

Public and Patient Involvement Assurance Group (PPIAG)

Report from the extraordinary meeting of: Wednesday 11 June 2025

Attendance: Brigitte Heller, Mary Smith, Mathew Hulbert, Rasheed Cader

Integrated Care Board (ICB) representation: Jo Ryder, Melanie McClennon, Sian Deacon

Apologies: Nishita Ganatra, Vaughan McLeod

Quoracy: The meeting was quorate.

Declaration of interest: None

First item

Topic presented	Same Day Access Appointments for Leicester and Leicestershire
Presented by	Jo Ryder, Senior Engagement and Insights Lead
Purpose of presenting	<ul style="list-style-type: none"> To discuss the draft communications and engagement plans for the upcoming engagement about Same Day Access appointment provision across Leicester and Leicestershire To explore whether the PPIAG can provide assurance that the draft plans appropriately and sufficiently consider and involve LLR public and patients.
Key information presented to the Group	<ul style="list-style-type: none"> Jo began by introducing same-day access appointments. These are appointments that take place during evenings, weekends and bank holidays, usually at a different location to your own practice, for when you need an appointment on the same day. Same day access appointments are currently delivered under different names and providers in the city (healthcare hubs) and county (urgent care centres), leading to patient confusion. There are plans to deliver the appointments at a Primary Care Network (PCN) level, with a consistent approach across Leicester and Leicestershire, increasing the number of sites and improving accessibility for local appointments. The new model aims to reduce unnecessary A&E visits and ensure patients are directed to the right service the first time.

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	<ul style="list-style-type: none"> • The draft engagement plan will span for 12 weeks, and includes a questionnaire, face-to-face outreach (including supermarket stalls), collaboration with voluntary and community sector organisations, and multi-channel promotion (radio, print, digital, text messaging). • The plans include particular emphasis on reaching vulnerable and underrepresented communities across Leicester and Leicestershire, non-English speakers, and communities within a mile of A&E. The engagement team will work closely with the voluntary sector to help reach seldom heard communities. • Throughout the engagement, continuous monitoring and independent evaluation will occur, which will include a midway review where the engagement team will take stock and explore any gaps in questionnaire responses by particular communities or demographics. Following this, the plan can be tailored to ensure that the group can further extend their reach to reach the communities lacking in responses. • Findings from the engagement will be independently analysed and a report of findings will be produced.
<p>Feedback, comments and questions about the presentation and analysis as identified from the Group</p>	<p>The group expressed that the engagement plan was comprehensive and appropriate, and emphasised the importance of the review phase to ensure effective engagement.</p> <ul style="list-style-type: none"> • Reaching Vulnerable Communities: The group queried further how the team plans to reach vulnerable groups, noting the difficulties and barriers in hearing from seldom heard groups. Jo responded that voluntary sector partners and GP practices will be key to reaching these populations, as they deeply understand their communities and as such can improve the team's reach. • Scope for Patient Influence: The group queried the true impact that local patients can have on the process, especially regarding co-design. Jo explained that feedback at the PCN level can lead to local adaptations, and there is scope for change based on community needs. • Promotional Materials: The group wanted to know more about the distribution of promotional materials, and suggested that distribution should be in patient facing community venues such as libraries, pharmacies and community centres. Jo confirmed materials would be distributed to local healthcare and local authority venues, and promotion in local newsletters and other communications will be considered, depending on budget limitations.

	<ul style="list-style-type: none"> • Language Barriers: The group raised concerns about reaching non-English speakers, particularly in Leicester city. Jo acknowledged this challenge and responded that the strategy is to collaborate with voluntary sector organisations that already have trusted relationships in these communities, using workshops and word-of-mouth rather than relying on translated written materials, which have not been as effective previously. The engagement plan includes asking voluntary sector partners to communicate information in their own languages and styles, ensuring messages are understood and accessible. • Clarification: The group queried if the changes affect GP contracts or just same day access services. Jo confirmed only healthcare hubs and urgent care centres will be affected. Jo emphasised the roles of NHS 111 and GP practices in triaging and booking same-day access appointments.
<p>Was the Group assured of the approach to the consultation?</p>	<p>The PPIAG were assured that the approach towards the draft communications and engagement plans regarding the Same Day Access for Leicester and Leicestershire engagement appropriately and sufficiently involves the public and patients of LLR.</p>
<p>Standing agenda items</p>	
<p>Report from the previous meeting</p>	<p>N/A</p>
<p>Feedback from the Quality and Safety Committee Meeting</p>	<p>N/A</p>
<p>Horizon scanning</p>	<p>None, as this was an extraordinary meeting.</p>
<p>Other business</p>	<p>The next meeting is scheduled for 25 June 2025 and will be online.</p>