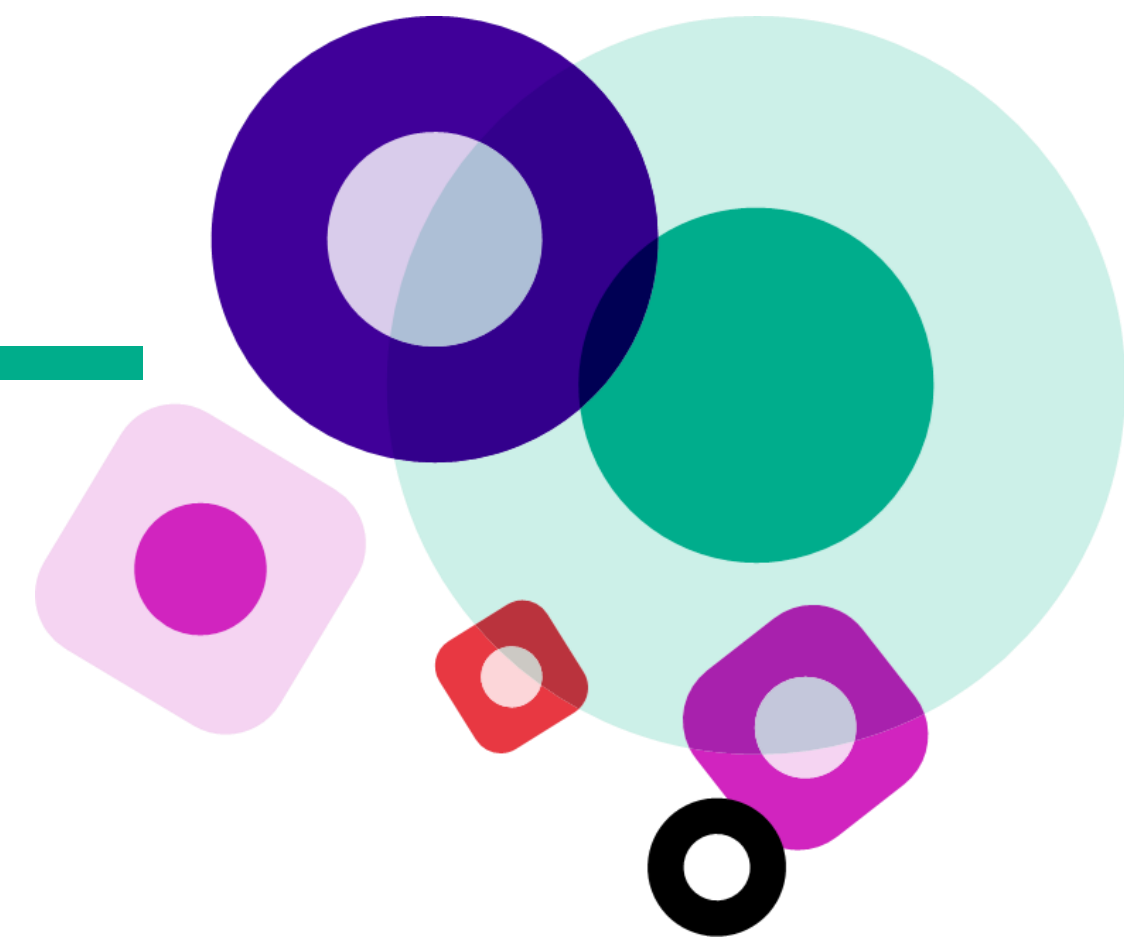




Understanding Participant Experience in the NHS Low Calorie Diet Programme

Insights from a National Cross-Sectional Survey Evaluation

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Participant experience was overwhelmingly positive, but sustained person-centred support is essential for long-term diabetes remission.

WHY THIS EVALUATION MATTERS

The NHS Low Calorie Diet (LCD) Programme supports remission of type 2 diabetes through Total Diet Replacement and behavioural support. As the programme expands nationally, understanding participant experience is essential to optimise engagement, service delivery and long-term outcomes.

AIM

To evaluate participant experiences throughout the NHS Low Calorie Diet Programme and identify opportunities to improve delivery and long-term outcomes.

METHODS

- 719 participants** across four survey time points
- Online surveys** quantitative (Likert scale) and qualitative (free text)
- Cross-sectional analysis** of survey data
- Comparison across** programme stages and delivery models

SURVEY TIMELINE & RESPONSES



Participants were drawn from nine NHS LCD providers across England.

THE PARTICIPANT JOURNEY



KEY FINDINGS

- COACHING RELATIONSHIPS MATTER**
Supportive, knowledgeable and empathetic coaches were consistently cited as one of the strongest influences on positive participant experience.
- DIGITAL DELIVERY REQUIRES STRENGTHENING**
Participants receiving digital support reported lower levels of perceived support and weaker coaching relationships.
- TRANSITION PHASES NEED GREATER ATTENTION**
Food reintroduction and maintenance were the most challenging stages, with uncertainty and concerns about weight regain.
- PEER SUPPORT IS A MISSED OPPORTUNITY**
Many participants expressed a strong desire for opportunities to connect with others on the programme.

IMPLICATIONS FOR PRACTICE

A pathway to improve outcomes



WHY THIS MATTERS FOR THE NHS

Improving referral communication, strengthening coaching relationships, and providing enhanced support during transition phases may improve engagement, retention, and long-term remission outcomes as the NHS programme continues to scale nationally.

ABOUT THE LCD PROGRAMME

The NHS Low Calorie Diet Programme supports remission of type 2 diabetes through 8–12 weeks of Total Diet Replacement (TDR) using meal replacement products, followed by structured food reintroduction and long-term maintenance with ongoing behavioural support.

CONCLUSION

Participant experiences of the NHS Low Calorie Diet Programme were overwhelmingly positive. However, sustained person-centred support, particularly during food reintroduction and maintenance, appears central to maintaining engagement and supporting long-term diabetes remission.

STRENGTHS & LIMITATIONS

Strengths include a large national sample across multiple providers and mixed-methods data. Limitations include cross-sectional design, self-selection bias and smaller numbers at later time points.



TAKE-HOME MESSAGE:

Successful diabetes remission services require more than dietary intervention alone; sustained person-centred support is essential throughout the behavioural change journey.