



Item: 8.7

Report to:	Primary Care Commissioning Committee			
Date of Meeting:	27 <sup>th</sup> April 2018			
Subject:	Primary Care Communications and Engagement Update			
Presented by:	Rachel Iveson, Senior Communications Officer, NHS Hull CCG			
Author:	Rachel Iveson, Senior Communications Officer, NHS Hull CCG			
STATUS OF THE	REPORT:			
To appro	ove To endorse			
To ratify	To discuss			
To consi	der For information			
To note	х			
PURPOSE OF REPORT:				
The purpose of this report is to provide an update to the committee on the progress of the Primary Care Communications and Engagement Group.				
RECOMMENDATIONS:				
It is recommended that the Primary Care Commissioning Committee:				
(a) Note the	e update			
REPORT EXEMPT FROM PUBLIC DISCLOSURE  No X Yes				
If yes, grounds for exemption (FOIA or DPA section reference)				

CCG STRATEGIC OBJECTIVE (See guidance notes below)	ASSURANCE FRAMEWORK SPECIFIC OBJECTIVE (See guidance notes below)
The report links with 21st Century Primary Care and to ensure that patients receive clinically commissioned, high quality services.	<ul> <li>21st Century Primary Care</li> <li>Patients receive clinically commissioned, high quality services</li> <li>GP Forward View</li> </ul>

IMPLICATIONS: (summary of key implications, including risks, associated with the paper),			
Finance	None		
HR	None		
Quality	None		
Safety	None		

**ENGAGEMENT:** (Explain what engagement has taken place e.g. Partners, patients and the public prior to presenting the paper and the outcome of this)

**LEGAL ISSUES:** (Summarise key legal issues / legislation relevant to the report)

None.

**EQUALITY AND DIVERSITY ISSUES:** (summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). **All** reports relating to new services, changes to existing services or CCG strategies / policies **must** have a valid EIA and will not be received by the Committee if this is not appended to the report)

	Tick relevant box
An Equality Impact Analysis/Assessment is not required for this report.	V
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

**THE NHS CONSTITUTION:** (How the report supports the NHS Constitution)

The report supports the delivery of the NHS Constitution as the commissioning of primary care services will aid in the delivery of the following principles, rights and NHS pledges:

- 1) The NHS aspires to the highest standards of excellence and professionalism
- 2) NHS works across organisational boundaries and in partnership with other organisations in the interests of patients
- 3) Quality of care
- 4) You have the right to expect NHS organisations to monitor, and make efforts to improve, the quality of healthcare they commission or provide.

## PRIMARY CARE UPDATE

## 1. UPDATE

- The next edition of My City, My Health, My care newsletter will be published in September 2018 and focus on improving access in primary care. This will include features on the implementation of extended access to general practice and introducing the new role of physician associates.
- The consultation report on extended access has been circulated to all GP groupings and will be available shortly on the CCG website. Individual practices reports are available on request. Response rates were excellent and results will be used to inform the extended access service specification.
- Healthwatch Hull are leading on the facilitation of a city wide PPG event planned for the end of June 2018. The aim will be to bring together PPG members to discuss current PPG activity, how this can be supported and to engage with PPG's in a proactive way around progress in transforming primary care.
- The evaluation of GP online consultation is now complete. Results show that on the whole those patients using 'econsult' are happy with it. The main area for improvement is to ensure that patients receive a call back within the time frame specified. The system appears to be more successful in practices that had implemented it with defined systems and processes in place to ensure that all practice staff are clear about their roles and how to respond to eConsult requests. Continued communication is required to ensure patients are aware of the option to consult online.

## 3. RECOMMENDATIONS

It is recommended that the Primary Care Commissioning Committee note the update