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Patient Participation Group Forum

Thursday 20 February 5:30-7 pm

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| **Waltham Forest GP Federation ,** [**500 Larkshall Road, London, E4 9HH**](https://www.google.com/maps/place/WF%2BFederated%2BGP%2BNetwork/%4051.6083183%2C-0.001316%2C19z/data%3D%214m13%211m7%213m6%211s0x48761e02b6708aff%3A0xa14b9bf26e4449df%212sLarkshall%2BRd%2C%2BLondon%2BE4%2B9HH%213b1%218m2%213d51.6093846%214d-0.0013634%213m4%211s0x48761e0299fab97d%3A0xe3de3c86baa74d2c%218m2%21) |

**Welcome** and introductions

Approve **Minutes**

1. **Identify common themes/concerns that should be escalated.**
* Update on concerns raised previously and their impact:
* **Blood testing systems**
	+ **Same Day Access**
	+ **Complaints and complaints process**
	+ **Edmonton Incinerator**
	+ **GP Texting** and the NHS App
	+ Any current concerns from PPGs
1. **Share best practice and learning on how to develop a strong PPG and decide what it should do?**
* LMC event and case studies
* Feedback on any successful PPG events
1. **Provide useful information/guidelines on GP services for patients across Waltham Forest?**
* Update from Fednet, North East London Integrated Care Board
* Primary Care Team
1. **AOB.**

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Patient Participation Group Forum

**Minutes of meeting Thursday 5th of December 5-7 pm**

Attendees

Andy Agathocleus (AA) – SMA Chair

Dave Dibble (DD) - Dr Dhital’s Practice

Marilyn Gould (MG) – The Ridgeway

Sharon Hanooman (SH) – Kiyani/Public Health Social Prescriber

Patrick Morgan (Addison Road)

Gail Penfold (GP) – Penhryn (online 1st hour)

Sharon Scott (SS) -

Karen Sobers (KS) – Sinnott

Dianne Barham (DB) – Healthwatch Waltham Forest (Chair)

David Hastings (DH) – Healthwatch Waltham Forest (Secretary)

Dr Sheraz Younas (SY) – WF GP FedNet Medical Director

Suzia Riasat (SR) – WF GP FedNet Operations & Service Development Manager

Sarah Mann – (SM) WF GP FedNet

Apologies: Lesley Finlayson (Old Church), Sue Kofi (Walthamstow Central Social Prescriber) Ann Korner (Old Church), Catherine Mears (Old Church), Roisin Reilly (Walthamstow Central PCN Social Prescriber)

**Welcome and introductions.**

**Item 1: Share best practice and learning on how to develop a strong PPG and decide what it should do?**

**GP Access for patients with Learning disabilities (LD)/Special Education Needs Disability (SEND) Project**

SM gave an update of a project investigating access to GP care for patients with LD/SEND working in conjunction with NELFT’s LD team. Each GP practice will be visited (15 of 39 so far) to complete an audit of services offered. Working with Waltham Forest Parents Forum (GP is a member and offered to be a liaison). A Reception Training Pack is being drafted. Easy-read information for those with LD.

PM asked SM if there was any existing GP guidance. The Addison Road PPG would like to get involved with the visit to their surgery.

**ACTION**: DB said she would look at the Healthwatch Waltham Forest data on LD/SEND patients.

SM added that only a few GP websites actually have pictures of the surgery which is necessary for LD/SEND patients. One GP is adding a tab for carers of LD/SEND patients on e-consult. Also asking the GPs about their PPG.

ACTION: SM to present this data at next meeting.

**General discussion on benefits of GPs having a PPG**

AA asked if the CQC look at whether GPs have PPGs as it’s part of the GP contract.

SY asked how do we persuade the GP practices to have a PPG.

DB said that no one is responsible for ensuring that they do but also that there is no specific funding. SY said there is some non-activity funding available.

PM said that some PCNs have a PCN-wide PPG e.g. Walthamstow Central and E4 Network. An entry point might be to contact each PCN clinical director to ask if all the practices within their PCN has an active PPG.

DD asked if there was a list of what a PPG should do as he had just become chair of his surgery’s PPG.

AA suggested setting your agenda with your practice’s issues e.g. appointments.

DB said we have a PPG toolkit. Indeed, there are quite a few PPG toolkits around.

**ACTION: DB to send PPG toolkit to DD.**

AA asked about PCN reports. DB responded that we published quarterly reports for each PCN on the Healthwatch Waltham Forest website as well as one for the whole borough.

PM said that a 90-page report on the Addison Road practice website had been produced. As a result, the complaints process had been rewritten.

DB explained the NHS complaints procedure. AA said that some patients write to the PPG who asks the Practice Manager to resolve the issue. PM said Addison Road has a Patient Advocate who helps patients.

DH informed the group out that the latest NHS complaints data shows that Addison Road had received the most complaints amongst the borough’s GPs with 85 for 23/4. This is only the complaints received directly by the GP not those that the ICB receives. Allowing for patient numbers, this was still the second highest behind the Firs. About two-thirds of complaints were upheld or partially upheld. However, Handsworth rejected all 44 complaints in the period. Claremont did not resolve any of their 12 complaints during the year. The ICB are only resolving about half of the complaints they receive due to lack of resources.

**Events**

SH said that the Forest 8 PCN had organised a successful Winter Wellness health and wellbeing day at South Chingford Library on 19th November.

AA added the SMA practice had also organised an event.

**Item 2: Provide useful information/guidelines on GP services for patients across Waltham Forest**

**Blood testing in the borough**

DH said he was producing an advice and information page on how to get a blood test in the borough for the Healthwatch Waltham Forest website. Timings and locations for services run by NELFT, FedNet and E4 Network.

SY said it should be possible to have electronic blood test forms as systems can talk to each other. He recommended taking the issue of electronic blood test forms to the Barts Health Pathology Primary Care team.

SH took the opportunity to say how good it was to get a quick appointment at the new Comely Bank Clinic.

**Texting services and the NHS App**

DB stated that GPs use the Accurx text service but it is now quite expensive. The ICB has a limited budget for this service. GPs will have to pay for texts themselves if they exceed the limit. The NHS App is being promoted instead but many people do not have smartphones.

PM said it was estimated that only 10% of Addison Road patients had the NHS App.

DB said that one large group of patients would be keen to use the app but another large group would prefer texts.

AA said one drawback with the NHS App is that GPs had disabled the appointment booking function as they prefer patients to book via Econsult.

SH said that the cost of texts has had an effect on attendance at wellbeing events as GPs stopped texting details of the events to patients to save money.

AA asked why he could not text his GP.

*Econsult*

KS said that GPs should not cap the number of Econsults. PM replied that GPs do not have enough staff to look at all the Econsult messages. PM said Addison Road tend to close their Econsult portal around lunchtime after 300 messages. They did employ staff to look at all the 600 they were getting a day but this proved to be uneconomic.

**Safer Surgeries**

DB said that the latest Healthwatch Waltham Forest report had shown that the situation had worsened rather than improving. The ICB primary care should be monitoring that just because the surgery has the logo on the website it does not mean they are actually implementing it. The report will go to the Borough of Sanctuary and the Wellbeing groups.

**Same Day Access**

DB said she had given the group’s feedback at the ICB workshop. Patients are bounced around as the pressure on Whipps Cross A&E increases.

SY said that there was a figure of 28% of A&E patients should have gone to their GP. Another group should have seen other services like mental health.

AA said there were thousands of new flats were being built in the borough. He asked if a new GP surgery was planned to allow the system to take the additional patients from these new builds.

DB said that the Locality Hub would take Leyton Healthcare and one other GP practice. The Healthwatch Waltham Forest survey suggests the community want to see mental health services rather than GP services.

**The effects of the Edmonton Incinerator on health**

DH said that a Waltham Forest Echo article from 2007 contained some infant mortality data from 2003-5 that indicated that the Chingford Green ward had the second highest rate in London.

There should be guidance to GPs in areas affected by the incinerator to look out for various conditions that could be affected by the incinerator.

**ACTION**: DB to find out if there is any information available from Population Health data.

**Item 3: AOB**

KS asked SH who made social prescriber referrals. SH replied that it was the GP.

The group agreed that the next meeting will be held on Thursday 20th February at the same place - Waltham Forest GP Federation offices at 500 Larkshall Road - from 5.30pm to 7pm.

**Impact Report**

**Same Day Access workshop outcomes**

Healthwatch Waltham Forest was asked to feed in patient experience of GP Access and particularly the voice of local patients. We were able to directly feed in comments made by PPG Forum members alongside CIS data. Attendees reached broad consensus on the need for, and approach to, Same Day Access (SDA) transformation, agreeing the following:

* There is a hierarchy of services to offer patients, which **prioritises GP-led services**.
* A **resource shift** is needed in conjunction with pathway transformation - likely to GP-led services and away from 111 and UTCs.
* A **strategic approach to commissioning and contracting decisions** is needed, which could begin with a business case to the ICB.
* **Robust data analysis, and clinical and financial modelling** is needed for the case for change.
* Further **engagement with system leaders,** and other stakeholders, such as the Federations, is needed to secure buy-in.
* **Recognition that 111 procurement is a key dependency** and new 111 and SDA models of care should be well aligned.
* There is the **opportunity to explore expanding good practice**, such as C&H Duty Doctor, Barking UTC co-location, and the Havering SDA pilot.

**You can find the report attached, noting Healthwatch comments.**

**Blood testing in the borough**

Agreed that we should raise the issue of

* The complexity of blood testing services in the borough
* The general introduction of electronic blood test forms for Barts Health Pathology Primary Care team. Why do patients need to physically pick up blood testing referrals at a GP to take to some phlebotomy services.

We raised these concerns with –

* Primary Care
* Barts pathology
* NELFT
* Interface meeting

We received a response to the following questions

**GP Blood Test clinic move to o Comely Bank**

We asked, has there been a decline in patients having blood tests through the clinic or there had been an increase in DNAs?

Response from Nicky Walpole, Assistant Director Adult CHS Planned Care, NELFT based at Jane Atkinson Centre.

* In November 2023 St James had 3494 appointments completed and 407 DNA’s
* In November 2024 Comley bank had 3644 appointments completed and 382 DNA’s.

So they have seen more patients with less DNA’s at Comley bank.

This is the only data we can compare now as we only started the service in Comley bank on 1st November 2024. We will continue to monitor the uptake at Comley bank compared to St James. The December reports are expected shortly but are reported a month behind.

 If the funding moves with the patients – e.g. if people stop going to NELFT is their funding reduced? This would be a ICB decision not NELFT. A reduction in booked appointments now would mean a shorter wait time so patients can be seen earlier and reduce the longer waits that patient’s had previously had. This will improve the quality of care to patients

**Waltham Forest/Redbridge and Whipps Cross Hospital Interface Service Group (Primary-Secondary) Meeting 5 Feb 25**

Dianne raised general issue of general confusion from a patient perspective on blood testing services in Waltham Forest and specifically whether electronic blood test forms could be adopted cross Barts Health Pathology Primary Care. Why do patients need to physically pick up blood testing referrals at a GP to take them phlebotomy services?

Will have to wait for the minute from the meeting but we think they implied that some PCNs are able to do this now and others seem to think it’s impossible. We understand that they are gong to go away and look at how more standardisation can be brought in across different PCNs and in relation to different conditions.

**Complaints**

David has pulled together **An Analysis of NHS Written Complaints for Waltham Forest 2023-24** which is attached and which we might want to review. There is a recent report from Healthwatch England regarding the complaints process. <https://www.healthwatch.co.uk/report/2025-01-27/pain-complain-why-its-time-fix-nhs-complaints-process>

We have asked the North East London Integrated Care Board Primary Care Team what leavers they have with practices that do not seem to deal with their complaints effectively and are awaiting an response.

**Edmonton Incinerator**

We asked Public Health:

* Has there ever been any review of the prevalence of LTCs/Cancers both in children and adults in areas closer to the incinerator.
* Is that something you can look at in relation to GP Practices most likely to see patients who live in those areas?
* Can this information be made available to GPs to make them more alert to any health conditions in their population e.g. maybe GPs should be funded/supported to do earlier checking for potential cancers, or regular checks for asthma in children.

**Response from Laura Stoll, Consultant in Public Health, London Borough of Waltham Forest**

I’ve had a quick look at the evidence base – there is a bit out there relating to both adults and children, but I think the key message is that Public Health England (now UKHSA)’s [risk assessment](https://www.gov.uk/government/publications/municipal-waste-incinerators-emissions-impact-on-health/phe-statement-on-modern-municipal-waste-incinerators-mwi-study) is that modern, well run and regulated municipal waste incinerators are not a significant risk to public health. While it is not possible to rule out adverse health effects from these incinerators completely, any potential effect for people living close by is likely to be very small.

This view is based on detailed assessments of the effects of air pollutants on health and on the fact that these incinerators make only a very small contribution to local concentrations of air pollutants.

There is [some evidence](https://www.sciencedirect.com/science/article/pii/S132602002300732X) that older incinerator technology and infrequent maintenance schedules are linked with adverse health effects but that more recent incinerators have fewer reported ill effects – as the Edmonton incinerator is new, this should mean that the risk is low, but a good reason to seek assurances from Haringey Council on regulation.

I hope this helps – I’m happy to do a more detailed evidence review, but I wanted to get something to you (and huge apologies that it’s come late).

**Primary Care Networks**

Latest PCN reports are available here: [Latest PCN Reports](https://www.healthwatchwalthamforest.co.uk/news-and-reports/search?combine=Primary+Care+Network&field_article_type_target_id_1%5B%5D=103&Search=Apply)

**Texting services and the NHS App**

We passed on the PPG Forum comments to the Waltham Forest and NEL Primary Care Teams. This is an issue that is being looked at a NEL level as there has been widespread concerns from across Place Based Partnerships regarding the expense or loss of key texting communications with patients.

Healthwatch have offered to do some engagement work to understand some of the barriers to use of the NHS App.

**PPG Toolkit and information**

* Attached the Waltham Forest PPG Toolkit.  Also available on our PPG Forum page - [Patient Participation Group (PPG) Forum | Healthwatch Walthamforest](https://www.healthwatchwalthamforest.co.uk/patient-participation-group-ppg-forum)
* The Patient Association has some good resources now <https://www.patients-association.org.uk/pages/category/patient-participation-groups> using the Hertfordshire and West Essex work.

Need a PPG Guide for GPs

* We talked about something for GPs that demonstrated why you should have a PPG.
* They can do work and bring in more money through fundraising activities etc
* Dianne to look at following up with LMC at London level.
* Do PPGs get the complaints themes?