

Major Review - Stroke Prevention in Hillingdon - Update

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REASON FOR ITEM

The Committee will be provided with an update on information which was requested at the last meeting of the Committee relating to the Stroke Prevention in Hillingdon review

OPTIONS OPEN TO THE COMMITTEE

The Committee is asked to consider the additional information which will be provided as part of the evidence for the Committee's review into Stroke Prevention.

INFORMATION

1. At the last meeting of the Committee held on 2 November 2016, the Committee was provided with a progress report on the Stroke Prevention review which the Committee began in April 2016.
2. The Committee was reminded that two witness sessions had taken place which had provided Members with details of what Hillingdon Council's interventions were in respect of Stroke Prevention. In addition, the review had received evidence from the Stroke Association and Members had attended a Stroke Association social event to enable the views of stroke sufferers to be taken into consideration.

Preventative Measures

3. The review was informed that with regard to preventive measures, the best way to prevent strokes was through healthy eating, being physically active, smoking cessation, keeping weight down and sensible drinking. It was noted that although exercise was an important element in reducing weight and managing stroke risk, 80% of the management of obesity was through better nutrition.
4. In 2016/17, a Pilot Programme investigating the early detection of people with stroke would be taking place under the Better Care Fund. Identifying atrial fibrillation (AF), one of the risk factors for stroke, was added to the programme, and checking adequate numbers of residents was likely to increase the Council's capacity to prevent more strokes.
5. With regards to the work being conducted by GPs, the Hillingdon Clinical Commissioning Group currently had a working group investigating stroke prevention, and in terms of treating stroke, GPs were working with the CCG and looking at anti-coagulation. When blood was thinner, there was less prevalence of stroke among AF-afflicted people. Furthermore, scoping work was taking place at Hillingdon and Harefield Hospitals to see how the stroke prevention service could be delivered in a different way.

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6. **NHS Health Check** - This was a mandatory programme commissioned by local authorities for early detection of vascular diseases for those who might have an illness but were not aware of it. Hillingdon Council commissioned the NHS Health Checks programme via local pharmacists and GPs, and it was aimed at the population group aged 40-74 years for identifying the risk of vascular diseases, including strokes. In 2015/16, there were 72,893 Hillingdon residents and people registered with Hillingdon GPs who were considered eligible for the NHS Health Check programme.
7. 11,435 residents received their First Offer of an NHS Health Check in 2015/16, an increase of 22% from the previous year. Of those offered the Health Check, 7,700 (67.3%) took up the offer in 2015/16, which equates to 10.6% of all those eligible. While the First Offer of an NHS Health Check increased from 2014/15, there was a 2.7% decrease in those who took up the offer in 2015/16.
8. However, one of the earlier studies found that NHS Health Checks averted 1,800 strokes per year in England, and since then, the programme has been rolled out nationally, with the identification of atrial fibrillation added to the programme.
9. Regulations made in 2013 set out legal duties for local authorities to make arrangements for NHS Health Checks to be offered to each eligible person aged 40-74 once every five years, and for each person to be recalled every five years, if they remained eligible, so that the risk assessment includes specific tests and measurements, as well as ensuring that the resident having their health check was told their cardiovascular risk score and their other results.
10. The Committee heard evidence during the review from the Stroke Association who promoted secondary prevention through:
 - Providing generic information about lifestyle and risk factors to stroke survivors and their families;
 - Identifying individual risk factors, providing specific information and, where appropriate, referring to statutory and voluntary agencies such as smoking cessation, stroke rehabilitation classes, physiotherapy, Age UK active ageing, GPs and others;
 - Inviting representatives from health and fitness organisations to give information talks at Long Term Communication Group; and,
 - Looking to arrange some activities to promote a healthier lifestyle such as a walking group, walking football and swimming after stroke lessons.
11. For this meeting, Members will be provided with additional information on preventative initiatives which were taking place from Public Health and the Wellbeing Team and anything further the Council could do to publicise these further (TVs in GP Surgeries, Heart Month, Stroke Awareness days, focus on BMEs, blood pressure machines in libraries, further publicity regarding health-checks etc).

Other approaches from other local authority public health teams

13. Officers have contacted neighbouring local authorities to look at their approaches to stroke prevention and here are some examples:

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London Borough of Harrow:

- Standard initiatives to improve health and wellbeing (improve diet and exercise, reduce alcohol and smoking etc.)
- Free blood pressure checks as part of health checks are **key** (available to staff and residents)
- Include risk assessments incorporating lifestyle, family history etc.
- Know Your Numbers campaign - <http://www.bloodpressureuk.org/microsites/kyn/Home>
- Collaborative working between LA's (Brent, Harrow and Hillingdon) and local charities/organisations e.g. blood pressure association <http://www.bloodpressureuk.org/BloodPressureandyou?gclid=CO7M0NOBrdACFY0y0wodLhUCRw>
- Local organisations often willing to run sessions put on by LA for staff/residents, for free
- Diabetes can cause variety of underlying cardiovascular issues including strokes. Blood Pressure checks etc can be incorporated into diabetes reviews - low, moderate, high risk = referral to GP
- The use social media to raise profile/information - campaigns
- Online tools such as self-checks - inexpensive way to raise awareness and prompt action in residents <http://www.nhs.uk/Tools/Pages/bloodpressurequiz.aspx> ; <https://www.nhs.uk/conditions/nhs-health-check/pages/check-your-heart-age-tool.aspx>
- Training for nurses to check for Atrial Fibrillation
- Dieticians from local charities/bodies
- Inexpensive monitoring equipment for home - <http://bhsoc.org//index.php?clD=246>

City of London:

- The City of London have used the services of a health promotion and wellness service to run insight lunches in the past covering stroke awareness / prevention and general cardiovascular health which is closely linked. These events are for staff as the Council does not have responsibility for residents.

London Borough of Bexley

- Specific stroke prevention does not really take place in Bexley but mandated NHS Health Checks are carried out, which look at Cardio Vascular Disease risk assessment and prevention. This includes checking atrial fibrillation for increased risk of stroke.

Primary Care Intelligence Packs provided by National Cardiovascular Intelligence Network

15. For Members information and for additional background reading the link here <http://www.yhpho.org.uk/ncvinintellpacks/Default.aspx> This provides details on Stroke and stroke prevention and treatment specific to local areas.

Visit to Hillingdon Hospital's Stroke Unit

16. On 8 December 2016, Members of this Committee were invited to attend the Stroke Unit at Hillingdon Hospital to enable Members to see the work of the Unit and to discuss issues surrounding the review, with patients in the Unit.