Community Pharmacy Surrey & Sussex

NHS Health Checks Service – Top Tips for Delivery

Service Overview Essentials

- Target Population: Ages 40-74 without existing cardiovascular conditions
- Purpose: Early identification and management of CVD risk
- Frequency: Patients recalled every 5 years

Patient Eligibility – Quick Reference

INCLUDE	EXCLUDE	
• Adults aged 40-74 years • No existing cardiovascular conditions • Not on high-risk disease registers	• Coronary Heart Disease (CHD) • Stroke or TIA • Diabetes (any type) • Chronic Kidney Disease (stages 3-5) • Hypertension	• Atrial fibrillation • Heart failure • Peripheral Arterial Disease (PAD) • Familial hypercholesterolaemia • Currently on statins for hypercholesterolaemia

Essential Equipment & Setup

Key Equipment Checklist

- ✓ Blood pressure monitor (MHRA compliant)
- ✓ Cholesterol testing device
- ✓ BMI measurement tools (scales, height measure)
- ✓ HbA1c testing device (if specified in service specification)
- ✓ Pulse rhythm check capability (if specified in service specification)

Must Measure: Cholesterol and HbA1c

Point of Care Testing (POCT)

Maintenance: Your responsibility for calibration and quality assurance

Check with specification on how to purchase equipment

Core Assessment Components

Essential Measurements:

1. Blood Pressure - Using calibrated, MHRA-compliant devices
2. Pulse Rhythm Check - Follow best practice guidance
3. BMI Calculation - Height, weight, hip/waist ratio
4. Blood Tests - Total cholesterol, HDL cholesterol
5. HbA1c - For high diabetes risk patients only

Key Questions to Ask:

- Smoking status
- Physical activity levels (GPPAQ questionnaire)
- Family history (diabetes, premature heart disease)
- Ethnicity
- Postcode (for deprivation scoring)
- Alcohol consumption (Audit C screen)

Special Considerations:

- Ages 65-74 -> Include dementia awareness discussion
- High Diabetes Risk -> Additional HbA1c testing required

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Risk Assessment & Communication

Communication Best Practices:
1) Use simple, clear language
2) Ensure patient understands their risk level
3) Involve patient in decision-making
4) Obtain informed consent for all interventions
5) Provide written action plan

Low Risk:
Lifestyle advice and 5-year recall

Moderate Risk:
Enhanced lifestyle support

High Risk (≥10% 10-year risk):
MUST REFER TO GP

Training & Compliance Requirements

- ☐ Mandatory Training
- ☐ All Staff: Complete "Health Check Mentor" eLearning via OnClick portal (where required as per service specification)
- ☐ Professional Development: Ongoing CPD required
- ☐ Cultural Competency: Ensure culturally appropriate service delivery

Service Delivery Strategies

Structured Delivery: Systematic approach to reach targets	**Opportunistic Checks:** Utilise routine pharmacy visits	**Community Outreach:** Work with local workplaces	**Appointment Systems:** Flexible scheduling options	**Schedule clinics**

Data Management & Reporting

All Claims:
Submit via PharmOutcomes portal

Monthly Payments:
Made in arrears

Quality Control:
Submit IQC and EQA results as required

Quality Assurance Essentials

1. Internal Quality Control (IQC):
Maintain up-to-date processes

5. Record Keeping:
Maintain quality control result records

2.External Quality Assurance (EQA):
Register with accredited scheme

3. POCT Coordinator:
Designate named coordinator

4. Staff Training:
Only trained staff use POCT equipment

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Common Pitfalls to Avoid

Eligibility Errors	Equipment Issues	Communication Failures
× Don't include patients with existing CVD conditions	× Don't purchase equipment without checking the specification	× Don't use complex medical terminology
× Don't forget to check age range (40-74)	× Don't neglect calibration and maintenance	× Don't proceed without informed consent
× Don't include patients already on disease registers	× Don't allow untrained staff to use POCT equipment	× Don't forget to refer high-risk patients (≥10%) to GP

Support & Resources

Training Support:

- Public Health can offer additional training
- OnClick portal for eLearning modules
- Workforce competency guidance available

Ongoing Support:

- Public health team
- Local Pharmaceutical Committee (LPC)
- Performance improvement support available

Key Documents:

- NHS Health Check Best Practice Guidance
- NICE Guidance CG 181
- MHRA POCT Guidance
- NHS Health Checks Programme Standards

Success Tips

- ✓ Prepare Your Team: Ensure all staff are trained before service launch.
- ✓ Marketing for the service: Promote the service within the pharmacy to target patients, consider how you can promote the service externally.
- ✓ Leverage promotional materials: Use posters, leaflets, and digital screens to advertise the service. Emphasise that the check is free and quick. You can order campaign packs from the Campaign Resource Centre.
- ✓ Optimise access for patients: Promote a simple booking system but also be prepared to accommodate walk-in patients. Highlight the convenience of your pharmacy's location and extended opening hours.
- ✓ Use patient reminders: Send SMS, email, or phone reminders to reduce the number of missed appointments.
- ✓ Set Up Systems: Establish clear processes for patient flow and data collection.
- ✓ Focus on Communication: Invest time in explaining risks clearly to patients.
- ✓ Track Performance: Monitor monthly targets and address shortfalls early.
- ✓ Maintain Equipment: Regular calibration prevents service disruption.
- ✓ Build Relationships: Engage with local GPs and PCNs for effective referral pathways. Highlight how your service supports their goals, such as cardiovascular disease (CVD) prevention. Regularly share positive outcomes to encourage referrals.
- ✓ Document Everything: Keep detailed records for audit purposes.
- ✓ Stay Updated: Participate in ongoing training and development opportunities.
- ✓ Ensure you have a Standard Operating Procedure in place.

Remember: *This is a preventive service focused on early identification of cardiovascular risk. Your role is crucial in reducing health inequalities and improving population health outcomes.*