Welcome & Introduction

The aim of this guide is to help and support GPs, Practice Managers and patients who are interested in establishing a local Patient Participation Group.

GPs, Practice Managers and other health professionals who have been successful in promoting patient involvement and setting up new Patient Participation Groups have had significant input into the production of these guidelines.

It is hoped that these guidelines will give confidence to those prepared to take on the challenge of ensuring that patients have greater involvement in the planning and delivery of primary care services.

The Royal College of General Practitioners Patients in Practice Group (PiP) would encourage GPs, Practice Managers and patients to establish Patient Participation Groups as a means of achieving this.

Mr Alan Braiden
(Chairman, RCGP Northern Ireland Patients in Practice Group)
# Patient Participation

## Benefits of Having a Patient Participation Group

## Getting Started

## Vital Ingredients to a Successful Patient Participation Group

### Taking One Step at a Time

- **Tackling Issues**
- **Recruitment**
- **Initial Meetings**
- **Communicating**
- **Keeping It Going**
Patient Participation

What is Patient Participation?

Patient participation is about patients working with their practices to:

- Improve communications and information transfer between a practice and its patients.
- Help themselves and others to be more responsible for their health.
- Give practice staff the opportunity to discuss topics of mutual interest to the practice.
- Contribute to continuous improvement of services.
- Provide practical support and help implement positive changes.

Patient Participation is not:

- A forum for complaints.
- A vehicle for people to resolve their own personal issues.
- A doctors’ fan club.

What is a Patient Participation Group?

A Patient Participation Group is a selection of patients and practice staff who meet at regular intervals to consider ways of making a positive contribution to the services and facilities offered by the practice to patients.

Not every group will be the same. Each group will evolve and develop to address the needs of the practice and the local community.

The very fact that you are reading these guidelines means that you already have an interest in the concept of patient participation.

Maybe you have already thought of starting up your own Patient Participation Group but were unsure about how to start? Hopefully this information will help you become established.
Benefits of Having a Patient Participation Group

“The idea of investing in patients and recruiting a Patient Participation Group is that you can look at issues and challenges from a patient perspective, helping to ensure better and more representative solutions.”

(Dr David Johnston former Chairman RCGP Northern Ireland)

There are many benefits to having a Patient Participation Group. Patients, GPs, practice staff and the wider community can all benefit from its successes.

What are the benefits for patients who are involved?

- More responsibility for their own health.
- Opportunity to suggest positive changes and voice concerns.
- Better understanding of how a practice is run and the challenges practice staff face.
- Better understanding of the role and workload of a GP and practice staff.
- Opportunity to discuss topics affecting the running of the practice.

What are the benefits to GPs and practice staff?

- Enhanced and improved communications with patients.
- Potential for a more respectful relationship between GP and patient.
- Support for GPs and practice staff in meeting targets and objectives (e.g. surveys).
- Delivery on current clinical governance requirements.
- Possible support towards the revalidation process.
Getting Started

The initiative to start a Patient Participation Group can come from a patient, GP or a Practice Manager. Many have started as a small number of people from within the practice who have then agreed to formalise the group and recruit additional members.

It might be a good idea in the early stages to liaise with other established Patient Participation Groups. Experienced groups in your area could help advise and support you with difficult decisions and project work, or you might want to pool your resources with a neighbouring/adjoining practice and set up a joint Patient Participation Group.

"We strive to promote a positive attitude and interest in the efficient working of the practice and this in turn creates a good working relationship between staff and patients."

(Parkside Surgery)
Vital Ingredients to a Successful Patient Participation Group

To ensure the success of your Patient Participation Group it is important to secure as many of the following as possible:

- An informed and supportive GP and Practice Manager.
- Committed practice staff.
- A strong patient voice.
- An active and sustainable interest within the group.
- A group comprised from a wide range of representatives from the practice.
- Clear direction and objectives.

A Case Study – Parkview Surgery Patient Participation Group, Dungannon

Members of Parkview Surgery Patient Participation Group have shared some of the vital ingredients they found useful when setting up a new group:

- Be representative by including people from differing age groups and nationalities.
- A group should aim for a mixture of professional health care workers, lay persons and people from business.
- A group should aim to create a quarterly newsletter to keep patients briefed on developments both at the meetings and within the practice.
- A group needs enthusiastic and motivated people who can work together.
- A group requires committed GPs and practice staff.
- A group will need a plan of work to help guide them throughout the first year.
Tackling Issues

The following are some ideas as to how practices have tackled issues which they have encountered when setting up a Patient Participation Group.

Issue: Lack of available time
Possible Solutions:
- GPs often rotate attendance at meetings.
- Consider meeting outside practice hours.

Issue: No clear sense of direction
Possible Solutions:
- Set out clearly from the start the role and function of the group.
- Good leadership with good communication.
- Have a lead member to work with the Practice Manager.
- Prepare minutes of meetings to lessen opportunities for dispute and duplication.
- Discuss and address real issues affecting patients and the practice.

Issue: Lack of confidence by members of the group
Possible Solutions:
- Introduce ‘Ice Breakers’ to inform patients about the practice and introduce everybody at the meeting.
- Create a support network.
- Support training needs.
- Empower patients to make an effective contribution.
The recruitment of patient members is one of the key stages in determining the success of your Patient Participation Group. Be mindful that the skills necessary to get a group off the ground may be different from those needed to run a well established group, so please take time to consider how best to recruit members.

Although there is no set number of members within a Patient Participation Group, ideally this should be between 6 and 12 patients supported by at least one of the GP partners and the Practice Manager.

PiP has identified three main ways to recruit members to your group, though it may take a combination of methods to ensure a fully representative group:

- Individual Approach
- Open Invitation
- Random Selection

**Individual Approach:**

One of the most successful recruitment methods when starting up a new group. Although not democratic, this ensures that your group quickly consolidates. It involves approaching patients who you feel would make a valuable contribution to a Patient Participation Group.

**Open Invitation:**

The method of open invitation is probably the most popular and democratic way to recruit for your Patient Participation Group. It provides the opportunity for all patients to put themselves forward for membership to the group. Open invitation will require some sort of advertising in order to draw awareness to potential members.
Random Selection:

Random selection involves approaching patients on your practice list via a letter of invitation. A sample number will need to be decided on, e.g. if there are 5,000 patients, then 500 (i.e. every tenth patient on the practice list) could be written to in order to get a reasonable response.

Be Representative:

Aiming for diverse representation on your Patient Participation Group should always be attempted, but may initially have to be an aspiration. Where possible you should always try to use a number of different communication methods to ensure that you attempt to attract those from all walks of life.

Whichever method of recruitment your practice decides upon, the diversity and representation of the group needs to be considered. Ethnicity, gender, age, disability, sexual orientation and religion are all areas which should be considered when recruiting for your Patient Participation Group.
Initial Meetings

When the membership of your new Patient Participation Group has been finalised, it is important to ensure that the first few meetings are well planned and organised, with the emphasis on participants getting to know each other; ensuring that there is clarity about the aims and objectives of the Patient Participation Group; beginning to map out how the group will operate; and agreeing the initial issues of mutual interest to the practice and its patients, for consideration.

There needs to be an agreed formal structure for the group. In particular, a Chairperson and Secretary are essential and should be appointed at either the first or second meeting. Ideally the Chairperson should be a patient member of the group, preferably an individual with some experience of committee/group working and running meetings. There may be merit in appointing one of the practice staff as Secretary for a period of time to assist the Chairperson and GPs in firmly establishing the new group, with a view to a patient member assuming the role in due course. If your Patient Participation Group intends to become involved in fundraising for the practice – e.g., for equipment – a Treasurer should be appointed to handle financial matters.

At one of the initial meetings your Patient Participation Group should decide on a quorum – the minimum number of members required to be present at meetings for the group to conduct business. After the first few meetings, it would be important for the group to focus on preparing an initial annual work plan and also drawing up a constitution which would clearly set out how the group will operate.

The RCGP Northern Ireland PiP Group can provide you with direct advice and assistance and has included in its website specimen agendas for initial meetings of new groups; draft constitution and ideas for possible areas of work. These documents can be used, amended as necessary to suit local circumstances, to move your Patient Participation Group forward in its early stages. For further information please visit www.rcgp.org.uk/nipipguidelines
Patient Participation Groups tend to operate most effectively if representatives from the practice, as well as patients, are present at meetings on a regular basis.

It may also be useful for your Patient Participation Group Chair to have access to meetings with the Practice Manager.

Patient Participation Group activities should be fed back to all practice staff and patients. This will allow everyone to be aware of the activities of the group and may increase involvement and interest. You will need to consider how the work of the group will be disseminated to the wider practice population.

Some of the ways which may be useful to consider are:

- Posters
- Information flyers
- Newsletters
- Website
- Email
- Notice boards displaying minutes of meetings
- Social networking sites
- Practice information days
- Patient Participation Group stall
- Surveys
Keeping It Going

Planning ahead for a new group can be a challenging task but it is important to keep members focussed if the group is to be successful. The following points should help to keep your group effective and the agenda focussed:

- Groups should aim to be open to a wide range of viewpoints.
- Encourage the group to come together round an annual plan of work.
- Share the workload of the group.
- Provide a wide range of suggestions that permit the group to identify its own objectives and projects.
- Organise suitable training for the members and office holders within the group.
- Refresh the group and recruit new members from time to time.

You may also wish to consider longer term projects such as:

- Lobbying locally elected representatives for change.
- Investigating the opportunities to have an impact on Local Commissioning Groups (LCGs).
- Designing and developing a regular patient newsletter and information leaflet.
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