Leven and Beeford Medical Practice

Patient Participation Group Terms of Reference

1. Introduction

General Practices have a responsibility to involve patients in relevant issues relating to the practice and to respond appropriately to patients' views and experiences.

The key roles of the group are to bring together patients, doctors and practice staff to:

 promote the wellbeing of patients and support the practice to provide a high quality of care and service delivery

2. Role and Remit

The PPG will enable the practice to communicate and build positive relationships with its patient population. The core objectives of the PPG will be to:

- Facilitate and enable dialogue between patients and the practice team and promote patient involvement in the practice
- Facilitate debate among local residents and workers concerning health needs, health priorities and current service
- Collect feedback from the community about current health service provision and suggestions concerning gaps and how services could be improved
- Ensure the needs and interests of all patient groups are taken into consideration - including people with specific illnesses or conditions, people with a disability and people from minority ethnic groups
- Ensure patients' needs are considered in the development of the practice systems e.g. appointment systems and telephone systems, providing information about and promoting understanding of such system amongst patients
- Support the Practice to achieve its health promotion aims
- Review and where appropriate provide advice and recommendations on the Practice's patient survey

What it isn't

- A forum for complaints PPG members will not use the group as a vehicle to resolve their personal issues. This should be done using the practice complaints procedure.
- An opportunity for satisfied patients to meet with their favourite doctor the purpose is to find out what issues, problems or concerns the patients have and ways to resolve them.

• 3. Membership

The membership of the PPG will include:

- patient representatives
- GP Partner representative
- representatives from the practice team: the Business Manager and a member of the admin team

Patient membership will be open to anyone registered with the practice.

Patient members do not need to represent other interest groups but efforts will be made to ensure a spread of membership in terms of age and gender.

4. Meetings

Meetings will be held at least 4 times a year and notice of meetings will be given at least 28 days beforehand.

Dates of meetings will be publicised in the practice waiting areas where a copy of the Group's minutes will be displayed for patients to read. We will also keep our website updated with this information.

5. Management of Meetings

The group will initially be chaired by a practice representative although this can be delegated to a patient representative as the Group becomes established. For example, a practice representative, patient representative, chair and vice-chair will be appointed annually by the Group.

Meetings will be held on an alternating basis in the Practice premises.

A representative from the practice team will attend meetings to take minutes and organise agendas and papers

All members of the group will be contacted in advance and invited to raise items to be placed on the agenda

All patient representatives should contact the Business Manager with any questions or issues

All members will be expected to respect rules of confidentiality and not discuss personal or sensitive information outside a meeting

6. Quorum and Decision-Making

At Group meetings a quorum will consist of xx members. The PPG will aim wherever possible to reach decision by consensus. Where this is not possible the view held by the majority of those present will be the view that is agreed and taken forward by the group.

I confirm I would like to join the Friends of Leven & Beeford Medical Practice

Title:	
OMr OMrs OMiss OMs ODr OOther	
Forename *	
•	
Surname *	
Date of Birth *	
dd/mm/yyyy Format: dd/mm/yyyy	
Tomac daminayyyy	
Address *	
Postcode *	
E-mail address *	
Mobile Phone Number	
Phone Number *	
Are you ? *	
Are you ?*	
○ Male	
○ Male	
C Male C Female	
C Male C Female How old are you ?*	
C Male C Female How old are you?* C Under 16	
C Male C Female How old are you?* C Under 16 C 17-24	
C Male C Female How old are you?* C Under 16 C 17-24 C 25-34	
○ Male ○ Female How old are you ?* ○ Under 16 ○ 17-24 ○ 25-34 ○ 35-44	
○ Male ○ Female How old are you ?* ○ Under 16 ○ 17-24 ○ 25-34 ○ 35-44 ○ 45-54	
 C Male C Female How old are you ?* C Under 16 C 17-24 C 25-34 C 35-44 C 45-54 C 55-64 	
 C Male C Female How old are you ?* C Under 16 C 17-24 C 25-34 C 35-44 C 45-54 C 55-64 C 65-74 	
 C Male C Female How old are you ?* C Under 16 C 17-24 C 25-34 C 35-44 C 45-54 C 55-64 	
 Male Female How old are you ?* Under 16 17-24 25-34 35-44 45-54 55-64 65-74 	

How would you describe how often you come to the practice?	
C Regularly	
C Occasionally	
C Very Rarely	
Are you a carer of one of our patients? .	
C Yes	
○ No	
Do you have any long-standing illness, disability or infirmity? By long-standing we me anything that has troubled you over a period of time or that is likely to affect you over period of time *	
C Yes	
○ No	
Which ethnic group do you belong to? *	
C White	
C Black or Black British	
C Asian or Asian British	
C Mixed	
C Chinese	
Other Ethnic Group	
Is your accommodation? *	
Owner-occupied/mortgaged	
C Rented or other arrangements	
Which of the following best describes you?*	
Employed (full or part time, inc. self employed)	
Unemployed and looking for work	
At school or in full time education	
Unable to work due to long term illness	
C Looking after your home/family	
C Retired	
C Other	
What is your marital status?*	
○ Single	
Single parent family	
O Married	
Married with children	
C Unmarried family	
C Widower	
Signature:	
Date:	