

Report to:	Overview and Scrutiny Committee (Adult Social Care and Health)	Date of Meeting:	Tuesday 17 October 2017
Subject:	Health Checks		
Report of:	Head of Health and Wellbeing	Wards Affected:	(All Wards);
Portfolio:	Cabinet Member - Health and Wellbeing		
Is this a Key Decision:	No	Included in Forward Plan:	Yes
Exempt / Confidential Report:	No		

Summary:

To inform the Overview and Scrutiny Committee (Adult Social Care and Health) of progress made in the design and implementation of a new delivery model for the NHS Health Checks programme in Sefton.

Recommendation(s):

(1) Members note the progress made against previously approved action, and the work being undertaken to design and implement a new delivery model for the NHS Health Check programme in Sefton.

Reasons for the Recommendation(s):

Work has been taking place for a number of months on the NHS Health Checks programme including engagement activity with key stakeholders.

Alternative Options Considered and Rejected: (including any Risk Implications)
N/A – Approval received by Cabinet in January 2017 and at full Council in March 2017.

What will it cost and how will it be financed?

(A) Revenue Costs

The current budget for Healthchecks is £300,000. A reduction in the budget to £50,000 from 2018/19 has been agreed by Cabinet.

The new delivery model will remain within existing resources

(B) Capital Costs

None

Implications of the Proposals:

Resource Implications (Financial, IT, Staffing and Assets): Staffing levels will be from within existing resources, additional training will be required and equipment will be required for delivering health checks all to be provided through existing resources.
Legal Implications: Formal notification required to give notice of expiry on current contracts.
Equality Implications: The equality Implications have been identified and mitigated. An equality impact assessment will be undertaken.

Contribution to the Council's Core Purpose:

Protect the most vulnerable: n/a
Facilitate confident and resilient communities: n/a
Commission, broker and provide core services: Ensure that the NHS Health Checks programme is delivered and available to residents via a model that makes better use of existing resources and support other investments in early intervention and prevention.
Place – leadership and influencer: n/a
Drivers of change and reform: n/a
Facilitate sustainable economic prosperity: n/a
Greater income for social investment: n/a
Cleaner Greener n/a

What consultations have taken place on the proposals and when?

(A) Internal Consultations

The Head of Corporate Resources (FD 4877/17) and Head of Regulation and Compliance (LD 4161/17) have been consulted and any comments have been incorporated into the report.

(B) External Consultations

Engagement with partners has taken place and further activity is planned as detailed within the report.

Implementation Date for the Decision

Immediately following the Committee / Council meeting.

Contact Officer:	Martin Seymour
Telephone Number:	0151 934 3175
Email Address:	Martin.Seymour@sefton.gov.uk

Appendices:

There are no appendices to this report

Background Papers:

[NHS Health Check Best Practice Guidance, March 2016](#)

1. Introduction/Background

1.1 What is an NHS Health Check?

The NHS Health Check programme is a national programme designed to identify early signs of heart disease, stroke, kidney disease, type 2-diabetes or dementia and to help find ways for individuals to lower their risk. Local authorities across England are required to provide local Health Checks for all eligible patients aged 40-74 who are not known to have a long term condition.

1.2 NHS Health Check is made up of three key components: risk assessment, risk awareness and risk management. During the risk assessment, standardised tests are used to measure key risk factors and establish the individual's risk of developing cardiovascular disease. The outcome of the assessment is then used to raise awareness of cardiovascular risk factors, as well as inform a discussion on, and agreement of, the lifestyle and medical approaches best suited to managing the individual's health risk.

1.3 Who Provides NHS Health Checks?

Sefton Council Public Health commissions General Practitioners (GPs) to provide the service. The current contract runs until 31 March 2018 and is funded through the Public Health Grant.

1.4 The Service Delivery Model

The current total service value is approximately £300,000 invested across all GP Practices in individual contracts of variable value based on the eligible population cohort in that practice. Payment is attracted for each invitation sent and each Health Check undertaken. Additional payments are made if, for example, the patient requires a blood test. The success of the service depends on patients voluntarily taking up their offer of an appointment and on the practice communicating risk and signposting to appropriate interventions. A reduction in the Health Checks budget to £50,000 from 2018/19 has been agreed by Cabinet.

1.5 Health Checks must be carried out to consistent standards to ensure the quality and effectiveness of the programme. National standards provide a framework to ensure that the NHS Health Check programme operates within parameters that

maximises benefits, reduces potential harms for the population and facilitates cost effectiveness. There is however flexibility within the national programme on who local authorities commission to provide the service and where Health Checks are carried out. Across the Country there are examples of community, pharmacy, GP delivered and combined services with a growth in the number of schemes incorporating community options.

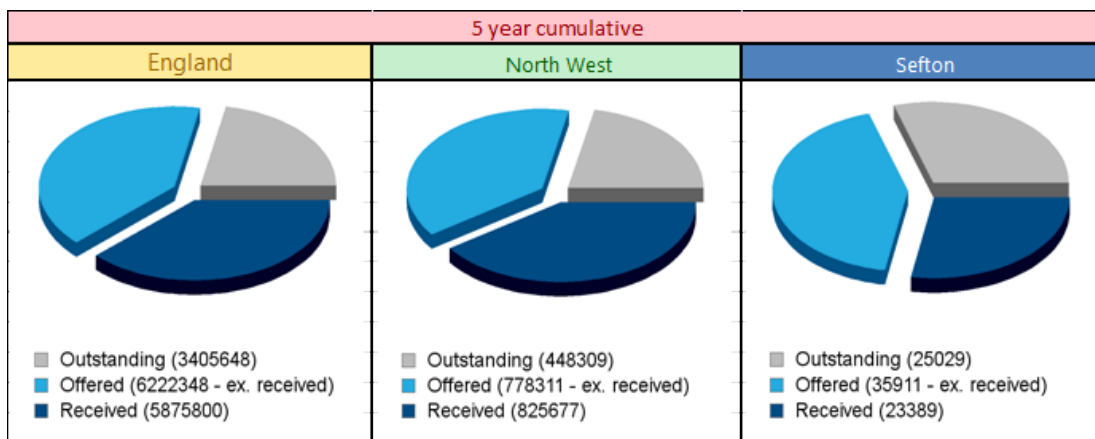
- 1.6 Sefton Council is pursuing a delivery model that moves away from the GP based delivery and incorporates a wider network of providers. This is driven by both concerns over current performance and the current cost of delivering the service, together with the opportunities presented by the Public Health commissioned Living Well Sefton (LWS) service and the Active Sefton programme.

2 Performance

- 2.1 Health Check performance data is monitored by PHE and published on the Public Health Outcomes Framework. Sefton performs worse than the national average in terms of the number of invitations sent out and appointments made. Whereas many parts of the North West are improving in comparison to England, Sefton continues to be below the expected level and lower than Sefton's North West and Statistical Neighbour Group (SNG) neighbours.

- 2.2 There is variation in performance across GP Surgeries in Sefton. In 2015/16 of the 49 surgeries within Sefton only 22 achieved the target of inviting 20% of eligible patients for a Health Check. Figure 1 shows how Sefton compares to the north west and national in terms of performance.

2.3 **Figure 1:** Cumulative health check data for the last 5 years



Source:

http://www.healthcheck.nhs.uk/commissioners_and_providers/data/north_of_england/north_west/?la=Sefton&laid=72

- 2.4 Financially, Sefton pays more than its neighbours for each invitation letter sent and each Health Check carried out. Reductions to the Health Checks budget were agreed by Cabinet in January 2017 and at full Council in March 2017.

3 Engagement with GP Surgeries

- 3.1 In consultation with Public Health England we wrote to all GP surgeries in Sefton to highlight performance issues on a surgery by surgery basis. We also requested

feedback from practices to help identify challenges in delivering Health Checks, examples of good practice and also (where applicable) for surgeries to tell us how they intended to improve their performance and the support they may need from Public Health to do this.

- 3.1 At the end of this period we had received responses from just over a quarter of surgeries (15/49). Feedback has provided an insight into common themes summarised below:

Examples of what was working well

- Some practices reported good systems for searching records to identify eligible patients with support from the CCG.
- Call /recall systems, including the use of text messages
- Trained admin staff
- Opportunistic health checks e.g. with new patients at first appointment

Challenges

- Lack of staff (practice nurses, health care assistants and administration support)
- Turnover of staff (nurses and administration support)
- Lack of facilities (consulting rooms)
- Time required to make and chase appointments
- Numbers of did not attend (DNA)
- Hints at patient apathy towards Health Checks and its benefits (lower uptake for second health checks)
- Patient contact details being incorrect/changed

Actions to address poor performance

- Dedicated staff to chase DNAs
- Changes to invite letters
- Chats with patients by staff about having a health check
- Text messages to patients to remind about the offer and /or an appointment.

- 3.2 Further follow up meetings have been held with a number of GP practices to gain further insight into the ways health checks are being delivered and the issues faced. This will also provide opportunities to explore changes to the current delivery model.

4 Wider engagement

- 4.1 Wider engagement with key stakeholders has been carried out throughout September and October to date, with further meetings in place. To date this has included PHE, CCGs, Clinical Leads for CVD and Diabetes, Sefton CVS, Active Sefton and Healthwatch and other local authorities.
- 4.2 Public engagement on the current Health Checks programme will be undertaken by Healthwatch Sefton in October and November via Patient Participation Groups, Health Champions Network and a public internet survey. At the time of writing a meeting with the Local Medical Committee (LMC) has also been arranged.

4.3 Briefing papers have been taken to the Cabinet Member for Health and Wellbeing on 4th September and 2nd October 2017. Those we have engaged with so far are broadly supportive of the proposals for providing community based Health Checks.

5 Going forward

5.1 There are opportunities to work flexibly with existing partners to develop and deliver a Health Check service to meet performance requirements and provide greater opportunities for integration with other lifestyle and health promoting services. Our proposal is to utilise flexibilities within the existing Active Sefton and Living Well Sefton services to deliver Health Checks in a community setting and within General Practices, whilst maintaining appropriate links to, and providing support for, GP practices.

5.2 The proposals will enhance the service provided by Active Sefton and Living Well Sefton and will provide patients with a broader range of lifestyle interventions and seamless transition from risk assessment and awareness raising to risk management.

5.3 Consideration has been given to how we address concerns over information governance with support from the Councils Information Management and Governance Lead, and to the practicalities of implementing the new model within the timeframe available.

5.4 A steering group is being established and potential membership has been identified. The function of the steering group will be to support the transition to a new model.

5.5 Formal notice to existing service providers will be given in November in line with the current contract requirement for four months' notice.

5.6 A Health Equity Audit will be undertaken prior to implementation and findings acted upon.

6 Recommendation:

6.1 The action required are that the Overview and Scrutiny Committee:

- Note the progress made against previously approved action, and the work being undertaken to design and implement a new delivery model for the NHS Health Check programme in Sefton.

Matthew Ashton
Director of Public Health