**A Guide To Patient Participation Groups (PPGs)**

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12. **Introduction**

Since April 2015 it has been a contractual requirement of NHS England for all GP Practices to have a Patient Participation Group (PPG) and to make reasonable efforts for this to be representative of the practice population. The Practice must engage with the PPG throughout each year, at a frequency and in a manner as agreed with its PPG, including to review patient feedback (whether from the PPG or other sources) and feedback from carers of registered patients, who themselves are not registered patients. The purpose of this engagement is to identify improvements that may be made in the delivery of services by the Practice. Where the Practice and PPG agree, the Practice must act on suggestions for improvement using reasonable endeavours to implement these.

1. **What is a Patient Participation Group (PPG)**

A Patient Participation Group (PPG) is a group of patients, carers and GP practice staff who meet to discuss practice issues and patient experience to help improve the service.

1. **Purpose of a PPG**

The purpose of the Patient Participation Group (PPG) is to ensure that patients and carers are involved in decisions about the range, shape and quality of services provided by their Practice. The requirement aims to promote the proactive and innovative involvement of patients and carers through the use of effective PPGs and to act on a range of sources of patient and carer feedback in order to improve the services delivered by the Practice.

The role of the PPG includes:

* being a critical friend to the Practice
* advising the Practice on the patient perspective and providing insight into the responsiveness and quality of services
* encouraging patients to take greater responsibility for their own and their family’s health
* carrying out research into the views of those who use the Practice
* organising health promotion events and improving health literacy
* ongoing communication with the patient population

This guidance supports Practices to meet the contractual requirements and provides examples of the activities that support good participation.

1. **Setting up a PPG**

A PPG is open to every patient on the GP practice list. All communities, groups, genders, ages, ethnicities, and disabilities representing the patient list are encouraged to join.

There are no other membership requirements except that patients must be registered with the practice.

PPG members should be as far as possible, be representative of the practice population. The PPG will elect a Chair to run meetings and guide the work of the group. To become a member patients must nominate themselves via one of a variety of communication channels decided by the PPG

It is important that a PPG is meaningful to both the patients and the practice staff, and there are various ways to work towards this that are specific to each PPG. Members will normally serve on the PPG for a period of two years but may step down at will.

A GP or Practice Manager or equivalent should be part of the group. Without the support of both a clinician and a manager, the patient group will be unable to function effectively. The group must be supported with practice information, resources and authority to take action.

The minimum and maximum number of patients in the group is recommended to be between 4 and 12 patients. Regularity of meetings are to be agreed between the PPG members and the Practice but should be at least four times per year with meeting dates set in advance.

PPG meetings can take place face-to-face or virtually. The Practice should develop its PPG in the most appropriate way to effectively reach the broadest cross section of its patient population and meet the contractual requirements. This may be a virtual or a face-to-face group or a combination of the two.

1. **Virtual PPG**

The National Association for Patient Participation ([www.napp.org.uk](http://www.napp.org.uk)) has lots of very useful information on their website about virtual PPGs. Virtual PPGs are now developing alongside more traditional face to face PPGs in many practices. They have the benefits of:-

* Being a quick way to contact patients through email networks;
* Potential for greater reach to a wider population who may not wish to or are unable to attend meetings (e.g busy professionals, carers, patients, BME communities, young people);
* Using online survey tools and social media, all of which are free;
* Enables the Practice to give feedback quickly and easily i.e “you said, we did”.

Some things to consider:

* Must allow for two-way dialogue, not just the practice giving people information;
* Requires careful phrasing of emails;
* Requires moderation;
* Can require initial system setup, data analysis tools and ongoing monitoring;
* Will not reach some sections of the community who prefer not to use or are unable to use email (e.g older people, people with low literacy levels and mental health difficulties).

Ideally a range of approaches including face to face meeting based PPG will provide reach to the broadest cross section of the practice community.

1. **What do patients get out of having a PPG?**

A PPG provides patients with an opportunity to be more involved with the practice and make suggestions for improvements. It is a way of ensuring that suggestions and common complaints are taken on board and necessary changes are being made. It is a way of finding out more about healthcare provision in the local area and gives patients greater confidence by being a representative and having their voice heard. Furthermore, a PPG provides an opportunity to learn more about the NHS, GP practices and other ways to use their skills as a patient representative and serve the needs of other patients as volunteers gaining experience of organising small projects.

Membership of the PPG is a voluntary unpaid position and does not confer any privileges beyond those already available to all practice patients.

1. **What does the Practice gets out of having a PPG?**

A PPG gives a Practice a better understanding of their patients’ experiences and views, thus contributing to more satisfied patients and better run services. PPG’s can encourage health education activities amongst patients and provide a more direct link into the community and a successful PPG can contribute to developing services that will benefit patients and help to maintain the PPG itself.

1. **What the GP Practice should provide**

Practices should provide a place to meet (usually the practice itself), a member of staff and a GP or Practice Manager to attend each meeting. They should provide refreshments during face to face meetings and space to promote the PPG (either on the website, a noticeboard or both) and printing of any documents needed for the meeting.

The Practice should make sure that everyone in the group is clear about what is and what is not to be included in group discussions or actions. A Terms of Reference should be developed by the PPG and ground rules should be outlined in this. An agenda should be prepared and sent out to all PPG members at least one week before each meeting.

PPG patient members cannot provide any medical advice to other patients, or deal with personal/medical issues or individual complaints during the meeting.

A designated PPG noticeboard space can help the PPG to communicate with the population using the practice about their projects and successes.

The Practice can organise health awareness events – this could link in with awareness campaigns that other organisations are doing i.e breast cancer awareness and so on.

1. **Roles for PPG members**

**Chair**

The role of the Chair is to:-

* Guide the meetings to keep things productive;
* Manage/create the agenda; allocating space to items which are agreed in the previous meeting to need further discussion, or anything very significant which arises between meetings;
* Makes sure everyone has their share of time to speak at the meeting;
* Ensures that the agenda items are discussed in a timely manner;
* Ensures that any actions arising are allocated a ‘lead’ person to see them through.
* It is also useful to have a Vice Chair to support the Chair and deputise for them in case of absence.

**Secretary**

The role of the Secretary is to:-

* Take notes in the meeting of roughly what points have been made or topics covered;
* Creates the minutes of the meeting from the notes and circulates to members in an appropriate format for each person;
* Circulates the Agenda and any other important documents to read before each meeting.

**Treasurer**

The role of the Treasurer is to:-

* Keep records of any financial incomings or outgoings of the PPG;
* Is responsible for seeing that the financial processes of the group are transparent and fair, and that they are followed.

**Communications Officer**

The role of the Communications Officer is:-

* To provide updates on what the PPG is doing by using posters, notice boards, website, social media, writing news stories etc;
* Create a leaflet explaining what the PPG is;
* Decide on branding for the PPG e.g logo/themes etc.

1. **Common Problems**

**Dealing with Complaints**

It is not the PPG’s job to deal with individual complaints, the Practice has a complaints process for that. If a complaint is made directly to a PPG member they should inform the patient of how to follow this process.

If a PPG member has a complaint about the Practice it should be kept totally separate from their work on the PPG, and the two should not be allowed to affect each other. It is up to the Practice to support the PPG member to feel confident in continuing their role in the event that this happens.

**Working out timings of agenda items**

It is best to allow more time than you think you will need for each item to give you a buffer in case you get really involved in an important discussion. As a guide, unless your agenda is very empty, twenty to thirty minutes should be the longest you spend discussing any one item and you should only really have one big discussion on the agenda. Presentations should be kept to between ten and fifteen minutes each, plus a little time for questions afterward, and updates on individual actions should be kept under five minutes long.

**Meetings are overrunning**

To help the Chair keep the meeting on track it’s best to agree at the beginning of the meeting to prioritise finishing on time. Having an estimated time that you plan to get to each item next to it on the agenda is a good way to help everyone evaluate how the meeting is progressing.

1. **How to create minutes of meetings**

The minutes are just a note of what was discussed at the meeting. The only things they really need to include are:-

* When and where the meeting took place i.e at Millbrook Medical Centre, over Teams etc.
* A list of everyone who attended (in alphabetical order).
* A list of anyone who sent apologies in advance for not being able to attend.
* A numbered list of the agenda items with bullet points or short, clear notes from the discussions next to it, or under each one.
* A list of any actions that were agreed on assigning each action to one of more people.
* A list of any items which it was agreed should be on the next agenda.

This will help anyone who missed the meeting to know what happened, and will help everyone be ready and organised for the next meeting.