



2017 ASO Best Practice Award

Janet Biglari and Sevim Mustafa are the founders and Directors of the Bariatric Consultancy a specialist weight management company. They are both psychotherapists who have worked for many years in adult mental health services. Having developed a specialist interest and research into the link between obesity and poor mental health they commenced the development of a multi disciplinary programme to support morbidly obese patients in making psychological and lifestyle changes to lose weight. The aim was also to educate individuals who were requesting bariatric surgery in order to achieve the best outcomes. In 2008, Eastern Coastal Kent Primary Care Trust commissioned the Consultancy to design and deliver a one-year pilot specialist obesity service for 120 patients. This early model laid the foundations for the development of a structured multi-disciplinary Tier 3 model that would be delivered in the community as part of an integrated obesity pathway.

The Bariatric Consultancy providing 4 healthy weight and why weight programmes

The development of this service model is in response to the significant body of literature establishing the correlation between obesity and poor psychological health. We have set out to develop a treatment model that is psychologically led and responds to the often complex mental health of individuals presenting with morbid obesity.

Introduction

Since 2008, The Bariatric Consultancy (TBC) has pioneered the development of psychologically led Tier 3 specialist weight management services. We have designed and delivered seven services across the south of England. We currently run four services across Crawley, Horsham and Mid Sussex, High Weald, Havens & Lewes, East, West and North Kent and the London Borough of Greenwich. Each of our services is designed to deliver treatment up to 500 patients per year, entering on either a non-surgical preventative pathway or a surgical preparation pathway the pathway is for either 12 or 24 months. In 2016, we implemented care packages for 1500 patients across all contracts.

Methodology

The service model offers multi disciplinary treatment including medical, dietetic, physical activity and psychological therapy. Treatment is in three stages, assessment, intensive twelve-week treatment and maintenance, which includes preparation for tier 4 if appropriate.

Conclusion

Our research has shown that patients who comply with the programme can lose between 5-10%+ of their excess weight. In one sample of 465 patients who entered the service between 2015-16, 376 achieved weight loss at the point of discharge. Of this same sample 377 showed an improvement in their self-esteem.

Since implementing these services we have seen a significant impact on the numbers of patients proceeding onto surgery. In 2015-16 out of 1430 patients entering treatment 248 went onto have weight loss surgery. The savings to the commissioners are highly significant.

TBC have developed all aspects of the programme including the clinical material and all administrative processes. We have developed a unique protocol for designing and mobilising a service. We have been able to adapt our model to integrate with the needs of diverse and complex communities taking into account specific cultural and socio economic requirements, which have created challenges in service design and delivery.

Our services are funded by Clinical Commissioning Groups (CCGs) and are activity based.