

Evaluating the Nutrition and Body Mass Index Clinical Link Pathway in Mental Health and Learning Disability Services: A Mixed-Methods Study

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Background

In England, adults with Severe Mental Illness (SMI) are almost twice as likely to be living with obesity than the general population. An estimated 37% of people with Learning Disabilities (LD) are classified as having obesity compared to 30% of the general population.

To help support weight management in people with SMI and/or LD, a regional inter-organisational weight management initiative was developed called 'A Weight off Your Mind' (AWoYM).

The Nutrition and Body Mass Index Clinical Link Pathway (NBMI CLiP) was one component of AWoYM, which was used across 47 wards in Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) to help in-patients with, or at risk of developing, a Body Mass Index (BMI) <20Kg/m² or ≥25Kg/m².

The NBMI CLiP uses a St Andrew's Nutrition Screening Instrument (SANSI)-based evaluation process to determine in-patient weight management.

Aims and hypotheses

A process evaluation of the 'NBMI CLiP' and its implementation across Severe Mental Illness and/or Learning Disabilities within secondary care in-patient wards in TEWV.

The three primary aims are:

- (1) To understand how the NBMI CLiP is used
- (2) To explore staff feedback on the NBMI CLiP for supporting service users to manage their weight
- (3) Whether using the NBMI CLiP impacted on staffs' own weight management

Methods

The study used both **primary data from staff** and **secondary data from patient records**:

Primary data was a mixed-methods staff survey (n=55) which investigated barriers and facilitators to using the NBMI CLiP and impacts on staffs' own weight management.

Secondary data analysis utilised existing anonymised patient electronic records (47 wards), assessing the percentage of BMI, SANSI and intervention plans recorded for service users of medium- to high-risk. Analysis was from baseline to 'T30' – month 30 from baseline.

Conflict of Interest/Finance statement

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Results

Primary data analysis

Participant demographics

Multidisciplinary participants (n=55), with ~82% female (n=45) and ~18% male (n=10).

Figure 1

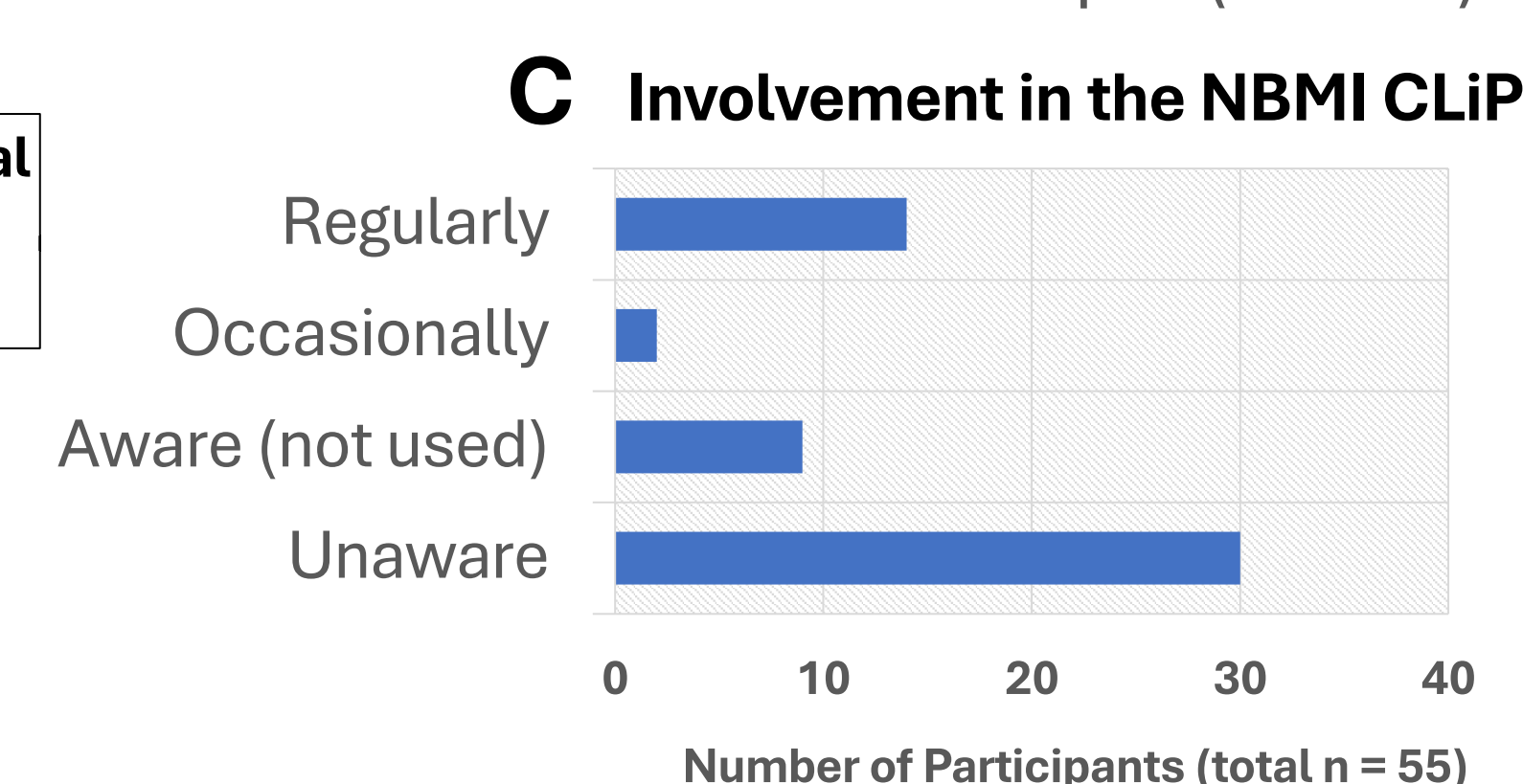
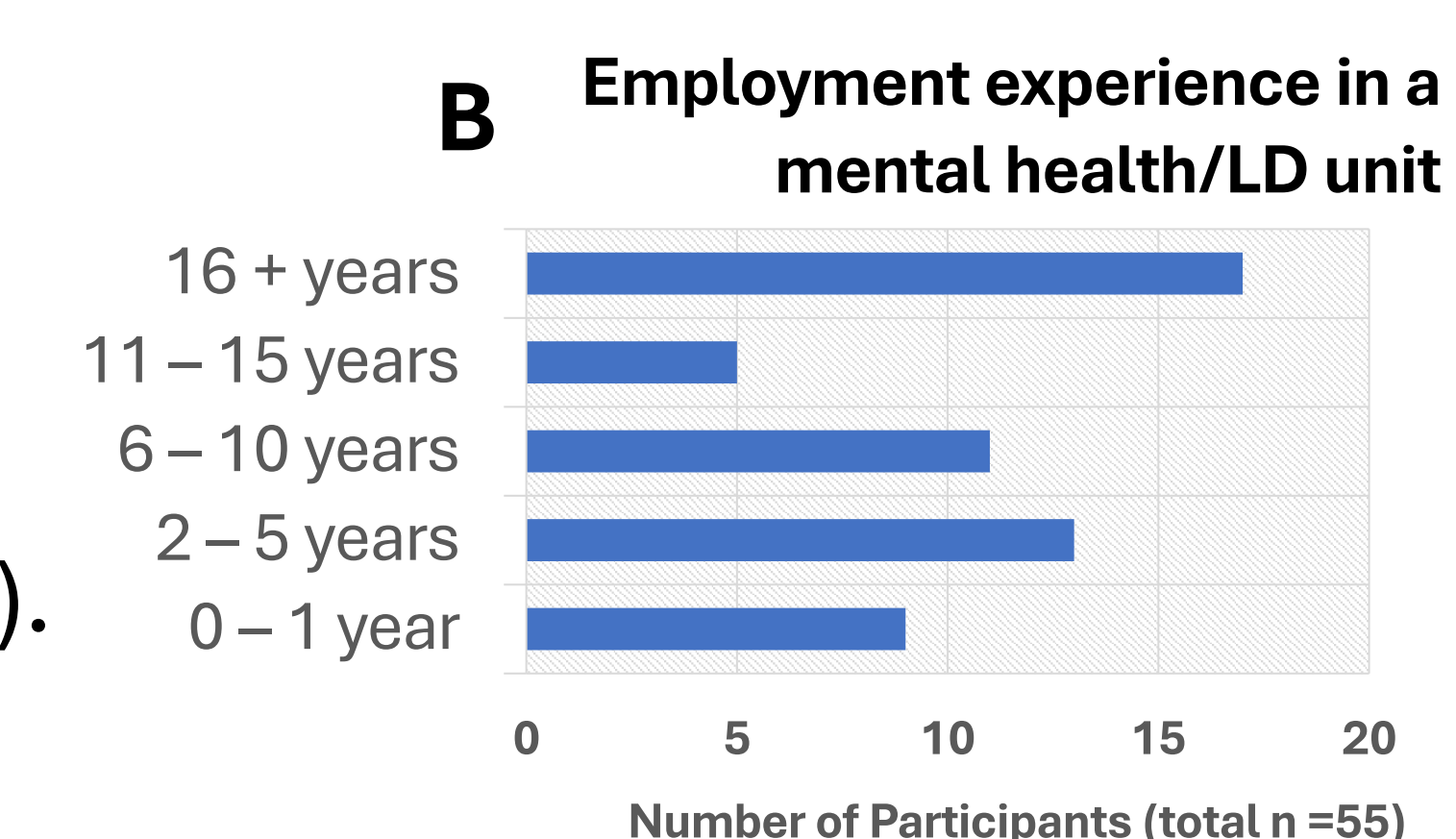
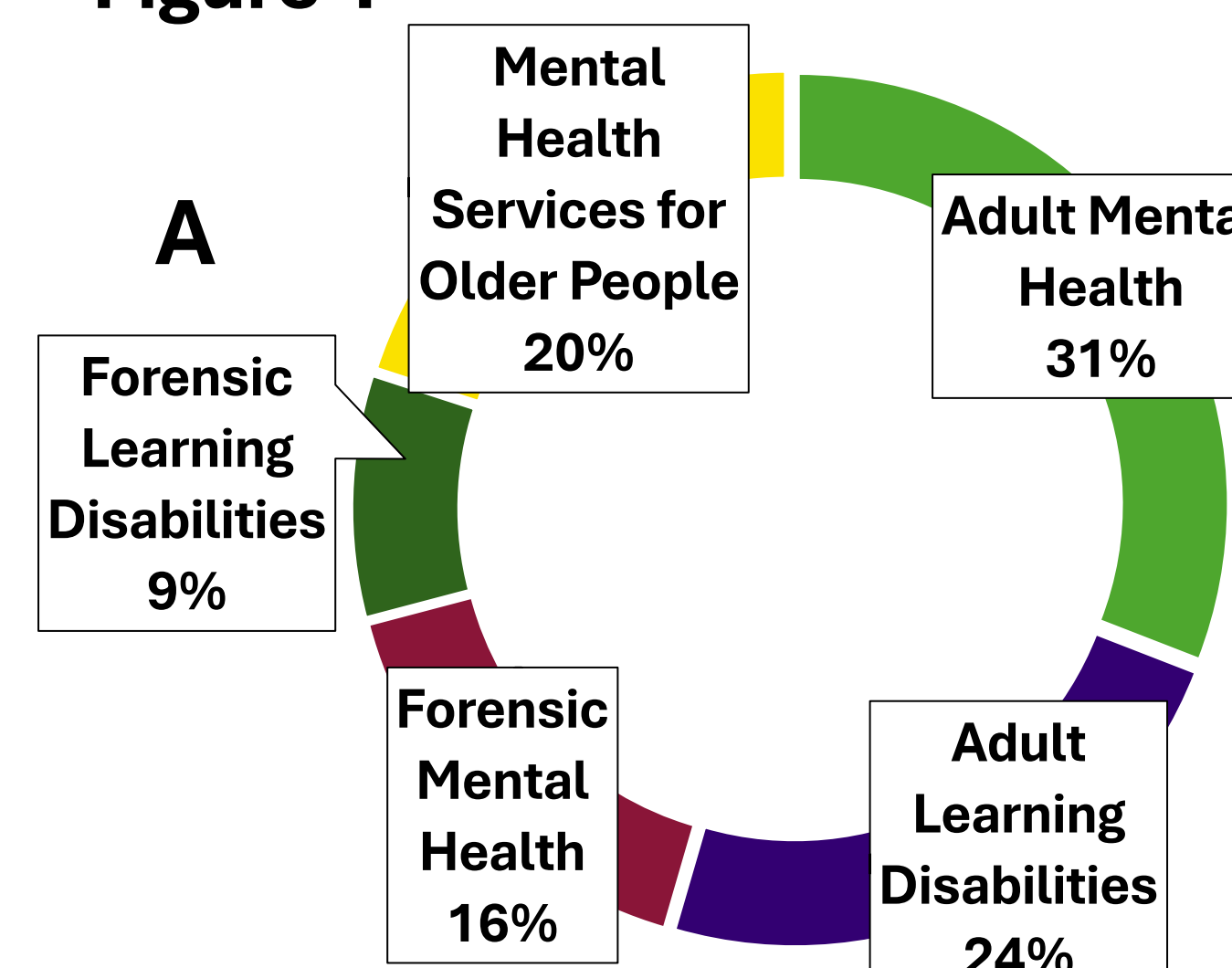


Figure 1. Graphical representation of staff survey participant demographics, including (A) their ward's speciality, (B) their length of employment in mental health and/or LD settings and (C) clinical involvement with NBMI CLiP.

Ease of use of the NBMI CLiP

Survey participants largely found the NBMI CLiP easy/very easy to use (75%) and at least confident to SANSI Screen (87.5%).

Elements of the NBMI CLiP

The SANSI was perceived to be the most useful element of the NBMI CLiP by 68.75% (n=11) participants.

Did NBMI CLiP help staff manage their own weight?

Most participants (n=45, 81.8%) were unaware that TEWV offered weight management groups for staff. Only one participant attended a staff weight management group.

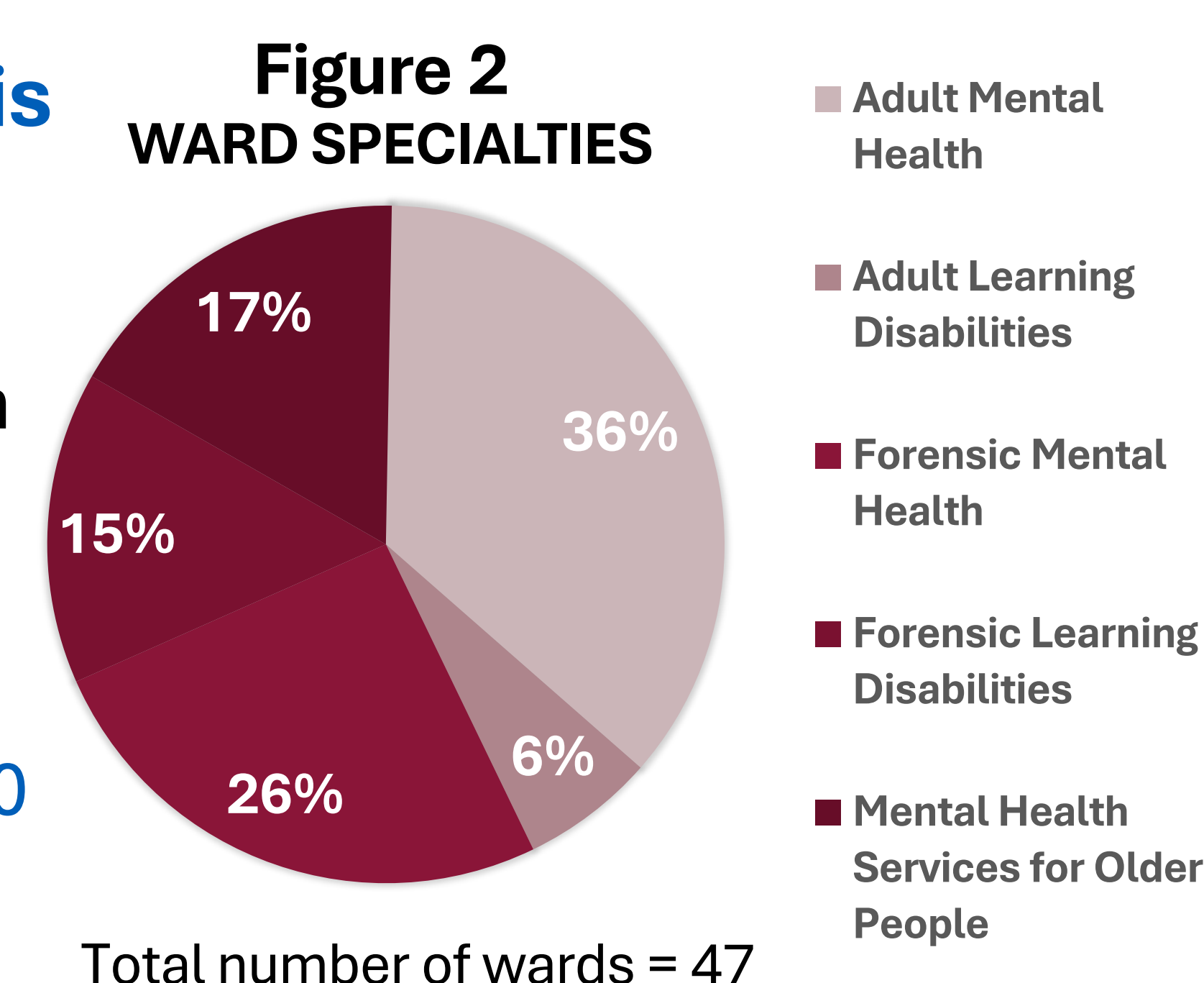
Qualitative analysis

Open-text responses, via content analysis, indicated a need for further training of staff on the NBMI CLiP. Staff viewed dietitian involvement in training or delivery of the NBMI CLiP as desirable.

Secondary data analysis

Out of 47 wards, the greatest improvement in BMI, SANSI and intervention plans recording was found in: Forensic LD, Adult LD and mixed gender wards. Most wards improved by T30

Figure 2. 47 wards utilised for secondary data analysis divided by their clinical specialities



Conclusions

- ✓ Most wards improved recording of BMI, SANSI and Intervention Planning since NBMI CLiP implementation.

Next steps

- ✓ Future evaluation of dietitians' involvement in delivery and training of the NBMI CLiP is warranted
- ✓ Choice architecture and individualised approaches to food provision should be further considered