

Tear off page, please remove this section, complete the other side with your details, and hand back in to the practice.

The Practice Manager will be in touch with you regarding your interest.

We do have limited space, so not every request can be accepted immediately, but we can invite you at a later date should someone else no longer attend.

Website:

www.manorparksurgery.com

Facebook Page

[www.facebook.com/
manorparkmedical](http://www.facebook.com/manorparkmedical)

NHS Choices

[www.nhs.uk/services/gp-
surgery/manor-park-medical-
centre](http://www.nhs.uk/services/gp-surgery/manor-park-medical-centre)



Manor Park Surgery

Tel: 01323 484848
High Street, Polegate, East Sussex.BN26 5DJ

Our Patient Participation Group **Needs You!**



What is the Patient Participation Group or PPG?

A Patient Participation Group (PPG) is a group of people who are patients of the surgery and want to help it work as well as it can for patients, doctors, and staff.

The NHS requires every practice to have a PPG.



Why should I join?

You are a patient of the surgery and an important voice in our community

Your experiences matter and you can bring different ideas to the surgery to help us treat patients better or to improve what we do in some way.

You will also gain a better understanding of the NHS and gather feedback from other patients.

How often does the Participation Group meet?

We meet at the surgery, usually quarterly. We know that you are busy, so we meet only a few times per year and hope that you can join us. If you can't make meeting for any reason, that is not a problem and we would hope to catch up with you at the next meeting.



Will my views be heard?

Your views are important and will be listened to. It may not be possible to act on every suggestion, but all feedback is valuable and will be taken into consideration.

Working in a spirit of mutual respect, openness and trust, all patients' views will be discussed and, where appropriate, we will work together on solutions.

**Yes Please, I want to be part of
the patient participation group:**

Name:

Address:

Telephone:

Email:

**Please tear off this part of the
leaflet and hand to the front
desk during opening hours:
Monday to Friday: 8.30—6.00**