

NHS Lancashire and South Cumbria ICB

Oviva Tier 3 Referral Information Pack

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Understanding the criteria

Lancashire and South Cumbria

Inclusion Criteria - To access Tier 3 Weight Management service



- Age at least 18 years old
- The patient has engaged with community weight services over a 2 year period, but they have failed to achieve or maintain weight loss goals.

BMI Criteria:

- BMI ≥ 50 kg/m²* may be referred directly (without evidence of compliance with Tier 2)
- BMI ≥ 40 kg/m²*
- BMI ≥ 35 kg/m²* **and** has **one or more weight** related co-morbidities (**complete list**):
 - Established cardiovascular disease
 - Type 2 diabetes
 - Hypertension
 - Idiopathic intracranial hypertension
 - Obstructive sleep apnoea
 - Non-alcoholic steatohepatitis (NASH)

*There is a tolerance unit of BMI 2.5 on each element of the criteria above in relation to at-risk groups that have higher obesity prevalence rates particularly those with black African or Caribbean and South Asian origin.

Exclusion criteria



- Patients under 18 years old
- Patients who are currently successfully losing weight with dietetic or reputable evidence-based weight management intervention.
- Pregnant women - women becoming pregnant during the programme will be able to pause the programme ('time out policy') and return to the service following the birth.
- Patients who have been previously referred into the service and have left the pathway early or have disengaged from the services, who are seeking to re-enter as a re-referral will not be eligible within 12 months.
- Patients with uncontrolled hypertension/heart condition/medical condition preventing increase in activity level.
- Patients with unstable or severe mental illness beyond the expertise of primary care.
- Patients with active eating disorders.
- Patients who have made suicide attempts within the last year.
- Patients who have self-harmed in the past 3 months.
- Patients who have made plans to commit suicide in the past 3 months.
- Patients who have had bariatric surgery.

How to Refer patients in Lancashire and South Cumbria



1. Locate the Referral Form

- EMIS users: Import the auto-populating referral form template using one of the following methods:

- a) Import using Resource Publisher ([see instructions here](#))
- b) Import using Template Manager ([see instructions here](#))

Import the file below to enable access to an auto-populating version of the Oviva Consultant Led Tier 3 Weight Management referral form, which you can store locally.

Import File

Do not import file until all instruction steps are followed to ensure merge fields are intact so all values populate correctly.

- **SystemOne users:** Scan the QR code to download the referral form.



2. Submit the Referral

Once completed, please send the referral form and any relevant attachments using one of the following methods.

- Email: ovivauk.t3wm@nhs.net
- NHS e-Referral Service (eRS) Please use the Secondary Care menu and search the following terms on the system:

Name: Tier 3 Weight Management Service (medical) – Oviva

Speciality: Endocrinology & Metabolic Medicine

Clinic type: Not otherwise specified

Organisation or site name: Oviva



Meet your Service Engagement Manager, Kimi

Book a short call with me to learn how Oviva can support your patients, including referral guidance, conversation resources, and a quick demo of the app.



Referral checklist



Use this quick checklist before submitting a referral to support rapid triage, safe clinical decision-making and reduced delays to your patient.

Please ensure all fields are completed and supporting documents are attached when submitting a referral to our consultant-led Tier 3 Weight Management programme.

- ✓ Confirmation that the patient meets the eligibility criteria outlined on page 1 of the referral form
- ✓ Referring GP's name
- ✓ Blood pressure reading
- ✓ **Recent blood results (must be within 12 months):**
 - HbA1c (mmol/mol)
 - Renal Function (eGFR)
 - Total cholesterol or serum cholesterol
 - HDL cholesterol
 - LDL cholesterol
 - Thyroid function (TSH)
- ✓ Height, weight and calculated BMI (kg/m²)
(Confirmation that weight has been validated in clinic within last 3 months)
- ✓ Confirmation of Tier 2 engagement within the last 2 years (unless BMI ≥50)
- ✓ Retinopathy- if last 2 screening results were normal, should be within last 24 months
(Not applicable for patients with new diabetes diagnosis (<12 months))
Please note one of the three tick boxes must be completed.
- ✓ Summary of recent medical history/comorbidities
- ✓ Current medication list - including repeat and acute medications.

Referrals missing any of the information above cannot be accepted. This is to ensure the patient's safety. In these instances, we will contact the GP practice to obtain the missing information.

Unfortunately, if this information is not received, the referral will be rejected.

Common Referral Errors

- Eligibility boxes not ticked
- Any of the information listed above is missing (most commonly confirmation that the patient meets the eligibility criteria, thyroid function, total cholesterol/serum cholesterol, LDL and HDL cholesterol results)
- If past medical history contains any apparent information that could affect patient's eligibility and needs to be clarified by the team (e.g. mental health entries)



Enrolment survey

After referral acceptance, patients receive an online survey to collect additional information used to confirm medical history, assess readiness to change, screen for exclusions (e.g. pregnancy, severe mental health conditions, eating disorders, substance misuse), and support MDT triage to the appropriate pathway.

Responses may trigger automatic disqualification or clinical review.

If a patient is disqualified due to BES or PHQ-9 responses, safeguarding procedures are followed and the patient is referred back to their GP. If the GP later confirms eligibility, a new referral must be submitted.

If disqualification occurs due to incorrect survey responses (e.g. uncontrolled hypertension), referrals may be reinstated with GP confirmation that the patient is clinically suitable.

If a patient is incorrectly disqualified due to missing data, reinstatement can be requested by contacting ovivauk.t3wm@nhs.net with evidence that the required information was submitted within the timeframe.



Expected Timeframes



Initial triage: We aim to process referrals within 48 hours from referral receipt. If information is missing, the Oviva team will contact the practice to request completion.

Patients may also be notified but not asked to complete.

Practices are given **56 days to respond before the referral is closed.**

If no response is received, the referral is closed and a re-referral will be required with all information provided.