



SEL Insights

April – June 2026

healthwatch
Lambeth

Introduction

The insights in these slides are drawn from reports published in the preceding quarter and made publicly available on the websites of the local Healthwatch in South East London. These are [Healthwatch Bexley](#), [Healthwatch Bromley](#), [Healthwatch Greenwich](#), [Healthwatch Lambeth](#), [Healthwatch Lewisham](#) and [Healthwatch Southwark](#).

Insight from a local Healthwatch is not included in the quarterly insight if no reports are published on their website.

Before reports are published, findings and recommendations are shared with service providers and commissioners. Providers then share with their local Healthwatch any actions they plan to take or have already put in place.

Local Healthwatch share their reports at Place with a range of groups, committees and boards. All SEL Healthwatch have seats on their local Care Partnership Boards.

The Quarterly Insight reports are produced by Healthwatch Lambeth on behalf of the six local SEL Healthwatch, with funding from SEL ICB. This is a residual arrangement as the ICB and South East London Healthwatch partnership is no longer in place, so the reports do not contain such detailed insight or outcomes as the reports produced during the partnership arrangement. The reports are presented to a limited number of SEL boards and committees and meetings by a SEL Healthwatch lead on behalf of the local South East London Healthwatch.

Who we heard from

- Older people (over 65)
- Global Majority communities, including:
 - Black British, Black African, and Black Caribbean,
 - Latin American,
 - South Asian (Indian, Bengali) and East Asian (Chinese, Vietnamese, Nepali),
 - Gypsy, Roma, Romani, and Traveler communities.
- Refugees and people seeking asylum
- People with disabilities and long-term conditions
- People needing mental health support
- People using drug and alcohol services
- Women using maternity services
- Carers
- Staff and volunteers from VCS groups

What we are hearing about services

- **GP services:** Staff and clinical care were often viewed positively, but access was a recurring issue across Bromley, Greenwich, Lambeth and Lewisham, including appointment availability, telephone access and digital barriers. Lambeth residents also highlighted issues with continuity, feeling listened to, and GP deregistration.
- **Hospital services:** Treatment and staff attitudes were generally positive, particularly in Bromley and Lewisham, but waiting times and communication were common concerns. Specific feedback included praise for Queen Elizabeth Hospital's Imaging Department, a reported 19-hour wait at its A&E, and communication concerns involving King's College Hospital (KCH), Guy's and St Thomas (GSTT), and Princess Royal University Hospital (PRUH).
- **Mental health services:** Concerns centred on access, treatment choice and receiving appropriate support. Lambeth residents described difficulties accessing psychological therapies, while Bromley highlighted additional barriers for people with co-occurring mental-health and substance-use needs.
- **Drug and alcohol services:** Feedback about Change Grow Live (CGL) in Bromley was largely positive, particularly for personalised and peer support, with 96% reporting easy access. Greater challenges were identified for people with homelessness, disability and co-occurring mental-health needs.

What we are hearing about services

- **Maternity services:** Experiences at PRUH/KCH were largely positive, with high ratings for care and staff. Communication between maternity services and GPs, staffing and waiting were the main areas for improvement.
- **Social and residential care:** Residents at Angelina Care Home and Regency Court in Bromley generally valued staff, safety, and independence. Improvement areas mainly concerned the environment and, at Regency Court, access to external health services.
- **Community and preventative services:** Southwark residents showed strong interest in community-based health support, despite low awareness of existing TRA activities. Health Inclusion teams supporting people in asylum accommodation were valued, although continuity weakened after people moved.
- **Safeguarding:** Greenwich found that mistrust, confidentiality concerns and fear of consequences could prevent some marginalised communities from seeking safeguarding support, highlighting the importance of community organisations.
- **Carer support:** Following HW Greenwich's 2024 report on carers' experiences, many improvements have taken place, including a co-produced carers' guide, improved multilingual information, greater community engagement, a Carers Partnership Board, and a new all-age carers strategy in development.

Theme: Access to services and waiting

Across several boroughs, people experienced difficulties getting the right care at the right time, including long waits, problems securing appointments, digital and telephone barriers, and challenges navigating between services.

- **Bromley:** GP access was a key concern, with 69% of appointment-availability feedback negative. By contrast, 96% of drug and alcohol service users surveyed found access to support services easy.
- **Greenwich:** Digital GP systems improve efficiency for some but created barriers for others with limited internet access, skills, or confidence. People also described long waits for hospital referrals, as well as long waits on the day (e.g. 19 hours at A&E). Positive feedback showed the value of timely appointments and direct signposting.
- **Lambeth:** Residents reported difficulties booking GP appointments, finding a new GP after deregistration and accessing appropriate mental-health support.
- **Lewisham:** Feedback about telephone access was mostly negative for both GPs (57%) and Hospitals (62%). Appointment availability at the GP and waiting times on arrival at the GP and in hospital were also major concerns, with majority negative feedback.
- **Southwark:** Refugees described gaps in primary care support after leaving asylum accommodation, while many residents were unaware of local TRA health and wellbeing opportunities.

Theme: Communication and coordination

Clear communication and joined-up care were important to people's experiences. Problems arose when patients were not kept informed, did not feel listened to, or had to repeat information and coordinate between services themselves.

- **Bromley:** Only 45% of maternity respondents rated communication between hospital services and GPs positively. People using drug and alcohol services also expressed mixed views on coordination between services, while the wider patient-experience report also contained concerns about GP-hospital communication.
- **Greenwich:** Residents described poor communication about delays and difficulties understanding or navigating services. Older women from the Indian Cultural Society also raised concerns about interpreting and receiving clear information. Residents appreciated clear communication and being listened to.
- **Lambeth:** Some residents felt their concerns were not listened to and described repeating information because of poor continuity.
- **Lewisham:** 53% of hospital feedback about communication between services was negative, with some patients passing information between providers themselves.
- **Southwark:** Communication between services featured prominently in Q4 feedback, while the asylum report highlighted the need for better coordination between health, housing and voluntary services.

Theme: Staff attitudes and respectful care

Positive relationships with staff were a consistent strength across the reports. People particularly valued kindness, respect, reassurance, personalised support and staff who took time to listen.

- **Bromley:** Staff were consistently rated highly across maternity care (96% positive) and hospital services (84% positive). People using drug and alcohol services valued consistent personalised support and trusting relationships with staff.
- **Greenwich:** Residents valued staff who listened, showed empathy, and offered support and reassurance. Frontline staff received positive feedback, including strong praise for Queen Elizabeth Hospital's Imaging Department.
- **Lambeth:** Residents praised supportive staff in GP, A&E, oncology and physiotherapy services.
- **Lewisham:** Hospital care was generally positive, with 83% of treatment feedback and 77% of staff-attitude feedback positive.
- **Southwark:** Refugees and people seeking asylum generally valued the support provided by Health Inclusion teams and Voluntary and Community organisations.

Theme: Trust and access inequalities

Experiences were not equal across communities. Disability, language, digital exclusion, housing insecurity, immigration status and previous experiences of discrimination could create additional barriers and reduce trust in health, care and wider statutory services.

- **Bromley:** Homeless people, disabled people and those with co-occurring mental-health and substance-use needs were identified as facing greater barriers to drug and alcohol support.
- **Greenwich:** Disabled residents, older Indian women and people with insecure immigration status described digital, communication and trust barriers when accessing support. The safeguarding project found that mistrust and perceived consequences could deter disclosure for marginalised communities. Patients and carers valued services that were inclusive, culturally sensitive, and recognised their accessibility needs.
- **Lambeth:** People with disabilities, long-term conditions and mental-health needs reported difficulties being heard and accessing appropriate support.
- **Lewisham:** Disabled people and those with long-term conditions reported comparatively positive hospital experiences, with 81% and 78% positive ratings respectively.
- **Southwark:** Gypsy, Roma, Romani and Traveller communities reported low trust in statutory services, while refugees faced language, interpreting and housing-related barriers.

Other issues

Housing instability as a health issue — Southwark and Bromley.

- Refugees and people seeking asylum in Southwark's report described overcrowding, pests, unsuitable rooms and fear of homelessness, which affected their mental and physical health. Bromley's drug and alcohol report also identified housing stability as important for recovery.

Fear of reporting abuse or poor care — Greenwich and Southwark.

- Greenwich safeguarding project participants described concerns about consequences and information-sharing; older Indian women described fear that complaining could affect future care. In Southwark, Community Ambassadors reported that some Gypsy, Roma, Romani and Traveller residents did not feel safe reporting hate crime or discrimination.

People's own voices

- ***"As a first-time mum I was really nervous, but they have made me feel at ease during every step of my pregnancy to labour."*** — King's College Hospital maternity services, Bromley.
- ***"I am able to live independently, treated well by staff who I consider friends."*** — Regency Court, Bromley.
- ***"They put my mind at ease and made me feel I was in safe hands."*** — Greenwich.
- ***"A&E was very good – in and out in two hours."*** — A&E, Lambeth.
- ***"It is very fast to get an appointment for my child"*** — GP services, Lewisham.
- ***"I felt comforted by the NHS, I felt very safe."*** — Asylum accommodation health support, Southwark.

People's own voices

- ***“It felt like I’d slipped through the cracks. If it wasn’t for me knowing my rights – I’d still be waiting for a date for my operation.”*** – Guy’s Hospital, Greenwich.
- ***“People think everything is connected—doctor, council, Home Office. So even if it’s not true, you don’t feel safe saying anything.”*** – Community safeguarding discussion, Greenwich.
- ***“I’m always seen by someone I’m not familiar with and I have to explain my problems again and again.”*** – GP services, Lambeth.
- ***“It is difficult for older people to use the online and automated phone systems. They just want to talk to someone.”*** – GP services, Lewisham.

Reports referenced

Bromley

- **Maternity Services Report**
 - Reporting period: September to December 2025.
 - Published: 11 May 2026.
- **Views and Experiences of People Accessing Drugs and Alcohol Services**
 - Reporting period: Autumn–Winter 2025.
 - Published: 26 May 2026.
- **Q3 & Q4 Patient Experience Report**
 - Reporting period: October 2025–March 2026.
 - Published: 27 May 2026.
- **Enter & View Report: Angelina Care Home**
 - Visit undertaken: 3 March 2026.
 - Published: 16 June 2026.
- **Enter & View Report: Regency Court**
 - Visit undertaken: 30 March 2026.
 - Published: 16 June 2026.

Greenwich

- **Monthly Feedback Report (Feb – March 2026)**
 - Reporting period: February and March 2026.
 - Published: 22 April 2026.
- **What Greenwich Residents Value in Local Care**
 - Reporting period: March and April 2026.
 - Published: 27 May 2026.
- **From Insight to Action: Stronger Support for Carers**
 - Report published in May 2024.
 - Updated response from the Royal Borough of Greenwich published in May 2026.
- **Raising Awareness of Abuse in Marginalised Communities**
 - Reporting period: Six months up to March 2026.
 - Published: 10 June 2026.

Lambeth

- **What you told us: Jan to March 2026**
 - Reporting period: January to March 2026.
 - Published: 11 June 2026.

Lewisham

- **Q3 Q4 Patient Experience Report 25–26**
 - Reporting period: October 2025 to March 2026.
 - Published: 30 June 2026.

Southwark

- **Quarterly Monitoring Report – Q4 2025–26**
 - Reporting period: January to March 2026.
 - Published: 23 April 2026.
- **Bringing Health Closer to You: Community Health and Wellbeing Engagement Report**
 - Published: 28 April 2026.
- **Housing, Health, and Hope: Experience of living in and moving on from asylum accommodation**
 - Reporting period: October to December 2025.
 - Published: 28 May 2026.

Annual Reports

- [HW Bexley Annual Report](#)
- [HW Bromley Annual Report](#)
- [HW Greenwich Annual Report](#)
- [HW Lambeth Annual Report](#)
- [HW Lewisham Annual Report](#)
- [HW Southwark Annual Report](#)

For more information

Healthwatch Lambeth
Health Foundry, Canterbury House,
1 Royal Street, SE1 7LL

healthwatchlambeth.org.uk
tel.: 020 7274 8522

 x.com/HWLambeth

 facebook.com/HWLambeth
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