

Title of report: Commissioning of the Herefordshire NHS Health Checks Service

Decision maker: Cabinet Member Adult Health and Wellbeing

Decision date: 22 January 2024

Report by: Public Health Lead – Healthy Behaviours

Classification

Open

Decision type

Key

This is a key decision because it is likely to result in the council incurring expenditure which is, or the making of savings which are, significant having regard to the council's budget for the service or function concerned. A threshold of £500,000 is regarded as significant.

This is a key decision because it is likely to be significant having regard to: the strategic nature of the decision; and / or whether the outcome will have an impact, for better or worse, on the amenity of the community or quality of service provided by the authority to a significant number of people living or working in the locality (two or more wards) affected.

Wards affected

(All Wards);

Purpose

This report is to set out a recommendation for recommissioning the NHS Health Checks Service in Herefordshire.

Recommendation(s)

That:

- a) **NHS Health Checks Service in Herefordshire is commissioned through an agreement pursuant to s75 National Health Service Act 2006 with Herefordshire and Worcestershire Integrated Care Board (ICB);**
- b) **Authority is delegated to the Director of Public Health, in consultation with the s151 officer to take all necessary operational decisions to implement the above recommendation**

Alternative options

1. Allow the existing contract for NHS Health Checks to expire on 31 March 2024 and the service to cease. This option is not recommended as this service is key to improving the health of the local population and is mandated by Office for Health Improvement and Disparities and a requirement of Public Health Ring Fenced Grant;
2. To invite competitive tender to contract with a single external provider. This option is not recommended because there are opportunities to align services and work streams via the ICB maximising reach and patient outcomes. In addition, through soft market testing in June 2023 interest from the market couldn't deliver the service for the budget available.

Key considerations

3. NHS Health Checks are a public health service for early identification, treatment and interventions to prevent the onset of avoidable disease and development of long term conditions, which would otherwise take up a high level of health and social care resources. These are mandated services, to be funded from the ring-fenced public health grant, for which responsibility transferred from the NHS to local authorities in 2013. The existing contract is due to expire on 31 March 2024 and the recommendations being made take account of the evidence base, lessons learnt following review of the current service provision and acknowledgement of the development work taking place to with Herefordshire and Worcestershire Integrated Care Board (ICB) and primary care networks throughout the county.
4. Councils are required under the Health and Social Care Act 2012 to ensure that all residents between the ages of 40 and 74, other than those already on certain disease registers, are invited to attend a health check every five years, with 20% of the eligible cohort invited each year (approximately 11,500 people). The actual health check is delivered by a nurse or health care assistant and comprises a lifestyle questionnaire, complemented by measurement of height, weight, cholesterol, blood pressure and blood sugar. Advice is given, based on the health risks identified through this process and where appropriate clinical intervention is followed up.
5. Historically the service has underperformed, however, through the current block contract approach delivered via GP Practices and Herefordshire GP federation- Taurus Health Care, Herefordshire has one of the largest percentage increases in the number of people offered health checks in the midlands 2023/24 (Q1), compared to the same period in 2022/23 and the largest percentage increase in the number of people receiving an NHS health check in 2023/24 (Q1).
6. In comparison with other NHS HC programmes, Herefordshire has one of the best Covid recovery records amongst other local authorities the most in terms of the number of checks carried out compared to pre-COVID activity in 2023/24 average Q1 activity for the two financial

years pre-COVID) (154.8%). This has been a direct result of implementing the current service model, providing capacity within primary care to deliver the NHS Health Check Service.

7. Locally, in addition to the current NHS Health Checks programme, additional prevention and early intervention work streams have been established via the ICB, such as Talk Wellbeing. This provides outreach provision targeting the unregistered patient population and most vulnerable groups in the county, providing an opportunity to maximise resources, increase reach of preventative services across the county and reduce health inequalities.
8. NHS Health Checks budget was reduced by £50,000 during 2023/24. Following this, a market engagement exercise was carried out to gauge the interest from the market. Provider's feedback stated they were unable to deliver the service to the eligible population in Herefordshire within the budget available. Continuing to implement a practice based model remains a more cost effective model, whilst working alongside partners to increase reach into local communities.
9. Models located within GP practices on the whole perform better across the country, not only in relation to people invited and receiving an NHS health check, but also providing improved follow up and onward care to patients. Other regions have also utilised ICB footprints to improve data sharing and population health management opportunities.
10. In Herefordshire the value of an NHS Health Check including invitation is £37.50, this is comparable to other areas such as Worcestershire who also place a value of £37.50, and £42.50 for certain high risk groups. During 2021/22 In Herefordshire, 0.7% of Public Health Grant was spent on NHS Health Checks; this is less than the national average, but comparable to other midlands local authorities. Worcestershire spent 1.7% and Shropshire 2.6% of Public Health grant on NHS Health Check Services.
11. It is recommended that the council delegate the NHS Health Check function to Herefordshire and Worcestershire ICB through an agreement pursuant to s75 National Health Service Act 2006 to align the current delivery model with other prevention and early intervention focused work streams to maximise the investment and increase reach of these interventions. It will also provide an opportunity, through effective partnership working and increased engagement, for the local health system to take shared ownership of the NHS Health Check Service improving integration and patient outcomes.
12. Evidence of a similar model in Worcestershire shows this approach delivers good outcomes across the system. Both invitations and health checks completed have risen above the national and regional average, with 4% of eligible population receiving health checks in quarter 4 2023/24 above the England average of 2.9%. Integration and partnership working has enabled improved patient follow up and outcomes once a health check has been completed, including working with primary care to target health check delivery to patients living in areas of higher deprivation.
13. Section 75 partnership agreements, legally provided by the NHS Act 2006, allow budgets to be pooled and delegation of services between local health and social care organisations and authorities.

Community impact

9. The NHS Health Check service utilises the Joint Strategic Needs Assessment, best evidence and guidance to achieve desired outcomes for healthier communities. The service will be

equitable and accessible across the county for those who are eligible at their own GP practice. The service has the potential to reduce demand on acute and intensive services within the health and social care system. The service will help meet the corporate objectives of enabling residents to live safe, healthy, independent lives and securing better services, quality of life and value for money. It will also ensure the Council to fulfil its mandated responsibility to deliver the service countywide.

10. The service falls within the implementation of the council's community wellbeing approach for developing self-care and building community resilience within healthier communities under a strategic preventative approach. The proposal has no negative impact on looked after children or the council's parenting role and indeed will have a positive impact in developing norms of behaviour in adults that act as good role models. If this service was not provided, there would be a considerable impact on the health and wellbeing of the community and higher system costs, with loss of quality of life due to the development of long term conditions.

Environmental Impact

11. The environmental impact of this proposal has been considered through the service specification and includes appropriate requirements on the contractor/delivery partner to minimise waste, reduce energy and carbon emissions and to consider opportunities to enhance biodiversity. This will be managed and reported through the ongoing contract management – and will include items such as utilising local suppliers, promoting active travel and supporting local community infrastructure through encouraging patients to adopt healthier behaviours.

Equality duty

12. Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:

A public authority must, in the exercise of its functions, have due regard to the need to –

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
16. The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services. Our providers will be made aware of their contractual requirements in regards to equality legislation.

17. The NHS Health Check Service in Herefordshire will adopt a proportionate universalism approach. Where all eligible individuals should be encouraged to attend a NHS Health Check, however populations who have historically been under represented in the service should be of primary concern. This includes:

- Individuals living in more deprived communities
- Men
- BAME groups
- Patients who have not engaged with primary care in 5 or more years

Resource implications

18. The breakdown for the service is set down below for the proposed agreement period of 3 years with the option to extend for two years, it is assumed that the service will still be required in subsequent years although this is dependent on the continuation of the Public Health Ring Fenced Grant.

Revenue cost of project	2023/24	2024/25	2025/26	Future Years	Total
<i>NHS Health Checks Service</i>	£205K	£205K	205K	£000	£615K
TOTAL					

Legal implications

19. The Council has a statutory responsibility for the commissioning of public health services pursuant to the Health and Social Care Act 2012. NHS Health checks are ‘mandated’ and are required to be commissioned. Prescribed conditions will have to be satisfied to enable an agreement to be entered into pursuant to s75 National Health Service Act 2006 including joint consultation on the proposals,

Risk management

20. Partnership approach to managing the NHS Health Checks contract with steering group with appropriate bodies to align with other prevention services and work collectively with Primary Care Networks. Evidence of similar model in Worcestershire shows this to work well.

21. Quarterly meetings will be held to monitor performance and mitigate any risks to delivery working alongside HW ICB colleagues.

22. All risks will be managed within the public health risk register. Risks will be identified by the public health commissioning lead for these services through regular contract monitoring meetings.

23. There are financial risks of take up being higher than planned that can be mitigated by close monitoring of activity, reducing activity levels in line with budget.

Consultees

- 24. Key Stakeholders - Primary Care, Herefordshire and Worcestershire ICB
- 25. Patient Survey for all eligible patients have been carried out and will inform service development.

Appendices

None

Background papers

None

Report Reviewers Used for appraising this report:

Please note this section must be completed before the report can be published		
Governance	Click or tap here to enter text.	Date Click or tap to enter a date.
Finance	Wendy Pickering	Date 09/11/2023
Legal	Emma-Jane Brewerton	Date 17/11/2023
Communications	Luenne Featherstone	Date 03/11/2023
Equality Duty	Harriet Yellin	Date 07/11/2023
Procurement		Date Click or tap to enter a date.
Risk	Jo Needs	Date 06/11/2023
Approved by		Date 23/11/2023

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Please include a glossary of terms, abbreviations and acronyms used in this report.