## **Appendix 1: Project methodology**

## Overview

The review has undertaken a number of specific exercises that have generated information on the implementation of the ORM and its impact.

## These were to:

- use available statistics to understand the current prevalence and trends in overweight and obesity (sections 4, 5.1 & 5.3);
- review the short, and medium term indicators set for the action plan (section 5.1 &5.2);
- undertake a rapid review of recent evidence by looking at relevant systematic reviews (Section 4.2 and appendix 2);
- review current policy in Scotland that could potentially impact on overweight and obesity (section 6 and appendix 3);
- follow up all the actions in the ORM action plan to see how they have progressed and whether reach and impact have been assessed (section 7 and appendix 4);
- undertake an initial stock take of other actions that have taken place outside of the ORM and are likely to impact on overweight and obesity;
- map relevant current research that is carried out in Scotland or has a Scottish component (Section 9.1 & 9.3);
- undertake a rapid review of the local infrastructure for work on overweight and obesity (section 9.2);
- undertake a rapid assessment of recent international policies and actions elsewhere in the 4 home countries that could be relevant to Scotland (sections 9.4 & 9.5);
- revisit the initial prioritisation process (Section 7.5.6); and
- gain an insight into current thinking from recent key reports and expert interviews.

## **Action Plan updating**

To update the actions in the Action Plan a list of the Scottish Government policy leads identified in the original Action Plan and who gave the initial updates to the Joint Obesity Group was compiled and they were sent a questionnaire seeking updates with a request for additional information on monitoring, evaluation. This information was added to by a similar request to the national agencies identified as stakeholders in the Action Plan. Further information was provided by NHS Board healthy weight and child healthy weight leads. Local authorities were also identified as stakeholders for many action points and a request for updates on these was sent to all local authorities. Not all those originally responsible were

still in post, and posts had also changed. 3 attempts were made to follow up with all those from whom information was requested, for example 23 out of the 32 local authorities responded. The detailed information in Appendix 5, and summarised in section 7 of the report is therefore based on extensive but incomplete information.