

Havelock Grange Practice



Patient Participation Group Handbook

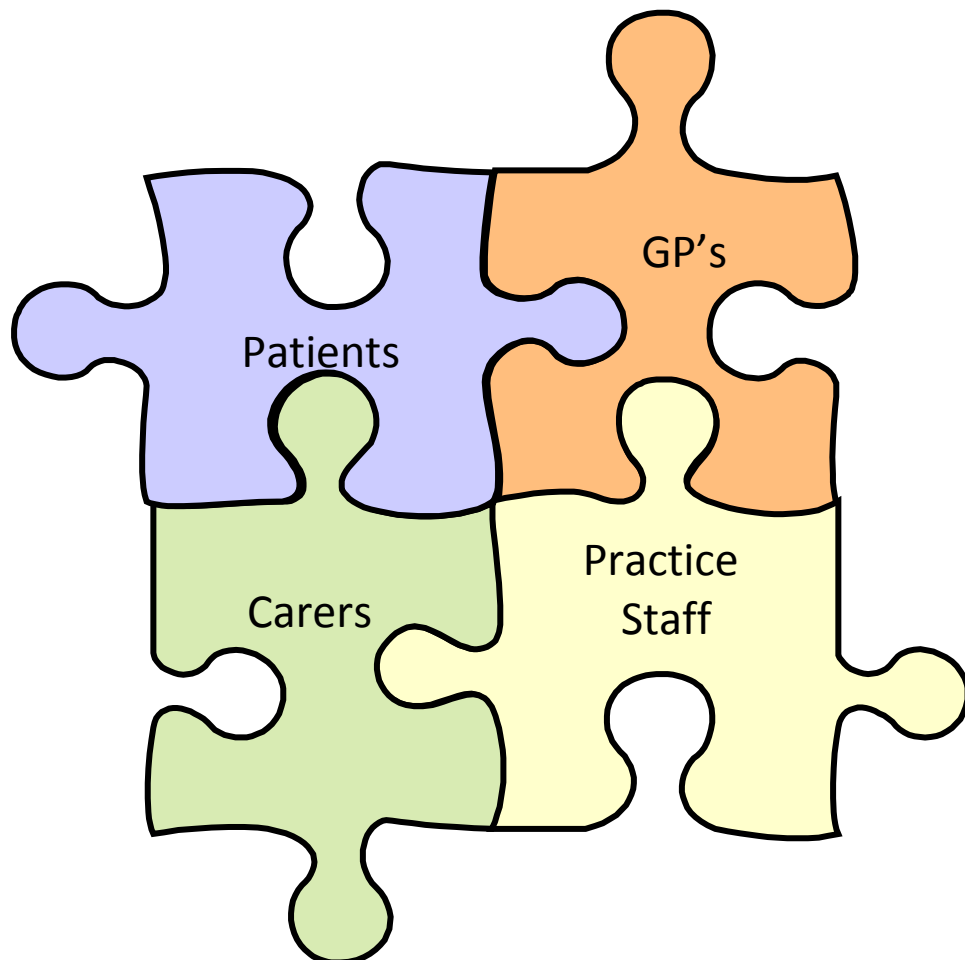


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1. *Introduction*

Welcome to Havelock Grange Practice Patient Participation Group (PPG). This Induction Handbook has been designed to help you gain the necessary background information to the group and to provide you with the relevant details to help you settle in.

2. *Background*

From April 2016 it has been a contractual requirement for all English practices to form a PPG and to make reasonable efforts for this to be representative of the Practice population. However, the first PPG was started in 1972 by GPs. PPGs can bring significant benefits to the Practice, reducing costs, improving services, allowing resources to be used more efficiently and, most importantly, developing mutually supportive networks outside the GP or nurse appointments. Groups should help the Practice by enabling GP teams to be proactive in providing services that truly reflect what patients want and need.

The group consists of active volunteer patients that work in partnership with Practice staff and GPs – this unique partnership between patients and their practice is important when achieving high quality and responsive care.

3. *Benefits of a PPG*

The building blocks of a good PPG are:

- Inclusive and representative membership
- Clear mutual understanding of purpose and role
- Effective and sustainable operation
- Strong, supportive relationships and culture within the practice

Effective engagement with patients improves quality of care and patient satisfaction, encourages patients as proactive

partners rather than passive recipients of care, improves health outcomes, informs effective targeting of resources, saving time and money and is rewarding for professionals and improves relationships.

4. *Terms of Reference*

To ensure a clear understanding of the role and purpose of the group a mutually agreed Terms of Reference has been produced which sets out what the group will do and ground rules for how meetings will be run. Together these agreements will provide a framework within which the group can operate, ensuring effective management of expectations and objectives. (Appendix 1)

5. *Code of Conduct*

The Group's Code of Conduct has been produced as a sign of good practice and provides a clear set of standards. (Appendix 2)

6. *Additional Information*

Additional information can be found on the Practice website at www.havelockgrangepractice.co.uk and the National Association of Patient Participation (N.A.P.P.) at www.napp.org.uk

Appendix 1

Terms of Reference

Aims

The key role of a Patient Participation group is to bring together patients, GP and Practice staff to promote the wellbeing of patients and support the Practice to provide a high quality of care and service delivery.

It is intended to achieve this by:

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
- Ensure the needs and interests of all patient groups are taken into consideration
- Ensure patients' needs are considered in the development of the Practice systems, providing information about them and promoting understanding amongst patients
- Support the Practice to achieve its health promotion aims
- Review and where appropriate provide advice and recommendations on the Practice's annual patient survey

Membership

Patient membership will be open to anyone registered with the Practice who is interested in helping the group to achieve its aims and who is willing to abide by the rules of the group.

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, gender, disability, race, etc.

Membership of the group will include representatives from the Practice team (minimum of one GP and one Practice Manager).

The membership of any member may be terminated for good reason by the group. This may include non-attendance at three or more consecutive meetings.

Meetings

Meetings will be held at least four times a year or on a more frequent basis on agreement of the group in the Practice Meeting Room and to suit the convenience of the majority of members.

The official elected roles of the group are Chair, deputy Chair. Secretarial support will be provided by the Practice Managers.

Elected officers will serve for a period of one year but may be nominated for a further year.

An Annual General Meeting AGM will coincide with the last meeting of the year at which elections for the official roles will be held.

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. This information will also be published on the surgery website.

Management of Meetings

- The group will be chaired by a patient representative known as the Chair
- The Chair, Deputy Chair will be appointed annually by the group
- If an elected officer, for whatever reason, resigns during the year, then the group can elect an interim person for that position, to act until the next election date
- The secretary support will consult with the Chair/Deputy Chair to organise agendas and paperwork. Agendas will be distributed at least a week prior to the meeting. The secretarial

support will attend meetings to take the minutes and will distribute them to the group after approval by the Chair/Deputy Chair

- All members will be invited to raise items for the agenda by contacting the Chair/Deputy Chair or a Practice Manager (secretarial support) prior to the meeting
- All members will be expected to respect rules of confidentiality and not discuss personal or sensitive information outside a meeting
- Issues of an individual nature will not fall within the remit of the group, such as complaints, concerns or individual queries. These will need to be addressed by a Practice Manager or a member of the Practice Team

Quorum and Decision-Making

At meetings a quorum will consist of at least six members; one of which has to be one of the elected members and one GP and Practice Manager from the Practice Team.

Decisions will be taken to a vote.

Appendix 2

Code of Conduct

This Code of Conduct has been developed in order to lay down clear standards of behaviour which reflect our underlying belief in open, honest and constructive engagement in our relationships with each other. The code of conduct applies to all volunteers and paid employees and reflects the Nolan Committees Seven Principles of Public Life; <https://www.gov.uk/government/publications/the-7-principles-of-public-life/the-7-principles-of-public-life--2>

Key Principles

Everyone associated with the Patient Participation Group should always treat people with courtesy and respect at all times. We firmly believe that everyone has the right to be treated with dignity.

Behaviour of a racist, sexist or homophobic nature or behaviour which discriminates against or demeans others because of their age, disability, culture or religious beliefs is unacceptable and will not be tolerated by the Group.

In all circumstances volunteers and support staff should go about their business on behalf of the Group, in a fair and accountable manner.

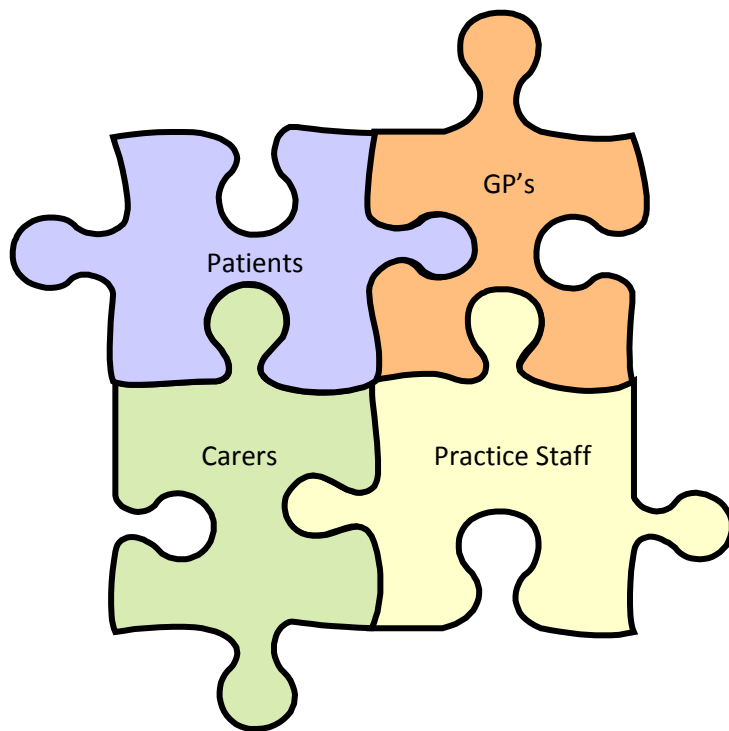
All Group business should be conducted honestly and with the best interests of the Group at its heart. Members should be mindful of situations in which personal conflict of interest may arise and follow procedure in line with the Conflict of Interest Policy.

All occasions in which individuals are contacting the media, or formally representing the Group in a public arena should be conducted in line with the guidance contained within the Constitution.

All volunteers and support staff should endeavour to attend all meetings they have committed themselves to, giving apologies ahead of time if they are unable to attend. Meetings will be conducted in a participative and inclusive manner and respect should be shown to the opinions of others. Mobile phones must be switched off or placed on silent at the start of the meetings.

At all times strict confidentiality should be observed around personal information in line with the requirements of the Data Protection Act (1998).

Where volunteers are service users, they must not use any position they hold within the Group to gain any advantage or preferential treatment.



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Prepared by: PPG