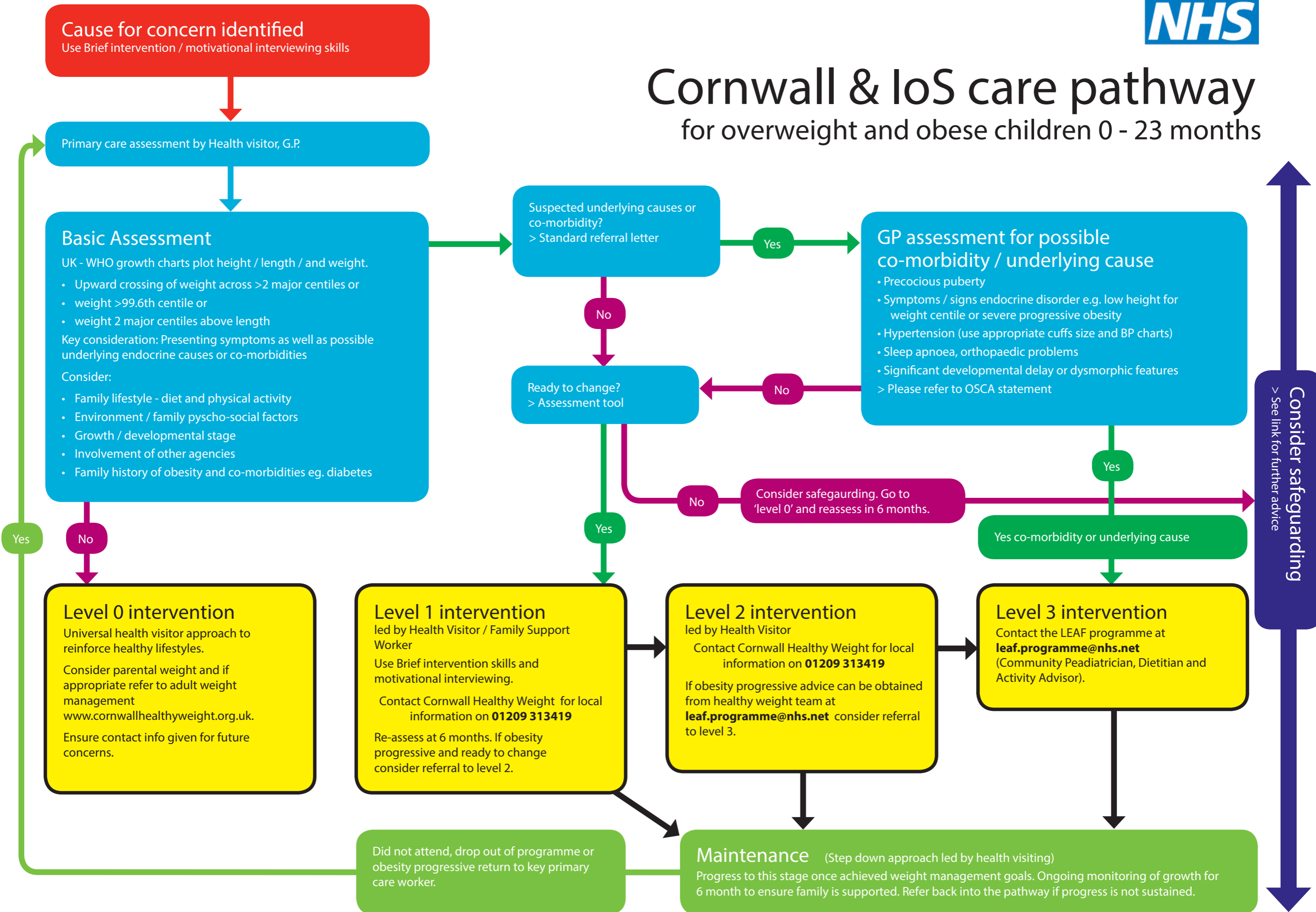


# Cornwall & IoS care pathway for overweight and obese children 0 - 23 months



**Cause for concern identified**

Use Brief intervention / motivational interviewing skills

Primary care assessment by Health visitor, G.P.

## Basic Assessment

UK - WHO growth charts plot height / length / and weight.

- Upward crossing of weight across >2 major centiles or
- weight >99.6th centile or
- weight 2 major centiles above length

Key consideration: Presenting symptoms as well as possible underlying endocrine causes or co-morbidities

Consider:

- Family lifestyle - diet and physical activity
- Environment / family psycho-social factors
- Growth / developmental stage
- Involvement of other agencies
- Family history of obesity and co-morbidities eg. diabetes

Yes

No

## Level 0 intervention

Universal health visitor approach to reinforce healthy lifestyles.

Consider parental weight and if appropriate refer to adult weight management  
www.cornwallhealthyweight.org.uk.

Ensure contact info given for future concerns.

## Level 1 intervention

led by Health Visitor / Family Support Worker

Use Brief intervention skills and motivational interviewing.

Contact Cornwall Healthy Weight for local information on **01209 313419**

Re-assess at 6 months. If obesity progressive and ready to change consider referral to level 2.

## Level 2 intervention

led by Health Visitor

Contact Cornwall Healthy Weight for local information on **01209 313419**

If obesity progressive advice can be obtained from healthy weight team at **leaf.programme@nhs.net** consider referral to level 3.

## Level 3 intervention

Contact the LEAF programme at **leaf.programme@nhs.net** (Community Paediatrician, Dietitian and Activity Advisor).

## Maintenance (Step down approach led by health visiting)

Progress to this stage once achieved weight management goals. Ongoing monitoring of growth for 6 month to ensure family is supported. Refer back into the pathway if progress is not sustained.

Did not attend, drop out of programme or obesity progressive return to key primary care worker.

Suspected underlying causes or co-morbidity?  
> Standard referral letter

Yes

## GP assessment for possible co-morbidity / underlying cause

- Precocious puberty
  - Symptoms / signs endocrine disorder e.g. low height for weight centile or severe progressive obesity
  - Hypertension (use appropriate cuffs size and BP charts)
  - Sleep apnoea, orthopaedic problems
  - Significant developmental delay or dysmorphic features
- > Please refer to OSCA statement

No

No

Ready to change?  
> Assessment tool

No

Consider safeguarding. Go to 'level 0' and reassess in 6 months.

Yes

Yes co-morbidity or underlying cause

Consider safeguarding  
> See link for further advice