised him to seek support from the programme.

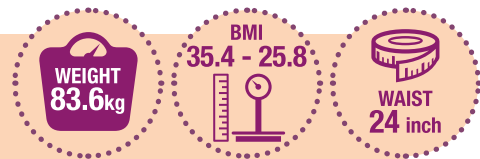


#### Body measurement changes

Weight reduced from 114kg to 83.6kg at 24 weeks.

BMI reduced from 35.4 to 25.8 at 24 weeks.

Changed from 42inch waist trousers to 24 inch waist trousers!



#### Changes and impact

- Greg's Advisor sparked an interest in food, he read further into nutrition and the impact on health and well-being. Understanding the hidden sugar and salt in food was a real eye-opener for Greg, he learnt that food is fuel.
- He began to cycle regularly 30km per week and exercise more frequently.
- He set himself realistic goals to achieve at different stages.
- He planned meals so he knew what he was taking into work rather than buying something.
- By week 8 his sleep improved, he felt full of energy and reduced the dosage of his medication.



**Greg says:** *"It was hard work but once I felt the benefits and compliments from others; made me want to continue and my confidence grow too....your mind needs to be ready for change, the programme came at the right time for me, I was emotionally eating due to lockdown, I wasn't getting out much, I was baking and eating much more."*



#### 4. Mary

Mary was recommended the programme by her nurse at a routine health check. Mary was borderline diabetic, she knew she was overweight and wanted to improve general health and well-being. She enjoyed walking but at 71 she wanted to learn more and improve habits.



##### Body measurement changes

Weight reduced from 78kg to 73kg at 24 weeks



##### Changes and impact

- Mary learned how to analyse food labels confidently using the traffic light system when buying and cooking with. She discovered about the hidden salt and sugars in different products.
- She set small, achievable goals each week that motivated her to progress, she increased her walking and enjoyed the online exercise classes.
- Mary increased her walking to 15,000 steps 3 times a week plus 4/5 home workouts.
- She sustained her good eating habits and was thrilled to lose just under a stone.



**Mary says:** "...it's a great opportunity, the groups are encouraging, supportive and non-judgemental, I just want to get the word out there and promote it, as it has been fantastic for me. My blood sugars are now 'normal' I have so much energy and feel really happy and positive. A big thank you to Hannah my advisor for being so encouraging and informative and having such a lovely manner that kept me motivated."



## Testimonials

“

*I would like to say that without you and the wonderful support you have given me, the outcome of the last few weeks could have been so very different. Without the extraordinary weight loss I have achieved, I might not have survived... I have had my blood sugar tested and whilst I am still a Type II Diabetic, my result has gone down 3 categories into the normal non-diabetic range. Thank you for all your help and support over the last 6 months, it has been very much appreciated and still is.”*

“

*The H L V Programme has been invaluable to keeping me on track for keeping fit and losing weight in an acceptable way, and I very soon realized that just dieting or choosing certain food types on their own was not enough to losing weight, and that regular exercise was crucial!*

*The group programme has been a good basis to work from and help keep me on track and I am, and have endorsed it to my family and friends.*

*Once again for all your help and support at Craven Leisure!”*

“

*I have found your “Healthy Lifestyle” weight management programme to be inspirational in my bid to lose weight.”*

“

*Rebecca is an exceptional tutor who makes exercise fun. I feel sure that without her encouragement and sound dietary advice I would not have achieved my target weight.”*

“

*The virtual online and WhatsApp classes work well and I intend to continue to lose weight and reach my next target.*

*Thankyou.”*

“

*May I take this opportunity to express my thanks to you for your understanding and support throughout the course.*

*I have found the process thoroughly engaging and your delivery quite inspiring.*

*The knowledge I have garnered will hopefully assist me, as I continue to monitor my eating and weight.*

*Thanks again.”*

“

*Helen I genuinely appreciate you. You’ve been an incredible support. It’s the first time in 14 years I’ve lost so much – that’s down to you!”*

## 11. Contact details

### Provider contact details

#### **Craven - 'Healthy Lifestyles'**

Telephone: 01756 706282

Email: [healthylifestyles@cravendc.gov.uk](mailto:healthylifestyles@cravendc.gov.uk)

Craven District Council: [FREE Adult weight management \(cravendc.gov.uk\)](https://www.cravendc.gov.uk)

#### **Hambleton - 'Take That Step'**

Telephone: 01609 767241

Email: [takethatstepteam@hambleton.gov.uk](mailto:takethatstepteam@hambleton.gov.uk)

[Take that step – Zest \(hambleton.gov.uk\)](https://www.hambleton.gov.uk)

#### **Harrogate - 'Fit 4 Life'**

Telephone: 01423 556106

Email: [active.health@brimhamsactive.co.uk](mailto:active.health@brimhamsactive.co.uk)

[Fit4Life project – Brimhams Active](https://www.brimhamsactive.co.uk)

#### **Richmondshire - 'Choose to Lose'**

Telephone: 01748 901049

Email: [choosetolose@richmondshire.gov.uk](mailto:choosetolose@richmondshire.gov.uk)

[Choose to Lose adult weight management programme \(richmondshire.gov.uk\)](https://www.richmondshire.gov.uk)

#### **Ryedale and Scarborough - 'NHS Weight Management Service'**

Telephone: 0800 917 7752 or text 'Healthy' to 60163

Email: [hnf-tr.weightmanagement@nhs.net](mailto:hnf-tr.weightmanagement@nhs.net)

[nhs-health-trainers.co.uk/our-services/adult-weight-management/scarborough-whitby/](https://nhs.uk/health-trainers/co.uk/our-services/adult-weight-management/scarborough-whitby/)

#### **Selby - 'Move It, Lose It'**

Telephone: 01757 213758

Email: [wellbeingselby@ihlmail.org](mailto:wellbeingselby@ihlmail.org)

[Move It and Lose It \(inspiringhealthylifestyles.org\)](https://inspiringhealthylifestyles.org)



## **Public health contact details**

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Richmondshire District Council  
Humber Teaching NHS Foundation Trust  
Inspiring Healthy Lifestyles  
NHS Bradford Districts and Craven CCG  
North Yorkshire CCG  
Vale of York CCG

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## 13. Appendix - Public Health Outcomes Framework -

### Trends in excess weight in adults 2015-2021

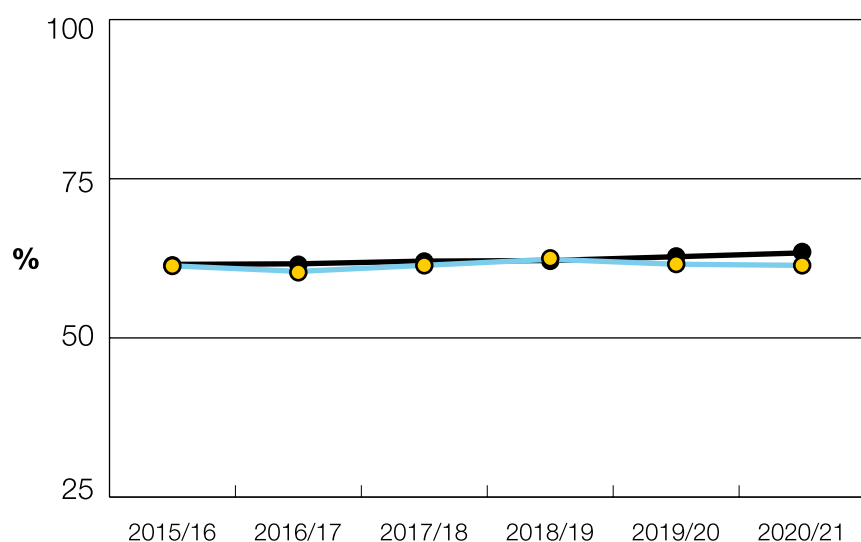
Source: <https://fingertips.phe.org.uk/profile/public-health-outcomes-framework>

Office for Health Improvement and Disparities Fingertips Public Health Data

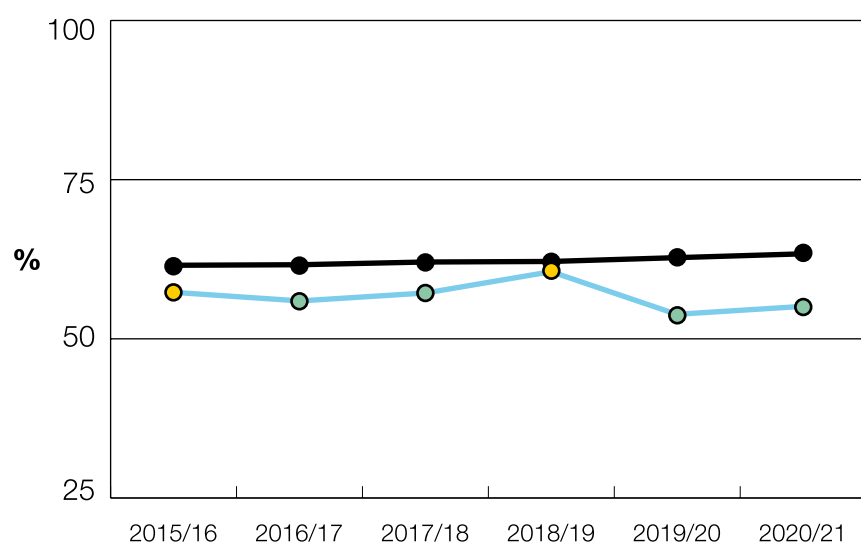
#### Key

- Statistically significantly worse than the England average
- Statistically similar to the England average
- Statistically significantly better than the England average
- England

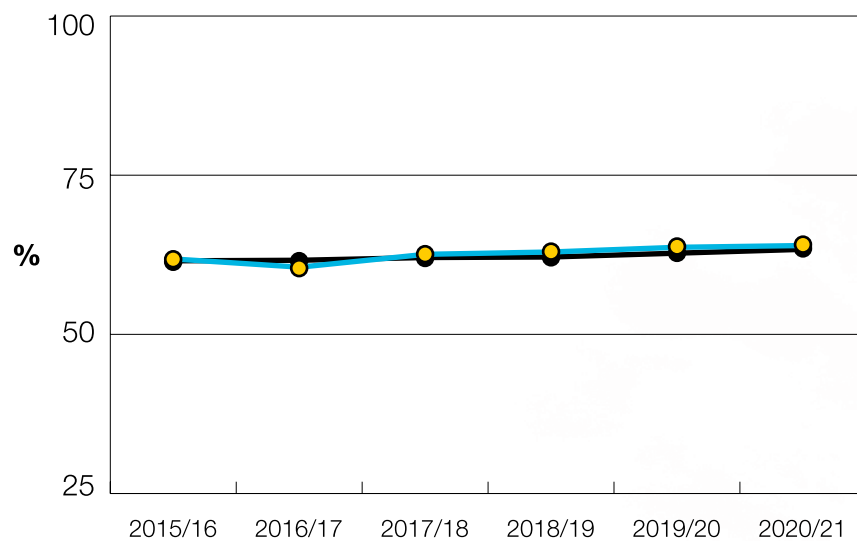
#### North Yorkshire



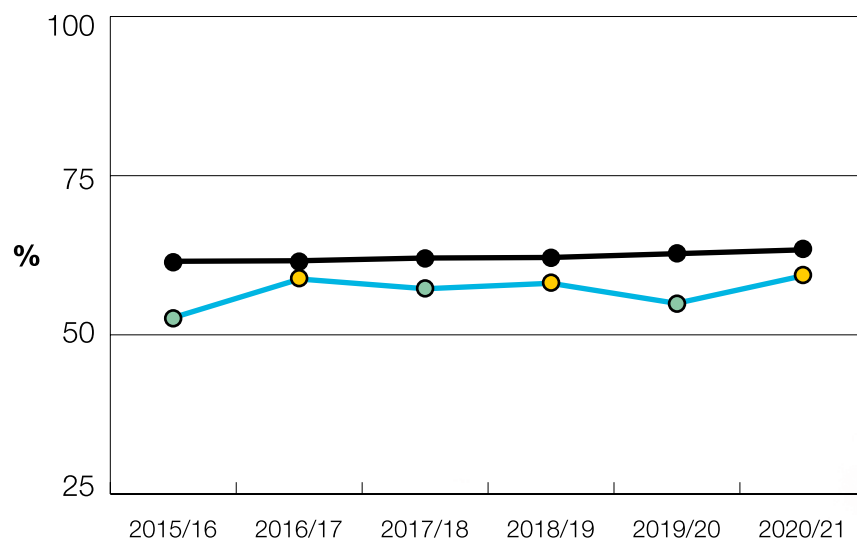
#### Craven



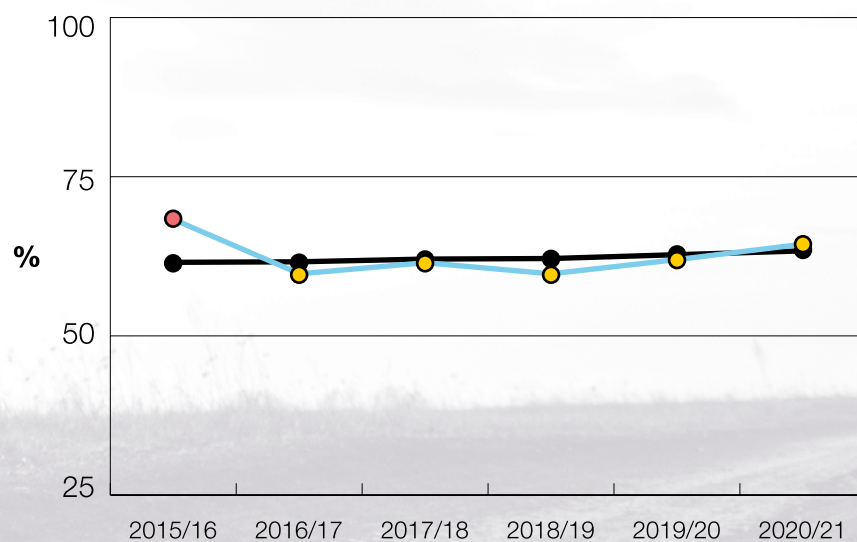
## Hambleton



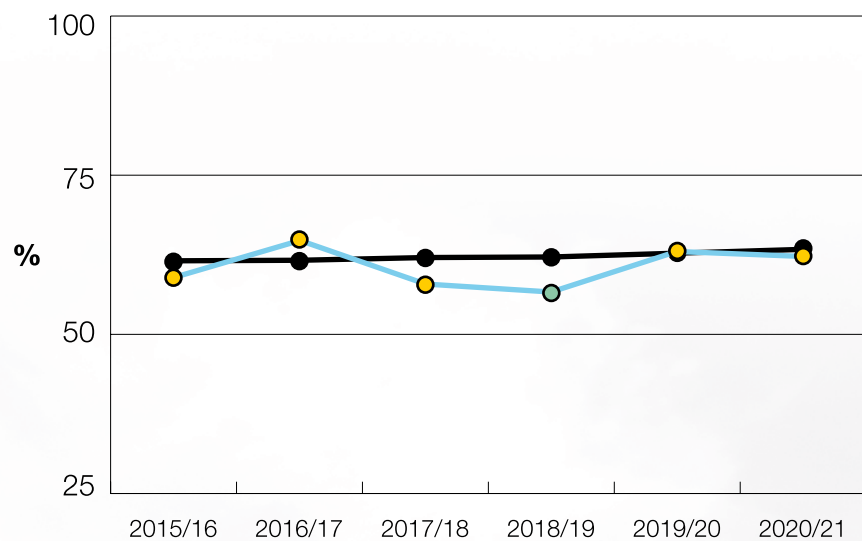
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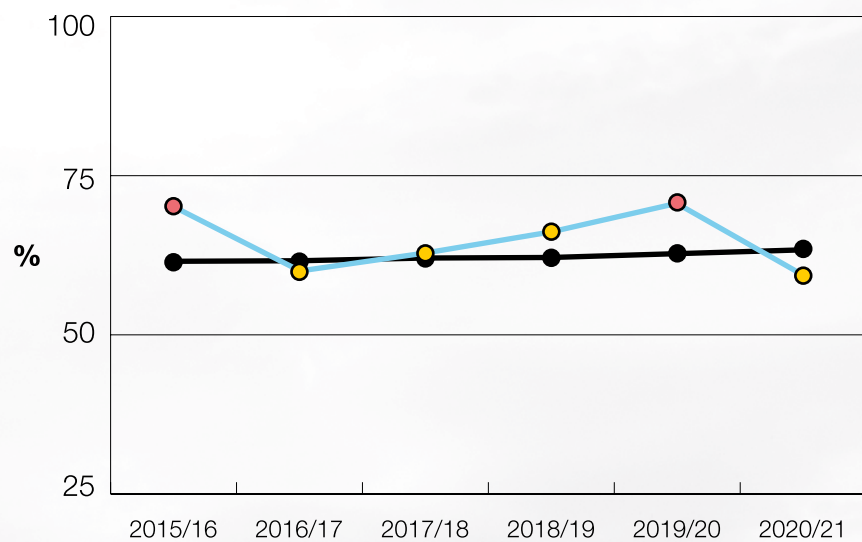
## Richmondshire



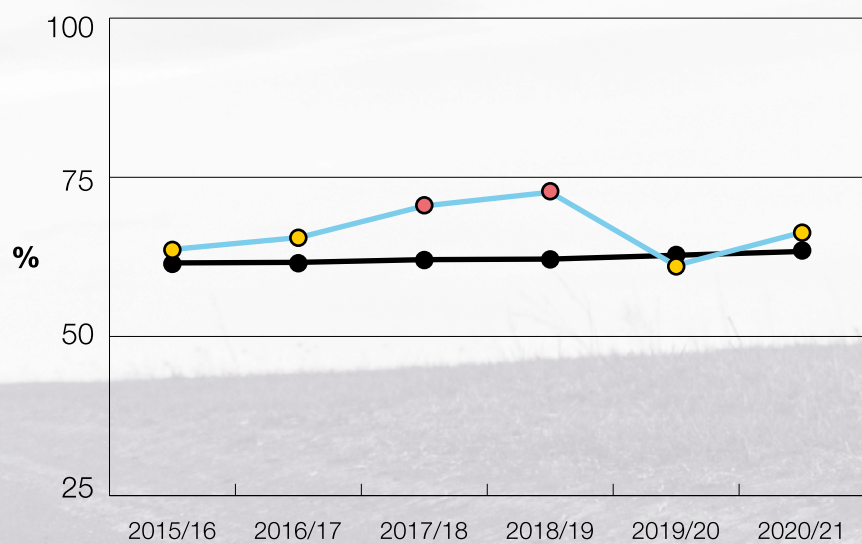
## Ryedale



## Scarborough



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