

Annual health check 2007/08 - Performance of Brent Teaching Primary Care Trust

Summary

Based on our assessment for 2007/08, Brent Teaching Primary Care Trust provided a weak quality of service to patients and failed to maintain the adequate standard of performance it achieved in the previous two years. It has continued to be weak at managing its finances and has not returned to its adequate standard of 2005/06.

The trust was not one of those chosen to receive an inspection over the summer.

In a recent survey of trusts in England, patients rated this organisation as 'poor' in terms of their overall experience.

Overall performance

The overall performance rating is made up of two parts: 'use of resources', which looks at how effectively a trust manages its financial resources; and 'quality of services', which is an aggregated score of performance against national standards and targets. The below tables summarise the three years of the annual health check.

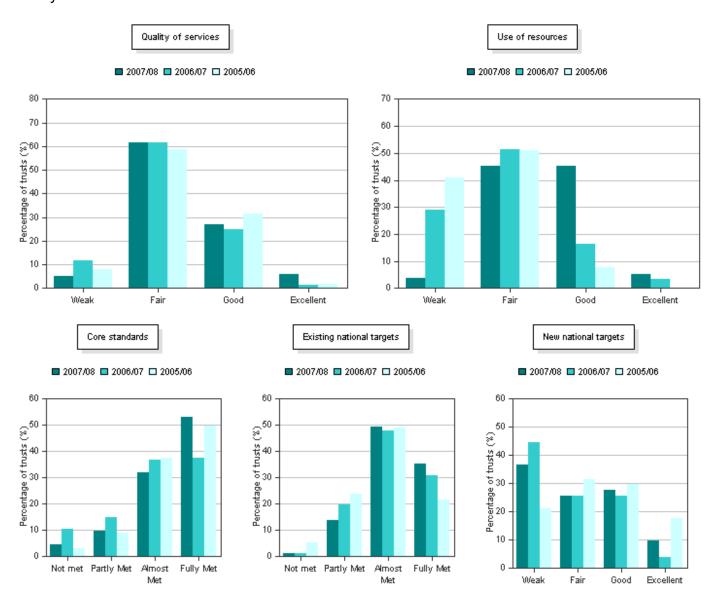
	2007/08	2006/07	2005/06
Quality of services	WEAK FAIR GOOD EXCELLENT	• • FAIR	• • FAIR
Use of resources	WEAK FAIR GOOD EXCELLENT	● ● ● WEAK	• • FAIR

Components of quality of services

	2007/08	2006/07	2005/06
Core standards	NOT MET PARTLY ALMOST FULLY MET FULLY	PARTLY MET	● ● ALMOST MET
Existing national targets	NOT MET PARTLY ALMOST MET FULLY MET	● ● ■ ALMOST MET	● ● ALMOST MET
New national targets	WEAK FAIR GOOD EXCELLENT	● ● ● WEAK	● ● ● FAIR

Overall peformance of primary care trusts

The graphs below show the overall performance of all primary care trusts for the two parts of the overall performance ratings, as well as for the three components of quality of services, over the three years of the annual health check.



Our 2007/08 assessment rated 391 trusts, down from 394 trusts in 2006/7, and 570 trusts in 2005/6. Graphs and tables presented here relate to performance in the relevant assessment year i.e the spread of performance in 2005/6 is based on how the 570 trusts that were assessed that year performed.

Core standards performance

Every NHS trust in England is responsible for ensuring that it is complying with the Department of Health's core standards. As part of the annual health check, we ask all trusts to assess their performance against the core standards and to publicly declare the information. The tables below present Brent Teaching Primary Care Trust's performance in the seven key areas of health and healthcare over the three years of the annual health check.

Safety

	2007/08	2006/07	2005/06
C01a - incidents - reporting and learning	NOT MET	NOT MET	COMPLIANT
C01b - safety alerts	O O COMPLIANT	COMPLIANT	COMPLIANT
C02 - safeguarding children	NOT MET	COMPLIANT	COMPLIANT
C03 - NICE interventional procedures	NOT APPLICABLE	O INSUFFICIENT ASSURANCE	COMPLIANT
C04a - infection control	NOT MET	COMPLIANT	COMPLIANT
C04b - safe use of medical devices	NOT MET	O INSUFFICIENT ASSURANCE	NOT MET
C04c - decontamination	NOT MET	COMPLIANT	COMPLIANT
C04d - medicines management	O O COMPLIANT	COMPLIANT	COMPLIANT
C04e - clinical waste	O COMPLIANT	NOT MET	COMPLIANT

Clinical and cost effectiveness

	2007/08	2006/07	2005/06
C05a - NICE technology appraisals	O COMPLIANT	COMPLIANT	COMPLIANT
C05b - clinical supervision	O COMPLIANT	COMPLIANT	COMPLIANT
C05c - updating clinical skills	O COMPLIANT	COMPLIANT	COMPLIANT
C05d - clinical audit and review	O COMPLIANT	COMPLIANT	COMPLIANT
C06 - partnership	O COMPLIANT	COMPLIANT	COMPLIANT

Governance

	2007/08	2006/07	2005/06
C07a and c - governance	NOT MET	NOT MET	COMPLIANT
C07b - honesty, probity	■ COMPLIANT	COMPLIANT	COMPLIANT
C07e - discrimination	■ COMPLIANT	COMPLIANT	COMPLIANT
C08a - whistle-blowing	■ COMPLIANT	COMPLIANT	COMPLIANT
C08b - personal development	■ COMPLIANT	COMPLIANT	COMPLIANT
C09 - records management	NOT MET	O INSUFFICIENT ASSURANCE	COMPLIANT
C10a - employment checks	■ COMPLIANT	COMPLIANT	COMPLIANT
C10b - professional codes of conduct	■ COMPLIANT	COMPLIANT	COMPLIANT
C11a - recruitment and training	NOT MET	COMPLIANT	COMPLIANT
C11b - mandatory training	NOT MET	COMPLIANT	COMPLIANT
C11c - professional development	■ COMPLIANT	COMPLIANT	COMPLIANT
C12 - research governance		COMPLIANT	COMPLIANT

Patient focus

	2007/08	2006/07	2005/06
C13a - dignity and respect	O INSUFFICIENT ASSURANCE	COMPLIANT	COMPLIANT
C13b - consent	COMPLIANT	COMPLIANT	COMPLIANT
C13c - confidentiality of information	● ● NOT MET	COMPLIANT	COMPLIANT
C14a - complaints procedure	COMPLIANT	COMPLIANT	COMPLIANT
C14b - complainants discrimination	COMPLIANT	COMPLIANT	COMPLIANT
C14c - complaints response	COMPLIANT	COMPLIANT	COMPLIANT
C15a - food provision	COMPLIANT	COMPLIANT	COMPLIANT
C15b - food needs	COMPLIANT	COMPLIANT	COMPLIANT
C16 - accessible information	O COMPLIANT	COMPLIANT	COMPLIANT

Accessible and responsive care

	2007/08	2006/07	2005/06
C17 - patient and public involvement	COMPLIANT	COMPLIANT	COMPLIANT
C18 - equity, choice	■ O ■ INSUFFICIENT ASSURANCE	COMPLIANT	COMPLIANT

Care environment and amenities

	2007/08	2006/07	2005/06
C20a - safe, secure environment	NOT MET	● NOT MET	COMPLIANT
C20b - privacy and confidentiality	O COMPLIANT	COMPLIANT	COMPLIANT
C21 - clean, well designed environment	O OMPLIANT	● NOT MET	COMPLIANT

Public health

	2007/08	2006/07	2005/06
C22a and c - public health partnerships	O COMPLIANT	COMPLIANT	COMPLIANT
C22b - local health needs	O O COMPLIANT	COMPLIANT	COMPLIANT
C23 - public health cycle	NOT MET	COMPLIANT	COMPLIANT
C24 - emergency preparedness	O O COMPLIANT	COMPLIANT	COMPLIANT

Existing national targets performance by indicator

Our assessment of existing national targets looks at whether this trust is maintaining the levels of service set through the Department of Health's 2003-2006 planning round. We use sets of performance indicators to measure the targets. In the 2007/08 annual health check we used a total of 36 indicators across the different trust types to measure performance against existing national targets. Most of those targets are measured by one performance indicator, with the remainder being measured by two indicators.

The levels of performance against the indicators for this trust are detailed below.

Indicators

	2007/08	2006/07	2005/06
Total time in A&E: four hours or less	UNDER ACHIEVED	DATA NOT RETURNED	ACHIEVED
Access to a GP	FAILED	ACHIEVED	ACHIEVED
Access to a primary care professional	ACHIEVED	ACHIEVED	ACHIEVED
Category A calls meeting eight minute target	ACHIEVED	ACHIEVED	ACHIEVED
Category A calls meeting 19 minute target	● ● ACHIEVED	ACHIEVED	ACHIEVED
Category B calls meeting 19 minute target	UNDER ACHIEVED	UNDER ACHIEVED	• FAILED
All cancers: two week wait	UNDER ACHIEVED	ACHIEVED	ACHIEVED
Revascularisation: three month wait	ACHIEVED	ACHIEVED	ACHIEVED
Commissioning a comprehensive child and adolescent mental health service	■ ACHIEVED	ACHIEVED	ACHIEVED
Commissioning of crisis resolution services	■ ACHIEVED	● FAILED	ACHIEVED
Thrombolysis - 60 minute call to needle time	DATA NOT AVAILABLE	DATA NOT AVAILABLE	DATA NOT AVAILABLE
Delayed transfers of care	ACHIEVED	ACHIEVED	ACHIEVED
PCT facilities in place to support choice	UNDER ACHIEVED	UNDER ACHIEVED	ACHIEVED
All cancers: one month diagnosis to treatment	● ● ACHIEVED	ACHIEVED	ACHIEVED
All cancers: two month GP urgent referral to treatment	■ ACHIEVED	ACHIEVED	ACHIEVED
Diabetic retinopathy screening	ACHIEVED	ACHIEVED	ACHIEVED
Inpatients waiting longer than 26 weeks	■ ACHIEVED	ACHIEVED	ACHIEVED
Outpatients waiting longer than 13 weeks	● ● ACHIEVED	ACHIEVED	ACHIEVED
PCT booking	UNDER ACHIEVED	FAILED	UNDER ACHIEVED
Practice based registers - patients called for review	ACHIEVED	ACHIEVED	• FAILED

Note: Data from the last three years has been presented in the table above. However, annual amendments to indicator constructions and scoring thresholds have sometimes taken place.

New national targets performance by indicator

Our new national targets assessment looks at the targets outlined in *National Standards, Local Action: Health and Social Care Standards and Planning Framework 2005/06 - 2007/08*. As for existing national targets we use sets of indicators to measure performance against the targets. In the 2007/08 annual health check we used a total of 59 indicators to measure performance against the new national targets. Some new national targets are measured by one performance indicator, with others being measured by up to four indicators.

Indicator level performance for this trust is detailed below.

Indicators

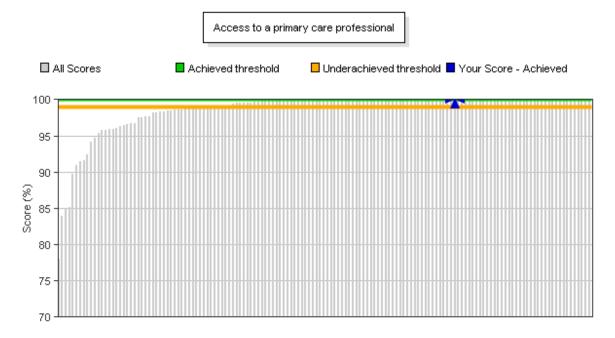
	2007/08	2006/07	2005/06
Blood pressure	ACHIEVED	ACHIEVED	ACHIEVED
Cholesterol levels	UNDER ACHIEVED	ACHIEVED	ACHIEVED
Cancer mortality rate	ACHIEVED	ACHIEVED	ACHIEVED
Implementation of NICE improving outcomes guidance	● ● ACHIEVED	UNDER ACHIEVED	ACHIEVED
Breast cancer screening	UNDER ACHIEVED	UNDER ACHIEVED	UNDER ACHIEVED
Care programme approach seven day follow up	• FAILED	UNDER ACHIEVED	UNDER ACHIEVED
Smoking during pregnancy	■ ACHIEVED	ACHIEVED	ACHIEVED
Breastfeeding initiation rates	ACHIEVED	ACHIEVED	ACHIEVED
Smoking status of the population	■ ACHIEVED	ACHIEVED	ACHIEVED
GP recording of body mass index	ACHIEVED	UNDER ACHIEVED	UNDER ACHIEVED
Teenage conception rates	ACHIEVED	UNDER ACHIEVED	UNDER ACHIEVED
Access to genito-urinary medicine clinics within 48 hours	● ● ACHIEVED	ACHIEVED	ACHIEVED
Access to reproductive health services	● ● FAILED	ACHIEVED	ACHIEVED
Experience of patients	POOR	DATA NOT RETURNED	NOT APPLICABLE
Emergency bed days	ACHIEVED	ACHIEVED	● FAILED
Community matrons and additional case managers	• FAILED	• FAILED	• FAILED
Very high intensity users	● ● FAILED	FAILED	• FAILED
Waiting times for diagnostic tests	ACHIEVED	UNDER ACHIEVED	ACHIEVED
Drug misusers in treatment	ACHIEVED	ACHIEVED	ACHIEVED
Practice based registers	UNDER ACHIEVED	ACHIEVED	ACHIEVED
Drug misusers sustained in treatment	● ● ACHIEVED	ACHIEVED	ACHIEVED
Community equipment delivery	UNDER ACHIEVED	UNDER ACHIEVED	UNDER ACHIEVED
Infection control	UNDER ACHIEVED	ACHIEVED	ACHIEVED
Data quality on ethnic group	ACHIEVED	ACHIEVED	ACHIEVED
Cardiovascular disease mortality	ACHIEVED	ACHIEVED	ACHIEVED

	2007/08	2006/07	2005/06
Commissioning of early intervention in psychosis services	● ● FAILED	• FAILED	NOT APPLICABLE
Older people's mental health needs and services	ACHIEVED	ACHIEVED	NOT APPLICABLE
National child measurement programme data quality	UNDER ACHIEVED	NOT APPLICABLE	NOT APPLICABLE
Referral to treatment time milestones	■ ACHIEVED	NOT APPLICABLE	NOT APPLICABLE
Compliance with guidelines concerning obesity	UNDER ACHIEVED	NOT APPLICABLE	NOT APPLICABLE
Four week smoking quitters	FAILED	● FAILED	NOT APPLICABLE
Community development workers	FAILED	NOT APPLICABLE	NOT APPLICABLE

Note: Data from the last three years has been presented in the table above. However, annual amendments to indicator constructions and scoring thresholds have sometimes taken place.

Focus on selected target indicator

The graph below shows how Brent Teaching Primary Care Trust has performed in comparison with all other primary care trusts for the selected target indicator in 2007/08.



Summarised performance of other annual health check assessments

The following assessments have also been carried out during the first three years of the annual health check. Our reviews and studies look at whether NHS trusts are delivering high quality care and treatment, and achieving value for money.

	2007/08	2006/07	2005/06
Adult community mental health services			● ● ● GOOD
Substance misuse services			• • FAIR
Tobacco control			EXCELLENT
Diabetes		● ● ● WEAK	
Substance misuse service review 2006/2007		EXCELLENT	
Urgent and emergency care	FAIR PERFORMING		

Useful links and glossary

The documents below provide further information on the annual health check:

- <u>Performance ratings 2007/08 including links to national overview report and regional summaries</u>
- More information on core standards
- More information on existing national targets
- More information on new national targets
- Annual health check 2007/08 frequently asked questions
- Information on NHS patient surveys

Glossary of terms:

Core standards

Fully met: This score means that a trust met all of the core standards set by Government by the end of the assessment year. A trust can only receive this score if it declares no more than four failings during the year. These failings must have been corrected by the end of the year.

Almost met: This score means that a trust met almost all of the core standards set by Government.

Partly met: This score means that a trust met many of the core standards set by Government. However, it was not able to demonstrate that it had met a number of standards.

Not met: This score means that a trust did not meet several of the core standards set by Government.

Compliant: This score means that a trust's board determined that it had met a standard during the assessment year, without any significant lapses.

Insufficient assurance: This score means that a trust's board was unclear as to whether there had been one or more significant lapses during the assessment year in relation to a standard.

Not met: This score means that a trust's board was clear that there had been one or more significant lapses in relation to a standard during the assessment year.

Declaration adjusted / Qualification: This score means that a trust received a follow up inspection at the end of the assessment year and had its declared compliance level adjusted, or qualified, based on the findings of our inspection.

Existing and new national targets

Fully met: This score means that a trust performed consistently well for the existing national targets assessment.

Almost met: This score means that a trust performed well for many aspects of the existing national targets assessment.

Partly met: This score means that a trust performed poorly for some aspects of the existing national targets assessment.

Not met: This score means that a trust generally performed poorly for the existing national targets assessment.

Excellent: This score means that a trust performed well beyond the minimum requirements and the reasonable expectations for the new national targets assessment.

Good: This score means that a trust performed above the minimum requirements and the reasonable expectations for the new national targets assessment.

Fair: This score means that a trust performed in line with the minimum requirements and the reasonable expectations for the new national targets assessment.

Weak: This score means that a trust performed below the minimum requirements and the reasonable expectations for the new national targets assessment.

Achieved: This score means that a trust performed to a high level for this aspect of the targets assessment.

Underachieved: This score means that a trust performed below the required level for this aspect of the targets assessment.

Failed: This score means that a trust performed poorly for this aspect of the targets assessment.

Not applicable: This score means that this aspect of the targets assessment did not apply to this trust. As a result, this trust was not assessed against it.

Data not available: This score means that this aspect of the targets assessment did apply to this trust, but the relevant data were not available. This was not the fault of the trust, so it was not assessed against it.

Data not returned: This score means that this aspect of the targets assessment did apply to this trust, but the relevant data were either not returned or were of insufficient quality for the purpose of this assessment. As a result, this trust was awarded the lowest score, equivalent to a fail.

Target: This is an expectation of the NHS set by Government, which is to be achieved by a specific date.

Indicator: This is what we use to measure performance against a target. Often this will be a one-to-one relationship (in other words, one target is measured by one indicator), but sometimes we use more than one indicator to assess performance against a target.

Indicator construction: This is the detailed information that we publish about an indicator, which outlines the data and the method we will use to assess performance.

Scoring threshold: This is what we use to determine the required level of performance for an indicator. For each indicator, we use thresholds of performance to decide whether an organisation has 'achieved', 'underachieved' or 'failed'.

Quality of services assessment

Excellent: This score means that a trust received the highest score of either 'fully met' or 'excellent' for all applicable assessments that contribute to the overall quality of services score.

Good: This score means that a trust received at least the second highest score of either 'almost met' or 'good' for all applicable assessments that contribute to the overall quality of services score.

Fair: This score means that a trust has performed adequately, in that it has not received the lowest score of 'not met' for either core standards or existing national targets. However, it has not performed sufficiently well across the applicable assessments that contribute to the overall quality of services score to score any higher.

Weak: This score means that a trust received the lowest score of 'not met' for either core standards or existing national targets.

Use of resources assessment

Excellent: This score means that a trust performed very well. Management arrangements operated effectively, and financial targets were met for at least the last two years.

Good: This score means that a trust performed well in regard to its financial arrangements, and met its financial targets for at least the last two years.

Fair: This score means that a trust performed adequately in regard to its financial arrangements.

Weak: This score means that a trust performed poorly in regard to its financial arrangements.