#### KIRKLEES HEALTH & WELLBEING BOARD

MEETING DATE: 2<sup>nd</sup> December 2021

TITLE OF PAPER: Health Check Pilot Update

#### 1. Purpose of paper

The purpose of the paper is to update the board on a key health and wellbeing initiative, the Health Checks Pilot, which went live on 8 November 2021. We are also asking the Board to endorse and support proposals for the next phases of the pilot as it focuses in new and innovative ways to tackle health inequalities in Kirklees.

The next section (background) gives an indication of where we have come from since the initial discussions in February 2020. Section 3 give some 'hot off the press' data for the first couple of weeks of the pilot. This section also demonstrates how the 'wellness' approach is working within the pilot to provide access to a holistic, community-based health check in a non-clinical environment with follow on support appropriate to the individual.

# 2. Background

The NHS Health Check programme has been delivered in General Practices in Kirklees since March 2012, offering a CVD risk assessment and personalised advice to all individuals aged 40-74, who do not have pre-existing cardiovascular disease or related conditions. It is offered once every five years to all eligible individuals to increase awareness of healthy living and reduce cardiovascular morbidity and mortality rates. Data shows that there is a very low take up of the NHS Health Check in some localities and from those people experiencing health inequalities (e.g. BAME groups, people living with mental health conditions or those living in areas of greater deprivation). Research by Public Health and the Wellness Service confirmed this and led to further research into other areas in the country where different models have been adopted and trialed.

Kirklees Public Health has commissioned the <u>Kirklees Wellness Service</u> to research and develop and deliver a pilot project to look at ways of maximising the impact of the health checks programme, finding innovative ways to target and reach those most at risk and provide more person-centred support for health improvement, leading to better outcomes for people. A range of materials used in the pilot is in see Appendix 1.

An example of innovative evidence led approaches to tackling health inequalities is the Weight Neutral approach (see Appendix 2); a new approach to issues of weight and health that is driven primarily by compassion, takes blames away from individuals and fully acknowledges the mental and financial burden poverty and inequality places on people.

The <u>Kirklees Wellness Service</u> has responsibility for conducting and evaluating the pilot and making recommendations for the future delivery of this programme.

The pilot will run for a minimum of six months from 8<sup>th</sup> of November 2021, in the Primary Care Network areas of Viaduct, Greenwood, and Batley & Birstall. These three areas were chosen for the pilot due to populations with high levels of health inequalities. All clinical directors are fully on board with the pilot and providing support as required.

### 3. Proposal: Where we are now and what we are proposing for the coming months

In September/October 2021 the pilot entered a critical phase moving from planning and preparation to focused engagement and delivery. The pilot start was slightly delayed for additional quality assurance, clinical oversight and staff training.

The much-needed clinical lead is now in post as of 31 August and is working closely with the Wellness Service Health Coaches to ensure they are confident and competent health check deliverers.

#### Outcomes to date:

- All staff fully trained to a high clinical standard
- Point of care testing equipment and standard operating procedures have been fully stress tested by staff during training.
- Robust clinical supervision is in place to ensure coaches feel confident in delivering a
  quality experience for people presenting for a health check.
- All staff are fully vaccinated against Covid-19 and Hepatitis B.
- Fully tested IT systems are in place for data gathering and recording.
- A fully integrated promotions, communication and marketing plan in place and operational – social media campaigns, promotional photo shoots & videos, targeted campaigns and links to community teams operating in pilot areas.
- As part of the training Local Integrated Partnerships Service staff were invited to undergo a health check ahead of the public launch on 8 November, and asked to provide 'critical friend' feedback.
- The University of Huddersfield is providing a comprehensive evaluation of the pilot, utilising both qualitative and quantitative data to measure the success of this approach.

The 5 Health Coaches have enthusiastically embraced the start of the pilot on 8 November and are working with the Clinical Lead and pilot project team to deliver checks within an agile framework that allows for adaptation throughout the life of the pilot. Feedback from the first week and a half shows that we are already making a positive impact.

"I enjoyed getting my results there and then and being explained to what my levels meant"

"There was a lot to take in so the booklet was really good to take away and read it all. I like it's informative style without being preachy."

"I have just attended the Jubilee Centre for my Health Check. I found it useful and informative. Alison was extremely helpful and accommodating and took time to explain each aspect of the health check to me. The Health Check project is a valuable programme; especially at a time when access to healthcare services is at an all-time low for many people."

Here are some important numbers from the first couple of weeks delivery:

- 178 Health Check referral received since launch
- 72% of all referrals have come from the target 3 PCN areas
- 33 Health Checks completed in week 1 (8<sup>th</sup> 12<sup>th</sup> Nov)
- 41 Health Checks booked/37 Completed for week 2 (15<sup>th</sup> 18<sup>th</sup> Nov)
- 50 Health Checks completed as of 16<sup>th</sup> November
- 3 Health Coaches delivering Health Checks in 11 venues across 3 PCN areas
- 2 Health Coaches providing additional capacity, project support ie: Business (Foxes Biscuits), Schools (Paddock) & Mosque engagement
- Out of the 50 checks completed, 40 showed abnormal results and have received appropriate follow up support, or signposting
- 2-3 Week Follow Up check-ins offered to people as required/requested. This can include Wellness support, signposting or referrals.

### **Quality Assurance:**

The Standard Operating Procedures (SOP) manual for the Health Checks Pilot has now been signed off through the Integrated Quality Group. The SOP details thresholds and pathways, with clear processes for staff to follow and is a live document, which is underpinned by close clinical supervision through the clinical lead role. All 5 Health Coaches now have non-NHS staff and NHS partner access to SystemOne for the recording and tracking of health check results.

### **Impact: Tackling Health Inequalities**

The pilot is a chance to understand what works and what doesn't as we test new and innovative ways of working with minimal risk. For example, are the target cohorts of people more likely to take up health checks if that check is provided at workplaces, faith settings, sports venues or libraries; or at weekends and evenings.

The impact of the project is being evaluated by our partners, the University of Huddersfield and will be available in Autumn 2022. The evaluation will collect and measure qualitative and quantitative data such as:

- Uptake of health checks offered
- Delivery of health check
- Community engagement activity
- Health check process
- User experience
- Outcomes (incl. follow up care)
- The impact of clinical governance

Data gathered so far in the pilot indicates that we are basing the pilot in the heart of some of the most deprived communities which face the highest health inequalities such as Batley West, Paddock, Lockwood, Deighton etc. We are using KOMPASS mapping to prioritise and plan future delivery sites and inform resources that we need. Key resources are provided in the 5 most common community languages with interpreters being made available where requested.

#### Independence & resilience

The Wellness Service was chosen to lead this pilot because the whole ethos of the service is about working alongside people to increase the level of control they have over their health and wellbeing.

#### **Involvement & Collaboration**

Throughout the planning and preparation for the pilot the Wellness Service has had the much valued involvement of colleagues in Public Health, Kirklees Active Leisure, Huddersfield Town Foundation, Healthwatch, Community Plus, the Clinical Commissioning Groups and Locala. They have been instrumental in developing and shaping the pilot. As we have moved into the delivery phase of the project, our partnership with Locala has been especially valuable through the services of our Clinical Lead, Helen Arnold. As part of the pilot we are forming important partnerships with

- The Clinical Directors and GPs in the 3 pilot PCNs, sharing patient lists of those who have not attended for GP health checks, providing facilities for disposal of clinical waste, and playing and important part of shaping the project through attendance at project meetings.
- Venues such as the Al-Hikmah Centre and Chestnut Centre (to pick out just 2) where we
  have been able to reach and engage communities, provide safe and familiar

surroundings for health checks and be part of shaping the next phase of the project with links to businesses etc.

### **Future Pilot Developments**

An initial planning meeting took place on 23 November to begin to scope out the next phase the pilot, which we have agreed to extend for a further 6 months, making it a 12 month pilot in all. Future developments include working with businesses, schools, places of worship, Covid vaccination centres, using targeted communication and engagement informed by the indicative data gathered in the first phase of the pilot.

### 4. Financial Implications

The pilot is funded through a combination of the Wellness Service budget (as commissioned through Public Health) and funding from the Tackling Inequalities Board for the appointment of the clinical lead role. Apart from that major expenditure it is anticipated that the main ongoing expenditure will be consumables for use in the point of care testing equipment. There is no specific financial ask of the Health and Wellbeing Board.

## 5. Sign off

Rachel Spencer-Henshall, Director of Public Health, Kirklees Council

### 6. Next Steps

The next steps for this project are the successful completion of what we are terming 'Phase One' of the pilot to January 2022. Planning is already taking place for Phase 2 which will look at the scope and reach of the pilot so far, and map this against areas and cohorts of health inequality to ensure the pilot continues to reach its intended audience.

Targeted promotional events and social media campaigns are planned to follow on from the promotion already done with key health and community leaders The Wellness Service has been very well supported by colleagues in the Council Comms Team.

At the end of November, the project steering group and partners will meet to plan the detail of the next phase starting in January 2021. Proposals for this next phase include taking the pilot to local employers, schools, sports venues, faith centres and to also trial evening and weekend delivery. A key focus will be specifically targeting communities and places of interest in the heart of areas which face the high health inequities and which barriers to access are present.

### 7. Recommendations

The Board support the project from a strategic standpoint, both locally and regionally. We would also like the boards suggestions on any innovative approaches to engaging specific communities, places of interest or ways we can adapt our approach to better tackle Health Inequalities across Kirklees.

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