Section 1 – Summary and Recommendations

This report sets out the response of Public Health to the winter 2013 Scrutiny review of the NHS Health Checks programme in Harrow and Barnet.

Recommendations:
Cabinet is requested to:
1. Note the Public Health response to the Scrutiny Review recommendations
2. Note progress on recommendations (appendix 1)
3. Support the Scrutiny Review in its recommendations to Public Health England
4. Agree to receive updates from the Centre for Public Scrutiny on progress against the recommendations to Public Health England.
Section 2 – Report

A Scrutiny review of Barnet and Harrow NHS Health Check function took place between September and December 2013. Assisted by the Centre for Public Scrutiny, and using the Return on Investment model, the review took into account the policy context; local context; service performance; stakeholder views and best practice examples.

The review put forward a number of recommendations for the Council. The Director of Public Health has considered these recommendations and his detailed response is set out in the appendix. In carrying forward these recommendations, the ‘early identification of cardiovascular disease and diabetes through the health checks programmes’ objective within the Health and Wellbeing strategy will be progressed.

Options considered

The NHS Health Check is a health check screening programme, targeted at 40-74 year olds, which aims to help prevent cardiovascular disease. There is a statutory duty for councils to commission the risk assessment element of the NHS Health Checks programme. Monitoring of this will be against the Public Health Outcomes Framework. The Scrutiny Review recommendations have been considered by the Director of Public Health and his response is attached in the appendix.

Scrutiny Review Recommendations

The Scrutiny Review’s recommendations were developed through engagement with stakeholders and cover the following themes:

1. Health Checks promotion
2. Provider /Flexible delivery
3. Treatment Package
4. Referral pathways
5. Restructure financial incentives
6. Resources
7. Targeting
8. Screening Programme Anxiety
9. Barriers to Take-up
10. Learning Disability
Implementing the recommendations will enable the Health Check programme in Harrow to work towards meeting the suggested target of offering a Health check to 20% of the eligible population every year, and to 100% of the eligible population over a five year period.

Legal Implications

The Health and Social Care Act 2012, transferred responsibility to Local Authorities for commissioning the NHS Health Check risk assessment from 1st April 2013. Previously commissioned by the PCT, the Health Check programme is a mandatory function for Local authorities.

Financial Implications

Public Health funding is ring-fenced and can only be spent on public health functions, including Health Checks. The budget for 2013/14 was £335K and this will be maintained.

Recommendations in the report are to consider the payment mechanisms. We will be looking at how the payment mechanism can be used to incentivise the improvement in performance. We will be seeking to maintain with the budget allocation.

In the event that the recommendations lead to an increase in activity (and therefore cost) associated with Health Checks i.e. ‘whole population approach’ and a public information campaign, the impact on the commissioning intentions will be considered as part of the annual budget setting cycle in light of other public health priorities and funding decisions.

There are potential wider savings, although difficult to evidence, to the council’s Social Care budgets through early prevention and treatment of cardiovascular disease. No assumptions have been made in the future MTFS about these savings.

Performance Issues

The 2013/14 Public Health scorecard contains the below indicator to monitor the Health Checks programme. A recovery plan is in place, following the transition from the PCT, as performance to date is below the suggested Department of Health Target. The target for Q4 has been revised downwards from 1650 in the previous quarters to 700 health checks.

<table>
<thead>
<tr>
<th>Indicator Description</th>
<th>Actual Q1 2013/14</th>
<th>Actual Q2 2013/14</th>
<th>Actual Q3 2013/14</th>
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<tbody>
<tr>
<td>Number of eligible people receiving health checks</td>
<td>810</td>
<td>869</td>
<td>Data not available until early May</td>
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</table>
Implementing the recommendations as set out by the Scrutiny Review will enable improvements to the current performance.

**Environmental Impact**

There are no significant environmental impacts.

**Risk Management Implications**

Risk included on Directorate risk register? Yes

Separate risk register in place? Yes

Although there are no national targets attached to the programme, there is an expectation that 20% of the eligible cohort will be offered a health check in each year of the 5-year programme and uptake will be 50%. The risk(s) to not delivering the Health Checks programme are:

- Although some GPs might carry out opportunistic health checks on request from patients, council performance will remain poor on this indicator if there is no organised programme and the 50% uptake will not be achieved in 2014/15
- Damage to Council reputation for failing to provide the level of service expected by residents and referred to on the NHS Health Checks national website (and provided by other boroughs).
- Potential increased admissions into acute hospital care with acute cardiovascular events, such as heart attacks, unstable angina and strokes

**Equalities implications**

Was an Equality Impact Assessment carried out? No

The NHS Health Checks programme is a mandatory function transferred to Local Authorities alongside the transfer of Public Health. Department of Health guidance is prescriptive in how the programme is to be delivered. Take-up of the health checks is via GP practices and the information on those accessing the service is confidential to the NHS. We have a data sharing agreement with the CCG to access information on individuals receiving the health check. From local intelligence, we are aware that certain communities do not access the Health Check offer and work in underway to deliver health checks to those communities.

**Corporate Priorities**

This report incorporates the following corporate priorities through the Health and Wellbeing strategy objective of “Supporting residents most in need, in particular, by helping them find work and reducing poverty.”
This supports the corporate priority of being Fairer by offering equality of access to health checks to qualifying groups.

**Section 3 - Statutory Officer Clearance**

<table>
<thead>
<tr>
<th>Name</th>
<th>on behalf of</th>
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<tbody>
<tr>
<td>Donna Edwards</td>
<td>Chief Financial Officer</td>
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<tr>
<td>Date: 18 March 2014</td>
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</tr>
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<table>
<thead>
<tr>
<th>Name</th>
<th>on behalf of</th>
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<tbody>
<tr>
<td>Linda Cohen</td>
<td>Monitoring Officer</td>
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<tr>
<td>Date: 17 March 2014</td>
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**Section 4 – Performance Officer Clearance**

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Martin Randall</td>
<td>Divisional Director</td>
</tr>
<tr>
<td>Date: 18 March 2014</td>
<td>Strategic Commissioning</td>
</tr>
</tbody>
</table>

**Section 5 – Environmental Impact Officer Clearance**

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Andrew Baker</td>
<td>Corporate Director</td>
</tr>
<tr>
<td>Date: 17 March 2014</td>
<td>(Environment &amp; Enterprise)</td>
</tr>
</tbody>
</table>

**Section 6 - Contact Details and Background Papers**

**Contact:**
Nadeem Din/Sandra Husbands
Nadeem.din@harrow.gov.uk / Sandra.husbands@harrow.gov.uk
Background Papers:
1. Appendix 1 – Public Health Response to NHS Health Check Scrutiny Review

2. NHS Health Checks Scrutiny Review Final Report (December 2013)

Call-In Waived by the Chairman of Overview and Scrutiny Committee

NOT APPLICABLE

[Call-in applies]