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## **Patient Reference Group – Expression of Interest**

The Deepings Practice has a well-established and valued Patient Participation Group who meet regularly within the Practice. The group discuss items of mutual interest to the practice and patients, have formed a Voluntary Drivers Scheme and maintain a positive, effective link between the Practice and its patients, ensuring the Practice remains accountable and responsive to patients' needs.

Not every patient has the time to attend meetings but may still have an interest and an opinion to share. We are therefore creating a **Patient Reference Group** – who will be contacted from time to time, either by email or post, for their views. If you are happy for us to contact you throughout the year please complete the form below.

### **What is a Patient Reference Group?**

It is a group of patients who volunteer to get involved in making sure that the surgery is providing the services that its patients need.

### **What is the purpose of me joining this group?**

We want to ensure that the people who use our services are able to have their say. Your opinion matters to us, the people who use the services are the best people to tell us what works and what improvements we could make.

### **How and when are you likely to contact me?**

We can communicate with you in different ways to suit you – email, telephone or post. We will only contact people occasionally and the feedback required will only take up a few moments of your time.

### **Will my doctor see this information?**

We only want to contact you to ask questions about the surgery, how well we are doing and to ask about patient focussed changes we are planning. If your doctor is responsible for making some of the planned changes they may see general feedback from patients.

### **Will the questions be medical or personal?**

We will only ask questions relating to the practice and the services we provide.

### **Who else will be able to access my contact details?**

As always, all information you provide to us will be kept safe and secure. They will only be used for the purpose you have provided them for and they will not be shared with anyone else.

### **What if I sign up and leave my contact details but then decide I no longer wish to be involved?**

If at any time you change your mind and no longer wish to be involved, let us know in writing and we will remove your contact details from our list.

## Signing up for our Patient Reference Group

If you are happy for us to contact you periodically by email please leave your details below and hand this form in at the Deepings Practice reception.

Name: .....

Email Address: .....

Telephone: .....

Postcode: .....

To help us ensure our contact list is representative of our local community, please provide the following information. Your answers will be treated in the strictest of confidence.

**Your Gender:** Male  Female

**Your Age:**

Under 16 <input type="checkbox"/>	17 – 24 <input type="checkbox"/>
25 – 34 <input type="checkbox"/>	35 – 44 <input type="checkbox"/>
45 – 54 <input type="checkbox"/>	55 – 64 <input type="checkbox"/>
65 – 74 <input type="checkbox"/>	75 – 84 <input type="checkbox"/>
Over 84 <input type="checkbox"/>	

### The ethnic background with which you most closely identify is:

<b>White</b>	British Group <input type="checkbox"/>	Irish <input type="checkbox"/>
<b>Mixed</b>	White & Black Caribbean <input type="checkbox"/> White & Asian <input type="checkbox"/>	White & Black African <input type="checkbox"/> Other <input type="checkbox"/>
<b>Asian or Asian British</b>	Indian <input type="checkbox"/> Bangladeshi <input type="checkbox"/>	Pakistani <input type="checkbox"/>
<b>Black or Black British</b>	Caribbean <input type="checkbox"/>	African <input type="checkbox"/>
<b>Chinese or Other</b>	Chinese <input type="checkbox"/>	Other <input type="checkbox"/>

### How would you describe how often you come to the practice?

Frequently  Occasionally  Very rarely

Thank you

Please note that we will not respond to any medical information or questions received through the survey.

The information you supply is will be used lawfully, in accordance with the Data Protection Act 1998. The Data Protection Act 1998 gives you the right to know what information is held about you, and sets out rules to make sure that this information is handled properly.