



People in Health
West of England

Better involvement • Better research • Better health

West of England Patient and Public Involvement Strategy 2015-2019

Promoting a strong public voice...

**Bristol Health
Partners**

Clinical Research Network:
West of England

Collaboration for Leadership
in Applied Health Research
and Care West



University of the
West of England



West of England
Academic Health
Science Network



People in Health West of England Vision Statement

People in Health West of England's vision is that patients and the public should be central to health improvement in the West of England through better involvement, better research and better services. We will work to increase the public voice in health research and evidence based service improvement in order to improve the health and wellbeing of individuals, their families and their communities across the West of England by:

- Identifying future research priorities and research questions
- Participating in research studies
- Informing the design and development of innovations
- Supporting the adoption and implementation of evidence and research in the NHS

This Strategy promotes innovative and effective public involvement in both research and service improvement. Good public involvement already exists in a number of partner organisations including NHS trusts, clinical commissioning groups, local authorities, universities, the third sector (voluntary and community groups), other NIHR divisions such as the Research Design Service, and local Healthwatch. The Strategy aims to build on - and add value to - but not duplicate, these other public involvement activities.

The Strategy is led by People in Health West of England. This includes partner organisation¹ representatives, and a strong public voice through 'Public Contributors,' recruited from across the region. Public Contributors are members of relevant governance groups in the partner organisations. Day-to-day implementation of the Strategy is enabled by a PHWE Team. Team staff are employed by individual partners, and located, where possible, together. They work across organisational boundaries.

This Strategy has been developed by the Strategy Group and agreed by all the partners

People in Health West of England (PHWE) Strategy Group responsibilities and accountability

The People in Health West of England (PHWE) Strategy Group is an advisory body that works with core partners and their networks in health and social care across the West of England to deliver a co-ordinated strategic approach to public involvement in research and evidence based service improvement. (See Appendix One for a diagram of the relationships between PHWE and its collaborator and partner organisations).

PHWE is funded by the core partner organisations and therefore is accountable to them for agreed work. However, in supporting public involvement, engagement and participation in health it is also accountable to the public. In addition to working with core partner

¹ Currently these are: Bristol Biomedical Research Centre, Bristol Health Partners, National Institute for Health Research Clinical Research Network West of England (CRN West of England), National Institute for Health Research Collaboration for Leadership in Applied Health Research and Care West of England (CLAHRC West), West of England Academic Health Sciences Network (WEAHSN)



organisations, PHWE also works with a number of other organisations and networks in the West of England.

The PHWE Strategy Group has responsibility to:

- Ensure a strong public voice in the partner organisations
- Advise the core partner organisations on public involvement priorities and goals
- Develop, agree and monitor a joint public involvement/E strategy
- Guide the work programme of the joint public involvement team to deliver this strategy

The Strategy Group is accountable to the core partners for:

- Monitoring the outcomes of the work of the public involvement team, including the use of resources allocated to PHWE
- Reporting to the core partners on the progress of the joint public involvement strategy

Principles

The PHWE Strategy is based on the following principles:

- The experience of patients, service users and carers is a fundamental and valued source of knowledge.
- All research and service improvement initiatives should include the active involvement of the public, at every possible stage from design to implementation
- public involvement should be embedded in the work and culture of all partners
- Partners should be supported to improve inclusion, diversity and equity, and in particular to promote the active involvement of groups and individuals who are often excluded
- The West of England should be seen as a leader and role model in the field of public involvement
- Partners should do everything possible to evaluate and demonstrate the impact of public involvement in improving research and services
- The public should be able routinely to access high quality, research-based, health information
- The public should be able easily to inform themselves about research studies in the region and have the opportunity to participate
- Partners should develop and test new and innovative ways of involvement
- Partners should be challenged to think differently about involvement.



Co-production

We believe that the concept of co-production provides a helpful framework for understanding and developing public involvement. We define co-production as *a relationship where professionals and the public share power and knowledge to plan and deliver support together, recognising that both have vital contributions to make in order to improve quality of life for people and communities.*

This definition of co-production is based on the National Co-production Critical Friends definition.

PHWE also supports the co-production principles proposed by 'Going the Extra Mile', the report and recommendations from the 'Breaking Boundaries' strategic review of public involvement in the NIHR which was published in 2015. These principles are:

1. Building on people's existing capabilities
2. Promoting mutuality and reciprocity
3. Developing peer support networks
4. Breaking down boundaries
5. Facilitating as well as delivering
6. Recognising people and their experiences as assets.



Principles into Practice

We will put our principles into practice by delivering on these objectives:

1. We will enable a *coordinated* region-wide public involvement approach, in research and service improvement
2. We will develop *capacity and capability* for public involvement, in research and service improvement
3. We will contribute to and share the *evidence base* on public involvement
4. We will scrutinize and work to influence *public involvement policy and practice*
5. We will *engage the wider public* in health research and health services.

Delivery

1. **Enabling a Coordinated Approach**

- We will develop and maintain People in Health West of England
- We will map and link with existing public involvement groups and networks in research, commissioning, and service improvement, in the region
- We will provide user-friendly, easily accessible, web-based information and signposting
- We will create networking opportunities to bring together research, commissioning and service public involvement professional staff, with members of the public.

2. **Developing Capacity and Capability for Public Involvement**

- We will deliver a systematic and accessible learning and development programme, which will support members of the public, researchers, commissioners, service staff and professionals in training in improving their public involvement skills
- We will build a network of informed members of the public, who can contribute effectively to research, commissioning and service improvement initiatives
- We will support the development of patient leaders in research and service improvement
- We will create and maintain a database of key contact people holding information on patient and public groups, for the benefit of researchers and service staff.

3. **Contributing to and Sharing the Evidence Base on Public Involvement**

- We will develop and maintain a website, signposting the evidence base on public involvement
- We will contribute to the evaluation of public involvement within partner organisations, and within collaborative initiatives
- We will support suitable and promising external research bids in relation to public involvement.



4. Influencing Public Involvement Policy and Practice

- We will offer advice and a place for consultation to partner boards, executive groups and staff on public involvement policy and practice
- We will challenge ourselves, our Core Partners, and our wider partners, in order to find ways to strengthen and improve public involvement
- We will respond to national consultations on public involvement, in collaboration with our partners.

5. Engaging the Wider Public in Health Research and Health Services

- We will disseminate research throughout the region, and involve the public in identifying future research and service improvement priorities
- We will reach out to individuals and groups, who are marginalised and seldom heard in research and service improvement, testing out innovative methods to do so
- We will provide a web-based resource, which can disseminate research evidence to the public in far more accessible formats than hitherto
- We will ensure that information on opportunities for research participation is clear, accessible, and helpful.

This Work Programme will be delivered in stages, through an Annual Plan, agreed between People in Health West of England and the public involvement Team. People in Health West of England will report annually on the Strategy, and on the delivery of the Work Programme to the Core Partners, and to the wider public via the web site. We will monitor and evaluate the implementation of this Strategy both to demonstrate our accountability to the Core Partners and as part of our wider commitment to building the evidence base on the impact of public involvement.

Definitions

By '**Patient and Public**' we mean patients, potential patients, carers, service users, and members of voluntary, community and service user groups. By 'Involvement' we mean having an active role in influencing decisions, particularly early in the development of proposals, so that there is still time for significant influence.

'**Engagement**' is sometimes used synonymously with Involvement, but here Engagement is used to describe the related processes of sharing information and learning from research with the public (including access to evidence that might inform their individual treatment), and the promotion of participation in research.

'**Participation**' is also sometimes used synonymously with 'Involvement', but here is used to describe the role of patients or the public as the subjects or participants in research studies.



The West of England includes Bath and North East Somerset, Bristol, Gloucestershire, North Somerset, South Gloucestershire, Swindon and most of Wiltshire.

For more information on the Public Involvement Strategy

Contact Kim Thomas, public involvement Administrator, tel: 0117 342 1251, email Kim.Thomas@nihr.ac.uk.

Glossary

AHSN	=	Academic Health Science Network
BAME	=	Black, Asian and Minority Ethnic
BHP	=	Bristol Health Partners
CLAHRC	=	Collaboration for Leadership in Applied Health Research and Care
CRN	=	Clinical Research Network
HITs	=	Health Integration Teams
PHWE	=	People in Health West of England
PPI	=	Patient & Public Involvement
NIHR	=	National Institute for Health Research
WEAHSN	=	West of England Academic Health Science Network



Appendix One

Putting the public at the centre of the research into practice cycle

