

Severe Mental Illness - Physical Health Checks

Outreach Pilot

People that Decline / Did Not Attend (DNA) their appointment.

March 2023

Description of the Pilot

NHS Dorset has invited Central Bournemouth PCN as the first PCN to work with Community Action Network to improve uptake of their SMI annual physical health checks. The PCN securely share contact details for patients listed with the practice as having a diagnosis of SMI who have declined or did not attend (DNA) their annual health check. Using a standard information sharing agreement, Community Action Network contacts patients or their carers on behalf of the practice and offers the support or encouragement needed for attendance.

A dedicated outreach worker would have 1-1 conversations with each engaging contact using encouraging techniques designed to help the person engage proactively with the health-check service and signpost or offer support to those who need it.

This initial pilot work is funded under the outreach offer by NHS Dorset with the aim to work across all 18 PCNs across Dorset addressing DNA (did not attend) rates for the annual health check and to use the barriers and findings collected to improve the current health check approach.

The service provides

- Supportive conversations: spending time reassuring the person/their family and/or explaining about the importance of the health check i.e. identifying physical health risk factors and interventions to reduce these risks.
- Supporting reasonable adjustments: by liaising with patients and the Physical Health Support Worker to understand what reasonable adjustments are needed/possible to support attendance.
- Practical support: help with practical arrangements to help the person get to the appointment and/or 'attend' a homevisit appointment where necessary.
- Additional support: to link, signpost or refer the person to available local community groups or support services where necessary.

Targeted Engagement

We first used a method of texting patients where possible, with a friendly introduction before calling, thus giving them awareness of a phone call and more likely to engage. We attempted to make positive contact with each person up to 3 separate occasions, each at different times of the day. If the person had a mobile number and was registered using Whatsapp, we would also send a warm introduction message to engage that way.

For people who could not be contacted by telephone or text, personalised letters of invitation to contact the outreach support service were sent. Hand-written on a colourful manila envelope, with a postage stamp were used to encourage them to open and read it.

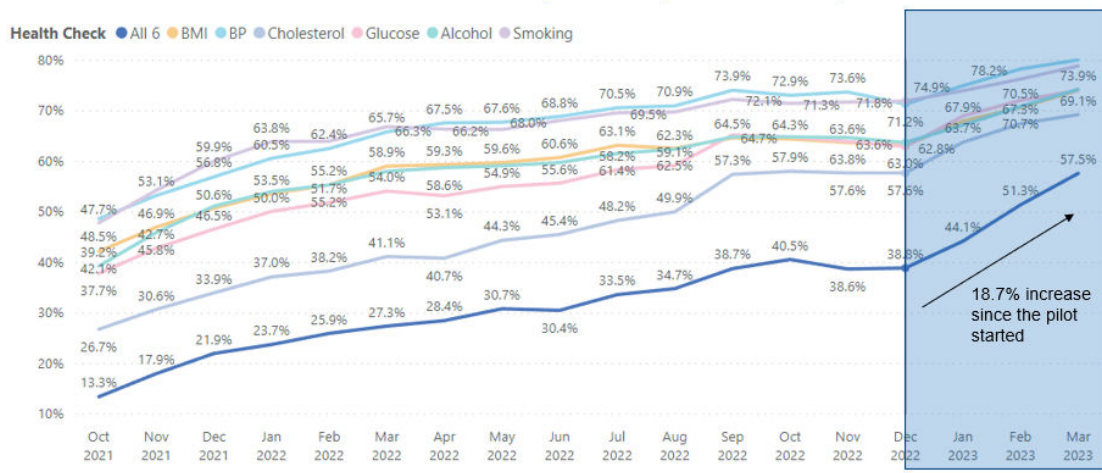
Overall communication from most patients was minimal and required effort and encouragement to engage. The engagement varied whereby some people only communicated via text or Whatsapp, and would ignore the offer of a phone call. Some asked for the information to be sent via email only, others only responded after we left a voicemail and the most success came when having telephone call conversations.

Some routinely required additional assistance ranging from further telephone calls / texts on the morning of their appointment to encourage their attendance, contact with their support network or working with the person to help family members support with appointments or offer reasonable adjustments regarding appointment times or arranging a home visit health check.

Pilot Statistics

- We received **84** SMI patients contact details. (45 Male / 39 Female)
- **14** people had incorrect or unreachable phone numbers on record.
- **13** people did not engage or respond to any of our texts, emails or phone calls
- **20** personalised letters have been sent out to encourage engagement
- **1** person responded from all personalised letters sent.
 - From the 57 we did make contact with:
- **21** people were successfully encouraged and attended their health check so far
- **12** people chose to decline having their health check
- **7** people were unavailable to attend, (currently in hospital / out of Dorset or the UK)
- **6** people further DNA'd their health check after agreeing to attend / booked in
- **3** people were removed from the list to be contacted in 12 months' time.
- **5** people are ongoing who have appointments booked in coming weeks.
- **3** people are delayed booked in due to offering appointments nearer their birth month.
- **18.7%** increase in the overall health check uptake since the pilot started in Dec 2022.

Central Bournemouth PCN (4 GP practices)



Latest figures from Dorset Intelligence & Insight service

DNA Barriers Themes

Resident in a carehome / not mobile - a home visit needed	(6 people)
Currently not in the area or out of the UK long term travelling	(6 people)
In hospital or housebound at home due illness or injury	(5 people)
Missed / forgot about their appointment and forgot to rebook	(5 people)
Couldn't get time off work to attend as work full time	(4 people)
Never received a letter so didn't know about it	(4 people)
Didn't think they needed a health check so just left it	(3 people)
Already had or having HC tests done via GP or another service	(3 people)
Couldn't make the appointment day / time and never rebooked	(3 people)
Couldn't get to the appointment due to transport issue	(2 people)
Appointment was cancelled by PHSW after booking off work so left it	(2 people)
Didn't want to have it right now, possibly in a few months' time	(1 person)
Moves frequently, in and out of Bournemouth so never knew anything about it	(1 person)
Doesn't answer unknown calls, thought invite text was a scam – not letter either.	(1 person)
GP record: long history of disengaging with services or leaving the house	(1 person)

Decline Reasons

Cannot get time off work and does not feel he needs it right now. (M/64)
Does not feel comfortable going to a new clinic or not seeing regular GP and chose to decline. (F/32)
Felt the PHSW is not as qualified as their GP and would prefer to go to their GP if they had any worries or concerns about their health. (F/47)
Did not feel that they need it as they are currently feeling healthy and look after their weight and watch what they eat, have not been to the GP for years. (F/68)
Has never attended any health screening in the past and would not attend a health check, prefers not to know to help his mental state and will only go if has health concerns. (M/75)
Does not feel she needs it and will see her GP if she has any concerns about health. (F/50)
Already having health assessed elsewhere (Eating Disorder Clinic) and has bloods taken / height & weight and doesn't feel the need to duplicate the tests. (F/24)
Only text "no thank you I will leave it please" no other reason provided. (M/61)
Refused to attend after parent encouraged and said wants to decline. (M/34)
Recently had all blood test done with GP and they came back normal, did not want to repeat the process as feels healthy and asked to decline. (F/54)

Signposting / Referrals

- Referred a vulnerable lady in her 80s who was feeling lonely to CAN's wellbeing buddy service and signposted to Age UK support. Her husband has been in hospital for over a month and she could not visit him
- Referred a male patient to the social cafes run by Dorset Mental Health Forum as he was feeling lonely which he believed would help keep up his sobriety, he said he would like to be around more people to chat with socially.
- Referred a male patient to have his Covid Booster at the Kings Park Vaccination centre as he was aged 50 and was eligible.

Patient Feedback

- “Very happy with my health check, it got booked in really quick. The lady who did it was friendly and it was an easy process”
- “It is really good what you are doing. I appreciate all the efforts to try contact me and encourage me to have the health checks. Some people really need this.”
- “I have not had my health check yet but it is really good that you call people to help those struggling and for referring me to the chat café which will help me. I am very grateful.”
- “The women Sam was very friendly, easy to talk to about anything and made me feel comfortable during the appointment, I would say an overall good experience.”

Pilot Learning

The outreach pilot with the first PCN has been a success, with 30% of the people we engaged with attending their health check, who may not have attended prior to being contacted via this targeted outreach approach and will hopefully engage better with health services and attend future health checks. The overall uptake has increased by 18.7% since the pilot started in Dec 2022.

There are some people on the DNA patient list that we purposely delayed contacting until closer to their birth month, this is due to SystmOne processes of offering patients appointments close to their birth month every 12 months. By doing this, avoids any possibility of a person being offered a second health check within recent months and the potential for further DNA / declines as the person would deem it unnecessary.

In terms of decline data with this first PCN, over 15% of patients have chosen to decline their health check due to personal choice. (after attempts of encouraging conversations where possible) This gives some evidence that the current total of +-30% DNA's rates on Diis may include a large number who have decided to decline but have chosen to not engage with their GP practice or physical health support worker, to confirm their decision and for it to be recorded accurately on SystmOne or Diis.

Pilot Partners

