

SECTION 2: Introduction

This tool kit has been designed to provide detailed guidance for anyone involved in delivering the NHS Health Check programme, using best practice principles.

2:1 Background

Vascular disease includes coronary heart disease (CHD), stroke, transient ischaemic attacks (TIA), peripheral arterial disease, type II diabetes and chronic kidney disease. These conditions overlap considerably and often have similar risk factors.¹ Vascular disease currently affects the lives of over 4 million people in England. It causes 36% of deaths (170,000 a year in England) and is responsible for a fifth of all hospital admissions. It is the largest single cause of long-term ill health and disability, impairing the quality of life for many people. The burden of these conditions falls disproportionately on people living in deprived circumstances and on particular ethnic groups, such as South Asians.

In Bromley, CHD and stroke are responsible for one third of deaths. High numbers of people in Bromley are affected by vascular disease:

- CHD: 9,898
- Stroke: 5,086
- Hypertension: 46,370
- Diabetes: 14,493
- Chronic Kidney Disease: 9,779
- Dementia: 2,615

(Ref: Bromley Joint Strategic Needs Assessment 2016)

These vascular diseases all affect the body in different ways however they are all linked by a common set of risk factors. Having one vascular condition increases the likelihood of the individual suffering others.

Circulatory disease is responsible for 32% of the 7.5 years life expectancy gap between most and least deprived wards in Bromley, for men and for 26% of the 7.0 years gap for women. Tackling this issue will help to reduce health inequalities in the borough.

Why are we performing NHS Health Checks?

Evidence shows that it is possible to identify the risk factors for these diseases, and also to act to change them. Early intervention to reduce risk can prevent, delay and in some circumstances reverse the onset of vascular disease

Through a systematic and co-ordinated approach, the Department of Health (DH) estimate that the NHS Health Checks program could save at least 650 lives, and prevent 1,600 strokes and heart attacks in the UK **each year**. Over 4000 people

could be prevented from developing diabetes **each year**, and at least 20,000 cases of kidney disease could be detected earlier allowing individuals to be better managed and ultimately improve their quality of life.

The NHS Health Check program has been running in Bromley since 2010. The majority of checks have been carried out in primary care, with additional checks being completed by alternative providers such as pharmacies and outreach.

2:2 Aims of the NHS Health Check

- To use a universal risk assessment, risk awareness and management programme within Bromley which aims to promote better health and reduce premature vascular disease.
- To provide a high standard of NHS Health Checks within the community accessible to all who may be eligible.

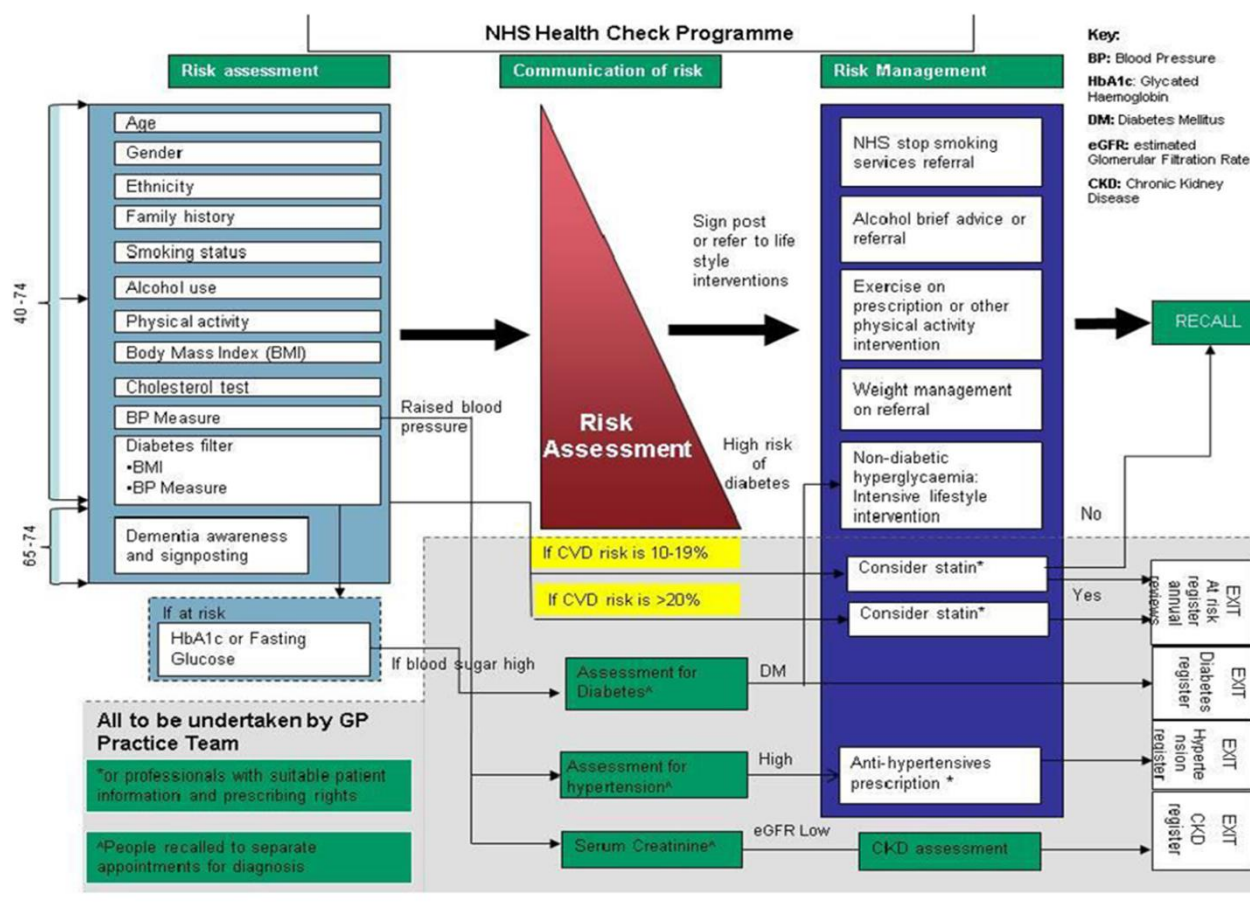
2:3 Who is eligible?

- Age 40-74
- Registered with a GP in Bromley or a resident of Bromley
- No previous diagnosis of heart disease, stroke, hypertension, diabetes or kidney disease
- Not taking medication for hypertension or cholesterol
- No NHS Health Check within previous 5 years

2:4 What is included in an NHS Health Check?

The DH NHS Health Check flow diagram (Fig.1 and larger version in appendix 1) provides an overview of the different elements comprising the National NHS Health Checks programme. In addition to this, in Bromley we have added optional elements of measuring waist circumference and pulse check. More specific detail and description of the elements is contained in this toolkit to guide you through the process.

Fig 1. NHS Health Check at a glance



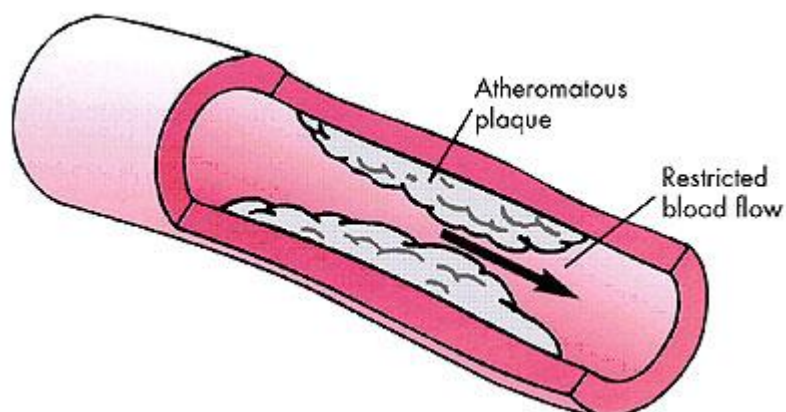
2:5 Who is at risk of vascular disease?

Damage to the vascular system increases with age and progresses faster in men than women, in those with a family history and in some ethnic groups. These risk factors are non-modifiable or fixed as they cannot be changed. However, the rate which the vascular damage progresses is also determined by other 'modifiable risk factors'. Changing these can greatly reduce the chance that vascular disease will strike early bringing premature death or disability. The modifiable risk factors are:

- Smoking
- Physical inactivity
- High blood pressure
- Raised cholesterol levels
- Obesity
- Alcohol

The combined effects of these factors leads to a build-up of atheroma, fatty deposits in the walls of the arteries in a process called atherosclerosis. This can lead to development of vascular disease.

Fig 2. Cross- section of an artery showing build up of atheroma



References

University of Leicester and the UK National Screening Committee (2012), Handbook of Vascular Risk Assessment, Risk Reduction and Risk Management.

Department of Health (April 2008), Putting Prevention First: Vascular Checks: risk assessment and management

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/?IdcService=GET_FILE&dID=162971&Rendition=Web

Public Health England (February 2017) NHS Health Check: Best practice guidance

http://www.healthcheck.nhs.uk/commissioners_and_providers/guidance/