

# NHS Health Check Programme in Redbridge: Health Equity and Inequity



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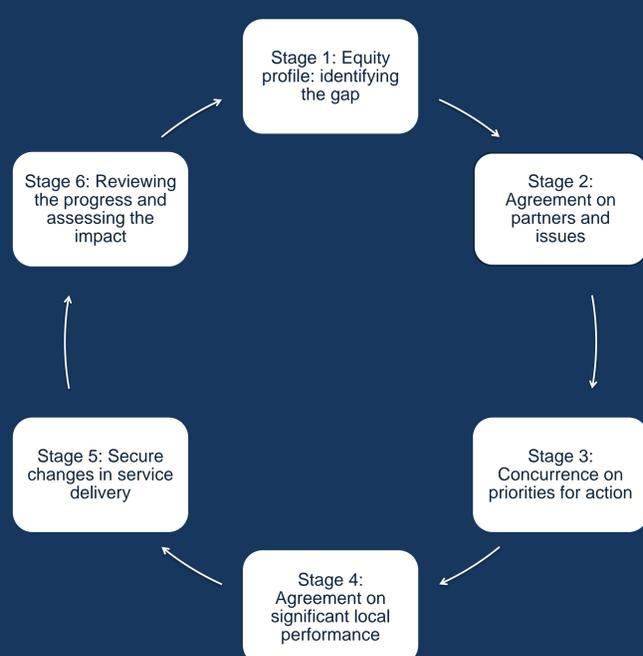
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## INTRODUCTION

The Redbridge NHS Health Check Programme aims to prevent heart disease, stroke, diabetes, kidney disease and certain types of dementia in addition to reducing levels of alcohol related harm.

A Health Equity Audit (HEA) is a review procedure that examines how determinants of health, access to relevant services and related outcomes are distributed equitably in relation to the needs of different population groups.



Health Equity Audit Made Simple: A briefing for Primary Care Trusts and Local Strategic Partnerships 2003

## PURPOSE

The audit was undertaken to understand the wide variations noted repeatedly across General Practices in both offer and uptake of NHS Health Check in the eligible population.

## METHODS

There were four components to the Health Equity Audit.

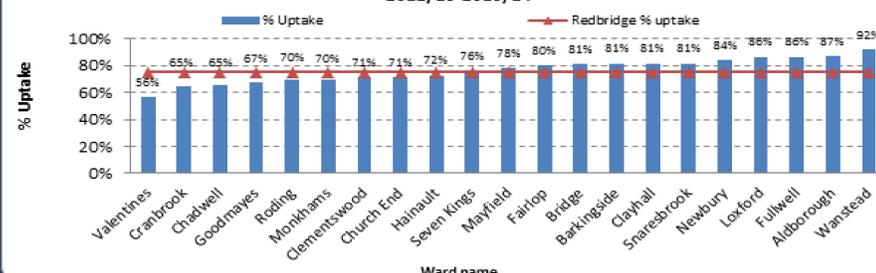
- NHS Health Check performance data for a two year period from 2012 -2014 was analysed by age, gender, ethnicity, ward and General Practice.
- Secondly, focus group discussions were conducted with service users representing groups with both low and high uptake of the NHS Health Check to explore perceptions and experiences of the programme within the local community.
- Thirdly a survey of General Practice staff was undertaken to understand NHS Health Check delivery models across the borough, as well as gather views on the challenges faced in programme delivery and support required to strengthen this.
- Fourthly published and grey literature on ways of enhancing delivery of NHS Health Check in General practice settings was reviewed.

## RESULTS

Percentage of patients who were offered and received NHS Health Check by locality, 2012/13-2013/14



Percentage uptake of patients who received NHS Health Check from offered by ward, 2012/13-2013/14



## Data analysis showed:

- Uptake of NHS Health Check was lowest amongst men in the 45 – 49 age group and residents of White ethnicity.
- High uptake was noted in residents from mixed and Black and Minority ethnic groups and those aged 60 – 74.
- The results did not show any correlation between deprivation and uptake.

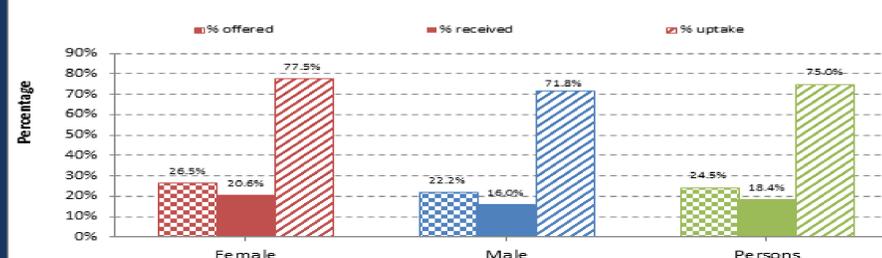
## Focus group discussions identified:

- Low awareness of the programme and a lack of clarity around what exactly constitutes an NHS Health Check as key reasons for low uptake.
- Flexibility and convenience were highly rated by participants as crucial factors in improving uptake, particularly in terms of GP appointments and phlebotomy services for those of working age.

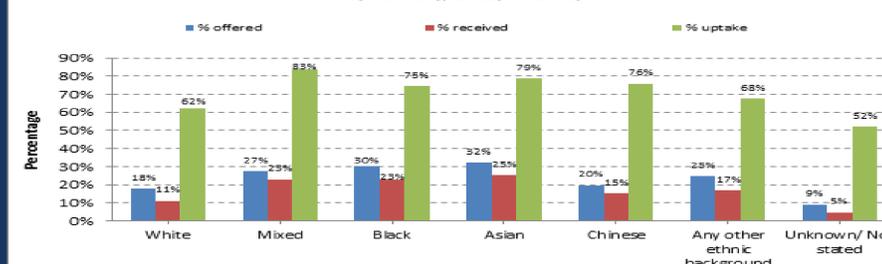
## Survey showed:

- 65% GP practices responded to the survey.
- NHS Health Check offer was dependent on levels of GP engagement with the programme and considerable variations were noted in appointment availability and invitation methods across practices.
- Challenges to delivery reported, included a lack of adequate appointment slots and staff time, as well as patients not attending appointments or missing blood tests.
- Practices felt raising awareness of the programme would lead to an improved uptake.

Percentage of patients who were offered, received and uptake of NHS Health Check by gender in 40-74 years, 2012/13-2013/14



Percentage of patients who were offered, received and uptake of NHS Health Check by ethnicity, 2012/13-2013/14



## CONCLUSION

The audit identified clear inequities particularly around ethnicity and NHS Health Check offer. The inequity for patients registered with practices that are not fully engaged was evident. The audit also clearly highlighted low awareness and lack of clarity around the programme

## NEXT STEPS

- Targeted work exploring reasons for low uptake in White population
- Closer collaborative working with CCG and primary care
- Raising awareness
  - population level through development of a comprehensive communication strategy
  - Primary Care through ongoing engagement