

- To: • ICS:  
– leads  
– chairs
- cc. • Regional senior responsible officers for primary care  
• Regional senior responsible officers for mental health and health inequalities  
• Mental health trust chief executives  
• Community services trust chief executives

NHS England and NHS Improvement  
Skipton House  
80 London Road  
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SE1 6LH

**12 January 2022**

Dear colleagues

## **Ensuring the delivery of annual health checks for people with severe mental illnesses and people with a learning disability**

The health inequalities faced by people living with severe mental illnesses (SMI) and people with a learning disability are stark. The life expectancy gap for people with SMI continues to deteriorate, with [recent data](#) from 2018-20 highlighting that people with SMI are five-and-a-half times more likely to die prematurely than those without an SMI, due to preventable physical health conditions. Likewise, people with a learning disability are three times more likely to die from an avoidable medical cause of death than the general population.

The impacts of the pandemic will widen this gap further unless we take decisive and proactive action to address inequalities. The NHS is committed to delivering annual health checks for people with SMI and/or a learning disability. These checks are a key lever to address the reduced life expectancy for both groups.

In December NHS England set out plans for the [COVID-19 vaccination programme](#) and made [guidance](#) available outlining the expectation for GP teams, primary care networks (PCNs) and their teams to create capacity to support expansion of the vaccination programme.

Continued delivery of physical health checks for our most vulnerable populations remains a high priority alongside the vaccine booster roll out, even as we continue to deal with a Level 4 National Incident. Primary care is being asked to work with commissioners on a plan to prioritise checks based on clinical risk, accounting for inequalities.

On this basis, primary care is encouraged to continue to deliver as many of the checks as is feasible. This may involve taking a Making Every Contact Count approach including offering flu vaccinations and using the opportunity of the COVID vaccination appointment to undertake as much of the health check as feasible.

The pressures within the system require more flexible and joint system working to share the responsibility of delivery of the checks and follow-up care. Therefore, this letter asks system partners to work together to support delivery of the physical health checks over the remainder of this financial year.

### **System support**

To bolster the efforts to deliver these vital health checks, systems are asked to utilise current underspends to fund additional capacity. If underspends are not available, ICS leads are asked to work with their NHS England and NHS Improvement regional finance leads to draw down central additional funding to increase existing capacity (see Annex 1). Our regional finance leads have been informed of how the additional funding can be accessed.

Any additional funding will be solely for the purposes of delivering physical health checks and follow-up care to people with SMI and/or a learning disability. It should be used via a combination of the following:

- Increasing secondary care capacity with local primary and secondary care partnerships for learning disability.
- Increasing capacity within mental health trusts to deliver physical health checks for the SMI patients that they have had contact with (eg via bank shifts).
- Supplementing the existing directly enhanced service (DES) for learning disability.
- Supplementing existing primary care capacity to deliver checks (eg via local enhanced schemes).
- Building on existing outreach schemes with the voluntary, community and social enterprise sector to ensure patients have the support they need to attend their physical health check.
- Providing funding to community pharmacy/community health services to deliver checks.

There are ambitious targets for delivery of these checks in 2021/22: 302,000 people with an SMI should receive a health check, and 75% of those with a learning disability should receive a check this year. Similarly, physical health checks for people with SMI is one of the five focus clinical areas in the CORE20PLUS5 initiative. Data from SMI health check

schemes must be flowed through the strategic data collection service (SDCS); for learning disability it must be flowed to the monthly NHS Digital collection.

**Next steps**

We are grateful for your continued efforts under difficult circumstances to serve our patients, who are some of the most vulnerable members of society. By working flexibly across the system to prioritise the delivery of these checks, we make best use of all our available resources to ensure these health inequalities do not worsen.

Yours sincerely



**Claire Murdoch**  
National Director for  
Mental Health



**Tom Cahill**  
National Director for Learning  
Disability and Autism



**Dr Bola Owolabi**  
Director, Health  
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## Annex 1: Regional NHS England and NHS Improvement finance leads

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North East and Yorkshire	Tim Lowe	<a href="mailto:tim.lowe@nhs.net">tim.lowe@nhs.net</a>
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## Annex 2: Resources to support implementation SMI

- Positive practice case studies, available on the [FutureNHS platform](#)
- [Co-produced tailored invitation letter for physical health checks](#)
- [Equally Well resources for vaccination support for people with SMI](#)
- [COVID-19 workload prioritisation guide for general practice during the accelerated booster vaccination campaign \(England\)](#)
- [2022/23 priorities and operational planning guidance](#)

## Annex 3: Learning disability annual health check case studies

- [Learning Disability annual health check exemplars](#)