



NHS Health Checks GP-based Point of Care Testing (POCT) Pilot

INTRODUCTION

- 'Bridging the Gap' is a comprehensive programme of work across Gateshead, South Tyneside and Sunderland to reduce inequalities in health.
- The aim is to decrease the impact of cardiovascular disease (CVD) and other related conditions have on local life expectancy and quality of life.
- With a focus on commissioning an integrated life - course approach across the whole pathway, a key aspect of this work is the NHS Health Check.
- Utilising a Social Marketing approach, three main target audiences were identified – the 'Proactives', 'Denials' and 'Rejecters':

The Proactives

- o Risk factors are likely to be recorded on systems already
- o Likely to be receptive to an invitation for a 'Healthy Heart Check' at their local GP

The Rejecters

- o Unlikely to be accessible in health care environment
- o Think about more traditional media
 - o Advertising, PR, etc.
 - o Radio, newspapers, TV, etc.
 - o ...And less traditional
- o Workplaces, pubs, back of toilet doors, shopping centres, etc.
 - o COMBINATION
- o Assessment to be accessible - easy as possible for people to get involved

The Denials

- o Communication of risk factors is most important
 - o Mail shots
 - o Newspaper articles
- o Getting them to accept that they may be at risk
- o Ensure testing is accessible and they know when and where it is available, i.e. maybe better in a community setting

BACKGROUND

- A Rapid Process Improvement Workshop (RPIW) was held to standardise the health check process and explore ways of ensuring maximum service uptake.
- As part of a review of the current pathway it became evident that a whole step in the process could be removed if point of care testing (POCT) or near patient testing for cholesterol was adopted, identifying a new approach to delivering GP-based health checks.
- The redesign of the health check process was facilitated by a sub -group including pharmacists, GP, primary care business manager, public health specialists, practice nurses, local hospital pathology lead and data / information managers.

AIM

- Pilot near patient testing in a GP setting to test the feasibility of delivering the NHS Health Check in a single appointment with patients receiving instant feedback, reducing the time for both patient and staff and improving the patient experience

OBJECTIVES

- Engage GPs and gain support for the initiative
- Provide training to ensure teams have the relevant skills and competencies
- Identify the number of initial NHS Health Checks and reviews carried out using near patient testing
- Provide the NHS Health Check in a single consultation
- Improved access to effective and timely interventions at an early stage for patients at risk of vascular disease
- Carry out satisfaction surveys with patients and staff
- Develop standardised operational protocols
- Test standardised programme resources and data collection template
- Have the pilot externally evaluated

PROGRESS

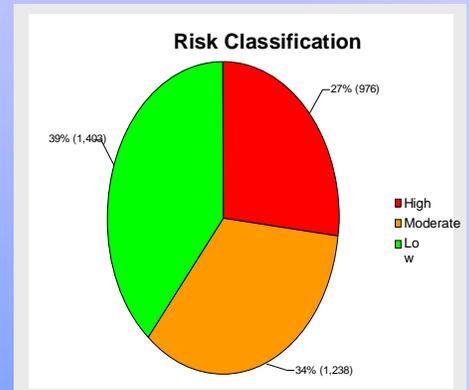
Key outcomes:

- Engagement with practices has been very successful, with 40 practices across South of Tyne and Wear taking part in the pilot
- A summary of practice activity is detailed below for the period April 2010 – March 2011 (32 practices):
 - o 3,617 health checks completed using POCT
 - o 27% (n=976) of people were high risk
 - o 34% (n=1,234) were moderate risk
 - o 39% (n=1,403) were low risk
 - o 70% (n=2,526) of patients experienced the NHS Health Check as a **'one stop shop'**
 - o To date a total of 1,820 questionnaires have been received a 50% response rate.
 - o Responses demonstrated high levels of patient satisfaction,
 - ~ 95% suggesting they would recommend the health check to others.
 - ~ 95% thought the process was simple
 - ~ 82% thought it was less worrying
 - ~ 79% found it convenient
 - o Staff feedback was positive and provided valuable learning



Interim 6 -month report identified:

- Participating in the pilot proved to be an incentive for some practices to sign up to the local enhanced service (LES) and start delivering the service.
- Improving productivity
 - o initial activity from pilot shows promising trends with 72% (n=13) of Phase 1 practices increasing the number of health checks
 - o time-efficient for practice staff, eliminating a second visit for 69% of patients
- Reducing inequalities
 - o increasing the number of men accessing the service
 - o improving access to early intervention and management
 - o immediate results, advice and support has the potential to motivate people to make long term changes to their lifestyle
- Enabling innovation and creativity
 - o A variety of models are emerging, with practices delivering health checks using a different skill mix, and 'one stop' clinics proving successful
 - o development of electronic patient summary report and referral form
 - o achieved consistent manual monthly data collection



KEY CHALLENGES

- Loss of staff and securing specific training for new staff.
- Additional work due to internal and external control, inputting cholesterol results into EMIS system, and manual data collection.
- Competing pressures such as flu vaccinations resulting in some practices suspending delivery of the health checks.

LESSONS LEARNED

- Do not underestimate the time it takes to set up a project, good planning and lead in time are essential for smooth implementation.
- Maintaining practice links and providing ongoing support are key to the success of the pilot.
- Appropriate training, updates and quality control are essential for accurate near patient cholesterol results.
- It is essential to give practice staff enough time to deliver the health check in one appointment and to perform quality checks.
- Need to consider competing pressures on practices and impact on delivery of NHS Health Check activity.
- Administration support is vital for processing requests for consumables and inputting monthly data for project monitoring.

FUTURE

- The programme is currently being reviewed as part of the wider NHS Health Check service evaluation to identify:
 - o to what extent the pilot has achieved its aim and objectives
 - o gather evidence of effectiveness
 - o inform future role out of the service.

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