



Action notes

Title of meeting: NHS Health Check Expert Scientific and Clinical Advisory Panel
Date: Wednesday 17 May 2017
Time: 10:00 – 12:00
Venue: Board Room, Wellington House, 133 – 155 Waterloo road, SE1 8UG
Dial in details: [Join Skype Meeting](#) (please use the hyperlink)
If you don't have access to Skype you can dial in using the following number: [+44 208 495 3300](#)

Attendees:

Chair

John Newton, Chief Knowledge Officer, PHE
Jamie Waterall, NHS Health Check – National Lead, PHE
Charles Alessi, Senior Advisor, PHE
Jonathan Valabhji, National Clinical Director for Obesity and Diabetes, NHS England
Felix Greaves, Deputy Director, Science and strategic information
Matt Kearney, National Clinical Director for Prevention, NHS England
Huon Gray, National Clinical Director for Heart Disease, NHS England
Gillian Fiumicelli, Head of vascular disease prevention, London Borough of Bromley
John Deanfield, Director of National Centre for Cardiovascular Prevention and Outcomes

Telephone

Theresa Marteau, Director of the Behaviour and Health Research Unit, University of Cambridge

Telephone

Lynda Seery, Public Health Specialist, Newcastle City Council
Peter Kelly, Centre director North East, PHE

Telephone

Michael Soljack, Clinical Research Fellow, Imperial College

Guest

Nicola Pearce-Smith, Senior Information Scientist, PHE

Guest

John Robson, GP and reader, Queen Mary University London

Guest

Julia Hippisley-Cox, Professor of clinical epidemiology and clinical practice, University of Nottingham.

Guest

Gemma Brinn, Public Health Specialty Registrar

Guest

Tim Chadborn, Behavioural Insights lead researcher, PHE

Guest

Slade Carter, Deputy national lead, CVD prevention team, PHE

Secretariat

Katherine Thompson, Deputy national lead, CVD prevention team PHE

Secretariat

Meritxell Rosell, Senior support manager, CVD prevention team, PHE

Apologies

Martin Vernon, National Clinical Director for Older People, NHS England.
Nick Wareham, Director of the MRC Epidemiology Unit and co-Director of the Institute of Metabolic Science
David Wood, Professor of Cardiovascular medicine, Imperial College London
Mark Baker, Centre for Clinical Practice Director – NICE
Anthony Rudd, National Clinical Director for Stroke, NHS England
Anmarie Connolly, Director of Health Equity and Impact, PHE
Zafar Iqbal, Deputy Director of Public Health, Stoke on Trent
Anne Mackie, Director of programmes, UK NSC
Ash Soni, Vice Chair, English Pharmacy Board
Ruth Chambers, GP, Clinical Chair Stoke-on-Trent CCG
Alistair Burns, National Clinical Director for Dementia, NHS England
Richard Fluck, Chair of the Internal Medicine Programme of Care board.

Timings	Item Description	Lead
10:00 – 10:05	<p>1. Welcome and apologies As shown on page 1 and 2.</p>	JN
10:05 – 10:15	<p>2. Actions from the last meeting</p> <p>Action 1 – Katherine Thompson to circulate the Q3 data report to members. Complete.</p> <p>Action 2 – Katherine Thompson to share link to conference resources. Complete</p> <p>Action 3 – Katherine Thompson to check that the recent publication from Imperial is included in the literature search. Yes. The publication was in the literature search from the last meeting. Complete.</p> <p>Action 4 – Peter Kelly to raise the report with PHE Centre Directors to see if the report can be shared in regional DsPH meetings. Complete.</p> <p>Action 5 – Katherine Thompson to produce a single slide deck with key messages that partners can use to support a conversation on the report findings. Complete – this was shared as part of the papers for the meeting on the 17 May.</p>	JW

Timings	Item Description	Lead
	<p>Action 6 – Jamie Waterall to explore the possibility of doing a health matters on NHS Health Checks.</p> <p>Jamie is exploring the possibility of a health matters campaign aligned to the national CVD conference in 2018.</p> <p>Action 7 – Matt Kearney to follow up with RCGP on circulating the report to members.</p> <p>Matt secured an article in GP online and information will go out in the June RCGP newsletter.</p> <p>Action 8 - Zafar Iqbal to facilitate a dialogue with faculty of public health representatives – John Newton to attend the meeting.</p> <p>Zafar is seeing Chris Packham on the 16 May to discuss this further.</p> <p>Action 9 – Katherine Thompson to circulate the patient stories as they come online.</p> <p>Complete.</p> <p>Action 10 – Katherine Thompson to work with members to identify senior GPs who would be willing to speak about their experiences of delivering the programme and to articulate what it means to them and their patients.</p> <p>A number of GP advocates have been identified and Katherine is working with PHE centre leads to capture their experience in a short film.</p> <p>Action 11 – Katherine Thompson to table an item at a future meeting to consider next steps for keeping the evidence under review at a future meeting.</p> <p>This will be addressed under item 4.</p>	
10:15 – 10:30	<p>3. Programme update</p> <p>Activity has continued to drop in quarter 3, addressing this has been a key focus of the National Advisory Committee Task and Finish Group which is chaired by Duncan Selbie. Quarter 4 data will be published on 14 June.</p> <p>Members questioned the quality of the financial data included in paper 2, which might explain some of the variation. This information is being used by PHE centres to inform discussions with local authorities on efficiency and commissioning.</p> <p>Duncan has been chairing a National Advisory Task and finish group which has brought together a number of partners and actions that will support local authorities to address the downturn in activity.</p>	JW
10:30 – 10:55	<p>4. NHS Health Checks in east London: a matched analysis</p> <p>John Robson summarised the key findings from his North East London</p>	JR

Timings	Item Description	Lead
	study on NHS Health Check data and the scope of work for future research on NHS Health Checks.	
10:55 – 11:05	<p>5. Emerging evidence: next steps</p> <p>Katherine Thompson highlighted that the Emerging Evidence report from ESCAP made eight research recommendations. These recommendations pick up on areas of the programme that are commonly raised at ESCAP: the programme’s cost effectiveness; understanding the programmes reach and impact by different socio-demographic groups; understanding how different delivery models and settings affect take-up; understanding the referral rates to lifestyle services and the impact of those services on behaviour; understanding what clinical follow-up is routinely in place and its impact.</p> <p>A presentation summarising the key findings from the report and recommendations for academics has been developed and shared with officials from PHR and SPH along with an offer to talk to them about the findings from the work and next steps.</p> <p>Felix Greaves confirmed that the National Institute for Health Research (NIHR) has now awarded funding to the University of Staffordshire to undertake a trial on the communication of risk. In addition, three bids have been received and are currently being evaluated in response to NIHRs call for modelling on the impact of the NHS Health Check programme.</p> <p>Members agreed that it would be helpful to write to Chris Witty with the key findings and recommendation from the ESCAP report.</p> <p>Action 12 – Katherine to draft a letter for John Newton to send to Chris Witty on the findings and recommendations for the ESCAP report.</p> <p>Action 13 – the ESCAP report working group to discuss next steps and bring actions back to the next meeting.</p> <p>Michael Soljack confirmed that Imperial have a paper which is due to be published in the BMJ on a tool to evaluate patient’s risk perception.</p> <p>Going forward it would be helpful to consider what evidence we need to support a strategic approach to tackling CVD across the system.</p> <p>Members welcomed the evidence briefing produced by NPS and agreed that it would be helpful to publish the evidence briefing.</p> <p>Action 14 – Katherine Thompson and Nicola Pearce-Smith to publish the NHS Health Check evidence briefing.</p>	KT/NPS
11:05 – 11:15	<p>6. Behavioural science proposal</p> <p>Gemma Brinn summarised the draft scope of work on a behavioural</p>	GB

Timings	Item Description	Lead
	<p>science proposal which will be used to develop a study on how financial incentives affect take-up.</p> <p>Members agreed that this would be a useful piece of research. It was suggested that it would be helpful to look at the different delivery models i.e. effect where delivered by GP, pharmacy etc. as this may confound the outcome.</p> <p>It was agreed that the project initiation document needs to explicitly state that remuneration of follow-up is excluded from the scope of work.</p> <p>It was also suggested that research into incentives for patients to take up their offer of the check could be useful.</p> <p>Action 15 – Gemma Brinn to update the Behavioural Science project initiation document and circulate the final version to ESCAP members.</p>	
11:15 – 11.30	<p>7. NHS Health Check national evaluation next steps.</p> <p>John Robson and Julia Hippisley-Cox confirmed that they had been commissioned by the Department of health to:</p> <ol style="list-style-type: none"> 1) Update the NHS Health Check descriptive evaluation and matched analysis with data up until March 2017 drawing on data from 1400 practices spread across England. 2) Compare uptake among people with/without severe mental illness and in those prescribed long-term antidepressants versus those that haven't. 3) Look at diabetes risk in the population and estimate the effect of different interventions using different thresholds. <p>The study will be undertaken by the end of March 2019. In delivering this work there is an opportunity to look at some of the outcomes of the programme by linking to Hospital Episode Statistics. The study will also look at dementia, Atrial Fibrillation and Familial Hypercholesterolemia which was not considered in the original piece of work.</p> <p>There was some discussion about including an analysis on people with learning difficulties. Julia indicated that the definition of Severe Mental Illness that will be used is the same as the QOF definition so it covers a wide range of groups but is already well defined. Learning Difficulties potentially have a much bigger group of codes, however, the research team are happy to explore this possibility further.</p> <p>Action 16 - Julia to speak with Giles Glover about the feasibility of including people with Learning Difficulties in the analysis.</p> <p>Currently reviewing read codes that should be used to help capture the data.</p> <p>Action 17 – Jonathan Valabhji to share the read codes being used to</p>	JR and JHC

Timings	Item Description	Lead
	<p>record the Diabetes Prevention Programme referrals in primary care with Julia Hippisley-Cox.</p> <p>Action 18 – Julia Hippisley-Cox to share the proposal for the national evaluation with ESCAP members.</p>	
<p>11:30 – 11:45</p>	<p>8. Five year forward view commitment to CVD</p> <p>Matt Kearney confirmed that NHS England’s Five Year Forward View includes a chapter on sustainability which contains the “must dos”. This includes a section focussed on CVD prevention which highlights the need to tackle high risk conditions contributing to CVD i.e. AF, blood pressure and type 2 diabetes</p> <p>It sets out the work of RightCare in contributing to this agenda and that the NHS Health Check is a key intervention.</p> <p>Continuing on from the publication PHE is conversation with NHS England to explore how the system can add value to this work to impact at scale. NHS England has also appointed clinical leads to work with the hospitals to look at reducing variation in secondary care.</p> <p>Action 19 – Katherine Thompson to include an item on digital data and invite representatives from the information governance board to present at a future meeting.</p>	<p>MK</p>
<p>11.45 – 11.55</p>	<p>9. National data extraction [standing item]</p> <p>Slade Carter confirmed that the data extract was formally reviewed by the Standardisation Committee for Care Information (SCCI) in March 2017. PHE is now working with SCCI to address their remaining queries on the data extraction.</p>	<p>SC</p>
<p>11:55 – 12:00</p>	<p>10. AOB</p>	<p>All</p>