Effects of the PCT Turnaround Plan on the LAA

The PCT budget cuts can potentially have an impact on the LAA in a variety of ways. Cuts to PCT services, and any resultant drops in performance will have the effect of casting doubt over Brent's abilities to address health inequalities, and avoiding premature mortality among Brent's population. Cuts to services could also impact in hidden ways on many of the stretch targets included in the LAA, including the smoking cessation stretch target, which is led by the PCT.

The mandatory outcome on health relates to reducing mortality from various diseases, and on improving life expectancy overall. These are very broad outcomes, changes to virtually any service could have a detrimental effect on these figures. It is hard to pin down specific areas of work that will have the worst effects. What we are being asked to provide is a package of indicators that will best measure key areas of activity that need improving. In the current LAA we have a number of indicators that we report on quarterly, but they have been chosen for ease and convenience- they are the indicators we can get quarterly information on. Thus it is hard to tell whether we are not achieving the mandatory health outcomes based on the information provided in the outcomes framework.

This report highlights the PCT cuts in service, the related stretch target of mandatory outcome that the cut could potentially impact upon, and a brief explanation of the potential impact of the cut.

PCT Cut	Related stretch target or mandatory outcome	Potential Impact
Ref: C13- Continence Services- Cease supply of light continence products. Cease supply to nursing homes as felt should be paid for out of general nursing home funding. Restrict eligibility for service. Stopped service to schools.	Extended schools stretch target	Cuts to health services in schools will reduce the ability of Brent schools to offer the core offer of Extended Schools. There are 5 main areas of core function for Extended Schools- two of which are; parenting and family support and swift and easy referral to specialist services such as health and social care. Reducing services to schools will hamper their ability to provide this core function. This is a theme running throughout this document.
Ref: C6- Deliver children's services to KS1 pupils only. Reduction in staff numbers and change in skill mix.	Extended schools stretch target	Has been picked up by the Council, but will impact on the provision that schools offer as part of their Extended Schools package. See above.

PCT Cut	Related stretch target or mandatory outcome	Potential Impact
Ref: C21- Focus on statutory and care services. Cuts to children's nursing and therapies. (including physiotherapists, nurses and speech and language therapists).	Extended schools stretch target Looked after children (LAC) educational achievement stretch target	Will impact on the referrals schools can extend to their pupils. Cutting these services and the services below will reduce one of the main avenues of support for LAC.
Reduction in Occupational Therapy services in schools and nurseries (from 5 OTs to 3)	Extended schools stretch target LAC educational achievement stretch target	See above
Reduction in physiotherapy services (by 2 physiotherapists and 2 assistants)	Extended schools stretch target LAC educational achievement stretch target	See above
Ref: C24 and C27- Cuts to school nursing service. Change in skill mix. (Less than 10% of workforce)	Teenage Pregnancy mandatory outcome Healthy Schools stretch target LAC educational achievement stretch target Extended schools stretch target	Differing opinions of by how much, but the scrutiny notes say that the amount is effectively 50%. This will mean the reduction of 9 School Nurses, 2 other Junior Nurses and 4 administration posts. Teenage pregnancy is a mandatory outcome in the LAA, and we feel a cut in nursing services in schools will reduce one of the most accessible avenues to support for girls at school. The reduction in the nursing service could deny Brent's LAC one of their avenues to seek and receive medical help. Lack of nursing support in schools could deny schools of health advice and services.
Reduction of volume of Schools Clinics	Healthy Schools stretch target Extended Schools stretch target Teenage pregnancy mandatory outcome LAC educational achievement stretch target	Could compromise the ability of schools to offer all services they need for their pupils to achieve Healthy School and Extended Schools status. See above comments for more detail.

PCT Cut	Related stretch target or mandatory outcome	Potential Impact
Cuts to Health Visiting- taken from the phases of the Turn Around Plan. This will be the reduction of 5.3 Health Visitor posts, but an increase of 1 Staff Nurse and 9 Nursery Nurse posts. Phase 2 will further reduce the Health Visiting capacity in the borough.	(Sure Start) Children's Centres Core targets for health and care (mandatory outcome on Health) Extended Schools	The new extra nurses will be static rather than health visitors who move around, which could mean that the most vulnerable people are not able to access the services they need. It will also slow down the ability to refer the people who need help on. Children's Centres will be unable to achieve targets for health visitors, which is one of their core functions.
Reduction of tripartite funding for clinical psychologist (for Children's services)	LAC educational achievement stretch target	Due to take place in phase 3 of the Turnaround. This could impact any LAC who need such support
Ref: A28- Delayed recruitment to sexual education post	Teenage Pregnancy mandatory outcome	Non-recurring, but could have impact in the short term which would see performance dipping. Delayed recruitment is a trend that could also have a severe impact on the LAA in both the short and the long term in terms of falling behind targets or in acquiring information.
Ref: A39- Re-tendering of specified contraceptive services- the same number of clinic places will be on offer but at fewer physical locations.	Teenage Pregnancy	Fewer locations for contraceptive services (still offering the same number of appointments). This will reduce the options to obtain contraception open to young people in Brent.
Ref: B1c and B1a- Transfer treatment from secondary to primary care- diabetes and CHD/ Cardiology.	Core targets for health and care (mandatory outcome on Health)	

PCT Cut	Related stretch target or mandatory	Potential Impact
	outcome	
Ref: C31- Reduce smoking services: Restrict the product range offered Reduce free nicotine replacement therapy Cut the team from 4 people to 3	Smoking cessation stretch target	The PCT are also trying to stop the smoking cessation programme entirely- for a saving of £200k. The smoking cessation target is extremely vulnerable to any cuts in service. The targets over the next two years are challenging, and these actions could have the effect of reducing rather than increasing the numbers of people using the service to stop smoking.
Ref: C36- Shift child psychology provision to other NHS Trusts	LAC educational achievement stretch target	This will reduce the support available to LAC by cutting one of the main avenues to support, and making it more difficult for them to access what support there is.
Ref: C36- Shift child health promotion to GPs- Focus on care services in mainstream schools. Reduce services in Specialist Schools. Should be able to provide advisors to the fostering and adoption panel.	Healthy Schools stretch target Core targets for health and care (mandatory outcome on Health)	Specialist schools also need to obtain Healthy Schools status as part of the stretch target, and this could make it harder for them- as well as for all other schools in Brent. The lack of health promotion in schools will make getting the message across harder.
Ref: C1 and C36- Integrated Community and Nursing Pathway- Big restructure but small reduction in head count, Management de-layering, change in skill mix so routine procedures are done by lower skilled staff. Corporate case loads introduced to reduce potential disruption from staff turnover.	Core targets for health and care (mandatory outcome on Health)	
Ref: C45- Cease payment to community advisors (mostly pharmacists) for 2007/08. Devise new cessation support scheme for 2008/09.	Smoking cessation stretch target	This will mainly affect pharmacists who are paid to dispense advice. This will impact hard on Smoking Cessation advice available to Brent residents.

PCT Cut	Related stretch target or mandatory outcome	Potential Impact
Delayed recruitment to the Information post (Germaine Cumming)	Entire LAA	Compromises our ability to obtain information for Corporate and Partnership reports (for example the LAA), and increases uncertainty about the accuracy of the figures, and reduced accountability for the information from the PCT.

Reference numbers refer to the PCT Turnaround Plan references.

Areas of work without a reference number come from the report on Children's Health Services, which was circulated earlier this year.

Extended Schools stretch target

The PCT budget cuts could potentially impact upon the Extended Schools stretch target by limiting certain aspects of the core offer that Extended Schools need to offer. Extended Schools provide access to a core offer of integrated services: Wraparound childcare all year round (in primary schools); Parenting and family support; A varied range of activities, including study support, sport and music clubs; Swift and easy referral to specialist services such as health and social care; Community use of facilities including adult and family learning and ICT. It is the third section of this core offer that the PCT cuts can impact upon, as cuts to the services will reduce the avenues for referrals.

Healthy Schools stretch target

The Healthy Schools programme has four themes: Personal, Social and Health Education (PHSE), including sex and relationship education (SRE) and drugs education; Healthy Eating; Physical Activity; Emotional Health and Wellbeing, including bullying. It is the first of these four themes that will be most affected by cuts to PCT services. Some of the PCT service cuts include reducing the amount of School Nursing and reducing School Clinics. Two of the criteria for healthy schools involve working closely with a school nurse and other external professionals working towards national priorities such as reducing teenage pregnancies, sexually transmitted infections and drug/ alcohol misuse. Another criteria requires schools to create specialist teams to support PSHE education including school nurse, sexual health outreach workers and drug education advisors. PCT cuts will reduce some of these personnel.

Smoking Cessation stretch target

The smoking cessation stretch target is run by the PCT. There are two sections to the stretch target:

- The number of quitters using NHS Smoking Cessation services- to 4 weeks in priority areas
- The number of quitters using NHS Smoking Cessation services- to 13 weeks borough wide

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The table above highlights two areas the PCT are proposing to reduce smoking cessation services including products and advice, and even a proposal to cut the service entirely. This could ultimately lose more money in performance reward grant than it will save the PCT for a year.

LAC Educational Achievement stretch target

The stretch target for LAC includes a cohort that are not normally considered eligible for GCSEs including special educational needs (SEN) children with a variety of health diagnoses including Down's Syndrome or Autistic Spectrum Disorders. These children as well as all LAC need access to health services in order to able to remain able to achieve. LAC can experience greater difficulties in accessing health services, and cutting off some of their avenues for accessing health services, for example in schools, or reducing the wider services available to them, could have an impact on this stretch target.

Teenage Pregnancy mandatory outcome

Reducing teenage pregnancies is one of the mandatory health targets of the LAA. Reducing some of the access points for teenagers to make use of contraceptive advice and services can impact on the teenage pregnancy numbers in Brent.

Sure Start

A number of Sure Start outcomes are included in the LAA. These are health outcomes, including the proportion of new mothers initiating breastfeeding, the proportion of mothers still smoking during pregnancy and the proportion of families visited by a health visitor during the first two months of the baby's life. The PCT cuts propose to reduce Health Visitor capacity in Brent, which will impact on the performance against these indicators.

Current Performance

The performance information received for the end of year LAA report is very sparse.

Performance indicators without current end of year information for the LAA Annual Report include:

- Mortality from cardiovascular diseases per 100,000
- Mortality from heart disease and stroke per 100,000 people
- Mortality from cancers per 100,000 people
- The percentage of GP practices with registers of people at risk from CHD
- Percentage of CHD patients whose blood pressure reading is <150/90
- Percentage of CHD patients whose Cholesterol level is 5mmol/l or less
- Incidences of diabetes per 100,000 population
- The number of people with diabetes who are offered diabetic retinopathy screening

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- Percentage of people aged over 65 vaccinated against flu
- The proportion of women aged between 50 and 70 undergoing breast screening
- Percentage of new mothers initiating breastfeeding
- The proportion of mothers still breastfeeding at 6-8 weeks
- Obesity prevalence as measured in GP registers amongst adults
- The conception rate per 1,000 females aged 15-17 years
- Percentage of patients attending GUM clinics offered an appointment within 48 hours
- The number of new diagnoses of gonorrhoea
- The proportion of Brent's population who smoke
- Successful quitters (4 weeks) attending NHS smoking cessation services

Performance Indicator	Performance 2006/07	Target 2006/07	Rating
The proportion of under 2s who receive immunisations: MMR	78%	95%	\mathbf{A}
The proportion of under 2s who receive their childhood immunisations: Diphtheria	92%	95%	0
The proportion of under 2s who receive their childhood immunisations: Tetanus	92%	95%	0
The proportion of under 2s who receive their childhood immunisations: Pertusis	92%	95%	•
The proportion of under 2s who receive their childhood immunisations: Hib	92%	95%	0
The proportion of under 2s who receive their childhood immunisations: Polio	92%	95%	
The proportion of under 2s who receive their childhood immunisations: Meningitis C	92%	95%	•
The number of people who quit smoking for 13 weeks borough wide ST	148	225 We are on course to achieve this target, final results not available until July.	
The number of people who stop smoking for 4 weeks in NRF areas ST	506	475	*

The current information we have received is: