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# Service Specification

## Tender for Adult Weight Management Service FY23/24

Bournemouth, Poole and Dorset councils  
working together to improve and protect health



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**Reference XXXXXXXX**

Dorset County Council, Dorset Procurement, Level 2, West Wing, County Hall, Colliton Park, Dorchester, Dorset, DT1 1XJ

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## 1. Introduction

1.1. This specification is for the Public Health Dorset (PHD) Tier 2 Adult Weight Management Service. The Service will be delivered via a framework agreement with a maximum of 3 Providers that meet the requirements outlined in this specification.

### 1.2. Aim of the Service

To support obese adults in Dorset, Bournemouth, Christchurch & Poole to lose, and maintain, 5% of their initial body weight and lead healthy lifestyles, either through face-to-face support or digital methods. This forms an integral part of the weight management pathway offered by LiveWell Dorset (LWD).

### 1.3. Objectives of the Service

- i. Provide high-quality, evidence-based weight loss support, free of charge to eligible clients who will be referred into the Service by LWD
- ii. Promote sustainable lifestyle changes by addressing eating and activity behaviours and offering follow-up support over the course of a year
- iii. Deliver the Service across the whole of Dorset's geographical area and contribute to minimising health inequalities by offering equitable access. This includes making services accessible to people from the most deprived communities in the county and those of all ages, genders and abilities
- iv. Provide timely and efficient reporting mechanisms to support the monitoring and evaluation of the service.

## 2. Scope and Nature of the Service

### 2.1 The Provider **shall**:

- i. Base all provision on effective and proven behaviour change strategies, encourage physical activity and offer regular support, in line with the evidence detailed in section 7.6.
- ii. provide the client with educational materials to aid with weight loss.
- iii. offer the facility of digital support to aid with the healthy plate guidance.

### 2.2 Healthy eating

#### 2.2.1 Healthy eating approaches **shall**

- i. Advocate a moderate calorie deficit (i.e. 600 – 1200 kcal / day) to achieve an expected weight loss of 1-2lbs a week. These strategies should be nutritionally complete and incorporate the principles of the FSA Eatwell Plate.
- ii. Only be based on partial meal replacement systems if they:
  - a) Advocate including at least one well balanced meal a day based on healthy eating principles.
  - b) Are part of a comprehensive programme which includes education and support with a view to the reintroduction of regular foods at the end of the programme in line with the principles of the FSA Eatwell Plate.

- iii. Be individualised, tailored to food preferences and allow a flexible approach to reducing calorie intake.
- iv. Provide on-going, structured training for group leaders so that they can provide clients with sound advice on the principles of weight management/healthy eating as outlined above.

#### 2.2.2 Healthy eating/weight loss approaches **shall not**:

- i. Be unduly restrictive and nutritionally unbalanced diets making dietary recommendations not in line with the Eatwell plate or population recommendations set out in Report on Health & Social Subjects 41. Dietary Reference Values for Food, Energy and Nutrients for the United Kingdom 1991.
- ii. Provide less than 1000kcal/day.
- iii. Advocate rapid weight loss i.e. more than (1kg) 2lbs a week, and where this occurs have safety precautions in place.
- iv. Suggest weight loss can be achieved through methods other than calorie restriction.

### 2.3 Behavioural change

#### 2.3.1 Behavioural change approaches **shall**:

- i. Include behavioural strategies such as, self-monitoring, goal setting, problem solving, stimulus control, social support, relapse prevention and action planning.
- ii. Provide motivational and behaviour change tools and resources to support Service Users as they make lifestyle changes. This can include face-to-face and technological communication techniques.
- iii. All leaders shall be trained to deliver effective behavioural change techniques, detailed in section 7.1

### 2.5. Physical activity

#### 2.5.1. Physical activity approaches **shall**:

- i. Offer practical, safe advice about being more active and/or deliver an activity session.
- ii. Encourage building daily exercise into everyday life, such as walking, gardening.
- iii. Promote a reduction in time spent inactive, such as watching television
- iv. Advise increasing levels of physical activity slowly, building up to recommended levels, using agreed goals (Recommended levels – do at least 30 minutes of at least moderate-intensity physical activity on 5 or more days a week; 45-60 minutes may be needed to prevent obesity; people who have lost weight may need to do 60-90 minutes to avoid regaining weight. NICE Clinical Guidance 43)

#### 2.5.2 If the provider chooses to deliver physical activity sessions:

- i. instructors shall hold an appropriate current qualification at a minimum of level 2 (Register of Exercise Professionals (REPs) working towards level 3

- ii. instructors shall have experience of working with Service Users in obese class I, II and III.

### 3. Service Requirements

#### 3.1. Access

- 3.1.1. LiveWell Dorset (LWD) will assess eligibility and make referrals into the Tier 2 Weight Management Service. All clients must access this Service through LWD and shall engage with the weight management service option of their choice as part of the LWD weight management pathway.
- 3.1.2. The Provider will supply unique referral codes to be distributed by email or text to eligible individuals.
- 3.1.3. The referral code will be presented by the client when they first access weight management provision and the provider shall use a robust system for recording and reporting service use against this code.
- 3.1.4. The Provider will be responsible for ensuring all service users referred by LWD have a BMI which meets eligibility criteria at the first weigh-in.

#### 3.2. Service User Eligibility criteria

- 3.2.1. All Service Users accessing the service must meet the following referral criteria:
  - i. Aged 18 years and above
  - ii. BMI is 27.5 or over in individuals from South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean family background.
  - iii. Body Mass Index of 30 or above for all other ethnicities
  - iv. Body Mass Index of 27.5 or over for individuals registered as having a severe mental illness, regardless of ethnicity.
  - v. Not pregnant
  - vi. Have not previously been engaged in the weight management programme through LWD
    - The exception is anyone whose engagement in the programme was more than 12 months previous and who takes up a concurrent LWD coaching offer
  - vi. Individuals who have self-funded attendance at the relevant commercial weight loss providers will not be eligible to use the weight management programme within 3 months of their self-funded attendance at group sessions
- 3.2.2. Additionally, to be eligible for further support from 12-24 weeks, Service Users shall:
  - i. Have lost between 2.5 and 4.9% of initial body weight by the end of the initial intervention.
  - vii. Have a BMI still above 30, or 27.5 or over in individuals from South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean family background.
  - ii. Have attended at least 10 out of the 12 sessions (or missed maximum of 2 sessions of the programme duration)
  - iii. Be committed and motivated to make behaviour changes
  - iv. Have a learning disability

- 3.2.3. There are no exclusion criteria other than not meeting the Eligibility Criteria.

Reference

### 3.3 Service Provision

#### 3.3.1 Target and Support:

The provider **shall**:

- i. Emphasise the health benefits of achieving at least 5% weight loss.
- ii. Agree realistic target weights with referred clients.
- iii. Offer weekly weigh-in and recognition of successful weight loss.
- iv. Offer weekly group support and encouragement.
- v. Offer on-going support between weekly sessions as necessary.
- vi. Offer the use of technology to maintain support and encouragement between group sessions.

3.3.2 The Provider shall offer a free taster session to enable clients to make a suitable choice about which weight management support offer to engage with.

#### 3.3.3 Initial support: ~12 week programme

- i. Following a successful referral, the client will attend their chosen Provider for a ~12week programme of support as specified above, with the aim of losing  $\geq 5\%$  of their starting body weight.
- ii. The provider shall follow up all clients to record their weight at 12, 24 and 52 weeks from their start date. If the client leaves the group before the 24 or 52 week milestones, the Provider shall invite them back for a 'free of charge' weigh in.

#### 3.3.4 Follow-up for non-attendees

- i. If a client fails to attend for one or more of their designated weeks, the Provider shall attempt two follow-up contacts to establish reasons for non-attendance and, where appropriate, encourage re-engagement.
- ii. Follow-up to commence within one week of non-attendance/dis-engagement.
- iii. After two attempts, the Provider shall promptly pass on the details to LiveWell Dorset in a formal electronic report.

#### 3.3.5 Further support, discharge and onward referral / signposting

- i. If the Service User meets the criteria set out in Section 3.2, they are entitled to up to 12 weeks of further support funded by Public Health Dorset (PHD).
- ii. If the client does not meet the eligibility criteria for further support, they will not receive further financial support from PHD.
- iii. Clients may, pending conditions stipulated by LiveWell Dorset, become eligible for further funding at a later date.
- iv. Group leaders should be aware of eligibility criteria but can direct service users to LWD for matters concerning eligibility for further support.
- v. After financial support from PHD has ceased, clients may continue attending groups, but will have to self-fund unless the Provider enables them to attend free of charge. They may also engage with LWD Coaching or manage their weight independently.

#### 4. Performance and Reporting

- 4.1. All data shall be treated with confidentiality and in line with the General Data Protection Regulations (GDPR) 2018. The Provider shall ensure that secure data management systems are maintained at all times. Consent will be gained from all clients to share data with LWD and Public Health Dorset.
- 4.2. The Provider will maintain robust records of uptake of the service, progress and outcomes for all referred clients. The Provider shall deliver the Commissioner with weekly electronic reports containing up-to-date data on referred clients' status and progress.
- 4.3. The weekly electronic report to the Commissioner will include the following for every referred client:
  - i. Service uptake status (whether referral has been activated and whether they have completed or lapsed from the programme)
  - ii. Start weight, weekly weight and current weight loss status
  - iii. Weight at 12, 24 and 52 weeks
  - iv. Whether client has attended each designated week, including 24- and 52-week follow-up weigh-ins
- 4.4. The Provider will work with the commissioner to ensure weekly reports are provided in a practical format. Once agreed, the provider will use this format in a consistent manner. Changes to the format of electronic reports must first be agreed with the commissioner.
- 4.5. The Provider shall ensure that client weights are provided no later than 2 weeks after weights being recorded.

#### 5. Service Charges and Payment

- 5.1. The Provider will receive payment based on the number of sessions attended by unique service users reported in the weekly electronic reports.
- 5.2. Payment frequency will be monthly. If agreed by the provider and commissioner payment may be made on a quarterly basis.
- 5.3. The maximum cost per first session attended will be £15 and the maximum cost per subsequent session attended will be £5. The enhanced rate for first sessions is intended to cover start-up costs such as administration and programme materials.
- 5.4 For digital-only offers, the maximum access fee per client will be £70.

#### 6. Contract management

- 6.1. The provider and commissioner will meet quarterly to monitor the contract and review delivery against the specification and reporting requirements. The review meetings will be an opportunity for the provider and commissioner to identify and address any issues arising and to agree any necessary service improvement plans and/or contract variations.
- 6.2. Contents of the quarterly contract monitoring meetings will include, though not limited to: Performance (in terms of KPI's); Quality; Service development & improvement; Workforce; Compliments & complaints; Finance; Contractual matters.

## 7. Additional Requirements

- 7.1. The Provider shall ensure that there is local provision across the geographical area of Dorset, Bournemouth and Poole, particularly in areas of deprivation. The Service shall be provided from a range of locations, on various days of the weeks and at different times of the day, to ensure accessibility and facilitate attendance. Working with the Purchaser, the provider shall set up new or additional weight management groups based on consumer demand and identified gaps in provision.
- 7.2. The Provider shall ensure that the service is sensitive to all people regardless of their sex, age, sexuality, culture, ethnicity, or disability status. The Service shall work with LiveWell Dorset to identify local needs. The Service shall be delivered from a range of community venues to cater for diverse needs, and all venues will be DDA compliant.
- 7.3. The Provider shall ensure that LiveWell Dorset has access to up-to-date information on the current support groups, times and locations. The details of Service User's chosen support group will be disseminated by LiveWell Dorset.
- 7.4. All marketing of the Service will be the responsibility of Public Health Dorset.
- 7.5. The Provider shall ensure that thorough recruitment and selection processes are in place which includes full tracking of previous employment history, two written references and Disclosure and Barring Service (DBS) and Protection of Vulnerable Adults (POVA). The provider shall also ensure that staff recruitment, training and development policies and practices ensure that all staff have the appropriate competencies to deliver the service.
- 7.6. Providers shall comply with:
  - i. Statutory Health and Safety requirements
  - ii. Pan-Dorset Multi Agency Safeguarding Adults Policy and LSCB Inter-Agency Procedures for Children and Young People.
  - iii. NICE CG189 (2022) guidelines on *the prevention, identification, assessment and management of overweight and obesity in adults and children*, including bestpractice guidance on multi-component lifestyle weight management programmes
  - iv. NICE PH53 (2014) guidelines for managing overweight and obesity in adults – lifestyle services
  - v. NICE PH53 (2014) Behaviour Change: individual approaches
- 7.7. Any implementation requirements are to be agreed between provider and commissioner during contract award negotiations