

Protecting and improving the nation's health

Adult behavioural (Tier 2) weight management services commissioned by local authorities: Minimum dataset technical guidance for submitting organisations

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## Introduction

In March 2021 the government announced a commitment to support people living with obesity to lose weight, with an investment in 2021/22 of over £70 million in weight management services to be made available through local authorities and the NHS. The aim, as part of a place based whole systems approach to obesity and promoting healthier weight, is to enable adults to have access to services and support to help them to lose weight and maintain a healthier weight.

In order to understand the impact of this investment, any local authority in receipt of this grant funding to establish new services or expand their Tier 2 weight management services must ensure all commissioned providers collect data on all participants and their progress and return a minimum dataset to Public Health England (PHE). This is a condition of the grant.

It is anticipated that more data items will be collected locally to facilitate a robust process and impact evaluation of the service, which is critical for local service monitoring and development. It is important that these additional local data collections also meet national standards, to ensure that weight management service data is collected consistently between services and aligns with other health and care datasets. Separate guidance on the data required to facilitate a comprehensive local level evaluation will be provided in an updated version of the standard evaluation framework and supporting data collection tool.

Links: PHE (2018) Standard evaluation framework for weight management interventions; Available here: https://www.gov.uk/government/publications/weight-management-interventions-standard-evaluation-framework

PHE (2017) Capturing data: a tool to collect and record adult weight management service data Available here: https://www.gov.uk/government/publications/adult-weight-management-services-collect-and-record-data

This technical guidance and supporting submission spreadsheet describe the data items required by PHE. This document explains the process for completion and submission of the dataset using the spreadsheet provided.

## Data items for national submission

Data submission to PHE will be monthly in arrears for completed activity in the month from providers of Tier 2 weight management services, and will be divided into four separate 'time points':

- at referral into the programme
- at week zero, as participants start the programme,

- at completion of the programme in week 12, and
- a follow-up at week 26.

Depending upon the number of service cohorts operating during the period of time, that may mean that for some months, some or all of these time points will be nil returns: for example, the first return will not contain completion or week 26 information.

The collection requires exactly one row of data for each participant at referral and week zero, and then in time, a row at week 12 and a row at week 26. A unique (to the local provider) client identifier must be supplied for each row at referral and in week zero and may be used to link participants over time to assess levels of follow up in weeks 12 and 26.

# Organisation and referral

#### Commissioner code

Data format and length: an9

Collection time points: Referral only

Restrictions: Latest county or local authority (for unitary authorities) code

Purpose(s): Present measures at commissioner level

#### Referral source

Data format and length: a1

Collection time points: Referral only

Restrictions:

Code	Text
1	GP
2	Other health care professional
3	Non-health professional
4	Self-referral
X	Not known/not recorded

Purpose(s): Analysis on referral patterns to weight management services

#### Date of referral receipt

Data format and length: an10 CCYY-MM-DD

Collection time points: Referral only

Purpose(s): Analysis on time from referral to enrolment

## Participant details

Services should use a participant number (which should uniquely identify the individual to the service but should not incorporate any personal or sensitive information) at each point to identify the individual as they move through the different time points. Other participant information may be collected at referral or at week zero. There is no need to duplicate data collection or recording into the accompanying spreadsheet: if a specific item has been collected at referral, please leave it blank in week zero, unless you wish to update it.

#### Participant Number

Data format and length: maximum an255

Collection time points: All

Restrictions: This must uniquely identify the participant within the provider but must **not** constitute personal information. For example, surname would be classified as personal information. The participant number should be assigned at referral and then used to identify the same individual at all other collection time points.

Purpose(s): Link participants between contacts

#### Consent for data sharing

Data format and length: a1

Collection time points: As required

Restrictions: to record whether the participant has consented to their data being shared

with PHE.

Code	Text	
Υ	Yes	
N	No	

Purpose(s): Ensure compliance with participant requirements

#### Age in years

Data format and length: maximum an3 Collection time points: Referral or week 0.

Restrictions: Derived from date of birth (not part of this minimum dataset) and date of

referral

Purpose(s): Establish whether any services are more effective for specific age groups

#### Lower Layer Super Output Area of residence

Data format and length: maximum an10 Collection time points: Referral or week 0.

Restrictions: Derived from postcode of residence (not part of this minimum dataset) using Office for National Statistics National Statistics Postcode Lookup (NSPL): https://www.ons.gov.uk/methodology/geography/geographicalproducts/postcodeproduct s. A complete list of Lower Layer Super Output Areas is available here:

https://geoportal.statistics.gov.uk/datasets/lower-layer-super-output-areas-december-2011-names-and-codes-in-england-and-wales

Purpose(s): Ensure PHE can monitor equality of access

#### Gender

Data format and length: an1

Collection time points: Referral or week 0.

#### Restrictions:

Code	Text
1	Male
2	Female
9	Intermediate*
Z	Not stated
Χ	Not known/not
	recorded

Purpose(s): Establish whether any services are more effective for specific genders

#### Gender Identity Same at Birth

Data format and length: a1

Collection time points: Referral or week 0.

#### Restrictions:

Code	Text
Υ	Yes
N	No
Z	Not stated
X	Not known/not recorded

Purpose(s): Ensure PHE can monitor equality of access

<sup>\*</sup>Indeterminate means "unable to be classified as either male or female" - this may also be known as intersex.

## **Ethnicity**

Data format and length: maximum an2 Collection time points: Referral or week 0.

Restrictions:

Code	Text
Α	White: English/Welsh/Scottish/Northern Irish/British
В	White: Irish
Т	White: Gypsy or Irish Traveller
С	White: Other White
D	Mixed/multiple ethnic group: White and Black Caribbean
Е	Mixed/multiple ethnic group: White and Black African
F	Mixed/multiple ethnic group: White and Asian
G	Mixed/multiple ethnic group: Other mixed
Н	Asian/Asian British: Indian
J	Asian/Asian British: Pakistani
K	Asian/Asian British: Bangladeshi
R	Asian/Asian British: Chinese
L	Asian/Asian British: Other Asian
N	Black/African/Caribbean/Black British: African
М	Black/African/Caribbean/Black British: Caribbean
Р	Black/African/Caribbean/Black British: Other Black
W	Other ethnic group: Arab
S	Other ethnic group: Any other ethnic group
Z	Not stated
99	Not known/not recorded

Purpose(s): Ensure PHE can monitor equality of access

## Religion

Data format and length: a1

Collection time points: Referral or week 0.

Code	Text
Α	Baha'i
В	Buddhist
С	Christian
D	Hindu
E	Jain
F	Jewish
G	Muslim
Н	Pagan

1	Sikh
J	Zoroastrian
K	Other
L	None
M	Not stated
N	Not known/not recorded

Purpose(s): Ensure PHE can monitor equality of access

#### **Employment Status**

Data format and length: an2

Collection time points: Referral or week 0.

Restrictions:

Code	Text
01	Employed
02	Unemployed and Seeking Work
03	Students who are undertaking full (at least 16 hours per
	week) or part-time (less than 16 hours per week)
	education or training and who are not working or
	actively seeking work
04	Long-term sick or disabled, those who are receiving
	Incapacity Benefit, Income Support or both; or
	Employment and Support allowance
05	Homemaker looking after the family or home and who
	are not working or actively seeking work
06	Not receiving benefits and who are not working or
	actively seeking work
07	Unpaid voluntary work who are not working or actively
	seeking work
08	Retired
ZZ	Not Stated (Person asked but declined to provide a
	response)

Purpose(s): Ensure PHE can monitor equality of access

#### Sexual orientation

Data format and length: an1

Collection time points: Referral or week 0.

Code	Text
1	Heterosexual or Straight
2	Gay or Lesbian
3	Bisexual

4	Other not listed
U	Person does not know/not sure
Z	Not stated
Χ	Not known/not recorded

Purpose(s): Ensure PHE can monitor equality of access

#### **Currently pregnant**

Data format and length: a1 Collection time points: All

Restrictions:

Code	Text
Υ	Yes
N	No

Purpose(s): Ensure that pregnant women can be excluded from any analysis on weight loss

#### Participant stated disability (up to 6 can be entered)

Data format and length: maximum an2 Collection time points: Referral or week 0.

Code	Text	Comments
1	Behaviour and	Should be used where the participant has times
	Emotional	when they lack control over their feelings or actions.
2	Hearing	Should be used where the participant has
		difficulty hearing, or need hearing aids, or need
		to lip-read what people say.
3	Manual and	Should be used where the participant
	Dexterity	experiences difficulty performing tasks with
		their hands.
4	Memory or	Should be used where the participant has
	ability to	difficulty with memory or ability to concentrate,
	concentrate,	learn or understand which began before the
	learn or	age of 18.
	understand	
	(Learning	
	Disability)	
5	Mobility and	Should be used where the participant has
	Gross Motor	difficulty getting around physically without
		assistance or needs aids like wheelchairs or
		walking frames; or where the participant has

		difficulty controlling how their arms, legs or
_		head movement
6	Perception of	Should be used where the participant has
	Physical	difficulty understanding that some things,
	Danger	places or situations can be dangerous and
		could lead to a risk of injury or harm.
7	Personal, Self-	Should be used where the participant has
	Care and	difficulty keeping clean and dressing the way
	Continence	they would like to.
8	Progressive	Should be used where the participant has any
	Conditions and	illness which affects what they can do, or which
	Physical Health	is making them more ill, which is getting worse,
		and which is going to continue getting worse
		(such as HIV, cancer, multiple sclerosis and
		fits).
9	Sight	Should be used where the participant has
		difficulty seeing signs or things printed on paper
		or seeing things at a distance.
10	Speech	Should be used where the participant has
		difficulty speaking or using language to
		communicate or make their needs known.
XX	Other	Should be used where the participant has any
		other important health issue including dementia
		or autism.
NN	No disability	
ZZ	Not stated	
X	Not known/not	Default value
	recorded	

Purpose(s): Ensure PHE can monitor equality of access

#### Participant on Severe Mental Illness register

Data format and length: a1

Collection time points: Referral or week 0.

Restrictions:

Code	Text
Υ	Yes
N	No
Χ	Not known/not recorded

Purpose(s): Establish whether any services are more effective for people living with severe mental illness (SMI). As a group, people with mental illnesses experience health inequalities in relation to obesity and it is important to monitor and report on this. Ensure PHE can monitor equality of access

#### Participant on learning disabilities register

Data format and length: a1

Collection time points: Referral or week 0.

Restrictions:

Code	Text
Υ	Yes
N	No
Χ	Not known/not recorded

Purpose(s): Establish whether any services are more effective for people living with learning disabilities. As a group, people living with learning disabilities experience health inequalities in relation to obesity and it is important to monitor and report on this. Ensure PHE can monitor equality of access

#### Participant stated co-morbidities (up to 6 can be entered)

Please record any relevant co-morbidities.

Data format and length: an2

Collection time points: Referral or week 0.

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Code	Text
1	Hypertension
2	Cardiac disease
3	Renal disease
4	Mental health disorder
5	Thromboembolic disorder
6	Haematological disorder
7	Central nervous system disorder
8	Diabetes
9	Autoimmune disease
10	Cancer
12	Infectious Hepatitis A
13	Serum Hepatitis B
14	Hepatitis C
16	Endocrine disorder
17	Respiratory disease
18	Gastrointestinal disorder
19	Musculoskeletal disorder
20	Gynaecological problems
XX	Other
NN	None
ZZ	Not stated
X	Not known/not recorded

Purpose(s): Establish whether any services are more effective for people with specific co-morbidities

#### Measurements

#### Date of measurement

Data format and length: an10 CCYY-MM-DD Collection time points: Weeks 0, 12 and 26 Purpose(s): Calculation of relevant measures

#### Height in metres

Data format and length: an1.an2 Collection time points: Week 0

Purpose(s): Calculation of relevant measures

#### Height measured by professional (as opposed to self-measurement)

Data format and length: a1 Collection time points: Week 0

Restrictions:

Code	Text	
Υ	Yes	
N	No	

Purpose(s): Analysis of programme delivery methods

## Weight in kilograms

Data format and length: an3.an3

Collection time points: Weeks 0, 12 and 26 Purpose(s): Calculation of relevant measures

### Weight measured by professional (as opposed to self-measurement)

Data format and length: a1

Collection time points: Weeks 0, 12 and 26

Restrictions:

Code	Text	
Υ	Yes	
N	No	

Purpose(s): Analysis of programme delivery methods

#### Short Warwick-Edinburgh Mental Wellbeing Scale score (SWEMWBS)

Data format and length: n2

Collection time points: Weeks 0, 12 and 26
Restrictions: a whole number between 7 and 35
Purpose(s): Analysis of programme delivery methods

More information can be found at the Warwick University website: https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/

## Process for national submission

The associated minimum dataset reporting spreadsheet (excel file) for data submission can be used for data collection, or if a separate system is used, a report or export should be created to get the data into the right structure and format to paste into the reporting spreadsheet. Validation rules in the reporting spreadsheet enforce accurate data item formats, as well as pre-set or realistic values. Please note, only the details for participants who have consented to have their data shared with PHE should be included in this reporting spreadsheet.

The reporting spreadsheet must have data for at least one, and at most all four of the collection time points, relating to activity in the month: a sheet for referrals; one for week zero; week 12 and week 26. Once complete, the reporting spreadsheet must be returned to PHE. The details of the submission process will follow.

On receipt, PHE will confirm that the four time points are valid, loading those that are and rejecting or ignoring those that aren't.

Submission will be possible as soon as the month is complete for up to one month: during that period submitters can send the reporting spreadsheet as often as they wish. The system will overwrite the data each time, as long as the newer data is valid.

One month after the month end (at the end of the following month) no further submissions will be accepted.

## Relevant measures, for information only

The following section is for information only. Local authorities and service providers are not required to carry out any evaluation of these measures.

PHE will calculate and consider relevant service measures nationally, and at local authority commissioner and provider level. These will be shared with Department of Health and Social Care to help evaluate the expansion of weight management services.

- AWM1: Percentage of referrals which lead to enrolments
- AWM2: Percentage of participants who complete the active intervention
- AWM3: Percentage of individuals enrolled in the service from high risk groups
- AWM4: Percentage of participants who lose weight at the end of the active intervention
- AWM5: Percentage of participants who lose a minimum of 5% of their initial body weight, at the end of the active intervention.
- AWM6: Percentage of participants who maintain their lower weight

For each measure, inequalities will be considered (exact details depend on the detail and number of participants) for the following characteristics:

- Age at week zero
- Gender
- High risk groups
- Ethnic group
- Religion
- Employment status
- Sexual orientation
- Deprivation: national index of multiple deprivation (IMD) decile of area of residence
- Disability
- Mental illness: Severe Mental Illness (SMI) Register
- Co-morbidities
- BMI category at week zero

# AWM1: Percentage of referrals which lead to enrolments

This measure is defined as the proportion of those for whom a referral is received, who enrol on the intervention.

Denominator	Number of referrals received in the month prior to or during week 0
Numerator	Of the denominator, the number of individuals who enrolled on the programme with a valid weight recorded in week 0.
Method	Percentage

# AWM2: Percentage of participants who complete the active intervention

This measure is defined as the proportion of those enrolled on the intervention, for whom a weight was recorded in week 12.

Denominator	Number of participants in week 0 with a valid weight recorded
Numerator	Of the denominator, the number of participants who have a week 12 record, defined as a record where the date of assessment is within the 12th week, and who have a valid weight recorded in the 12th week.
Method	Percentage

# AWM3: Percentage of individuals enrolled in the service who are from high risk groups

This measure is defined as the proportion of those starting the intervention, whose details (as collected at week zero) include one or more of the following:

- Person lives in the nationally most deprived 20% of areas
- Person's ethnicity is Black, Asian or another minority ethnic group
- Person has self-reported mental illness
- Person has self-reported disability (including learning disability)

Denominator	Number of participants in week 0 with a valid weight recorded	
Numerator	Of the denominator, the number of participants who meet one of more of the following:  • Person lives in the nationally most deprived 20% of areas (based on lower super output area (LSOA) of residence)	

	<ul> <li>Person's ethnicity is Black, Asian or another minority ethnic group</li> <li>Person has self-reported mental illness</li> <li>Person has self-reported disability (including learning disability)</li> </ul>
Method	Percentage

# AWM4: Percentage of participants who lose weight at the end of the active intervention

This measure is defined as the proportion of those starting the intervention, whose weight is lower in week 12 than in week 0. This excludes pregnant women.

Denominator	Number of participants in week 0 with a valid weight recorded who are not pregnant.
Numerator	Of the denominator, the number of participants who have a week 12 record, defined as a record where the date of assessment is within the 12th week, and whose weight in kilograms to three decimal places is lower than their week zero weight.  12-week records showing the participant is pregnant will be excluded from both numerator and denominator.
Method	Percentage

# AWM5: Percentage of participants who lose a minimum of 5% of their initial body weight, at the end of the active intervention.

This measure is defined as the proportion of those starting the intervention, whose weight is at least 5% lower in week 12 than in week 0. This excludes pregnant women.

Denominator	Number of participants in week 0 with a valid weight recorded who are not pregnant.
Numerator	Of the denominator, the number of participants who have a week 12 record, defined as a record where the date of assessment is within the 12th week, and whose weight in kilograms to three decimal places is lower than or equal to 95% of their week zero weight.

	12-week records showing the participant is pregnant will be excluded from both numerator and denominator.
Method	Percentage

# AWM6: Percentage of participants who maintain their lower weight

This measure is defined as the proportion of those completing the intervention who have lost weight, whose weight is equal lower in week 26 than in week 12. This excludes pregnant women.

Denominator	Number of participants who lose weight at the end of the active intervention, who are not pregnant (see AWM4).
Numerator	Of the denominator, the number of participants who have a week 26 record, defined as a record where the date of assessment is within the 26th week, and whose weight in kilograms to three decimal places is lower than or equal to their week 12 weight.  26-week records showing the participant is pregnant will be excluded from both numerator and denominator.
Method	Percentage