

JAMES PRESTON HEALTH CENTRE ♦ 61 HOLLAND ROAD ♦ SUTTON COLDFIELD ♦ WEST MIDLANDS ♦ B72 1RL PHONE: 0121 355 5473 ♦ FAX: 0121 321 1779

ASHFURLONG HEALTH CENTRE ♦ 233 TAMWORTH ROAD ♦ SUTTON COLDFIELD ♦ WEST MIDLANDS ♦ B75 6DX PHONE: 0121 323 2121 ♦ FAX: 0121 323 5298

Website: www.manorpracticeashfurlong.co.uk: www.manorpracticejamespreston.co.uk

## The Manor Practice PPG (Patient Participation Group) Application Form

#### WHAT IS THE PATIENT PARTICIPATION GROUP?

Set up in 2011, we are a Patient led group joining together in a voluntary capacity to enhance the Practice by working alongside the doctors and nurses on behalf of and representing the patients.

#### WHAT DOES IT INVOLVE?

Primarily we do ask that members attend a PPG meeting held at the surgery approximately every 6 weeks. This is to discuss issues affecting your Practice, and helping the surgery to deliver the best service it can. Ultimately, it is about helping patients to get the best out of their doctor and, just as importantly, for the doctors to get the best out of their patients.

#### WHAT ELSE DOES THE PPG DO?

- We have been involved in patient surveys and the questions to be included in these surveys.
- Members attend clinics to help promote new services and the PPG itself.
- We were instrumental in initiating the pictures painted by school pupils and which now adorn some of the walls at Ashfurlong Centre
- We have instigated and been an integral part of some very successful Open Days
- We have representatives attending meetings that are relevant to the Practice/PPG
- Three members were involved in the construction of the Practice website

#### WHO CAN BECOME A MEMBER?

Generally anyone who is a patient within the Practice can become a member. However the Committee does have a right to refuse an individual if it considers it is in the best interest of the individual or the Practice. Your application will be forwarded onto the PPG committee and a member will be in touch with you to arrange an informal meeting/introduction.

### WHAT TO DO NEXT

Please complete the attached form and return to the surgery for the attention of:-

Anna Cinar: James Preston Health Centre, 61 Holland Road, Sutton Coldfield, B72 1RL

# **APPLICATION FORM** TITLE: ..... SURNAME: ..... FIRST NAME: .... ADDRESS: ..... POST CODE: ..... TEL NO: ...... MOBILE: ...... E-MAIL: ..... DATE OF APPLICATION: ..... WHY ARE YOU INTERESTED IN THE GROUP? (Give a brief outline) WHAT QUALITIES COULD YOU BRING TO THE GROUP? (Give a brief outline) WHAT TIME OF DAY WOULD SUIT YOU BEST FOR REGULAR PPG MEETINGS? THEY ARE CURRENTLY HELD ON A THURSDAY LUNCHTIME at 1PM FOR APPROX 1½-2 HOURS.