

## IMPORTANT NOTE

- ♥ This session will be recorded so if you don't want your face or voice to be recorded, please make sure your microphone and camera are off.
- ♥ Meeting etiquette: If you're not speaking, please make sure your microphone is muted.
- ♥ Please put any questions in the chat and we'll pick these up as we go or respond in the chat.

# NHS Type 2 Diabetes Path to Remission Programme Mid and South Essex

Referrer support and training  
23<sup>rd</sup> January 2024



# Agenda

- ♥ Welcome, recording, questions
- ♥ Background and benefits
- ♥ The programme
- ♥ Roles and responsibilities, pathways
- ♥ Medications adjustment
- ♥ Referral support
- ♥ Next steps

# Background and benefits



## Research

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- ♥ Studies: DiRECT, DROPLET
  - ‘Remission’ of T2D possible
- ♥ Intervention group at 12 mths:
  - 24% lost 15kg+
  - 46% achieved remission (70% retained at 24 mths)
  - Fewer adverse events
- ♥ Remission closely linked to weight loss
- ♥ Remission: HbA1c <48mmol/mol, >6 mths, no meds

## Benefits

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- ♥ Patients:
  - Weight loss, T2D remission
  - Reduction in medications (av. 50%)
  - Impact on comorbidities
  - Healthy living / Quality of life
  - 12 month programme & TDR free
  - [Participant case studies](#)
- ♥ Practices:
  - Free service (NHSE-commissioned)
  - Referrals: WM Enhanced Service
  - Anecdotal: Reduces demands on practice by successful participants (weight loss, impact on comorbidities, peer support). Also medications reviews
  - Extensive support

# Framework and Momenta



## NHS England approach

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- ♥ Piloted as NHS Low Calorie Diet programme (2020+) in 20 ICBs
  - Including Mid and South Essex
- ♥ Similar emerging results to DiRECT
- ♥ Now a national Framework (like NDPP):
  - NHS Type 2 Diabetes Path to Remission Programme (T2DR)
  - Design similar to DiRECT
  - Jointly commissioned w' ICB



## Momenta Newcastle

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- ♥ T2DR provider: Momenta from Feb
  - Previously Oviva (to 31/1/24)
- ♥ Delivering since 2020
  - Originally: Birmingham & Solihull
  - Now in 13 ICBs + others
  - E.g. Dorset to Greater Manchester to North East & North Cumbria
- ♥ Early outcomes in line with DiRECT / NHSE pilot:
  - 11-13% weight loss at 3 months
    - Maintained into Phase 3
  - Positive uptake (70-80%)
  - Helps address health inequalities



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# NHS Type 2 Diabetes Path to Remission



- ♥ Follows principles of DiRECT, delivered by trained Coaches
- ♥ Three phases over 12 months, ALL free to participants:
  - 12 weeks: 8-900 calories/day TDR products
  - 6 weeks: Real food reintroduction
  - 7-8 months: Building healthy eating and activity habits into daily life
  - Plus: TDR Rescue package for those relapsing (>2kg regain)
- ♥ Delivery format: In-person 1:1 clinic or Digital
- ♥ TDR product supplier: Habitual
- ♥ App platform: Habitual (Momenta content and coaches)

# Eligibility criteria



## Inclusion

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- Aged 18-65
- T2D diagnosis within last 6 years
- BMI  $\geq 27\text{kg/m}^2$  ( $\geq 25\text{kg/m}^2$  if BAME origin)
- Attended monitoring and diabetes review in last 12 months
- HbA1c within 12 months:
  1. If on diabetes medication, HbA1c  $\geq 43$  mmol/mol (6.1%)
  2. If **not** on diabetes medication, HbA1c  $\geq 48$  mmol/mol (6.5%)
  3. In all cases, HbA1c must be  $\leq 87$  mmol/mol (10.1%)

## Exclusion

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- Current insulin user
- Currently breastfeeding
- Pregnant or planning pregnancy within 6 mths
- Heart attack or stroke in last 6 months; severe heart failure (New York Heart Association grade 3 or 4); severe renal impairment (most recent eGFR  $< 30\text{mls/min/1.73m}^2$ ); active liver disease (not including NAFLD); active substance use disorder; active eating disorder; porphyria; or known proliferative retinopathy that has not been treated
- Had bariatric surgery
- **Health professional assessment; or for whom safe and robust medications adjustment is not practical in a primary care setting**



These sessions follow Registration, Individual Assessment and Booking.

**PHASE 1:  
REBOOT**

Total Diet  
Replacement  
12 weeks

- S00 Setting up for success
- S01 Understanding Type 2 diabetes
- S02 Embrace the shake!
- S03 Know your external triggers
- S04 Know your internal triggers
- S05 Reset your mindset
- S06 Relax and destress
- S07 Preparing to **REBALANCE**
- S08 Final prep

**PHASE 2:  
REBALANCE**

Food  
Reintroduction  
6 weeks

- S09 Embrace healthy meals
- S10 Mindful eating
- S11 Make every day active
- S12 Meal planning and shopping

**PHASE 3:  
RETUNE**

Weight  
Maintenance  
To end of  
12 months

- S13 Know how to eat well
- S14 Main meals and snacks
- S15 Carbs, carbs, carbs
- S16 Build your strength
- S17 Sugars under the spotlight
- S18 Fats under the spotlight
- S19 Protein under the spotlight
- S20 Get your heart rate up
- S21 Moving forwards

**RESOURCES**

Digital participants also receive access to our *App*

Phases 1 & 2 Workbook and Lifestyle logbook\*  
 TDR product booklet  
 High performance toolkit cards  
 Fibre supplement  
 Monitoring equipment  
 Closed Facebook group  
 All TDR products - plus initial sample

Recipe booklet  
 Pedometer  
 EXi app (Premium access)  
 All TDR products

Phase 3 Workbook and Lifestyle logbook\*  
 Momenta-in-my-pocket  
 Any TDR products required

# Participant experience: Sessions and resources



Mid and South Essex  
Integrated Care  
System



\* Digital pathway participants do not receive the full Workbooks.

# Meal replacement products

- ♥ 10 products, including most popular flavours
  - 2 x porridges
  - 5 x shakes
  - 3 x soups
  - 4 x vegan options, all are vegetarian and gluten-free



- ♥ Participants order directly (voucher codes provided, support available)

- Samples and shaker, TDR booklet
- <https://www.tryhabitual.com/momenta>

- Free next-day delivery to home / office

- Includes 12-week TDR, Food Reintroduction & Reset plan if required



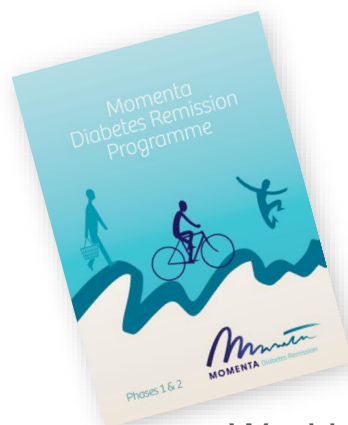
- ♥ No cost to participants



# Participant resources: In-person



📖 TDR booklet



- 📖 Workbook
- Session overview
  - Content & explanations
  - Activities and quizzes
  - Goals and targets
  - Backup information
  - Safety information



📖 Trackers e.g. weight, activity, behaviours, specifics

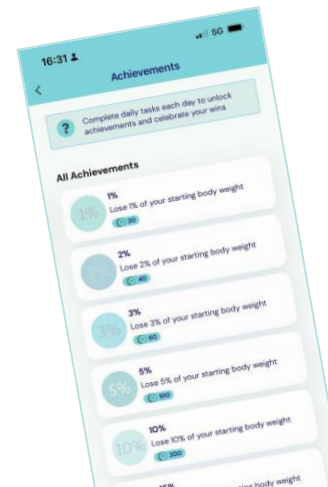
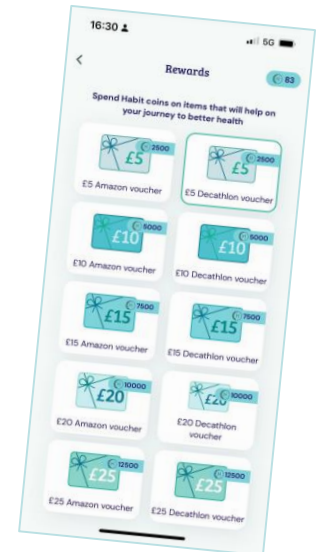
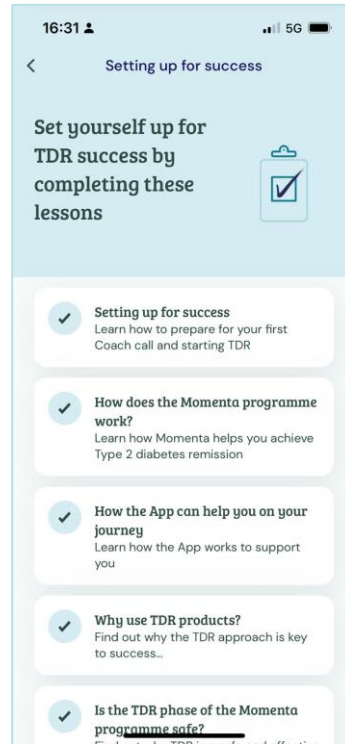
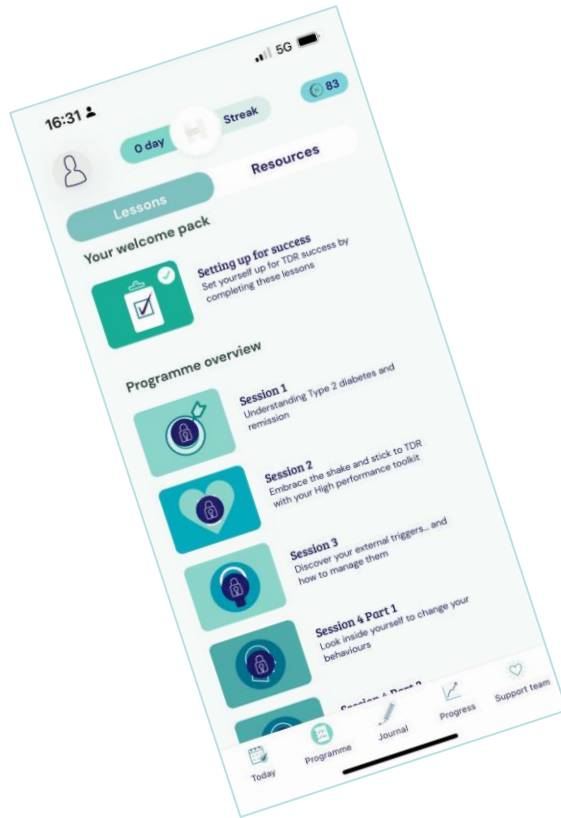


📖 Recipe book



- 📖 EXi app (12 mths premium)
- 📖 Wallet card
- 📖 Pedometer

# Momenta app snapshots: Digital



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- ♥ Medications adjustment
- ♥ Referral support
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# NHS T2DR: GP practice & provider responsibilities



GP practice

- (Register search)
- Patient apptmt
- **Referral & Medication Adjustment form**

Repeat HbA1c at 6 & 12 months

Medications and other reviews: on discharge / as required

Referral

Registration & Individual Assessment

Phase 1: TDR

Phase 2: Food Re-introduction

Phase 3: Weight Maintenance

Provider (Momenta)

- Patient information flyer / landing page
- Practice poster
- Patient animation
- Drop-ins
- Proactive support
- Attend events / meetings
- Register and check
- IA
- Book on chosen pathway
  - In-person
  - Digital

## Service delivery

### Patient monitoring:

- BG, BP, weight, BMI, side-effects, adverse events
- Medical Director as required

### Reporting

### Communication to GP practices

### Communication with patients

### Discharge and signposting

# Identifying interested patients

## Three options

### Search & invitation

- ♥ Search
- ♥ Screen
- ♥ Invite & signpost

Most efficient

### Usual care

- ♥ Diagnosis
- ♥ Annual review
- ♥ Patient request

Most relevant

*Most widely used  
in MSE*

### Bespoke

- ♥ E.g. Patient event at practice / PCN / community group
- ♥ ICB & Momenta support available

# Patient information



- ♥ Patient landing page – for invitation texts, social media – <https://momentanewcastle.com/t2dr-mse>
- ♥ Patient case studies: <https://momentanewcastle.com/case-studies/>

**The NHS Type 2 Diabetes Path to Remission\***

Worth approx. £1,200\*\*

A FREE new one year programme to support you to:

- Lose weight - approx. 2 stone / 14kg on average in 3 months
- Stop or reduce your diabetes medications on Day 1 of the programme
- Feel fitter, healthier and happier
- Potentially put your diabetes into remission.

**Type 2 diabetes remission**

This means your blood sugar levels are no longer in the range for diabetes and you don't need to take any diabetes medication! Some people call this remission but we prefer the term remission because your diabetes can come back so you still need regular reviews.

Research tells us that you're more likely to achieve remission if you:

- Have been recently diagnosed
- Take fewer or no diabetes medications
- Take more weight and keep it off
- Lose more weight and achieve remission

Although not everyone can achieve remission there are many other health benefits to losing weight and adopting an active and healthy lifestyle.

\*Formerly known as the NHS Low Calorie Diet or 'Shake and Diet' programme  
\*\*Based on NICE research, including session and all required meal replacement products.

**Am I eligible?**

You need to be:

- ✓ Registered with a GP practice in Mid or South Essex
- ✓ Aged 18-65
- ✓ Diagnosed with Type 2 diabetes within the last 6 years
- ✓ Above a healthy weight
- ✓ Able to commit to a 12-month programme
- ✓ Willing to be coached individually either at 22 in-person appointments or using an app
- ✓ Comfortable with just soups and shakes for the first 12 weeks.

You also need to meet various eligibility criteria, including:

- Not on insulin, not pregnant or trying to get pregnant in the next 12 months and not had bariatric surgery
- If you're eligible and your GP practice for

**What is the programme?**

The NHS Type 2 Diabetes Path to Remission has three-phases over one year – all at no cost to you:

1. You'll follow a low calorie diet for 12 weeks – 800-900 calories per day
2. You'll gradually replace these products with healthy, tasty meals over 6 weeks
3. You'll receive ongoing support for the next 8 months to help you maintain your weight loss.

Our trained Coaches will support you with easy-to-use tools and techniques to lose weight and keep it off. Each of the 21 in-person or app-based 'sessions' focuses on a new topic about nutrition, physical activity or lifestyle change.

You'll be given the meal replacement products and a range of high-quality logbook, recipes, a pedometer and a year's access to the EXO physical activity app premium version for **ALL FREE**. If you choose the digital service you'll also get

Many participants have become fitter, healthier and happier, seeing improvements in their mental and other conditions.

“Overall, my quality of life has improved so much.” *Wendy, 56*

“I'm caring more for myself and feel more energetic. It's changed my life!” *Janine, 61*

“If I was feeling low or demotivated, positive!” *Seema, 49*

“At last, I've been offered something to help me!” *Ann, 45*

Visit [momentanewcastle.com/case-studies](https://momentanewcastle.com/case-studies) for participant videos and for more detailed stories.

**How will it help me?**

Participants have told us how they've lost weight and reduced their diabetes and blood pressure medications. Some have even put their Type 2 diabetes into remission.

**What next?**

The NHS has funded only 500 places on the NHS Type 2 Diabetes Path to South Essex. If you're interested don't find out more here: [momentanewcastle.com/t2dr-mse](https://momentanewcastle.com/t2dr-mse)

If you decide this is the right programme for you then you'll need to be referred by your practice. This will include getting advice about any medications you might be taking, potential side-effects and ongoing monitoring.

Ask your GP practice for more details.

Includes provided by **Momenta Newcastle**

**Have you or a family member been diagnosed with Type 2 diabetes in the last 6 years?**

Patients need to be:

- ✓ Aged 18-65
- ✓ Above a healthy weight
- ✓ Able to commit to a 12 month programme
- ✓ Willing to attend either in-person or digitally
- ✓ Comfortable with just soups & shakes for the first 12 weeks

If you/they meet these and some other specific criteria the FREE NHS Type 2 Diabetes Path to Remission Programme may be suitable.

Some NHS Type 2 Diabetes Path to Remission Programme (formerly the NHS Low Calorie Diet) participants have achieved remission from Type 2 diabetes and reduced or completely come off their diabetes medications. Participants have also lost significant amounts of weight and feel fitter, healthier and happier. Speak to your GP practice about a referral.

For more details and patient stories: [momentanewcastle.com/t2dr-mse](https://momentanewcastle.com/t2dr-mse)

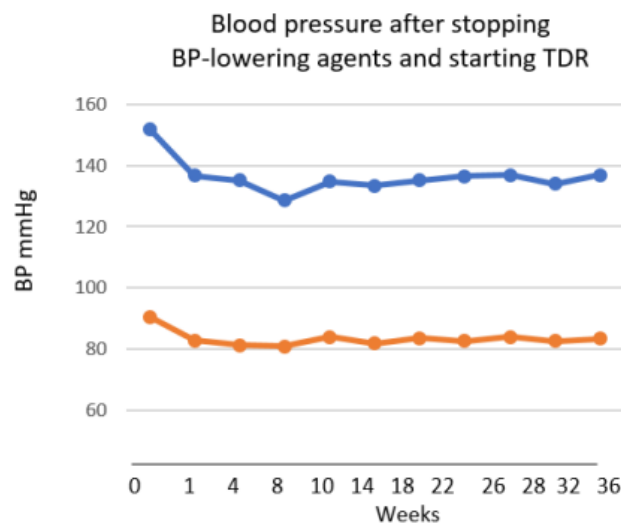
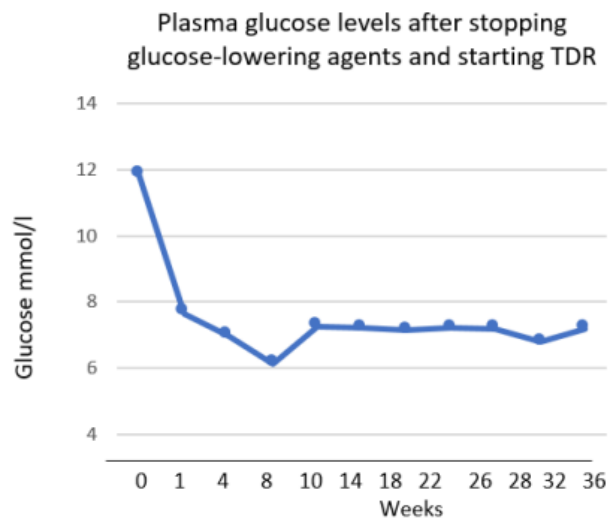
Service provided by **Momenta Newcastle**



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# Deprescribing: First day of TDR



Data from Counterbalance study (informed DiRECT)

- ▶ Starting medications more familiar than stopping to most
- ▶ Comprehensive NHSE Expert Reference Group guidance
  - Safe, evidence-based, pragmatic
  - More conservative than DiRECT
  - **Clinical responsibility remains with referring GP**
  - **Guidance does not replace clinical judgement**

# Glucose-lowering agents



x 1 agent



x 2 agents



x 3 agents

0 Agents

1-2 Agents

3+ Agents

Insulin

STOP medications at start of TDR

STOP 2+ agents  
STAY on metformin or other 1<sup>st</sup> line agent (not sulfonylurea/SLGT2i/meglitinide),

Exclusion

Counsel patient about osmotic symptoms & seeking support

Complete Referral & Medication Adjustment Form (RAMAF):  
1 copy to patient (what to do on 1<sup>st</sup> day TDR)  
1 copy to provider (referral)  
Note: This MUST be completed even if not on any medications or no adjustments are needed

Use clinical judgement. Give clear advice NOT to adjust medications until day 1 of weight loss diet (TDR)

Commence total diet replacement (TDR) products

# Which glucose-lowering agents are safe with TDR?



Class of medication	Examples of drugs	Is this safe with TDR?
Biguanides	Metformin	Yes – safe
Sulfonylureas	Gliclazide, Glibenclamide, Glimepiride	No – risk of hypoglycaemia
Meglitinides	Repaglinide, Nateglinide	No – risk of hypoglycaemia
Thiazolidinediones	Piogliazone	Yes - safe
DPP4 inhibitors (-gliptins)	Linagliptin, Alogliptin, Sitagliptin, Saxagliptin, Vildagliptin	Yes - safe
SGLT2 inhibitors (-flozins)	Dapagliflozin, Canagliflozin, Empagliflozin, Ertugliflozin	No – risk of ketoacidosis
GLP-1 analogues (-tides)	Exenatide, Dulaglutide, Liraglutide, Lixisenatide, Semaglutide	Yes - safe
Alpha-glucosidase inhibitors	Acarbose	Yes – safe

(insulin is not included here as people treated with insulin are not eligible for the NHS LCD Programme pilots)

NHS England and NHS Improvement

# Restarting glucose-lowering agents

If Momenta flags that blood glucose is  $>15$ , or HbA1c at 6 or 12 months has risen:

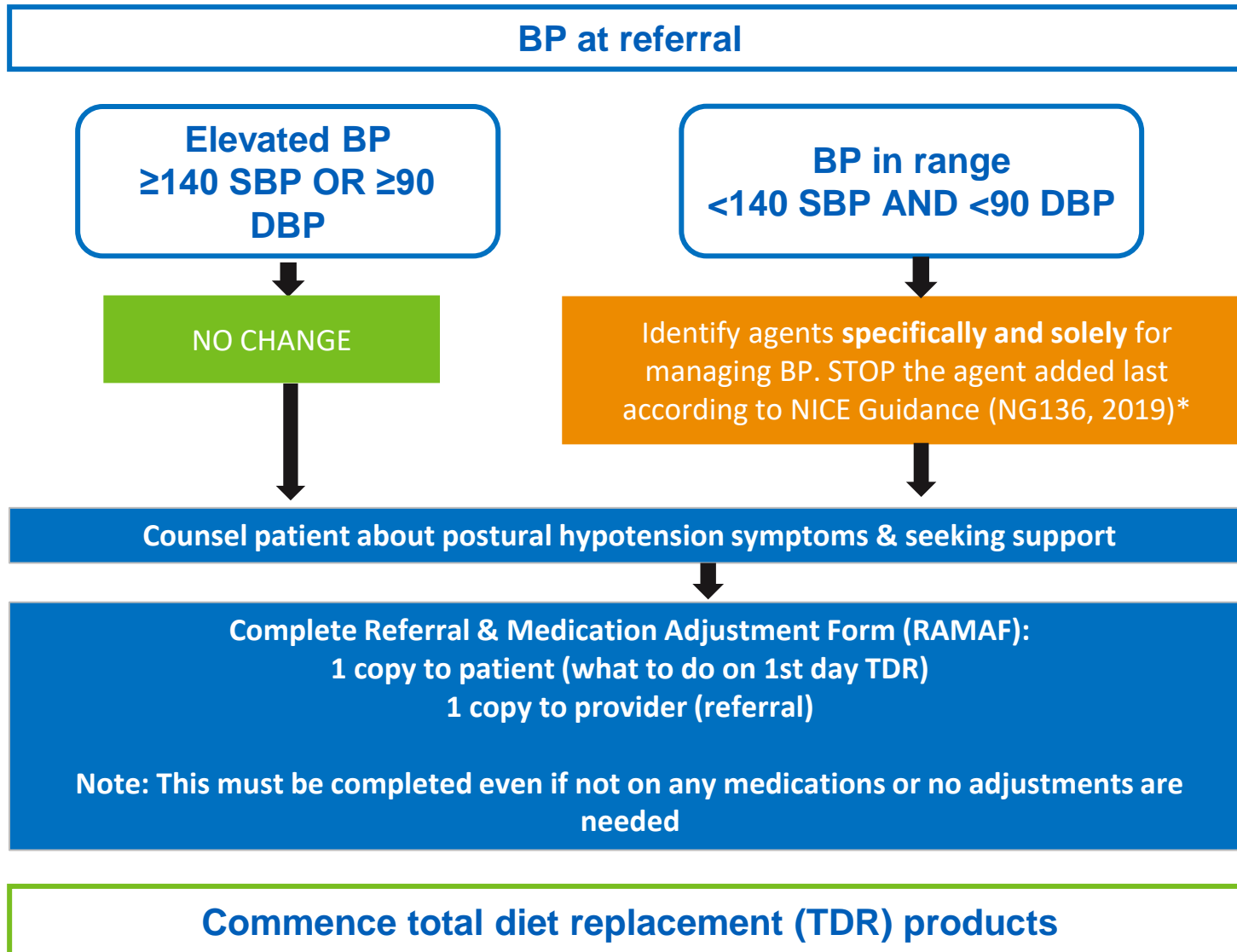
- Metformin first line and is also safe in TDR
- Pioglitazone or DPP4 inhibitors are also safe in TDR

Sulfonylureas, meglitinides or SGLT2 inhibitors **MUST NOT** be used during TDR for safety reasons



If insulin initiation is deemed clinically necessary at any stage patients **MUST** stop the programme

# Adjusting BP-lowering agents



i.e. not also being used for nephropathy, angina, heart failure, BPH, migraines etc

Use clinical judgement. Give clear advice NOT to adjust medications until day 1 of weight loss diet (TDR)

# Which BP medication to adjust?



Check notes and check with patient if any of the BP medications are also prescribed for another reason

e.g. nephropathy, angina, heart failure, BPH, migraines

Stop the agent that is purely prescribed for BP which would have been added last according to current NICE guidelines.

This would be (in order of stopping first):

Spirolactone or alpha-blocker or beta-blocker

Calcium-channel blocker or Thiazide diuretic

ACE-inhibitor or Angiotensin receptor blocker

If the patient is taking agents which affect blood pressure but **all** are being used for other indications then **cautiously reduce the dose of one or more agent in discussion with the patient.**

# Subsequent BP agent adjustment



## Blood pressure too high

- SBP 160-179 OR DBP 100-119 : Increase or uptitrate as per NICE Guideline
- SBP  $\geq$ 180 OR DBP  $\geq$  120: Same day contact with GP practice. Increase/uptitrate per NICE



## Blood pressure too low

- SBP<90 or DBP<60 or postural symptoms reported: Repeat the same process for BP adjustment (on previous slide)

Agents being used specifically and solely for managing BP in a particular patient, are the priority for adjustment



# Medications needing adjustment: Weight / dietary changes



Some medications may need to be adjusted due to changes in body weight or dietary intake

Some may be prescribed or administered by other services or settings

Ask yourself 'if someone lost weight or had a major dietary change, is the dose of this medicine likely to need adjustment?'

Responsibility of referrer to make sure that processes are in place for medications to be adjusted

If this cannot be done safely then the patient should not be referred to the T2DR programme



Mid and South Essex  
Integrated Care  
System



# Examples – not exhaustive

- Warfarin
- Direct oral anticoagulants (DOACs)
- Digoxin
- Phenytoin
- Ciclosporin
- Antifungals voriconazole
- Long term antibiotic therapy (e.g. isoniazid) Low molecular weight heparin
- Infliximab (and other biologics)
- Long term antibiotic therapy (e.g. macrolides, aminoglycosides, fluoroquinolones, beta lactams)

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- ♥ **Referral support**
- ♥ Next steps

# Making a successful referral



## Step 1: Identify & invite eligible patients

**Search, screen and invite:** Search / screen, template SMS / letter, patient landing page

**Usual care:** Discuss at diagnosis, annual review, patient request

**Bespoke:** Patient event

## Step 2: Referral appointment, including medications adjustments

**Appointment (typically 15 mins):** Explain programme and discuss medication changes

Make patient aware medication changes to start on **day 1 of TDR**

Provide patient with **copy of MAF**

## Step 3: Send referral

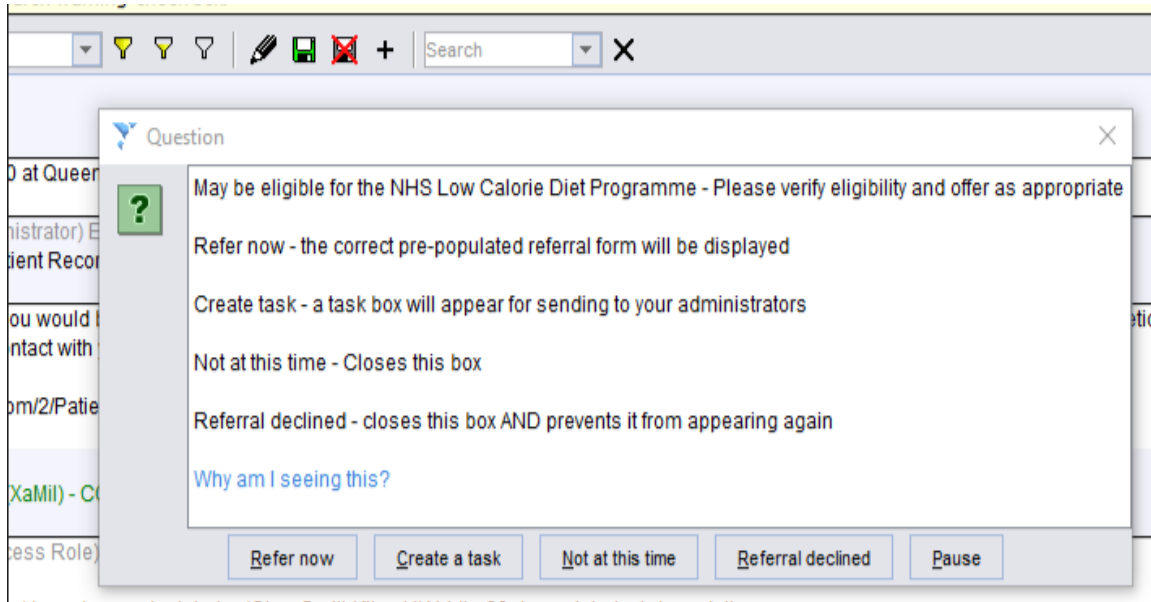
Ensure all sections on referral form and MAF are fully completed and email to:

[momenta.t2dr-mse@nhs.net](mailto:momenta.t2dr-mse@nhs.net)

# T2DR referrals using SystemOne (1)



- When a health care professional opens a patient's notes, a pop up will appear if the patient is eligible for the programme
- Note reference to 'NHS Low Calorie Diet Programme'*



# T2DR referrals using SystemOne (2)



- Complete the information required and click 'OK'

Sender

- A textual sender
- An entry in the address book
- A SystemOne user
- The patient
- This organisation
- Patient's registered GP
- Next of kin
- Patient's usual GP
- Relationship
- Me
- Referrer

Recipient

- A textual recipient
- An entry in the address book
- A SystemOne user
- The patient
- This organisation
- Patient's registered GP
- Next of kin
- Patient's usual GP
- Relationship
- Me
- Referrer

Save as Default

OK Cancel

# T2DR referrals using SystemOne (3)



Ensure the patient's details are correct

New Letter

Other Details... Exact date & time Mon 30 Oct 2023 11:18

Changing the consultation date will affect all other data entered. To avoid this, cancel and press the 'Next' button [Hide Warning](#)

Recipient

Name

Organisation

House name

Road

Locality

Town

County

Postcode

Sender

Name First Name Middle Names Surname

Organisation Queensway Surgery

House name Address Book...

Road 75 Queensway Directory...

Locality Telephone 01702 463333

Town Southend-on-Sea Fax 01702 603026

County

Postcode SS1 2AB Find Add Map

Writing

Editor  SystemOne  MS Word


Template Choose Template... MSE NHS Low Calorie Diet (LCD) Referral Form S (OVIVA).docx

Letter type Referral Save as Default

Write Now Create Task to Write Later Cancel

# T2DR referrals using SystemOne (4)


- Complete the referral and medical adjustment form and email to the provider: [momenta.t2dr-mse@nhs.net](mailto:momenta.t2dr-mse@nhs.net)

**NHS Type 2 Diabetes Path to Remission Programme Referral** 

The NHS Type 2 Diabetes Path to Remission (T2DR) Programme, formerly known as the NHS Low Calorie Diet provides patient choice of an in-person or digital coached one-to-one service over 12 months, including 12 weeks of 800-900 kcal/day formula diet. It is delivered by Momenta.

Referrals can be made by health care professionals including GPs, nurses, pharmacists, dietitians and other approved individuals. Clinical responsibility remains with the patient's GP and medications adjustment guidance must be signed off by an appropriate professional.

**Actions required by referring practitioner BEFORE referral:**

1. Review the patient in a telephone appointment or in person, to support completion of this **Referral and Medication Adjustment form** for all patients.
2. Discuss medication changes with the patient. Instruct them NOT to make changes immediately and to adjust their medications only on the day they start the meal replacements (TDR products).
3. Give or send a copy of the Medication Adjustment Form to the patient whether medications need adjusting or not – **even if the patient is NOT taking any relevant medications.**
4. Email the completed Referral and Medication Adjustment Form to the provider (Momenta) at [momenta.t2dr-mse@nhs.net](mailto:momenta.t2dr-mse@nhs.net). If you have any questions you can also call 0330 056 2457.
5. Further information and referrer and patient resources including videos, guidance and leaflets are available here: [www.momentanewcastle.com/hcp-t2dr-mse](http://www.momentanewcastle.com/hcp-t2dr-mse)
6. Eligible patients should be highlighted by a 'pop-up'. If not please look out for the  icon to indicate eligibility. If this is not displayed below the patient details in the top right of **SystemOne**, the patient is unlikely to be eligible currently. If the icon is shown, please confirm eligibility against the list below.

	Patient name*: Title Full Name	Date of birth*: Date of Birth
<b>Declaration*</b>	By entering my name below I confirm that this patient: <ul style="list-style-type: none"><li>- Meets the inclusion criteria and does not meet the exclusion criteria for this programme (<b>see below</b>);</li><li>- Understands the context and meaning of Type 2 diabetes 'remission';</li><li>- Understands that the NHS T2DR programme is one year long, with 21 coached in-person or digital sessions;</li><li>- Understands that this programme involves an initial 12 weeks of consuming formula diet with other supplements where appropriate instead of their normal food.</li></ul>	



# Top Tips: Searches and referrals



## ♥ Referral And Medications Adjustment Form

- Confirm eligibility criteria are met before proceeding
- Ensure up to date BMI, HbA1c and date of diagnosis
- Ensure patient receives a copy of the Medication Adjustment Form section of the referral and they are clear what they need to change and when (first day of TDR)
- If no medications need adjusting you must still complete the medication adjustment section of the referral (check acutes as well as repeats)
- ***We are unable to progress the referral until it is complete and patients recall the information.***

## ♥ Searches

- Sense check and manual screen to confirm eligibility / appropriateness
- Historical coding challenges
- Long lists can be reviewed and invited in batches/triaged.

### Supporting links & information

- Patient landing page: Service overview, eligibility, readiness - <https://momentanewcastle.com/t2dr-mse>
- Referrer resources: Eligibility, search, forms, patient info, guidance etc. - <https://momentanewcastle.com/hcp-t2dr-mse>
- Contact: [momenta.t2dr-mse@nhs.net](mailto:momenta.t2dr-mse@nhs.net) or 01245 890655
- Referral support session with Momenta - <https://book.ms/b/T2DRWeeklydropinsessions@momentanewcastle.com>

Search and invitation

1. Run T2DR search
2. Confirm patient eligibility and suitability for this programme

Send invite for referral via SMS Landing page / flyer to inform patient about the programme before referral

**Optional** - Invite to practice T2DR event co-hosted by practice and Momenta (in-person or virtual)

SNOMED codes\*:  
Invited: 1239631000000109  
Declined: 1239581000000107

**Referral process**  
Allow 15 mins

- Review patient medications (diabetes, BP and any impacted by weight loss / dietary change)
- Agree medication adjustments and confirm understanding with patient
- Complete the referral form and **send medication adjustments to Momenta**\*\*
- Send patient their medication changes (including if no changes required)

Explain T2DR programme, offer resources / information, discuss referral

- Patient review at:**
- Diagnosis appointment
  - Annual review
  - General appointment
  - Patient request

Usual care

Momenta requests any missing referral / medication adjustment information

GP Practice returns updated form. (Incomplete referrals cannot progress)

**GP Practice care:**

- Repeat HbA1c at 6 & 12 months
- Possible medications / other review
- Continued care for patient e.g. annual review

Momenta notifies GP Practice of threshold breaches / actions / coding / side-effects

**Momenta checks**

- Eligibility
- Medication adjustments (including no changes) in writing
- Missing information

**Patient onboarding**

- Registration
- Individual assessment
- Choice of In-person or Digital

**On programme**

- Patient starts chosen model
- Momenta monitors attendance, weight, BG, BP if on BP meds @ referral

**Patient discharge**

- Ineligible / decline / dropout / complete
- Momenta inform GP Practice, with relevant metrics, coding and/or action
- Momenta signposts participants to relevant services

\*SNOMED codes: Momenta will write to practices with all other relevant codes after referral  
 \*\*The form can be completed by health care professionals other than a GP e.g. practice / diabetes nurses and/or pharmacists as long as the medications adjustments are signed off by a GP or someone they give authority to do so on their behalf.

# Agenda

- ♥ Welcome, recording, questions
- ♥ Background and benefits
- ♥ The programme
- ♥ Roles and responsibilities, pathways
- ♥ Medications adjustment
- ♥ Referral support
- ♥ **Next steps**

# Key contacts

## ♥ Momenta:

- Becky Winbow, Service Manager
- Harry MacMillan, Director
- Dr Ellen Fallows, Medical Director

## ♥ ICB:

- Dr Deepa Shanmugasundaram, Clinical Lead
- Charlotte James, Delivery Specialist

# Referral timelines

♥ To 31<sup>st</sup> January 2024:

- To Oviva as usual
- Transfers by 1<sup>st</sup> April 2024

♥ From 1<sup>st</sup> February 2024

- To Momenta: [momenta.t2dr-mse@nhs.net](mailto:momenta.t2dr-mse@nhs.net)
- Oviva inbox: Auto-response

# Next steps

- ♥ Questions / discussion
- ♥ Follow-up email and pack
  - Slides, resources, pathway, NHSE guidance, recording
  - <https://momentanewcastle.com/hcp-t2dr-mse>
- ♥ Please update your colleagues
- ♥ Ask us any questions by email or at our Drop-in sessions
- ♥ We're very happy to attend PLT / PCN / Practice / DSN / PM / other events
- ♥ Venues: Let us know (venue requirements at end)
- ♥ **We look forward to your referrals!**

Thank you for your time

Becky Winbow

[rebecca.winbow@momentanewcastle.com](mailto:rebecca.winbow@momentanewcastle.com)

Harry MacMillan

[harry.macmillan@momentanewcastle.com](mailto:harry.macmillan@momentanewcastle.com)



Mid and South Essex  
Integrated Care  
System

# T2DR venue requirements



## Essential

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- ♥ Comfortable space for 3 seated participants
- ♥ Chairs and a table / desk
- ♥ Good local public transport (and parking if needed)
- ♥ Clean and appropriately lit and heated / cooled
- ♥ Meet accessibility requirements
- ♥ Free wifi internet access

## Ideally

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- ♥ Open for extended hours (evenings, weekends)
- ♥ Staffed
- ♥ Used for other health / community services
- ♥ Qualified first aider onsite