

SCHEDULE A

SERVICE SPECIFICATIONS

Service Specification No.	
Service	NHS Health Checks – Component One – NHS Health Check Invitations
Authority Lead	<i>This will repeat what is in Part A</i>
Provider Lead	<i>This will repeat what is in Part A</i>
Contract Period	1 April 2016 to 31 March 2019 (plus possible extension for 1 + 1)
Date of Review	

NOTE: unless the context requires otherwise, the use of terms with capitals shall have the same meaning as defined in the Contract.

1. Population Needs

1.1 National/local context and evidence base

The NHS Health Check programme aims to prevent heart disease, stroke, diabetes and kidney disease and raise awareness of dementia and damage from alcohol use both across the population and within high risk and vulnerable groups.

In April 2013 the NHS Health Check became a mandated public health service commissioned by English Local Authorities and offered to individuals between the age of 40 and 74 years once every five years.

It is calculated that NHS Health Checks and the subsequent appropriate management of risk could prevent 1,600 heart attacks and strokes a year nationally, and provide a real opportunity to tackle the gap in life expectancy between deprived and less deprived populations. It is well established that it is possible to identify the risk factors that cause vascular diseases, thus identification through an NHS Health Check will enable Hampshire County Council to support its residents to act to change them. Intervention to reduce risk can delay and in some circumstances prevent the onset of cardiovascular vascular disease (CVD) (DH, 2009).

In order to reduce risk and prevent development of CVD, the emphasis will be placed on encouraging people to take up evidence based life style interventions and medications as appropriate..

2. Hampshire County Council (HCC) Strategic Aims and Key Service Outcomes

2.1 Local Strategic Aims & Priorities

The National NHS Health Checks Programme is a five year call and recall programme for the 40-74 year old registered population. This means the eligible population is considered in fifths and each year one fifth is invited for a NHS Health Check. By the time the 5 years are up, 100% of the eligible population will have been offered a NHS Health Check. Not everyone will be eligible because some meet the exclusion criteria, as such approximately 70% of the population will be eligible. More information on the exclusion/eligibility criteria can be found in section 4.4.

2.2 HCC Strategic Aims

Improving Health & Well-being for All:

- Ensure children and young people in Hampshire thrive and achieve full potential
- Promote and support healthy choices for all, reducing the difference between those with the best and worst health
- Help people to manage their health conditions, giving them the choice and maintaining their independence

Promoting Economic Prosperity and Protecting the Environment:

- Provide opportunities for all to develop the skills needed to play a full part in Hampshire's economic success

Working with Communities to Enhance Local Services:

- Ensure that customer and community feedback, together with information about levels of need are used to plan and deliver services
- Improve access to all County Council services
- Work with communities to find the local solutions that work best, giving more control to local communities over services where appropriate
- Help residents to feel safe and be safe by working with partners to reduce crime and anti-social behaviour

NHS Health Check is a mandatory public health function as outlined in the Health and Social Care Act 2012. HCC is responsible for commissioning and monitoring the risk assessment (the check) and the risk reduction (lifestyle interventions) elements of the programme. Identifying individuals at risk will prevent illness thus protecting the Hampshire population. By aiming to invite 100% of the eligible population over a 5 year period, all those Hampshire residents will have the opportunity to attend an NHS Health Check to maximise their future health. The NHS Health Check will enable the individual to understand their health and any potential risks. The individual can then make an informed choice on how to maintain or improve their health.

3. Sustainability, Equalities, Social Value and Other Impacts

The NHS Health Check focuses on three areas of work:

- Living Well- Empowering people to live healthier lives
- Ageing Well- Supporting people to remain independent, have choice, control and timely access to high quality services
- Healthy Communities- Helping communities to be strong and support those who may need extra help.

The use of healthcare services as the point of delivery will improve access at the local level and reduce the requirement for travel. Also, availability of a National NHS Health Check leaflet in alternative languages and in braille can enable patients to have a better understanding of the NHS Health Check programme.

4. Scope

4.1 Aims and objectives of service

Objective 1. Help people live longer, healthier lives by:

- Reducing the risk and incidence of heart attacks and strokes, type II diabetes and chronic kidney disease.
- Signposting older people to memory clinics and detecting cardiovascular disease, chronic kidney disease and type II diabetes earlier, allowing people to be managed earlier and in doing so improve their quality of life.

Objective 2. Reduce health inequalities – including socio-economic, ethnic and gender inequalities that result from vascular disease.

Objective 3. That the NHS Health Check programme is both cost and clinically effective and that it remains so.

4.2 Service description and pathway

Invitation lists

GP Practices will use a MIQUEST query that NHS South Commissioning Support Unit (CSU) has developed. The instructions can be found on the HCC website using the following link <http://www3.hants.gov.uk/healthandwellbeing/public-health/practitionerresources.htm>. The MIQUEST query will produce an invitation list which needs to be sent to HantsPrint at hcc.hampshire-healthcheckinvites@nhs.net via a secure nhs.net account. Support can be gained from CSU facilitators.

The invitation list will provide HantsPrint with a list of patients who will be invited for an NHS Health Check over a two month period. The MIQUEST query will also provide GP practices with an invitation list. If the invitation list is not received on time and is not in the required format, no invitation letters will

be sent for that 2 month period.

Between running the invitation lists a patient may die or become a palliative care patient or be diagnosed with a criterion that excludes them from receipt of an invitation. Therefore, Practices should update HantsPrint if this occurs to ensure these patients are not invited for an NHS Health Check. To notify Hantsprint of a deceased patient or no longer eligible GP Practices must send the patients name and address to HantsPrint from an nhs.net account to hcc.hampshire-healthcheckinvites@nhs.net. Please note HantsPrint will not have access to Open Exeter to check patient status before the invitation runs.

Invitations

On receipt of the NHS Health Check invitation list, it is separated into two separate mailing dates so that people can be invited in the month of their birthday. The mail out dates are detailed in Column (c) in Table One for the first financial year (a revised list of dates will be sent out at the beginning of each financial year).

Mail out month Number (a)	Birth date range for letter (b)	GPs to run miquest query and send back to Hantsprint	HantsPrint send initial letter (c)	HantsPrint send reminder letter (d)	Practice send reminder text (e)	F r p (f)
1	1 – 30 April	01/04/2016	22/04/2016	27/05/2016	03/06/2016	1
2	1 - 31 May	01/04/2016	27/05/2016	24/06/2016	08/07/2016	2
3	1 – 30 June	03/06/2016	24/06/2016	29/07/2016	05/08/2016	2
4	1 – 31 July	03/06/2016	29/07/2016	26/08/2016	02/09/2016	1
5	1 – 31 August	05/08/2016	26/08/2016	23/09/2016	07/10/2016	2
6	1 – 30 September	05/08/2016	23/09/2016	28/10/2016	04/11/2016	1
7	1 – 31 October	07/10/2016	28/10/2016	25/11/2016	02/12/2016	1
8	1 – 30 November	07/10/2016	25/11/2016	16/12/2016	06/01/2017	2
9	1 – 31 December	25/12/2016	16/12/2016	27/01/2017	03/02/2017	1
10	1 – 31 January	25/12/2016	27/01/2017	24/02/2017	10/03/2017	2
11	1 – 28 February	03/02/2017	24/02/2017	24/03/2017	07/04/2017	2
12	1 – 31 March	03/02/2017	24/03/2017	28/04/2017	05/05/2017	1

The monthly mail out process will be managed quinquennially (every 5 years) akin to cancer screening programmes. Quinquennial mail out systems are a successful tried and tested method. The first letter will be sent on **22 April 2016**. All those that have their 40th, 45th, 50th, 55th, 60th, 65th or 70th Birthday in **April** will be invited for an NHS Health Check and so on for each month. This is demonstrated in Table one, column (b). Once a person has their NHS Health Check, their 5 year recall is set from the last date of NHS Health Check, not date of birth. This is co-ordinated through the MIQUEST Queries.

HantsPrint will also send reminder letters one month following the invitation column (d). GP Practices are encouraged to send patients an SMS two weeks after the reminder letter and if there is no

response in the two weeks following the text Practices can telephone the patient column (e&f). This is however a guide, and these reminders are at the discretion of individual GP practices. The use of an invitation list means that Practices have the details of patients that will be invited for an NHS Health Check and can therefore search on the patient for any record of booking their appointment.

Each Practice that signs up to the service specification will need to commit to HantsPrint inviting a fifth (minus exclusions - approximately 30%) of their 40-74 year old population for an NHS Health Check by the end of financial year 2016/17.

Other providers can invite eligible patients to an opportunistic health check either verbally or in writing.

4.3 Population covered

NHS Health Checks are for the 40-74 year eligible population that meet the criteria in the next section.

4.4 Any acceptance and exclusion criteria and thresholds

Included patients will be those who:

- Are registered 40-74 year olds.
- Do not have any of the exclusion criteria.

Excluded patients will be:

- Patients who have had an NHS Health Check within the last 5 years.
- Those that have had an NHS Health Check and found to have $\geq 20\%$ risk and therefore exit from the recall permanently.
- Those on the following disease registers and/or diagnosed with a condition in Table three.

Deceased or Palliative care register	Myocardial infarction
Atrial Fibrillation	Coronary Heart Disease
Heart Failure	Peripheral Vascular/Arterial Disease
Diabetes Mellitus Type I and II	Transient ischaemic attack
Kidney diseases stages 3 – 5	Hypertension
Familial Hypercholesterolaemia and all those on Statins	Cerebrovascular accident - haemorrhagic and ischaemic

Patients do not need to have received a formal invitation letter to have a NHS Health Check. If a patient meets the eligibility criteria they will be entitled to have an Opportunistic Health Check. Such checks should be read coded and reported appropriately. Health professionals can use the eligibility checklist to check if a patient is entitled to a Health Check which is available on: <http://www3.hants.gov.uk/healthandwellbeing/public-health/practitionerresources.htm>

4.5 Interdependencies with other services

GP practices will need to identify administrative time to run the MIQUEST query. Support is available

from the Commissioning Support Unit.

4.6 Days/Hours of Operation

To be determined by provider.

4.7 Public Health Planning

The Authority may review elements of the Service Specification in accordance with changes to Public Health delivery plans.

5. Applicable Service Standards

5.1 Applicable National Standards e.g. NICE

It is a requirement that Information Governance rules are followed at all times. Providers who invite eligible individuals for an NHS Health Check will ensure that they are following the guidance set out in following document:

- NHS Health Check Information Governance and Data Flows (February 2014)
http://www.healthcheck.nhs.uk/commissioners_and_providers/guidance/national_guidance/

6. Quality Standards, Performance Measures

6.1 Quality Outcome Indicators

Public Health England is developing quality assurance requirements which are expected to be finalised during the term of this contract. Accordingly, the Authority specifically reserves the right to amend this Contract without agreement to incorporate the updated quality assurance requirements. For the avoidance of doubt this could include Quality Outcome Indicators including any financial consequences. The Authority will discuss any new quality assurance where it is reasonably able to before implementing any Variation.

Other than those set out above under paragraph 5 and below in 6.1 and 6.2 there are no additional quality outcomes.

Further, there are no financial consequences set for failing to meet these Indicators.

The Clinician will:

- Be able to guarantee an adequate and stable workforce at all times to meet the potential demand.
- Carry out an assessment of both its staff and the services to ensure that it undertakes Disclosure and Barring Service checks where it considers that it should do so.

6.2 Training

Support to run MIQUEST queries will be available through the commissioning support unit.

6.3 Key Performance Indicators for Monitoring

The Key Performance Indicators (KPIs) are currently nationally devised. The read code lists that are provided will enable delivery of the KPIs. In order to deliver on the KPIs, Health professionals are required to use the appropriate read codes specified by HCC. This includes ensuring clinical templates are up to date.

1. Number/percentage of invitation letters/opportunistic invitations made

7. Price

The Charges comprise of the following:

NHS Health Checks Invitation Lists

The Charge for the 2 monthly submission of the NHS Health Check Invitation List as per section 4.2: Practices will be paid **£57.69 every 2 months** over the term of the service specification (**£346.14 in total**) from HCC. This is for producing a valid 2 monthly Invitation List. A non-submission will result in no payment.

A valid Invitation List means: submitting a submitting a 2 monthly invitation list in the required format by the dates set out in paragraph 4.2.

NHS Health Check opportunistic invitations and reminders

The charge for sending reminders to Patients to book an NHS Health Check appointment are as follows:

One invitation per patient verbally or by some other means other than the invitation list mentioned above: 50p

Discretionary – additional payment of (it is at the GP practice discretion whether they send reminder texts and phone calls):

One text per patient two weeks after reminder letter (dates above): 10p

One telephone call two weeks after reminder text: 40p

NHS Health Check Self-Report

The NHS Health Check Self-Report is to be provided to support activity and to authorise payments.

On a quarterly basis, the provider will need to submit a Quarterly NHS Health Check Self-Report. The self-reporting template will be emailed to providers prior to the deadline. These need to be sent to: hcc.hampshirehealthchecks@nhs.net by the 5th working day after the close of each quarter (**7th July 2016, 7th October 2016, 7th January 2017 and 7th April 2017**). Any Payments will be conditional

upon receipt of the self-report.

The CSU is developing the MIQUEST KPIs. When these have been fully developed and tested they will supersede the Self-Report and Health professional will be paid for NHS Health Checks that fulfil all the essential components. More information will be released as it becomes available.

Increases in Charges during the duration of the Contract

There are no agreed increases during the duration of the Contract (and clause B8.3 shall have no affect).