

Annual Health Checks for Adults with a **Learning Disability**

A Scottish Government Directive

A Scottish Government Directive[1] issued in May 2022 establishes a duty on Health Boards to provide Annual Health Checks to all people in Scotland aged 16 and over who have a learning disability, using the Scottish Health Check[2] for Adults with Learning Disabilities. To support NHS Boards with delivery a recurrent revenue funding model is in place, with an allocation to NHS Lothian of £300k for 2023-24.

Background

Many people with learning disabilities have considerable and multiple health conditions, with an increased risk of developing long-term conditions from both genetic and lifestyle factors. Compared with the general population, people with learning disabilities are 3 to 4 times as likely to die from an avoidable medical cause of death, with most of the avoidable deaths being preventable if timely and effective treatment was given, consequently people with learning disabilities overall life expectancy is over 20yrs shorter than the general population.

Evidence is clear that Annual Health Checks provided within primary care minimise future health costs, reduce health inequalities, improve quality of life, and increase life expectancy.

The Directive does not provide a prescriptive delivery model, it is for each NHS Board to develop a sustainable model that matches local contexts with the only stipulation being that only a medical practitioner or a registered nurse can complete the Annual Health Check.

The expectation is for the Annual Health Checks to be offered by 31st March 2024 with a requirement that NHS Lothian provide a report to the Scottish Government at least once during each one-year period, beginning on 31st March 2023.



Assessment

The latest population data suggests that within NHS Lothian there are approximately 4,000 adults with a learning disability. This is expected to increase in line with population growth in the Lothians, along with an increase in life expectancy, and notably with an increasingly complex health presentation.

	All Lothian	СоЕ	West	Mid	East
Population [3]	3,975	2,184	696	466	629
Allocation [4]	£300k	£216k	£62k	£33k	£38k

The existing Lothian local enhanced agreement (SESP) supports the Annual Health Check as Practices are obliged to keep a register of those in their Practice population known to have a learning disability. For 2022/23, 115 Practices out of 118 are signed up to the SESP. There is no obligation to undertake any heath check work within SESP unless a person has an underlying health condition, which as stated is likely in many cases. However, there is an obligation to keep and maintain Key Information Summaries (KIS) for those with complex needs.

The view from the Lothian Local Medical Committee is that the Annual Health Check should be delivered by a centralised specialist team linking back to GPs for follow up of actions identified within a Health Check Outcome Summary.

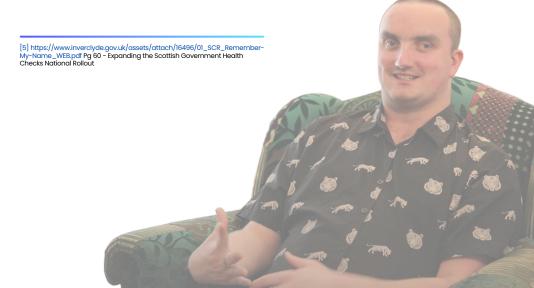
A paper was taken to the HSCP Chief Officers on the 30th October 2023 which set out several delivery model options, it was noted by the Chief Officers that across all options the allocation provided would be inadequate to meet aims. Helpfully the Scottish Government policy leads have indicated that based on evidence received from NHS Boards on costs incurred, and achievability of delivery within allocation, there is scope to increase the yearly allocation. It is therefore incumbent on NHS Lothian to commence a model of delivery that will identify costs and achievability to inform discussions.

Recommendation

Chief Officers agreed the option that delegates the NHS Lothian funding allocation of £300k to HSCPs to carry out Annual Health Checks to the population of people with a learning disability within each HSCP. Going forward the proposed Annual Health Check delivery model will be structured as follows –

- **1.** NHS Lothian maintains reporting oversight, with responsibility sitting with Nurse Director for Primary and Community Care, supported by an Oversight Group with representation across HSCPs and taking forward the following activities:
 - **1.1** Develop and introduce an electronic version of the Annual Health Check to enable staff to record data and outcomes directly within established patient information systems.
 - **1.2** Develop and introduce a method of reporting based on Practice registers, which can be aggregated to HSCP level, and then to NHS Lothian level for onward reporting to Scottish Government.

1.3 Ensure the process put in place within each HSCP meets guidance and recommendations from key reports [5], such as repeated DNA for Annual Health Check is recorded and triggers further investigation.



Recommendation (cont'd)

- **2.** HSCP maintain delivery oversight with responsibility sitting with each HSCP to establish a Local Implementation Group, and taking forward the following activities -
 - **2.1** Identify and establish how best to utilise the allocation to manage delivery and implement supportive processes. It would be anticipated the allocation would naturally sit within the Community Learning Disability Team to enable additional
 - **2.1.1** Community Learning Disability Nurse workforce to support delivery, recording and reporting, and
 - **2.1.2** Community Team Secretary or business admin support hours to support associated administration activities such as arranging meetings, creating invites, booking rooms and appointments.
 - **2.2** Manage any organisational change, governance, and recruitment processes associated with additional workforce.
 - **2.3** Manage any associated governance processes such as Equality Impact Assessment, Data Protection Impact Assessment.
 - **2.4** Develop and introduce a system to manage yearly invites and bookings based on Practice registers. It would be expected the Community Learning Disability Nurse team would link up with local Practices and agree on how to manage delivery to the registered population who have a learning disability.
 - **2.5** Establish caseload management for the Community Learning Disability Nurses within Trak to enable demand to be managed, monitored, and reported. It would be expected that Annual Health Checks would be managed through Trak clinic templates, which encompass the ability to send invites, and record attendance.
 - **2.6** Scope out and purchase the required clinical equipment along with laptops, phones, etc utilising 2023/24 allocation.

Recommendation (cont'd)

- **3.** It would be expected that the Annual Health Check will be undertaken within the person's local Practice, making reasonable adjustments where required, which will build on relationships and patterns of attendance. Suitable space and access to equipment within each Practice will require to be negotiated, with booking based on availability. However for the small population where attending the Practice is not suitable the Community Learning Disability Nurse will make alternative arrangements to undertake the Annual Health Check in more suitable non-clinical location such as person's home, or day resource, or HSCP resource.
- **4.** It would be expected that localised delivery will enable the Annual Health Check to be managed in conjunction with the long-term condition reviews routinely carried out by Practice Nurses, therefore reducing duplication, and building in efficiencies. It will also build professional relationships between Practices and Community Learning Disability Nurses which will support the follow up of actions identified within the Health Check Outcome Summary.
- **5.** Scope out fully the funding implications and dependencies of the delivery model to determine the achievability within the allocation provided.

The described delivery model has been discussed and adapted following consultation with –

NHS Lothian Learning Disability Nurse Network

- 14.11.2023

Scottish Government Professional Learning Disability Advisor

- 15.11.2023

Scottish Government Health Check Implementation Group

- 16.11.2023

Lothian HSCP Learning Disability Managers

- 17.11.2023



Appendix - Delivery Model

Allocation breakdown

	All Lothian	СоЕ	West	Mid	East
Population [6]	3,975	2,184	696	466	629
Allocation [7]	£300k	£216k	£62k	£33k	£38k

Potential CLDN resource [8] + Potential Team Sec resource

B4 wte = £38k/B5 wte = £48k / B6 wte = £58k + B3 x 0.08 wte = £3k

Delivery modelling examples

	Population	Additional B6 hours [9]	Required hours [10]
West – highest allocation per capita	696	1 x wte - 1500	522
East – lowest allocation per capita	629	0.6 x wte - 900	472

7 Based on - CoE 55.72%, West 20.81%, Mid 10.91%, East 12.55%

8 Based on - top AfC scale + 26%

Based on - wte = 40 working weeks, so accommodate leave / training / etc

10 Based on – Annual Health Check taking 45mins for whole HSCP population

Delivery flow

Allocation to HSCP

Agree and establish CLDN resource

Implementation Group agree structures, process and timings

Agree and establish Team Sec resource



Engage with Local Practices

Check registers of people 16+yrs recorded CLDN or PN or comb provide appointment in agreed location

Negotiate access to space and equipment Consider and put in place required education



Manage Appointments

Team Sec manage invites and bookings

Triage where, how, and who best to provide appointment

Outcome report to GP/Practice for follow up Attendance report to Team Sec for Scot Gov performance



NHS Lothian

Aggregate data, report to Scot Gov

Oversight Group review, and provide direction

Report population level health improvement