

**Learning Disability Annual Health Checks DES
Oxfordshire PCT Plan for 2012/13
UPDATE NOVEMBER 2012**

This report is an update to that presented to the Health Overview and Scrutiny Committee in June this year. It outlines Oxfordshire PCT's position on the provision of annual health checks to people with learning disability and reports progress so far this year.

Background

The Learning Disability Directed Enhanced Service was first issued to practices in April 2008 and has continued up to the current year. The DES aims to ensure that all people on Local Authority Learning Disability registers with a moderate or severe learning disability receive an annual health check according to an agreed protocol, known as the Cardiff Health Check.

Achievement for the first four years across the county was as follows:

2008/9	24%
2009/10	29%
2010/11	40%
2011/12	46%

The provision of an Annual Health Check for people with a Learning Disability is provided through a Directed Enhanced Service. The PCT must make this service specification available to all practices in Oxfordshire, but as with all enhanced services, it is the decision of the practice whether to provide the health check to eligible patients.

This year, 78 out of 82 practices have signed up to offer annual health checks.

This service is not written into GP contracts and compliance cannot be enforced. However, Oxfordshire PCT encourages practices to participate in enhanced services as they demonstrate good practice. We will continue to promote health checks with both GP practices, providers of care to people with LD, people with LD and their families and/or carers.

Actions in place to increase the number of annual health checks offered/provided

Plan for 2012/13 – midyear update:

LD Liaison nurses:

- continue to help practices access Learning Disability Teams and advise on eligibility to services
- are providing refresher training as requested on importance of Annual Health Checks to provider primary care practices and carer groups
- continue to help practices with production of accessible Annual Health Check letters
- continue to help practices identify 'hard to reach' or more vulnerable people on their LD register
- Continue to provide support for practices to source alternatives to other Annual Health Check models/ templates

The PCT Patient Advice and Liaison Service has previously made an offer through relevant organisations that any person having difficulty getting a health check should ring the helpline at the PCT and we will arrange for a health check to be made available. The situation remains that no requests have been made but this contingency will continue to be available throughout the life of the enhanced service.

A PCT primary care manager continues to meet with the Liaison nurses to assess level of uptake and discuss any issues surrounding delivery of the service. A copy of the nurses report on last financial year and plan for 2012/13 (July 2012) is attached at Appendix B

Planned target for 2012/13 – 55%

The DES runs until March 2013. If the National Commissioning Board takes the decision to continue the DES in 2013/14 we would aim to achieve a further 10% increase, taking the overall level to 65%

Since June this year both the PCT and the Liaison nurses have carried out surveys with both primary care providers and people with a learning disability. The aim of surveys is to find out more about how patients are being contacted, what difficulties there are and why patients may choose not to have health checks

A PCT audit of number of health checks carried out up to end of September 2012 reveals low uptake so far, however, historically, practices have offered the annual checks in the second half of each year owing to early training requirements in Year 1 of the DES.

The PCT sent a written request to all practices currently offering health checks to their learning disabled population asking if they had any information regarding why patients or carers were failing to take up or refusing offers of an annual health check. Twenty five practices responded and key points noted are as follows:

- Majority of responding practices send three letters to the patients. If there is no response to those letters then some will try to phone the patient/carer or record no response
- Some parents/carers have stated that patient does not wish to have a health check as they see their GPs on a regular basis anyway.
- Practices state that appointments are often changed or cancelled
- Offers of undertaking health checks at home seem to be most efficient way to avoid non attendance at practice premises and achieve higher uptake. Home visits are particularly useful when carrying out checks on those who live together in the community.

Both the PCT and the GP liaison nurses will continue to work with practices, care providers and patients to ensure that good practice is shared and the offer of an annual health check is taken up as much as possible.

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