



# National Obesity Audit (NOA): Dashboard guidance for the public

National Obesity Audit main page >

NHS England National Obesity Audit main page. https://digital.nhs.uk/data-and-information/ publications/statistical/national-obesity-audit

# Introduction

The National Obesity Audit (NOA) is funded by NHS England and began in 2021. We have prepared an introduction to the National Obesity Audit (NOA) project for patients and the public, which is available <u>here</u> and provides a general background to the audit.

This document is a specific guide to one of the dashboards that is published by the NOA – the NOA Bariatric Surgical Procedures Dashboard. This was first published in 2022 and is updated regularly with the latest data available.

# What information is being presented?

The information is data about people receiving bariatric surgery in the NHS from 2018-2023 (England only) with figures showing;

- **1.** Number of people receiving bariatric surgery
- 2. Procedure types
- **3.** Demographic breakdowns by; age, deprivation, ethnicity, gender and severe mental illness
- **4.** Average distance travelled to treatment
- Length of stay at the hospital by procedure type

The dashboard makes use of data already collected from hospitals.

# Purpose of this guidance

This short guide aims to help the public understand how to use the dashboard. It includes a glossary and a list of bariatric procedure types at the back.

# **NOA User Panel**

As part of the NOA, HQIP is working with a panel of service users and carers who have experience of overweight and obesity. They have co-produced this guide.

#### **User Panel voice**

Members of the public who are interested in understanding the state of bariatric surgeries in England can access the dashboard to gather information and insight.





# Guide to using the dashboard

Pages 1-3 of the dashboard display instruction and definitions.

Pages 4-9 takes you to presentations of the data broken down by organisation type, Integrated Care Board<sup>1</sup> level and hospital level. Tabs on each page allows you to select the year from 2017-2023.

The following images are screenshots from each of those pages from the dashboards to help you understand the graphs and what they tell you.

At the end of this guide is a <u>list of bariatric</u> surgery types and a glossary.

To feedback or comment on this guide please contact kim.rezel@hqip.org.uk

#### **User Panel voice**

I found it quite easy to use and it was quite good in the fact that the procedures were explained to me (Key definitions) and the navigation of the actual dashboard was really good and the font was big as I have issues with reading.

I am in the Northwest London area and I clicked on the trust there on the dashboard. I could see the number of operations and the different types of bariatric surgeries that are available and how they had increased or decreased which I thought was really good. What was interesting was how the these were dispersed throughout the country. I don't really understand why it's more in some places and more others. But essentially what I thought was the dashboard itself was very helpful.

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Bariatric surgery numbers	4	to hospitals	
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# Instruction page

This is the home page for the bariatric surgical procedures dashboard.

The left hand side tabs indicate the different pages of the dashboard. Tabs 1-3 are information about the NOA and key definitions.

	About:			
Home Page				
			er comparable data from the different types of adult and children's we y of care available to those living with overweight and obesity in Eng	
Instructions	,	gland as part of the National Clinical Au	udit and Patient Outcomes Programme (NCAPOP). See National Ot	besity_
	Audit for more information.			
Key Terms and Definitions			-18 to 2021-22 and provisional data for Q1 - Q4 2022/23 on people ode Statistics, NHS England. Further details on the methodology and	
	quality are on the publication page. As	the methodology used to derive these t	figures has been newly developed with clinical input, these numbers	
Bariatric Surgical	be viewed as developmental until we fu	urther refine the methodology with user	s and stakeholders.	
Procedures			tional, NHS England Region, Integrated Care Board, Sub-Integrated	
Integrated Care			ICB & SubICB, these are aggregate totals of the providers that subn al Commissioning Groups) have been mapped to the latest Integrate	
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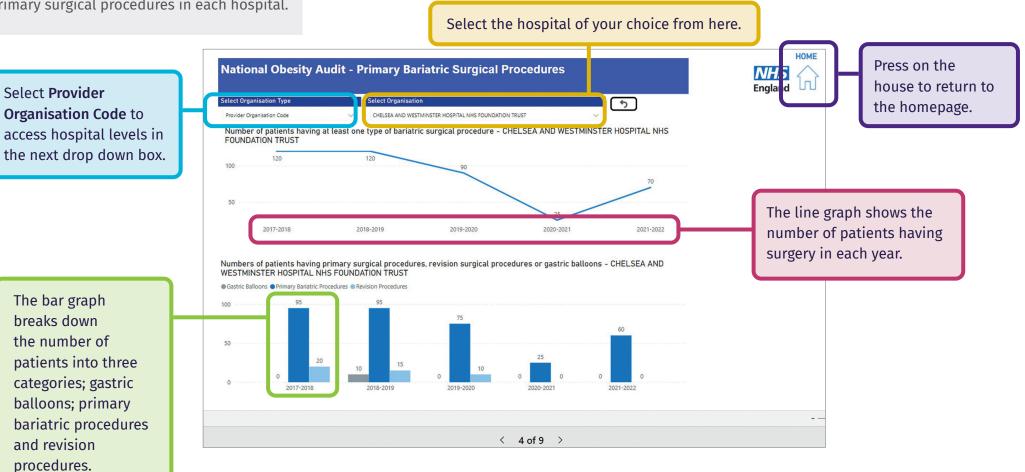
Contact details are available if you have any issues using the dashboard.





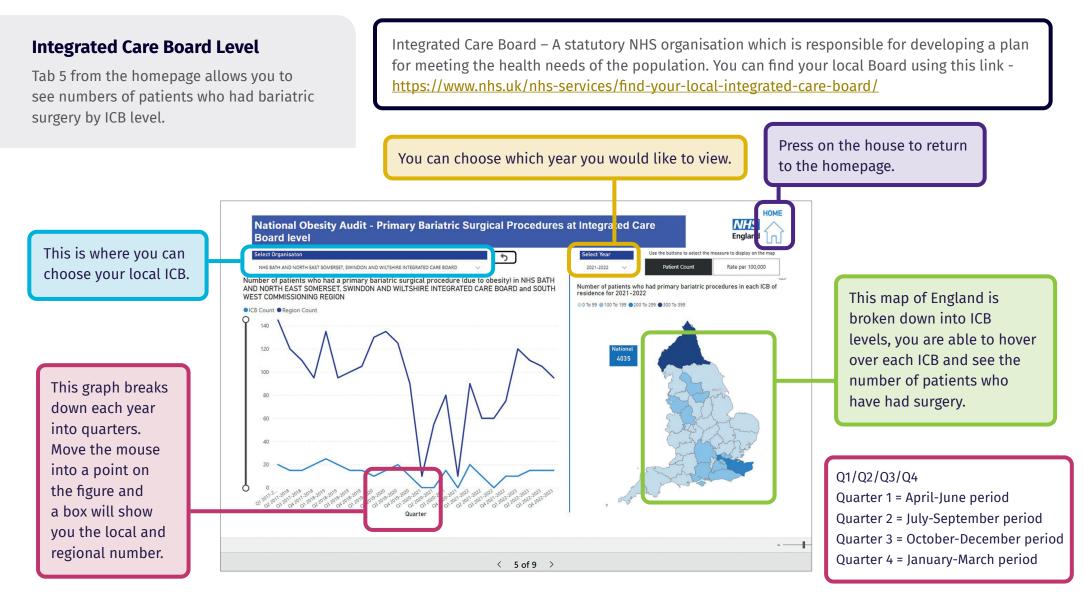
## **Bariatric Surgical Procedures**

Tab 4 shows the numbers of patients having primary surgical procedures in each hospital.







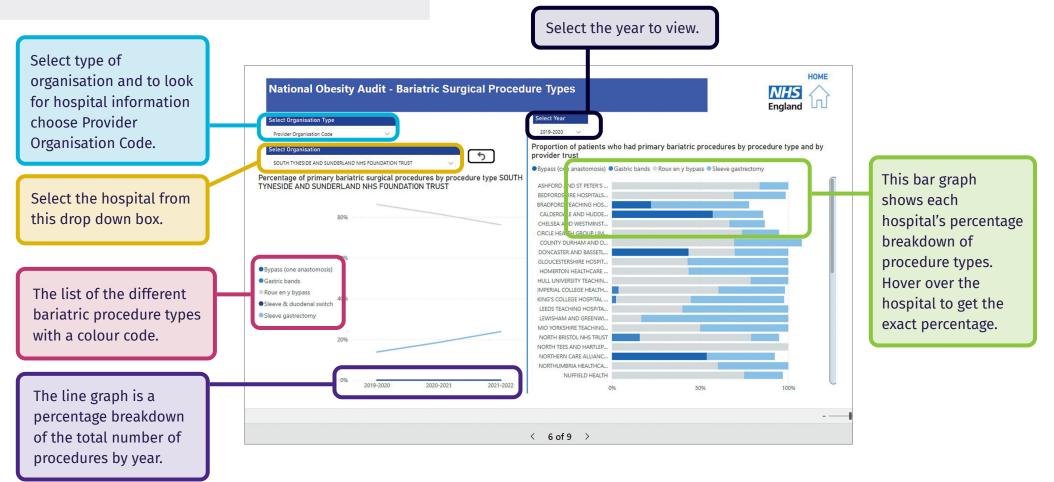






### **Procedure Types**

Tab 6 shows the percentage breakdown by the different procedure types in each organisation from years 2019-2023.

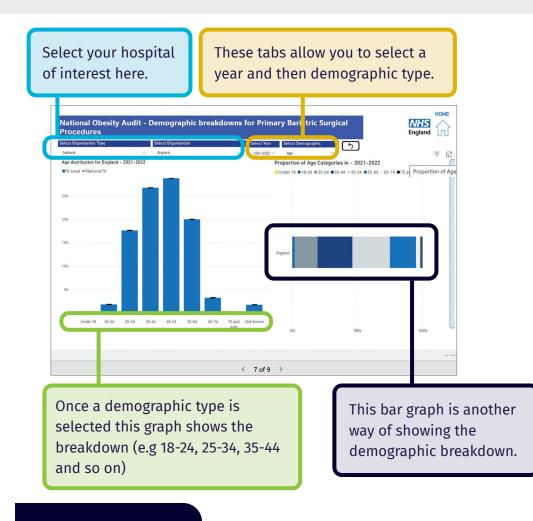




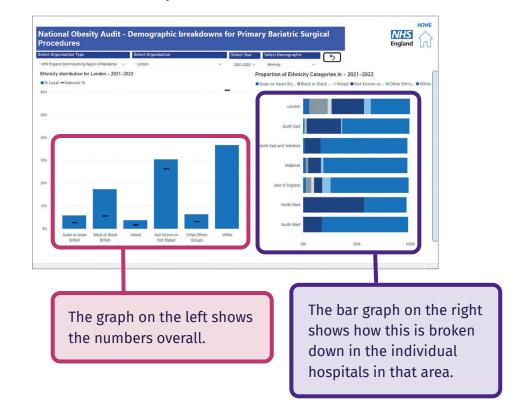


# **Demographic breakdowns**

Tab 7 links through to this page that shows the demographics of patients who have had bariatric procedures by Age; Deprivation; Ethnicity; Gender; Severe Mental Illness (SMI) in each organisation.



This screenshot shows the breakdown of people using the service is this area by different ethnicities.







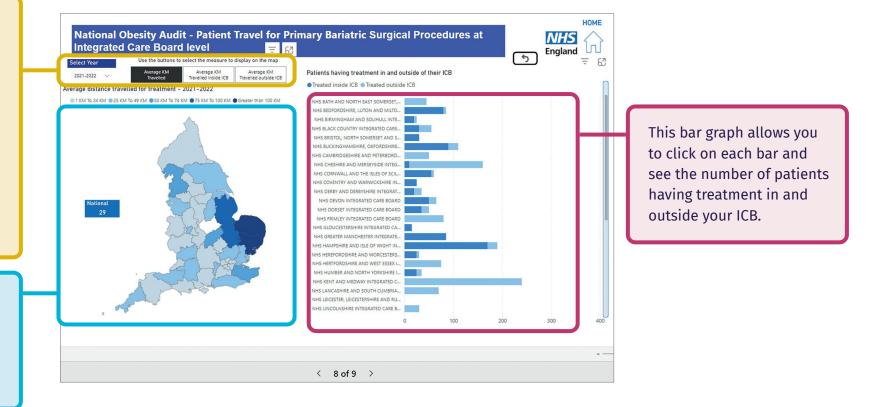
# **Patient Travel at ICB level**

This page (tab 8) shows the average distance travelled for treatment both inside and outside of your ICB.

Select year and in which measurement you would like to see the distance travelled for treatment.

Overall average distance travelled in kilometres Average distance travelled inside your ICB Average distance travelled outside your ICB

Click on a section which is divided by ICBs and the corresponding bar graph will show each hospitals figures.

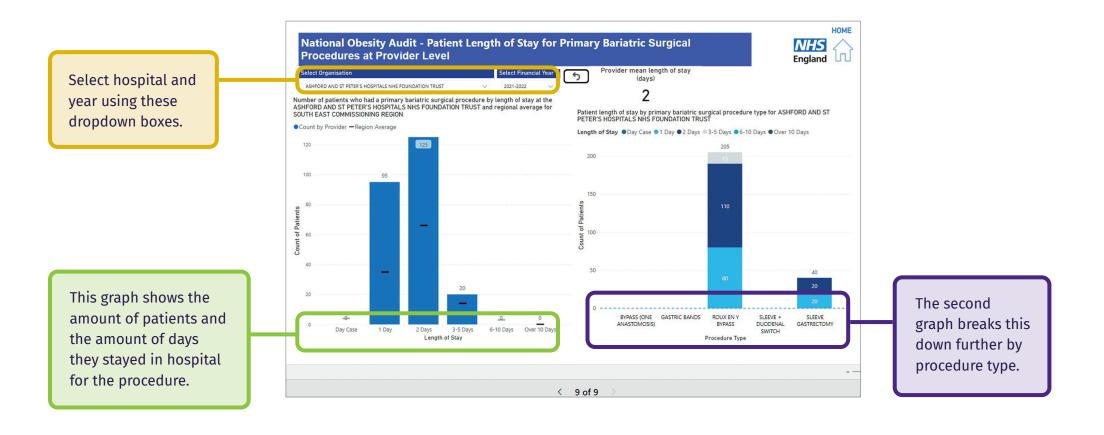






# Patient length of stay

This page (tab 9) shows the number of patients and how long they stayed in hospital for the procedure - years 2017-2022.







# **Bariatric procedure types**<sup>2</sup>

**Bariatric** - The field of bariatrics focuses on and treats those who have obesity to promote weight loss and increase overall health with diet, exercise, and psychological therapy. When thinking of bariatrics, you may think of bariatric surgery, which is also known as metabolic or weight-loss surgery.<sup>3</sup>

**Bariatric surgery** or weight loss surgery is sometimes used as a treatment for people who are living with obesity.

**Primary bariatric procedures** – types of surgery that involve making changes to your digestive system to help you lose weight – first time surgery.

**Revision procedures** – A procedure to change, maintain or repair a previous weight-loss surgery.

**Gastric balloons** – A soft balloon filled with air or salt water placed into the stomach using a thin tube to pass down the throat (gastroscopy). This is a temporary (maximum 6 months) non-surgical weight loss procedure which will reduce appetite. **Gastric bypass** - A procedure which involves stapling the lower part of the stomach (Antrum) to create a long pouch, from which the small intestine is then connected. The rest of the stomach remains, however no food will reach it. This restricts the amount of food that can be eaten and the by-passing of the small bowel results in a reduction food absorption.

**Sleeve gastrectomy** - The surgery involves removing 75% of the stomach, resulting in a smaller stomach. The rest of the gastrointestinal tracts remains untouched. The new stomach holds a considerably smaller volume than the normal stomach and helps to significantly reduce the amount of food that can be consumed.

**Gastric band** - A gastric band is a band placed around the stomach, creating a small pouch towards the top. The band is connected to a small device placed under the skin (usually near the middle of the chest). This is so the band can be tightened post-surgery. The band will usually be tightened for the first time about 4 to 6 weeks after surgery. As a result of the small pouch, it takes less food to fill the pouch therefore reducing appetite.

**Roux en y Gastric Bypass** - The surgery involves stapling across the stomach to create a small pouch (size of an egg), the 'new' stomach. The rest of the stomach remains; however no food will reach it. The small intestine is re-plumbed creating a short cut from the new stomach to the mid-part of the small intestine, bypassing the first part of the small intestine. The rerouting of the food stream alters gut signals, leading to suppressed appetite, improved blood sugar levels and reduction in food absorption.

**Sleeve & duodenal switch** - Combines qualities of both the sleeve gastrectomy and the gastric bypass. The stomach is stapled and the outer 80% is removed thus reducing its size. The intestines are re-plumbed so that food passes from the stomach into the distal part of the small intestine (further down than with a gastric bypass). The surgery works by altering gut signals that regulate appetite and blood sugar.

3 https://www.pennmedicine.org/updates/blogs/metabolic-and-bariatric-surgery-blog/2019/april/what-does-bariatric-mean





# Glossary

**Clinical audit** – a way to find out if healthcare is being provided in line with standards and lets people know how the service compares with others.

NCAPOP – National Clinical Audit and Patient Outcomes Programme – Projects that are commissioned by HQIP https://www.hqip.org.uk/

**Dashboard** – a visual tool that displays data in a more accessible and interactive way for users

**Provisional** – an early cut of the data that remains to be finalised (and published as final data later) **Hospital Episode Statistics** – hospital admissions data submitted to NHS England by each hospital Trust

**Methodology** – an explanation of methods used to gather information

**Data quality** – this examines the coverage and completeness of data submitted. This also looks at the validity of submitted data.

Integrated Care Board – A statutory NHS organisation which is responsible for developing a plan for meeting the health needs of the population. You can find your local Board using this link - <u>https://www.nhs.uk/nhs-services/findyour-local-integrated-care-board/</u>