

**DRAFT - Oxfordshire Health and Wellbeing Board
Detailed performance report**

1. Details

Strategic Priority: 8.3 Preventing early death and improving quality of life in later years

Strategic Lead: Nisha Sharma/Eunan O'Neill (from Dec 2013)

Last updated: June 2012

PROGRESS MEASURE:

Health Check Offered – Q1- 9778, Q2- 19557, Q3- 29335, Q4- 39114

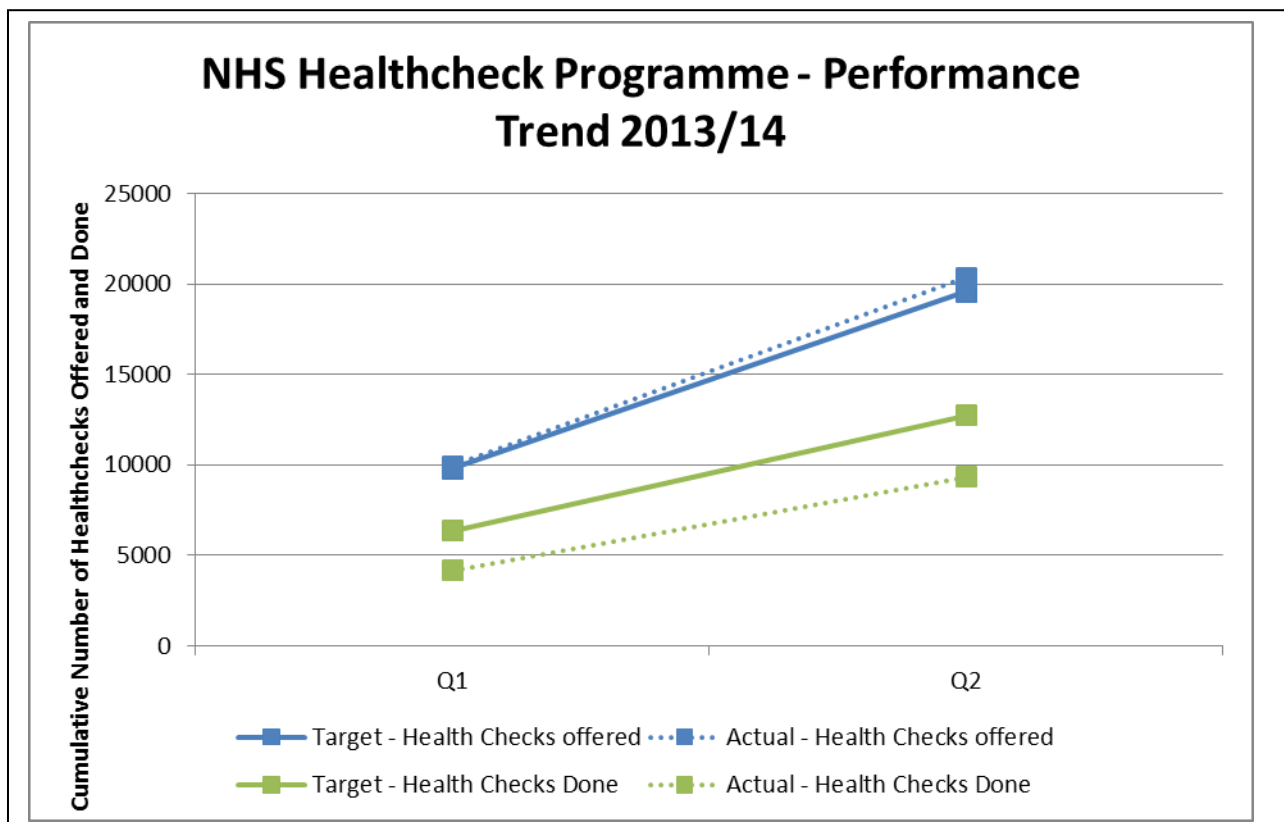
Health Check Done - Q1- 6355, Q2- 12713, Q3- 19068, Q4- 25424

Current indicator Rating

Red

(Proportion of people taking up the Health Check Offer – Uptake)

2. Trend Data



3. What is the story behind this trend? - Analysis of Performance

Bullet points to highlight why this trend is causing concern, what factors are influencing it, what the problems or risks are.... This section is NOT for solutions, just analysis of the current situation.

- The Oxfordshire NHS Health Check programme is in its third year of full roll out.
- In 2013/14, the programme is commissioned from GP practices through local enhanced service (LES) and all 84 GP practices in Oxfordshire have signed-up to deliver the service, which means we have full programme coverage.
- All eligible people within the age range of 40-74 yrs not already on cardiovascular disease register needs to be invited for health check once every five years. We therefore have a target of inviting 20% of eligible population each year.
- **There is no national target for uptake** however local authorities are expected to seek progressive improvement in the proportion of people taking up the health check offer.
- Baseline uptake in 2012/13 was at 46% therefore an incremental target of 50% was agreed for 2013/14. **This was however increased to an aspirational target of 65% by Health Improvement Board in July 2013.**

Report card template v1

- We are on track in terms of inviting 20% of eligible population for health checks. Cumulative total of people invited at the end of Q2 stands at 20,329 reflecting 22% coverage.
- However, of the 20,329 people invited for health checks only 9342 took up the offer giving us an uptake rate of 46%.
- Although this is an improvement from 42% uptake at the end of Q1, more work needs to be done to continuously increase the proportion of people taking up the offer of health check when invited by their GP.

4. What is being done? - Current initiatives and actions

Actions *(in brief)(add more rows if you need to)* **Commentary** *(is this working, if not why not?)*

- | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> ❑ Communicate performance trends and best practice with practices and encourage them to follow up the non-responders through second and third invite | <ul style="list-style-type: none"> • Health Check e-Bulletin is sent to practices with headline summary of performance trends and actions required to improve uptake. This has yielded results in terms of improved uptake from 42% in Q1 to 46% in Q2 |
| <ul style="list-style-type: none"> ❑ Provision of training and practical support to under-performing practices | <ul style="list-style-type: none"> • Bespoke training sessions are delivered to practices seeking specific training e.g. health check software training, training to new staff joining the practices etc. 3 training sessions were delivered in Q2 which were attended by 13 staff |
| <ul style="list-style-type: none"> ❑ Work with Oxfordshire Clinical Commissioning Group (OCCG) and GP locality leads to drive uptake | <ul style="list-style-type: none"> • Practice level performance data is shared with OCCG locality leads through public health newsletter which had helped 3 practices start inviting patients in the last quarter |

5. What needs to be done now? - New initiatives and actions

(this is the recovery plan. Details should show how this will get things back on track)

- | Action | By Whom & By When |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| <ul style="list-style-type: none"> ❑ Continue with quarterly data analysis at practice level to identify practices with high uptake and share best practice and provide tailored support to low performing practices in order to improve uptake | <p>Eunan O'Neil
(Nov-Dec 2013 and on-going)</p> |
| <ul style="list-style-type: none"> ❑ Continue to work with OCCG locality leads to influence and encourage practices to chase the non-responders through second and third invite | <p>Eunan O'Neill
On-going</p> |
| <ul style="list-style-type: none"> ❑ Develop and deliver a sustained media campaign to increase public awareness of Health Checks and encourage them to take up the offer when invited by their GP practice | <p>Rachel McQuilliam
Nov 2013 to March 2014</p> |
| <ul style="list-style-type: none"> ❑ Develop and deliver Health Check training to primary care staff with a special focus on effective communication of risk and following up the non-responders | <p>Eunan O'Neill Jan-March 2014</p> |

