

The effectiveness of a cardiovascular 'health check' in a workplace setting

Submission date	Recruitment status	<input type="checkbox"/> Prospectively registered
05/02/2026	Recruiting	<input checked="" type="checkbox"/> Protocol
Registration date	Overall study status	<input type="checkbox"/> Statistical analysis plan
05/02/2026	Ongoing	<input type="checkbox"/> Results
Last Edited	Condition category	<input type="checkbox"/> Individual participant data
05/02/2026	Circulatory System	<input checked="" type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

The National Health Service (NHS) introduced the NHS Health Check for patients aged 40-74 years back in 2009. The intention is to detect any health conditions early, like high blood pressure or high cholesterol, to then tackle them with lifestyle advice and medication. In recent years initiatives have looked at improving patient attendance rates and reducing costs, both of which are issues in the NHS. One example, proven to be successful outside the UK, is to introduce a Health Check in the workplace. To make the health check process more cost-effective and quicker, others have looked at an at-home rather than in-person check-up.

There is a lack of evidence concerning the effectiveness of a digital, remote approach of people /patients conducting health checks via the workplace route. If participation rates are high, and appropriate follow-up of cases - where (medical) intervention is indicated - takes place, then this could potentially be an alternative to the traditional in-person NHS Health Check. This study looks to recruit from a cohort of people who, as employees, 12 months ago had a health check-up in a remote and digital manner using a point-of-care test to measure their heart health. By repeating the health check process a year later, the effectiveness and impact of the initial scheme can be determined. The PocDoc Healthy Heart check that is used gives information on blood lipids/cholesterol and the risk of heart attack and stroke. The safety of how any initial significant baseline findings were acted on a year ago during testing (for example, if someone was found to have really high cholesterol levels) will also be evaluated.

Who can participate?

Employees aged 25 – 85 years who last year participated in the baseline workplace-based PocDoc Healthy Heart check initiative

What does the study involve?

Apart from providing written informed consent, participants are asked to conduct a PocDoc Healthy Heart point-of-care test from the comfort of their own home or workplace. The kit is designed so that it can be used by the target person (or patient)

What are the possible benefits and risks of participating?

The possible benefit for participants is that they will do a repeat test, with a year gap in between, of their blood lipids and cholesterol levels. They will therefore monitor their

cardiovascular health, and if a significant result is found, then they can discuss this with their regular healthcare professional. Apart from a small fingerprick to take a few drops of blood, there are no risks anticipated.

Where is the study run from?

The study is run by Cumbria Health, a provider of NHS services in Cumbria England and North Cumbria Integrated Care NHS Foundation Trust (UK)

When is the study starting and how long is it expected to run for?

January 2026 to October 2026

Who is funding the study?

The study is funded by Vital Signs Solutions Ltd (manufacturer and distributor of PocDoc Healthy Heart Check point-of-care test)

Who is the main contact?

Dr Leon Jonker, leon.jonker@ncic.nhs.uk

Contact information

Type(s)

Scientific

Contact name

Dr Leon Jonker

Contact details

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Additional identifiers

Central Portfolio Management System (CPMS)

71598

Integrated Research Application System (IRAS)

360452

Study information

Scientific Title

Digital and remote 'health check' screening for cardiovascular disease in a workplace setting: a cohort study (ACHIEVE [Assessment of Cardiovascular Health – Individual EValutive Exercise])

Acronym

ACHIEVE

Study objectives

1. Any change observed in cardiovascular health parameters, as measured with QRISK3 score, between baseline and 12 months follow-up PocDoc Healthy Heart Check tests.
2. Comparison of the number of participants in the three main QRISK3 categories at baseline and at 12-month follow-up (low risk – QRISK3 score of less than 10%; moderate risk – QRISK3 of 10-20%; high risk – QRISK3 score of more than 20%)
3. Any change observed in blood lipid and cholesterol markers (including total cholesterol, HDL, non-HDL, total cholesterol : HDL ratio, total cholesterol : high density lipids ratio, total glycerides, LDL) between baseline and 12 months follow-up PocDoc Healthy Heart Check tests.
4. Number of significant (QRISK3 10% or higher) GP notifications indicated at baseline and 12 months follow-up PocDoc Healthy Heart Check tests, respectively.
5. Review of Health Check Outcomes, i.e. an audit of what happened on the back of any significant findings when participants did the health check 12 months ago. Any actions and/or activities within 4 months of conducting that baseline PocDoc Healthy Heart test.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 04/12/2025, London - Fulham Research Ethics Committee (2 Redman Place, Stratford, London, E20 1JQ, UK; Tel: not available; fulham.rec@hra.nhs.uk), ref: 25/PR/1602

Study design

Non-randomized; Interventional; Design type: Screening, Diagnosis, Education or Self-Management, Device

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Cardiovascular diseases

Interventions

After reading this Participant Information Sheet, the employee completes the Informed Consent Form and returns it to the ACHIEVE research team using a Freepost envelope (no stamp needed). The study team sends the PocDoc Healthy Heart Check kit in the post to the participant (along with the countersigned ICF). Within 4 weeks of receiving the kit, the participant undertakes the health checks. The ACHIEVE team will also be able to see the PocDoc Healthy Heart Check test results. They will inform the participant's GP practice of said results (lipid, cholesterol, and QRISK3 score). This is to safeguard for any serious medical condition that may be identified. Any follow-up care that patients may seek or receive after the PocDoc testing does not form part of this ACHIEVE research study. This is an optional item for participants who are registered with a selection of GP practices. Participants do not have to do anything themselves for this part of the study. The ACHIEVE team reviews the participant's GP medical records to check if appropriate actions were taken on the back of any findings made by doing

the health check. They only do this review exercise for the results from the tests the last time round (when participant volunteered in late 2024 to early 2025).

Intervention Type

Other

Primary outcome(s)

1. Cardiovascular health parameters measured using QRISK3 score at baseline and 12 months follow-up

Key secondary outcome(s)

1. % of original baseline volunteers consenting to be participants in the ACHIEVE study at 12 months

2. % of ACHIEVE study participants who will complete and report on the PocDoc Healthy Heart Check test at 12 months

3. Number of participants in the three main QRISK3 categories (low risk – QRISK3 score of less than 10%; moderate risk – QRISK3 score of 10-20%; high risk – QRISK3 score of more than 20%) at baseline and 12-month follow-up

4. Number of GP notifications indicated at baseline and 12 months follow-up

For those participants who had a QRISK3 score of >10% at baseline:

1. % of participants who contacted and attended a GP consultation as a result at baseline

2. % of GPs who contacted the participant and invited them for a consultation (plus eventual attendance rate by participants) at baseline

3. % of participants where GP practice repeated blood lipid/cholesterol profile at baseline

4. % of participants offered lipid-modifying medication, i.e., statins, appropriately (plus eventual acceptance rate by participants) at baseline

5. % of participants investigated for high blood pressure and offered antihypertensives appropriately (plus eventual acceptance rate by participants) at baseline

6. % of participants offered weight loss advice or referral appropriately (e.g., NHS Digital Weight Management Programme for BMI ≥ 30) at baseline

Completion date

31/10/2026

Eligibility

Key inclusion criteria

1. Adults aged 25 – 85 years*

2. Participants in original workplace 'baseline' cardiovascular health check.

3. Currently still employed by one of the original employers involved in the original cardiovascular health check initiative.

4. Currently not absent from work long-term due to illness or for other reason (e.g., maternal leave, sabbatical; unless employee has explicitly indicated to employer that they can be contacted for non-work-related reasons).

*In accordance with National Institute for Health and Care Excellence

Healthy volunteers allowed

Yes

Age group

Mixed

Lower age limit

25 years

Upper age limit

85 years

Sex

All

Total final enrolment

0

Key exclusion criteria

1. Known to have high cholesterol levels, and already being treated for this by GP and/or consultant, when participating in the original workplace 'baseline' cardiovascular health check*
2. Pre-existing type 1 diabetes mellitus*, chronic kidney disease (stage 3 or higher) treated with medication*, known familial hypercholesterolaemia*
3. No access to phone/tablet/computer to use the POCDOC App
4. Any reasons for the person being unable to follow the protocol, including lack of mental capacity to consent to taking part in the study (examples include dementia, patient housebound, severe learning disability).
5. The patient has concurrent (medical) conditions that in the opinion of the investigator may compromise patient safety or study objectives (examples include receiving palliative care, medical condition that contraindicates giving routine blood samples)

*In accordance with National Institute for Health and Care Excellence guidance

Date of first enrolment

01/01/2026

Date of final enrolment

30/09/2026

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

North Cumbria Integrated Care NHS Foundation Trust

Pillars Building
Cumberland Infirmary
Infirmary Street
Carlisle

England
CA2 7HY

Study participating centre
Cumbria Health on Call Extended Access
Hilltop Heights
London Road
Carlisle
England
CA1 2NS

Study participating centre
North East and North Cumbria RRDN
Freeman Hospital
Freeman Road
High Heaton
Newcastle upon Tyne
England
NE7 7DN

Sponsor information

Organisation
North Cumbria Integrated Care NHS Foundation Trust

ROR
<https://ror.org/003hq9m95>

Funder(s)

Funder type
Government

Funder Name
Vital Signs Solutions Ltd

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Participant information sheet	version 2.0	05/12/2025	05/02/2026	No	Yes
Protocol file	version 1.1	09/01/2026	05/02/2026	No	No