

02.05.2014

Dear

Current Cuts to Funding of Young People's Health care  
**PLEASE ACT NOW TO REDRESS THIS**

There are 2.34 million students in Higher Education in the UK, 18% of them from overseas. The vast majority (72%) study full time.

We write to you on behalf of all the GP practices that care for them, as we are extremely worried about significant and imminent cuts to the funding of our health services.

Our representative organisation is the Student Health Association.

Students and young people in general are frequently dismissed and ignored by those who decide how and where NHS funding should be spent, and over the last few years several changes to the GP contract have undermined our small amount of funding further. The NHS is not, it seems, very good at looking after its future leaders/ professionals/ parents/ carers. Services for young people, and mental health services in particular, are the Cinderella services of our NHS, which gives a very unpalatable message to that generation; that *their health is not worth providing for*. They are not valued.

NHS leaders need to overhaul completely the funding for primary care services for young people, students, and those going through the transition from leaving home to young independent adulthood. Care needs to be concentrated in the practices that support them at a very vulnerable time. Innovation should be encouraged and funded. Services should not be cut.

In the context of increasing demand from all patients, and increasing expectation that young people will go into Higher Education, student health practices are going to witness an increase in demand for their services, in particular for **mental health support**. The latter is rising in all areas of the population, including in our children who will then grow up to be the next generation of students.

**[www.studenthealthassociation.ac.uk](http://www.studenthealthassociation.ac.uk)**

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Registered charity numbers: 256811 & 253984

Our government needs to act now to counteract the following blows to our funding;

- 2008 loss of funding for work done on **QOF diseases of low prevalence**, with **no compensatory income** added for areas of high student health prevalence eg eating disorders
- **Loss of MPIG** (minimum practice income guarantee) over next 7 years, will lead to student health practices in particular losing a very large amount of funding, which is used to provide services for all the areas not covered by QOF/ Enhanced services/ Public Health. ie mainly mental health.
- **National review of PMS funding**, leading to ‘redeployment’ of funding away from PMS practices (which would include many Student Health GP practices). £260 million, in England.
- Longstanding **poor funding per patient** (capitation fee) ,due to weighting arrangements which mean that a young male aged 15-44 is considered about 1/6<sup>th</sup> as ‘valuable’ as an over 85 year old. **A practice will be paid much less for young adults than they will be for the elderly or under fives**. This does not fairly reflect the workload entailed in caring for a challenging population with high turnover and specialist health needs.

Therefore we would call on the government and NHS to recognise the health needs of our young population, and the significant workload involved in caring for them, and for it to value them in a realistic and adequate manner via new funding streams or adjustments to current systems.

We would suggest;

- Local services to be commissioned from Practices by CCGs to provide specifically for this group
- Significantly increased funding to both primary and secondary mental health Services.

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- Rewarding of innovative ways of providing services eg primary care mental health nurses in student practices
- A more realistic weighting formula for capitation fees
- Review of Carr Hill Formula (for calculation of practice global sum) due in 2015 to include deprivation as well as age/gender/ geography, with 'student' included as a factor for deprivation, as they are a vulnerable/ low income population.
- A UK wide approach to funding health services for young people, rather than leaving it to a very variable collection of Local Area Teams, whose priorities vary widely.

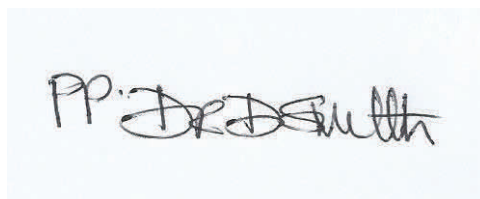
Unless significant steps are taken very rapidly there is a real risk of practices going under and no longer being able to provide their expert care to their young adult patients.

We urge concrete action now to ensure ongoing excellent care and prevent our society from failing an entire generation.

Please support our suggested actions and add your voice of concern to shape a healthier NHS for young people.



**Lisa Green**  
President



**Dr Deborah Smith**  
Chair



**Dr Dominique Thompson**  
Executive Committee Member

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