

Patient Participation Group Application Form

What do you think you can bring to the group?

When you have completed this section, please tear off and return to the surgery

South Saxon House Surgery
150A Bexhill Road
St Leonards on Sea
East Sussex
TN38 8BL

Or hand this slip in at surgery reception



South Saxon House Surgery

Patient Participation Group

WEBSITE
www.southsaxonhousesurgery.nhs.uk

SOUTH SAXON HOUSE SURGERY
150A BEXHILL ROAD
ST LEONARDS ON SEA
EAST SUSSEX
TN38 8BL

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**You can help to shape patient
services at your GP Practice.**

Purpose of the Patient Group at South Saxon House Surgery

Patient Participation Group



We are looking to have an active group of approximately 10 patients, plus practice staff. The group would hope to meet at the surgery once every 2 months at varying times of the day.

We believe that the group is invaluable in acting as an interface between patients and the practice, working proactively to improve services.

The groups aims include:-

- exchange of ideas to improve the patient experience
- discussions regarding new patient services
- To act as a forum to feedback to the practice suggestions for improvement to services provided to us (patient services, the organisation and to the building and premises)

The group is happy to welcome all patients, particularly those with young families or patients of working age.

We are looking for patients in any age group, but particularly those with young children or teenagers, carers, patients with a disability, as well as those with long term conditions (such as asthma, hypertension, heart disease, kidney disease, diabetes) who may regularly use the services of the practice.

MISSION STATEMENT

To provide a link between patients, doctors and the surgery

To encourage patients to be more aware of their own health

To encourage health education activities within the Practice

To undertake fundraising activities to provide extra facilities for the Practice and patients

To act as a representative group to influence the local provision of health and social care

Application to become involved

I would like to help shape the future of patient services at South Saxon House Surgery, please include me in the following groups:-

- Patient Participation Group (I can attend meetings)
- Patient Reference Group (Please contact me via e-mail)
- Both Groups

Name

Address

Postcode

Phone Number

E-Mail Address

Occupation

Signature

Date

By signing the above, I give consent to be contacted in order to support South Saxon House Surgery as and when required with regard to Patient and Public Involvement.

Please note that these groups are **NOT** intended for individual patients personal medical problems.
The Practice will ensure that members details are held securely and not used for any other purpose than described above.

Please turn over