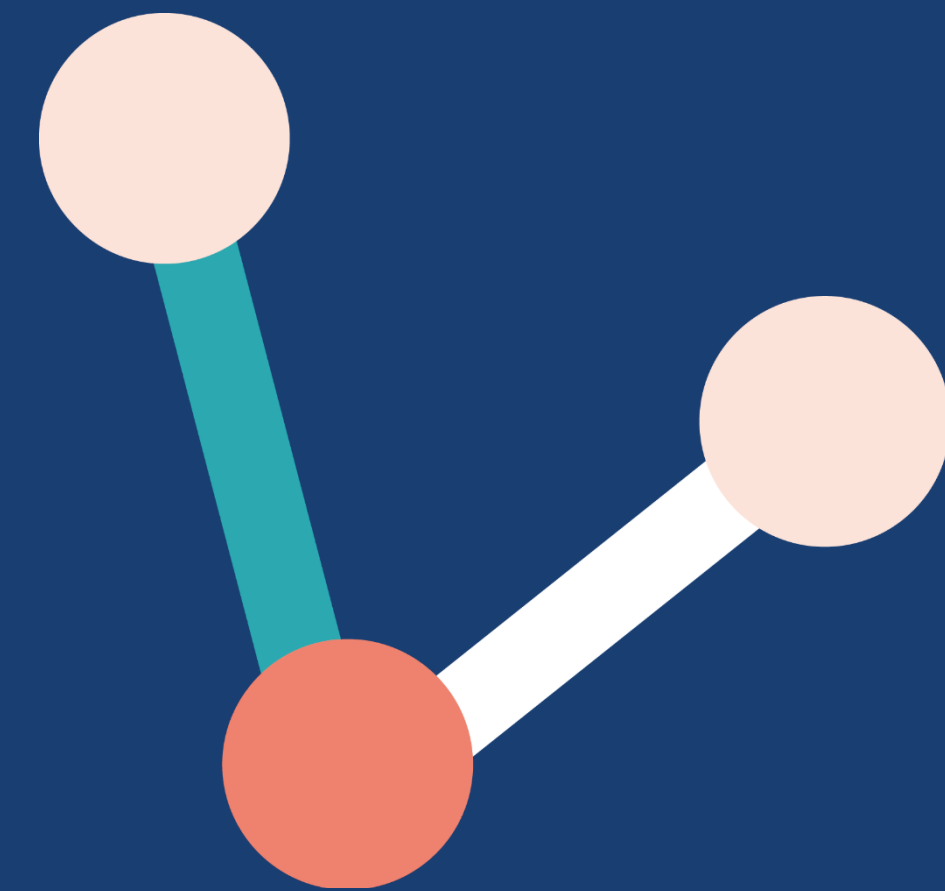


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Initial observations

Interview 1 (summer 2021)

- Conversations on weight are usually patient-led and initiated, or provider led if weight management is relevant for another condition
- Weight management is not within the remit of any one profession, and instead, requires a concerted, practice-wide effort
- Interactional delicacy of weight management
- Poor accessibility of tiered weight management support
- Lack of time to adequately address weight in a typical consultation.
- Providers provide bespoke diet and exercise advice, taking a patient-centred approach
- Lack of visual cue in virtual consults made weight management less opportunistic

Interim interviews (spring 2022)

- Improved accessibility to weight management services, namely, tier 2
- Large burden in workload with COVID-19 vaccination programme

Interview 2 (autumn 2022, ongoing)

- Salaried GPs mainly aware of Enhanced Service, other professionals inadvertently aware through knowledge of services
- Frustration over changing schemes and referral routes with changing eligibility criteria
- Enhanced services feel optional in contrast to a QOF. If there is time, it will be addressed, but is not prioritised.
- Enhanced Service is not necessarily a good use of NHS resources. What is important is having services to refer to, and being aware they are there.
- Weight management is still largely patient-led. Some clinics sent mass-texts to eligible patients to make an appointment if they would like to learn more about services, reinforcing patient-initiated weight management in primary care.

Progress to date

Participants at interview 1



Snapshot of working analytical framework for time 1

High-level category	Sub-category 1
Initiating conversation on weight	Patient-led as focal concern Patient-led in relation to other concerns Provider-led as focal concern Provider-led in relation to other concerns
Weight management part of provider role	Part of role + why Not part of role + why
Typical treatment options employed for overweight/obesity	Referral Bespoke nutrition and exercise Sign-posting to other provider Patient-centred approach
Interactional delicacy of weight management	Futility of current approach Items relationship + example Improves relationship + example No clear impact on relationship

●●● TBC

Research Q



What are the changing perceptions, attitudes, experiences and actions of clinicians and administrators working in primary care clinics in England before and after the implementation of the 2021 National Enhanced Service for weight management?

P (population)	Primary care staff involved in the continuum of weight management care
I (interest)	Change in perceptions, attitudes, experiences and self-reported actions before and after the 2021 National Enhanced Service incentive for weight management
Co (context)	Primary care clinics in the England

Methods

Study Design

- This is a longitudinal qualitative study that interviews the same set of participants using semi-structured, remote interviews at two main time points; before the Enhanced Service for weight management, and a year later.
- Questions have been structured according to normalisation process theory (NPT)
- NPT addresses the factors needed for successful implementation and integration of complex interventions into routine work (normalisation) (1,2).
 - Coherence: sense-making; *what are your perceptions of weight management in primary care?*
 - Cognitive participation: relational work; *how is weight management organised within the practice team?*
 - Collective action: operational work; *how is weight management practically enacted in practice?*
 - Reflexive monitoring: appraisal work; *what are the barriers and facilitators to weight management in primary care?*

Ethics

- This project received ethical approval until January 30th, 2023
- MS IDREC ref: R74691/RE001, IRAS project ID: 292432

Recruitment

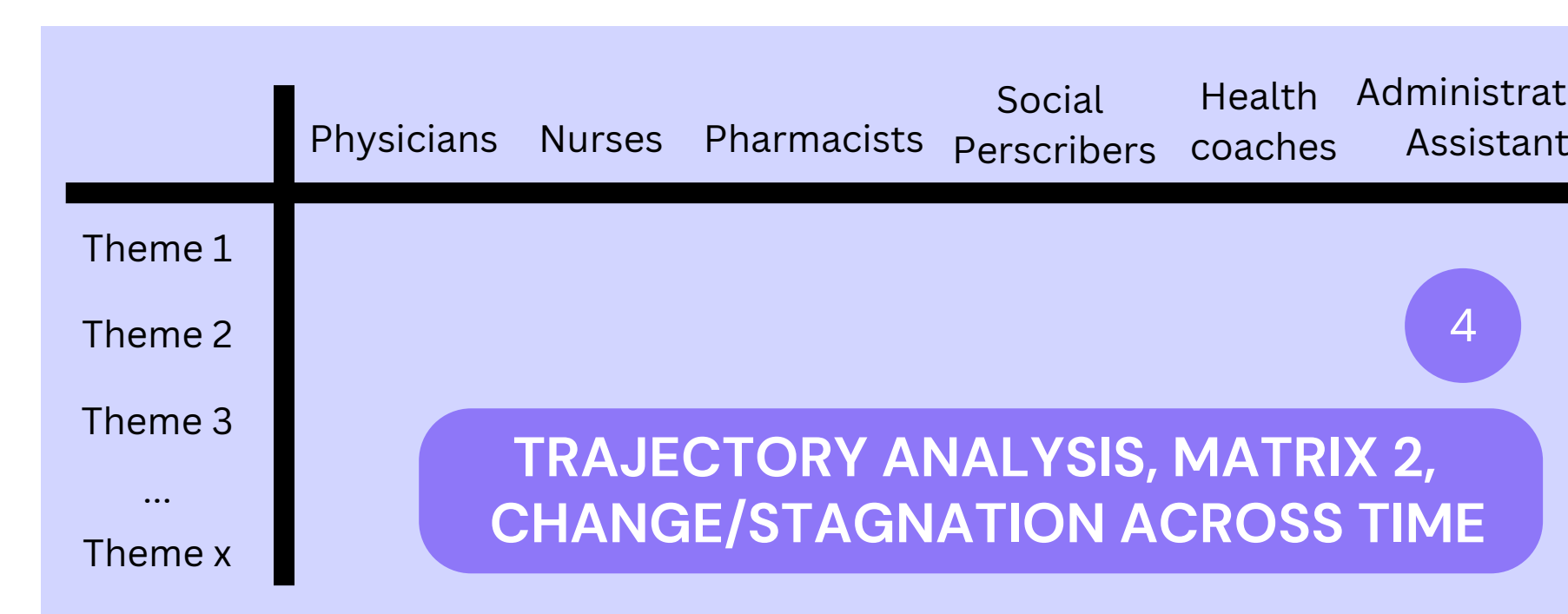
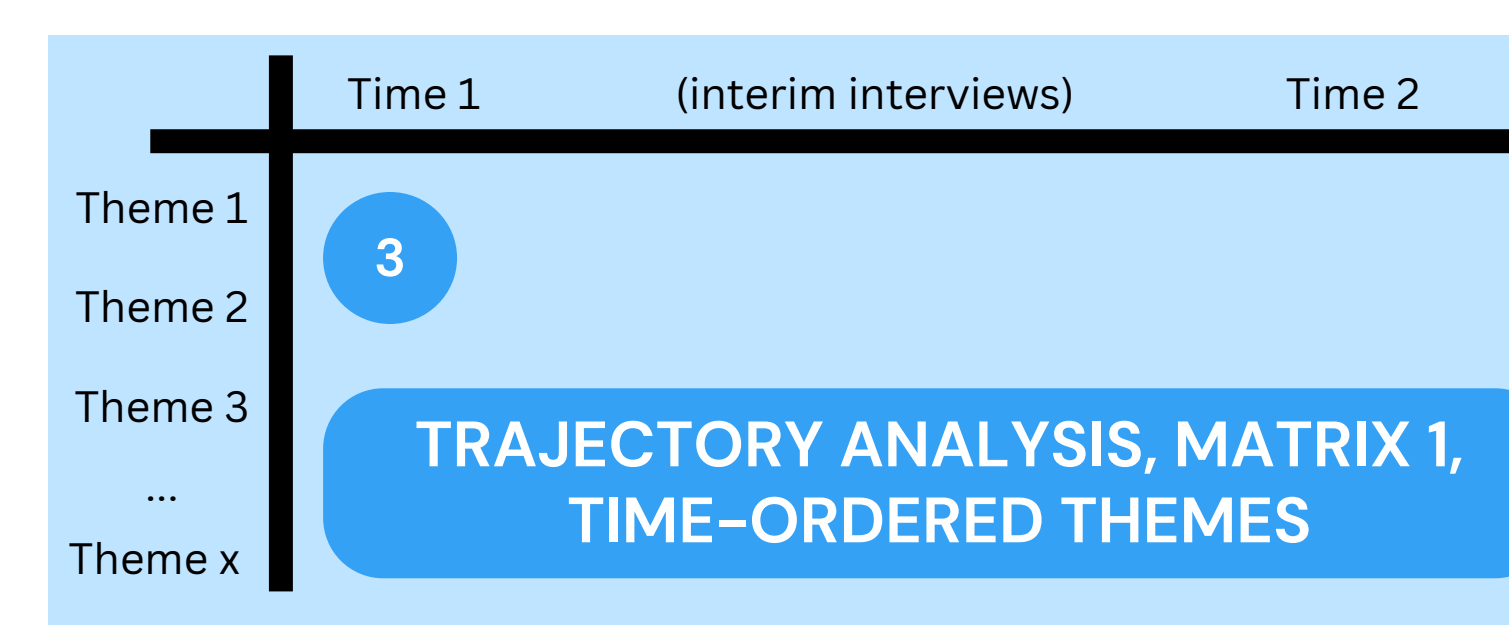
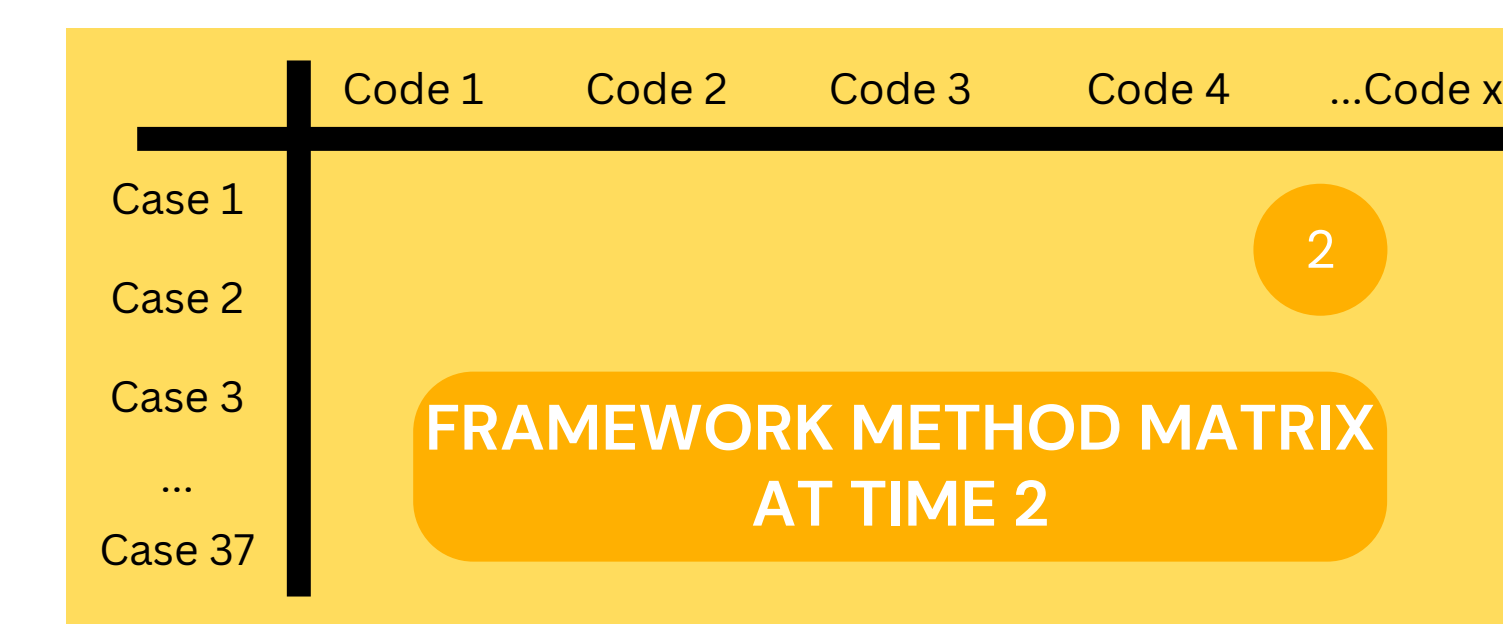
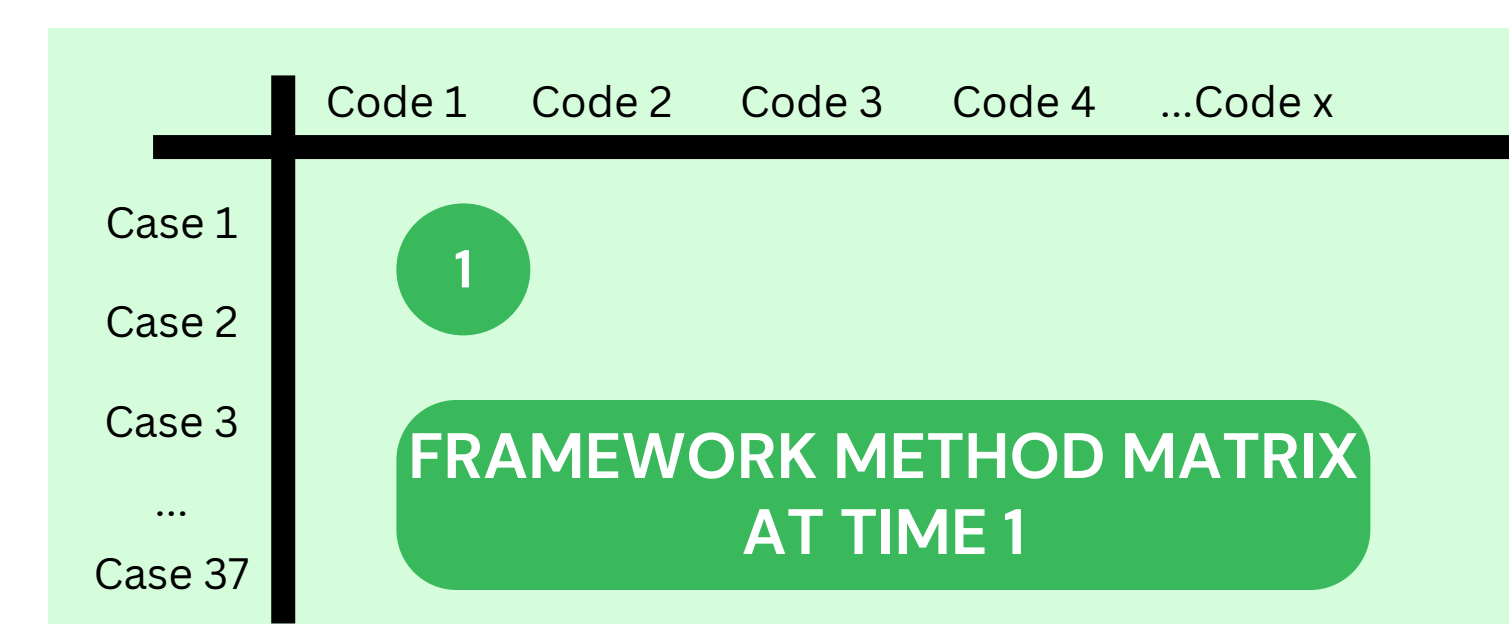
- We aimed to recruit up to 45 primary care staff (physicians, nurses, administrators, social prescribers, pharmacists, and health coaches) working in English general surgeries through flyers distributed by Clinical Research Networks (CRNs) across England.

Data collection

- Consent is taken verbally at the start of each interview.
- Interviews are audio-recorded and stored on an encrypted, password-protected, university-owned device, accessible only to research personnel.
- All recordings are transcribed using a third-party, University of Oxford-approved transcription service.
- Data management software, QSR International NVivo, is being used to structure and organise the data.

Analysis

- Framework method and trajectory analysis
 - Framework method: used for policy research. Involves 6 stages; transcription, familiarisation, coding, develop an analytical framework, apply the analytical framework, charting a framework matrix, interpreting data (3).
 - Trajectory analysis: focuses on changes over time for a small group of individuals, with the purpose of understanding individuals' experiences over time or to understand longitudinal healthcare processes (4).

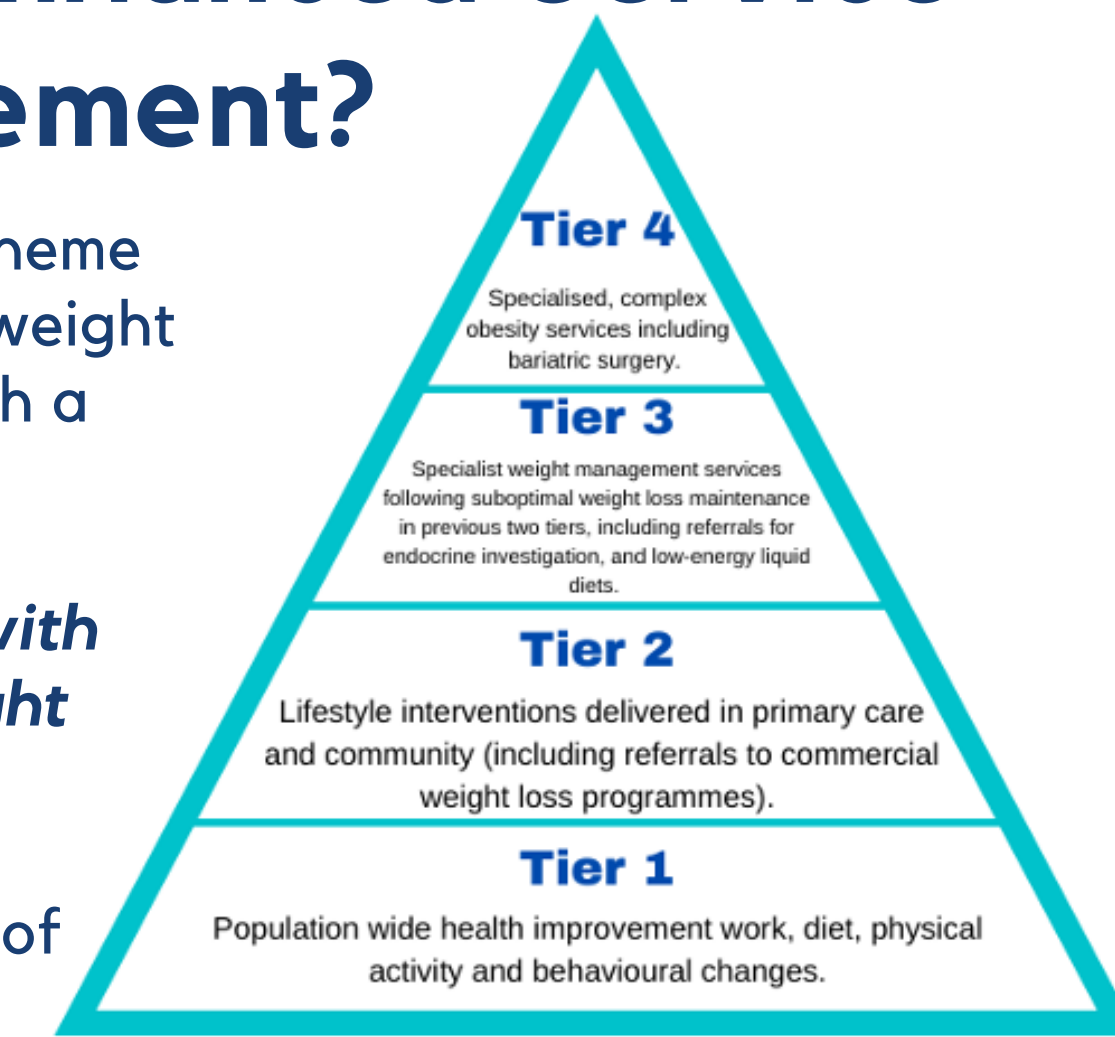


What is the NHS Enhanced Service for weight management?

The Enhanced Service is an opt-in scheme to incentivise referrals to 2-4 tiered weight management services in England, with a goal of:

"...ensur[ing] that everyone living with obesity is offered support for weight loss" (5,6).

£11.50/ referral, with no min. number of referrals needed to make a claim.



Implications

This work will help us understand how the introduction of the Enhanced Service may have changed the self-reported practice of primary care staff, their attitudes towards weight management, and the utility of policy to incentivise their behaviour. This will allow us to learn about how the Enhanced Service is viewed by those at the grassroots of its implementation. This feedback can then be used to tailor national and regional implementation in future iterations of the Enhanced Service or related schemes.

This project makes up 1/6 of a programme of evaluation undertaken external to the NHS by the University of Oxford, called the **National Enhanced Service Incentive Evaluation (NESIE)**. Understanding how primary care staff feel about weight management in and around the introduction of the policy will comprise a key piece of this evaluation. NESIE also considers the patient and commissioner experience, cost-effectiveness of the incentive, and changes in rates of referrals.

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This research is funded by the National Institute for Health Research Applied Research Collaboration Oxford and Thames Valley (NIHR ARC OxtV) Oxford. The views expressed are those of the authors and not necessarily those of the NIHR, the NHS or the Department of Health and Social Care.