



What was our aim?

To increase the percentage of high quality annual health checks completed with people with learning disabilities to 50 per cent for six GPs across Kent by the end of the financial year 2019/20.

Why is it important to service users and carers?

In the financial year 2018/19 the percentage of adults with learning disabilities that had their annual health checks completed was 42.9 per cent across Kent. The NHS long term plan new national target is for 75 per cent. Annual health checks are vital for adults with learning disabilities as they have significantly poorer health than their non-disabled peers. In part this is due to difficulties in identifying ill health among people with learning disabilities (PWLD) and gaining timely access to appropriate services.

There is clear evidence to suggest that the provision of health checks for PWLD in primary care is effective in identifying previously unrecognised health needs, including those associated with life-threatening illnesses. The Learning Disabilities Directed Enhanced Service was introduced in 2008/2009.

Areas that struggled to implement health checks reported the following issues:

- A history of poor relationships between the primary care trust (PCT) and GPs
- Capacity issues in the team. The area that reported this issue used to have a primary care liaison nurse who supported GPs but since this post was lost, health check numbers had gone.

Referenced: Improving Health and Lives (IHaL) Report number six by Sue Turner.

The annual health check is instrumental in optimising good health, preventative work, ensuring access to health screening, signposting and identifying ill health and treatment. Mencap death by indifference 2012 called the NHS to act to stop more PWLD dying unnecessarily. This report highlighted annual health checks become a permanent part of the GP contract to ensure early detection of health conditions.

Because of this, funding has been provided to invest in improvement work.

As a pilot, six GPs were approached to take part in improvement work: For these GPs, the 2018/19 annual health check figures were: A) LD Register 64 – achieved 12 B) LD register 53 – achieved 11 C) LD Register 49 – achieved 12 D) LD Register 53 – achieved 11 E) LD Register 30 – achieved 0 F) LD Register 61 – achieved 23.

Ideas and tests of change

Questionnaires were sent to GPs to identify the processes used to achieve annual health check key performance indicators (KPIs) for their learning disability population and any reasonable adjustments they are currently making to ensure Clinical Commissioning Group (CCG) targets are met. The questionnaires also included questions such as whether the Cardiff Health Check was followed and if the PWLD had a Health Action Plan following their annual health check (AHC) to assess the quality of the AHCs being carried out.

Patient questionnaires will be completed with patients prior to their health check to ascertain previous experiences and completed post AHC to review quality of health check with Primary Care Liaison Nurse (PCLN) involvement.

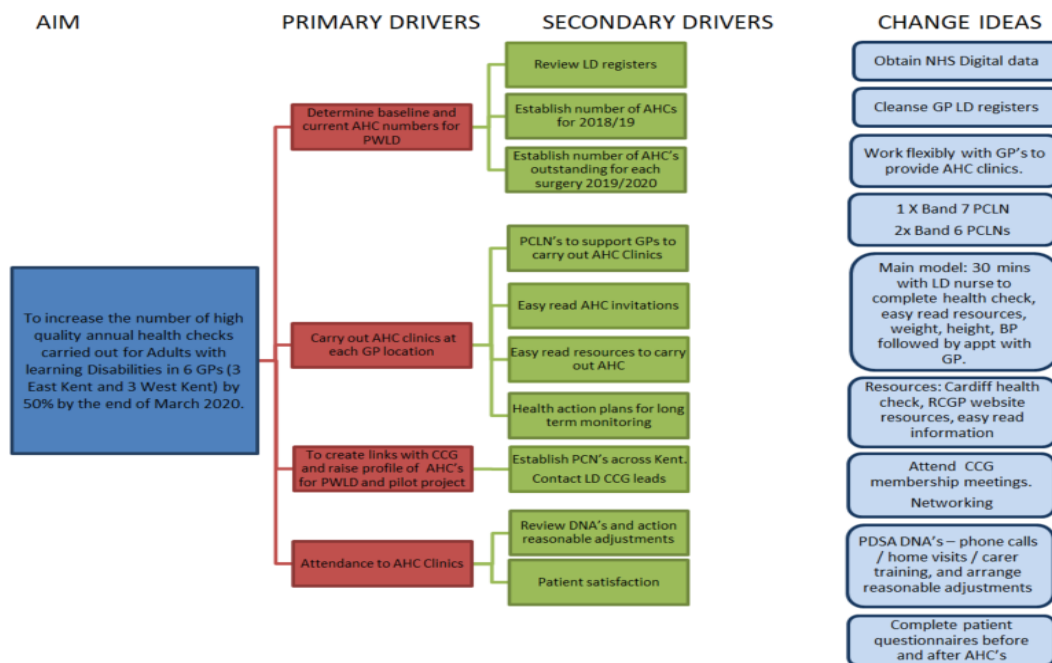
The main platform for improving the number of annual health checks being completed with people with learning disabilities will be to provide clinics at each GP supported by PCLN. This will need to be flexible and adaptable to each GP practice dependant on need and working structure.

The supporting PCLNs will:

- Use easy read invitation letters
- Use easy read materials within clinic
- Provide a Health Action Plan
- Provide home visits for complex patients
- Arrange longer appointments within clinic if required
- Promote/advertise the clinic and assist with care/patient training for local services to raise awareness of the importance of attending AHCs.

The tools we used

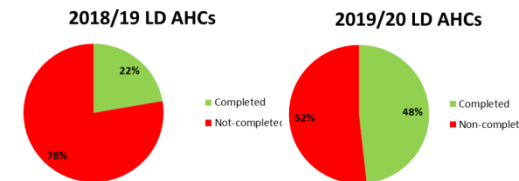
Driver Diagram:



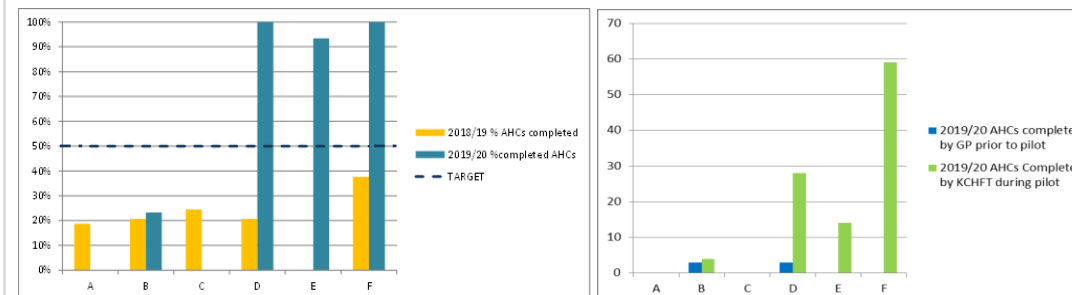
Results/How did we do/Anticipated outcome

GP Practice	2018/19 % AHCs completed	2018/19 register numbers	2019/20 (Cleansed register)	2019/20 target (50% of register)	2019/20 AHCs completed by GP prior to pilot	2019/20 AHCs Completed by KCHFT during pilot	2019/20 completed AHCs
A	19%	64	28	14	0	0	0%
B	21%	53	30	15	3	4	23%
C	24%	49	67	34	0	0	0%
D	21%	53	31	16	3	28	100%
E	0%	30	15	8	0	14	93%
F	38%	61	59	30	0	59	100%

Overall in 2018/19, the six GPs achieved a collective AHC completion rate of 22.3 per cent (69 out of 310). With the introduction of this pilot in 2019/20, this collective percentage has increased to 48.3 per cent (111 out of 230).



Due to the COVID-19 pandemic, the pilot was cancelled for three of the GPs (A, B and C); however, the remaining three continued (D, E and F). These graphs show the respective increases in AHCs completed, and who the AHCs were completed by.



What we learned and what's next

The findings evidence the need for PCLNs to be involved with long term sustained improvement in annual health checks.

By implementing AHC clinics throughout other GPs in Kent, compliance with the national target of 75 per cent is more achievable.

- CCG Commissioning
- Posts within

DNA rates need to be monitored and profiled as soon as possible to ensure suitable adjustments are actioned.

Assessing the learning disabilities (LD) register and populations throughout Kent is required to ensure more accurate KPI reporting.

COVID-19 impacted significantly on the ability to support three of the six surgeries due to the surgeries cancelling these clinics. This has affected the 'collective' percentage. However the bar graphs show the significant increase in AHCs for the three surgeries supported prior to COVID-19. These achievements were made in a 12 week period.