

# Invitation to join the Patient Participation

We are looking for a representative group of patients that we can contact when we have questions or ideas about the future direction of the practice. If you would like to be included in this panel please leave your details below and hand this form back to Reception or pop it in the post to us ASAP

## 1. How to contact you

*Full Name:*

*Email address:*

*Postal Address:*



For those who can't participate by email, a postal option is available as an alternative. We will not display your email address or name to other members of the panel nor pass on your email address or name to anyone else.

## 2. Information about you

This additional information will help to see how representative our panel is of our whole practice population.

1. Who is your usual GP (*if known*):

2. Are you?      Male       Female

3. Age:    Under 16          17 - 24      
             25 - 34          35 - 44      
             45 - 54          55 - 64      
             65 - 74          75 - 84      
             85 - 89          90+

4. Ethnic group

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

5. How would you describe how often you come to the practice?

Regularly  Occasionally  Very rarely

6. Do any of the following apply to you (tick **all** that apply **currently** to you)

**Maternity and children:**

- Pregnant lady
- Expectant father
- Parent of a young child
- Parent of a teenager

**Patients with Long Term conditions:**

- Diabetes
- Asthma/COPD
- Coronary Heart Disease
- Mental Health

**Medication and Carers**

- Patient who is on a regular medication
- A Carer of someone disabled, elderly or with a long term health condition

**Fit and healthy:**

- Usually a well women
- Usually a well man

**Occupation:**

- Student
- Worker
- Currently Unemployed / Retired
- Full time Home Carer/Child carer
- Employee/owner of a locally based business

**Disability:**

- Registered disabled – hearing
- Registered disability – sight
- Registered disability - mobility
- Registered disability - Learning Disabilities

**Language:**

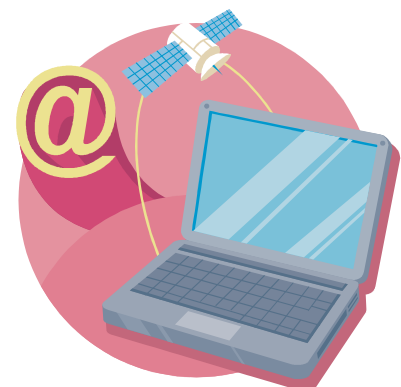
- Patient who speak/read English
- Patient for who English is not a first language
- Patient who does not speak/read English

**Patients managed in secondary care:**

- Patient who attend hospital in Leeds
- Patient who attend hospital in Wakefield
- Patient who attend hospital elsewhere

**Registration status:**

- Newly registered patient (within last 12 months)
- Patients registered less than 10 years
- Patients registered 10 years or more



Thank you!.

**The Practice Manager or Reception Manager will contact you by email/post to confirm your place on the new panel during *September* and will provide further details of what happens next.**

- ❖ *Please note that no medical information will be given nor medical questions responded to through this forum.*
- ❖ *The information you supply to us will be used lawfully and in accordance with the Data Protection Act 1998.*