

7.18 Cardiovascular disease screening: NHS health check

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NHS Health Check is a national initiative designed to identify diabetes and cardiovascular disease (CVD) risk in the 40-74 year old population. Individuals are given a 10 year CVD risk score and screening takes place once every 5 years for most people. The 5 year roll out in Barking and Dagenham commenced in January 2009.

The purpose of the NHS Health Check is to detect people at high risk of diabetes, cardiovascular disease, chronic kidney disease and dementia at a point early enough for implementation of simple lifestyle interventions to manage or reverse the risk of disease, and/or for clinical interventions to be initiated to maintain good health.

Department of Health targets for the NHS Health Check are based on a five year programme achieving 75% uptake. The first round of health checks ran from 2008/09 to 2012/13. In Barking and Dagenham around 31,000 health checks were needed in that 5 year period and 23,456 were completed.

In the second round, which lasts from 2013 to 2018, the eligible population for Barking and Dagenham is 42,931, with 20% of these people being invited each year. Between the period 1 April 2013 to March 2016, 27,352 (62.4%) were offered a health check and 14,874 (54.4% of those invited) received one¹. The uptake rate is above the national average of 48.6%

The NHS Health Check Programme helps identify new cases of long term conditions i.e. Diabetes, Hypertension and Chronic Kidney Disease. Table 7.18.1 shows the number of people identified as a result of the health checks between April 2013 and March 2016.

Table 7.18.1: NHS Health Check programme, necessary interventions identified, Barking and Dagenham, 2013/14 – 2015/16

Period 1 April 2013 to 31 March 2016*	Hypertension	Diabetes	Chronic Kidney Disease
% Diagnosed	3.4%	1.6%	0.3%
Number diagnosed	506	243	26

*Based on 14,874 health checks

Source: Health Analytics/Public Health Outcomes Framework

¹ http://www.healthcheck.nhs.uk/interactive_map/compare_local_authorities_or_centres/ (accessed 17 April 2015)

Economic assessment

There are very few health interventions where improvements in quality of life and survival can be achieved so cost effectively. Estimates for cost per Quality Adjusted Life Year (QALY) gained for the Health Check programme vary between £2,142² and £3,000³. Sensitivity analysis shows the cost effectiveness of the policy is robust against anticipated uncertainties. In any case, these figures are substantially lower compared to other cost per QALY for NICE recommended therapies such as cochlear implants at £13,400 or more than £20,000 for many cancer treatments.

The NHS Health Check programme is recognised as good practice despite a lack of evidence for short term savings. In the longer term the impact of early lifestyle and medical interventions for those diagnosed will reduce the £3m plus that is currently spent on CVD related admissions.

Current programme delivery

Delivery is through a range of providers and mainly in Primary Care, where by far the largest volume of health checks is delivered. For those people who do not regularly access a GP other services are commissioned, including community pharmacies.

More work is needed to understand the best way to provide services for hard-to-reach groups, including the motivational strategies and behaviours of hard-to-reach groups such as black and minority ethnic communities, the homeless and people with underlying serious mental health problems, in order to ensure the service is accessible and well used by these groups.

A follow on project is needed that addresses a systematic approach to establish what happens to people who take up the lifestyle interventions such as smoking cessation, weight loss and exercise referral programmes. A strategy to address this is planned in the future.

Recommendations for Commissioners

The Council needs to work with the Clinical Commissioning Group to identify and put in place a mechanism to encourage delivery of health checks to those patients who are not coming forward for their check. The success of the programme in identifying early cases of life-limiting diseases depends on people coming for their check.

Referral pathways to lifestyle interventions i.e. smoking cessation, weight management and active lifestyle need to be clear.

The pathways need to be promoted to residents in the population, where appropriate. Also easy access information about the pathways and to referral into the pathways needs to be made easy for health and social care professionals referring into the pathway.

² http://www.healthcheck.nhs.uk/Library/MarionKeerNHS_Health_Check_costsandbenefits121110.pdf

³ http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_085917.pdf