

FACTSHEET

WHAT ARE PCTS's?

Primary care services are provided by the people you normally see first when you have a health problem. It might be a visit to your doctor or dentist, to your optician for an eye test, or a trip to your pharmacist. NHS walk-in centres and the NHS Direct phone service are also part of primary care.

All of these primary care services are managed by Primary Care Trusts (PCTs). There are about 152 Primary Care Trusts in England (five of which are Care Trusts), each one covering a separate local area.

PCTs are a very important part of the NHS, and they get about 80% of the total NHS budget. PCTs decide what health services a local community needs, and they are responsible for providing them. They must ensure that there are enough services for people within their local area, and that the services are accessible. These services include:

- GPs,
- Dentists.
- Pharmacists,
- Opticians,
- · NHS Direct, and
- NHS walk-in centres

PCTs make decisions about the type of services that hospitals provide and are responsible for making sure that the quality of service is high enough. They also control funding for hospitals.

As PCTs are local organisations, they are in a good position to understand the needs of their local community. They make sure that NHS organisations work effectively with local authorities, and other agencies that provide local health and social care services, so that the local community's treatment needs are met

WHAT PCTs DO?

The three main functions of a Primary Care Trust are:

- engaging with its local population to improve health and well-being;
- commissioning a comprehensive and equitable range of high quality, responsive and efficient services, within allocated resources, across all service sectors; and
- directly providing high quality responsive and efficient services where this gives bestvalue.

Relationships and Accountability

- Perform their functions for, and with, their local population, in pursuit of equality, quality, responsiveness, innovation, efficiency and affordability
- Lead their local health system; and develop, and deliver their functions through, effective partnerships - particularly practice-based commissioners; and with Local Authorities eg in developing Local Area Agreements; and with the full range of different types of providers
- Hold providers to account through commissioning and contracting
- Are accountable to their local population directly and through OSC scrutiny; and to Strategic Health Authorities. PCTs operate within the framework of Department of Health policy; they are held to account for this by SHAs, not directly by the Department.

The day to day role of PCTs is therefore:

Improve the health of the community by:

- Developing plans for health improvement
- Working as part of local strategic partnerships to ensure coordination of planning and community engagement, integration of service delivery and input to the wider government agenda
- The local delivery plan is the main policy developed with cooperation between local PCTs, NHS trusts, local authorities and the strategic health authority

Develop primary and community health services by:

- Developing a strong nursing service bringing together both GP and PCT employed nurses
- Managing and regulating the contracts of all family health services providers covering medical, dental, pharmaceutical and optical services
- · Managing clinical performance within the PCT
- Implementing population screening programmes
- Ensuring the involvement of patients, public, voluntary sector and local communities in plans for improving health and wellbeing and the redesign, delivery and modernisation of services

Commission hospital and community health services PCTs have assumed the responsibility for securing the provision of:

- Primary care, community health, mental health and acute secondary care services
- Personal medical services including out-of-hours and walk-in centres
- Medical, dental, pharmaceutical and optical services
- Emergency ambulance and patient transport services
- The health contribution to Local Safeguarding Children services working in partnership with local authorities and other agencies
- All primary care development including supporting practices and other contractors and development of teaching PCTs

PCT BOARDS

The PCT board is a statutory body, responsible for the overall performance of the PCT, probity issues and community involvement. The board provides oversight and verification of the work of the PCT professional executive committee and monitors progress against the local delivery plan.

The PCT board is directly accountable to the strategic health authority, and ultimately Parliament for the overall performance of the PCT and is therefore empowered to hold the professional executive committee to account and supersede executive decisions, if necessary.

The board consists of:

- A lay chairperson
- 5 lay non-executive directors
- Chief executive of the PCT
- PCT director of finance
- 3 Professional executives
- PCT director of public health

PROFESSIONAL EXECUTIVE COMMITTEE

The PEC is responsible for the day-to-day running of the PCT by:

- Formulating and implementing service policies, investment plans and projects to be delivered by the PCT
- Working with the PCT board

The PEC is made up of:

- Up to 14 health professionals at least one of which is a GP and a nurse
- PCT chief executive
- PCT director of finance
- At least one social services representative
- Public health professional

LOCAL DELIVERY PLANS

Local delivery plans are three-year planning documents drawn up by PCTs in consultation with NHS trusts and strategic health authorities, and specify the services that need to be provided for the local population. Each priority area has quarterly and yearly milestones to assess progress against targets. Strategic health authorities create a comprehensive local delivery plan for their area by bringing together the individual PCT plans.

