

Terms of Reference (TOR)

Overall Terms of Reference:

1. Be a forum for the exchange of information on health and related issues including practice performance, promote health education and where appropriate influence local health care issues, and advise on patient education/awareness.
2. Assist the practice to
 - a) conduct patient surveys, including the Friends and Family Test
 - b) give patients a voice in the organisation and provision of their health care
 - c) provide a means for patients to make suggestions about the practice
 - d) review patient feedback and make suggestions on how to respond appropriately
3. Be a 'critical friend' to the practice by providing feedback on patients' needs, concerns and interests and challenging the practice constructively whenever necessary, e.g. commenting on survey results and patient complaints.

Supporting the Practice

1. Support the practice in helping patients to become better informed about their health care options, how to access care, and from whom, by inputting questions where appropriate to the Friends and Family Test or supplementary questionnaires.
2. Promote good health and higher levels of health literacy amongst patients by supporting activities within the practice, promoting self-care and providing information about maintaining health and wellbeing.
3. Support the practice and patients to adopt a shared decision making culture so patients get the most from their visits to the surgery and wider NHS.
4. Contribute to practice decision making and consult on proposed changes to practice service development and provision.

Communications

1. Help in the provision of clear and effective practice /patient communications in easily understood language. The practice to provide access to enable this via:
 - Web-site
 - M-jog (text messaging service)
 - Waiting room electronic screens
 - Roller banner screen
 - Newsletter
 - Letter box
2. Provide links for patients with specific needs to form or join existing local support groups and provide support for patients to get information to maximise effective use of practice services.
3. Provide feedback to the practice on patients' experiences, concerns and unmet needs relating to services received from local healthcare providers and other health and social care bodies.
4. Seeking feedback from the practice on current issues and trends relating to how patients are using services including inappropriately and how the PPG can support the practice to address these.

Liaison across the healthcare community

1. Influence the provision of local community and secondary health and social care and act as patient representatives as appropriate, e.g. through representation on Rushcliffe CCG Active and other groups including those across South Nottinghamshire.

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Comms update

Reminder: Rushcliffe PCN's patient facing website has been developed to act as a hub for all local health and care information [HOME | RushcliffeHealth](#) including a comprehensive directory of local services, many are free of charge. This is maintained by the Social Prescribing team.

Facebook

MMP page has had 500 views in last fortnight. It has 78 followers. Dementia action week and Carers posts both got around 300 views each. LH is a great resource for FB topics as social prescribing team are very active posters. LD keen that the practice post directly onto FB so any point in time broadcasts can be made directly rather than messaging LD who then uploads as currently – will avoid delays, and is part of the comms channels strategy.

ACTION ES to discuss handover with LD

Comms Sub-Group

LH, PM and LD met last week re: next newsletter. Topics:

- prescription ordering comms campaign
- staffing changes/focus on new people including ES and new receptionists
- keen to get ES input into any other key topics to cover – ACTION LD and ES to discuss
- Timing – mid Summer once ES in post – ACTION LD by end August

LH: Self care – the Social Prescribers notice board in the practice has information AND we need the Practice website to signpost people to the new PCN website which has lots of resources there. Her colleague Nick Marlow cover Castle practice. Together, with the 2 PPGs, LH and NM would like to discuss optimising patient education for self care. Can we use the space at the rear of the practice to develop a patient resource centre? Radcliffe have one, works well. PPG get involved too. Sherie Belfitt, PPG chair at Castle, is very much in favour of developing a joint resource. SB joined us at the Comms subgroup.

ACTION: ES to meet with Castle Business manager to discuss possibility of developing an Embankment Patient resource centre to support patient selfcare/health engagement

Foodbanks – the Spring newsletter highlighted the location of food banks, and this is also available on the Social Prescribers noticeboard, and PCN website, so we need a link for the Practice website too.

ACTION: ES put information about Self Care and Food Banks on Musters website and links to the PCN website resources.

NHS App – helping the digitally excluded to access it

The NHS App/digital support drop-in session on 16th March was massively oversubscribed. Feedback from attendees was really positive. There is a big demand for such a service, so a similar Musters-focused sessions, via a booked appointment plot, is now offered.

ACTION: ES to liaise with Kai Pitman/jacqueline.kendrick@nhs.net to arrange for Musters session

PCN update

2. Liaise with other local PPGs (e.g. CASTLE PPG and other Rushcliffe CCG Active PPGs), Nottinghamshire Healthwatch, RCVS etc. to share best practice and good ideas from elsewhere (e.g. from NAPP) which might enhance the wellbeing of our patients and or staff.

Meetings

1. See previous section (purpose, membership, meetings and minutes)
2. Provide patient representation at the Quarterly Practice Development Meetings (QPDM). The practice to give one month's notice of dates.
3. Hold an annual general meeting and to publish an annual report showing the work of the PPG and how it has provided a link between the practice staff and the wider patient population.
4. Review and revise the TOR annually or as required.

**Patient Participation Group
October 2017**