

Just before we start...



- ♥ 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.
- ♥ Quick questions – show of (virtual) hands:
 - How many of you have referred to the Low Calorie Diet?
 - How many of you are prescribers?

NHS Type 2 Diabetes Path to Remission Programme Nottingham & Nottinghamshire

Referrer support and training
23rd April 2024



Agenda

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

Background and benefits



Research

- ♥ 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

- ♥ 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

- ✔ Piloted as NHS Low Calorie Diet (2020+) in 20 ICBs
 - Including Nottingham & Nottinghamshire
- ✔ 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

- ✔ T2DR provider: Momenta from Feb
 - Previously ABL Health (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



NHS Type 2 Diabetes Path to Remission- **THE PROGRAMME**



- ♥ 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

- 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 ≥ 43 mmol/mol (6.1%)
 2. If **not** on diabetes medication, HbA1c ≥ 48 mmol/mol (6.5%)
 3. In all cases, HbA1c must be ≤ 87 mmol/mol (10.1%)

Exclusion

- 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

* 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

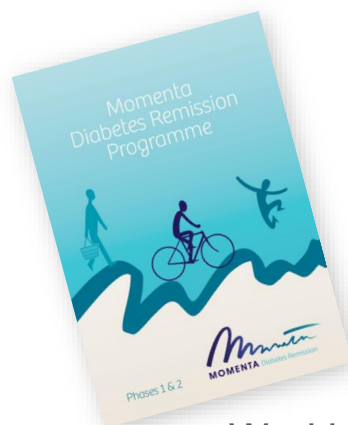


- ♥ No cost to participants

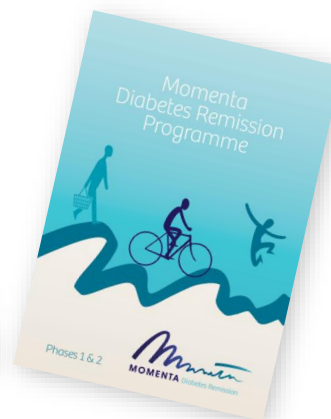
Participant resources: In-person



📖 TDR booklet



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



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



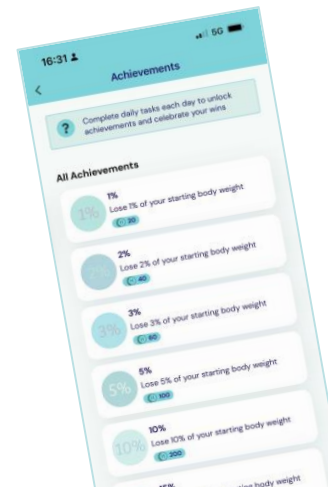
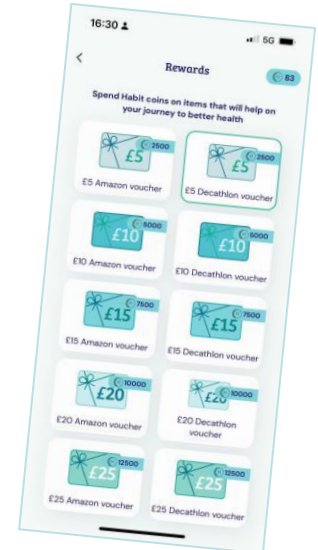
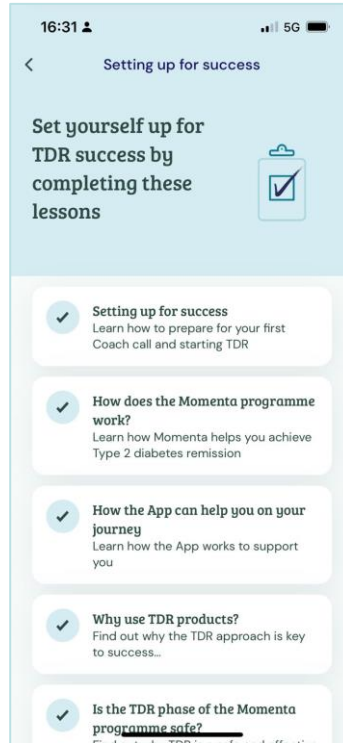
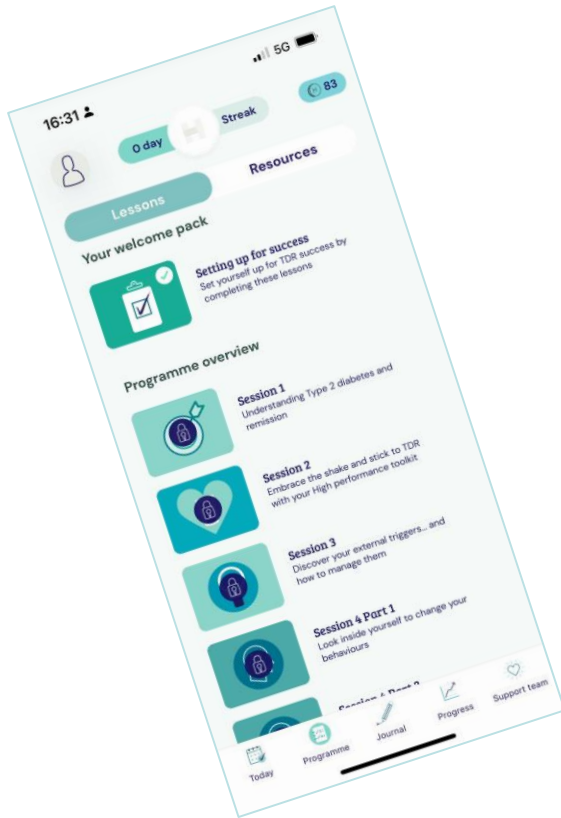
📖 Recipe book



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



Momenta app snapshots: Digital



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- ♥ **Roles and responsibilities, pathways**
- ♥ Medications adjustment
- ♥ Referral support
- ♥ Next steps

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



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Identifying interested patients

Three options

1. Search & invitation

- ♥ Search
- ♥ Screen
- ♥ Invite & signpost

Most efficient

2. Usual care

- ♥ Diagnosis
- ♥ Annual review
- ♥ Patient request

Most relevant

3. Group cnsltns/events

- ♥ E.g. enhanced access (poss w' 1)
- ♥ Or at PCN / community group
- ♥ ICB & Momenta support available

Patient information

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



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.

Service provided by MOMENTA NEWCASTLE

For more details and patient stories: momentanewcastle.com/t2dr-nn

Potential in-person clinic venues



Actual use, order and timing will depend on location and numbers of referrals wanting in-person delivery

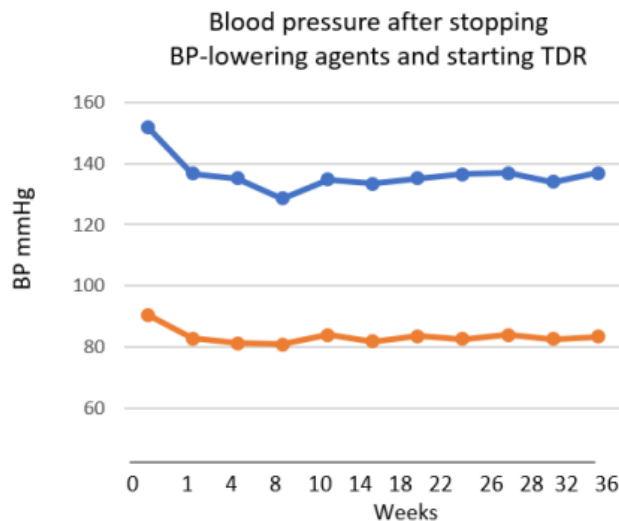
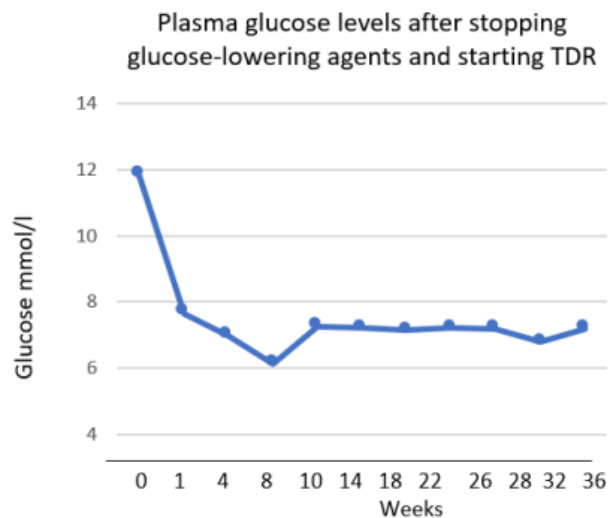
Area	Venue name
Ashfield	Hucknall Leisure Centre
Ashfield	Ashfield Health and Wellbeing Centre
Ashfield	Lammas Leisure Centre
Ashfield	Annesley and Felley Parish Hall
Bassetlaw	Retford Leisure Centre
Bassetlaw	Retford Library
Bassetlaw	Worksop Cricket and Sports Club
Bassetlaw	North Notts Community Arena
Broxtowe	Greasley Sports and Community Centre
Broxtowe	Beeston Rylands Community Centre
Broxtowe	Beeston Library
Broxtowe	Middle Street Resource Centre
Broxtowe	New Stapleford Community Centre
Gedling	Calverton Leisure Centre
Gedling	Newstead Centre
Gedling	Westdale Lane Community Centre
Gedling	Carlton Forum Leisure Centre
Gedling	Arnold Community Centre
Mansfield	Water Meadows Leisure Centre
Mansfield	Ladybrook Community Centre
Mansfield	Shirebrook Village Hall
Mansfield	Shirebrook Leisure Centre
Mansfield	Kingsway Hall

Newark & Sherwood	Rainworth Village Hall
Newark & Sherwood	Halam Village Hall
Newark & Sherwood	Ollerton Jubilee Hall
Newark & Sherwood	Bridge community centre
Newark & Sherwood	YMCA Community and Activity Village
Nottingham City	Central Library
Nottingham City	Strelley Road Library
Nottingham City	Bakersfield Community Centre
Nottingham City	Colwick Community Centre
Nottingham City	Clifton Community Centre
Nottingham City	Djanogly Community Leisure Centre
Nottingham City	Hyson Green Library
Nottingham City	St Leonard's Community Centre
Nottingham City	Dunkirk Community Centre
Nottingham City	All Souls Community Centre
Nottingham City	Bulwell Hall Healthy Living Centre
Rushcliffe	Thurlbeck Community Centre
Rushcliffe	Keyworth Village Hall
Rushcliffe	East Leake Leisure Centre
Rushcliffe	Ruddington Village Hall
Rushcliffe	Rushcliffe Arena

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- ♥ **Medication adjustments**
- ♥ Referral support
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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 1st 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 1st 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

BP at referral

**Elevated BP
≥140 SBP OR ≥90
DBP**

**BP in range
<140 SBP AND <90 DBP**

NO CHANGE

Identify agents specifically and solely for managing BP. STOP the agent added last according to NICE Guidance (NG136, 2019)*

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

Counsel patient about postural hypotension symptoms & seeking support

**Complete Referral & Medication Adjustment Form (RAMAF):
1 copy to patient (what to do on 1st 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 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



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Momenta
MOMENTA NEWCASTLE

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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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-nn@nhs.net

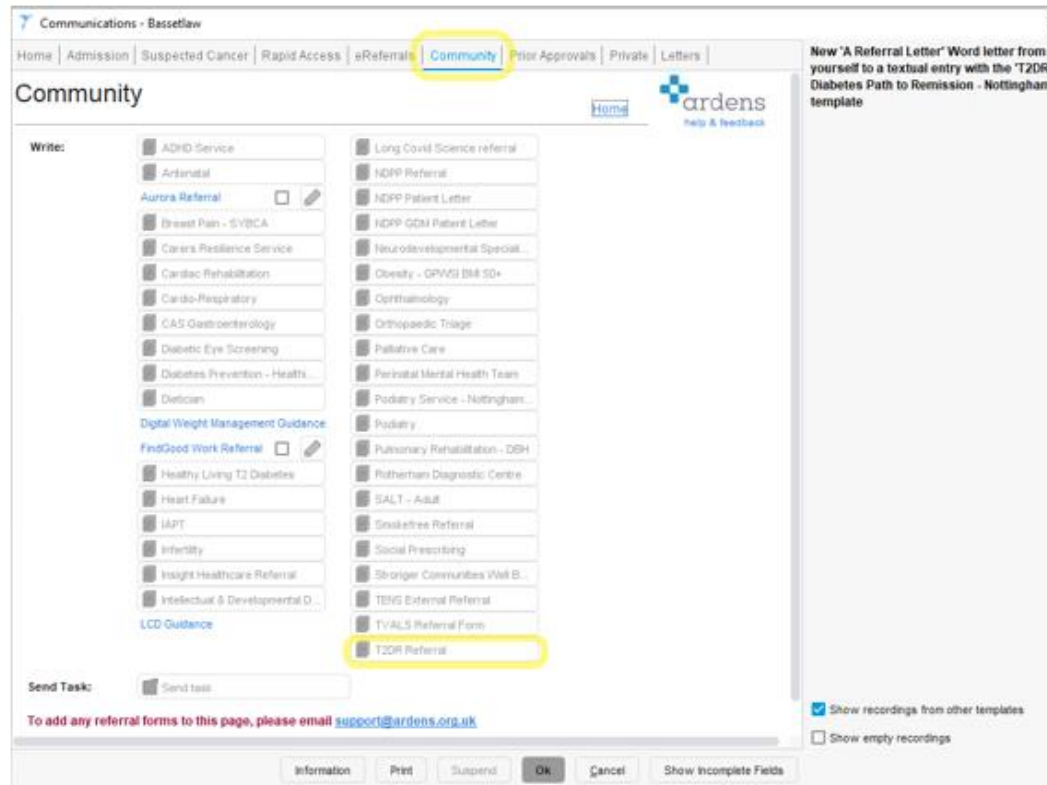


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T2DR referrals: Ardens

For Bassetlaw practices, please use the community section to locate the form. If you are an EMIS practice, you can locate this in the Diabetes folder.



T2DR referrals: Pathfinder

From the Pathfinder click on either Diabetes or Lifestyle buttons (highlighted in yellow)

The screenshot displays the F12 Pathfinder interface. On the left, the 'Referral Tools & Info' menu has 'Diabetes' and 'Lifestyle' highlighted in yellow. The main content area shows 'County (inc. Mid Notts) - Diabetes Referrals'. The 'Community Referrals' section lists several options, with 'Type 2 Diabetes Path to Remission (prev. NHS LCD)' highlighted in yellow. The 'Patient Information' section on the right includes links for 'Diabetes & Ramadan', 'Type 1 Self Help', and 'Type 2 Self Help'.

T2DR referrals: Pathfinder

From the Pathfinder click on either Diabetes or Lifestyle buttons (highlighted in yellow)

Type 2 Diabetes Path to Remission (prev. NHS LCD)

Type 2 Diabetes Path to Remission

Type 2 Diabetes Path to Remission Programme (Previously NHS Low Calorie Diet)

F12 pathfinder

[Service Information](#) [Guidance for GP Practices and Referrers](#) [Medications Adjustment Flowchart](#) [Pathway](#) [Practice Poster](#)

Core Health Obs | Previous Diabetes Review | BP Graph | View Latest BP & Bloods

Past Medical History | Core Obs - Past Info | View Repeats | Graph HbA1c | View Frailty

Category	Action	Checkbox	Edit
Invite	Total diet replacement programme invitation	<input type="checkbox"/>	
	Total diet replacement programme declined	<input type="checkbox"/>	
Referral	Referral Form	<input type="checkbox"/>	
	Referral to total diet replacement prog - manually add code	<input type="checkbox"/>	
Programme	Total diet replacement programme commenced	<input type="checkbox"/>	
	Did not complete total diet replacement programme	<input type="checkbox"/>	
	Total diet replacement programme completed	<input type="checkbox"/>	
Contraindication	Total diet replacement programme contraindicated	<input type="checkbox"/>	
Remission	Type II diabetes mellitus in remission	<input type="checkbox"/>	

Patient Information

- [Leaflet](#)
- [QR Code](#)
- [Website Resources](#)

Send SMS / e-Mail

T2DR referrals: SystmOne

For SystmOne, please use the referral directory.

Communications - Nottingham & Nottinghamshire

Home | Admissions | Suspected Cancer | Routine | CURRT | Prior Approvals | Derm | MSK | IPP | **Referral Directory 1** | Ref. | < | >

Referral Directory Page 1

Home | help & feedback

Write

Clinics

- Ambulatory Clinic
- Anticoagulation Clinic
- Conc. Pain Service - PCS
- Dermatology DCC-18 week p...
- Drug Administration Chart
- Echo / 24 Hour ECG
- ENT Secondary Care - SFH
- Fertility Clinic
- Gynaecology Secondary Care
- HealthHarmonia NOLIS
- Home Oxygen Assessment
- Home Oxygen Consult & HO...
- Memory Clinic M&A
- Microsuction Roundwood
- Microsuction - Roundwood S...
- Microsuction Willowbrook
- Microsuction - Willowbrook M...

Clinics Contd

- Neurological Outpatient Thera...
- Primary Care SD&C Decision ...
- Pre-Op Clinic Questionnaire
- Pulmonary Rehab Clinic

Task Recipient must be North CAS

- Sarcoma Routine - NUH
- Teledermatology
- Voice Clinic Referral - Sherw...
- Community Dental Services
- Individual Funding Request (F...
- NAMS Patient Referral
- Specialist Continence Referral
- Send Specialist Continence

Diabetes

- DESMOND
- Select 'DESMOND' as task recipient
- DESMOND - For When No Co...
- Diabetes Service (High Point)
- Digital Weight Management Guidance
- Eye Screen Exclusion Form
- Eye Screening
- Eye Screen - Pregnancy
- Eye Screen - Remission Reso...
- Foot Clinic
- Healthy Living T2 Diabetes
- Low Calorie Diet Guidance
- NDPP Invitation Letter
- NDPP Referral - Nottingham
- T2DR Referral**

Send Task Send task

Referral Guidance & Pathways

Show recordings from other templates
 Show empty recordings

Information | Print | Suspend | **Ok** | Cancel | Show Incomplete Fields

T2DR referrals

- Complete the referral and medical adjustment form and email to the provider: momenta.t2dr-nn@nhs.net

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

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 800-900 kcal/day formula diet and no alcohol for 12 weeks. 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:

- Review the patient in a telephone appointment or in person, to support completion of this **Referral and Medication Adjustment form** for all patients.
- 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).
- 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.**
- Email the completed Referral and Medication Adjustment Form to the provider (Momenta) at momenta.t2dr-nn@nhs.net If you have any **questions** you can also call 0330 056 2457.
- Further information and referrer and patient resources including videos, guidance and leaflets are available here: www.momentanewcastle.com/hcp-t2dr-nn

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

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-nn>
- Referrer resources: Eligibility, search, forms, patient info, guidance etc. - <https://momentanewcastle.com/hcp-t2dr-nn>
- Contact: momenta.t2dr-nn@nhs.net or 0115 704 2139
- Referral support session –with Momenta <https://outlook.office365.com/owa/calendar/T2DRWeeklydropinsessions@momentanewcastle.com/bookings/s/R9Y5ftq0OUCK-27aY0yaTw2>

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)

Usual care

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

Explain T2DR programme, offer resources / information, discuss referral

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.

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

Next steps

- ♥ Questions / discussion
- ♥ Follow-up email and pack
 - Slides, resources, pathway, NHSE guidance, recording
- ♥ 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!**

Key contacts



♥ Momenta:

- Referrals: momenta.t2dr-nn@nhs.net
- Patient landing page: <https://momentanewcastle.com/t2dr-nn>
- Referrer resources: <https://momentanewcastle.com/hcp-t2dr-nn>
- [Becky Winbow](#), Service Manager
- [Harry MacMillan](#), Director
- [Ramnik Sembi](#), Engagement Lead
- Dr Ellen Fallows, Medical Director

♥ ICB:

- [Laura Stokes-Beresford](#), Senior Commissioning Manager
- [Adam Gunby](#), Diabetes Project Officer
- Asha Gudibandi, Diabetes Project Manager
- Dr Stephen Wormall, Clinical Lead



Thank you for your time

Becky Winbow

rebecca.winbow@momentanewcastle.com

Harry MacMillan

harry.macmillan@momentanewcastle.com



**Integrated
Care System**
Nottingham & Nottinghamshire

T2DR venue requirements



Essential

- ♥ 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

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