## **CONSULTATION QUESTIONNAIRE**

(a word version of this consultation questionnaire is available on the Department's website: <a href="https://www.health-ni.gov.uk/consultations/proposed-regional-obesity-management-service-roms-northern-ireland">https://www.health-ni.gov.uk/consultations/proposed-regional-obesity-management-service-roms-northern-ireland</a>)

PERSONAL DETAILS		
Name	Emily Bishko	
Email address	emilybishko@cancerfocusni.org	
Are you responding on behalf of an organisation? Yes/No		
Are you responding	(delete as applicable)	
Organisation (if applicable)	Cancer Focus Northern Ireland	
Please indicate in which capacity you are responding to this consultation: (please tick)		
<ul> <li>Medical Professional</li> <li>HSC worker</li> <li>Member of the public [If "Other" Option Available: Health Sector Charity]</li> <li>Person with lived experience</li> </ul>		
The Department may publish responses to this consultation, except those from individuals responding in a private capacity. Your response may also be disclosed on request in accordance with the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR). If you wish your response to remain confidential, it would be helpful if you could indicate your reasons for this.  Would you prefer your response to remain confidential? (If so, please tick)  Yes  Please explain the reason for your request:		
CONSULTATION QUESTIONS		
	ent do you support or oppose this proposal for the establishme esity Management Service?	∍nt
oppose (please del	Strongly support / tend to support / neither support nor oppose / tend to oppose / strongly oppose (please delete as appropriate)	
Please add any further comments you may have:  We strongly support a regional obesity management service, assuming "regional" means		
an NI-wide service (versus by Trust). We believe this could help standardise and facilitate access to obesity prevention and management services across Northern Ireland.		
We support this service because obesity can lead to health complications and comorbidities. It also increases risks associated with some cancers. Developing an		

obesity management service can help NI better address and treat obesity, which is an important preventative measure.			
Q2: Do you agree with the principle that bariatric surgery should be carried out on a single site where it can be delivered safely and sustained?			
Strongly agree / tend to agree / neither agree or disagree / tend to disagree / strongly disagree (please delete as appropriate)			
Please add any further comments you may have:			
This is a best-practice approach that has seen success elsewhere. It allows for the optimisation of resources, which is important given resource pressures.			
Q3: At which hospital site do you think a bariatric surgical service should be provided? (please select one option)			
<ul> <li>□ Belfast Trust Hospitals (Royal Victoria, Belfast City, Mater)</li> <li>□ Craigavon Hospital</li> </ul>			
□ Daisy Hill Hospital			
□ Altnagelvin Hospital			
□ South West Acute Hospital			
□ Antrim Area Hospital			
☐ Ulster Hospital  Please note: location of service will primarily be based on available capacity			
Q4: Do you agree that specialist obesity management services (MDTs in secondary			
care) should be located in two locations in Northern Ireland?			
date) should be located in two locations in Northern inclaire.			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly disagree (please delete as appropriate)			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly disagree (please delete as appropriate)			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly disagree (please delete as appropriate)  Please add any further comments you may have:  Having two locations makes the services more accessible to people across NI. We would encourage to place the services in different geographies to optimise access from different			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly disagree (please delete as appropriate)  Please add any further comments you may have:  Having two locations makes the services more accessible to people across NI. We would encourage to place the services in different geographies to optimise access from different parts of NI. For example, there could be a service in the East and in the West.  We do not have a particularly strong suggestion for where to locate the services; we			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly disagree (please delete as appropriate)  Please add any further comments you may have:  Having two locations makes the services more accessible to people across NI. We would encourage to place the services in different geographies to optimise access from different parts of NI. For example, there could be a service in the East and in the West.  We do not have a particularly strong suggestion for where to locate the services; we mostly encourage them to be located wherever the best specialists are.  We do note that it may be difficult to get people to travel to the SWAH, that it might make sense to have at least one Belfast location (potentially City Hospital due to transit			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly disagree (please delete as appropriate)  Please add any further comments you may have:  Having two locations makes the services more accessible to people across NI. We would encourage to place the services in different geographies to optimise access from different parts of NI. For example, there could be a service in the East and in the West.  We do not have a particularly strong suggestion for where to locate the services; we mostly encourage them to be located wherever the best specialists are.  We do note that it may be difficult to get people to travel to the SWAH, that it might make sense to have at least one Belfast location (potentially City Hospital due to transit			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly disagree (please delete as appropriate)  Please add any further comments you may have:  Having two locations makes the services more accessible to people across NI. We would encourage to place the services in different geographies to optimise access from different parts of NI. For example, there could be a service in the East and in the West.  We do not have a particularly strong suggestion for where to locate the services; we mostly encourage them to be located wherever the best specialists are.  We do note that it may be difficult to get people to travel to the SWAH, that it might make sense to have at least one Belfast location (potentially City Hospital due to transit connectivity), and that Antrim may be too full to add on an additional service.  Q5: At which 2 hospital sites do you think a secondary care MDT specialist obesity			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly disagree (please delete as appropriate)  Please add any further comments you may have:  Having two locations makes the services more accessible to people across NI. We would encourage to place the services in different geographies to optimise access from different parts of NI. For example, there could be a service in the East and in the West.  We do not have a particularly strong suggestion for where to locate the services; we mostly encourage them to be located wherever the best specialists are.  We do note that it may be difficult to get people to travel to the SWAH, that it might make sense to have at least one Belfast location (potentially City Hospital due to transit connectivity), and that Antrim may be too full to add on an additional service.  Q5: At which 2 hospital sites do you think a secondary care MDT specialist obesity management service should be located? (please tick 2 options)  Belfast Trust Hospitals (Royal Victoria, Belfast City, Mater)  Craigavon Hospital			
Strongly agree / tend to agree / neither agree nor disagree / tend to disagree / strongly disagree (please delete as appropriate)  Please add any further comments you may have:  Having two locations makes the services more accessible to people across NI. We would encourage to place the services in different geographies to optimise access from different parts of NI. For example, there could be a service in the East and in the West.  We do not have a particularly strong suggestion for where to locate the services; we mostly encourage them to be located wherever the best specialists are.  We do note that it may be difficult to get people to travel to the SWAH, that it might make sense to have at least one Belfast location (potentially City Hospital due to transit connectivity), and that Antrim may be too full to add on an additional service.  Q5: At which 2 hospital sites do you think a secondary care MDT specialist obesity management service should be located? (please tick 2 options)			

□ South West Acute Hospital		
□ Antrim Area Hospital		
☐ Ulster Hospital  Please note: location of service will primarily be based on available capacity		
Q6: Would you be prepared to travel to another Trust for regular appointments with		
an obesity management MDT? (please tick)		
□ Yes		
□ No Please add any further comments you may have:		
Please add any further confinents you may have.		
Although I am responding on behalf of an organisation, we believe that our patients would		
be willing to travel to access services. Indeed, we observe that patients already travel for		
services.		
O7. Would you be prepared to attend about management appointments on a		
Q7: Would you be prepared to attend obesity management appointments on a remote basis (for example, via Zoom, Microsoft Teams, via telephone) rather than		
face-to-face? (please tick)		
□ Yes		
□ No		
Please add any further comments you may have:		
Although I am responding on behalf of an organisation, we believe that patients would be		
prepared to attend appointments on a remote basis. As a charity, we provided services		
remotely during Covid and were successful. We are not particularly concerned around a		
remote service delivery.		
A hybrid antian aculd also be an antian for everally begins a first appointment for a		
A hybrid option could also be an option; for example, having a first appointment face-to- face and some follow-ups being remote.		
lace and some follow ups being remote.		
Q8: Having read the consultation document do you agree that the service should		
initially be limited to those who would be expected to achieve the greatest health gain?		
yanı:		
Fully Agree / Mostly Agree / Neither Agree nor Disagree / Mostly Disagree / Fully Disagree		
(please delete as applicable)		
Please add any further comments you may have:		
Given existing resourcing pressures, we agree with the choice to initially limit the service		
to those expected to achieve the greatest health gain. However, we note that sometimes		
significant gains can be achieved by targeting those at risk of obesity in addition to those		
that already have obesity. For example, preventative measures could help someone from		
developing obesity.		
Q9: Is there any one key element/aspect which you feel is missing from the		
proposed service model?		
If so, please provide further information if appropriate:		

It is important to note that bariatric surgery is not always the best option for someone, and we encourage other service pathways. For example, if someone is not a good fit for bariatric surgery, they should be referred into other services. We encourage a joined approach to coordinate services, and suggest a framework to detail "who gets what," from prevention to bariatric surgery. This could help tailor the treatment to the individual.

## Q10: Do you have any further thoughts or comments which may be relevant to this consultation?

Please outline below:

As a note, obesity can have a strong impact on cancer risks. However, the harms of obesity are less clear-cut than smoking, for example. Regular physical activity and diet can both help prevent obesity. With diet, that is not something you can "cut out", as you can with smoking and sunbeds; rather, changing behaviours is required. We support awareness raising to promote healthy living in NI, and policy measures and initiatives to facilitate healthy choices.

Q11: Given the current pressure on resources in the Health Service, and having read this consultation document, do you feel there is merit in investing in this type of service?



Please add any further comments you may have:

While we are aware of pressures, we believe this service could help with prevention of advanced non-communicable diseases. Such preventative initiatives are important, both for patients and for resource optimisation. We support initiatives to help prevent and manage obesity in NI.

## IMPACT ASSESSMENT/SCREENINGS - QUESTIONS

Q12: Do you agree with the outcome of the Impact Assessment/screenings?

Fully Agree / Mostly Agree / Neither Agree nor Disagree / Mostly Disagree / Fully Disagree (please delete as applicable)

Please add any further comments you may have:

[No comments]