NHS Health Check programme
A guide to the national data publications
Published 3rd October 2019

Information and technology
for better health and care

Copyright © 2019 NHS Digital
# Contents

1. Introduction 3
   1.1 Background 3
   1.2 Purpose of this document 3
   1.3 Key messages 3

2. Summary of the two collections 4

3. Comparison of the two collections 5
   3.1 Overview 5
   3.2 Data sources 5
   3.3 Reporting methodology 6
   3.4 Data completeness 8
   3.5 Data coverage 8
   3.6 Recording processes 9

4. Conclusion 11

5. Appendix A 11
1. Introduction

1.1 Background

Local authorities are responsible for commissioning the NHS Health Check programme in their area. GP practices and in some areas third parties deliver NHS Health Checks to their local populations. Data on activity levels of the programme are collected by local authorities and published on a quarterly basis by Public Health England.

In October 2019 NHS Digital and Public Health England will release a joint publication, following an extraction of clinically coded NHS Health Check data from participating GP practice systems. The information published will improve understanding of the NHS Health Check programme and support its monitoring and delivery.

Future publications reporting more detail about the extracted data are planned and will be released by Public Health England.

No identifiable patient data will be released as part of this or the further NHS Health Check publications. Individual GP practices will also not be identifiable through publications.

1.2 Purpose of this document

This document will compare the methodologies and processes involved in the two collections of NHS Health Check data:

1. Joint NHS Digital and Public Health England publication (referred to in this document as the Joint Collection)
2. Data collected by local authorities in producing their quarterly returns and published by Public Health England (referred to in this document as the Local Authority Collection)

This document is intended as a guide to how activity is included and reported through both collections. The comments and issues addressed may not apply to all areas but will enable the published figures to be put in context and improve understanding of how the programme is implemented at a regional level.

1.3 Key messages

- Methodologies and data exclusions applied by the two collections mean that some activity is counted and reported differently, making direct comparisons between the collections not appropriate.
- The Joint Collection only includes NHS Health Check activity that has been recorded by use of a clinical code in a patient’s electronic record, extracted from participating GP practices.
- Activity reported through the Joint Collection will give local authorities insight into the sex, age and ethnicity characteristics of patients recorded as attending and not attending an NHS Health Check.
# 2. Summary of the two collections

<table>
<thead>
<tr>
<th>Headlines:</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Responsible for the collection</td>
<td>NHS Digital; Public Health England</td>
<td>Public Health England</td>
</tr>
<tr>
<td>Ad-hoc publication</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Published quarterly</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Time period of data reported</td>
<td>April 2012 – March 2018</td>
<td>April 2013 onwards (before 2013 Primary Care Trusts were responsible for commissioning)</td>
</tr>
<tr>
<td>Data coverage</td>
<td>90% of GP estate in England (6,526 contributing GP practices)</td>
<td>All 151 local authorities across England</td>
</tr>
<tr>
<td>How is data received?</td>
<td>Through NHS Digital’s General Practice Extraction Service (GPES) for participating GP practices</td>
<td>Submissions by local authorities to Public Health England</td>
</tr>
</tbody>
</table>

- Is data restricted to NHS Health Check activity recorded by specific clinical codes only? | ✓ | ✗ |

## Detail included:

<table>
<thead>
<tr>
<th></th>
<th>Joint Collection</th>
<th>Local Authority Collection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of patients offered an NHS Health Check</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Number of patients attending an NHS Health Check</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>National number of patients declining, not attending, commencing but not completing or not responding to the offer of an NHS Health Check</td>
<td>✓</td>
<td>✗</td>
</tr>
<tr>
<td>Eligible population rates</td>
<td>✗</td>
<td>✓</td>
</tr>
<tr>
<td>Geographic breakdown</td>
<td>Clinical Commissioning Group of GP practice; local authority of patients’ residence</td>
<td>local authority</td>
</tr>
<tr>
<td>Sex, approximate age and recorded ethnicity of NHS Health Check patients</td>
<td>✓</td>
<td>✗</td>
</tr>
</tbody>
</table>
3. Comparison of the two collections

3.1 Overview

Both the Local Authority and Joint Collections report activity on the NHS Health Check programme. However, there are some key differences between the two collections which impact the reported data. Different methodologies, data sources and reporting pathways are involved across each collection. Data completeness and the recording of activity will also impact the two collections. The relevance of these areas will be specific to each local authority and the way their service is implemented and reported.

The below sections lay out known differences between the collections within key areas.

3.2 Data sources

The variety of service models used to implement the NHS Health Check programme mean that many local authorities have different data sources, reporting pathways and mechanisms for capturing delivery. The table below highlights data sources and pathways for each collection.

<table>
<thead>
<tr>
<th></th>
<th>Joint Collection</th>
<th>Local Authority Collection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where is data taken from</td>
<td>All data is automatically collected from participating</td>
<td>Processes will vary across local authorities.</td>
</tr>
<tr>
<td>to produce the</td>
<td>GP practice systems.</td>
<td>Depending on the local authority sources for data could include:</td>
</tr>
<tr>
<td>reported figures?</td>
<td></td>
<td>• GP practice systems</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• third party providers, such as pharmacies or community-based organisations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Commissioning Support Units</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Clinical Commissioning Groups</td>
</tr>
<tr>
<td>How is the data for</td>
<td>Extracted using NHS Digital’s General Practice</td>
<td>Varied systems, depending on the local authority this could involve:</td>
</tr>
<tr>
<td>reporting collected?</td>
<td>Extraction Service. Extraction query identifying</td>
<td>• Automated electronic queries extract data from providers systems</td>
</tr>
<tr>
<td></td>
<td>recorded NHS Health Check event clinical codes.</td>
<td>• Individual providers within the locality self-report activity</td>
</tr>
<tr>
<td></td>
<td>The full extraction process and set of clinical codes</td>
<td>• Providers contractual documents form the basis of reported activity</td>
</tr>
<tr>
<td></td>
<td>used to identify NHS Health Check activity can be found</td>
<td></td>
</tr>
<tr>
<td></td>
<td>in the business rules here:</td>
<td></td>
</tr>
<tr>
<td></td>
<td><a href="https://digital.nhs.uk/services/general-practice-gp-">https://digital.nhs.uk/services/general-practice-gp-</a></td>
<td></td>
</tr>
<tr>
<td></td>
<td>collections/service-information/nhs-health-checks-</td>
<td></td>
</tr>
<tr>
<td></td>
<td>business-rules</td>
<td></td>
</tr>
</tbody>
</table>
### How is the data audited?

<table>
<thead>
<tr>
<th>Certification of GP practice system suppliers to ensure the extraction process accurately identifies NHS Health Check activity.</th>
<th>Data quality within local authority reporting is checked using:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Public Health England’s quality assurance process</td>
</tr>
<tr>
<td></td>
<td>• Documented best practice guidance for local authorities</td>
</tr>
<tr>
<td></td>
<td>• Local data assurance processes</td>
</tr>
</tbody>
</table>

### 3.3 Reporting methodology

The methodology used by each collection dictates the inclusion and exclusion of activity in reported figures.

The Local Authority Collection reports activity based on best practice guidance provided by Public Health England, this guidance can be found here: [https://www.healthcheck.nhs.uk/commissioners-and-providers/national-guidance/](https://www.healthcheck.nhs.uk/commissioners-and-providers/national-guidance/)

The reporting methodology for the Local Authority Collection described below are based on the expectations from best practice guidance. Although not highlighted, it is understood that challenges with this reporting process are experienced in some areas.

<table>
<thead>
<tr>
<th>Which NHS Health Check metrics are reported by each collection?</th>
<th>Joint Collection</th>
<th>Local Authority Collection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The collection reports the number of patients having a recorded contact with the NHS Health Check programme in each financial year. The contact is classified as either:</td>
<td>Local authorities provide data for each financial quarter on:</td>
</tr>
<tr>
<td></td>
<td>• an attendance: the patient has had a ‘completed NHS Health Check’ clinical code recorded</td>
<td>• the number of NHS Health Checks offered in the quarter</td>
</tr>
<tr>
<td></td>
<td>• not an attendance: the patient has had either an ‘invite’, ‘declined’, ‘commenced’ or ‘did not attend’ clinical code recorded, and no subsequent completed clinical code recorded</td>
<td>• the number of NHS Health Checks received in the quarter</td>
</tr>
</tbody>
</table>
| **How is NHS Health Check activity reported geographically?** | The collection presents activity in two different ways:  
- In the view by CCG, activity is reported based on the registered GP practice of a patient  
- In the view by local authority level, activity is reported based on the area of residence of a patient | Local authorities report activity for their population. |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>How are patients who have had more than one offer of a check within a five-year cycle counted?</strong></td>
<td>Patients are counted at most once every financial year. If a patient is recorded as invited in multiple financial years within a five-year cycle their attendance may be counted again. See answer to ‘How are patients who were invited and received their check in different financial years, reported?’ (below) for exceptions.</td>
<td>According to best practice guidance patients are only counted for their first invite within every five-year cycle. Any subsequent invites should be excluded from reported figures.</td>
</tr>
<tr>
<td><strong>How are patients who have received more than one check within a five-year cycle counted?</strong></td>
<td>Patients are counted at most once every financial year. If a patient is recorded as receiving a check in a subsequent year their outcome will be counted again in that year.</td>
<td>According to best practice guidance, patients should only be counted for their first completed check within every five-year cycle. Any subsequent checks for the patient should be excluded from reported figures.</td>
</tr>
<tr>
<td><strong>How are patients who were invited and received their check in different financial years, reported?</strong></td>
<td>Patients completing their check within 6 months of an invite during the previous financial year are counted as having attended a check in the financial year of the check and not reported within figures for the financial year of the invite.</td>
<td>Patients having their first offer at the end of a financial year are reported in the offers section of the figures for that quarter. If the patient subsequently received their check this should be counted in the quarter in which the check was received.</td>
</tr>
</tbody>
</table>
Patients aged 40-74 who have no pre-existing cardiovascular disease are eligible for a check every five years.

Are patients who did not meet the eligibility criteria but had a check included in the reported figures?

Patients who have a clinical code recorded indicating that an NHS Health Check would be inappropriate (for example because they are receiving palliative care) are excluded from all reported figures.

Patients who did not meet the age eligibility criteria because their age was calculated as less than 40 at the time of the NHS Health Check event will be excluded from reporting.

Patients who do not meet the eligibility criteria within the best practice guidance should not be included in the count of patients receiving or having been offered a check.

Patients who have been identified as ‘inappropriate’ for an NHS Health Check but where activity has still been recorded, included in reported figures?

3.4 Data completeness

The Joint Collection calculates and reports the approximate age of patients at the time of their NHS Health Check event based on the patient’s year of birth. Any activity where the patient was outside of the age range 40 – 74 will be excluded from reporting.

Not all patients aged 69 and over with NHS Health Check activity have been extracted within the Joint Collection, due to complexities with the extraction process. The following suppression of patients has been applied to the Joint Collection reported figures:

- patients with a calculated age of 69 and older at the time of their NHS Health Check activity have been suppressed from the figures in financial year 2012-13
- patients with a calculated age of 70 and older at the time of their NHS Health Check activity have been suppressed from the figures in financial years 2013-14 onwards

These criteria are likely to significantly impact any possible comparison of reported figures from the Joint Collection with those from the Local Authority Collection.

3.5 Data coverage

Over 90% of open and active GP practices at 31st March 2018 participated in the project and are included in the Joint Collection. There exists variation in data coverage across CCGs where recorded activity from some GP practices has not been made available.

Only NHS Health Check activity for open and active GP practices at the time of the extraction was collected. Activity for GP practices participating in the NHS Health Check
programme but dormant or closed at the time of extraction would not be included in the Joint Collection.

Activity for patients recorded as not consenting to their data being released outside of their GP practice, for purposes other than direct patient care, has not been extracted.

In contrast as local authorities have a statutory duty to provide their NHS Health Check data, it is expected that figures within the Local Authority Collection will be comprehensive of providers participating in the programme in their area.

### 3.6 Recording processes

Both collections rely on the accurate and timely recording of NHS Health Check activity. Whether or not the patient was offered and attended a check, the quality of reporting depends on the systematic and standardised capture of data.

The table below highlights potential issues associated with the accurate recording of NHS Health Check activity and considers whether they may impact on figures reported in each collection.

<table>
<thead>
<tr>
<th>Issue</th>
<th>Potential impact</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NHS Health Check completed but not recorded</strong></td>
<td><strong>Joint Collection</strong></td>
</tr>
<tr>
<td>All activity that forms part of the NHS Health Check has been performed but the clinical code indicating a completed check is not recorded.</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>NHS Health Check recorded but no record of the check components has been recorded</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Third party activity</strong></td>
<td><strong>Local Authority Collection</strong></td>
</tr>
<tr>
<td>NHS Heath Check activity undertaken</td>
<td>Yes</td>
</tr>
<tr>
<td>by third party providers may not be applied using a clinical code within a timely manner at a patient’s GP practice.</td>
<td>activity where a clinical code has been applied to a patient record. If the activity delivered by the third party has not been added to a patient record using a clinical code at the patient’s GP practice, the activity will not be included in reporting.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
</tr>
</tbody>
</table>
| **Introduction of codes**  
Clinical coding to capture activity takes time to implement and may impact the quality of figures reported. | **Yes**  
The Joint Collection relies on the accurate and standardised use of the NHS Health Check clinical codes to identify activity. | **Yes**  
Where different clinical providers are all undertaking NHS Health Check activity, a standard set of codes to ensure activity is recorded consistently is required. |
| **Double counting activity**  
Multiple providers each reporting activity figures which are then combined into an overall reported figure could lead to double counting of activity. | **No**  
All activity is analysed at patient level, reducing issues of double counting activity. | **Yes**  
Combining figures from multiple providers can make identifying activity relating to one patient challenging for some local authorities. Local authorities able to monitor activity at a patient level may not experience this issue. |
| **Recording of invites**  
Patients completing an NHS Health Check may not have a formal invite recorded. | **No**  
Provided an NHS Health Check event code (other than ‘inappropriate’) has been recorded on the patient record, an NHS Health Check will be considered to have been offered regardless of whether the invitation itself was recorded. | **Yes**  
Where an opportunistic NHS Health Check has taken place, a corresponding invitation for the patient should be reported at the same time as the check. Similarly, where a patient has declined a check a prior formal invitation should have been reported. |
| **Differentiating between first and subsequent invites**  
Accurately differentiating between patients invited to an NHS Health Check for the first time and | **No**  
The Joint Collection reports the outcome from an NHS Health Check invite. Where a patient has been recorded with an NHS Health Check event code (other than ‘inappropriate’) in more than one financial year within a five-year cycle, multiple | **Yes**  
Where local authorities have limited access to patient details for NHS Health Check invites, establishing whether the invite should be counted within their submitted figures could be challenging. |
subsequent follow up invites in a five-year cycle can be challenging. | outcomes for the patient will be reported.

4. Conclusion

The Joint Collection expands on the current data published nationally about the NHS Health Check programme and will include demographics of patients and geographic breakdowns. This will improve understanding of the programme and its delivery in areas where this level of monitoring is not currently available.

The two data collections each report activity based on the NHS Health Check programme, however the areas highlighted within this document demonstrate that activity figures reported have been constructed in different ways. A consideration of the processes involved with each data collection, the inclusions and exclusions of activity and how these aspects apply to individual areas will give local authorities insight into the delivery of the programme in their area, even though direct comparisons between the collections are not appropriate.

5. Appendix A

Links to the two collections referred to in this document can be found below:

1. NHS Health Check Joint Publication; NHS Digital and Public Health England; 2019

   Details of the GPES service used to extract data for the collection can be found here:
   https://digital.nhs.uk/services/general-practice-extraction-service

2. NHS Health Checks offered and received in local authority areas in England; Public Health England; 2013 onwards