



Patient Participation Groups (PPGs)

Derby and Derbyshire





Section 1 - Introduction:

Patient Participation Groups (PPGs) represent the patient population of GP Practices and are generally made up of a group of volunteer patients, the Practice Manager, and one or more GPs. They meet to discuss the services on offer, and how improvements can be made for the benefit of patients and the Practice.

GP Practices have a contractual obligation to have a PPG as stated within the Standard General Medical Services Contract Standard General Medical Services Contract (clause 5.2):

- 5.2. Patient Participation
- 5.2.1. The Contractor must establish and maintain a group known as a "Patient Participation Group" comprising some of its registered patients for the purposes of:
 - (a) obtaining the views of patients who have attended the Contractor's practice about the services delivered by the Contractor; and (b) enabling the Contractor to obtain feedback from its registered patients about those services.
- 5.2.2. The Contractor is not required to establish a Patient Participation Group if such a group has already been established by the Contractor in accordance with any directions about enhanced services which were given by the Secretary of State under section 98A of the 2006 Act before 1st April 2015.
- 5.2.3. The Contractor must make reasonable efforts during each financial year to review the membership of its Patient Participation Group in order to ensure that the Group is representative of its registered patients.
- 5.2.4. The Contractor must:
 - (a) engage with its Patient Participation Group, at such frequent intervals throughout each financial year as the Contractor must agree with that Group, with a view to obtaining feedback from the Contractor's registered patients, in an appropriate and accessible manner which is designed to encourage patient participation, about the services delivered by the Contractor; and
- 5.2.5 review any feedback received about the services delivered by the Contractor, whether by virtue of clause 5.2.4(a) or otherwise, with its Patient Participation Group with a view to agreeing with that Group the improvements (if any) which are to be made to those services.
- 5.2.6 The Contractor must make reasonable efforts to implement such improvements to the services delivered by the Contractor as are agreed between the Contractor and its Patient Participation Group.

PPG groups are vital in ensuring the patient voice is heard as they provide an opportunity for local people to get involved and influence the provision of local health services.

The role of a PPG can include:





- Being a critical friend to the Practice
- Advising the Practice from a patient perspective and providing insight into the responsiveness and quality of services
- Encouraging patients to take greater responsibility for their own and their family's health
- Carrying out research into the views of those who use the Practice
- Organising health promotion events and improving health literacy
- Regular communication with the Patient population.

> Joined Up Care Derbyshire (JUCD) Patient Participation Group (PPG) Network:

In Derby and Derbyshire, there is a JUCD PPG Network that meets bi-monthly for 1.5 hours (via Microsoft Teams) and it is facilitated by the Integrated Care Board (ICB) Engagement Team. It was originally set up to:

- Bring together PPG Chairs and their members to understand what support is needed to help them engage and communicate with their Practice population
- Be a place for PPGs to learn and keep updated on the developments within the system.

However, over the last 12 months the Network has undergone developments to ensure it is also a place where members can share learning and best practice. There are approximately three items on the agenda at each meeting:

- 1. **Update around system changes or transformation projects, and members of the Network are encouraged to suggest topics.**These have included topics such as Integrated Care System (ICS) updates, information about the Urgent Treatment Centre review, information about social prescribing, Dronfield Medical Practice PPG sharing an example of how they have engaged with their practice population to inform service developments, and a discussion about Medicines Order Line etc
- 2. **Update from the Primary Care Quality Team.** This is a standing item and provides key updates for the Network and members are encouraged to suggest any specific topics they would like an update around
- 3. **Sharing learning and best practice.** The Network is currently in the process of being developed to ensure it is a place for members to share, learn, and help one another and ensure PPGs have the support they need to run their PPG and effectively engage with their Practice population. This time can also be requested by PPGs to share work or recent successes.

PPG Survey:

As part of the JUCD PPG Network development, members wanted to hear from all PPGs across Derby and Derbyshire to:





- 1. Understand what support is needed to help PPGs meaningfully communicate and engage with their Practice population.
- 2. Provide an assessment/baseline of the status of patient engagement in a GP Practice/PPG.
- 3. Identify where good practice engagement might be found.
- 4. To provide the JUCD Public Partnership Committee with an assessment of engagement in PPGs. The Public Partnership Committee sits below the ICB and the Integrated Care Partnership (ICP). It is designed to assess risk and seek assurance in relation to the delivery of statutory duties to inform, involve and consult patients and members of the public.

Methodology:

The survey was live between 30 January and 6 March 2023 and it was co-produced by the PPG Network members with the support and input of Healthwatch Derbyshire and the ICB Engagement Team. Paper copies were available on request, and it was shared via:

- The JUCD PPG Network distribution list
- ICB Primary Care bulletin
- ICB staff and stakeholder bulletin
- Local Medical Council (to share via their bulletins)
- ICB Primary Care Quality Team (to share with relevant contacts).

Based on the above circulation methodology, each Practice Manager and/or PPG should have been aware of this survey and its purpose. The findings from the survey will help the JUCD PPG Network to understand and evidence the current position of PPGs locally and used to develop and share learning/resources across the Network. We intend to repeat this survey at regular intervals (12 – 18 months) to continually get an upto-date snapshot, it will therefore be important moving forward to explore opportunities to increase uptake of this survey and/or to understand if there is any learning, we can take to inform our approach in the future.

> Findings

This report provides an overview of the findings from a Derbyshire wide perspective and for some questions Primary Care Network (PCN) level data has been provided to aid joint working across PCN areas which many members of the PPG Network have expressed an interest in. PCNs are groups of GP Practices based around a GP registered list of approximately 30,000 - 50,000 patients, bringing Practices together in order to offer care on a scale which is small enough for patients to get the continuous and personalised care they value, but large enough to be resilient, through the sharing of workforce, administration and other functions of general Practice (see Fig.1 for a map of PCNs and appendix.1 for Practices within each PCN).





Disclaimer

It is important to note that not all respondents answered all the questions within the survey, so it is key to take this into consideration with regards to the data provided within this report. It is also important to note as multiple responses were submitted from the same PPG/Practice:

- In cases where all responses for the same PPG/Practice were the same only one submission has been used
- In cases where the responses were different the average from each individual PPG/Practice has been used
- In cases where there were two responses from a PPG/Practice that were different, both have been used.

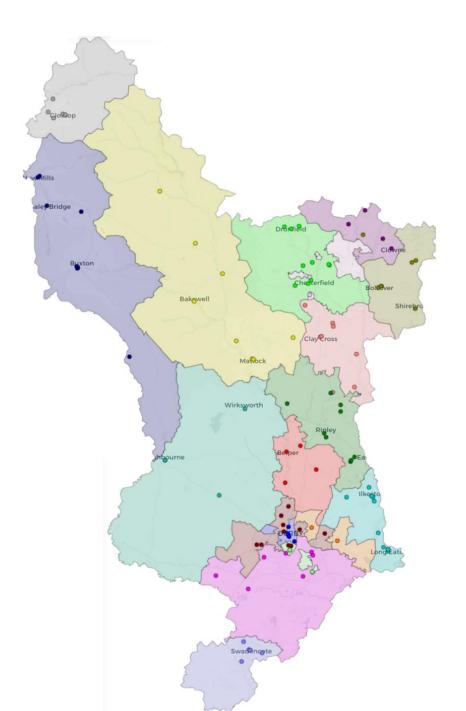
Fig.1 - A map of Derby and Derbyshire PCNs





PCN Key (Population)

- Alfreton, Ripley, Crich & Heanor (85,267)
- Belper (45,922)
- Chesterfield & Dronfield (101,973)
- Derby City North (68,206)
- Derby City South (100,239)
- Derbyshire Dales (49,778)
- Erewash (102,186)
- Glossop (33,424)
- Greater Derby (96,530)
- High Peak & Buxton (61,403)
- North Derbyshire (32,565)
- North East Derbyshire (40,372)
- North Hardwick & Bolsover (50,743)
- Oakdale Park (39,850)
- PCCO (45,918)
- South Dales (32,568)
- South Hardwick (68,457)
- Swadlincote (58,222)







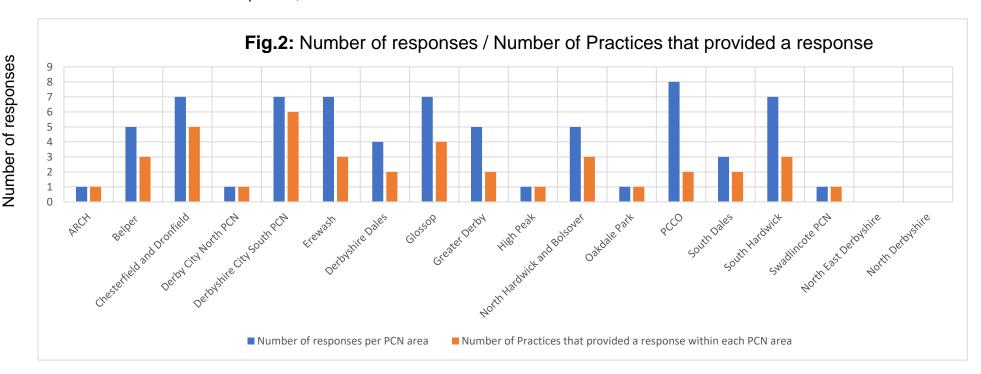
Section 2 - Findings

General

Number of responses:

In Derby and Derbyshire, there are 113 GP Practices, and 107 active PPGs. A total of 70 responses to the survey were received, which included 41 different Practices and PPGs (38%). Multiple responses were encouraged to hear different points of view and therefore in some cases multiple response from a single PPG/Practice were received.

Fig.2 shows how many survey responses were received per PCN area, alongside the number of different Practices we heard from per PCN area. As demonstrated in Fig.2 some PPGs/Practices submitted individual/multiple responses i.e. for example in Chesterfield and Dronfield PCN we received a total of 7 responses, from 5 different PPGs/Practices.

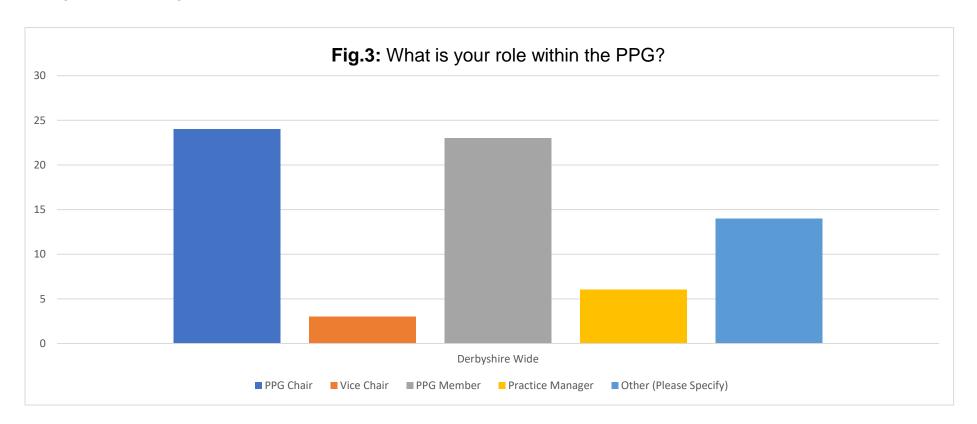






Roles within the PPG:

Majority of the responses to the survey were made by the PPG Chair (34%) and PPG Members (33%). Approximately 20% of survey respondents indicated 'other' in which other roles included, being a patient of the Practice, Operations Manager, Secretary, Former Chair and Managers Assistant (Fig.3).





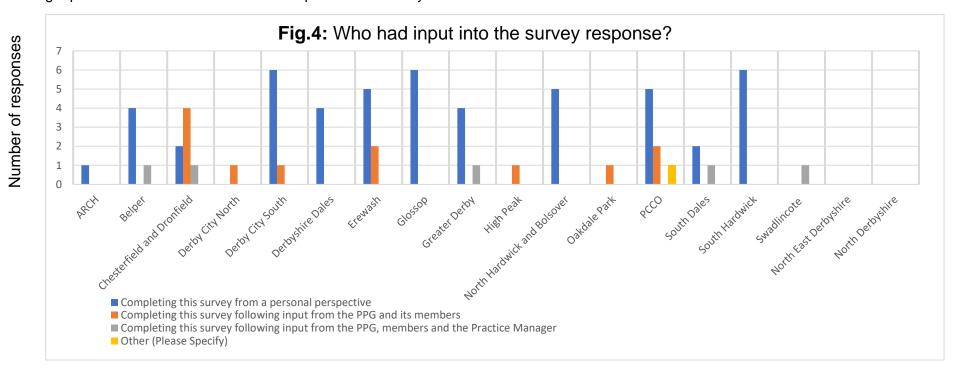


Input into the survey submission:

This question was intending to try and understand if there was difference in opinion between a PPG and the Practice. However, only 9% of responses were exclusively from a Practice perspective and therefore it would be difficult to provide a comparison in opinion thus the overwhelming majority of this report comes from a PPG point of view.

- Personal perspective (74%)
- Following input from the PPG and its members (16%)
- Following input from the PPG, its members, and the Practice Manager (10%).

Fig.4 provides a breakdown of who had input into the survey submission across each PCN area.





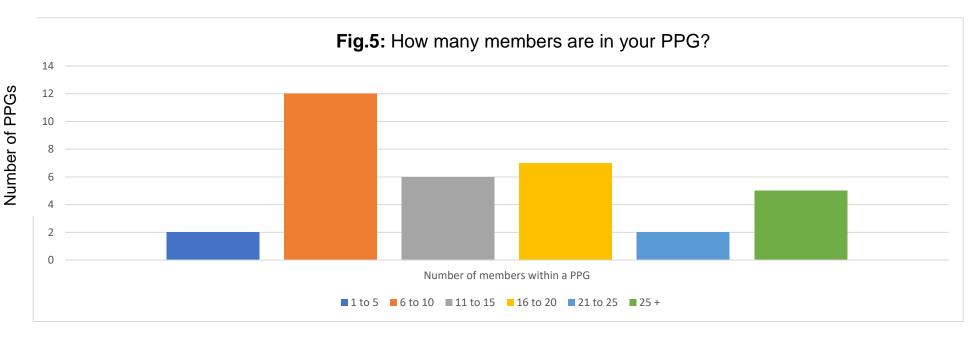


Understanding the setup of your PPG:

Number of members within a PPG:

With regards to how many active members are within a PPG across Derby and Derbyshire the number varied considerably, some PPGs had 3, whereas another had 950 members. From the survey responses most have between 6 and 10 active members within their PPG (Fig.5). It is important to note that:

- Not all respondents answered this question
- This question had a 'free text' response, and therefore categories in Fig.5 were created to enable the data to be presented in a graph format
- Some of the numbers provided were estimates
- For some Practices the survey has been completed multiple times by different individuals and in some cases different numbers were
 provided for the same PPG therefore the average was taken for each Practice response.

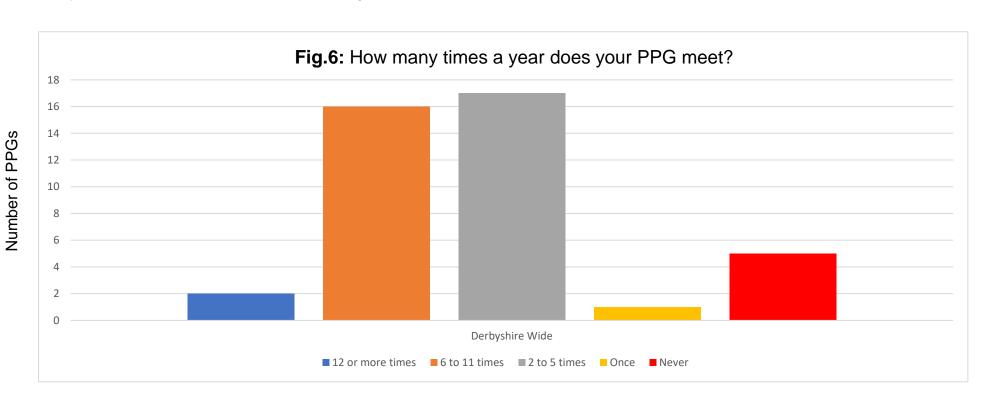






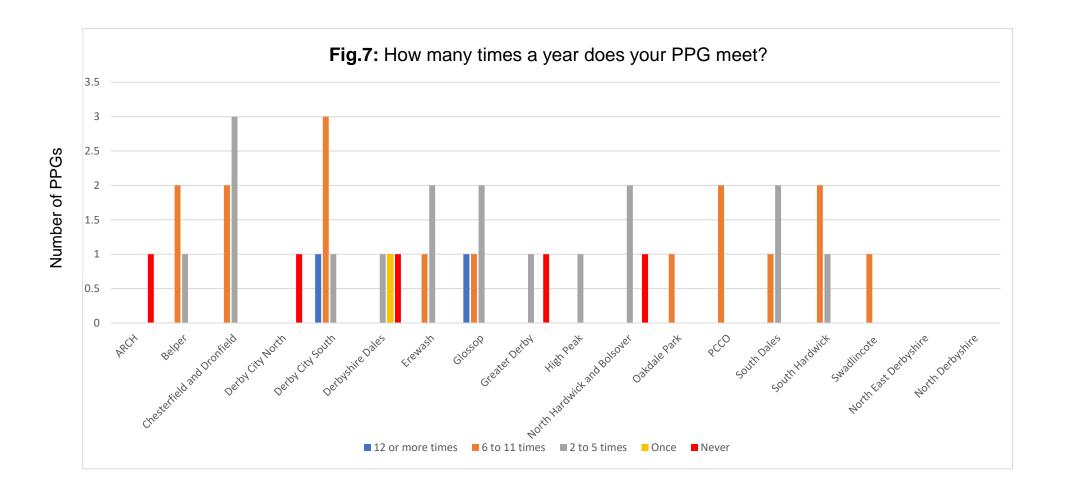
Frequency of PPG meetings:

In terms of how many times a year PPGs meet (Fig.6), 41% said they meet between 2 to 5 times per year and 39% meet between 6 to 11 times. However, 12% stated that their PPG does not meet and this included Practices from ARCH, Derby City North, Derbyshire Dales, Greater Derby and North Hardwick and Bolsover PCN (Fig.7).







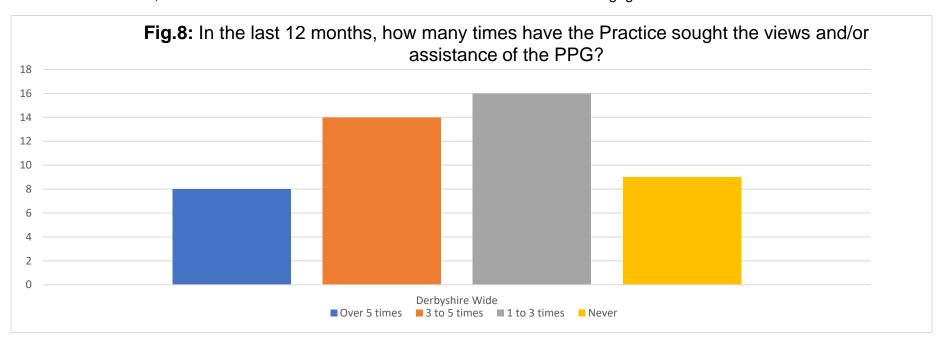






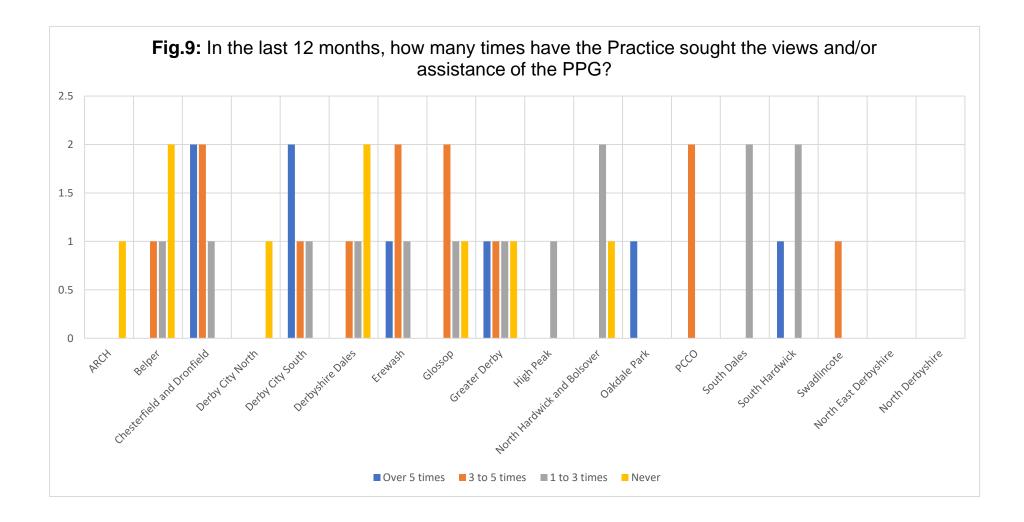
Practice seeking the views and/or assistance of the PPG:

It was important to understand how engaged Practices are with their PPG. As indicated in Fig.8, 34% said their Practices have reached out to their PPG 1 to 3 times, however 18% said the Practice have never reached out or tried to engage with their PPG.









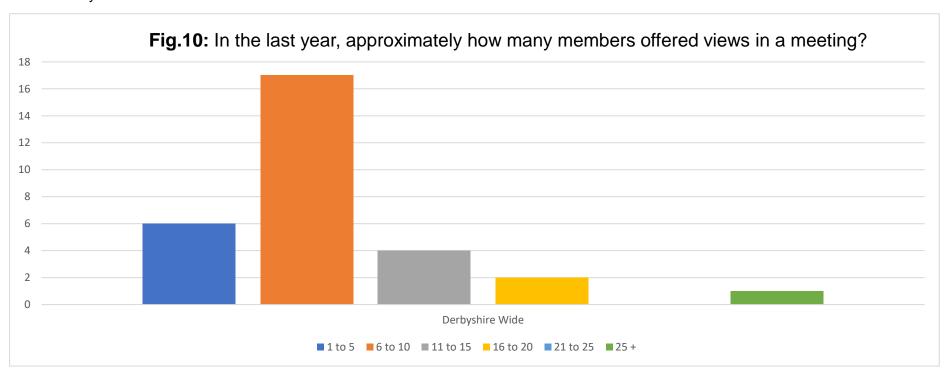




Members offering views in a meeting:

It was asked, how many members offered views in a PPG meeting to provide an indicator of how many 'active' members they have. As indicated in Fig.5 (above on page.10), approximately 50% of PPGs have between 6 and 10 members and as demonstrated below (in Fig. 10) 57% of responses said they have 6 and 10 active members.

> Derbyshire wide:







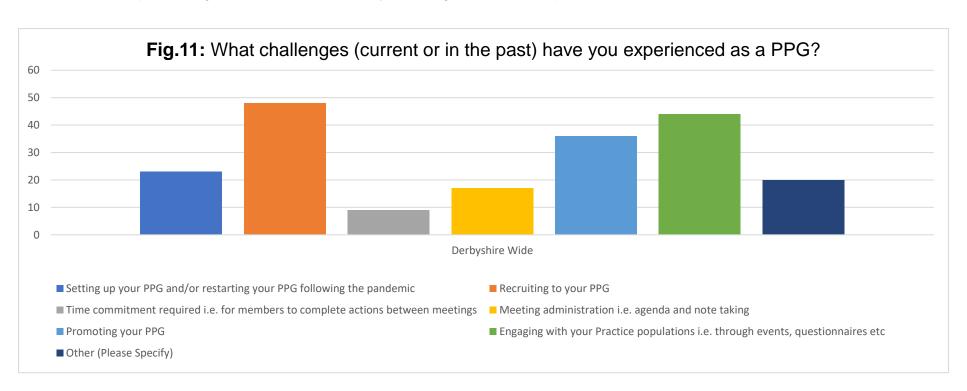
Challenges (current or in the past) experienced by PPGs:

Full responses are shown below in Fig.11 and 12, however the top 3 challenges PPG experience are:

- 1. Recruiting to their PPG (78%)
- 2. Engaging with their Practice populations i.e. through events, questionnaires etc (72%)
- 3. Promoting their PPG (58%).

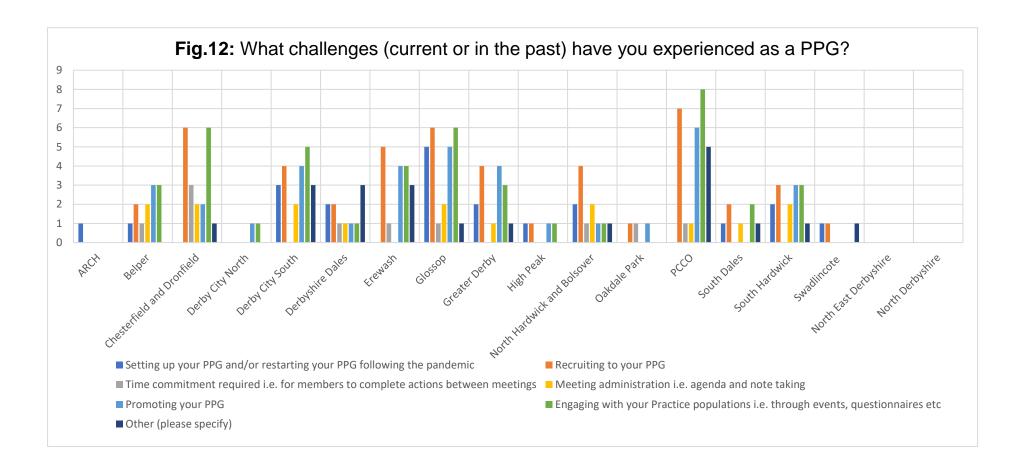
In terms of Fig.11 and Fig.12 'Other' challenges included:

- 1. Lack of support and engagement from the Practice
- 2. Membership not being diverse and not accurately reflecting the Practice Population.













Things that work well within PPGs:

This was answered via free text and 55 responses were received in total. Six main themes emerged from the free text which included:

1. Positive relationship and support from the Practice:

- "Being a critical but supportive friend to the Practice not just a critic" (Chesterfield and Dronfield PCN).
- "There is a very positive attitude in our PPG towards assisting the Practice with hands on events such as vaccination programmes and Clinics" (Derby City South PCN)
- "Excellent relationship with the Practice Manager and staff creates a sense of working together" (Erewash PCN)
- "Concerns/ideas and suggestions raised to the Practice are taken seriously and acted upon for the following meeting" (Glossop)
- "The patient education events held jointly by the Practice and PPG are always very well attended" (Oakdale Park PCN)
- "Ability to converse with Practice on any relevant subject and receive information from them" (South Hardwick PCN).

2. Attendance from Practice Managers, Doctors and Practice staff at PPG meetings:

- "Regular meetings always with a doctor and or the Practice manager present" (Erewash PCN)
- "We always have a GP as well as the Practice Manger present at meetings" (Greater Derby PCN)
- "Meetings with GP and assistant practice manager present" (High Peak PCN).

3. Involvement in decision making within the Practice:

- "The PPG is actively involved in the decision-making process and helps in the day-to-day work of the Practice. They (the PPG) ask searching questions, look at Practice data (with the Practice Manager sometimes) and ensure the patient voice is heard" (Chesterfield and Dronfield PCN)
- "Surgery always advises us of current changes in the Practice and often consults us on how we think these changes should be put into practice" (Erewash PCN)
- "Being listened to and taken notice of, being encouraged to take part in the work of the Practice" (South Hardwick PCN).

4. Motivated Chair and members within a PPG:

- "The PPG chair is highly motivated to seek representation from the Practice patient population and is very active in the locality. His drive and energy are to be commended" (Chesterfield and Dronfield PCN)
- "Resilience & longevity of members" (Greater Derby PCN)
- "Having an enthusiastic and talented chairman and secretary" (PCCO)





- "Our chair, Vice-Chair and secretary are excellent at keeping us informed. The secretary produces and distributes excellent minutes and passes on messages from the surgery. They seek our views, including for this survey, and the secretary has loaned equipment to the surgery to help the patients who join using Teams to have a better experience" (PCCO)
- "We have a very supportive group who are committed to their Practice and who provide honest feedback" (Swadlincote PCN).

5. Clear roles and duties within a PPG:

- "The vice chair puts together the newsletters and meeting notes and we have an active website PPG workgroup that pretty much manages the content on the website, ensuring that it is up to date and easy for patients to understand. The value that the PPG add is huge. I wouldn't want to be without them" (Chesterfield and Dronfield PCN)
- "Recruiting and involving members by being clear on practical things they can do, e.g help with the newsletter production, short surveys, and website management" (Chesterfield and Dronfield PCN).

6. Gathering insight from the Practice population to feed into, and inform work of the PPG:

- "Using well written and well promoted short sharp question(s) to gain significant Practice population views on Practice proposals (200 vs 10 PPG members)" (Chesterfield and Dronfield PPG)
- "An annual survey of patients (about 20 questions, 2 sides A4) provides useful data from sample of about 100" (Erewash PCN)
- "Sending out questionnaires for feedback and ideas" (North Hardwick and Bolsover PCN)
- "The Friends and Family feedback is well responded to and we are able to analyse the feedback to look for specific trends or concerns" (Oakdale Park PCN).



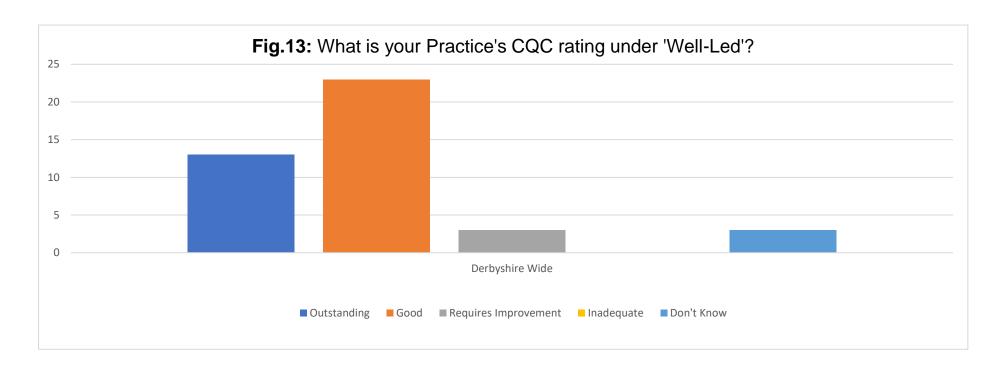


> Practice engagement:

Practice's CQC rating under 'Well-Led':

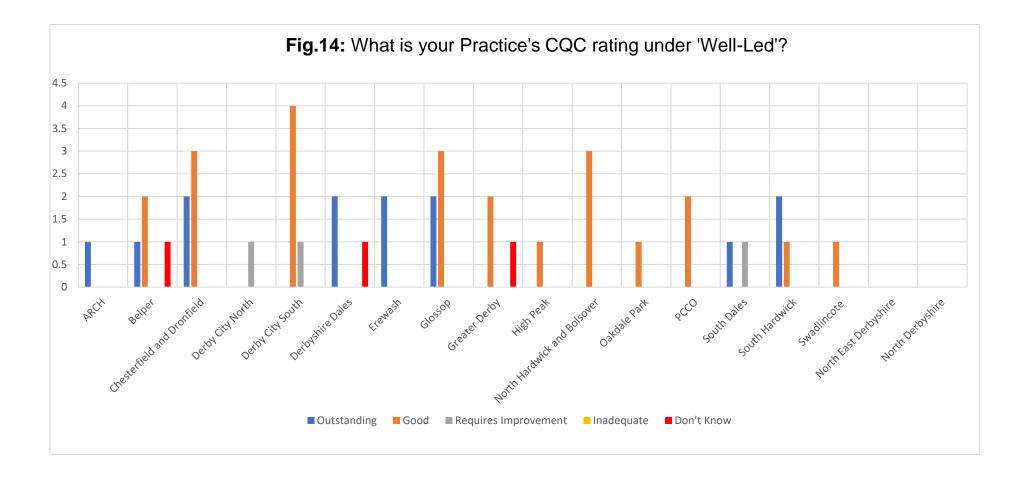
By 'well-led' the CQC means that the leadership, management and governance of the organisation assures the delivery of high-quality care for patients, supports learning and innovation, and promotes an open and fair culture.

As shown in Fig.13, 55% of Practices were rated as 'good' under 'well-led.' Fig.14 provides PCN level data.







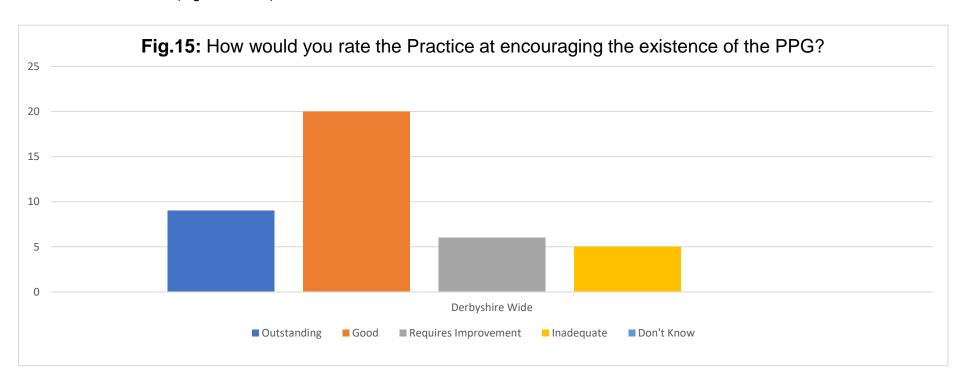






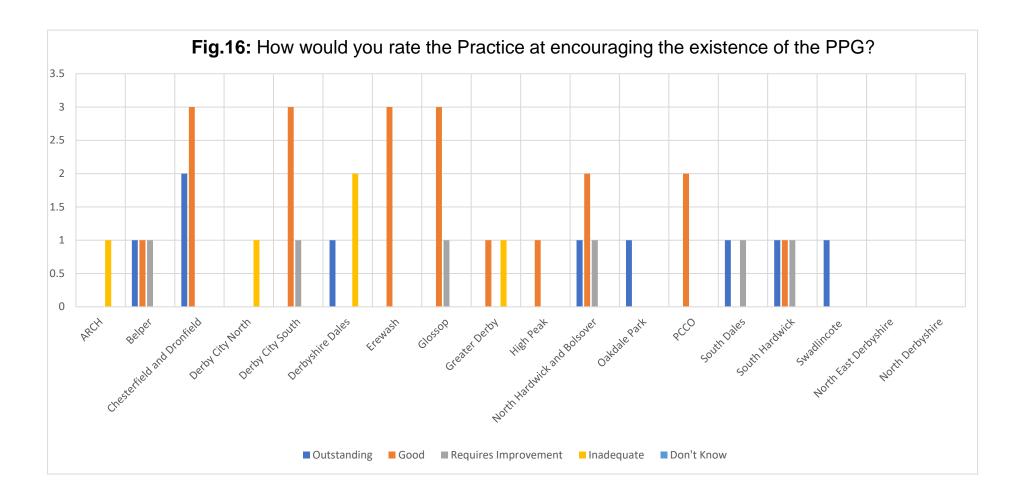
Practice encouraging the existence of the PPG:

It was key to understand how PPGs would rate their own Practices at encouraging the existence of a PPG. 50% of people rated their Practice as *good*, compared to 23% who rated their Practice as *outstanding*, in which many of the comments related to truly working together with the Practice, having representation from either a Doctor, Practice Manager or Practice staff at every PPG meeting and genuinely feeling involved in the work of the Practice (Fig.15 and 16).













Respondents were asked to explain the reason for their rating with regards to 'How would you rate the Practice at encouraging the existence of the PPG' in which comments included:

1. Outstanding:

- "The practice manager and a doctor always attends our meetings. Always willing to share and seek input from the PPG on developments and changes. The Social Prescriber also regularly attends and adds to the discussions" (Oakdale Park PCN)
- "We have always had support from the Practice, there is always a doctor and or a practice manager present. If we wish to discuss a
 topic the practice has always arranged for someone to talk about it. We have also had meetings with various members of staff to
 talk about their role within the practice" (Erewash PCN)
- "The practice manager and a GP partner always attend our meeting and there is a two-way flow of ideas and requests. The practice is open to improvement suggestions and we often discuss overall practice issues" (Chesterfield and Dronfield PCN)
- "As a group we feel involved in the work of the practice. We have been actively consulted in a wide range of practice issues and our views have been taken notice of. It helps us to feel a part of the work that is done for the good of all the patients. It also helps us to understand the pressures that face an everyday GP Practice throughout the year. This is just how a support group should feel" (South Hardwick PCN)
- "The Practice has always had a close working relationship with the PPG. The Practice has adopted recommendations made by the PPG and the PPG has undertaken specific actions to support the Practice. We work together to represent our views when asked at ICB level" (Chesterfield and Dronfield PCN).

2. **Good**:

- "The Practice gets involved in PPG meetings, including them being held using Teams, as well as on site. They don't, however, seem to be particularly good at responding to suggestions or answering specific questions. Behaviours which prevent them from being rated as outstanding" (PCCO)
- "Generally, the Practice Management are very supportive to our PPG but sometimes due to intense pressure they do not act as they should, for example, they attend late at Meetings and fail to communicate as thoroughly as they should" (Derby City South PCN)
- "We have actively promoted our new PPG via social media, the website, our patient registration forms. We have engaged with the ICB for ideas and suggestions, we have met with PPG chairs from elsewhere in the county to seek their advice. We have established a PPG meeting based on the medium most highly requested (i.e. online) at a time/date most convenient for patients" (North Hardwick and Bolsover)
- "The intention is good but the how it is done is rather confusing. Often feels a bit cursory" (Glossop PCN).
- "We already get a great deal of support and encouragement from our practice manager, [named] including the fact that during the pandemic and in spite of 'official' guidelines suggesting GP practices did not need to continue PPG meetings and engagement, [named Practice] not only stayed open for patients but also 'stayed open' for regular PPG meetings online via Zoom".





3. Requires improvement:

- "Practice has difficulty in finding time to meet the PPG. Concerns that they are unable to address inclusion as they are only available during the day" (Derby City South PCN)
- "Last two meeting cancelled by Practice" (South Dales PCN)
- "One needs to consider that there was only fractured support when the latest version of primary care was drawn up and it appears no resources were allocated to it" (South Hardwick PCN)
- "They are keen to have a PPG but we have felt like there has been minimal actual traction for some time due to the problems experienced in the practice" (South Dales PCN)
- "Keep delaying face to face meetings" (Glossop PCN).

4. Inadequate:

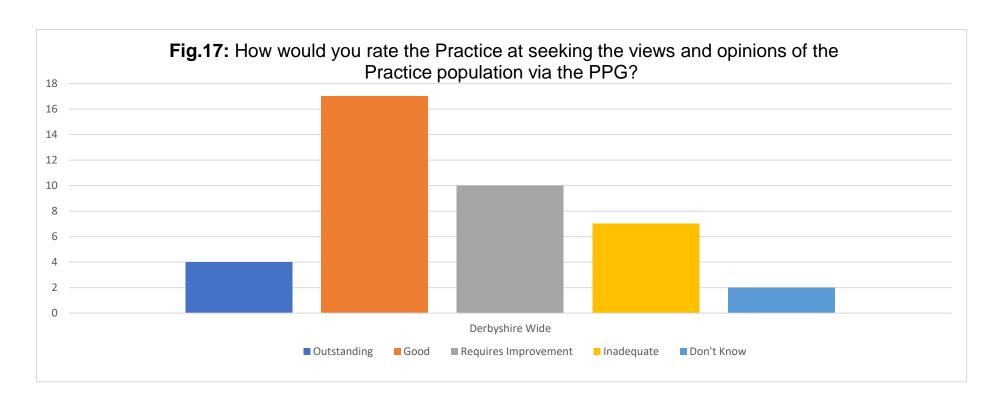
- "Defensive attitude and an iterative process for addressing suggestions made by PPG members, without any change. A lack of support for making progress and assisting with developing the PPG. Lack of consultation & active engagement eg no actual dialogue...more one way updates on Practice challenges" (Greater Derby PCN)
- "Cannot get anyone to take the PPG serious. Been trying for over 2 years" (Derby City North PCN)
- "Difficulties in calling meetings and getting Practice involvement with the PPG" (Derbyshire Dales PCN)
- "Constantly offering the Practice our help but totally disinterested in our offers despite many patients having very negative views of the surgery & expressing concerns about an upcoming merger with another Practice. Both areas PPG members could be extremely useful. A real missed opportunity by the Practice" (Glossop).





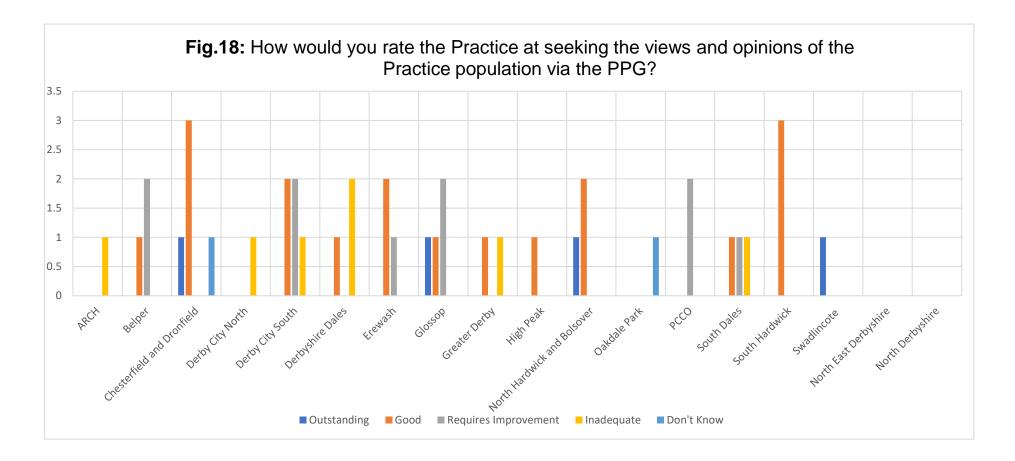
Practice seeking the views and opinions of the Practice population via the PPG:

In terms of how well PPGs would rate their Practices at seeking the views and opinions of the Practice population via the PPG. 43% rated their Practice as *good* explaining that the Practice do reach out to the PPG for input into the functioning of the Practice. However, 25% of people rated their Practice as *require improvement*, with some comments explaining that they have no mechanisms in place to support communications and engagement with their Practice Populations (Fig.17 and 18).













Respondents were asked to explain the reason for their rating with regards to 'How would you rate the Practice at seeking the views and opinions of the Practice population via the PPG? ' in which comments included:

1. Outstanding:

- "There are surveys and questionnaires used within the surgery at things like flu clinics where we can canvas opinions on various topics. The PPG have also assisted at events like 'Dying Matters' where we can talk to the patients" (Erewash PCN)
- "Sending out questionnaires and asking patients opinions on things" (North Hardwick and Bolsover)
- "Members are frequently contacted through the year to contribute their views and support on a range of issues. Clinicians also put forward questions they would like members' views on. The practice is interested in utilising the particular skills and knowledge base of PPG members" (South Hardwick PCN)
- "All suggestions raised are acted upon, minutes are taken by a member of the practice currently and shared with all our PPG contacts on our mailing list. Minutes are updated on our PPG website page" (Glossop)
- "The practice ask the PPG to survey patients on specific questions" (Chesterfield and Dronfield PCN).

2. Good:

- "The Practice do encourage the PPG to assist in Projects and we are consulted well in advance re improvements and initiatives" (Derby City South PCN)
- "Use of survey monkey to canvas patient opinions, does not capture all but in this busy environment it feels like the best we can do" (South Dales PCN)
- "To do this really effectively really needs a dedicated post. It is difficult enough filling necessary vacancies. The practice does very well in this respect but there is insufficient resourcing to be able make this an outstanding area" (South Hardwick PCN)
- "They submit requests for views and assistance via the PPG Chair for a growing proportion of the changes they are proposing and agree how to collect them, e.g. re DNA process" (Chesterfield and Dronfield PCN)

3. Requires improvement:

- "PPG is not representative of the practice population this is not the fault of the practice. Majority of PPG members are white, middle-aged+. Whilst they're keen and enthusiastic, failure of the surgery to make changes will likely eventually lead to burnout" (PCCO)
- "The PPG currently has no formal mechanism to communicate to the wider patient group, this has been highlighted to the practice.
 Communication from the practice to the wider patient group is a key issue and we hope to improve the PPG position by helping them tackle their issue" (South Dales PCN)
- "Currently no two-way communication with patients via the PPG" (Belper PCN)
- "Limited. doesn't really think beyond the practice doors" (Glossop).

4. Inadequate:





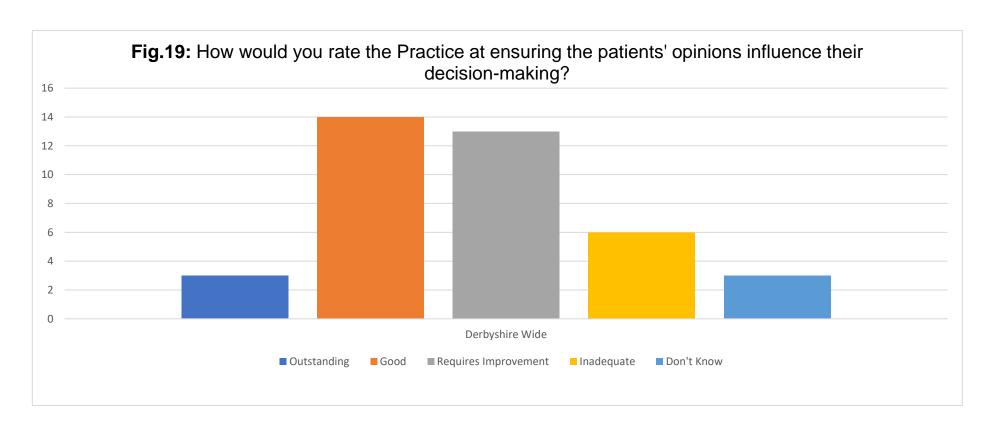
- "We have tried to relay concerns expressed to members about an upcoming merger with another Practice & offered to help with communications etc (including helping to redesign the very poor Practice website) but to no avail. It almost feels like we're seen as "interfering "! (Glossop)
- "Lack of active dialogue towards problems/solutions. Only reach out when they need something to tick a box" (Greater Derby PCN)
- "No idea how or if they do this but I feel they do not want to know what patients think or the suggestions they have for the practice to make it better" (Belper PCN)
- "They keep saying they'll involve with the PPG but have stood in the way of there being meeting" (Derbyshire Dales PCN).





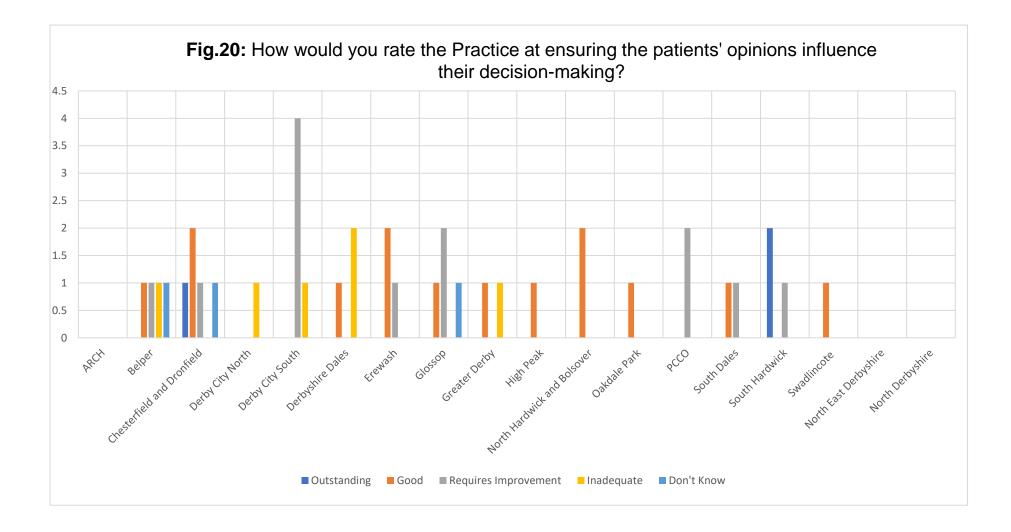
Practice ensuring the patients' opinions influence their decision-making:

It was key to understand how well PPGs would rate their Practices at ensuring the patients' opinions influence their decision making. 49% rated their Practice as either *requires improvement* or *inadequate* due to no evidence of influence. 36% rated their Practices as *good* with some comments explaining that in some case certain changes/improvements are unable to be actioned due to other factors i.e., finance etc (Fig. 19 and 20).













Respondents were asked to explain the reason for their rating with regards to 'How would you rate the Practice at ensuring the patients' opinions influence their decision-making?' in which comments included:

1. Outstanding:

- "The practice take the PPG ideas and suggestions to the Quest and Partners meetings to determine the best way forward to offer the best patient service" (Chesterfield and Dronfield PCN)
- "Practice Manager and senior staff as well as Partners etc. readily meet with PPG and openly discuss issues and plans as relevant AND LISTEN!" (South Hardwick PCN)
- "I believe the practice is committed to making use of PPG (patient) perspectives. An example would be the Young People's survey we carried out a while back. Valuable insights arose from this and new approaches adopted to this target population. We are currently encouraging the practice to repeat this survey" (South Hardwick PCN).

2. Good:

- "The only reason I have selected Good and not Outstanding is that we can't always do what patients want us to due to restraints in finance or legislation. That said, we canvas opinion and explain respectfully when and why certain opinions cannot be taken in to consideration. The practice is keen to listen to patient views and tries to reach a happy compromise with their PPG on the best way forward for the practice population" (Swadlincote PCN)
- "Practice either implements suggested improvements or gives good reason for them not to be practicable" (High Peak and Buxton PCN)
- "Its good when we have input into discussions. suspect that our views are selectively sought (Glossop)
- "The Practice consults with the PPG and takes notice of the responses. They regularly survey patients and take note of their views.
 However, to do this really well needs resourcing and that is becoming ever more difficult" (South Hardwick PCN).

3. Requires improvement:

- "PPG engagement with practice population is poor and therefore patients' opinion cannot influence decision making" (PCCO)
- "I would rate us between Good and requires improvement to be totally honest however this is due to time constraints most of the time unfortunately" (Chesterfield and Dronfield PCN)
- "Some input sought but no example of influencing decisions" (Derby City South PCN).

4. Inadequate:

- "Patients have never been asked what we think, you just get texts saying don't contact them as they are busy, which i understood and followed... it is a one-way information relationship from the surgery to the patients" (Belper PCN)
- "To my knowledge the Practice are not at all interested in the opinion of patients" (Glossop PCN)
- "In general examples too many to list but communication in general is very poor. Facebook seems their chosen route of communication. So many times we have said some people do not have mobile phones or internethow many people



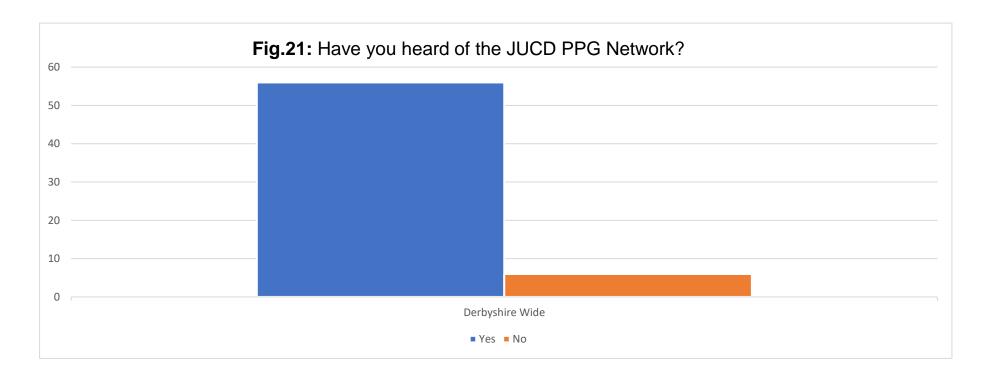


realistically think about looking at the website like a newspaper and that's not up to date either" (Derbyshire Dales PCN).

> PPG Network:

Awareness of the JUCD PPG Network:

Over the last 12 months, the JUCD PPG Network has been developed, through promoting awareness and working with the current members to understand how if it meets their needs. Therefore, as part of this survey it is really important to understand awareness levels of the Network and as demonstrated in Fig. 21, 90% of people had heard about the Network.

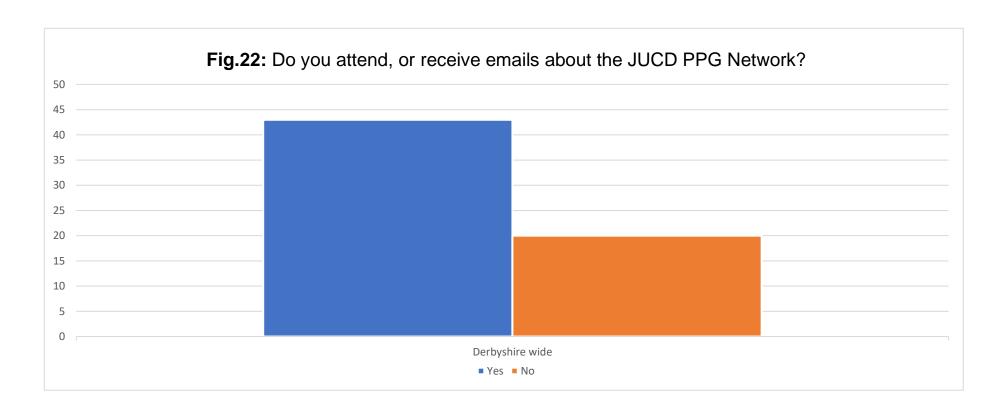






Receiving information about the JUCD PPG Network:

It was important to understand how many people either attend the JUCD PPG Network, or are on the PPG emailing list. The current emailing list has approximately 170 people on the list with approximately 20-30 people who attend each meeting (Fig.22).







PPG connecting with others:

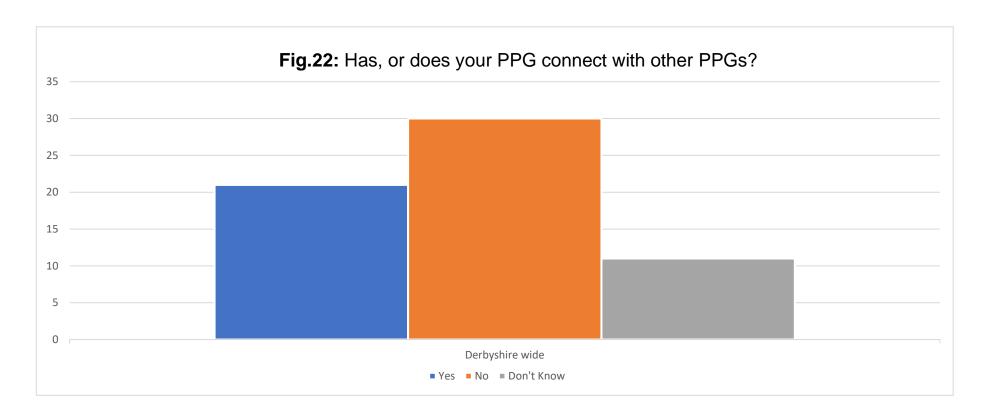
As part of the development of the PPG network, it is important to understand how to share learning and best practice and really support each other. Therefore, it felt key to understand the current position and how connected PPGs are with other PPGs in their PCN or across Derby and Derbyshire. 48% of PPGs do not connect with one another, compared to the 33% who have worked jointly with another PPG and/or provided/received support.

Examples of joint working:

- "Only online through VeryConnect system as part of NAPP membership" (Oakdale Park PCN)
- "We have discussed ideas with other PPGs in our area but this is on an ad hoc basis" (Chesterfield and Dronfield PCN)
- "We have a close liaison with other Practices in our Hub" (Derby City South PCN)
- "Meet virtually with PPGs elsewhere in England sharing good practice Informally liaise with one other local PPG Chair Network re sharing good practice" (Chesterfield and Dronfield PCN)
- "We have a neighbourhood patient group with each practice represented" (Glossop)
- "We were part of the Chesterfield PPG Network Group and worked with different PPGs when this organisation was operating. We have tried to set up a group to cover all PPGs in our ICN but this failed due to lack of response" (Chesterfield and Dronfield PCN)
- "Discussions with several other ppg chairs and one practice manager asked for support" (Chesterfield and Dronfield PCN)
- "I have already found the network of great use. [Names] have helped us with really good advice on TeaTech Cafes and engagement platform development" (Derbyshire Dales).







18. Is there anything else you would like to say?

> PPG Network:

- "The PPG Network could be a great thing, but despite encouraging communication with other PPGs, only one other person has actually made contact with us. There needs to be more cross-PPG learning. What issues have PPGs come across? Have they been addressed, if so, how? If not, what prevented the issue(s) being addressed, and who could help? What works well in the PPG? What doesn't work well? Hopefully this survey will help answer these last two. Could D&D ICB set up (or encourage and assist in the setting up of) a forum where the different PPGs can get involved and exchange ideas?" (PCCO)
- "Network information too general very little information on problems in PPG immediate area" (High Peak and Buxton)





- "At the moment Joint meetings are held via zoom and encompasses the whole of Derbyshire. It would be nice to get back to face to face meetings within our own area of Erewash" (Erewash)
- "We also feel that the ICB should publish quick and simple information to patients on the implementation of joined up care. A formal link from the Derbyshire-wide PPG meetings to the public engagement mechanisms feeding into the ICB should be in place. This should be a report from that level to the PPG network and a feed from the network group meetings on issues the group thinks the ICB should address" (Chesterfield and Dronfield).
- > Contractual requirements for Practices and their PPG:
- "There needs to be a central NHS driver to hold surgeries accountable, for them to need to demonstrate where the surgery has adopted recommendations, or addresses concerns raised by the PPG, and if not, why not. The NHS should mandate a minimum surgery participating in a minimum of 6 PPG meetings a year (I've heard that some PPGs only hold four meetings, how do they achieve anything?)" (PCCO).
- > PPGs working together in PCN areas:
- "The PPG would like to be active and fulfill its role. It would like to link up with other PPGs in the PCN. The contact sheet proposed should facilitate this. We would like to see the ICB encourage Practices to engage with their PPGs. There is an education & training shortfall between members of an ageing Patient population, becoming IT savvy enough to facilitate access to the services provided through the Medical Centre" (Greater Derby)
- "It appears that the PPG of each practice is working in silos, as is the perception that practices work in silos" (Belper PCN).
- > Flexibility within a PPG to increase participation:
- "We have always had a small number of PPG members we are not representative of the local population as a whole though realise younger patients are often desperately busy with their working and family lives so do not have time to be involved especially meetings at 'tea time' or in the evening. Need to look at new ways to involve more people who might be willing via texts/ apps etc but not to come to meetings in person online meetings at various times. A lot of people are still not aware there is a group. With the pressure the staff are under, how far additional 'PR'/ extra activities or whatever is realistic" (Erewash PCN)
- > Practices could utilise the skill set within their PPG:
- "The PPG has a skill set that the Practice could make use of in terms of 'free consultancy'. To that end, a Skills Audit was carried out
 and the PPG is encouraging the Practice to make use of skills that reside in the PPG that the Practice may not have. Overall, and after
 all this, I have to say that our Practice/PPG relationship is good. And, as with all things that are 'good', there are areas that could be
 better" (PCCO)
- "There is a great deal of experience & skills within the PPG members that the Practice could access free of charge, but they seem extremely reluctant to do so, despite repeated offers. This is a real missed opportunity & frustrating for the members, who want to help improve services for patients & ease some of the burden on the Practice" (Glossop).
- Difficulties setting up and/or restarting a PPG:





- "The Practice is run off its feet. We have all been struggling with poor health so at this present time it seems unlikely we will set up again" (ARCH)
- "In theory PPGs are a great idea but in reality, it is very difficult to get patients to form a PPG and to take the lead in running the PPG. We initially started really well when our PPG was formed but this was only because the staff at the practice gave up their time to run meetings and do all the admin, organise events and attend meetings (North Hardwick PCN)
- "PPGs great idea but need commitment from practice, we used to have that commitment but not any longer" (South Dales).
- Help with "professional guidance on how to recruit and structure our PPGs would enable us to be more equipped with a greater and
 more representative cross section of people who would then be able to use the right medium/channel thus engaging and
 communicating with their peer groups?" (Derby City South PCN)
- > Sharing of learning and resources:
- "Support requirement: Tried, tested and current examples, processes and guidance on the recruitment of a representative and diverse PPG membership... Rather than let us individually look at ways in which we can go about recruiting; the above body or even the Engagement managers within the JUC/ICB organisation could/should be sharing best demonstrated practice in these areas rather than leave it up to individual pockets of mostly retired, potentially ex NHS staff, who although keen to provide voluntary support to their Practice will not necessarily be the experts in this field" (Derby City South PCN).
- "Advise and guidance from... a body or JUC/ICB on the best way to engage with social media in order to reach the various patient demographic group in the most effective manner" (Derby City South PCN)

Section 6 - Next Steps:

- 1. Explore opportunities to increase future survey submissions
- 2. Provide time within the PPG network meetings to share learning and resources with regards to the challenges experiences by PPGs
- 3. Promote the PPG Members Contact Networking List, to aid joint working and to share learning and best practice
- 4. Encourage PPG Network members to use the findings from this report to inform the work of their PPG.





Appendix 1 – List of Practices within each PCN:

Derbyshire Primary Care Networks (Population Jan 23)											
PCN	Code	Name	Population	PCN	Code	Name	Population				
High Peak & Buxton	C81003	Sett Valley Medical Centre	10252		C81010	The Moir Medical Centre	12863				
	C81034	Stewart Medical Centre	10188		C81021	Old Station Surgery	15242				
	C81063	Thornbrook Surgery	9432	Erewash	C81022	Dr Webb and Partners	3788				
∞	C81065	Buxton Medical Practice	8334		C81023	The Aitune Medical Practice	8027				
ž	C81074	Elmwood Medical Centre	7124		C81026	Adam House Medical Centre	6593				
Pe	C81080	Goyt Valley Medical Practice	8466		C81046	West Hallam Medical Ctr	4682				
g,	C81082	Hartington Surgery	3179		C81061	Littlewick Medical Centre	18493				
Ŧ	C81634	Arden House Medical Practice	4428		C81083	The Golden Brook Practice	17054				
			61403	61403		College Street Medical Practice	6341				
	C81013	Baslow Health Centre	4755		C81115	Gladstone House Surgery	4975				
S	C81016	Peak & Dales Medical Partnership	8959		C81604	Eden Surgery	4128				
ale	C81028	Imperial Road Surgery	7526				102186				
e D	C81030	Darley Dale Medical Centre	8603		C81004	Ivy Grove Surgery	10478				
ij	C81039	Eyam Surgery	3464	Alfreton, Ripley, Crich & Heanor	C81005	Jessop Medical Practice	16733				
Derbyshire Dales	C81092	Evelyn Medical Centre	5731		C81027	Somercotes Medical Centre	7686				
	C81101	Lime Grove Medical Centre	8334	> =	C81031	Park Surgery	8936				
_	C81611	Ashover Medical Centre	2406	Ripley, Heanor	C81049	Kelvingrove Medical Centre	9594				
			49778	E, E	C81052	Brooklyn Medical Practice	7445				
Se	C81037	Ashbourne Medical Practice	9823	E G	C81053	Parkside Surgery	10703				
South Dales	C81062	Hannage Brook Medical Centre	8974	Ē	C81059	Ripley Medical Centre	5785				
Ξ	C81075	Brailsford & Hulland Medical Practice	5587	₹	C81094	Crich Medical Practice	7907				
Ş	C81086	The Surgery Clifton Road	8184				85267				
S			32568		C81007	Vernon Street Medical Ctr	11030				
<u> </u>	C81012	The Surgery at Wheatbridge	15464		C81014	Derwent Valley Medical Practice	11523				
ijĘ	C81015	Newbold Surgery	11827	>	C81040	Park Lane Surgery	7403				
ē	C81025	Dronfield Medical Practice	10320	ert	C81042	Mickleover Medical Centre	12698				
Chesterfield & Dronfield	C81044	Whittington Moor Surgery	8171	<u></u>	C81064	Park Farm Medical Centre	12674				
	C81058	The Brimington Surgery	8507	Greater Derby	C81068	Chapel Street Medical Centre	12747				
	C81067	Chatsworth Road Medical Centre	9428	a G	C81113	Mickleover Surgery	6179				
	C81070	Oakhill Medical Practice	4119		C81118	Derby Family Medical Centre	8010				
	C81084	Inspire Health	20739		C81616	Peartree Medical Centre	5174				
0	C81089	Stubley Medical Centre	5826		C81653	Brook Medical Centre	4231				





	C81649	Calow and Brimington Practice	7572			
			101973			
ب پ	C81001	Springs Health Centre	11219			
Eas	C81002	The Valleys Medical Partnership	12406			
ફ	C81091	Killamarsh Medical Practice	8700			
North East Derbyshire	C81662	Barlborough Medical Practice	8047			
			40372			
	C81033	Shires Healthcare	16021			
જ	C81041	Welbeck Road Surgery	11532			
Ş "	C81095	Emmett Carr Surgery	4918			
rd v	C81096	Crags Health Care	5545			
North Hardwick & Bolsover	C81638	Castle Street Medical Centre	3744			
된 œ	C81655	Friendly Family Surgery	3538			
Š	Y04977	Creswell and Langwith Surgeries	5445			
·			50743			
	C81008	Royal Primary Care-Clay Cross	9650			
×	C81029	Staffa Health	16980			
South Hardwick	C81050	The Village Surgery	9389			
ard	C81055	North Wingfield Medical Centre	4246			
표	C81056	Clay Cross Medical Centre	6390			
友	C81099	Limes Medical Centre	10673			
Š	C81647	St Lawrence Road Surgery	4289			
	C81658	Wingerworth Medical Centre	6840			
			68457			
	C81017	Arthur Medical Centre	9065			
ē	C81038	Whitemoor Medical Centre	12523			
Belper	C81048	Appletree Medical Practice	11116			
—	C81069	Riversdale Surgery	13218			
			45922			
ire i	C81045	Chesterfield Medical Partnership	13382			
North	Y04995	Royal Primary Care	19183			
North Jerbyshire		,				
٥			32565			
Derby and Derbyshire 111362						

	Y02442	St Thomas Road Surgery	4861
			96530
0	C81072	Lister House Surgery	29767
PCCO	Y05286	Lister House Chellaston	16151
			45918
Oakdale Derby City North	C81006	Horizon Healthcare	20855
2	C81009	Wilson Street Surgery	15606
Ē	C81071	Osmaston Surgery	15394
> C	C81073	Macklin Street Surgery	11540
erb	C81652	Derwent Medical Centre	4811
٥			68206
ale k	C81051	The Park Medical Practice	28573
akdal Park	C81066	Overdale Medical Practice	11277
ő _			39850
	C81035	Village Surgery	11378
£	C81047	Alvaston Medical Centre	11090
Sou	C81054	Hollybrook Medical Centre	33659
Derby City South	C81057	Willington Surgery	9916
Ö	C81108	Melbourne & Chellaston Medical Practice	15587
erb	C81110	Wellbrook Medical Centre	11514
ă	Y05733	Parkfields Surgery	7095
			100239
	C81020	Newhall Surgery	10312
ote	C81032	Swadlincote Surgery	14051
Swadlincote	C81060	Woodville Surgery	10465
/ad	C81114	Gresleydale Healthcare Centre	12849
Š	Y01812	Heartwood Medical Practice	10545
	004077		58222
	C81077	Howard Street Medical Practice	3503
	C81081	Manor House Surgery	17068
do	C81106	Lambgates Health Centre	6811
Glossop			
<u> </u>	C81615	Cottage Lane Surgery	2258
	C81640	Simmondley Medical Practice	3784
			33424

Jan-23



