An independent voice for the people of Wiltshire



## Patient Participation in GP Practices

Report Commissioned by



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#### **Background**

The commissioning of primary care in Wiltshire is shared between NHS Wiltshire Clinical Commissioning Group (CCG) and NHS England. Previously it was the sole responsibility of NHS England. In order to provide for effective joint commissioning a 'Primary Care Joint Commissioning Committee' (PCJCC) was created to include representation from both the commissioners as well as Healthwatch Wiltshire.

The Committee recognised that the voice of the patient is vital in the commissioning and delivery of primary care. As such a 'patient participation' subgroup was created which is chaired by the CCG Board Lay Member - Christine Reid. The subgroup members (Patient & Public Engagement Forum) (the Forum) have worked together to define the shared objectives for effective patient participation and the required activity to achieve these.

The Forum recommended that initially the focus should be on development of existing 'Patient Participation Groups' (PPG) including a network of PPGs. This is especially relevant since it has been a contractual requirement for all English GP practices to form a PPG during the first year (from April 2016) and to make reasonable efforts for this to be representative of the practice's patient population. The subgroup recognised that support is required given that there is a very mixed picture of PPGs in Wiltshire. Whilst there should be no requirement for a single approach to patient participation it is important that there is consistency of outcomes. Some information is known about the status of patient participation for GP practices in Wiltshire; however the picture is not uniform. Some practices are known to have a "virtual" PPG (with contact by email or letter), some have an "actual" PPG (with face-to-face meetings) and there is no information available for a significant number of practices who did not return the questionnaire circulated during 2016. See Appendix 1 for the desired outcomes for PPGs as agreed by the joint commissioners and by Healthwatch Wiltshire.



"Networking, sharing ideas, experiences and information."

#### The Process

Meetings with PPGs were held in each of the three GP locality areas during May and June 2016. Whilst attendance was low, enthusiasm was high and it was agreed that more could be done to broaden the appeal of an effective PPG network. It was agreed that the CCG would produce a questionnaire aimed at all GP practices in Wiltshire, to achieve an information base on existing patient participation. Healthwatch Wiltshire supported this aspect of the project through developing the questionnaire and through analysing the data. The response rate meant that little or no information about patient participation was known about twenty-eight of the fifty-seven GP practices in Wiltshire.

The decision was made that a representative of Healthwatch Wiltshire would contact those practices where least information was held in order to offer assistance and encourage participation in the Wiltshire PPG Network, as the first annual event was planned for 12th October 2016. The purpose of this event was to share information about what exists and what is possible, to develop a good practice model across the county and to encourage peer support amongst participating (and potentially participating) practices.

"open, positive, receptive."

#### Resources

A budget of £10,000 was allocated for the project with the agreement that should the activity not require all of the funding then Healthwatch Wiltshire would use any remaining funds for further work with the CCG on the development of Patient Participation Groups.

#### **Contact with Practices and PPGs**

In order to maximise participation in the first annual network event, it was essential that the majority of contact work was undertaken across three weeks in September.

Emailed invitations for visits were sent to the twenty-eight practices where information on patient participation levels was most lacking. Of these, visits were made to eight practices including attendance at two PPG meetings. Emailed information was received from some of those where they felt an imminent meeting was not possible for a variety of reasons, ranging from long-term sickness absence and annual leave to pending inspections by the Care Quality Commission (CQC). Nine of the practices did not respond to the first or second email follow up although some of these attended the annual event.



### The First Annual PPG Networking Event, 12th October 2016

The notes of the session, including an outline of the day, the workshops and feedback summary are attached at Appendix 2.

The event included representation from twenty-five practices with a total number of forty-nine PPG delegates. In addition, there were six CCG representatives, one from NHS England, and six from Healthwatch Wiltshire.





In particular, there was discussion of some of the key activities undertaken to date by PPGs. These include patient representatives who:

- Facilitated a change of phone system to be more user friendly.
- Attended Town Council meetings.
- Wrote the 'Did you know?' article in parish newspaper.
- Held Carers fair and produced Carers leaflet.
- Use Facebook continually trying to recruit younger people.
- Use PPG notice board in practice.
- Act as critical friend to the practice and feedback both good things and those needing improvement.
- Improved the appointment system and monitor phone and internet bookings.
- Undertake surveys using Survey Monkey and Facebook.
- Participate in working groups and focus groups for specific topics.
- Make good use of flu clinics with large numbers and a balanced group of patients.
- Work with local schools, colleges, older people's homes, and businesses to promote the practice and the PPG (anyone who will listen!) This has resulted in artwork for the waiting areas, a chance to talk about health promotion, involvement of pharmacy and inter-generational events.

- Organise Carers coffee mornings with different organisations present very well attended.
- Hold fundraising afternoon teas. (Raised over £300, used to buy equipment e.g. 24hr blood pressure monitor).\*\*
- Commented on surgery environment led to redecoration, new furniture, photo board of surgery staff.
- Organised GP lectures to cardiac patients.
- · Compiled a Practice Newsletter.
- Ask patients what things the PPG should work on.
- Assist during flu vaccination clinics.
- Supported the Practice during two CQC inspections.
- Raised funds to help purchase a new patient check-in system, high-backed chairs\*\* then promoted the new chairs, resulting in a further two being donated.
- Promote patient facing services (online appointments/repeat prescriptions etc.) 25% of patients registered and actively using online services.
- Arrange community events: coffee morning sessions to introduce patients to helpful volunteer organisations and a vintage tea party.
- Represent practice at NHS forums.
- Ensure they tell patients about how they have influenced changes.

\*\*There was a difference of opinion across the groups about whether PPGs should be involved in fundraising activity.



"Good workshops."

"Well paced, interesting and informative content."

#### **Evaluation of the Event by Participants**

The event achieved its aims of increasing the involvement of some practices and making the Patient Participation Group Network a viable proposition. There are more practices that need to be reached in order to ascertain the status of patient participation within those practices and to offer support to develop and maintain patient participation.

The agenda for the day was considered appropriate by participants and summarised feedback from them about the event is attached at Appendix 3.





#### Recommendations to CCG and Next Steps

The Patient & Public Engagement Forum meets very regularly and will evaluate the work to date during December 2016 so that all practices can be circulated with what was achieved at the annual event and asked to contribute to developing the Network of PPGs over the coming months. PPGs will be encouraged to work with one another and share learning as they develop the model of good practice across the county.

At the annual event, Marlborough PPG presented their leaflet for patients entitled *Help at Hand* which was full of useful information and contact details. Other groups were keen to do the same, and the template for the leaflet has already been shared with participants from the day. It is attached at Appendix 4, as those present were keen that all GP practices had the chance to customise a similar leaflet.



Participants shared a wide range of activity that is led or supported by patients. One of the most significant outcomes of the day was that presenters and discussion contributors inspired other practices to explore new opportunities for their own PPG. There were therefore a number of other matters that came out of the discussion sessions, including things that the CCG or Healthwatch Wiltshire could assist with:



- Help PPGs to be clear about what is not central to their work as well as what is (could be focus of a PPG networking event).
- Encourage GPs to view an annual patient survey positively (through locality GP meetings?). GPs in one practice were, "very sceptical and are now almost excited when it comes around it gives really useful information". Encourage use of Survey Monkey, which is affordable, only charges for the period it is in use, and offers a free trial.
- Encourage PPGs to assist their practices in communicating the reality for practices right now. For example, there is a shortage of GPs. Don't make excuses but do explain use noticeboards and put articles in local magazines and newsletters.
- Use PPGs to do a practice run to the CQC inspection even a walk through on the day.
- Offer training and development opportunities for PPG or potential PPG members. Healthwatch Wiltshire could assist with this through their volunteer development programme and practices could assist one another.
- Set up a dedicated and closed online group, to enable PPG representatives to chat and share with each other.
- NHS England have begun some "webinars" (seminars on the web). These could be used to support practices.

- CCG to demonstrate acceptance that the PPGs need to remain close to the patients not act as unpaid professionals so that they "keep it real" when feeding back on patient experiences.
- Help PPG representatives to understand the role of "critical friend" - that is to maintain a healthy distance but still work in partnership and "share both the palatable and unpalatable truth"!
- "Those working in the NHS find it hard to understand that much of their information is inaccessible to many".
   Healthwatch Wiltshire and the PPGs can help find solutions to some of this problem.
- A request that the CCG accepts that there are merits in a "virtual" PPG. It allows younger and working people to participate when they can. Traditional ways of communicating for many people now are not through day-time or evening face-to-face meetings. There may be merit in exploring whether all PPGs use as least some "virtual" techniques in order to broaden the age range of participants. These types of communication are often also easier for younger and older people with disabilities. Also PPGs that are currently only using "virtual" techniques, may benefit from having at least some face-to-face events even if only once or twice a year (and this could be in a park or a pub as an alternative to the surgery).





- Through their communications team, CCG can help PPGs in the use of social media.
- Could the CCG help with a PPG badge design? It would be really helpful if PPG representatives are recognised in that role when in the surgery and other patients are around, or out and about at various events.
- CCG could encourage more GPs to take an interest in their PPG and not just leave it to the practice manager. They could attend meeting or event, even if only very occasionally. (Could be encouraged through practice locality meetings?).
- Suggest that this report be shared with more than one person in every GP practice so it is more likely to be read and shared.
   Suggest practice manager, lead GP and any named PPG lead that is available; certainly all participants in the annual event.

From the requests for support from participants, the CCG can decide on the level of priority and how these are to be achieved. Those requests outlined above could form the basis of a work plan for the coming year.

#### Conclusion

There was unanimous agreement that this first event should definitely become annual. There was virtually no support for a locality-based annual PPG meeting. People preferred the idea of a countywide event so that experiences and learning could be shared across all the GP practice areas.\*\*\* This would not prevent locality groups from meeting if they would find this helpful.

Participants were enthusiastic and highly motivated, even those who felt they had been pressurised by the practice to attend rather than having any wish to do so. The day was an undoubted success and this suggests that if the Patient & Public Engagement Forum can engage with those practices that are currently proving more difficult to access, the benefits of effective patient participation will become clear.

It is now necessary to keep up the momentum. The report will be shared with every GP practice in Wiltshire and a network of names is now available for communication purposes. It may be that a short template could be sent out six-monthly to PPGs to find out how patient participation is progressing and for them to have the chance to share any new projects, concerns or questions.

A work plan will be developed by the Forum; it would be a vote of confidence in the value of PPGs if they were informed of progress and asked to check that the tasks within it remain relevant.

\*\*\*It was noted that a wider PPG audience might not have attended this event because they considered the geographical centre of the county to still be too far for them, e.g. the southern border of the county.

### Sandie Lewis Associate, Healthwatch Wiltshire



#### **Appendix 1**

### Desired Outcomes for Patient Participation Groups

The Joint Commissioners and Healthwatch Wiltshire want to see an effective PPG supporting each Practice in Wiltshire (57 in total). An effective PPG will be in a good position to:

- Help patients to take more responsibility for their health.
- Contribute to the continuous improvement of services and quality of care.
- Foster improved communication between the practice and its patient.
- Provide practical support for the practice and help to implement change.

The effectiveness of a PPG will rely on a number of factors including:

- Patient involvement (members who are broadly representative of the practice population).
- The GP practice approach to working with its PPG which is characterised by collaboration and open style of working.
- The availability of good quality information about the issues facing the practice and wider primary care.
- Training, skills and experience to deliver activities such as communications, health promotion events, engagement with patients.
- Members feeling empowered and confident about challenging the practice in a constructive and productive manner.

In the context of these high level outcomes and effectiveness factors, the work which Healthwatch Wiltshire will deliver will result in the following project outcomes:

- Increased patient participation in PPGs.
- A clear vision for a wider Wiltshire PPG Network.
- PPGs supported to become involved in a wider Wiltshire PPG Network which will deliver opportunities to share experience, provide peer support, and encourage good practice.
- A best practice model which describes what a PPG looks like and its purpose.





### Notes from Wiltshire's First Patient Participation Group (PPG) Network Event

12th October 2016 at Devizes Corn Exchange

During the morning session there was a number of presentations about PPGs and Wiltshire followed by questions and discussion. The key points of these included:

#### Welcome

Chris Reid, Lay Member, NHS Wiltshire Clinical Commissioning Group (CCG)

Why we want to support local Patient Participation Groups - A GP perspective.

Dr Peter Jenkins, local GP and Chair of NHS Wiltshire CCG

The powerful voice of patients making a difference, and linking with Healthwatch Wiltshire.

Chris Graves, Chair of Healthwatch Wiltshire

What do we know about PPGs in Wiltshire? Findings from our work so far.

Sarah MacLennan, Director of Communications & Engagement, NHS Wiltshire CCG Sandie Lewis, Associate, Healthwatch Wiltshire

PPGs in action: some examples of effective ways of working.

Salisbury, Marlborough and Purton PPG Reps

- Everyone was welcomed, it was noted this was the best attendance to date at this type of event.
- PPGs acknowledged as being a great resource.
- Introduction to Healthwatch Wiltshire was given an independent consumer champion for health and social care in Wiltshire. It has an important role in assessing the quality of health and social care services today and influencing the design of services for tomorrow. Aims to make sure that the people who use these services have a say in how they are shaped and that their overall views and experiences are heard and taken seriously.
- Recent figures showed about 4,000 missed GP appointments across Wiltshire in a month - PPGs can help get the message out there.
- Acknowledged that some issues are national and may have a political dimension. This
  may be outside the remit of PPGs, however they can support with tackling what is
  happening now.

- Representative from NHS England was present and agreed to take back national issues e.g. shortage of GPs.
- GP practices have recognised that working with PPGs can really take the pressure off, for example, support with flu jab days.
- PPGs also an excellent way of targeting people e.g. younger people.
- PPGs can help people understand modern GP practices. The myriad of people that
  people can see. People may have to wait longer to see their own GP but there are
  other people they can see.
- It would be useful to share ideas about what has been successful to reduce missed appointments. Emails/texts/ phone calls all thought to have been useful. Westbury and Giffords, Melksham have done work on this.
- · A web forum to share tips would be useful.
- Discussion about what is expected of a PPG it is not defined anywhere. Seen as a
  mechanism to deliver involvement with a commitment to the principle "nothing is
  done to me without me". PPGs support surgeries in engaging fully with the public.
  PPGs may have 'ground rules', for example must be to represent patients but can
  have variations in the things they do. PPGs act as a critical friend to GP practices.
- Representative from NHS England recognised that Wiltshire was very proactive and doing some fantastic work which can be built upon.
- It is a contractual requirement that GP surgeries have a PPG.
- CQC inspections look at how engagement is going on in GP practices this can be a challenge for some GPs and PPGs can promote this.

#### **PPGs in Action**

Three PPGs gave presentations about the work they are involved in:

#### Salisbury

- 6 members, see themselves as a voice for patients.
- Have good communication with practice team.
- · Held two carers coffee mornings with different organisations present well attended.
- Had fundraising afternoon teas. Raised over £300, used to buy equipment e.g. 24hr blood pressure machine.
- Complained about the surgery environment led to redecoration, new furniture, photo board of surgery staff.
- Organised GP lectures to cardiac patients.
- Newsletter.
- · Patients tell us what things to work on.

#### Marlborough

- Large surgery, now have active and open patient group.
- Initially partnership not keen, mentioned in 2013 CQC report.
- Wanted a varied outlook and aim to stop 'them and us' mentality.

- GP's were asked to suggest people from demographic groups and/or locations that were under-represented.
- Terms of reference of group were set up.

#### Things the group have done:

- Facilitated changing the phones and told people what they had done.
- · Attended the Town council meetings.
- Write 'Did you know?' article in parish newspaper.
- · Held carers fair and produce carers leaflet.
- Challenge is in ensuring a balance group now use Facebook continually trying to recruit younger people.
- Need to stay focused on what can do not individual issues.
- Notice board.
- Collaborative with practice a critical friend.
- Feedback good and bad.
- Have balanced out appointment system and monitor phone and internet bookings.
- Surveys use survey monkey and Facebook.
- · Working groups and focus groups have worked well.
- Made good use of flu clinics huge numbers and balanced group of patients.
- Worked collaboratively trust is important.

#### **Purton**

#### <u>Practice point of view - how the PPG support the practice:</u>

- Assist during flu vaccination clinics.
- Supported the Practice during two CQC inspections.
- Fund raising to help purchase a new patient check-in system, high-backed chairs.
- Promote the new chairs, resulting in a further two being donated.
- Promote patient facing services (online appointments/repeat meds etc.) 2364 (25%) patients registered and actively use online services.
- Hold community events: Arranged coffee morning events to introduce patients to helpful volunteer organisations & vintage tea party.
- Patient feedback/comments.
- Represent our practice at NHS forums and other local events.
- Communicate with patients in waiting rooms.
- PPG point of view How the patient group support the practice:
- Produce monthly newsletter.
- Monthly meetings conduit to the practice population.
- Keep patients informed (surgery update).
- · Designated roles for PPG members.

- Raise awareness of a number of conditions through information evenings (ten to date).
- Social media: links to promote events.

#### Future plans/ aims & objectives:

- Re-brand (G4P), re-designing our logo/ mission statement etc.
- Continue to try and have greater representation.
- Develop members roles within the group.
- Wider press & publicity.
- Investigate drop-in centre.
- Help to support some of the volunteer services.
- Further sharing of our good practices by networking with other PPGs.
- Further development patient / surgery relationship.
- · Further clarity for PPG relationship with CCG.

The afternoon session comprised three workshops addressing three separate PPG related issues

#### Workshop 1

Getting started with your PPG Facilitator: Sarah MacLennan

There were five sub questions for discussion:

#### 1. Why get involved?

How to sell the idea to patients. The main focus was on communication to inform patients of the surgery, what the PPG is for and how to become involved. The need to improve on past experiences. Meeting in the pubs was suggested.

#### 2. How to get involved?

Suggestions included mailshots to patients, articles in local paper, parish magazines etc. use of social media, questionnaires in surgery. All agreed that there was a lot of useful ideas on this topic in the three morning PPG presentations and that it would be helpful if those presentations could be shared following the meeting.

#### 3. How can the practice help?

Get GPs to promote/communicate PPG to potential nominees. Include information on PPG in new patient information packs. Have a PPG notice/information board in surgery. Photos on notice boards of those already involved in the PPG would help with awareness raising, as would having GPs as part of the PPG. Invite Practice Manager to attend PPG meetings.

#### 4. How can CCG help?

It was suggested that CCG could be more proactive in their involvement, especially promoting PPGs through the press and other media, at their level.

#### 5. How will you communicate with patients and the wider community?

In addition to some of the suggestions included in previous questions, and the ideas from the three PPG presentations, the most favoured suggestion was spreading the word via email to local groups etc.

#### Workshop 2

A virtual PPG: how to make it work Facilitator: Sue Rest

The group discussed how they had PPGs set up at present and how they could work through a virtual PPG. There were some questions as guidance for the group but these were only loosely followed.

Some areas had both PPG meeting and also a virtual network, others just had a virtual network. In some instances the virtual PPG was used to reach those who didn't want to attend meetings but still wanted to be involved, in others it was used to send around updates before the PPG meeting so that the actual meeting could be more discussion based.

Some member of the group struggled with what a virtual PPG should look like, and all thought it would be better to have physical meetings alongside a virtual group.

Some members of the group had only a virtual PPG and these as more of a mailing list to keep people up to date, there was very rarely if ever any response. Some advantages to this were identified:

- Reach a wider range of people
- · Diversity is recorded
- Easy way to send out patient surveys
- Share details about any public meetings

There was discussion about the differences between a mailing list and virtual PPG and how they could expand the PPG meetings in a more virtual way. Some PPGs had virtual members who fed back via email if they couldn't attend the meetings.

Discussed the use of social media and particularly Facebook. Some PPGs had their own FB accounts and these were used to promote events. Some areas used the local town Facebook pages to post and share information also but discussed the need for this to be managed to avoid inappropriate posting. One person explained that the security settings on Facebook pages could be set so that the public aren't able to leave comments without them first being approved.

Talked about how groups can diversify and attract their members, with suggestions made including don't call them meetings and go to where people are, i.e. talk to people in the local park/ pub.

Some surgeries had information about the PPG included on the registration form along with other information so that they could chose to get involved or receive email updates.

It was clarified that having a virtual PPG is ok and there doesn't need to be formal meetings.

Discussed how PPGs could demonstrate that their virtual PPG is meaningful and how they could encourage more engagement if they are sending out emails with limited responses.

The top 3 things we identified to feedback to the group were:

- 1. Going to where people are to engage.
- 2. Virtual PPG and PPG meetings shouldn't be separate and work best when there are elements of both.
- 3. Appropriate methods of communication should be used to reach a wide audience including social media and more traditional methods such as letter and telephone.

#### Workshop 3

Strengthening and evaluating your PPG Facilitator: Chris Reid

The group considered five discussion questions:

#### 1. What does your PPG do well?

- Discussion of how PPGs decide what to do. Surveys can give guidance. Some use
  Friends and Family results but felt that there was an expectation that they would
  get more out of Friends and Family than they did.
- Some PPGs recognise an issue from talking to people or their own personal experience.
- PPGs have done SWOT analysis (strengths, weaknesses, opportunities and threats) with both staff and patients groups.
- Gathered evidence e.g. charting wait times for appointments.
- Professional survey National Association for Patients website has a set of sample questions.
- Patients with market research backgrounds have been useful.
- Survey monkey easy to use, £20 per month (only have to pay for the months the survey is open). Can also be done in paper form and inputted. It will analyse results.
- Communications community more affable if aware of what PPG and practice are doing via newsletters, notices. It is important people know the outcome.
- Celebrate the good.
- Interact with practice open communication.
- Communicating with patients for example why there is a shortage of appointments. PPGs can be a link to patients who can spread the word.
- Email via practice. Practice emails patients of behalf of PPG recruitment email for member successful in this way.
- Can we make use of existing communications from practice and CCG?
- Fundraising Some PPG's have done a lot of fundraising, some didn't. Discussion on whether this was part of PPG role. It helps if people know where money is going. Some PPGs use fundraising to pay for things the PPG needs, some to pay for equipment that wouldn't be provided by NHS, some for patient events.
- Annual report details actions taken.
- Broaden interest via Facebook local communities now have Facebook pages.
- Go to where people are: Community Centres, play groups, give information out at Flu jab clinics.
- · Identify PPG members with ID badges.
- Could PPG deliver prescription to isolated people?

#### 2. What would you like to see improved or developed (and how)?

- Want to get more people involved.
- Different ways of getting information to the public.

#### 3. How can the practice help?

- Sending information via practice emails.
- Open and collaborative approach.
- GPs attending PPG meetings/ giving talks to patient groups.

#### 4. How can the CCG help?

- CCG is invisible to patients.
- More collaboration between PPGs and CCG.
- CCGs can provide messages that can be circulated.
- Discussion about whether Wiltshire CCGs looks at what others are doing Yes
   Wiltshire is benchmarked against others. .CCGs managed by NHS England and are closely monitored and regulated.
- PPGs can be a critical friend to CCG.
- CCGs can impose conditions of health services e.g. choice at end of life.
- Request for flyer telling people about PPGs.
- Providing information about what CCG does may combat negative attitudes.
- CCG could send out positive briefings/benchmarking these could go in PPG Newsletters.

#### 5. So what? What difference is your PPG making?

- Disseminating information.
- Giving practice constructive balanced feedback.
- 'Patient journey' can be very effective, help people see the whole picture.

#### What Next?

The group then discussed actions that they were planning to take as a result of this event. These included:

- Investigate the use of social media (the CCG communications team may be able to support with this).
- Actively target people from villages to join PPGs.
- Photo board of all staff/ PPG in practice.
- PPG ID Badges.
- Move PPG meetings to the pub.
- Notice board partnership between GP practice and PPG to give (legitimacy to PPG).
- PPGs to organise tours of GP practice.
- Ensure GP is at PPG meeting.
- Information leaflet (one example will be shared).
- Web forum for Wiltshire PPGs.
- Future meetings like this majority of the group thought an annually one for the whole of Wiltshire would be best.

#### Appendix 3

#### PPG Network Event, 12th October 2016 Evaluation Feedback

Main themes in terms of positive, negative and constructive feedback including any suggestions for improvement.

#### **Positive**

- · Great range of representation
- Well-paced; content interesting and informative; open, positive, receptive
- Good central location, great improvement over a localised event
- PPG in action presentations
- Good workshops
- · Networking, sharing ideas, experiences and information
- Communication with HWW and CCG

#### **Negative**

- Long way from car park for those less mobile
- PA system didn't work and acoustics meant that could not hear some questions/ answers
- (A workshop) too 'leader led'
- Constant use of jargon and initials was confusing

#### Constructive improvement

- Please make this a regular event
- Something educational next time? E.g. how the Health Service works; pyramid of NHS down.
- Provide handouts on the day
- · Share contact details
- Publicise good practice in the press?
- More time on surgery stories and round-table discussions
- Keep workshops on subject and focused
- Better communication (e.g. CCG to PPG); more notice of the event and earlier feed-back would be helpful
- PPG members could attend without surgery representation

#### Appendix 4

#### Marlborough PPG Leaflet for Patients

HELP AT HAND



## Call 111 if you:

- need medical help fast but it's not a 999 emergency
- think you need to go to A&E or need another NHS urgent care service
- don't know which medical service to need health information or

## smergencies, continue to call 999. For immediate, life-threatening

reassurance about what to do next



rel: 116 123

Website: www.samaritans.org

Talk to the Samaritans any time you like, in your own way, and off the record about whatever's getting to you.

# The Silver Line

A helpline for older people in the UK

older people, open 24 hours a day, every information, friendship and advice to A free confidential helpline providing Website: www.thesilverline.org.uk day of the year.

# My Notes, My Numbers:

Marlborough

My Electrician:

My Gas Engineer:

Patient Participation

Practice

Medical

Group (PPG)

My Plumber:

# **KEY NUMBERS IN A**

CRISIS



Remember to dial 999 in the event of an emergency medical situation

My Doctor: Marlborough Medical Practice

Tel: 01672 512187

George Lane

Wiltshire, SN8 4BY Mariborough,

Website: www.marlboroughdoctors.org.uk

If you are, but you are not registered as a Carer with the practice, you can ask at reception and they will provide you with a short form to fill out. Produced by the Marlborough Medical Practice Patient Participation Group. September 2016

# **Emergency Utility Numbers**



# ELECTRICITY (Southern Electric)

Tel: 08000 72 72 82 Tel: 0345 072 1905 If using a mobile

Website: www.ssepd.co.uk

# Power cut or emergency:



eg if you smell gas): Tel: 0800 111 999 (national gas emergency service). Wales & West Utilities

Website: www.westutilities.co.uk

actions you should take if you This will tell you immediate smell gas.

Thames Water Emergency or leak Tel: 0800 714 614

Sewer blockage

Website:

www.thameswater.co.uk

Wessex Water Leak Tel: 0800 692 0692

Tel: 0345 600 4600 Sewer blockage

Website:

www.wessexwater.co.uk

Floodline

Tel: 0345 9881188

# Other Useful Numbers

# Adult Social Care (Wiltshire Council)

Tel: 0300 4560111

Monday - Thursday 8.30 - 17.20 Friday - 8.30 - 16.20

living. If concerned about a vulnerable person, Advice on benefit support and independent not in immediate danger, and outside the above hours call: 0845 607 0888

Website:

www.yourcareyoursupportwiltshire.org.uk



### HandiHelp

gas), decorating, ramps, rails and Odd jobs (not white goods or adaptation. Charges usually apply.

Tel: 01380 735555

# Wiltshire Farm Foods

Caters for all health and dietary needs with ready frozen meals. Tel: 0800 077 3100

Villshire Farm Foods

www.wiltshirefarmfoods.com Website:

## **Bobby Van Trust**

Free home security and fire safety service for older, vulnerable and disadvantaged people.

Tel: 01380 861155

Website: www.wiltshirebobbyvan.org.uk



Advice and Information for 50+

- claiming extra financial help
- accessing and paying for care and housing
- nail cutting services
- befriending services
- Trade person list

Tel: 01380 727767

Website:

www.ageuk.org.uk/wiltshire

### Independent Living Centre Tel: 01380 871007



Monday-Friday 9.00-16:30

Website: www.silc.org.uk

St George's Road Semington Address:

Wiltshire, BA14 6JQ

#### Why not get involved?

Visit our website: www.healthwatchwiltshire.co.uk

Email us: info@healthwatchwiltshire.co.uk

Phone us: 01225 434218

Write to us: Unit 5, Hampton Park West, Melksham, SN12 6LH

Follow us on Twitter: @HWWilts

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