Salford providers working together to increase the uptake of NHS Health Checks

Introduction

Salford Health Improvement Service (HIS) has been delivering NHS Health Checks for three years, commissioned by three different Public Health departments in the North West.

We have trialled two different approaches to the delivery of community based NHS Health Checks.

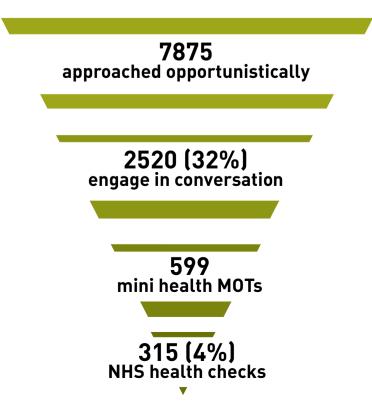
- 1) Completely opportunistic through community outreach;
- 2) Personalised invitations to a GP practice population



These differing approaches yielded very differing results in terms of the number of eligible NHS Health Checks completed:

Opportunistic approach

A mobile bus unit was taken to the eight Salford neighbourhoods. Three staff worked on the bus to complete the NHS Health Checks and were supported by one member of staff working 'front of house' to carry out heights, weights and calculate BMI ensuring that clients were eligible for an NHS Health Check. If they were not, they were offered a mini health MOT (height, weight, BMI, waist circumference, BP, lifestyle advice, Audit C, GPAQ, signposting and referral). Another member of staff worked outside the bus, engaging with members of the public, providing information about NHS Health Checks and offering the opportunity to have one completed onboard the bus.

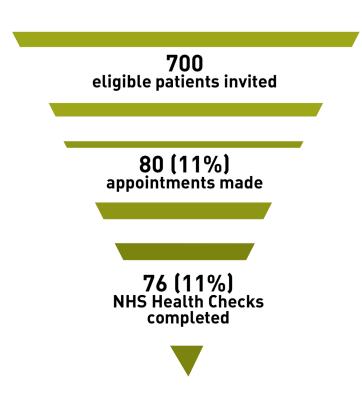


Pre-planned engagement and appointment system

Working with an identified GP practice, an approach was developed to try and increase engagement and take up of NHS Health Checks amongst eligible patients. The HIS, GP practice and a local social enterprise worked together to produce marketing materials, patient letters and resources for data collection.

The GPs identified and posted out invitation letters to 700 eligible patients, describing the health check and asking patients to make an appointment with the HIS to have the health check completed. In addition to this, the social enterprise organisation actively engaged with the community to encourage them to attend via marketing, word of mouth and social media.

The health bus was located near the GP practice each day from 8am to 6.30pm and had three active stations. On the first day due to increased demand we opened an additional station within the Health Centre to maintain a flow and decrease client waiting time.





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Comparison

- By working in collaboration with a GP practice, resources can be targeted more effectively at the eligible or high risk population.
- Using a true community outreach approach, we needed to engage with a huge number of individuals (7,875) in order to complete 315 NHS Health Checks. This is more costly and resource intensive, but engages with those who may not usually access primary care services.
- For those individuals receiving a personalised invitation from their GP, the uptake rate was still relatively low (only 11%). One explanation for this may be that the practice was based within a very deprived social housing estate in Salford (ranked 97th most deprived out of 32844 LSOAs) where patients may feel less empowered to take up offers of preventative services. Conversely, when we undertook a similar project with a practice in a very affluent area of Warrington, the uptake rate following personalised invitation rose to 30% (details can be seen on the Health Improvement Service second display at number 9150)

Recommendations and conclusion

- Collaborative working between community and primary care service providers is essential to increase uptake of NHS Health Check assessments
- A community outreach approach can be effective for raising awareness of NHS Health Checks; however, this can be staff intensive
- A range of skills, knowledge and competencies is required to deliver the overall programme around community outreach, marketing, technical skills and lifestyle interventions; no service has to be the sole provider, it is more productive to have a range of providers carrying out different activities
- GP teams have a pivotal role to play in delivery of NHS Health Checks, however they do not have to be the provider completing the assessment; this can be delivered by a service with appropriately trained and supervised staff



Collaborative working to promote uptake of NHS Health Checks in Stockton Heath, Warrington



Introduction

Salford Health Improvement Service (HIS) was commissioned by Warrington Borough Council Public Health as the lead provider to work collaboratively with them and Stockton Heath Medical Centre to provide NHS Health Checks for their practice population.

Contract requirements

This approach was implemented using shared action plans and identified lead areas:

- Identifying and inviting patients to make an appointment to have an NHS Health Check (target 1,500 in one year)
- Offering a range of venues e.g. mobile bus unit, community church hall, rooms in the medical centre
- Offering a range of days and times including early evenings and weekends
- Using point of care testing
- Feedback of results to patients and linking these to their own lifestyle behaviours
- Using a motivational interviewing approach to support behaviour change
- Involvement of local lifestyle services to signpost and refer patients on to e.g. Livewire, smoking cessation, safer drinking, counselling
- Recording and reporting accurate data
- Training of GP practice staff to build competency and capacity to continue with service provision at the end of the contract period

Results

HIS saw its highest conversion rate whilst delivering NHS Health Checks in collaboration with a practice in Warrington. The practice was based in a relatively affluent area (ranked 1,145

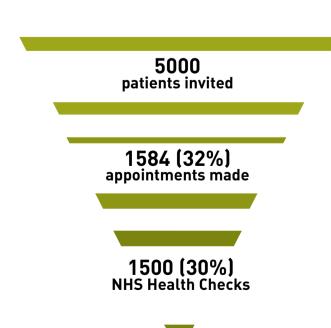


Figure 3: Conversion rates for NHS Health Checks at a practice in Warrington

out of 32,844 LSOAs). Here, the conversion rate from invitation to completed NHS Health Check reached 30% (Figure 3)

A waiting list for appointments was created with a further 392 people providing their details to be contacted in the future. Few people cancelled or did not attend with the rate being 6% (84 people)

See figure 3

Service user follow-up

Methods

- Salford HIS carried out an evaluation of the NHS Health Check scheme in Warrington by following up a 10% sample of clients who had an NHS Health Check completed.
- 150 clients were followed up 6-12 weeks following intervention using a structured telephone interview to explore their experience and impact.

Results

- Delivering a mobile service using non clinical staff was viewed as acceptable by almost all service users with 97% of clients stating that they would recommend the service to others, and 99% stating that they overall impression of the service was very or quite satisfactory.
- Clients commented that they found the service convenient to access with a simple appointment system and services available on weekends and evenings.
- The cholesterol result was found to be the most useful aspect of the NHS Health Check.

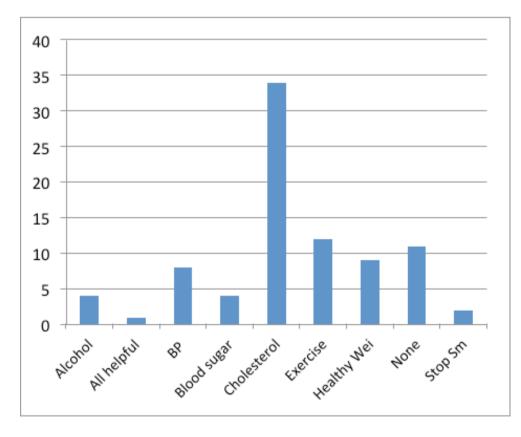


Figure 1: Aspect viewed as 'most useful'

• 53 clients (35% of the sample) went on to make lifestyle changes to their diet, physical activity levels, alcohol intake or weight.

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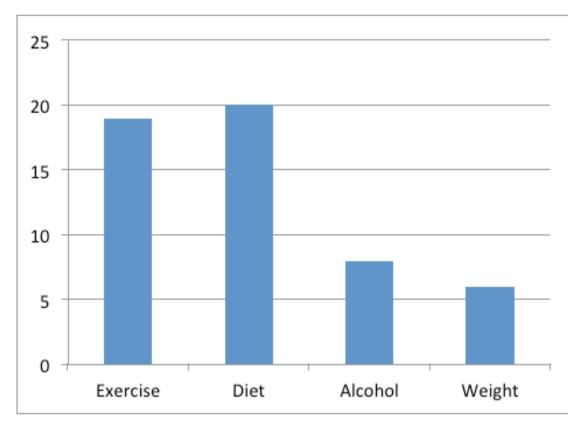


Figure 2: Lifestyle changes made

•There is a significant opportunity to encourage uptake of NHS Health Checks through 'word of mouth', with 112 (77%) clients stating that they had discussed it with their family or friends.

Recommendations and conclusions

- Collaboration and efficient joint working is possible between GP surgeries, local authority commissioners and providers
- GP patients are accepting of non clinical staff completing their NHS Health Check and report high levels of satisfaction both for user experience and staff competency
- NHS Health Checks are an excellent tool for assessing and communicating a patient's CVD risk and results should be linked to modifiable risk factors
- NHS Health Checks can be a starting point for a person's wellbeing journey and a robust onward referral and signposting pathway to lifestyle services is essential
- A range of providers should be commissioned to deliver NHS Health Checks to aid the capacity of GP surgeries