





Fostering a more collaborative approach to the NHS Healthcheck through improved online access to results

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Background

In England, people aged 40-74 are eligible for an NHS Healthcheck to help prevent the risk of heart disease and stroke. At the initial appointment a nurse or health care assistant will take a blood sample to measure cholesterol, ask about illness that runs in the family, check blood pressure, height and weight, and ask about lifestyle. These results are used to calculate the risk of an individual having a heart attack or stroke in the next ten years. If this risk is greater than 10%, the individual will be asked to come back to see their GP to discuss how they might reduce this risk. The things that help reduce the risk of heart attack or stroke include stopping smoking, being a healthy weight, and taking a cholesterol lowering medicine (called a 'statin'). This is a lot of information to cover in a 10 minute appointment and we feel an alternative approach is needed.

The CaVIAR Project

The CaVIAR Project (better Care Via Improved Access to Results) aims to improve the NHS Healthcheck by adding in an extra step. After the first appointment we plan to give patients access to a website where they can see and 'play around' with their results to see how making lifestyle changes or starting a statin could reduce their risk of having a stroke or heart attack. For example, they could flick a switch or turn a dial to see how stopping smoking or losing weight could reduce their risk score. They could also check the difference taking a statin would make. This could prepare them for the next appointment with their GP.

Involving members of the public

We gathered the views of members of the public to help review our plans. We spoke to PRIMER (a patient group at the university) and ran a workshop with 19 members of the public with the help of 4 PRIMER members. Following a brief presentation about the NHS healthcheck and background to the project, the workshop was split into 4 groups and introduced to Ketso®, a toolkit to help groups think creatively. We used this to encourage discussions about how we might improve the project and help us write a bid to fund the next stage of the project.

Key findings

- **Positive feedback:** People were positive about how the project could benefit the NHS (e.g. cost savings) and patients (e.g. helping communication)
- Problems and solutions: Problem areas included: 1) access (e.g. people with disabilities), 2) data security (e.g. life insurance companies accessing data), 3) engagement (e.g. lack of interest), and 4) negative effects (e.g. making people more anxious). Proposed solutions to such problems included a 'speak aloud' option on the website to improve access, assurances about the security of encrypted data, community 'champions' to increase engagement, and a helpline for those anxious about their test results.
- Improvements and alternatives: Workshop members also made helpful suggestions about how the project could be improved. These related to 1) Including a wider range of patients, 2) allowing people to access the website for a longer period so they could check their progress, and 3) content of the website (e.g. pointing people in the direction of stop smoking or weight loss services, or providing an online support forum.



"I wasn't sure what to expect from today but I have really enjoyed it. This idea would give patients more time to think about their results and discuss them with their family before going back to see their GP" – workshop attendee

Future plans

This workshop has provided valuable insights into an idea aimed at fostering a more collaborative approach to the NHS Healthcheck. For the next step of our research we plan to interview patients and health professionals to find out more about what they think of this idea. Following this, we hope to get started on designing the website itself. To do this, we may need to involve some of the companies that supply the patient records software to GP practices. After this, we hope to test the website and check if it's possible to let patients access and 'play around' with their results from home. The final stage would be to run a trial – where we compare one set of patients who have access to our website to another set who do not – to see if having access to the website improves their health in the longer term.

Before we do any of this we will need to secure funding to pay for the work to be done. This workshop has provided valuable insights into how our bid for funding could be improved and made more likely to succeed. We plan to involve patients and members of the public at all future stages of our research, including writing up papers for publication, presenting at conferences and spreading the word about the research findings.

Acknowledgements: We would like to thank the members of PRIMER and all those who participated in the workshop. This workshop was funded by the Health e-Research Centre (HeRC) PPI Small Projects Scheme at The University of Manchester.