

NHS Health Check

Frequently asked questions



Introduction

These Frequently Asked Questions (FAQs) have been produced by the Local Government Association (LGA) and Public Health England (PHE). They address a number of transitional issues relating to the transfer of responsibility for commissioning NHS Health Check to local government.

In addition to these FAQs the Department of Health (DH) and Public Health England have published a revised edition of the NHS Health Check Best Practice Guidance for those directly involved in commissioning and administering the programme.

The NHS Health Check website and the LGA Health and Wellbeing Knowledge Hub group both provide forums for councillors, commissioners and public health professionals to share their challenges and solutions.

PHE have conducted an Implementation Review of the NHS Health Check programme, published in July 2013. The Review identified ten key areas which will be the focus of PHE support, to ensure the successful development of the programme in the future. The findings of the Review along with a statement on the evidence base for the NHS Health Check Programme are available for download from the Public Health England website.

Thanks and acknowledgements go to the following colleagues:

Jamie Waterall, Interim National Director NHS Health Check, Public Health England – Health and Wellbeing Directorate.

Nicola Strother Smith, Director and Transition Lead: Domain 1, NHS Improving Quality.

Eric Keogh, NHS Health Check Delivery Manager, Public Health England – Health and Wellbeing Directorate.

Dr Alison Daykin, NHS Health Check National Policy Lead, Department of Health.

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What is the NHS Health Check programme?

The NHS Health Check is a national risk assessment and prevention programme that identifies people at risk of developing heart disease, stroke, diabetes, kidney disease or certain types of dementia, and helps them take action to avoid, reduce or manage their risk of developing these health problems.

Together cardiovascular conditions are responsible for a third of deaths and a fifth of hospital admissions in England each year and cardiovascular disease accounts for the largest element of health inequalities in the UK. Responsibility for the programme moves to councils from April 2013. This presents a major opportunity for councils to tackle public health issues by helping individuals to take responsibility for their own health, and by reducing health inequalities arising from the conditions covered by the programme.

What is a NHS Health Check?

The NHS Health Check programme consists of both a **risk assessment** 'the Check', and **risk management and reduction** actions which can include a referral to either lifestyle or clinical interventions.

Risk assessment:

Individuals are invited to attend a face to face consultation where they are asked a series of questions and some simple tests are carried out. There is no cost to the individual for the NHS Health Check. These seek to ascertain the risk of the individual developing a cardiovascular disease, type-2 diabetes, chronic kidney disease based on their current lifestyle and the results of clinical tests such as blood pressure and cholesterol.

From April 2013 the NHS Health Check also includes dementia awareness and signposting for those aged 65-74 and the addition of alcohol screening for everyone attending.

Risk management and reduction:

Once the risk assessment is complete, those receiving the check should be given feedback on their results and advice on achieving and maintaining a healthy lifestyle. If necessary individuals should then be directed to either council-commissioned public health services such as weight management services, or be referred to their GP for clinical follow up to the NHS Health Check including additional testing, diagnosis, or referral to secondary care.

How does it differ from a paid-for health check?

Unlike paid-for health checks, the NHS Health Check is a free at the point of access programme designed as a specified set of questions and investigations focused strictly on a set of related risk factors, to be followed by a range of risk reduction measures known to be effective. The basis for both aspects of the programme is NICE guidance.

Who is eligible for a NHS Health Check?

NHS Health Checks are aimed at everyone between 40 and 74 years of age excluding those who have been previously diagnosed with a cardiovascular condition or are being treated for certain risk factors such as high blood pressure or high cholesterol. This amounts to around 15 million eligible people across England.

An NHS Health Check should be offered to each eligible individual once every five years. Councils are required to plan for a programme that will invite all of their eligible population (either the resident population in their area or GP registered population) over a five year rolling cycle. It is recommended to invite 20 per cent of those eligible each year however this is a matter for local determination.

Local authorities have a legal duty to seek continuous improvement in the percentage of eligible individuals taking up their offer of a NHS Health Check as part of their statutory duties. The higher the take up rates for the programme, the greater the reach and impact of the programme and the more likely the programme is to tackle health inequalities. There are no targets but Health and Wellbeing Boards may wish to aspire to achieve take up rates in the region of 75 per cent (comparable with similar NHS screening programmes).

What are local government's responsibilities from April 2013?

Councils are responsible for the following aspects of the NHS Health Check programme:

- Commissioning the risk assessment element of the programme [mandatory]
- Monitoring of offers made [mandatory]
- Monitoring and seeking continuous improvement in take-up [mandatory]
- Promotion / branding of the programme
- Monitoring NHS Health Check provision in their area to ensure that individuals who

have received a check receive information on their identified risks and are signposted to and receive either lifestyle or clinical interventions when necessary

- Risk management and reduction (lifestyle interventions)

Commissioning and monitoring the risk assessment element of the NHS Health Check is a mandatory public health function in the Health and Social Care Act 2012, and requirements upon councils are set out in The Local Authorities Public Health Functions and Entry to Premises by Local Healthwatch Representatives Regulations 2013.

The risk reduction elements of the NHS Health Check are the shared responsibility of both councils (lifestyle interventions) and Clinical Commission Groups (clinical interventions).

What are the health benefits of the NHS Health Check? Does this preventative approach to public health work?

The need to address the public health challenges in England, including inequalities, is pressing. The NHS Health Checks programme provides individuals with systematic risk assessment and management for the top seven causes of preventable mortality: high blood pressure, smoking, cholesterol, obesity, poor diet, physical inactivity and alcohol consumption. Unless the numbers of those in the raised risk categories for these factors change substantially, national outcome measures cannot be expected to improve.

It is estimated that identifying individuals at risk of cardiovascular illness will prevent up to 1,600 non-fatal heart attacks and strokes and 4,000 people from developing Type 2 diabetes each year as well as detect 20,000 cases of diabetes or kidney disease earlier.

It is likely that there will be significant health benefits in terms of ill health prevention, with a reduction in people accessing social care as a result of conditions such as dementia, stroke and heart failures.

Is there a reliable evidence base?

A recent Cochrane review has been interpreted by some as showing that the NHS Health Check model itself is not supported by evidence. This claim has been challenged by subsequent independent research and was disputed by the Department of Health at the time of its publication. In summary, the initial review looked at trials conducted many years ago. The notion of a health check is not clearly defined and often bears little relationship to the systematic risk evaluation and management recommended by the current NHS Health Check programme, which is based on NICE guidance on using cost-effective pharmacologic agents and behavioural approaches.

A full statement on the evidence base for the NHS Health Check Programme, published July 2013, is available online at:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/224537/NHS_Health_Check_our_approach_to_the_evidence_v2.pdf

Public Health England will continue to build upon this evidence base and further studies of the programme have been commissioned. These will add to an already strong evidence base. Revised national governance arrangements for the NHS Health Check programme include input from an advisory group which will consist of expert clinical and scientific members.

How much does the average NHS Health Check cost?

There is no national tariff set for the programme, which enables local discretion as local public health teams decide their own pricing and incentivisation model based on the health priorities of their area and delivery structure in the area. The costs of the risk assessment element of the programme, 'the Check', will vary according to the pricing structure and provider chosen by the council.

Modelling conducted by the Department for Health when the programme began in 2008/9 proposed that a basic NHS Health Check would cost in the region of £23.70. This does not include the cost of lifestyle and other follow-up services provided by council to reduce the health risks identified by the check.

Is the NHS Health Check programme cost effective?

Economic modelling suggests that NHS Health Check programme is cost effective: the estimated savings to the NHS budget nationally are around £57 million per year after four years, rising to £176 million per year after a fifteen-year period. It is estimated that the programme will pay

for itself after 20 years as well as having delivered substantial health benefits. The programme is underpinned by **cost-benefit modelling** which considers cost in relation to quality adjusted life year (QALY – the number of years added by the intervention) and shows that it is extremely cost effective. The programme will also likely generate significant social care savings as a result of a reduction of people accessing care through ill health.

As part of the NHS Health Checks Implementation Review published in July 2013, Public Health England will coordinate a refresh of the economic modelling conducted in 2008, updating the assumptions in the light of new data and experience.

An **Interactive Ready-Reckoner** on the NHS Health Check website identifies the potential service implications, health benefits and cost savings resulting from implementing NHS Health Checks at council level.

Where can I see figures for the performance of NHS Health Checks in my area?

The NHS Health Check website has a map which shows offers-made and take-up in PCT areas, and this is being amended to reflect local authority boundaries so that councils can identify and benchmark their programmes.

Both the number of invitations made, and the number of NHS Health Checks actually received must be monitored by councils. The two measures are stated indicators for Health Improvement within the Public Health Outcomes Framework for England 2013-2016.

How can I ensure my authority gets the best value from the NHS Health Check programme?

In order to operate effectively, the NHS Health Check programme requires systematic and integrated activity across councils, providers, partner organisations and clinical commissioning groups. Health and Wellbeing Boards (HWBs) should ensure that NHS Health Check is reflected in the commissioning plans stemming from locally agreed Joint Health and Wellbeing Strategies (JHWSs) and that it is resourced to operate effectively.

Coordinating the programme with wider strategic decision making by the whole council will avoid duplication, and can help maximise the programme's impact and value for money. It is important to ensure that the risk management and reduction elements of the NHS Health Check (lifestyle interventions such as stop smoking services, weight management courses and drug and alcohol advice) are properly linked to other council services like education, housing and family support.

Careful documentation of the management and impact of the programme will ensure that individuals who have received a NHS Health Check receive information on their identified risks and are signposted to, and receive appropriate lifestyle or clinical interventions.

How can councillors hold the programme to account? Is there a role for scrutiny?

Councillors on Health and Wellbeing Boards and those on Health Overview and Scrutiny (HOSC) committees hold a key role in monitoring and enhancing NHS Health Check. This includes examining whether the arrangements for integrating the risk assessment and risk reduction elements of NHS Health Check are sufficient, numbers of offers made and take-up, and whether the programme is helping to identify and tackle health inequalities in the local area.

The Centre for Public Scrutiny (CfPS) has also produced a factsheet entitled 'NHS Health Check – what council scrutiny needs to know' and has been commissioned by the PHE NHS Health Check team to run a programme looking at the role of scrutiny in enhancing the effectiveness of Health Check, and the return on investment in those reviews.

With whom can my council commission the programme?

PCTs have largely commissioned the service through Local Enhanced Service (LES) agreements with General Practice providers. However, local authorities will not have access to LES agreements and will now have to commission the NHS Health Check programme in the same way as any other service. This provides Health and Wellbeing Boards with an opportunity to assess the merits of using GPs or commissioning other providers of the NHS Health Check, such as pharmacies, community trusts and wider commercial, third sector and voluntary providers.

Is there a standard model for approaching contracting of existing and future NHS Health Check provision?

No. Local areas will make their own arrangements. When choosing how to (re-) commission the programme health and wellbeing boards will need to look at the needs of their local population based on data from strategic documents such as the JHWS. Decision-makers should also examine the level of offers made in the preceding years and levels of take-up.

It is important to note that it is not appropriate to continue contracts on the basis of pre-existing Locally Enhanced Services (LES) agreements.

Is there political backing for the programme?

Yes. The NHS Health Check programme is one of only three mandatory public health functions included in the 2012 Health and Social Care Act.

Ministerial commitment to the programme was restated when the Coalition Government began its term of office. Political backing has been reinforced by the Secretary of State for Health's Spring 2013 launch of Living Well for Longer: A call to action to reduce avoidable premature mortality, which includes the NHS Health Check programme as one of the 10 main actions which will improve cardiovascular outcomes. The programme is also a key action in the Cardiovascular Outcomes Strategy.

The Secretary of State and Department of Health reiterated their commitment to the programme on 21 July 2013, launching a call to action on NHS Health Checks in response to Public Health England's NHS Health Checks Implementation Review.

What rules exist regarding the branding of the health check? Can I use the NHS Brand?

The 'Local Authorities Public Health Functions and Entry to Premises by Local

Healthwatch Representatives Regulations 2013', set out the duties upon councils in respect to NHS Health Check. These do not make it a legal requirement to use the NHS brand.

However, a fundamental principle is that the programme must continue to be easily identifiable as a service provided free to the general public and which is distinguishable from commercial checks of a similar nature. Councils can therefore brand the NHS Health Check as they see fit, which may be continuing with the existing name, cobranding, or re-naming the programme for publicity purposes. Where using the brand, local areas will need to ensure their local partners are content with the quality assurance measures in place.

The on-going use of the NHS Health Check brand is being strongly encouraged by the Department of Health and Public Health England post April 2013.

You can find sample NHS Health Check promotional resources at: www.healthcheck.nhs.uk/

Data and reporting – can the service user data obtained by the NHS Health Check programme be shared with my council?

There are various commissioning models and arrangements to identify and invite individuals for their NHS Health Check in place locally. Councils and partners should ensure that their information governance arrangements are appropriate to both the type of service commissioned and the way in which service users are referred to lifestyle services, and are supported by legal advice.

Public Health England and the Department for Health have indicated four main information governance options for local areas to consider, although these are not exhaustive:

1. GPs send out the invitations and conduct the NHS Health Checks
2. Invitations for a NHS Health Check could be issued by GPs, but the checks carried out by:
 - a. A third party provider on behalf of the local authority if this is preferred.
 - b. GP's and a third party provider, with individuals given the option to choose.
3. An opportunistic element of the programme is offered – where eligible people are not systematically identified and invited but individuals are offered a NHS Health Check, for example in a community setting as part of outreach work – in conjunction with GP delivery.

4. Councils or third party providers secure GP practice data from the National Health Application and Infrastructure Services (NHAIS) system.

In light of the findings of the second Caldicott Review of information governance, Public Health England and the LGA are also exploring long term solutions to ensure that there is appropriate transfer of and access to data access to ensure that councils are able to commission and evaluate local programmes effectively and clinicians and other professionals can undertake informed follow-up actions.

What support exists for local NHS Health Check teams? Where can I find examples of innovative practice?

The dedicated NHS Health Check website offers guidance on the transition to council responsibility for public health, the latest national guidance and a number of case studies. It also contains advice on managing an NHS Health Check programme and a forum for those involved in administering the programme: www.healthcheck.nhs.uk

Public Health England, NHS and Local Government Association also work collaboratively to run a national Learning Network, ensuring that all key stakeholders are able to learn from, build upon and share existing and emerging practice to assist with implementation and delivery of the NHS Health Check programme, and there are also regional support networks for public health staff across the country.

Additionally the LGA is working with the Department of Health to bring together the key national organisations whose members and delivery organisations will be operating in the new locally-led health environment. Together we have developed a sector led offer of help, support and challenge for the members and organisations involved in local health and wellbeing boards, public health in local government, and local Healthwatch to address local health issues and improve the wellbeing of their local people.

You can read more on the health and wellbeing system improvement support pages of the LGA website or website or email us at healthimprovement@local.gov.uk.

Further resources

Websites

www.healthcheck.nhs.uk

Focused NHS Health Check information for commissioners and providers, the public and local government.

www.nhshealthcheck.nhs.uk

An online e-magazine issued monthly with updates on the programme and resources for those involved in its administration.

www.local.gov.uk/health

The Health pages of the Local Government Association website.

<https://www.gov.uk/government/organisations/public-health-england>

Public Health England's website.

Factsheets and Guidance

NHS Health Check Best Practice Handbook

http://www.healthcheck.nhs.uk/news/nhs_health_check_programme_best_practice_guidance/

NHS Health Check – what council scrutiny needs to know (Centre for Public Scrutiny)

<http://tinyurl.com/cx6ld65>

Tackling drugs and alcohol – local government's new public health role (LGA)

<http://tinyurl.com/cvd9cjb>

Tackling tobacco: local government's new public health role (LGA)

<http://tinyurl.com/cxdv3v5>

Tackling obesity: local government's new public health role (LGA)

<http://tinyurl.com/btpeb5o>

Data

NHS Health Check Ready Reckoner tool

http://www.healthcheck.nhs.uk/commissioners_and_healthcare_professionals/national_resources/ready_reckoner_tools/

Public Health Outcomes Framework 2013 to 2016 and technical updates

<https://www.gov.uk/government/publications/healthy-lives-healthy-people-improving-outcomes-and-supporting-transparency>

The Public Health Outcomes Framework Data Tool (datasets for offered and received NHS Checks)

<http://www.phoutcomes.info/>

Longer Lives - England's mortality data

<http://longerlives.phe.org.uk/>

NHS Health Check Implementation Review

NHS Implementation Review and action plan (PHE, July 2013)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/224805/NHS_Health_Check_implementation_review_and_action_plan.pdf

Evidence Base (PHE, July 2013)

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/224537/NHS_Health_Check_our_approach_to_the_evidence_v2.pdf

The LGA sector led improvement offer

The Health and Wellbeing System Improvement Support Programme

http://www.local.gov.uk/web/guest/health/-/journal_content/56/10171/3767240/ARTICLE-TEMPLATE

Health and Wellbeing System Improvement Programme and Partnership prospectus (LGA & DH, June 2013)

http://www.local.gov.uk/web/guest/health/-/journal_content/56/10171/4043991/ARTICLE-TEMPLATE

The Health and Social Care Act 2012 and secondary regulations

Health and Social Care Act 2012

<http://tinyurl.com/buzg5dq>

The Local Authorities Public Health Functions and Entry to Premises by Local Healthwatch Representatives Regulations 2013

<http://tinyurl.com/bo5znc2>



Local Government Association

Local Government House
Smith Square
London SW1P 3HZ

Telephone 020 7664 3000

Fax 020 7664 3030

Email info@local.gov.uk

www.local.gov.uk

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please contact us on 020 7664 3000.
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