

Factsheet: Implementation of the NHS Health Check programme

Potential Benefits

An economic model on which the Department of Health based its policy in 2008 suggested that a prevention programme such as this could be cost effective compared with other NHS activities and could generate significant health benefits. It was estimated that the programme could prevent 1,600 heart attacks and strokes, at least 650 premature deaths, and over 4,000 new cases of diabetes each year. At least 20,000 cases of diabetes or kidney disease could also be detected earlier, which is a priority for most CCGs. The estimated cost per quality adjusted life year (QALY) was approximately £3,000.¹

The NHS Health Check is a national risk assessment, awareness and management programme for those aged 40 to 74 living in England who do not have an existing vascular condition, and who are not currently being treated for certain risk factors. It is aimed at preventing heart disease, stroke, diabetes and kidney disease. The check which should be offered every five years, systematically targets the top seven causes of premature mortality. It incorporates current NICE-recommended public health and clinical guidance, ensuring it has a robust evidence base for the individual interventions included, i.e. smoking cessation or blood pressure management. As such, the NHS Health Check programme offers the English health and care system an outstanding opportunity to reduce the growing burden of non-communicable disease related to behavioural and physiological risk factors.

From April 2013, local authorities (LAs) became responsible for commissioning the risk assessment component of the NHS Health Check. LAs are able to commission the risk assessment from any provider of their choice but must work closely with their CCGs to ensure that there is a joined-up approach to the risk assessment and clinical follow-up and management. CCGs are now able to access local geographical data to support their commissioning from the updated NHS Health Check Ready Reckoner. The link is embedded in the useful resources area at the end of this section.

Due to the huge potential this programme could have in supporting CCGs to reduce the burden of behavioural and physiological risk factors, we recommend the following actions:

 Each CCG should actively engage with their respective local authority to support the local commissioning of their NHS Health Check programme

¹ Department of Health. Economic Modelling for Vascular Checks: Department of Health, 2008.



- CCGs should ensure that clear pathways exist for any NHS Health Check occurring inside and outside of general practice which allows a seamless flow of data and clinical follow-up and management
- CCGs should work with the local authority public health teams to assess the impact of their local NHS Health Check programmes and consider improvement strategies to ensure that the programme is delivering the best outcomes for the local community.

Impact on inequalities

As a population-based risk awareness, risk assessment, and risk and disease management programme, the NHS Health Check programme has the potential to ensure that we are engaging members of the community earlier, promoting opportunities for healthy living and early intervention.

Local authorities and CCGs must work collaboratively to ensure that this programme is designed and delivered to meet the needs of those at greatest risk within their communities.

Leicester Case Study

A study of almost 4000 people in Leicester suggests that the NHS Health Check programme is likely to uncover more diabetes, kidney or heart patients than previously expected. Extrapolation from the Leicester data suggests that the national programme is likely to find 440,000 people each year who have diabetes, chronic kidney disease or high risk of cardiovascular disease or diabetes.

Researchers from the Diabetes Research Unit based at the Leicester Diabetes Centre, within the University of Leicester, have published their study <u>Joint Prevalence of Diabetes</u>, <u>Impaired Glucose Regulation</u>, <u>Cardiovascular Disease Risk and Chronic Kidney Disease in South Asians and White Europeans</u> in the journal PLOS ONE.

Useful resources

NHS Health Check Best Practice Guidance

NHS Health Check national website

NHS Health Check Ready Reckoner Tools

Public Health England Implementation Review and Action Plan