



Improving the uptake of NHS Health Checks in more deprived communities using 'outreach' telephone calls made by specialist health advocates from the same communities:

A quantitative service evaluation :

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Rationale for alternative method of engaging patients for an NHS Health Check

- Low uptake in areas with highest deprivation
- Patient population less likely to respond to a letter invite
- CVD related mortality and morbidity highest in these areas
- Method used to invite patients for an NHS Health Check has been shown to influence likelihood of attendance (Gidlow 2015)
- 2 models in Bristol developed to complement the existing General Practice model:
 - community outreach
 - telephone outreach
- Telephone outreach model: Piloted in one practice in Bristol – funded by Public Health Bristol and offered to all GP Practices in the lowest super output areas (LSOA) in Bristol.



If you're due a NHS health check I'll make sure you get all the help you need.

Caz O'Doherty
Community Wellbeing Worker, Lockmeaze

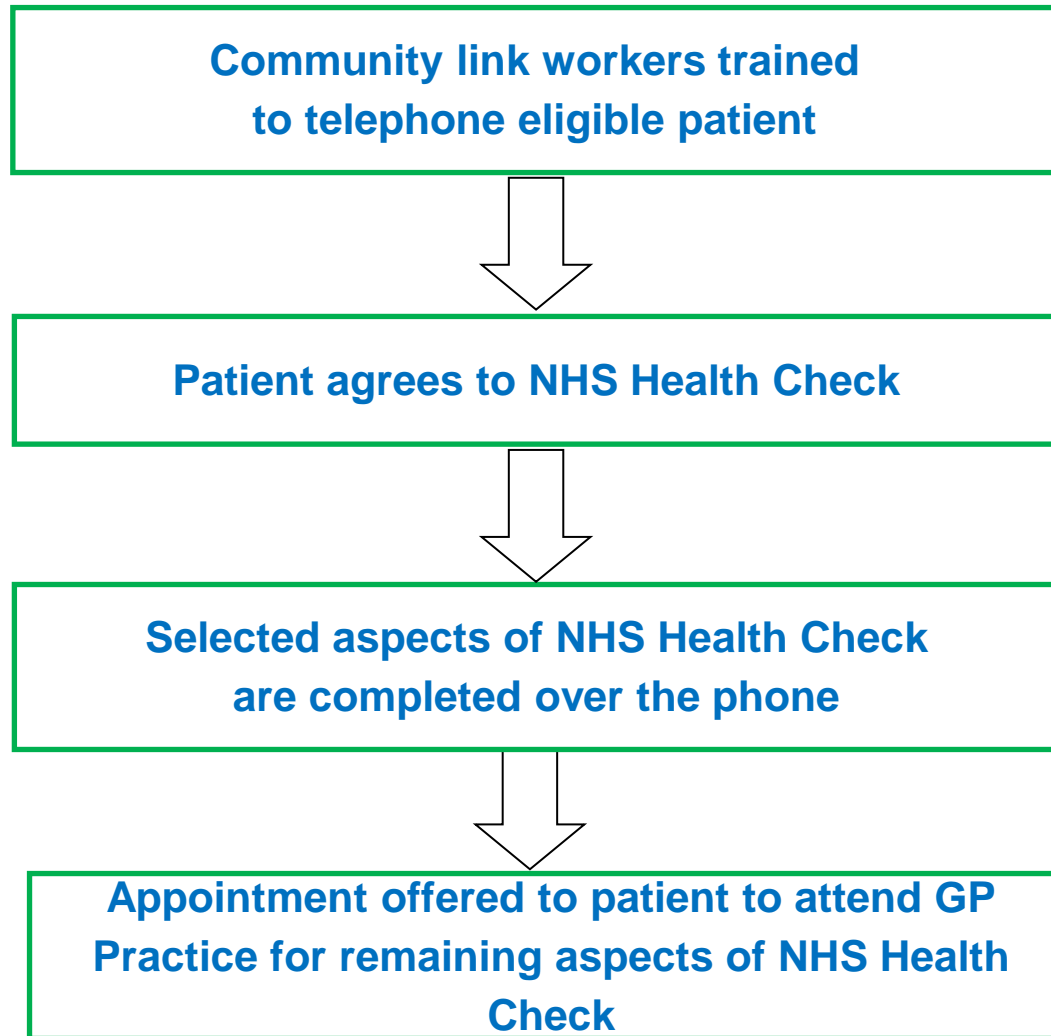
Everyone is at risk however if you are over 40 a free NHS Health Check can improve your chances of living a healthier life.

For more information call your local Practice or GP.

When you get the call or receive an invite accept and protect your health for 2015.
Contact your local practice or go online at www.bristol.gov.uk/healthchecks



How does the telephone outreach initiative work?



Aim and Objectives

Aim

To determine the efficacy of a telephone outreach service for inviting patients for an NHS health Check, in GP practices from the LSOA in Bristol

Objectives

Primary outcome:

- Compare the rate of uptake of an NHS Health Check in the target population, in GP practices using the telephone outreach initiative, with the rate of uptake in comparison / control practices using traditional letter invite

Secondary outcomes:

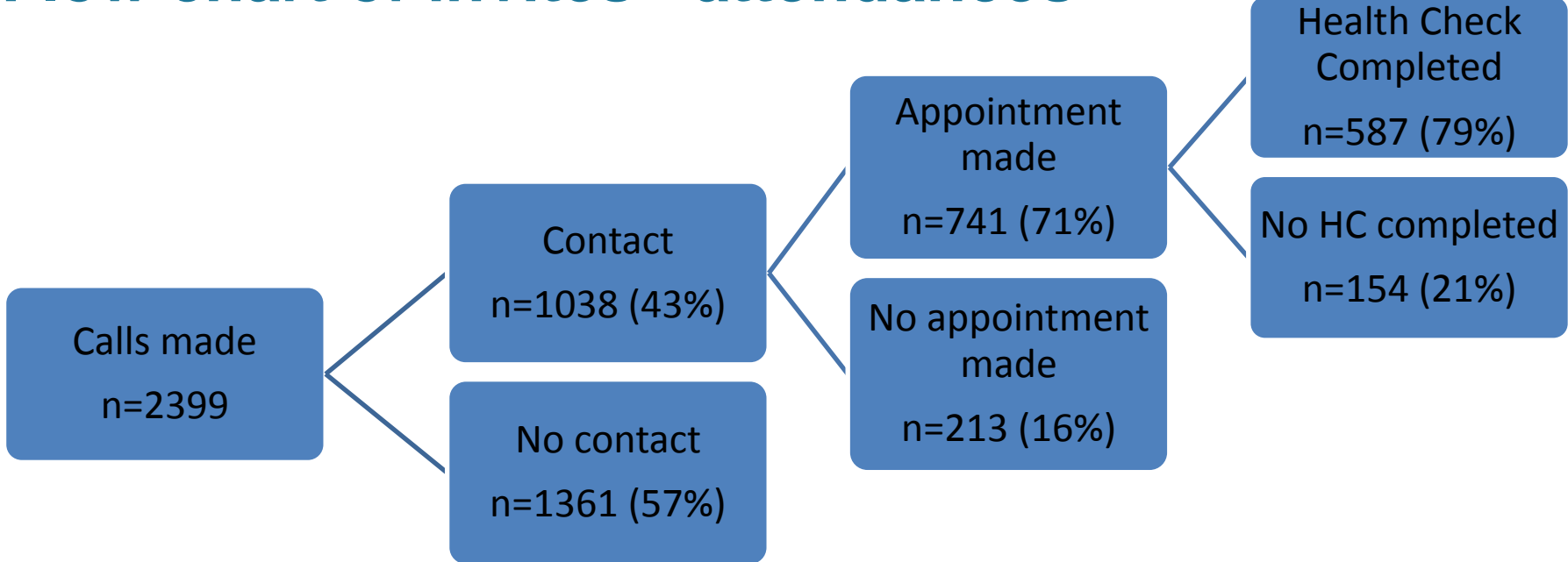
- Investigate the relationship between attendance and patient demographics (age, gender, IMD and ethnicity) in both patients invited using:
 - telephone outreach initiative
 - traditional letter invite

Methods



- **Study design:** quasi-experimental approach
- **Target Population:** adults eligible for an NHS Health Check and registered at one of 17 GP practices in the lowest LSOA's in the City of Bristol
- **Data:** Pseudoanonymised individual, patient level data from electronic medical records system, (EMIS)
- **Analysis:** data cleaned and analysed using STATA v13.1
 - Descriptive statistics to explore population demographics
 - Binary logistic regressions using a forced entry method, to look at associations and potential predictors for making an appointment and for attending for an NHS Health Check

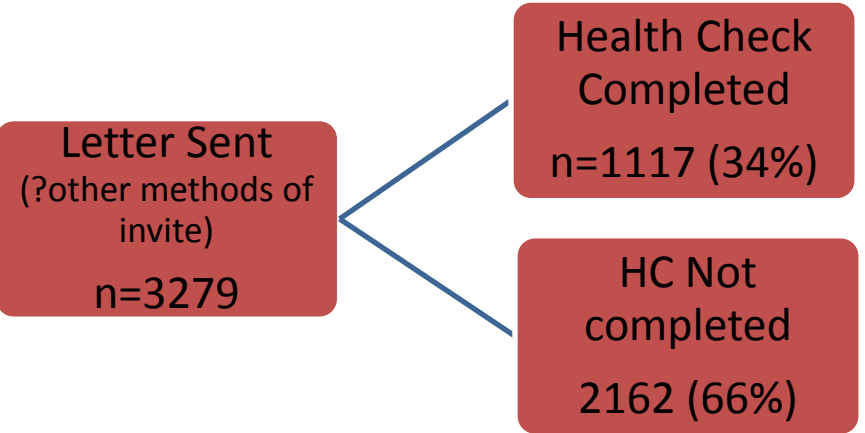
Flow chart of invites - attendances



% of completed Checks as a proportion of invites / calls

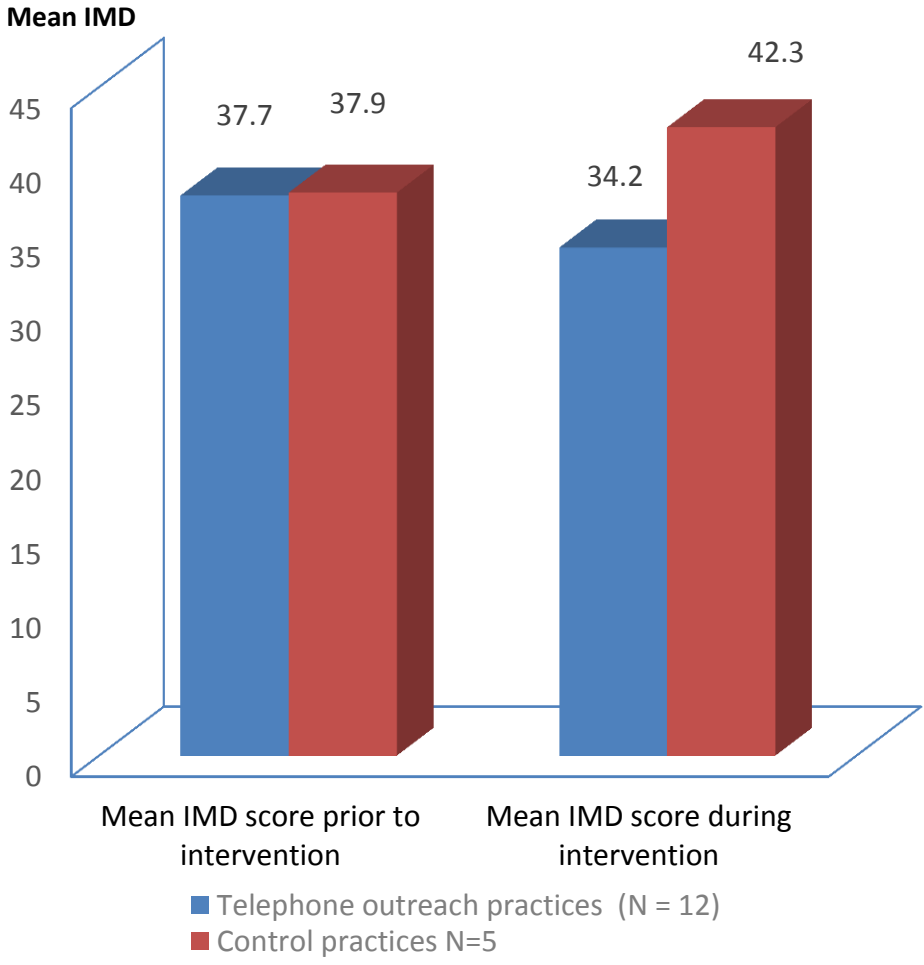
**N=12 Intervention Practices (24%)
(57% from contact)**

N=5 Control Practices (34%)

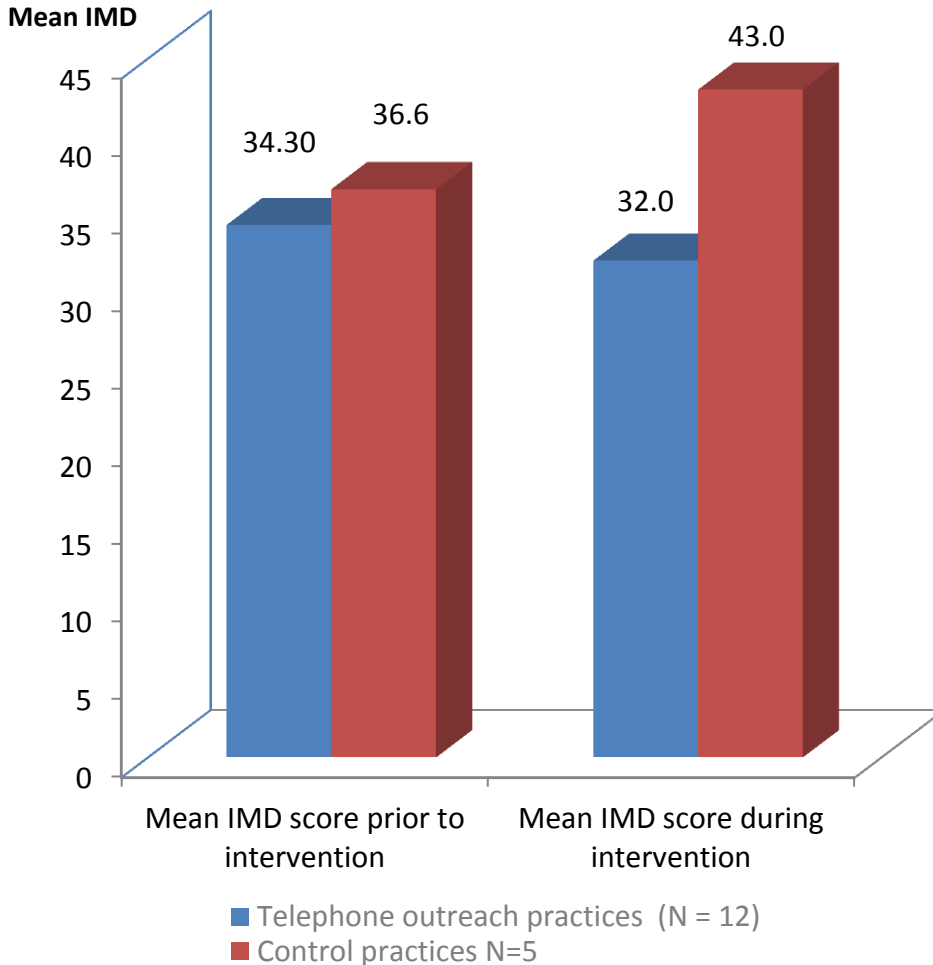


Index of Multiple Deprivation (IMD)

Invitations

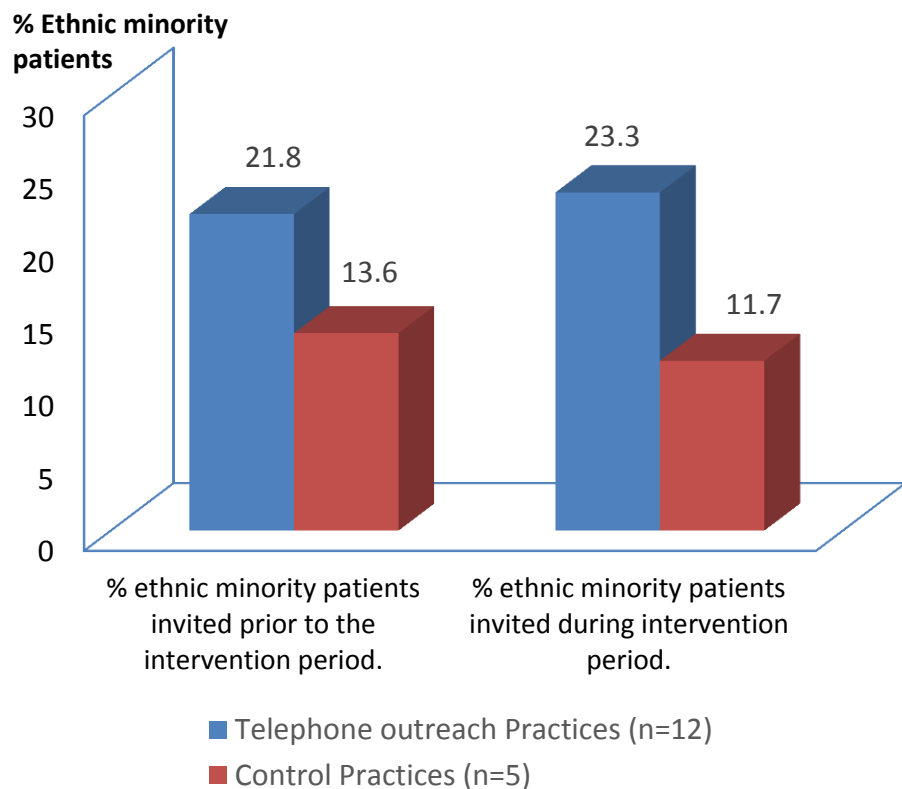


Attendance

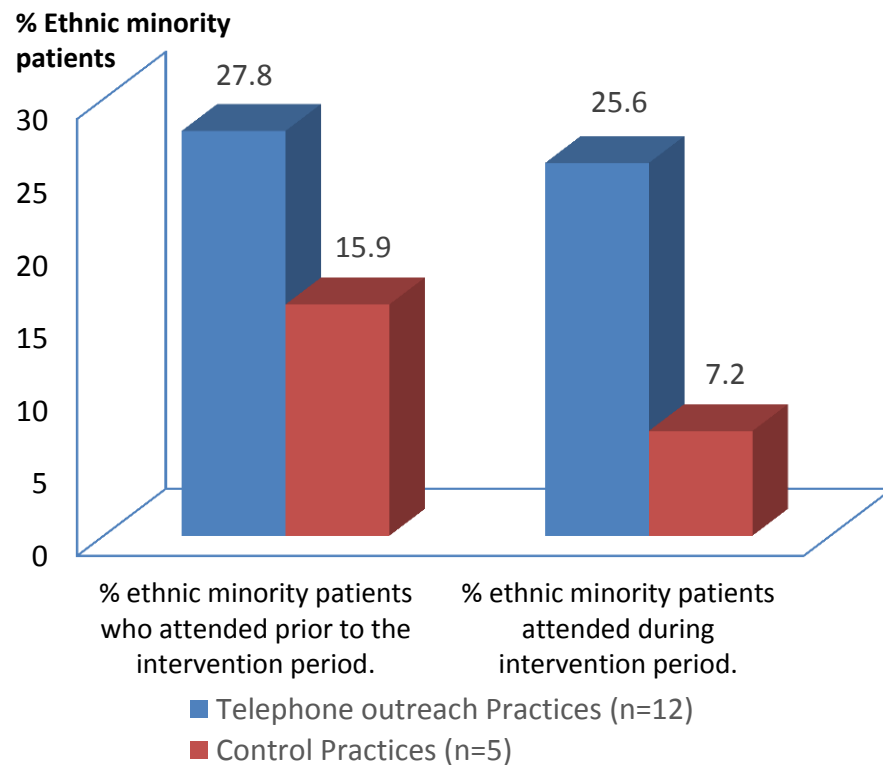


Ethnicity

Invitations



Attendance



Completion of an NHS Health Check

controlling for gender, age, IMD quintile, telephone contact made, (intervention practices only) letter sent (intervention only), start date of intervention (intervention practices only)

Intervention

- Men less likely to attend (OR 0.78) than women
- Decreasing likelihood of attendance with age
- Patients located in the 3rd national quintile for IMD most likely to attend (OR 1.08) *
- Letters sent within 2 weeks of phone call significantly reinforced the intervention (OR 3.26)
- Letters sent up to 9 months prior to phone call less likely to result in a completed NHS Health Check (OR 0.57)

Control

- Men significantly less likely to attend than women (OR 0.82)
- Patients aged 70-74 more likely to attend than those aged 40-69 (OR 2.09) (increasing likelihood of attendance with age)
- Patients located in 1st national quintile for IMD most likely to attend

* Only controlling for gender, age and IMD quintile

Summary



- Intervention practices more successful at attracting ethnic minority patients to complete their NHS Health Check (26%), compared to non-telephone outreach practices (7%).
- Statistical modelling showed that intervention practices were more likely to complete an NHS Health Check on more deprived patients compared to the control practices.
- All practices completed more NHS Health Checks on patients from IMD quartiles 3-4 compared to 1-2.
- Patients more likely to attend their GP practice to complete their NHS Health Check, following their phone call if they were female, over aged 70 and less deprived.

