

Patient Participation Group (PPG) Network meeting 12 Notes

Monday 14 October 2024, 6:30pm

We received 29 registrations for this event on Eventbrite and 17 people attended.

The 29 event registrations came mainly from patients registered at 15 Haringey Practices. 25 registrations for the event were from Haringey patients, and of those, 19 were PPG members. There were 5 registrations from Haringey Practice staff, Haringey GP Federation, North Central London Integrated Care Board (NCL ICB) Public Voice and Healthwatch Haringey.

Agenda

APOLOGIES: Adrienne Banks, Karen Doku

1. Termination of Operose / AT Medics contracts in North Central London - what next? with Diane Paice, St Ann's Road PPG / Clare Henderson, Director of Place, NCL ICB
2. Same day access hubs - what's happening in Haringey? with Brenda Allan, Queenswood PPG / Cassie Williams Haringey GP Federation
3. Blue Badge renewals - delays in processing with Tanya Murat Healthwatch Haringey and Paul Zickel, West Green Surgery patient
4. Relocating Hornsey Wood Green GP with Martin Rawnsley, Chair Hornsey GP Wood Green PPG
5. Physician Associates - Communications with patients in NCL with David Winskill, The Vale Clare Henderson NCL ICB
6. Update on getting a medical summary with Steve Durbin, Data Protection Officer, Haringey GP Federation and NCL ICB
7. Announcements /AOB

1. Termination of Operose / AT Medics contracts in North Central London - what next? with Diane Paice, St Ann's Road PPG / Clare Henderson, Director of Place, NCL ICB

Tanya Murat drew people's attention to the [articles](#) on the Healthwatch Haringey website which give some of the background on the termination of contracts, the latest article being in September 2024.

Diane clarified that the contract for St Ann's Road Surgery was coming to its natural end and during that time, patients had a deputation to the ICB which raised issues of performance. The contract was ended (not renewed) because of performance issues, and it was during the due diligence for this process that there were data issues, e.g. how many staff there were, how many appointments, the basic Key Performance Indicators (KPIs). This due diligence process started in October or November 2023. It emerged in March 2024 that the Practice had in fact been sold in December 2023. So St Ann's Road and the other Practices were in breach of contract with the NHS.

Diane stated that patients came together to ask questions and this led to the discovery of information around performance and breach of contract. She urged PPGs to be vigilant and speak up when they see things which are not right.

Diane stated that NCL ICB agreed in terminating the contracts for the other five Practices and drop-in centre now controlled by HCRG / T Twenty Midco / Osprey that there was a cavalier attitude to patients. In terms of the KPI's for the other Practices, three were thought to be failing and two were doing OK.

The situation now is that a new provider needs to be found. Under the Provider Selection Regime (PSR) a competitive process is not necessary. The ICB could award the contracts to a most preferred provider, like the GP Federation. St Ann's PPG members will be pushing for this option. They want a service which is responsive to patients, and the patient voice to be heard more.

Clare Henderson said the Director of Primary Care is looking at the options for the process. There is a recognition that people who live in the borough may generally prefer a local provider, who knows the local people, and already has a track record of working with the local VCS. It is important to have patients helping the ICB shape how the ICB does the procurement, with patient engagement within that.

Diane then shared that T Twenty Midco / Osprey had looked into her medical records without consent. This is now subject to a complaint to the ICB. In addition St Ann's Dr IQ has not been working for three weeks, and people can't make appointments. There is no continuity of care.

Sharon Grant suggested that Diane writes to her and she will take this up as Chair of Healthwatch Haringey. Sharon urged Diane to send her the details and any correspondence.

Could the poor performance be dealt with by emergency action? Clare Henderson agreed to ask the Team to look at what can be done now.

Brenda Allan asked what the objections are, in procurement terms, to doing a direct award to the Federation or a larger robust local Practice.

Mary Weaving stated that to access a patient's record, there needs to be good cause, and on questions of data protection Steve Durbin DPO may be able to advise. Steve Durbin stated that there are two issues here. One, access to the medical record without due cause – that is a data breach and two, the statement that false entries have been made. That is falsifying the medical record, which is a breach of the GMC Regulations and the NHS contract, as well as a data breach. These are quite serious matters.

Sharon Grant asked if Steve Durbin would collaborate with her to take this further and Steve agreed. He is not the Data Protection Officer for the Operose Group; however he is happy to assist Sharon.

Actions / agreements

Who	What action or agreement	When
Diane Paice	Send Sharon Grant details of alleged data breach and correspondence with Operose	Immediately
Sharon Grant / Steve Durbin	Liaise in relation to Diane's case, and consider data breach	ASAP
Clare Henderson	Ask the ICB team to look at possible emergency action to ensure St Ann's Road patients receive care	ASAP

2. Same day access hubs - what's happening in Haringey? with Brenda Allan, Queenswood PPG / Cassie Williams Haringey GP Federation

Cassie Williams stated that North Central London was chosen as one of the areas that would be considered for early adopter Primary Care

Networks (PCNs). PCN early adopters are called PCN Demonstrator Sites. Three sites were put forward to the national NHS to decide, and none of those sites are in Haringey. Two are in Camden and one is in Barnet, so there is no chance that Haringey GPs will be trialling same day access hubs.

There will be trials of the PCN Demonstrator sites. The trials are being evaluated for a year and a half to two years. NHS England would be evaluating. The PCNs must provide a lot of data. David Winskill asked for some more information.

[Post meeting note: Cassie was unable to discover any further information, but suggested Healthwatch speaks to the ICB's Primary Care Team – Gulsen Gungor and Sarah McIlwaine. HWH sent a query and is awaiting a response]

Cassie shared that she is leaving the GP Federation on 6 December 2024 and the Chief Operating Officer Michael Fox will be able to pick up the work until her post is filled.

3. Blue Badge renewals - delays in processing with Tanya Murat Healthwatch Haringey and Paul Zickel, West Green Surgery patient

Tanya explained that there had been problems with Blue Badge renewals for some years. A [Scrutiny Review](#) by the Environment and Community Safety Scrutiny Panel in 2020 looked into it and produced some wide ranging recommendations including

- That provision be put in place for Blue Badge applicants to be able to speak to the Concessionary Travel team directly.
- That Cabinet explore ways in order to make the process of applying, renewing and being assessed for a Blue Badge more streamlined and less disjointed.
- That Cabinet ensures that monitoring of the current 23 day timescale for applications to be processed is undertaken

Paul Zickel's experience is not unique. [Difficult Parent](#) also raised these issues in 2019. Paul Zickel spoke about his problems getting a Blue Badge for the first time in 20 years.

[Post meeting note: Paul later dictated the timeline of his case to Tanya, which is set out in summary below. This timeline was forwarded to Sharon Grant who took the issue up at the Transport Inclusion Group on Monday 21 October 2024]

Paul has a degenerative condition. The expiry date for Paul's existing Blue Badge (BB) was 27 May 2024. There was no reminder. He received his Blue Badge more than four months late; despite applying to renew it on 15 May 2024, he received it on 3 October 2024.

He could not speak directly with the Concessionary Travel Team despite delays and lack of information. He could not directly email the CT Team.

Paul's impairment had worsened as a result of not having a Blue Badge on time.

Paul is concerned that there doesn't seem to be any monitoring or evaluation of the service. This is an endemic problem in Haringey. Paul has a background in working to support disabled people, having set up and Chaired the Civil Service Disability Network and served as a Director of the Spina Bifida Association. He is happy to advise Council officers and help to resolve this. Under the Equality Act 2010 the Council is not entitled to provide an inferior service to disabled people.

Sharon Grant asked Paul to share his records with her and a precis of the case. She suggested this issue goes to the Transport Inclusion Group on Monday 21 October and it could help to see if the Council can come up with some solutions, like a phone number people could use.

Diane Paice stated that she had similar problems, having had a degenerative condition which means she needs a Blue Badge to get around. When she went to Wood Green Customer Service Centre they told her she needed consultants' letters – and this would mean different consultants in different departments. She has her medical record which makes it clear she has restricted mobility, but only a letter from a consultant on headed paper will be acceptable.

Sharon asked Diane Paice to provide a summary of her case so she could raise it at the Transport Inclusion Group.

[Post meeting note: Diane Paice later contacted Healthwatch Haringey and a time was arranged for Tanya to take down her case timeline to pass on to Sharon]

Actions / agreements

Who	What action or agreement	When
Paul Zickel and Diane Paice	Send Sharon Grant details of delays in getting a Blue Badge in their cases	Immediately

Tanya Murat	Liaise with Paul and Diane to take down the timeline and case notes to forward to Sharon Grant	ASAP
Sharon Grant	Submit the cases to the Transport Inclusion Group 21 October	21 October

4. Relocating Hornsey Wood Green GP with Martin Rawnsley, Chair Hornsey Wood Green GP PPG

Tanya shared that Hornsey Wood Green GP was intended to relocate to Wood Green Mall. HWH did some work around patient views on this proposed move and patients overwhelmingly supported it. Unfortunately, this relocation was cancelled due to finance. HWH produced a feedback report and an [article](#) about the cancellation.

Martin Rawnsley said Hornsey Wood Green GP is rapidly expanding and now has greater than 10,300 patients up from about 6,000 patients. The existing premises are too small to function effectively on a medium to long-term basis.

NCL ICB has been engaged by the surgery to make providing new premises and facilities a priority. Early work by the PPG identified that patients would prefer premises nearby with more space and much enhanced medical facilities.

Progress with the relocation is painfully slow. The PPG see this as a matter which needs immediate attention. HWH has recently contacted NCL ICB For an update on the progress towards relocation and received a response from Sarah Macdonell Davis saying that a site search is underway but at present the team don't have a preferred option but are exploring various leads alongside the Practice partners.

Martin stated he would ask at the next PPG meeting if the idea of a petition might be supported by the surgery.

Clare Henderson responded saying she chairs the local estates forum in Haringey so she is aware of this Practice and wants to assure people that there is work underway but, like all the estates there are challenges: it's very difficult to find alternative premises that are big enough that the NHS can afford. At the moment there isn't a site but they are always looking for the funding for a suitable site. The ICB prioritise the money every year, and the money wasn't all coming from the ICB. The funding didn't stack up, remembering also that, Post Covid, building costs have gone up. So local authorities and the NHS of are finding it exceedingly difficult.

Martin Rawnsley thanked Clare Henderson for being honest about the funding. The PPG will just keep campaigning and hope that something will happen soon.

5. Physician Associates - Communications with patients in NCL with David Winskill, The Vale PPG and Clare Henderson NCL ICB

David Winskill started by giving some background stating that people will remember one of the Practices in Haringey was the one where there was a very sad death of a patient who thought she was seeing a doctor but it turned out to be a physician associate. It was an easily diagnosable issue and this sparked off a big debate about physician associates across the country.

The last time the PPG Network met we suggested the ICB could produce a leaflet that could be distributed to all GPs so people knew the facts about physician associates. In June 2024 the ICB came back with a draft for a leaflet to be distributed. David, Barbara and Tanya HWH, suggested quite a few edits, and since then we heard nothing further from the ICB.

At the national level, the debate carries on. The new PA's registration scheme starts in December this year but it's not going to be obligatory until December 2026. There is an emerging debate on "Shouldn't we have a document that actually sets out the scope of competence and the scope of degree of practice that should be agreed all round?"

Clare Henderson responded on the proposed patient leaflet, saying that the ICB had received the comments from David, from Barbara, from Tanya and the ICB shared it with the other four Healthwatch across North Central London to get their feedback. The ICB must make some final changes, and they are going to share the leaflet with Healthwatch next month (November), and it will also be circulated to all the Practices across North Central London.

David replied that there were so many suggestions made for edits and we would like to have another opportunity to cast an eye on the proposed final version. Clare Henderson said there was a new version available and agreed to send it to David, Barbara and Tanya.

Tanya, HWH added that she had published an article on the HWH website which referred to [HW England's actions](#) at a national level, which HWH had contributed to. She also mentioned that the recent news that Emily Chesterton's parents are being backed by the BMA in a legal case against the General Medical Council.

Brenda said the BMA position is that physician associates shouldn't be in general practice dealing with undifferentiated cases.

Actions / agreements

Who	What action or agreement	When
Clare Henderson	Forward the proposed final PA leaflet for patients to Tanya, David, and Barbara	ASAP
David, Barbara, and Tanya	Submit final comments, if any, to the ICB prior to final publication of the leaflet	ASAP

6. Update on getting a medical summary with Steve Durbin, Data Protection Officer for Haringey GP Federation and North Central London Primary Care Networks (PCNs)

Steve Durbin clarified that he is the Data Protection Officer for the GP Federation and the North Central London PCNs, not the ICB, although he did previously work as the DPO for the ICB.

Steve stated that he was asked at the last PPG Network meeting he attended to look at improving the processes on getting a medical summary. He shared that he had now talked to a number of GPs and issued guidance in his regular updates to GPs. It is a subject access request (SAR) in law. But that doesn't mean we have to treat it in a complex manner. We can simply supply it over the counter. No GPs have objected to that.

But he needs to find out what happens when people ask for them. So if people can try asking for a medical summary and see what response they get, and if they don't get the correct response ask for the Practice Manager and point out the advice he issued. Steve said he would share that advice with the PPG Network and HWH and people can have it printed off as well if they wish.

Steve Durbin shared the advice he had issued to GPs in the Chat of the meeting as below.

Healthwatch Haringey have asked us to ensure that patients can get medical summaries with a minimum of fuss.

Recommend that summaries are provided over the counter for patients that provide ID

Healthwatch have raised concerns that getting a patient summary is being made difficult as we're treating it as a Subject Access Request (SAR) - which, of course, it is. Whilst most patients will now use the NHS App for this, we can simplify this process safely, so I'm recommending

practices consider allowing more flexibility at reception for this. The summaries are often used for benefit claims and the like, so making it easier is important. I suggest that if a patient turns up with photo ID matching the details on record, we can provide them with a printed copy of the medical summary there and then. Note that if you're completely confident you know the patient, you can waive the ID requirement. We just record the fact of printing on the record. This meets the legal requirements to record a request and protect the data, whilst providing a simpler route for those not digitally enabled to get a copy for various purposes.

[Post-meeting note: Steve Durbin's advice has now been shared on the [Healthwatch Haringey website](#).]

Ashley Grey, Connector from Reach and Connect responded that it was very helpful to know that GPs are willing to keep the process simple. She added that she had originally brought it to this meeting with the complication that Reach and Connect are an outreach service, often helping people apply for PIP, attendance allowance, taxi cards, Dial-a-Ride, and people they support are often housebound and can't get to the GP to make this request. Some of the GPs require the person to fill in a form.

Steve Durbin responded that they legally cannot do that and he has advised GPs of this, on many occasions. The only requirement is that the person making the request is identified, or that they have clear consent to do the request from the data subject. You must provide the data subject with a copy of the data requested. The data subject can ask someone else to do that on their behalf, be they a solicitor or other representative. The challenge is the GP must know the patient has consented. With that delegation, they can hand it to you.

Ashley asked If Reach and Connect come across a GP Surgery, which appears to be putting up obstacles to someone getting this information who do they report it to? Steve suggested they report to him and he will take it up with the Practice. Please say to the Practice, if they do challenge the request, "I've spoken to the Data Protection Officer who has said this is the process."

Steve stated that we must be clear that the patient has consented. So if the patient has issues that may restrict their ability to give informed consent, there can be a problem. There may have to be a GP involved in that to make the judgment about whether the patient is competent.

Cassie Williams from Haringey GP Federation said everything Steve says is obviously correct, but Practices can be worried that a mistake is going to be made. And so they're trying to follow a format. They do need to know for sure

that that patient actually wants the documentation. If patients have problems you can raise it with Steve Durbin and the Federation can address where there are issues with individual Practices. Steve agreed and said the Practice has got a balancing act here. They must protect patient confidentiality as well. If the Practice is not happy, feel free to refer them to Steve.

Tanya thanked Steve Durbin and said she feels we are making some progress. It's good that Steve is going to make himself available if there are any issues coming up that Reach and Connect aren't able to resolve directly with the GP Surgery.

Actions / agreements

Who	What action or agreement	When
Ashley / Reach and Connect	Refer Practices to the advice from Steve Durbin the DPO if there is any doubt about getting a medical summary for patients.	Immediately
PPG members	Seek a medical summary from your Practice and if you encounter problems, contact Steve Durbin Print off Steve Durbin's advice (above) if needed.	Immediately

6. Announcements /AOB

North Central London PPG Network event

Tanya reminded people that Enfield PPG Network hosted [an in-person event for North Central London PPGs](#) today. There's no formal North Central London PPG network but this event was aimed at exploring that possibility. Tanya had previously notified Haringey PPG members of this event and hoped people had managed to attend. Diane Paice responded that she had registered for it but her back pain meant she was unable to attend. However she emailed Enfield PPG Network asking to be kept up to date. Tanya stated she would report back on any learnings and next steps she receives from Enfield PPG Network.

Wood Green Community Diagnostic Centre (CDC) blood testing

Tina Alexandrou raised that she wanted to say something positive about an experience of the blood testing facility at Wood Green Mall i.e. the [Community Diagnostic Centre \(CDC\)](#). She said she used it several times and it is working really well. Thank you to whoever decided on the location because it is super convenient. Paul Zickel agreed the blood testing at the CDC is fantastic.

Sharon Grant said that she discovered that some of the Practices are reluctant to refer to it. She believes it is being underused, for the purposes of

blood testing, and some of the other things that it does. It's a great service, but we want it to be available to everybody. She had to fight her Practice to refer herself there rather than somewhere else.

Mary Weaving said she is a patient at Staunton Group Practice, which is just up the road from the CDC. She used to go to Evergreen at Edmonton, book on Swiftqueue because the North Mid wasn't working. But you can now book Swiftqueue with the CDC, they didn't have it initially. It is preferable to book, because you literally go in, you press the Monitor, and then they call you within a few minutes.

David Winskill said his experience is they are superb. There's no hanging around. They tend to work well with the appointment system. But a kind of a caveat to anyone that gets sent along. Please, please make sure that your GP has sent the details over to the CDC. It doesn't really matter when you turn up, because that's up to you but the GP must tell the CDC what the blood test is for.

Date of next meeting, Monday 17 February 2025 6:30pm