

# NHS Health Checks in Sefton

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## **Background**

The NHS Health Check is a statutory national programme delivered locally to eligible adults aged 40-74. It is designed to spot early signs of stroke, kidney disease, heart disease, type 2-diabetes or dementia and to help find ways for individuals to lower their risk. It is primarily offered to people in Sefton in the 40-74 age groups without a pre-existing condition and has been provided by GPs for the last 5 years.

The need to change the way Health Checks are delivered in Sefton has been influenced by the factors summarised below.

- Considerable reduction in the budget available for NHS Health Checks.
- There is significant variation in uptake by GP practices across Sefton.
- National data indicates that Sefton performs worse than the national average in terms of the number of invitations sent out and appointments made. Within the north-west region, Sefton has the lowest percentage of the eligible population aged 40-74 offered and received an NHS Health Check.
- National there are issues with the take up of Health Checks.
- Low numbers of residents who, after receiving a Health Checks, then go on to engage in health improvement activity.

Taking all of these factors into account the decision has been taken to move towards a community based delivery model. This will link it to the wide range of community based services available via Living Well Sefton and includes using the expertise and existing working relationships of Active Lifestyles.

## **Moving forwards**

From 1<sup>st</sup> April, NHS Health Checks will be delivered as part of the integrated Living Well Sefton service; a free, universally accessible service with a focus on supporting people with issues that may be affecting their health and wellbeing.

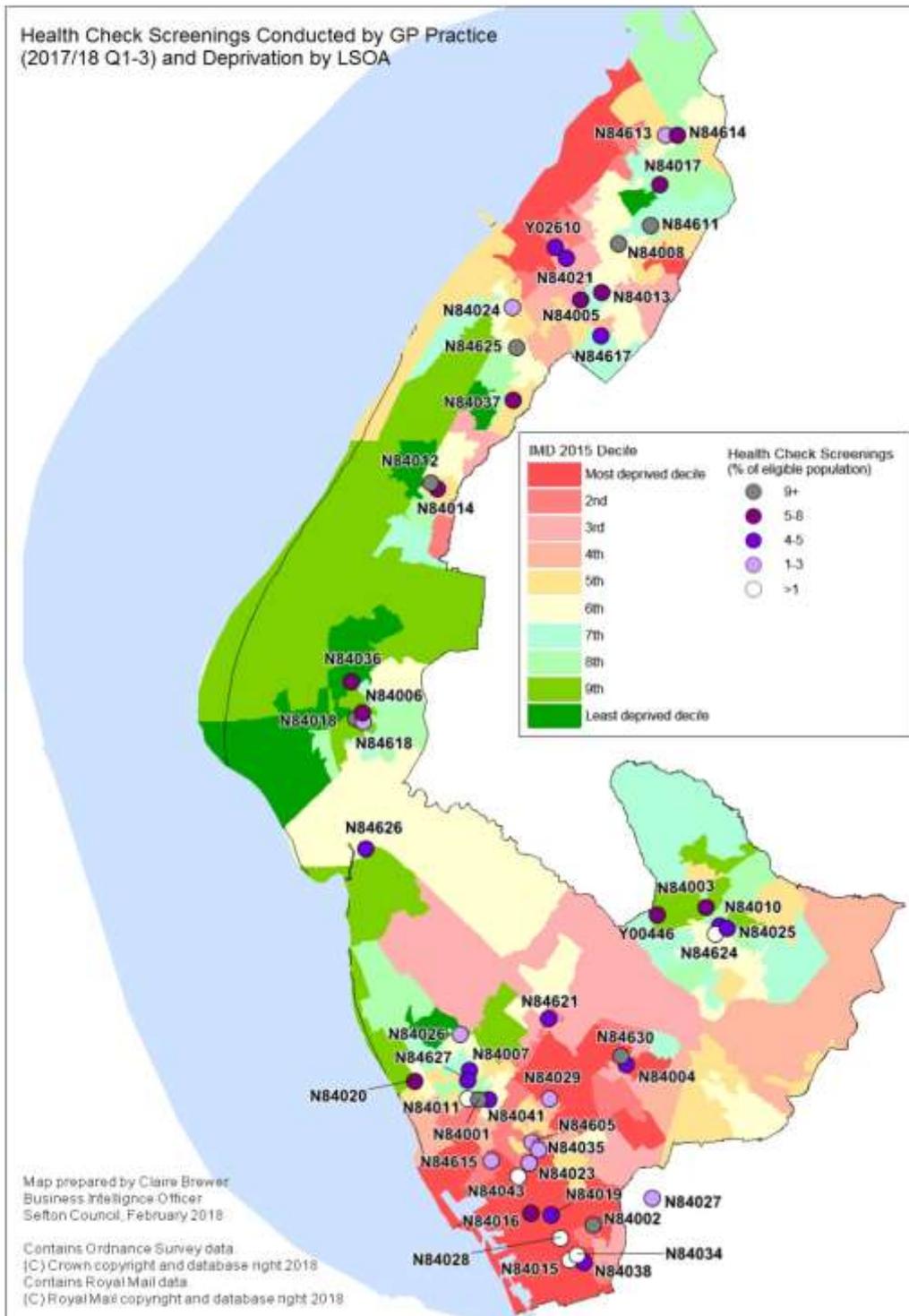
Living Well Sefton is collaboration of various Sefton organisations includes Brighter Living Partnership, Active Lifestyles, May Logan Centre, Stop Smoking Service, Feelgood Factory, Sefton Council for Voluntary Service (Sefton CVS) and Citizens Advice Sefton. The service provides support and access to help residents with issues such as: exercise, cooking and healthy eating, stopping smoking, coping better with stressful situations, help with debt and benefits, and much more. Active Lifestyles have worked closely with GPs throughout Sefton for over 20 years, running the 'Exercise Referral Programme' and Active Aging/falls prevention.

The new service will use the established expertise of Active Lifestyles and build on the progress the wider Living Well Sefton has made over the last 18 months; better utilisation of community assets and a change to where and how the service is delivered to residents in Sefton. Living Well Sefton has worked with over 4727 people over the last 12 months. Of those, 3827 have completed a personal health plan and 650 have received a brief intervention. There will be 28 staff able to deliver Health Checks across Sefton in various venues that are easily accessible to the public.

This shift in the delivery model has been discussed at length with Public Health England (PHE) and they are supportive of the proposals that have been made. The new service will be delivered in two ways - universally and also via a targeted approach.

- **The Universal Approach** - will mean that Health Checks can be accessed throughout Sefton via appointments and opportunistically; maintaining this core requirement from PHE. Checks will be available at a wide range of identified and appropriate community venues; community centres, GP practices, leisure centres, etc. This will include times at weekends and evenings, a clear requirement of the public engagement exercise which was carried out by HealthWatch in late 2017.
- **The Targeted Approach** - will mean targeted promotion and engagements throughout Sefton. This approach will be based on the findings of an assessment, indicating which areas should be targeted first. Information such as existing health inequalities, demographic data and take up of Health Checks will form the basis of the targeting activity. Figure 1 illustrates where much of this work could be targeted. This could include working with practices to engage with their patients.

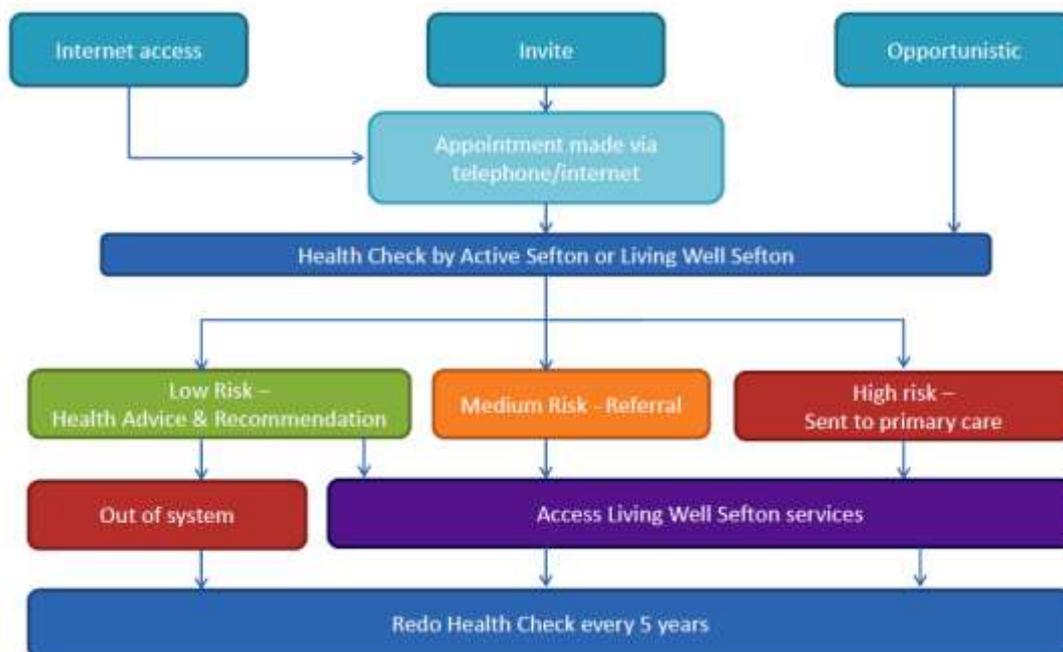
**Figure 1** – Health Checks uptake and areas of deprivation.



Both approaches will require specific communication and engagement activity to make sure that the Health Checks service is effective and equitable, and most importantly results in more people receiving a Health Check and engaging in community or social based activities.

### **NHS Health Checks pathway**

The new pathway has been conceived after lengthy discussions with Public Health England, Active Sefton, Living Well Sefton, both CCGs, Local Medical Committee (LMC) and the Health Checks Steering Group. Below is the pathway for the community delivery model. It uses a community-based model which is being used and developed by other local authorities, notably York and Tameside.



Practices will no longer have to produce invitations but may wish to work with us to engage their patients. We are also working to ensure that the flow of information into Practices is legal, secure and appropriate.

Nationally across all GP practices in the UK, there is an interface which is known as MESH (Message Exchange for Social Care and Health). This interface is essentially an electronic mailbox which is integrated into GP clinical systems. MESH receives a number of electronic correspondences ranging from pathology results, bowel cancer screening results, discharge summary reports, etc, which appears directly into GP systems to be processed and coded into a patient’s record.

Options are being explored which would essentially take the information recorded in a standard Health Check and integrate it into MESH, which would allow the clinic template/ summary information to be transmitted to practices within the area. After taking advice it is envisaged that this will be the most convenient option for practices. Further conversations will continue to take place to make sure any issues raised are resolved.

### **Delivery Model**

**What** - To deliver Health Checks across the borough through utilising both Active Lifestyles and LWS Staff and to ensure the correct measurement technique is carried out via standard procedure and correct action is taken in response to the measurements. The programme will be led by Active Lifestyles and LWS through a designated Management Team and a team of Active Lifestyles Development Officers and Living Well Sefton Health Trainers. A programme

steering group has been established comprising of key partners to help further develop the project.

**Why** - The NHS Health Check is a statutory national programme delivered locally to eligible residents of Sefton aged 40-74 who are not on a risk register and not had a health check within 5 years. It is designed to detect early signs of stroke, kidney disease, heart disease, type-2 diabetes or dementia and to help find ways for individuals to lower their risk.

**Who** - 18 Development Officers from Active Lifestyles will be delivering all appointment based Health Checks including events and organisations. This will be supported by 10 LWS Health Trainers carrying out opportunistic Health Checks.

**How** - Residents will be able to access a Health Check by booking online via a website, opportunistically through events and targeting activity in geographical areas. They will also have the option of ringing a phone line and booking an appointment. Appointments and events will be carried out within the community, along with working with targeting activity in organisations/workplaces within the Sefton area. This will be carried out through working closely with Sefton's Communications Team. The operational structure is already in place and therefore Active Lifestyle staff will work to the same principles as with the GP referral structure, whereby appointments will be booked in, as and when required in accordance to staff calendars. For those not eligible for a full Health Check, they will receive a mini health comprising of height, weight, waist and blood pressure will be carried out.

**When** - Health Checks will begin as from 1<sup>st</sup> April 2018. Appointments will be carried out as and when requested by a resident. Events/organisation drop-ins will also be booked on an ad hoc basis/when required. The telephone line will be used as the one point of contact for residents to book in. Initially, time slots of 45 minute will be provided for each Health Check, this will allow sufficient time for them to be carried out. This will be reviewed once staff becomes more confident and competent in delivery.

**Where** - Health Checks will be delivered within the following Active Sefton and community sites:

- Dunes Splashworld
- Meadows Leisure Centre
- Bootle Leisure Centre
- Netherton Activity Centre
- Litherland Sports Park
- Crosby Lakeside
- Formby Library
- May Logan
- Feelgood Factory
- Brighter Living Partnership
- Organisations
- Firestations

There may be the opportunity to work with Health Centres and GP practices to provide Health Checks at these premises. This would be dependent on room hire charges and discussions taking place with practices that would like to work with us to provide a local offer. All venues will have confidential rooms set up to deliver the health Checks

**Training** - All staff will complete training to achieve the Royal Society of Public Health (RSPH) Level 2 - Understanding Delivery of NHS Health Checks in March. All staff will be trained in communicating and recording the risk score, results and understand the variables used by the risk engine to calculate the risk score. They will also be trained in Point Of Care Testing (POCT) through the equipment supplier, allowing staff to complete HbA1c and Cholesterol test. Ongoing training will be provided through online resources and e-learning, this will include annually revalidation. Train the trainer will also be considered to ensure future training is sustainable and consistent.

**Measures** - As the NHS Health check is a statutory national programme specifically designed to deliver key outcomes identified within the NHS Health Check Framework, a joint quarterly report will be provided by Active Lifestyles and LWS through the utilisation of the central database, summarising the following information:

- Number of invitations sent for Health Checks – *statutory measure*.
- Number of Health checks provided against target – *statutory measure*.
- Number of residents referred to General practice and reason for referral.
- Details of signposting and activity provided.
- Percentage of residents engaging community activity following a Health Check.
- Service user feedback.

**Marketing/Communication** - The programme as a whole will work closely with Sefton's Communications Team to allow specific areas to be targeted on a rotational basis. Although Health Checks will be available universally across the borough; targeting specific areas at one time will allow the utilisation of the marketing to be more effective. General marketing will be achieved via newspapers, social media/website, leaflets and posters.

Work is currently being carried out with Vita to incorporate the Health Check Element within the existing Active Lifestyle Website. A communication plan has been devised to support the delivery of the Health Checks and communicate with partners, GP's and residents.

**Quality Control** - The programme will work alongside NHS Health Check Best Practice Guidance as well as following POCT equipment guidelines for Quality Control with support from the Royal Liverpool Hospital. Robust internal and external quality control will be integral to the delivery of a quality service. We will also seek resident feedback regarding the service that is provided, allowing for continuous evaluation and improvement.

**Information Governance** - Governance structures are being put in place to allow the LWS partners to be able to deliver Health Checks, along with privacy notice and acceptance usage for individual consent from when carrying out the Health Check and feeding back to GP's. The structures being put in place will be fully compliant with the new General Data Protection Regulations (GDPR) which are due to come into effect later this year.

### **What next?**

We are engaging with partners and stakeholders regarding the delivery of Health Checks. There is a two week engagement period running from 6<sup>th</sup> to 20<sup>th</sup> March, at which point any comments / feedback will be taken into account when finalising the new model. However, engagement with partners will continue beyond this point to ensure that any subsequent issues can be resolved. We will also be attending locality meetings and can meet with individual Practices and partners should they wish it.

Ultimately we want to continue to work together with GPs and all partners to deliver Health Checks in Sefton, while the service develops and evolves. By working together we can jointly promote and engage residents into the service, increase access by using a wider variety of venues and times, etc. resulting in an increased uptake of Health Checks.

### **Where can I access my Health Check?**

*Residents will call 0151 934 2352 or can access any of the sessions available locally in community venues throughout Sefton.*

### **Do I still need to identify the eligible population for my Practice? –**

*Yes, but this will be facilitated with help from iMerseyside. At present all we require from you is information regarding the total eligible population for your practice.*

**Will we need to send out invitation letters for Health Checks? –** *No, you will not need to send out letters, also the new Service will not send personalised invitations. However, we would welcome the opportunity to work with Practices to help engage their patients in order to promote the new Health Checks Service. This is covered in more detail in the main document and would be determined by responses from individual practices.*

**Who will be delivering Health Checks? –** *From 1<sup>st</sup> April 2018, Health Checks will be delivered by Living Well Sefton (LWS) and Active Lifestyles using a community-based delivery model, which is significantly different to the current arrangements but still meets the requirements of the national programme.*

*Staff who will carry out Health Checks already work with residents on a daily basis, across a variety of health issues. To help ensure consistency and quality of care all 28 staff will complete the Royal Society of Public Health (RSPH) Level 2 training course. This will also include Point Of Care Testing training allowing staff to carry out HbA1c and the Cholesterol test. Ongoing training will be provided through face to face, online resources and e-learning, and this will include an annual assessment.*

### **Will the new service create extra work for practices?**

*We are aiming to complete 5000 Health Checks each year using 28 staff and anticipate the number of inappropriate referrals will be very low. The only work Practices will need to do is around high-risk patients and providing a relevant and appropriate responses to them.*

*Staff carrying out Health Checks are experienced at delivering health services within the community. Ongoing work with Practices and other partners will ensure that any issues are identified and addressed appropriately and in a timely manner. Suggestions have already been made by Practices regarding ambulatory 24-hour blood pressure monitoring.*

**What information will be sent back into practices -** *Nationally across all GP practices in the UK, there is an interface which is known as MESH (Message Exchange for Social Care and Health). This interface is an electronic mailbox which is integrated into GP clinical systems. MESH receives a number of electronic correspondences ranging from pathology results, bowel cancer screening results, discharge summary reports, etc, which appears directly into GP systems to be processed and coded into a patient's record. In essence, a few clicks of a mouse will be all that is needed to import patient information straight into EMIS.*

## APPENDIX 1

### Sefton's Health Check Draft Operational Pathway

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Residents will call Active Lifestyles using the **0151 934 2352** number. This will come through to our Assistant Development Officers who will book a Health Check appointment with a member of staff at a time suitable for them.

Prior to any appointment taking place, the officer would carry out Quality Control (QC) testing for both level 1/level 2 and lipids ensuring the batch number matches what's on the analyser, as well as carrying out calibration of the machine. All information would be documented and reported back to Development Manager/s. The same applies for checking twice daily the temperature of the fridges.

#### Step 1: Preparation

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- Ensure the room is an appropriate environment for consultation and that we have all necessary resources/equipment checked and ready to use.
- Ensure adequate privacy and comfort for the resident.

#### Step 2: Welcome

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- Greet patient, introduce them self and settle them into the consultation.
- Check patient details and talk through what to expect from the session, including the blood testing, clinical measurements and summary of results and any advice if necessary.
- Explain to the resident that they are welcome to opt out of any of the aspect of the health check if they are not comfortable with it.

#### Step 3: Consent

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- Check patient gives consent as per questions on the database and record this by completing Active Lifestyles informed consent including patient signature and via database (All informed consents will be uploaded to the database).
- Check that the resident consents at each clinical intervention when conducting these throughout the health check, including blood pressure recording, weight and pulse measurements and point of care blood testing.
- Explain how the data will be used, for example, if results necessitate onward referral, this would be discussed with the resident during the session, and that public health use anonymised statistical data to inform practice.

#### Step 4: Initial Data Collection

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- Complete demographic and socioeconomic status data collection with the resident (GP Practice, D.O.B, Patient address/Postcode, Ethnicity).
- Check and complete eligibility criteria questions with the resident.
- Residents who are subsequently assessed as high risk or who are diagnosed with a medical condition will exit the NHS Health Check programme and will not be eligible for recall (Refer to Step 10).
- Any resident not suitable for a Health Check will be given a mini health check consisting of Height, weight, Waist and BP.

#### Step 5: Health Risk Questions

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- Carry out health check risk assessment by asking resident the questions within the dataset including family history, medical history and smoking status.
- Consider offering British Heart Foundation resources/leaflets and offer very brief advice on this if appropriate.

## **Step 6: Non-Invasive Clinical Measurements**

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- Take the resident's blood pressure, using the automated mode on the blood pressure monitor to record the average of 3 inflations. Record on the database, along with Pulse and whether regular or irregular rhythm.
- Measure and record resident's weight, height and waist, and calculate BMI using BMI risk calculator (you can use the one at the following link <http://www.nhs.uk/Tools/Pages/Healthyweightcalculator.aspx>)
- Record results on to the Database.

## **Step 7: Point Of Care Testing For Cholesterol and Hba1c**

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- Carry out point of care blood test for cholesterol, and if appropriate according to the resident.
- Risk, test for HbA1c (Individuals considered as being at high risk of type 2 diabetes would undergo a validated risk assessment tool prior to Blood Glucose testing).
- Record results in the database.

## **Step 8: Audit C – Alcohol Intake Assessment**

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- Work through Audit C with the resident to ascertain how much alcohol they consume. If resident scores 5+, continue on to Audit C part 2 with a sensitive explanation as the rationale for doing so.
- The score should be explained to the resident and if necessary further very brief advice/brief interventions and other interventions should be offered to manage the risk.
- Use the score as a motivational aid to help the patient consider changing their lifestyle.
- If resident scores about 20, refer to community alcohol service.

## **Step 9: Communicating Identified Risks To Residents**

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- Summarise results from the health check to the resident and complete patient feedback booklet/pack with results. Ensure you use appropriate language for the resident to understand, being mindful of any communication barriers and check their understanding of the results.
- Identify and signpost/or refer the resident to appropriate services, through utilising the LWS service.
- Give very brief advice highlighting the health priorities using the LWS and Active Lifestyle programmes or other external services if necessary. Use results as a motivational aid to help the patient consider changing their lifestyle.
- In some case's an urgent referral maybe required and following correct protocols should be made.

## **Step 10: Feeding Back To Resident's GP**

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- It is a requirement of the health checks programme to inform the resident's GP that they have had a health check and to communicate any risks identified. This should ideally be done the same day as the health check, or if not possible within three days.
- For any resident found to be high risk that needs to be escalated to the GP ensure both Resident and GP are informed of the identified risk in accordance with the NHS Health Check Best Practice Guidelines. This will be carried out within the appropriate manner using the correct protocols through either calling the Practice or through the AN Database via the MESH system into EMIS where it would be flagged up for the GP to deal with. This would be dependent on the severity of the Risk Identified.
- For any resident identified as having a severe blood pressure reading after 3 readings, an ambulance would be called.

## **Step 11: Once The Resident Has Left**

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- Once the resident has left the appointment, you'll need to prepare the room for the next resident or clear the room ready to leave. Ensure you pay particular attention to infection control procedures. You'll need to ensure any clinical waste is discarded in the appropriate manner, or taken with you and deposited in a clinical waste bin/unit at the earliest opportunity.
- At the end of your clinic session, ensure you are clear what follow up actions you need to take care of (notably GP feedback and referrals).