** Watling Street Practice**

**Patient Participation Group - Terms of Reference**

The Group shall be called the *Watling Street Practice Patient Participation Group* (WSP PPG)

**1. Aims of the WSP PPG**

**1.1** To foster positive relations between the practice (referred to as the 'practice' throughout this document) and its patients by sharing patient experience, interests and concerns and providing feedback on current services and proposed developments.

**1.2** To work collaboratively and positively with the practice to improve services and facilities, acting as a sounding board on patient related matters

**1.3** To promote two-way communication and co-operation between the practice and patients, other individuals and organisations in healthcare, and the wider community

**1.4** To represent patients in influencing local health and social care provision

**2. Structure and Membership**

**2.1** **Membership Categories**

**Core Members** – Will be restricted to 20 people

**Associate members** – Unlimited number, forming the Associate patient participation Group (APPG)

All registered patients may apply for membership of the WSP PPG. Patients removed from the practice list will automatically cease to be a members

**2.2 Application Process**

Applicants may indicate a preference to be a Core Member and, if desired, express willingness to take on a Committee role i.e.by indicating which roles they are prepared to fulfil. The practice will prioritise ensuring at least two candidates are willing to take on each Committee role before filling remaining Core Member spaces.

If applications exceed 20, Core Members will be selected by random draw. Others will be placed on a waiting list.

**2.3 Terms of Membership**

* Core Members will serve a term of three years and may reapply upon term completion.
* The membership year will run between January to December
* Members joining mid-cycle may be required to reapply earlier to maintain rotation.
* Members absent for three consecutive meetings without contact may be deemed to have resigned.
* The PPG may co-opt individuals from the waiting list to maintain representation and diversity.

**2.4 Committee Roles**

The Committee, elected from Core Members, will include a Chair, Vice Chair, Secretary and APPG Liaison. Additional roles may be proposed and approved at the Annual General Meeting.

**2.5 Removal of Members**

Core Members may be removed following a warning if they breach the Code of Conduct (Appendix 1), subject to agreement by the Chair and nominated Practice Representative.

***3. Associate Patient Participation Group (APPG)***

*3*.1 The APPG will be an online group open to all patients. It will be used to extend engagement and gather views on specific issues.

3.2 A Core Member will be designated to liaise with the APPG and ensure inclusivity. APPG feedback will be included as a standing item on PPG meeting agendas.

3.3 APPG members are subject to the same Code of Conduct as Core Members.

3.4 A central email address will be provided for communication, with access granted to nominated PPG members.

3.5 By joining the PPG or APPG, members consent to their email address being shared with other Core Members for communication purposes only.

**Appendix 1 – Code of Conduct**

The PPG is a non-political, non-sectarian group, open to all, and committed to diversity and inclusion as outlined in the Equality Act.

All PPG and APPG members agree to:

A. Not use the PPG to raise personal complaints—these should be handled via appropriate channels.
B. Treat others with respect and act in the interests of all patients.
C. Be open, flexible, and supportive.
D. Adhere to the Nolan Principles of Public Life:

* *Selflessness, Integrity, Objectivity, Accountability, Openness, Honesty, Leadership.*

E. Respect patient and practice confidentiality.
F. Accept the Chair’s ruling on meeting conduct.
G. Notify the Secretary in advance if unable to attend a meeting (Core Members).

Additional expectations for good meeting conduct:

1. Read papers in advance.
2. Arrive on time.
3. Silence mobile phones.
4. Allow others to speak and be heard.

**Appendix 2 – Meeting Structure**

1. Meetings will follow a structured agenda published on the practice website.
2. Meeting length will be no more than 90 minutes
3. Summary notes (actions and updates) will be published online post-review by the Chair.
4. Previous meeting notes will be reviewed at the next meeting.
5. Meetings will be held quarterly (4 times per year).
6. Meeting dates will be agreed at the first meeting of the calendar year,
7. Virtual attendance support will be provided by the practice**.**
8. Meeting agenda will be available to Core Members 2 weeks prior to the meeting date.