



**Health and Social Care
Committee**

**Andrew Gwynne MP,
Parliamentary Under-Secretary of State for Public Health and Prevention
Department for Health and Social Care
39 Victoria Street
London
SW1H 0EU**

Wednesday, 29 January 2025

Subject: Progress in preventing cardiovascular disease

Dear Andrew,

I'm writing to you following the Committee's evidence session on 22 January on the NAO's report "Progress in preventing cardiovascular disease." We were grateful to Dr Jeanelle de Gruchy and Jonathan Marron for giving evidence and were pleased to hear of the personal and positive interest that you have taken in the NAO's findings.

During the session, the Committee was disappointed to learn that the Department does not have routine access to data on the age, gender, ethnicity and socioeconomic status of those accessing Health Checks. This is particularly concerning given the well-known health inequalities in this area, with the burden of cardiovascular disease being much greater in the most deprived areas, and the higher risk faced by some ethnic groups. It is essential that the Department is able to measure whether those at the greatest risk do actually have Health Checks.

The Committee therefore recommends that the Government ensure that those commissioning and delivering Health Checks are obligated to collect and report demographic data relating to uptake.

We were interested to hear about steps that the Government will be taking to respond to the NAO's recommendation about the access and the effectiveness of data flows between DHSC, local authorities and primary care to inform a data improvement programme. We would be grateful if you could keep us updated on the development of this programme. A link between Health Checks and the useful data collected and available through CVDPREVENT could help greatly in this area.

The Committee was also concerned to hear about the high variance in uptake rates of Health Check amongst different local authorities and by the NAO's conclusion that DHSC has no levers to influence local authorities' performance in commissioning Health



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Checks. While we understand that the Department believes that local ownership and leadership are important to the programme's success, we do not believe that this can justify such large differences in performance across the country.

We were pleased to hear that the Department has committed to taking forward the NAO's recommendation to review the relative value of commissioning Health Checks through local authorities against alternative commissioning routes. **The Committee recommends that this review explicitly consider how changes to commissioning arrangements could be used to deliver higher rates of attendance at Health Check appointments and ensure that the Department has meaningful levers that it can use to drive improved uptake, particularly amongst the groups at highest risk of developing cardiovascular disease.** We would also be grateful if you could confirm the timeline for this review and share with us the outcome of the review.

We would be grateful for a response to the letter by 7 March.

Yours sincerely

Layla Moran
Chair, Health and Social Care Committee