Wiltshire Council

Health Select Committee

5 November 2019

NHS Health Check Rapid Scrutiny Update Report

Executive summary

- 1. The purpose of this report is to provide an update on progress against the agreed recommendations from the Health Select Committee rapid scrutiny of the NHS Health Check programme that took place in June 2018. This report will also provide the annual update on programme performance for 2018-19.
- 2. The public health team has presented several reports to the Health Select Committee since the programme began resulting in a rapid scrutiny panel in June 2018. In July 2018 the Health Select Committee (HSC) endorsed the final report of the NHS Health Checks Rapid Scrutiny process (RS). The Committee resolved to refer the RS recommendations to the Cabinet Member for Public Health to response which were agreed by the HSC in September 2018.
- 3. An update regarding the performance of the programme during 2018-19 is provided as part of this report which demonstrates growth in uptake of NHS Checks programme which is the highest uptake since 2011.
- 4. Although good work has been done complete the actions agreed by the Health Select Committee and to improve programme quality and uptake of the programme, further work is to be done and a plan for development work during 2019-20 is in place.
- 5. The next uptake for the Health Select Committee is due in November 2020.

Proposal

That the committee acknowledges and notes the work undertaken to complete the actions generated as a result of the rapid scrutiny panel that took place in June 2018.

Reason for proposal

This report is provided an update on progress against the agreed recommendations from the Health Select Committee rapid scrutiny of the NHS Health Check programme that took place in June 2018.

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NHS Health Check Rapid Scrutiny Update Report

Purpose of report

- 6. The purpose of this report is to provide an update on progress against the agreed recommendations from the Health Select Committee rapid scrutiny of the NHS Health Check programme that took place in June 2018. This report will also provide the annual update on programme performance for 2018-19.
- 7. It is proposed that the committee notes the update provided.

Background

- 8. Cardiovascular disease is the largest cause of mortality in England and the largest single cause of long-term ill health and disability. It is estimated that cardiovascular diseases are responsible for 36% of deaths in England and responsible for 20% of hospital admissions in England. Wiltshire's population is healthier than the England average with lower levels of cardiovascular disease. Nonetheless, around 260 people living in Wiltshire die prematurely of cardiovascular disease each year and approximately 25% of the Wiltshire population aged 40-74 years are registered as having a cardiovascular disease.
- 9. The NHS Health Check programme is designed to systematically measure a range of cardiovascular risk factors, to provide those who have the NHS Health Check with an opportunity to understand their personal cardiovascular disease risk profile and to support modification of individual risk factors which contribute to their future cardiovascular disease risk. The programme aims to identify people early (from the age of 40) to enable timely intervention to reduce exposure time to cardiovascular risk factors. Risk factors that contribute to cardiovascular disease include being overweight or obese, having a history of smoking and sedentary lifestyles.
- 10. The NHS Health Check programme is commissioned by Wiltshire Council as a mandated service required by the Health and Social Care Act (2012). Prior to the introduction of the programme, General Practices in Wiltshire were already assessing patients for cardiovascular disease on an opportunistic basis. In 2011 a Local Enhanced Service Specification for Wiltshire was produced, setting out local guidance for the implementation and delivery of the NHS Health Check programme. In April 2013, the Health and Social Care Act (2012) moved responsibility for NHS Health Checks from the NHS to local authorities. Ensuring that eligible people are invited into the programme is a statutory public health function of local authorities. Since the programme began nearly 100,000 people in Wiltshire have had an NHS Health Check.
- 11. The NHS Health Check programme can lead to greater awareness and discussion of a person's body mass index, diet, cholesterol, physical activity, smoking status and alcohol intake. The intention being that the person makes healthy lifestyle changes and so decreases their risk of developing cardiovascular disease. An evidence briefing produced by Public Health

England together with NHS England, the Local Government Association and the National Institute for Health and Care Excellence details the effectiveness of the NHS Health Check Programme is available via this link here.

12. The public health team has presented several reports to the HSC since the programme began resulting in a rapid scrutiny panel in June 2018. In July 2018 the Health Select Committee (HSC) endorsed the final report of the NHS Health Checks Rapid Scrutiny process (RS). The Committee resolved to refer the RS recommendations to the Cabinet Member for Public Health to response which were agreed by the HSC in September 2018.

Update on Actions from the Rapid Scrutiny Panel

13. It should be noted that the first three recommendations in the original Rapid Scrutiny report were made to the Health Select Committee to action and this was completed. The recommendations below were for the public health team to action. For ease of cross referencing the recommendation numbers below match the numbers on the RS's report.

Recommendation No.4

To review the questions to be answered by GP surgeries to enable payment of the NHS Health Check, the RS would suggest that the following, at least, be included (the first two are already being asked):

- 1. How many "qualifying" patients have been invited
- 2. How many invitees have attended
- 3. Postcode (probably only first 4 characters to avoid risk of identification, e.g. BA14)
- 4. Male / female
- 5. Age
- 6. Health issues identified, and recommendations made to address these.

Reason for recommendation	This could enable the council to build a demographic picture of residents taking up the NHS Health Checks, this in turn could			
recommendation				
	inform advertising			•
	future decision to f	focus the provi	sion of NHS He	alth Checks for
	"harder to reach" r	esidents.		
	This could also enable the council to build up data to evidence			
	the effectiveness of the NHS Health Checks, although it may			
	require work to ke	ep addressing	coding issues.	
Executive	08.08.18	ACCEPTED	Data 1 and 2 a	are already
response			collected as pa	art of the current
			service specifi	cation.
			We will discus	s data requests
				•
	3-6 with our primary care			
	colleagues as we revise the			
	specification for the new			
			control due to	start April 2019.
Action				Success
				criteria

We discussed data as we revised the spanning 2019.	Service specification in place with amended data request	
Target date	Implementation date	
01 April 2019	01 April 2019	
Update	Data 1 and 2 are already collected as part of the specification. Data 3-6 is now included in service from April 2019 and collected at practice level. P not yet been required to supply this data for audi purposes but will be during 2019-20.	e specification ractices have

To keep offering development sessions for GP practices, with a focus on data recording (coding).					
Reason for recommendation	To ensure that the council builds up intelligence to enable it to have a county wide picture of health and to undertake "like for like – 5 years on" comparison for the NHS Health Check cohorts, starting from 2019.				
Executive response	08.08.2018	ACCEPTED	practices tw will include elements in events. The	vice a year and data recording to future training next events will per 2018 and	
Action	Action Success criteria				
Public Health to incl	ude data collection	to training progra	mme.	data collection to training programme	
Target date					
February 2019 (to li		. ,			
Update A training session took place in June 2018 and the importance of accurate data collection was presented as part of the session. The training session was combined with our stop smoking training on the same day. We are in the process of setting up another session by December 2019. We are considering options of how we deliver the session and whether it is combined with other health improvement training.					

Recommendation No.6

To explore if data could be gathered to determine whether the implementation of the NHS Health Checks in Wiltshire had matched the estimations based on the Public Health England modelling tool for NHS Health Checks, for example by establishing if:

- the monitoring of the increase of diagnosis and prescriptions (statins, diabetes, anti-hypertensive drugs, compliant with an Impaired Glucose Regulation lifestyle, chronic kidney disease) can be achieved through the recording undertaken by GP surgeries as part of the NHS Health Checks?
- the monitoring of actions taken by patients to achieve healthier lifestyles (weight loss programme, increase physical activity and quitting smoking) can be achieved through the questionnaire that patients complete after they attend NHS Health Checks?
- This would require the outcome(s) of the preceding NHS Health Check(s) to be listed for the current NHS Health Check and checked against (for example: "at your last health check you were advised to xxxx, what actions were you able to take?")

able to take?")					
Reason for	To enable th	To enable the council to monitor the effectiveness of the NHS			
recommendation	Health Check programme it commissions.				
Executive response	08.08.2018	AMENDED	and prescriptions	crease of diagnosis would be too obtained is unlikely due to the multi-	
			-	chievable and data from practices who eir data with us.	
			Bullet point 3 can including a quest		
			satisfaction surve	ey around whether	
			they took up reco		
			referral into servi		
Action			1 1/1 01 1 1 1	Success criteria	
Monitor action of pa				Data obtained from	
health improvement Add new questions				GP systems to determine if	
they followed the ad	•		-	patients were	
liney followed the ad	vice given at	ine ivi io i ica	itii oncok.	referred into health	
improvement services					
				Questions added to patient satisfaction survey and data collected on patient outcomes	

Target date	Target date 01 April 2019				
Update	Questions have been added to patient satisfaction survey and this has been shared with the practices that deliver the NHS Health Checks. The link to the questionnaire is given to patients at the end of their NHS Health Check along with their results. However, there have been difficulties with getting responses to the survey. Public Health continually work with practices through forums and newsletters to remind them about the survey and encouraging patients to complete the survey.				

To consider the best way to inform the Health Select Committee on the national gathering of data on / benchmarking of NHS Health Checks, on development of the new contract with GP surgeries to deliver the NHS Health Check programme in Wiltshire and update on progress at milestones; either as stand-alone reports or as part of a yearly update on progress of the NHS Health Checks programme.

Reason for	To enable th	To enable the Health Select Committee to carry on monitoring			
recommendation	of the effecti	veness of the	NHS Health Check	k programme.	
Executive	08.08.2018	ACCEPTED	Annual update w	ill be provided to	
response	the HSC			-	
-					
Action	Action Success criteria				
Annual Update will b	oe provided to	the HSC		Annual update will	
				be provided to the	
	HSC				
Target date May 2019 (to allow to provide 2018-19 data)					
Update	An annual update for 2018-19 is included in this report.				

Recommendation No.9

To explore the feasibility of a pilot scheme with a GP surgery (with a track-record of positive engagement with the council in terms of data sharing) to focus the invitations to the NHS Health Check on its known deprivation area.

to the NHS Health Check on its known deprivation area.						
Reason for recommenda	tion	This could provide data for the council to use as evidence should it consider amending the eligibility criteria for the NHS Health Check programme.				
Executive		08.08.2018	ACCEPTED	This will be done	as part of the	
response				development work by public health		
Action	Action Success criteria					
Pilot project w	ill be ι	undertaken wi	th one practice	e to focus	Completed pilot	
invitation and	engag	gement with th	nose in more de	eprived areas		
Target date April 2019						
Update	A GP Practice has been identified to run the pilot. There are ongoing					
	discussions of what the pilot will look like and we are developing a					
	Project Initiation Document for the pilot. There have been some delays					

to this project moving forward due to pressures on Primary Care
currently.

To ascertain if a targeted financial incentive to encourage attendance from people least likely to attend the NHS Health Check programme would be appropriate, ethical and feasible, and whether it would be likely to increase the take up of the NHS Health Checks.

Reason for recommendation	To increase the take up of the offered NHS Health Checks.			
Executive response	08.08.2018	ACCEPTED	programme to de and ethical implication incentives to incr Accordingly, this partially accepted	on the use of NHS Health Check etermine feasibility cations of using ease uptake. recommendation is d but officers will ther activity beyond iew.
Action				Success criteria

Action	Success criteria
Public health will undertake literature review on the use of	Completed
incentives in the NHS Health Check programme to determine	literature review
feasibility and ethical implications of using incentives to increase	
untake	

Target date April 2019

Update

A literature review on the feasibility of financial incentives for providers has been undertaken by PHE. Demonstrating that there is weak evidence and limited research of the benefits of incentivising the programme. The review highlighted that the use of financial incentives can have negative unintended consequences including GP Practices withdrawing from contracts, unanticipated overspend and reduced total uptake. It was agreed that no further work will be undertaken following this literature review. We will continue to work with colleagues at Public Health England to keep up to date with the latest research and evidence.

The communications strategy (currently being revised) will focus on promoting the health and wellbeing benefits of attending the programme using local case studies, using health as the incentive to attend.

Recommendation No.11

To ascertain the feasibility of extending the offer of the NHS Health Checks outside of normal working hours to increase uptake.

Reason for	To increase	the take up of	the offered NHS I	Health Checks.		
recommendation						
Executive	08.08.2018	ACCEPTED	N/a			
response						
Action				Success criteria		
Ascertain the feasib	ility of extend	ing the offer of	the NHS Health	Feasibility of		
Checks outside of n	ormal working	g hours to incre	ease uptake.	extending the offer		
				of the NHS Health		
				Checks outside of		
	normal working					
				hours to increase		
				uptake is		
	understood.					
Target date April 2019						
Update	A pilot is underway who have been offering extended hours for					
	NHS Health Checks from April 2019. Public Health team can					
	update Health Select Committee once the pilot has been					
	reviewed.					

To consider including information in the documentation supporting the invitation to attend the NHS Health Check programme to demonstrate the benefits for employers to release staff to attend.

to release staff to attend.					
Reason for recommendation		uptake by emp	•	feel more confident	
Executive response	08.08.2018 ACCEPTED Public health will support this in conjunction with a wider piece of work to encourage employers to support individuals to be able to access screening and immunisation opportunities in work time.			a wider piece of ge employers to als to be able to gand immunisation	
Action Develop a promotional resource for employers on the benefits of allowing employees to attend for screening and immunisation programmes (including NHS Health Checks) Success criteria Promotional resource developed and				Promotional resource	
Target date April 20					
Update	This project is still in its infancy. The promotion to employers to release their staff for their NHS Health Check links into a bigger project around encouraging employers to release staff for other health improvement programmes such as immunisation. This will factor in the newly devised comms strategy for NHS Health Checks once we have evaluated the immunisation element of the programme.				
	We are currently in the process of piloting the concept with the childhood vaccination programme, this will enable us to				

determine how receptive businesses are. We will then work on how we develop messages for employers on the value to
releasing staff for their NHS Health Check.

Reason for	To consider using the data available to include statistics of both positive impact of attending NHS Health Checks and negative impact of not attending (this could be done in a "personal format" such as "Although she was feeling absolutely fine, Dorothy attended her NHS Health Check and") in the promotional information produced by the council. To increase the take up of the offered NHS Health Checks.			
recommendation	Tomcrease	the take up of	the offered Milo i	lealin Checks.
Executive response	08.08.2018 ACCEPTED Will update promotional resources to use case studies to support uptake.			
Action Success criteria				
Will update promotional resources to use case studies to promotional				
support uptake.	resources updated and cascaded.			resources updated and cascaded.
Target date April 2019				
Update	Comms messages are still to be developed and will be used to inform a new suite of promotional resources (hard-copy and digital) for launch in January 2020. Although we have some 'case studies' we are looking at developing some more detailed case studies that highlight the benefits of the NHS Health Check programme. This has proven challenging, but progress is being made.			

Recommendation No.15

To consider promoting attendance of the NHS Health Check programme through all available service of the council likely to engage with residents eligible for the NHS Health Check programme (for example Adult Care Social Worker, Occupational Therapists, Housing Officers, etc).				
Reason for	Reason for To increase the take up of the offered NHS Health Checks.			
recommendation	recommendation			
Executive	08.08.2018 ACCEPTED This will be done as a part of a wide			e as a part of a wider
response	health improvement service promotion programme with key council departments.			
Action Success criteria				
Communication plan in place to promote wider health			Communication	
improvement service opportunities (including the NHS Health			plan in place to	
Checks programme) to key council departments			promote wider	

		health		
		improvement		
		service		
		opportunities		
		(including the NHS		
		Health Checks		
		programme) to key		
		council		
		departments		
	Target date April 2019			
Update	· · · · · · · · · · · · · · · · · · ·	The health improvement team have produced a team		
	infographic which promotes the health improvement services			
	including the NHS Health Checks and this is being used to			
	engage with other key council departments.			
	NHS Health Checks is also routinely promoted through Health			
	Trainer community events and by our Local Area Coordinators.			
	Once the new range of promotional resources has been			
	Once the new range of promotional resource			
	finalised these can be used to promote the programme to the wider workforce.			

To consider informing all Area Boards of the work undertaken by the Health Trainers and to ask Area Boards to maintain good communication with their local Health Trainer(s) to enable Health Trainer(s) to be aware of all the options available in the area to support residents in making healthy changes to their lifestyle.

Trainer(s) to enable Health Trainer(s) to be aware of all the options available in the				
area to support residents in making healthy changes to their lifestyle.				
Reason for recommendation	To best support residents in making healthy changes to their lifestyle.			
Executive response	08.08.2018 AMENDED Request for removal from report as this action is not linked to the NHS Health Check programme directly.			
Action				Success criteria
Counsellor session on awareness of health improvement services completed on 27/9/18 Health trainers are fully engaged with their area boards and Counsellor awareness session delivered				
have been asked to make direct contact with Area Board chairs if they have not done so already. All health trainers have made themselves known to their area boards				
Target date: October 2018				
Update	A Counsellor session on awareness of health improvement			
	services was delivered in September 2018. All Health Trainers			
	are engaged with their Area Board.			

2018-19 Performance

16. Individual practice data returns for 2018-19 below (table 1) shows the number of NHS Health Checks offered and the number attended. The data shows there are some significant differences in the percentage of uptake of NHS Health Check across the GP Practices, however, there are some data recording issues which Public Health continue to support GP Practices with.

Table 1: Uptake of the NHS Health Check programme b eligible population shown below for Wiltshire 2018-19

	2018-19				
	Q1	Q2	Q3	Q4	Total
Eligible Population	9310	8034	9062	9178	35584
Number Invited for NHS HC	6983	7337	7823	7465	29608
Number who attended for NHS HC	3793	3518	3690	4037	15038
% Uptake (of those invited)	54.3	47.9	47.2	54.1	50.8
% Uptake of eligible population	40.7	43.8	40.7	44.0	42.3

- 17. In 2018-19, 29,608 people were invited for an NHS Health Check with 15,038 attending their first or second NHS Health Check. Wiltshire's percentage uptake for 2018-19 was 51%, this was an improvement of 6% increase when compared to 2017-18.
- 18. Since the start of the programme uptake has nearly doubled 26% uptake in 2011-12 compared to 51% uptake in 2018-19. Uptake between 2012-18 has ranged from 41.1% to 49.5% (See table 2 below).

Table 2: Uptake of NHS Health Checks 2011-2019

2011-12	2012-13	2013-14	2014-15
26.50%	48.1%	44.8%	41.1%
2015-16	2016-17	2017-18	2018-19
47.9%	49.5%	45%	51%

19. Table 3 below shows comparison between national, regional and local authority (by STP) for uptake of the NHS Health Checks. In comparison with England and the South West, Wiltshire performs higher in percentage of appointments offered and overall uptake. At STP level Wiltshire performs better than Swindon at percentage of appointments offered but worst than BANES. In regard to overall uptake, Wiltshire is the least performing when compared to BANES (52.1%) and Swindon (54%).

Table 3: Uptake of NHS Health Checks by National, Regional and LA (STP)

	Appointments offered (%)	People that received an NHS Health Check (%)
England	17.6	45.9
South West	13.6	46.6
BANES	24.6	52.1
Swindon	18.8	54
Wiltshire	19.4	51

Programme Improvement Plan 2019-20

- 20. A plan is in place to continually improve the quality and performance of the NHS Health Check programme in Wiltshire. This year the plan includes:
- Working with providers to improve uptake of NHS Health Checks, with a focus on those in most deprived areas.
- Implementing a new quarterly data collection resource to capture postcode, age and gender data.
- Address issues with search criteria to ensure accurate data reporting by General Practice.
- Produce marketing material to encourage workplace health promotion around NHS Health Checks
- Review patient satisfaction survey process as practices are not offering this feedback survey to patients after they attend their NHS Health Check.
- Cross reference those practices that do not offer Point of Care Testing with the quality assurance schemes.

Conclusion

- 17. Since the Rapid Scrutiny process took place in June 2018 work has been undertaken to complete the agreed actions. Data is now being collected on a patient's postcode, gender, age and health issues identified and suggestions/recommendations made to address these. A planned audit of this data will take place from April 2020 onwards. The Public Health team continue to run 2 Best Practice sessions a year which include training on data collection. Questions have been added to the Patient Satisfaction Survey to determine the effectiveness of the NHS Health Checks Programme. Challenges remain on getting patients to complete the survey in order for analysis to be undertaken.
- 18. A Literature Review on the feasibility of financial incentives for providers has been undertaken by PHE. Demonstrating that there is weak evidence and limited research of the benefits of incentivising the programme. The review highlighted that the use of financial incentives can have negative unintended consequences including GP Practices withdrawing from contracts, unanticipated overspend and reduced total uptake.
- 19.A GP Practice has been identified to deliver a pilot on focusing on invitation and engagement with patients in more deprived areas. A Project Initiation Document is currently being developed with the GP Practice. A pilot is underway who have been offering extended hours for NHS Health Checks

from April 2019. Public Health team can update Health Select Committee once the pilot has been reviewed.

- 20. The promotion to employers to release their staff for their NHS Health Check links into a bigger project around encouraging employers to release staff for other health improvement programmes such as immunisation. Comms messages are still to be developed and will be used to inform a new suite of promotional resources (hard-copy and digital) for launch in January 2020. The NHS Health Checks Programme continues to be regularly promoted to wider Council teams through different forums.
- 21. An update regarding the performance of the programme during 2018-19 has been provided, the demonstrates growth in uptakes of NHS Checks which is the highest uptake since 2011 when the programme began demonstrating that the service is now well embedded into primary care. Although good work has been done to improve programme quality and uptake further work still needs to be done. There is outstanding project work still underway and further work planned. The next uptake for the Health Select Committee is due in November 2020.

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