

Supporting Information and Impact Assessment

Proposal:	Health Checks
Executive Lead:	Councillor Derek Mills
Director / Assistant Director:	Caroline Dimond

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Section 1: Background Information	
1.	<p>What is the proposal / issue?</p> <p>The original proposal is to reduce the Public Health budget by £5,000 in 2017/18 for Health Checks which are carried out by GPs. The budget is dependent on the number of people who take up the offer of a health check. For 2018/19, it was proposed to reduce the budget by a further £70,000. The proposed budget for 2017/18 was therefore £85,000.</p> <p>Following consultation the proposal has changed to reduce the budget by £65,000 in 2017/18 leaving a budget of £25,000. No savings are identified for 2018/19.</p>
2.	<p>What is the current situation?</p> <p>As the population gets older, there is a higher risk of developing health conditions such as high blood pressure, heart disease or type 2 diabetes.</p> <p>The NHS Health Check is branded as the chance for adults in England aged 40-74 without a pre-existing condition, to get a ‘free midlife MOT’. The role of the Health Check is to check circulatory and vascular health and what the risk is of a person getting a disabling vascular disease.</p> <p>Currently, the local authority is required to offer a Health Check to the eligible population (approximately 40,000 people over 5 years). Most GP practices are signed up to this and delivering Health Checks across Torbay. A proactive outreach service is also commissioned to pick-up those practices that do not provide the service, as well as targeting particular groups (mental health, hospitality and manual workers and fishermen; shift workers and hard to reach groups) who are much less likely to engage but are more likely to have health issues.</p> <p>Current uptake to date in 2016/17 is 61.6% of the eligible population and the average over the 4 years the programme has been running it is 47.8%.</p> <p>While the provision of Health Checks is based on NICE (National Institute for Health and Care Excellence) recommendations, the evidence for their success in improving health outcomes is not robust and has been challenged.</p>

	Other Local Authority areas have already paused the provision of Health Checks.
3.	<p>What options have been considered?</p> <p>There are a number of different potential mechanisms for making the small saving in 2017/18:</p> <ul style="list-style-type: none"> • Restrict the targeted offer to a more defined population • Recommend that GP practices limit the number of Health Checks offered, which in turn will reduce the attendance and therefore costs • Propose an annual ‘cap’ for the number of Health Checks provided by each GP practice over which the Council would no longer fund. This can be targeted so that caps are greater in areas of highest estimated need. <p>For 2018/19, the options which could be considered are:</p> <ul style="list-style-type: none"> • Restrict the provision to maintain a targeted service only (not offering the provision to the entire eligible population) • Maintain an offer to the entire eligible population, but reduce any proactive follow-up work to encourage and ensure attendance, with the expectation that uptake is reduced (risk that attendance is not affected to level required to find efficiencies). <p>It is proposed that these, and any other options, are considered as part of the consultation process.</p>
4.	<p>How does this proposal support the ambitions, principles and delivery of the Corporate Plan 2015-19?</p> <p>This proposal supports the following principle of the Corporate Plan:</p> <ul style="list-style-type: none"> • Use reducing resources to the best effect.
5.	<p>Who will be affected by this proposal and who do you need to consult with?</p> <p>There is the potential for the following to be affected by this proposal:</p> <ul style="list-style-type: none"> • Service users • The general population • Healthwatch • Torbay and South Devon NHS Foundation Trust (as a partner and service provider) • South Devon and Torbay Clinical Commissioning Group (CCG) • GP’s

6.	<p>How will you propose to consult?</p> <p>Consultation will take place as part of the general consultation on the budget proposals:</p> <ul style="list-style-type: none"> • Specific public health on-line consultation • Discussions with partner organisations •
<p>Section 2: Expected Implications and Impact Assessment</p>	
7.	<p>What are the <u>expected</u> financial and legal implications?</p> <p>The original proposal would release £5,000 of savings in 2017/18 and a further £70,000 in 2018/19. This proposal has now changed and the savings proposed for 2017/18 are £65,000.</p>
8.	<p>What are the <u>expected</u> risks?</p> <p>The potential risks and impacts associated with this proposal over the two years are:</p> <ul style="list-style-type: none"> • Individuals who are at risk of high blood pressure, heart disease or type 2 diabetes in whom these are undetected and go on to suffer these diseases in the future. • This may potentially create pressure in the health and social care system in later years should illnesses develop and those affected require additional treatment and care through NHS and social care services. • Restricting the offer to certain communities, geographies, numbers who can access may potentially create issues regarding demand and supply not matching each other i.e. demand exceeding availability and vice versa resulting in services not matching. The consequence of which is to increase the potential for unused capacity in some areas and oversubscribed capacity in others. • Health inequalities across Torbay may widen. • There will be a significant risk of the current providers of the health check service assessing the residual financial value as being unattractive. The result of which could be that the local authority could be left with no (or a very limited number of) practices willing to provide health checks in Torbay. • There is an additional risk that demand may continue and the local authority is unable to restrict or control expenditure without restricting access.
9.	<p>Public Services Value (Social Value) Act 2012</p> <p>The (re)procurement of services is not relevant for this report.</p>

<p>10.</p>	<p>What evidence / data / research have you gathered in relation to this proposal?</p> <p>The Torbay LA Public Health Team used a prioritisation matrix as an assurance that services were commissioned based on evidence, impact and effective efficiency.</p> <p>Providing health checks is a condition of the Public Health Grant. Evidence for its provision can be found here: http://www.healthcheck.nhs.uk/commissioners_and_providers/evidence/</p>															
<p>11.</p>	<p>What are key findings from the consultation you have carried out?</p> <p>The feedback from the general budget survey and public health consultation is shown in the table below:</p> <p>Q13 Health Checks:</p> <table border="1" data-bbox="563 965 1190 1227"> <thead> <tr> <th>Do you support this proposal?</th> <th>Number</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td>Yes</td> <td>209</td> <td>42.7%</td> </tr> <tr> <td>No</td> <td>258</td> <td>52.8%</td> </tr> <tr> <td>No answer</td> <td>22</td> <td>4.5%</td> </tr> <tr> <td>Total</td> <td>489</td> <td>100.0%</td> </tr> </tbody> </table> <p>There were a limited number of written responses to the consultation on NHS Health Checks.</p> <p>There were conflicting points of view on the strength of the evidence base for NHS Health Checks. The majority of the professional opinion in relation to this proposal was of the view that the lifestyles service had a better evidence base than NHS Health Checks.</p> <p>Some of the respondents commented that people at high risk of health problems may miss the opportunity to have the risk identified, potentially resulting in increased costs and further health problems associated with late diagnosis. Comment was also made that long term conditions are more expensive to treat than putting in preventative measures.</p> <p>Comments made on the overall public health proposals include:</p> <ul style="list-style-type: none"> • It will damage the progress made on a 'joined up' approach to the provision of health and social care. The proposals will also be against the agreement that decisions made in one part of the system do not have unintended adverse effects in another part of the system and also on the shift from a reactive to a proactive approach to health and social care. • It will have an adverse effect on the credibility of the community service 	Do you support this proposal?	Number	Percent	Yes	209	42.7%	No	258	52.8%	No answer	22	4.5%	Total	489	100.0%
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	<p>model redesign and will damage the reputations of Torbay Council and Torbay and South Devon NHS Foundation Trust.</p> <ul style="list-style-type: none"> • A statement was made regarding the local authorities responsibility to continue to meet the conditions of the public health grant. • Concerns were raised regarding the proposals potential impact on the aspirations of the Sustainability and Transformation Plans (STPs) with the NHS. • A statement was made that Torbay should look to understand how other local authority area which border Torbay are able to deliver services 'smoothly' without the same issues as Torbay. <p>Some alternative proposals were put forward:</p> <ul style="list-style-type: none"> • A health and wellbeing hub in the town centre to reduce burden to A&E and GP's • Incorporate into another appointment • Charge for them • People complete at home and only seen if survey shows at risk
<p>12.</p>	<p>Amendments to Proposal / Mitigating Actions</p> <p>As a result of the majority of the feedback and recommendations received from health professionals in Torbay, the amendment to this current proposal would be:</p> <ul style="list-style-type: none"> • To save £65,000 in 2017/18 with no further reduction in 2018/19. The resulting budget for this service would therefore total £25,000. • The amended proposal would limit the capacity to provide the universal NHS health checks that are delivered by GPs from 2017/18 resulting in a significantly more targeted approach to providing Health Checks.

Equality Impacts

13	Identify the potential positive and negative impacts on specific groups			
		Positive Impact	Negative Impact & Mitigating Actions	Neutral Impact
	Older or younger people		40-74 year olds are the target population for this service. Some of this group may be affected as the offer becomes more targeted to the most at risk identified populations in Torbay.	Young people are not eligible (the service offer is for 40-74 year olds) therefore not affected either way by the proposal.
	People with caring Responsibilities	The service offer does not (and will continue to not) distinguish eligibility based on this specific group. Whilst this proposal affects all potential recipients of Health Checks there is no differential impact.		
	People with a disability	The service offer does not (and will continue to not) distinguish eligibility based on this specific group. Whilst this proposal affects all potential recipients of Health Checks there is no differential impact.		
	Women or men	The service offer does not (and will continue to not) distinguish eligibility based on this specific group. Whilst this proposal affects all potential recipients of Health Checks there is no differential impact.		
	People who are black or from a minority ethnic background (BME) <i>(Please note Gypsies / Roma are within this community)</i>	The service offer does not (and will continue to not) distinguish eligibility based on this specific group. Whilst this proposal affects all potential recipients of Health Checks there is no differential impact.		
	Religion or belief (including lack of belief)	The service offer does not (and will continue to not) distinguish eligibility based on this specific group. Whilst this proposal affects all potential recipients of Health Checks there is no differential		

	impact.		
People who are lesbian, gay or bisexual	The service offer does not (and will continue to not) distinguish eligibility based on this specific group. Whilst this proposal affects all potential recipients of Health Checks there is no differential impact.		
People who are transgendered	The service offer does not (and will continue to not) distinguish eligibility based on this specific group. Whilst this proposal affects all potential recipients of Health Checks there is no differential impact.		
People who are in a marriage or civil partnership	The service offer does not (and will continue to not) distinguish eligibility based on this specific group. Whilst this proposal affects all potential recipients of Health Checks there is no differential impact.		
Women who are pregnant / on maternity leave	The service offer does not (and will continue to not) distinguish eligibility based on this specific group. Whilst this proposal affects all potential recipients of Health Checks there is no differential impact.		
Socio-economic impacts (Including impact on child poverty issues and deprivation)	A more targeted approach would look to target resources at those areas where the most disadvantaged live and aim to reduce the inequalities in a more specific population.	The reduction in this offer could result in those with unidentified or emerging Long Term Conditions (LTC) not receiving a Health Check. In mitigation the evidence for the Health Check bringing about long term health benefits is weak in places. Also the service will remain, in a more focussed form, to ensure those who are most at risk are identified and offered a Health Check.	
Public Health impacts (How will your proposal impact on the general health of the population of Torbay)	A more targeted approach would look to target resources at those areas where the most disadvantaged live and aim to reduce the inequalities in a more specific population.	The reduction in this offer could result in those with unidentified or emerging Long Term Conditions (LTC) not receiving a Health Check.	

		In mitigation the evidence for the Health Check bringing about long term health benefits is weak in places. Also the service will remain, in a more focussed form, to ensure those who are most at risk are identified and offered a Health Check.	
14	Cumulative Impacts – Council wide (proposed changes elsewhere which might worsen the impacts identified above)	None identified.	
15	Cumulative Impacts – Other public services (proposed changes elsewhere which might worsen the impacts identified above)	New models of care in the health system locally, plus the emerging Sustainable Transformation Plan which puts prevention first, are both expecting more from local public health services when capacity in the system is decreasing.	