

Diary of Events 2011**Equip Dentist Training Day**

12.05.11

Quay Hotel, Deganwy

WaMH in PC Conference

28.06.11

Marriott Hotel, Cardiff

Alcohol Training

01.07.11

Ramada Plaza, Wrexham

Practice Managers**Conference**

22-23.09.11

Hilton Hotel, Cardiff

Dermatology Study Day

06.10.11

Hilton Hotel, Cardiff

**RCGP Wales Gala Awards
Dinner**

04.11.11

Hilton Hotel, Cardiff

Drugs Refresher Day

November 11

TBC, Cardiff

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Message from the RCGP Wales Chair

Spring has arrived and with it a series of opportunities for Wales. We have voted for extended powers for the Assembly, which will enable the health service to enact legislation without having to go to Westminster first for scrutiny. We also have the opportunity to elect new representatives for the Assembly in May.

RCGP Wales has produced a manifesto of questions you may wish to raise with any aspiring politicians; please feel free to do so.

Within NHS Wales there is endless change and continuing service reviews. Please do add your comments wherever you can to make the voices of GPs heard. There is no point in complaining that we do not like how things are being done if we do not at least point out potential problems in these early stages.

In the office we are inundated by review documents and it is important that we look at these to see how they will affect our patients in Wales. We do have a list of members with special interests whom we ask to comment on specific topics, but if you would like to become involved in the consultation processes, please let us know and we can include you in e-mail correspondence. We should really like to widen the scope of these consultations to include the views of as many GPs as possible.

As GPs we can make a difference. I have been aware of the impact of underage pregnancy since my own school hit the front pages of the Daily Mail in the '70s with the headline "Baby boom at girls' school".

Wales has the highest rate of underage pregnancy in Europe. Half of the pregnancies end in termination, which brings its own physical and emotional consequences. I was very pleased therefore that we were able to highlight this problem at a joint forum with the BMA and chaired by Dr Dai Lloyd AM, who is a fellow of RCGP and a former member of Welsh Council.

In finishing, I should like to thank Dr Martin O'Donnell for his sterling work as Honorary Secretary of RCGP Wales and congratulate him on his new position as an Associate Medical Director in Betsi Cadwaladr and I also wish to welcome Dr Owen Thomas as our new Honorary Secretary.



Dr Bridget Osborne FRCGP
Chair RCGP Wales

'Inspire to Achieve' All Wales Practice Manager Conference

Building on the success of the 2010 event, RCGP Wales welcomes the opportunity to work with the All Wales Practice Manager Conference Committee to deliver their 2011 Conference. This year the conference is being held at the Mercure Holland House Hotel, Cardiff on Thursday 22nd and Friday 23rd September.

For more details please contact Susan Court on: scourt@rcgp.org.uk

Neil Hunt Chief Executive, RCGP

Thank you for the opportunity to introduce myself. At the time of writing I have been working at the College for almost six weeks - that's the health warning on anything I have to say.

First, I should say how pleased I am to be appointed as Chief Executive of the RCGP. The College is one of those bodies that has such a reputation and standing that people are aware of it, even if not working with it. In the role I had before this, as Chief Executive of Alzheimer's Society, it was important both to understand issues facing GPs as well as offering some (hopefully) constructive challenges. The College was always a target for our communications and collaboration was highly prized. You were always on the radar.

Part of this stems from the central role GPs have in our health system and part from the extraordinary range of activity the College undertakes. Since joining, I have been genuinely impressed and (I must confess at times alarmed) by how much is going on. I have met some very clever, highly committed people who are working extremely hard to develop insights and suggest new approaches. I am in no doubt at all that, as Chief Executive, I have a responsibility to support this work by ensuring our systems, capacity and resources are working to best effect. To that end, I am eager to



understand the top priorities we have - the absolute 'must do' items - and to make sure we deliver on them. I shall be listening.

For example, the Health and Social Care Bill in England is so dramatic and has such implications for GPs and patients that we must take all the opportunities we can to influence it. So too, the new Centre for Commissioning and the potential business and development role it can play. However the Bill proceeds, the commissioning agenda is here and the Centre needs to be a respected and reliable source of good practice.

It is vital, however, not to allow the agenda in England to dominate all others (I am a great believer that a distance from London brings many advantages). I was pleased to receive today details of the new 'Creating Mental Wealth in Wales' programme from colleagues in Cardiff. It is my sense that almost daily, the College is innovating something to improve the life chances of people across the UK.

I have had an initial opportunity to recognise the work of the faculties and the crucial challenge of making the College relevant and accessible to all. We are already looking at our digital systems with a view to improving usability for College Members. Additionally, I hope that the decision to move into a wonderful new central office will add greatly to the range and quality of services available.

It is excellent to arrive at a time of growth for the College. I aim to keep us on that path, to find ways to refine what we offer and to increase the impact of the work we do.

A faster and fairer system for doctors

The General Medical Council has launched a consultation on the reform of its Fitness to Practice procedures.

Under new proposals from the GMC, Doctors could accept sanctions, including suspension and erasure, without having to go before a hearing. Public hearings can be long, stressful and harrowing for everyone involved and so the GMC is consulting on major changes that could deliver a faster system that is fairer to both doctors and patients.

At the heart of these proposals is that if a doctor is willing to accept a sanction, including erasure or suspension, the GMC can deliver fast and effective public protection without necessarily having to hold a public hearing. If there was a significant dispute about the facts of the case, or the doctor did not want to accept the proposed sanction, the case would then be referred to a hearing.

Any concerns and sanctions would continue to be published on the GMC website, whether or not a case went to a hearing.

Niall Dickson, the Chief Executive of the General Medical Council, said: "We are here to protect patients and that means making sure that only doctors who are fit to practice are able to do so."

"We are not here to punish doctors or even to provide redress to patients - there are other ways to achieve that. If a doctor is willing to accept sanctions that would achieve the same goal of protecting patients, it makes sense to avoid the expense and stress of the hearing process."

"These changes would be major reforms and we want anyone with an interest in our work to have the chance to contribute and respond."

General
Medical
Council

Regulating doctors
Ensuring good medical practice

'Getting the Measure of Mental Health' Conference

Tuesday 28th June 2011—Hilton Hotel, Cardiff

Wales Mental Health in Primary Care Network (WaMH in PC) is happy to announce the launch of their 2011 conference '**Getting the Measure of Mental Health**' on Tuesday 28th June 2011 at the Hilton Hotel in Cardiff.

The conference is looking to raise awareness of mental health and the wellbeing needs of children / adolescents / adults and older people by providing a number of thought provoking discussions, workshops, examples of good practice, Q & A sessions and much more.

Planned workshops will look at:

- dementia (identifying and treating dementia)
- dementia (patient and carer needs)
- Mindfulness Based Cognitive Therapy for the prevention of relapse in depression
- Children and young adults (including psychological therapies / school counselling / family support)
- Mental Health (Wales) Measure

Our target audience is wide ranging but our focus is to bring together mental health practitioners and professionals, policy makers, agencies and organisations, service users and carers so that WaMH in PC can work in collaboration with these individuals / organisations to look at new ways of thinking re the development of, support of and engagement with primary care mental health services in Wales.

To find out more please contact Lesley Hills on **029 2050 4516** or by email: lhills@rcgp.org.uk

Ruth Wallace

Ms Ruth Wallace, recently appointed Head of Devolved Councils has overall responsibility for the strategic direction of the RCGP in Wales, Northern Ireland, Republic of Ireland and Scotland. Here we have a chance to meet Ruth and hear her ideas on developing the work of RCGP within the devolved Councils.



Ruth Wallace, Head of Devolved Councils

What is your professional background?

Before joining the College in 2003 as Head of RCGP Scotland, I worked for 12 years in the NHS in Scotland, firstly as Office Manager and Board Secretary of a Scotland-wide Special Health Board and latterly as Head of Corporate Affairs & Communications for the same organisation.

As Head of Devolved Councils, could you briefly describe what this role entails?

Working closely with the Chairs and Managers of the Devolved Councils in Wales, Northern Ireland and Scotland my role is to:

- develop and manage the strategic and operational work of the College in the four national offices in Wales, Scotland and Northern Ireland and the Republic of Ireland;
- co-ordinate and implement a strategic response at devolved level to support the RCGP's strategy and plans UK wide;

- build links with key stakeholders in the devolved nations to initiate, develop and deliver projects, initiatives and services to support our GP members and enhance the quality of patient care.

How do you see your role impacting on each of the Devolved Councils?

Hopefully positively! I am very much enjoying building relationships with the staff teams and Chairs and Officers in Wales and Northern Ireland; and handing over the operational management of the Scotland team to the new Manager in Scotland!

I would hope to support the Devolved Council staff teams, Chairs and Officers in looking at opportunities to work closer together, share ideas, initiatives and expertise, and to work with them in further engaging with their key stakeholders to promote the values and work of the College and general practice as a profession, to influence the development of health policy in the devolved nations, and to deliver initiatives that support our members and enhance the quality of patient care.

Working closely with colleagues in RCGP, particularly the faculties and policy teams, will be increasingly important as health policy steadily diverges across the four nations.

What are you looking forward to most in your new role?

Meeting new people; expanding my knowledge of the health services and political environment in the devolved nations and the Republic of Ireland; making connections and building closer working relationships with colleagues across the UK.

Ruth Wallace—rwallace@rcgp.org.uk

RCGP Wales Gala Awards



The Third Annual RCGP Wales Gala Awards Dinner was held at The National Museum, Cardiff on Friday 10th December 2010. The event is dedicated to celebrating the best of General Practice in Wales and this year the awards included GP of the Year, Patient

Nominated Award, Practice Administration Team of the Year Award and the Caring about Carers Award.

Dr Bridget Osborne, Chair of RCGP Wales welcomed guests including Dr Iona Heath, President of RCGP; Professor Scott Brown, Chair of RCGP Northern Ireland; Mr Paul Williams, Director General Health & Social Services, Welsh Assembly Government, Chief Executive NHS Wales; Dr Dai Lloyd, National Assembly for Wales Member for South Wales West; Mr Steve Lewis, Princess Royal Trust for Carers and representatives from the BMA, the GMC, GPs, practice teams and patients.

Guests were treated to a drinks reception in the Impressionist Gallery, with music provided by harpist, Charlotte Poulter. The opportunity to view such an exclusive collection of paintings was appreciated by all before they made their way to the Grand Hall of the Museum for the Awards.



Dr Bridget Osborne, representatives from Newport Surgery, Pembrokeshire and Mr Steve Lewis

Dr Bridget Osborne began the evening by announcing the winner of the Caring about Carers Award, jointly awarded by RCGP and The Princess Royal Trust for Carers. 2010 is the first year for this award and Newport Surgery, Pembrokeshire were worthy winners.

Mr Paul Williams presented the Awards for the Practice Administration Team of the Year to the winner, High Street Surgery, Swansea; the first runner up to Vauxhall Practice, Chepstow and to the joint second runner ups, South Street Surgery, Bargoed and Overton Medical Practice, Wrexham.



Practice Administration Team, High Street Surgery, Swansea

The GP of the Year Award was shortlisted to a final 11 GPs drawn from across Wales and each nominated by their patients. The judging process was conducted by lay members of the RCGP Wales Patient Partnership in Practice (PPiP) group.

The 11 nominations were Dr G Hoggins (Bradley Practice, Buckley), Dr S Morgan (Four Elms Surgery, Cardiff), Dr R Evans (Padarn Surgery, Aberystwyth), Dr J Shewring (Llanedeyrn Health Centre, Cardiff), Dr S Lloyd (Meddygfa Bodowen, Holywell), Dr P Metcalfe (Brecon Medical Group Practice), Dr R Britto (Llys Meddyg, Conwy), Dr O R Thomas (Pencoed Medical Centre, Llanharan), Dr L Khan (Caergwle Medical Practice, Wrexham), Dr R Lewis (Meddygfa Teilo, Llandeilo) and Dr I Williams (Corwen, Denbighshire) who were all awarded nomination certificates.

The final three places were awarded in reverse order by Dr Iona Heath to Dr Stephen Lloyd (Meddygfa Bodowen, Holywell), Dr Richard Evans (Padarn Surgery, Aberystwyth) and Dr Raj Britto (Llys Meddyg, Conwy).



Mr Paul Williams, Dr Iona Heath, Dr Raj Britto and

The winner, Dr Raj Britto was nominated by his patient Mrs Muriel Wait who was able to attend the Awards and read out her nomination before the Award was presented.

"I am delighted that Dr Britto has won the GP of the Year Award as I can not thank him enough for the care that he has shown to me and my whole family. He is dedicated, thorough and caring. I feel that we are not just names or numbers to him, just people who need his help and he does just that – he even has the tissues!"

We can face each day knowing that we have the support of a great man who we can not thank enough. I thank God that Dr Britto is here and hope he stays with our surgery!"



Mrs Muriel Wait, Dr Catherine Lloyd and Mrs Gillian Whitehead

Each year RCGP Wales nominates a Charity Partner and in 2010 The Touch Trust; which provides creative, touch-based art of movement and dance programmes for individuals affected by Autism Spectrum Disorders, behaviour that challenges and profound and multiple disabilities; was the worthy recipient of funds raised by the raffle held at the Gala Evening. Mrs Dilys Price, Director, gave a short presentation highlighting the work of the Trust and the raffle raised £850 on the evening, enhanced by those who chose to gift aid their donation.

Dying Well Matters in Wales

The Work of the Palliative Care Implementation Board

July 2008-July 2011

The Wales Palliative Care Implementation Board was established in July 2008 by the Minister of Health and Social Care, Edwina Hart, to achieve the recommendations outlined within the Palliative Care Planning Group Report (Sugar Report 2008).

The work of the Board is underpinned by the following core principles:

- Good end of life and palliative care should be available to all universally across Wales.
- Fairness of service provision must be underpinned by high standards of End of Life Care.
- Close integration of services in an area, whether provided by the NHS or by voluntary sector providers, is essential for continuity of care.

Within this framework, the Board set about the Implementation Programme, focusing primarily on building teams, fit for the future and able to meet the need to support:

- The non cancer population with End of Life Care needs.
- An increasingly ageing population, living longer with co morbidities.
- Younger patients surviving treatments, whose management to improve their quality of life is complex .

This is being achieved through:

Investment in teams and services: Increased capacity in specialist adult, paediatric and transitional teams, specialist and respite hospice beds and development of Hospice at Home services. Increased support offered to primary care teams and patients, which empowers carers and can avoid care breakdown.

Improving access 'out of hours': Clinical nurse specialists are now available 7/7, directly providing care and advising/supporting colleagues. Wales is the first nation to achieve this goal comprehensively. Evaluation shows it is a successful, much needed service. Consultant advice is also available 24/7.

Support at home: The introduction of a 'Just-in-Case' box service across Wales, containing a core minimum of drugs likely to be needed in the event of patient at home deteriorating and for use in conjunction with the Welsh End of Life Care Pathway.

Internet tools: The website www.wales.pallcare.info is open access. It hosts agreed clinical guidelines, an opioid dose conversion calculator and drug incompatibility tool and more!

GP short course in palliative care: Macmillan bursaries are currently available to GPs in Wales for this Cardiff University M-Level course that carries 15 CPD credits.

Listening to patients' experience: The 'iWantGreatCare' patient evaluation has provided almost 2,000 very informative feedback forms from patients since July 2009, showing very high ratings of specialist palliative care services across Wales. The Dying Well Matters programme launched in October 2009 provides patient stories from across all services; these inform the strategy.

Primary Care Investment

Acknowledging the importance of Primary Care Teams in end of life care. Collaboration with RCGP Wales resulted in:

- Increased investment in Marie Curie Nursing and Hospices at Home services.
- Purchasing, for every GP in Wales a copy of the UK consensus 'Adult Palliative Care Guidelines' for distribution Spring 2011.
- Funding delivery of the Gold Standards Framework Primary Care Training Module, 'Going for Gold'. Eighteen Welsh practices have enrolled.
- Three Welsh conferences held in 2010, with over 200 delegates, exploring multi-professional end of life care.
- Cardiff University short-course for GPs; to date over 150 GPs in Wales have enrolled.
- Negotiations with the Department of Health Quality Outcomes Framework (QOF) team to try to increase end of life care QOF recognition.



The Board looks forward to continuing to collaborate closely with RCGP, to ensure services come together and the patient experience improves. To quote from Cecily Saunders, founder of the modern hospice:

"There is so much more to be done"

Professor the Baroness Finlay of Llandaff

Any comments, queries or feedback regarding the work of the Board should be sent to:

Veronica.snow@wales.nhs.uk

Teenage Pregnancy 'The Human Cost'

On the evening of 8th February 2011 RCGP Wales, in collaboration with BMA Cymru Wales, hosted a seminar at the National Assembly for Wales in Cardiff Bay; "Teenage Pregnancy—The Human Cost".

The audience included GPs, Midwives, the Chief Medical Officer for Wales and representatives from across Wales including those from All Wales Sexual Health Network, Public Health Wales, Royal Pharmaceutical Society, University of Wales Institute Cardiff, NSPCC, Barnardo's, Neath Port Talbot Family Support Network, Action for Children, Merthyr Tydfil Children and Young Peoples Partnership.



Dr Dai Lloyd AM, Dr Catherine Lloyd, Honor Young, Dr Annette Schlaudraff, Professor John Guillebaud, Dr Zoë Morris-Williams, Dr Bridget Osborne, Dr Richard Lewis and members of Funky Dragon

The forum was chaired by Dr Dai Lloyd AM (Plaid Cymru A s s e m b l y Member for South Wales West and a former member of Welsh Council) and there were

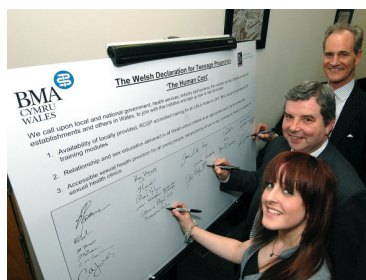
presentations by Dr Bridget Osborne (Chair, RCGP Wales), Funky Dragon (Merthyr Tydfil Borough Wide Youth Forum), Dr Zoe Morris-Williams (Academic GP Registrar), Dr Annette Schlaudraff (Integrated Sexual Health, Cardiff & Vale UHB), Dr Catherine Lloyd (GP, Swansea University), Honor Young (PhD Student, UWIC), Dr Richard Lewis (Welsh Secretary, BMA Cymru Wales) and the key note speech was given by Professor John Guillebaud (Emeritus Professor of Family Planning & Reproductive Health, UCL).

Wales has the highest rate of teen pregnancy in Europe. Half of these conceptions end in abortion, which brings

its own physical and mental cost.

The seminar explored some of the reasons behind teen pregnancy, including lack of access to contraception and fear of a lack of confidentiality. For young people living in unhappy homes, having a baby may be an option to fill the void left by failure to achieve any qualifications and it was noted that we spend considerably less per child on education in Wales than in England. Prof Guillebaud also highlighted the lack of ambition as a major factor, whilst pointing out that sex and relationships education is easily forgotten in the heat of the moment and there is a definite place for LARCs. Dr Schlaudraff spoke about the increased risks of non congenital abnormalities in the babies of children under 15 and the high rates of depression in all teenage mothers.

RCGP Wales is keen that any GP who wishes should be able to train to insert LARCs under the supervision of the RCGP. We also learnt that using depot injections for teenagers first, to induce amenorrhoea, followed by subsequent LARC insertion, causes less troublesome bleeding.



Samantha Bailey (Funky Dragon), Dr Dai Lloyd AM and

At the end of the evening the audience were invited to sign a pledge board to give their support to; Availability of locally provided, RCGP accredited training for all GPs in Wales in LARC fitting using free, accredited RCGP

training modules; relationship and sex education delivered to all Welsh school children at an appropriate time by trained professionals; accessible sexual health provision for all young people, signposted by school nurses, to adolescent friendly GP surgeries and sexual health clinics.

The event was videoed and the web cast can be found at: www.rcgp-wales.org.uk

Palliative Medicine

Short Course (3 days) for GPs

Cardiff University are delighted to offer a new short course specifically written for doctors in primary care.

The course is immediately clinically applicable and will include pain assessment, pain control, nausea and vomiting, bowel obstruction, breathlessness, end of life care to include GSF and ICP, syringe driver workshop, communication skills and difficult decisions at end of life.

The course equips GPs to improve care for adult patients with **ANY** life limiting illness. **This course covers palliation of non-malignancies and malignancies.**

There are 3 separate days of face-to face teaching across 6 weeks, interspersed with suggested reading



and a workbook.

Courses run 4 times a year in venues throughout Wales. The cost of the course will be £800 with workbooks included. The courses have been generously supported by Macmillan Scholarships of £400 each.

The course is accredited by Cardiff University and successful completion of this course will carry 15 credits towards the 120 credits needed for the Postgraduate Diploma in Palliative Medicine.

Maximum of 24 places on each course.

For further information and to register for an application form please contact:

Tel: 029 20 196111 or 029 20 196838

Email: dippallmed@wales.nhs.uk

We look forward to hearing from you.

“Widen your World”

Reflections from an experience of the WONCA Europe Conference, Malaga.

My “world” before was simple: hospital training, some experience working abroad, registrar jobs and preparing for exams. Attending the WONCA conference (World Organisation of National Colleges, Academies and Academic Associations of General Practitioners/Family Physicians) was something entirely different and encouraged me to step outside of the usual GPST3 experience.

Firstly at the pre-conference I met GP trainees and First 5 GPs from all over Europe. From group discussions we had over the two days I realised how privileged I was to be completing my GP training in the UK. I listened to stories of how young GPs would enter GP training straight from their “house officer” year. There was a wide variation in standard of training, poor opportunities for further development (unlike the clinical leadership and academic fellowships that are available to GPs in the UK) and there were few opportunities for those interested in academia and research. However, when discussing the working life of a GP in different countries the UK came behind some countries who would quite commonly have 30 minutes per patient! I feel pressured with our 10 minute consultations, but realised things could be much more difficult as GPs in some European countries have only 4 minutes per patient! The interesting point I learnt about this was that when comparing list sizes there wasn't actually a huge difference – perhaps shorter consultations mean problems, especially those of a psychosocial nature are overlooked leading to repeat presentation.

We were given an inspirational speech by Dr Iona Heath on “the difference between what we know and what we think we know” which has made me realise more that we believe what we have been told or read in medical books, yet much of what we practice is not fact but theory or experience of others, and that we should always be alert

to the concept that what we think we know is wrong, and the patient may hold the answer.

The next 3 days of the main WONCA conference was an exhilarating non-stop programme of events. At each session there was a huge choice of workshops, lectures and posters presented from colleagues all over Europe. One moment I would be talking about communication skills strategies with Irish GP colleagues during “dealing with crying patients” workshop, to devising a research project in Nepal during a “research methods” workshop, to listening to inspirational speakers from the Scandinavian Research Network talking about whether screening actually helps us?

On top of busy days at the conference we then attended a Spanish flamenco performance at the opening ceremony, tapas gatherings with other young GPs, a very well attended Dutch ‘LOVAH’ party and finally a fantastic closing cocktail party in an automobile museum.

I came away realising that the GP ‘world’ in which I worked and lived was relatively small compared to the ‘wider world’ of experiencing new things, challenging the way in which we operate in our country and listening to the experience of GPs who work in a completely different setting to our own. I realise more now the gap of how much more there is to experience by stepping outside of the normal training/working regime and doing something different.

Dr Madeleine Attridge

Dr Madeleine Attridge is the UK Hippocrates Exchange Co-ordinator for the RCGP Junior International Committee (JIC). If you would like to learn more about international opportunities such as the WONCA conference see:

<http://www.rcgp.org.uk/international.aspx>.

For information on the Hippocrates Exchange Programme or Vasco da Gama Movement (WONCA Europe Working Group for Young and Future General Practitioners) see www.vdgm.eu or email Madeleine.jic@gmail.com



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Patient Partnership in Practice (PPiP)

The first meeting of the Patient Partnership in Practice (PPiP) group for 2011 was held on 19th January with all of the current members present.

High on the agenda was the final drafting of the Constitution and Terms of Reference for the group which were ratified at the meeting of the RCGP Wales Council in February 2011.

The group reflected on the work undertaken in 2010 which included:

- Judging process for the GP of the Year, Patient Nominated Award, the Practice Administration Team of the Year Award and the Caring about Carers Award.
- Participation in the RCGP Conference held in Harrogate in October where Mrs Jacqui Storer, PPiP member, was able to talk with GPs drawn from across the world and had the important opportunity to work with other patient group representatives in the devolved countries.

The group are now looking forward to the launch of the 2011 Awards and to recruiting more lay members to the group.

Member Profile—Gillian Whitehead, Chair

Gillian retired in 1999 having spent 39 years working in the NHS, Social Services, and a charitable organisation.

Her last position was as Centre Director for the Marie Curie Hospice Centre in Penarth.

Since Gillian's retirement she has remained busy learning new skills, seeing more of her family and looking after her grandchildren.

Gillian says *"I was pleased to be asked to join the RCGP Wales PPiP Group. I feel I can use my knowledge of the NHS as Nurse Manager and patient to make a contribution"*.



PPiP Membership Opportunity

The Royal College of General Practitioners (RCGP) in Wales is seeking applications from the public for Lay Member representatives on the RCGP Wales PPiP Group.

The PPiP Group is an active and important part of the RCGP, highlighting patient views and interests. Membership is comprised of up to 5 Lay and 2 GP members, working together to promote patient involvement within primary health care. Key tasks of the group include:

- Identify and develop ideas and lead activities which encourage GPs to work in partnership most effectively with patients and public.
- Influence and respond to activity in Wales that impacts on the quality of patient care.
- Work together as a team to ensure that the activities of the College respond to patients needs.
- Foster and support links with other RCGP Patient Partnership Groups.

If you know of any non-medical members of the public that would like to be involved in enhancing the quality of services provided to our patients in Wales, please contact Susan Court on scourt@rcgp.org.uk or **02920 504854** for a role description and Terms of Office.

