**Help us transform outpatient services**

**Patients and carers**

Would you like to be part of a group who are working to improve outpatient services? We are looking for patients and/or carers who have used outpatient services at any hospital in NW London in the last couple of years in the following departments:

* Cardiology
* Trauma and orthopaedics (MSK)
* Dermatology
* Gastroenterology
* Gynaecology

You would be part of a working group looking at ways of improving outpatients care. The role of patient representatives in the outpatient workshops is to ensure that the views of patients, carers and families are heard during discussions about outpatient improvements. Patient representatives will be valued as equal members and have the full support of the Chair.

Patient representatives who serve on these groups are expected to be active members. If you are interested, please read the role summary below

**Patient representatives will:**

* Have attended outpatients services in NW London within the last 2 years for either cardiology, orthopaedics, dermatology, gastroenterology or gynaecology
* Be available to attend the workshops listed at the end of this document
* Contribute to meetings in a constructive manner, offering ideas and opinions which reflect the voice of patients, carers and their families
* Provide a commitment to the group, attending as many workshops as they are able.
* Prepare for, attend and participate in meetings

**Skills and aptitude:**

* Knowledge of outpatients services in NW London through personal experience (as a patient or carer)
* Provide the perspective of someone using the outpatient departments
* Good communication skills

**Personal qualities:**

* Confidence to raise issues in meetings
* Be passionate about improving outpatient services
* Be respectful of the viewpoints of others
* Be respectful of any requests for confidentiality

**Time commitment**

* 3 hours per month from January to March 2018
* 3 hours per month pre-reading meeting materials (approximately)

**To apply**

* The selection criteria is non-discriminatory and will be mainly judged on the basis of attending one of the outpatient departments
  + Cardiology
  + Trauma and orthopaedics (MSK)
  + Dermatology
  + Gastroenterology
  + Gynaecology
* If you would like to be a patient representative, please fill in the form below on page 3 and return it to us as soon as possible

**Thank you for your interest**

**Patient representative application form**

**Name**

|  |
| --- |
|  |

**Address**

|  |
| --- |
|  |

**Telephone or mobile number:**

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| --- |
|  |

**Email**

|  |
| --- |
|  |

**Please tick your area of interest**

Cardiology ⃝

Trauma and orthopaedics (MSK) ⃝

Dermatology ⃝

Gastroenterology ⃝

Gynaecology ⃝

**When did you last attend your outpatient appointment?**

|  |
| --- |
| Date (month & year): |

**Which hospital did you attend? Please** **tick**

Central Middlesex Hospital ⃝

Charing Cross Hospital ⃝

Chelsea & Westminster Hospital ⃝

Ealing Hospital ⃝

Hammersmith Hospital ⃝

Hillingdon Hospital ⃝

Northwick Park Hospital ⃝

St Mary’s Hospital ⃝

West Middlesex Hospital ⃝

**The following section is only used for monitoring purposes**

**What is your age? Please tick**

Under 18 years ⃝

19 to 25 years ⃝

26 to 35 years ⃝

36 to 45 years ⃝

46 to 55 years ⃝

56 to 65 years ⃝

66 to 75 years ⃝

76 to 85 years ⃝

85 years and above ⃝

**What is your gender? Please tick**

Female ⃝

Male ⃝

Transgender ⃝

Other ⃝

Prefer not to say ⃝

**What is your ethnicity? Please tick**

Asian/ Asian British (Bangladeshi) ⃝

Asian/ Asian British (Chinese) ⃝

Asian/ Asian British (Indian) ⃝

Asian/ Asian British (Other) ⃝

Asian/ Asian British (Sri Lankan/ Tamil) ⃝

Asian/ Asian British (Pakistani) ⃝

Black/ Black British (African) ⃝

Black/ Black British (Other) ⃝

Black/ Black British (Somali) ⃝

Mixed/ multiple (white and Asian) ⃝

Mixed/ multiple (white and black African) ⃝

Mixed/ multiple (white and black Caribbean) ⃝

Mixed/ multiple (other) ⃝

White (British) ⃝

White (Irish) ⃝

White (Polish) ⃝

White (Travellers) ⃝

White (other) ⃝

Other ⃝

Prefer not to say ⃝

Please email the completed form to Ray Johannsen-Chapman at [r.johannsen-chapman@nhs.net](mailto:r.johannsen-chapman@nhs.net)

or return to;

Freepost: Healthier North West London.

If you would like to discuss or find out more please call Ray on 07722475223

Following your application, we will contact all patients to inform about the outcome of this invite

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Workshop 1** | **Workshop 2** | **Workshop 3** | **Workshop 4** |
| **Cardiology** | Tuesday 16th January  09:00 - 12:00  /  Baker Street | Tuesday 27th February 09:00 - 12:00  / Baker Street | Tuesday 27th March 09:00 - 12:00  / Baker Street |  |
| **Dermatology** | Wednesday 24th January 13:30-17:00   /  Baker Street | Wednesday 7th February 09:00-12:00  / Baker Street | Tuesday 27th February 13:30-17:00  / Baker Street |  |
| **Trauma and orthopaedics** | Wednesday 17th January  10:00-13:00/  Baker Street | Tuesday 20th February 10:00-13:00/  Baker Street | Wednesday 20th March 10:00-13:00/ Baker Street | Thursday 24th April 10:0013:00/  Baker Street |
| **Gynaecology** | Thurs 25 Jan 2-5pm | Tues 13 Feb 2-5pm | Wed 14 Mar 2-5pm. |  |
| **Gastroenterology**  (Dates are yet to be announced) |  |  |  |  |

**Workshop dates**

**\* Following your application full details will be provided for the**