

Engagement Assurance Committee Cover sheet

Title	Engagement in the development of the patient charter for how GPs and hospitals work together.				
Meeting date	20 May 2026	Agenda item Number	3	Paper Enclosure Ref	C
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Paper is for:	Assurance	X	Decision	Information	
Purpose of paper	To outline the engagement and design that took place in developing the patient charter for how GPs and hospitals work better together and to share a draft Charter.				
Summary of main points	<p>The ICB working with Health Innovation Network and Unboxed have been working together to develop protocols for how general practice and hospitals work better together for the benefit of patients. Part of this work has been to work with local people and staff to develop patient consensus statements. There were 5 steps in the development process:</p> <ol style="list-style-type: none"> 1. User feedback surveys and conversations in clinical settings 2. Patient focus groups 3. Staff focus group 4. Hypothesis testing workshop (patients) 5. Staff and Patient joint workshop <p>User feedback was used to understand the main problems patients experience when they move between services – we generated a series of ‘hypothesis statements’ that summarised these key challenges for patients. The patient and staff focus group refined the hypothesis statements and helped shape them into draft ‘consensus statements’ – setting out what patients should reasonably expect when transitioning between different clinical services. These statements were tested with patients at the hypothesis testing workshop, after which the updated draft statements were finalised in a joint staff and patient workshop. The joint workshop was also used to bring together staff and patient views on shared behaviours at the interface: what do we owe to each other as individuals and how do we promise to try and act to ensure respect, trust, and clear communication.</p> <p>Each stage of the development process and our understanding at that time is summarised in the attached paper. The hypothesis and consensus statements presented in the tables in the paper reflect draft versions as they existed at each point in the process. The final table demonstrates how these themed draft statements were subsequently amalgamated to form the final patient charter which is also attached.</p>				
Potential conflicts of Interest	None				
Sharing and confidentiality	The draft charter is not for sharing until it is finalised and published.				



Relevant to these boroughs	Bexely	X	Bromely	X	Greenwich	X
	Lambeth	X	Lewisham	X	Southwark	X
Equalities Impact	As part of the development process we tested how lower literacy, digital literacy, language barriers or sensory and processing impairments impact communications and the patient charter aims to address these issues.					
Financial Impact	None					
Public Patient Engagement:	<p>We engaged local people in a number of ways:</p> <ul style="list-style-type: none"> • An on-line chat forum (August – September 2025) • One to one conversations with 28 patients and 7 staff across two GP surgeries and two hospital waiting rooms (Autumn 2025) • Two workshops with patients and people working in the NHS (Jan & March 2026) <p>Key themes from the one to one conversations include:</p> <ul style="list-style-type: none"> • Lack of clear points of contact • Prescribing challenges • Limited awareness around communication between GPs and hospital clinicians • Preference for clear, consistent and timely communications • Literacy challenges • Communication burden • Increased complexity in system navigation for people with multiple conditions. <p>Key themes from the January workshop include:</p> <ul style="list-style-type: none"> • Holistic, person-centred care is lacking but deeply valued. • Communication (clarity, consistency, timeliness, two-way) is the single biggest factor affecting experience. • Carers need recognition and structured inclusion. • Digital exclusion and literacy barriers exacerbate inequality. • Simple improvements (contact points, explanation with results, recording communication needs) could reduce anxiety significantly. <p>The March workshop was to:</p> <ul style="list-style-type: none"> • Refine the draft statements together • Agree on shared expectations <p>You can read more on the let's talk project page.</p>					
Outline timelines of engagement						
Outline key engagement mechanisms used						
Outline engagement with diverse communities and / or people with lived experience						
Outline key themes from insight gained						
Outline how findings have influenced decision making						
Outline how feedback to participants has taken place						



	The first attachment outlines the development process to reach consensus and agree the final statements in the patient charter.
Committee engagement	The SEL System Interface Group which meets bi-monthly (most recent meeting 13 May 2026)
Recommendation	The committee is asked to assure the engagement process that has taken place and to comment on the Charter, particularly whether the title of the Charter and the word 'interface' makes sense to local people.

