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It's all happening IN HALTON

Delivery of the NHS Health Check by health trainers can improve conversion into uptake of lifestyle service

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Context

- Halton is in the North West
- Population of 125 000 people
- Circa 35 K HC eligible
- Delivery of Health Checks predominantly via primary care with community support
- Council based health improvement team
- Health trainers in community and primary care
- Point of care blood tests POCT used

Performance Data

	Number Eligible	Number Invited	% Invited	Number Received	% Take up
2013-2014	37967	5217	13.74%	2179	5.74%
2014-2015	38314	7687	20.06%	3045	7.95%

5 year cumulative (up to Quarter 2: October 2015)

Total eligible population 2013-2015	**34164**
Number of people who were offered a health check	17217
Number of people who received a health check	6888
% of people who received a health checks of those offered	40%

Expected outcomes

NHS Health Check Ready Reckoner for NHS Halton based on an uptake rate of 40%

Expected outcomes

- 187 additional people will complete weight loss programme
- 104 additional people will be taking statins
- 48 additional people will be compliant with an Impaired Glucose Regulation lifestyle
- 26 additional people will be diagnosed with diabetes
- 79 additional people with be taking anti-hypertensive drugs
- 65 additional people will be diagnosed with chronic kidney disease
- 48 additional people will increase physical activity
- 3 additional people will quit smoking*

Comparison to Ready Reckoner

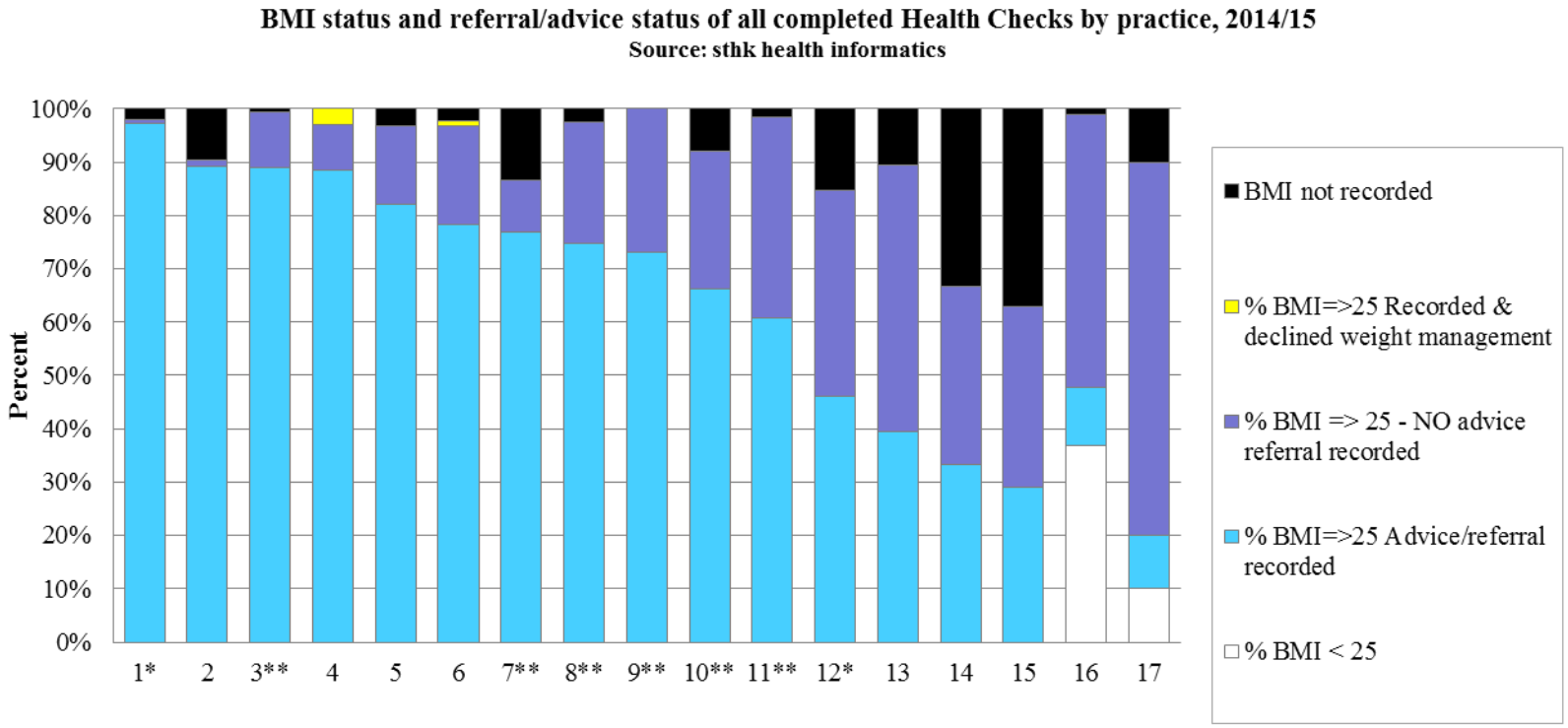
	Ready Reckoner	2013	2014	2015 (partial)
Obesity	**687**		2707	1473
Diabetes	**26**	4	6	2
High BP	**96**	57	xx	38
Smokers	**716**		576	279
Rx Smoking Cessation	**69**		129	49
Reduced Physical Activity	**1966**			
Rx Brief Exercise	**954**		1169	673
Rx IGR	**53**	14	57	38
Rx Weight Loss	**274**		1902	1021
CVD>20%	**---**	64	86	36
Alcohol Consumption	**---**		2089	1175
Rx Alcohol brief advice	**---**		865	389

Annual Outcomes

Based on 2014 Data on 3045 people

- 89% of patients whose BMI status was recorded were classed as overweight or obese. Of these 70% were either referred for a weight management intervention or given appropriate advice.
- In total a fifth of patients were identified as being a smoker and of that number 22% (129) were referred to smoking cessation services.
- No smoking or BMI status recorded was more common in practices with no health trainer; similarly onward referral into other lifestyle programmes was lower from practices with no health trainer.

Impact of having Health Trainer in Practice



*Practice with a health trainer for a short period of time

** Practice with health trainer currently

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Outcomes Continued

- 28% of patients received lifestyle input on alcohol. Of these 9% were referred for an alcohol intervention with a further 82% given behavioural advice.
- 57 individuals were enrolled in a health trainer delivered educational programme to support them with impaired glucose monitoring as a direct result of a health check
- Of note lower identification of CVD conditions compared to ready reckoner
- health trainer allows instantaneous onward referring ie its seamless

How to do it yourself

- Health Trainers
- Template for data input
- Governance
- Training e.g on diagnostic tests using POCT and use of GPPAQ, QRISK2 etc
- Use of primary care systems
- Data transfer
- A degree of freedom

Summary

- Health trainers in primary care have resulted in a measurable increase in the number of people who are accessing lifestyles services as a result of a health check. The standard of training received also provides assurance that the advice provided is of the quality and type expected.
- Having a small number of general practices to work with makes it an easier process to undertake.
- Restrictions on access to patient identifiable information limits our ability to long term track individuals and better understands long term impacts of our approach.
- For further information please do contact me: ifeoma.onyia@halton.gov.uk

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