

Joint Public Health Board NHS Health Checks Update 9 November 2022

For Decision

Portfolio Holder: Cllr P Wharf, Adult Social Care and Health, Dorset Council
Cllr J Kelly, Communities, Health and Leisure, Bournemouth,
Christchurch and Poole (BCP) Council

Local Councillor(s): All

Executive Director: Sam Crowe, Director of Public Health

Report Author: Sophia Callaghan,
Title: Public Health Consultant
Tel: 01305 224887
Email: sophia.callaghan@dorsetcouncil.gov.uk

Report Status: Public

Recommendations: The Joint Public Health Board is asked to consider the options for the NHS health checks refresh programme and agree the best option(s) for Public Health Dorset to design and further develop the preferred option.

Reason for Recommendation: Allow Public Health Dorset to design and cost the preferred option for the NHS health check programme and ensure that the relaunched health check is more effective.

1. Executive Summary

This report provides an update of the current position and thinking for the NHS Health Checks Programme.

2. Financial Implications

The service considered within this paper is commissioned from the recurrent Public Health Dorset shared service budget. Full financial implications will be costed as part of the next phase.

None of these contracts currently include any element of incentive or outcome related payment.

3. Environmental implications

N/A

4. Well-being and Health Implications

Improving delivery approaches and targeted access will improve health and wellbeing for those with greatest need

5. Other Implications

N/A

6. Risk Assessment

Having considered the risks associated with this decision, the level of risk has been identified as:

Current Risk: LOW

Residual Risk: LOW

7. Equalities Impact Assessment

EQIA Assessments form part of commissioning for all public health services and are published in accordance with Dorset Council guidance.

8. Appendices

Appendix 1: Health Checks options summary as slides

Appendix 2: Spreadsheet summary of the pros and cons of each option

9. Background Papers

1. Internal health check options paper
2. Insights survey report
3. <https://www.gov.uk/government/publications/build-back-better-our-plan-for-health-and-social-care>
4. <https://www.gov.uk/government/publications/nhs-health-check-programme-review>

1. Background

- 1.1 This report provides an update of the current position for the NHS Health Checks (NHS HC) programme and possible options for a refreshed programme delivery. Please see Appendices for more detail on the options that are to be considered and the pros and cons of each.
- 1.2 NHS HC was paused because of COVID-19 restrictions and current vaccination programmes. The February 2022 Joint Board papers gave an overview of the current national position and the NHS HC review, where opportunities were identified, to think about delivering the programme differently. The paper highlighted the need to carry out engagement, design ideas for a new refreshed health checks programme, which could include a digital design and incorporate LiveWell Dorset as a behaviour change service post health check.

2. Planning the restart HC programme

- 2.1 Public Health Dorset (PHD) continues to liaise with the Local Medical Committee (LMC), the Local Pharmaceutical Committee (LPC) and Primary Care Clinical Directors about restarting the programme. Providers view delivery of the HC programme as low priority because of continued pressures.
- 2.2 In preparation for restarting the programme the public health team have gathered insights and views from providers of the HC service and local communities. This is to assess how the programme could be more effective to improve access for people and encourage attendance.
- 2.3 We also gained insight into the challenges providers face with delivery and how we could make the programme more effective to engage them to sign up to the service. From a review of the literature and these valuable insights gained from people about the current NHS HC model, the public health team have developed 5 options for the future delivery of the programme.
- 2.4 The insights work suggests that providers felt that the payments had not increased for a long time and needed to be updated, they also expressed the lack of staff, time, and space to deliver the programme in surgeries and remained of low value to them. Patients however, valued, and were in favour of receiving a check, they liked the primary care delivery model and had little appetite for a digital offer. They commented on how they would like to be

invited and highlighted that it was the measurements for blood pressure, cholesterol and information about dementia that motivated them to attend for a check.

3. Summary of the NHS Health Check Options

3.1 Although the NHS HC programme has experienced some success, there remains opportunities for further contribution towards reducing cardiovascular disease risk and health inequalities and address the wider determinants of health. The goals of the transformed NHS Health Check will be to engage people in maintaining good health and prevent chronic disease, reduce health inequalities and act as a gateway to wider wellness offers of support. The following options outline a summary of different delivery models for consideration by the Joint Board.

3.2 Option 1 Continue the current approach

To keep the HC programme as the current model

- deliver universal NHS HC through primary care through a framework already in place
- this will keep a light touch option available. A simple approach with minimum disruption to the programme and the wider system.
- primary care are vital to the delivery of the programme, and this maintains services for them.

3.3 Option 2 Deliver through primary care with some simple changes

Deliver the universal NHS HC with improvements that:

- sends invitations through a central system
- includes reminders
- delivers out of hours
- targets communities that would benefit from a HC most
- provides strong links to LiveWell Dorset (LWD) post Health Check

This will keep current providers engaged, while following best practice guidelines. We can deliver a simple approach and bring in changes to increase user access, performance, and value.

3.4 **Option 3 Primary Care delivery with added outreach provision via LiveWell Dorset**

Continue delivering NHS HC as option two alongside additional outreach provision in targeted areas of higher risk

- primary care will deliver and record all NHS HC data.
- outreach providers will boost capacity
- LWD can reach higher risk communities
- LWD will provide robust behaviour change support for individuals following their NHS HC

3.5 **Option 4 a universal digital offer with some targeted face to face provision**

- to provide a digital NHS HC as universal offer, alongside a face-to-face offer for those at higher risk.
- for those using the digital offer, we can signpost patients to different providers for blood pressure and cholesterol readings.
- or patients can use home testing kits and digital tools.
- we will maximise NHS HC numbers offered across Dorset and BCP councils, whilst aligning clinical resource to where it is most needed.

3.6 **Option 5 a mixed offer for people to choose**

We can develop NHS HC so that Primary Care Networks (PCNs) can choose what type of NHS HC model they would like to offer

- digital or face to face
- or PCNs may choose to target their offer
- PCNs can deliver HC in specific areas

We know that the population of Dorset and BCP is diverse, and access to services we offer, may need to vary within different communities.

- 3.7 The refreshed HC programme will promote ongoing engagement about health and wellbeing, backed-up by regular interaction, including support for behaviour change that is more accessible and convenient.

4. **Conclusion and recommendations**

- 4.1 This paper provides a summary of the options for discussion and consideration for the NHS Health Check programme. Appendices and background papers include supporting information.
- 4.2 The Joint Board is asked to consider the information in this report and agree the most appropriate option for the public health team to design and cost.
- 4.3 The initial insights work undertaken with providers and the public suggest option 3 is the preferred option with primary care delivering the universal programme, with added targeted outreach delivery through building capacity within LiveWell Dorset.

Sam Crowe
Director of Public Health