

PAN WESTMINSTER PPG MEETING MINUTES

DATE:	30 September 2025	TIME:	17:30 – 19:00
VENUE:	Hybrid meeting: Via Microsoft Teams and In person at Grand Junction at St Mary Magdalene Church, Rowington Close, London W2 5TF		
CHAIR:	Dr Saul Kaufman		

PRESENT:		
Hannah Wrathall (HW)		Head of Communications and Engagement
Darragh Twomey (DT)		Head of Digital Transformation
Lebert Dwyer (LD)		Head of Service Delivery
Maria Tanko (MT)		Patient Engagement Coordinator
Abdullahi Dayah (AD)		IT Support
Rose Denise-Girard		Practice Manager
Jeanette Creaser		Practice Manager
HCL PPG Members		
Attendees (patients)	6	
Chairs welcome, Introduction	Dr Saul Kaufman welcomed and opened the meeting announcing those who sent their apologies.	
Declaration of Interest	No declarations of interest declared.	
Minutes of the last meeting – 12 June 2025	Minutes were approved prior to the meeting	

ITEM	
1	<i>Review of Action Log</i>
	<p>All previous meeting actions were closed except:</p> <ul style="list-style-type: none"> • HCL to explain HCL, PCN and Practice structures at next PPG meeting: covered in agenda item • HCL to explore different ways of capturing more patient feedback: The Head of Comms stated that there will be a trial of new ways of asking for feedback following advice from the User Experience Manager at St Mary's Hospital and the comments shared at previous PPGs. • HCL to review Patient Chair job description and incorporate any patient feedback: Feedback has been received and actioned. It will be readvertised
2	HCL, PCN and Practice Structure
	<p>This item, presented by the Head of Communications, was brought forward following a request from an attendee at the July meeting. The presentation outlined the commissioning structure from the Integrated Care Board (ICB) down to the practice level. It also explained how decisions are made at the federation level regarding service implementation, noting that practice and PCN representatives contribute through structures such as the working groups and the Access Board.</p> <p>An attendee asked about the Octopus and when it would be operating in WEM PCN. It was also highlighted that patients from the WEM PCN often need to travel to other areas to access services, which can be challenging, particularly for those experiencing homelessness. Attendees expressed that having access to it locally would be beneficial and viewed its absence as a missed opportunity. The Chair added that if there are any patients within WEM PCN who would benefit from the services in the Octopus, he would be happy to support facilitating access for them.</p> <p>A concern was raised regarding the commissioning of Healthshare/Cora, following a patient experience with one of their services. It was reported that a complaint had been submitted but was not reviewed and had been misplaced on three separate occasions by Healthshare. When the issue was escalated to the North West London ICB, the response received was that no further action could be taken at that level. The Chair advised that the complaint could be forwarded for further escalation. It was also mentioned that several other patients had reported similar experiences, and they are encouraged to submit a joint complaint, which the Chair offered to escalate on their behalf.</p> <p>Action: HCL PPG to look into collating feedback on Healthshare</p> <p>Action: Complaint about Healthshare to be forwarded to Chair once received</p>

3	Patches FFT
	<p>The Head of Service Delivery explained the end-to-end journey from when a patient submits a PATCHS request to when their query is resolved. A summary of the Friends and Family Test (FFT) PATCHS scores was also presented. Between April and August 2025, patients submitted 56,595 PATCHS requests, with a feedback response rate of 5%. The team continues to focus on increasing patient feedback submissions.</p> <p>In line with the <i>Fit for the Future: 10-Year Health Plan for England</i>, there will be a continued increase in the use of digital tools across the NHS. However, Practices remain accessible by telephone and in person. HCL will continue to support patient engagement in digital access, including two workshops planned for October 2025 to demonstrate how to use the NHS app. This update and the planned workshops were positively received by attendees.</p> <p>It was discussed that all access routes remain available to patients. However, NHS England has asked the local health systems to focus on increasing NHS App registrations. Members highlighted that higher registration numbers do not necessarily result in greater usage, as several digital tools are already in operation.</p> <p>Some participants questioned the added value of the NHS App, observing that it can be more complex to navigate than other platforms.</p> <p>A request was made to extend the upcoming NHS App digital inclusion workshops to the West End & Marylebone (WEM) PCN.</p>
4	Access plan
	<p>This was presented by the Head of Digital Transformation. The specification, provided by NWL ICB, outlines the priorities for 2025/26. The Access Plan enables HCL to focus on Practice priorities and align them with what patients have identified as important.</p> <p>Key priorities for 2025/26:</p> <ul style="list-style-type: none"> • Telephone calls to be answered within 10 minutes • PATCHS requests to be responded to by the next day • Increased patient survey responses • Improved NHS App registration rates

	<p>HCL will work closely with Practices to review patient data, support continuity of care, upskill staff, and report on progress against these initiatives.</p> <p>A potential risk identified is that while NHS App registrations may increase, ongoing engagement depends on user experience. Some patients may find the app helpful, while others may not continue using it.</p> <p>It was announced that by 2027, the NHS App is expected to become the main entry point to healthcare in England, offering services such as prescription management, access to secondary care information, and verified health content. However, appointment booking is not yet available through the app, which remains a limitation for many users.</p> <p>Comments and queries from attendees:</p> <ul style="list-style-type: none"> • What measures are there for data protection? <i>DT responded that the NHS app has established robust digital and data security measures, which have also been adopted to support other health systems globally. Locally, systems such as SystmOne (S1) and PATCHS incorporate multiple verification steps before patient data can be accessed, ensuring compliance with world-leading standards of data protection and security.</i> • Will the NHS app be opened to hospital records as they do with GP records? <i>DT responded that on the NHS App, patients can now view messages from secondary care providers. The integration between secondary care systems and the NHS App is already well established, supporting better information sharing and continuity of care.</i> • A key challenge remains that many patients still prefer to see their GP in person. One concern is whether the NHS App has the capacity to support appointment booking with the right clinicians, ensuring patients are directed to the most appropriate service for their needs. • Moving entirely to digital systems could unintentionally widen health inequalities, as some patients may find it difficult to use digital platforms. There were also comments regarding the Pharmacy First system, noting that certain symptoms could be overlooked by less experienced staff and that the overall process may feel lengthy for patients. <i>DT explained that for Federation members, Patchs can now be used in multiple language options to support communication. The intention is to encourage those comfortable with digital routes to use them, which in turn helps create capacity for patients who prefer traditional access methods.</i> • The advancements in ensuring access to healthcare are great but it is important to not exclude others who are unable to use these routes and those who use the routes are well informed. An example is the Pharmacy First scheme. You are referred to the service and may be seeing an inexperienced healthcare professional. <i>A Marylebone Health Centre representative advised that, due to good same day GP access at their practice, Pharmacy First isn't being largely promoted.</i>
9	AOB
	The 2025/26 Patient Survey is now live in English and six additional languages, with an Easy Read version also available.



	<p>Survey links have been circulated, and paper copies are accessible in all Practices. HCL is keen to hear from its diverse patient communities and continues to work actively to ensure broad participation.</p> <p>The survey will remain open until 30 November 2025, after which patient engagement events will take place in February 2026 to discuss the findings.</p>
<p>Next Meeting date: 27th January 2026 Time: 17:30 – 19:00 Location: Microsoft Teams (see calendar invite to access) and physical location : Grand Junction at St Mary Magdalene Church, Rowington Close, London W2 5TF</p>	

ITEM	ACTIONS	RESPONSIBLE
1	ACTION 1	
	HCL PPG to look into collating feedback on Healthshare	ALL
2	ACTION 2	
	Complaint about Healthshare to be forwarded to Chair once received	MT