

FREQUENTLY ASKED QUESTIONS

Improving the uptake and quality of annual health
checks for people with a learning disability
Exploring innovation through new models of collaboration

AHC FAQs

Is this a new method of carrying out Annual health Checks?

NO – this project aims at finding novel ways to support the existing process led and delivered by GPs. It is about how collaboration using new and existing specialist expertise can support greater uptake of AHCs and improve quality.

Does this project pass the responsibility from GPs to secondary care?

NO – the existing frameworks as detailed in the Direct Enhanced Service (DES) Contract Specification and QoF framework remains in place. GPs will remain fully responsible for delivering AHCs and no changes will be made to the current funding arrangements. The project is aimed at finding ways to raise awareness and support and engage more people to visit their GP for an AHC.

Is this scheme about: Increasing the size of the AHC register i.e. Coverage; Increasing the uptake of the AHC; or reducing health inequalities?

It can be about all three, but the emphasis is likely to be on reducing health inequalities. It's important that the AHCs undertaken in an area closely reflect the composition of the community and PCN catchment. A focus on health inequalities will enable the coverage of AHCs to increase in the future, through a better understanding of the approaches required to increase uptake in different groups.

Whatever the specific objectives of the bid, bidders must be clear about the actions they will take and the evidence and outcomes they will collect and measure to evaluate the relative success of their approach and any learning that can be shared.

My organisation is not a Primary Care Network or General Practice. How best should we work with those organisations?

We really want to encourage wider collaborative working with general practice and PCNs and help develop local system responsiveness and learning. To do this well it will be worth linking in with a PCN's Quality Improvement (QI) work, where the PCN's themselves might be seeking improvement in the quality and reach of Annual Health Checks. Doing this will likely enhance collaborative learning and the sustainability of improvements. However, you may want to make completely new suggestions to local PCN/s and ICSs for improving quality.

Will this mean an increase in the NHS England and Improvement target for AHCs?

NO – the current target for 75% uptake by 2023/2024 will remain in place. This pilot will support that achievement as well as focusing on the quality of the AHC process. This may be additional focus on engagement with wider communities and implementation of appropriate reasonable adjustments.

How many pilot sites will there be?

There will be 7 successful pilot sites, one per NHS region, each given £35k as a one off non recurrent payment to promote the pilot work for 12 months. At the end of the fixed term of the pilot, the findings will be identified and shared as an end of project report highlighting the associated challenges and success, along with any recommendations for future consideration. This information will then be used to consider any wider improvements and service enhancements going forward that may be of value to support improvement.

The 7 regions are: North-West; North-East and Yorkshire; Midlands; East of England, London, South-East and South-West

How long will the funding be available for?

This money is seed funding paid to the associated ICS/CCG – there will be no recurrent monies available. Therefore, you must recognise this if your bid includes non-fixed term staffing costs, you should be prepared to pick up recurrent costs beyond the funded period. It will only be available for one year and is a one-off payment. It should enable the opportunity for you to help identify what works locally and for other areas and systems to see what has been learned. In that way it may continue to shape services.

What can we spend the money on?

- You can spend the money on anything to support delivery of the bid, such as equipment and resources, contribution to staff salaries, or marketing materials to further the aims and objectives of your bid proposal.
- In spending money, you must follow the procurement rules of your own organisation.
- Money can be spent at any time and pace from October 2021 to the end of September 2022, noting that this overlaps 2 financial years.

Will the successful pilot sites be given metrics and standard operating procedures?

NO – this pilot encourages sites to be creative and to design new ways of delivering AHCs with a greater focus on quality and collaboration. NHS England and Improvement is encouraging creative thinking and novel service design and will not be creating guidance to assist. Bidders should think about the range of qualitative and quantitative outcomes that might be most appropriate to collect in order to assess and measure the success of their bid. It is assumed that all current guidelines for completing AHCs will remain in place.

Will I need to share what I am doing?

Yes – it is expected that all successful sites will share their work on a specially created FutureNHS Collaboration platform. All sites that have been successful in this bid will be encouraged to collaborate on this safe space to foster greater understanding of the delivery of enhanced AHCs. The site will be restricted to successful pilot site staff only.

There will be an expectation that each pilot site must submit quarterly update reports to NHS England and Improvement. Further guidance will be given to the successful sites as they go live. See the key timescales below.

How should Expressions of Interest be presented?

There is an Expression of Interest (EOI) form that should be filled in. We have asked that this should not be longer than 3 pages of A4. Please answer all questions concisely. Any supporting documents should be very clear and of minimal number. Ensure you answer the questions clearly and concisely, showing that the bid is coherent, well thought through in terms of evidence, and how it is likely to succeed in its objectives.

It is important that bids capture the aims and principles of the project as defined in the context and invitation documents

How are the bids going to be assessed and how will the regions be involved?

Bids will be assessed by a combined group of NHSE National and Regional staff and leads. Regional leads have nominated specific leads for this the evaluation of bids. Bids will be assessed using criteria applied consistently and in a way that reflects the sections in the Expression of Interest document (EOI). The regional leads are:

- North-East and Yorkshire; and North-West: Claire Swithenbank
- East of England: Sue Fox
- South-East: Alison Leather
- Midlands: Robert Ferris Rogers
- South-Kevin Elliot
- London -Heidi Peakman

When you say a named officer at system level are you talking about ICS level?

Yes, you will need sign off from your ICS/CCG Clinical Director. The requirements are included in the EOI Template.

Are you able to put forward an expression of interest if you have already started some of this work?

Yes. This is fine, but you must demonstrate that you are clear about how you will be enhancing and building on the developments already being started. The bid must also directly relate to the principles and requirements of this bid opportunity.

Could we use the funding to develop a “Test of Concept” model, which will include roles that may be funded from the PCN DES Workforce?

Yes. You can test new concepts that may later be funded from other sources. However, it will be important to show evidenced in-year outcomes or learning, including that the new concept is making a positive difference. (The bid will only be successful if the concept is very likely to make a positive difference.)

We also recognise that, the changing PCN workforce brings together new groups of professionals into the PCN/local system from different organisations. This new form of collaboration, providing it shows evidenced outcomes is also within the scope of the bid.

Is the projects aim to improve access to secondary care or access to other non-primary care services from the AHC?

No. The focus is about improving the quality and uptake of the AHC specifically.

In the webinar you mentioned 'reaching out to people living independently'. Does this mean you don't want a focus on residential care?

No. We are not wanting to exclude those in residential care, but we want to ensure those people with a mild or moderate learning disability do not get overlooked. We recognise that sometimes it is easier to identify those with severe and profound learning disabilities and would wish to ensure we maximise AHC uptake amongst the full range of need and living environment.

Who can I contact for help and support?

If you have any questions or concerns, we encourage you to contact the NHS England and Improvement Team using the specific project email account: england.ahc.eoi@nhs.net.

This will be regularly monitored during the project lifespan and will form the primary contact method.

We also encourage using the FutureNHS Collaboration Platform forum to post and reply to requests for help and support.

What are the key timescales for this project?

What	Date	Subject Areas
Project documents released	10 th June 2021	<ul style="list-style-type: none"> Targeted at all relevant parties via NHS England comms team.
Webinar to explain the pilot aims and objectives.	<p>Tuesday 29th June 2021. A recording of the webinar will also be available on the NHSE website.</p> <p>Frequently asked questions (FAQ) document will be circulated after the event.</p>	<ul style="list-style-type: none"> Open invitation to all interested parties Formal presentation of the project aims and discussion.
Closing date for Expressions of Interest	Wednesday 28 th of July at 10am	<ul style="list-style-type: none"> No applications will be accepted after this time.
Applicants informed.	Early September. (Date TBC)	<ul style="list-style-type: none"> Successful pilot sites informed. Unsuccessful pilot sites offering feedback.
Funds paid to successful sites.	By 30 th September 2021	
NHS Futures platform launched.	1 st October 2021	<ul style="list-style-type: none"> Successful sites invited to join.
Pilot work commences.	1 st October 2021	
Interim pilot site reports	3 x interim and 1 final report	<ul style="list-style-type: none"> Jan 2022 Apr 2022 Jul 2022 Oct 2022

Appendix 1. Current requirements for AHC as detailed in the DES

DES Payments for AHCs Practices can only be reimbursed for the delivery of the annual health check if the practice meets the legal requirements of the DES Directions. Paragraph 7(g) of the directions describes the minimum criteria for a health check which includes:

- A review of physical and mental health which includes:
 - The provision of relevant health promotion advice
 - A chronic illness and system enquiry
 - A physical examination
 - A consideration of whether the patient suffers from epilepsy
 - A consideration of the patient's behaviour and mental health
 - A specific syndrome check
- The production of a health action plan for all patients with a learning disability who are aged 14 years and over
- A check on the appropriateness of any prescribed medications
- A review of coordination arrangements with secondary care
- Where appropriate, a review of any transitional arrangement which took place on the patient attaining the age of 18

The critical factor is not the mode of delivery but whether the requirements of the DES directions are being met. The terms of payment are negotiated with the BMA and are not a matter for local determination.