Context

- Programmes started in 2008 and 2010 in Nottingham and Notts respectively
- GP delivery with limited pharmacy service
- Targetting of high risk initially
- TCR IT toolkit for data recording (and cohort identification)
- “One team” approach 2013-14
Study Method

- Invited population (n=47,147)
- Dependent variable: attendance for HC
- Unadjusted and multivariable analyses

*Groups highlighted in bold were used for the analysis detailed in section 2.9*
Independent variables

- Sex, age, ethnicity
- Smoking, BP, BMI, cholesterol
- Family history of CVD < 60yrs
- Deprivation; IMD quintile
- Carer status
- GP practice characteristics (size; satisfaction score; location, by PCT)
- Not included: marital status, alcohol consumption
Results

43.2% uptake overall

Variables associated with low uptake:

- Male
- Younger age
- Increasing deprivation
- Smoking
- Non-white & “not stated” ethnicity
- “Missing” variables (except deprivation)
- High BP
- Obesity
Other results

- Invited population had more CVD risk factors than uninvited.
- Associated with high uptake: family history, carer, Notts practice, larger practice, practice satisfaction.
- 10.8% of the variation in uptake was explained by the independent variables included in the model ($r^2=0.1082$).
Conclusions

- Groups less likely to take up their invitation are also those that have higher CVD morbidity and mortality
- Greater risk than previously acknowledged of inadvertently increasing health inequity
- Action required to increase uptake in these groups
Recommendations

- Target: less likely to take up invitation, more likely to be at risk of CVD
- Evaluate: differential impact of targeted interventions to increase uptake
- Apply to other 1° care public health interventions
- Monitor: uptake of CVD prevention services; indicators of CVD morbidity and mortality
Progress and plan

- Outreach – community centres, workplaces, carer centre
- March 2015 social marketing campaign – 4 hotspots
- Re-branding
- Evaluation – local and national intelligence
- Monitoring – quality, follow-up, outcomes
Contact details

Helen Scott
Senior Public Health Manager
Public Health Nottinghamshire County
helen.scott@nottscc.gov.uk

Lisa Burn
Senior Joint Commissioner
Croydon Integrated Commissioning Unit
On behalf of: Croydon CCG and Croydon Council
Lisa.Burn@croydon.gov.uk