
To: Coventry Health and Wellbeing Board

Date: 10 November 2014

From: Dr Jane Moore, Director of Public Health

Subject: Director of Public Health Annual Report

1 Purpose

All Directors of Public Health (DPH) are expected to produce an independent annual report each year. The DPH Annual Report is an important vehicle for informing local people about the health of their community, as well as providing necessary information for decision makers in local health services and authorities on health gaps and priorities that need to be addressed.

This year, the title of the DPH Annual Report is 'Primary care at the heart of our health'. The report focuses on the primary care system and its role in addressing health inequalities, with a particular emphasis on general practice.

The DPH Annual Report is being presented to the Health and Wellbeing Board for information and agreement.

2 Recommendations

Coventry Health and Wellbeing Board is recommended to endorse the DPH Annual Report and recommendations, which are as follows:

Keeping people healthy:

- 1) **Public health should work with GPs and communities to continue to promote healthy lifestyles to ensure people stay healthier for longer.** We need to empower communities to change and ensure that we co-design and co-produce services with local people, work with existing assets within communities, work with local champions who can act as advocates in their communities and make sure services are easy to access so that people can get the right support at the right time. GPs have a key role in helping people to make healthier choices and referring people to appropriate lifestyle services.
- 2) **Public health and GPs should work together to enable practices to better understand the population in their local areas.** Information on local demographics and the likely prevalence of different conditions can help planning amongst GP practices and can enable practices to take a holistic view of their locality. It is key to link this information with knowledge of community initiatives in the local area that may be able to support people's care outside of the practice setting.

Making the right choice:

- 3) Patients should have a more active role in managing their health.** By living a healthy lifestyle, looking after themselves and making best use of services such as NHS Choices and NHS 111, patients can help to reduce pressure on primary care services when it is not needed. Visits to the GP for conditions that can be self-treated cost the NHS an estimated £2 billion every year. There are many minor conditions that can be treated at home in the first instance with self-care methods and over-the-counter medicines, saving themselves time and trouble.
- 4) Patients should choose the most appropriate service for their needs.** Patients should have the necessary information to make an informed choice about the most appropriate service to access, and should ensure that they use that service in the first instance. In the event that a condition cannot be treated at home with self-care or over-the-counter medicines, your GP is generally the first medical professional to contact when you feel unwell (rather than a walk-in centre or A&E).
- 5) Patients should be involved in co-designing services.** Patients should engage with patient participation forums and Healthwatch, making sure that their views are represented and they are involved in the co-design and co-production of services. In addition, patients should ensure that they are proactive in exercising their choice to change GP practice.

Collaborative and innovative primary care:

- 6) General practice should be open and accessible.** Additional training for receptionists should be provided, as the skills and qualities of receptionists are vital to ensuring that patients feel able to access care when they need to. Practices should also utilise the Coventry and Rugby Clinical Commissioning Group dashboard as a tool to highlight areas where they are doing well and where they could improve.
- 7) Practices should collaborate and share learning.** Smaller practices should be encouraged to work together in larger groupings to improve collaboration and sharing of innovative practice between different GP practices. Working together through networks facilitates an extended range of services, a greater focus on population health management and increased investment in IT and other technologies.

A health and social care system that supports primary care:

- 8) A workshop should be organised to consider the future configuration of general practice in the city to ensure that services are fit for purpose in the future.** This should include discussion of ways to improve recruitment and retention of GPs in the city. Coventry should be given a voice in regional and national discussions around the changing role of primary care to influence the future direction of travel.
- 9) Mechanisms to celebrate and share success should be continued.** This will ensure that good performance and innovative approaches are rewarded and encouraged and will ensure that these approaches and their results and benefits are shared throughout Coventry. In previous years a GP award evening has been held by the Inspires Locality, with awards given for improvements or innovative practice in a number of key areas, including healthy lifestyles. This year a proposal for a further Coventry-wide GP award evening is being developed.
- 10) Communication materials should be developed to engage with and inform the public.** The materials should focus on:
 - Clarifying the role and responsibility of the GP, and what patients should expect from their

GP – when accessing GP services is appropriate, the ways GPs can help, when the practice is open, whether they can expect to see the same GP on a continual basis, how to book an appointment and how long they can expect to wait.

- What a patients' GP can expect from them – to turn up for appointments, to take medication as prescribed and to live a healthy lifestyle to minimise the need for GP intervention.
- How a patient can change GP practice – clearly communicate that patients have a choice in which practice they are registered with, and set out the process for changing practices if the patient is not satisfied with the care they are receiving.

11) Commissioners should continue to provide feedback and support to practices that are the most challenged. Performance of GP practices in Coventry should continue to be monitored and managed. The NHS Area Team are further developing mechanisms to identify practices that are not performing as expected against a range of different indicators. Where this is the case, the NHS Area Team should work with practices to understand the underlying issues and support practices to improve.

3 Information/Background

The DPH Annual Report is being presented to the Health and Wellbeing Board for information and agreement. The report has been developed in consultation with an editorial group which includes GPs from Coventry and Rugby CCG and has been presented to the Primary Care Quality Group and Clinical Development Group at Coventry Rugby CCG. Comments from both groups have been incorporated into the report.

The summary report and full report are attached as appendices.

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Appendices

Appendix 1 – Director of Public Health Annual Report 2014: Summary

Appendix 2 – Director of Public Health Annual Report 2014: Full report