

Yorkshire and Humber Patient Safety Translational Research Centre Patient and Public Involvement and Engagement Strategy 2020 - 22

This document sets out the Patient and Public Involvement and Engagement (PPIE) strategy for the NIHR Yorkshire and Humber Patient Safety Translational Research Centre (Yorkshire and Humber PSTRC) between January 2020 and January 2022. The strategy has been codeveloped with the PPIE lay leaders for the centre, researchers from across the themes and partner organisations for the centre. This plan will be monitored continually and formally reviewed annually by the PPIE strategy development group.

1.0 Background

The overall vision of the National Institute for Health Research (NIHR) is to improve the health and wealth of the nation through research. The NIHR PSTRC scheme was set up in 2007, with the aim of bringing advances from basic research possibly related to patient safety into an applied health services research setting (NIHR, 2017). Pre-existing PSTRCs in England include Imperial PSTRC (College Healthcare NHS Trust and Imperial College London) and the Greater Manchester PSTRC (Salford Royal NHS Foundation Trust and the University of Manchester).

The Yorkshire and Humber PSTRC is the newest centre, established in August 2017 and represents a partnership between Bradford Teaching Hospitals NHS Foundation Trust and the University of Leeds. The aim of the Yorkshire and Humber PSTRC is to conduct high quality research that makes patient care better and safer. Awarded £3 million over five years, the centre focuses on the following four research themes:

- The central role of patients and their carers
- Creating workplaces that people want to work in
- The safer use of medicines
- Using digital technology to improve safety

Our mission statement



2.0 Purpose of Patient and Public Involvement and Engagement – Yorkshire and Humber PSTRC

A central aspect of the work conducted in Yorkshire and Humber PSTRC is a strong commitment to active patient and public involvement and engagement throughout the research process, from early development of research ideas to dissemination activities (See Figure 1). This is to ensure that patients, carers and the public help to shape the research conducted within the Centre.



Figure 1: The research process and potential opportunities for PPIE (adapted from NIHR, 2018)

We are guided by the NIHR INVOLVE definitions of public involvement, participation and engagement activities. This considers differences between public involvement in research which is research being carried out 'with' or 'by' members of the public rather than 'to', 'about' or 'for' them (INVOLVE, 2012). Participation considers people taking part in research studies and engagement activities include providing and sharing information and knowledge about research with the public.

2.1 Aim and objectives

We aim to meaningfully involve and engage patients and the public in the research conducted within the PSTRC. To achieve our overarching aim we will focus on the following four strategic areas:

1. Meaningful PPIE

Provide meaningful PPIE opportunities for patients, carers and the public to contribute to research conducted in the centre that will develop a collaborative relationship and ensure opportunities are accessible to all.

2. Community Engagement

Collaborate with relevant organisations and communities to explore appropriate, creative and innovative methods to raise awareness about our research, the YH PSTRC and provide opportunities for involvement.

3. Capacity Building

Develop PPIE skills, knowledge, support and experience for researchers, patients, carers and the public working with the Yorkshire and Humber PSTRC research team

4. Continuous Learning, Impact and Reporting

Monitor and evaluate PPIE activities and processes to improve approaches and experiences of PPIE, reflect on how PPIE input has had an impact and share findings (to add to the evidence base for PPIE in quality and safety research). In order to meet the strategic aims, the following objectives have been developed:

Strategic areas	Objectives
Meaningful	Provide at least two projects for the lay leaders to co-lead by Dec
PPIE	2020
	Develop the Safety In Numbers Group (formerly Citizen Participation
	Group) and create engagement, involvement and participation
	activities related to their needs and the on-going needs of the
	research.
	Explore the best ways to engage patients, carers and the public to
	improve the way research is designed and shared
	Recognise people as individuals who have strengths and preferences,
	in order to support personalisation within the context of a health
	research setting
Community	Explore and expand existing partnerships with local and regional
Engagement	community groups
	Develop relationships with new local and regional organisations and
	community groups to collaborate on projects exploring understanding
	of patient safety
	Develop a PPIE toolkit for all researchers to access including activities
	and resources related to the research
	Work with PPIE groups to help develop a language and understanding
	about the work being carried out within the centre for the public
	Use plain language to communicate with patients, carers and the
	public to increase accessibility

Capacity Building	 Provide dedicated support for all stakeholders via the PPIE Lead for the Centre and provide relevant training and learning opportunities for researchers, PPIE lay leaders, the CPG and Q&S panel. Continuous development of the ways of working for the PPIE groups to ensure a respectful partnership Provide opportunities for sharing existing skills, knowledge and experience within and across themes and liaising with other PSTRCs.
Continuous Learning, Impact and Reporting	Develop an activity tracker for theme leads, PPIE lead and lay leaders to track and monitor progress Provide an opportunity for the PPIE groups to meet on a quarterly basis to review and monitor progress and discuss any concerns or issues that have been raised with the PPIE research lead. Create processes to feedback experiences concerns, informally and formally through the theme leads and PPIE lead Contribute to the design and use of an evaluation plan to monitor PPIE activities Use the NIHR national standards (NIHR, 2018) for public involvement to assess the success of PPIE plans and as improvement measures Identify one study per theme to create an impact case study report and share with relevant networks per year Review the NIHR annual report and co-produce a lay friendly version to share with networks

2.2 Programme of projects and activities

The following PPIE activities planned for the duration of the current PPIE strategy (Jan 2020 – Dec 2021) are presented in Table 1. These are aligned to the aim and objectives of the strategy with an indication of milestones to provide a framework to measure achievements. The PPIE programme of activities will be reviewed at a mid-point (December 2020) in order to review planned activities and the addition of emergent PPIE opportunities and activities.

Table 1: Programme of PPIE activities and milestones

	PPIE Activity	Milestones	Measure of success
Meaningful PPIE	 Provide at least 3 face - to -face opportunities per year for the Saf Numbers Group (formerly Citizen Participation Group) to engage w research projects and explore the ways to communicate to the wide about patient safety Opportunity for the Safety In Num Group (formerly Citizen Participat Group) to provide virtual input in research projects via e.g. surveys, review research material. 	ith best er public nbers cion to	At least three face to face workshops including: 1. Second Victim 2. NHSE and NHS I – Guidance 3. Post Hospital Syndrome 4. Redeploy 5. Communicating patient safety Develop at least 4 virtual involvement opportunities
	 At least two projects for the lay least two projects for the lay least two projects for the lay least co-lead by Nov 2021 around the training training Develop questionnaire to explore knowledge, attitudes to and confident confiden	hemes of ng and current	An impact report/ blog/ article for at least 2 co-lead project outputs Baseline data of researchers and public contributors knowledge, skills,
	PPIE for researchers, patients, ca the public to identify training nee		experience and confidence in PPIE

Community	5.	Mapping exercise with Q&S patient panel	March 2021	Stakeholder map of local and regional
Engagement		and Lay Leaders to explore networks links		organisations to engage
		with relevant organisations		
	6.	Co-design, deliver and evaluate one pilot	October	Strength of relationship with one
		arts based community engagement project	2020	community organisation
				One presentation of interim findings
				at the Patient Safety Conference (Oct
				2019) One case study to share
				learning
	7.	Encourage people from the Community	Continuous	Increase members of the Safety In
		engagement events to join the Safety In	(annual	Numbers Group by at least 10% per
		Numbers Group (formerly Citizen	review)	year
		Participation Group)		
	8.	Further outreach work with community	Nov 2021	To co-produce words and language to
		groups in Leeds and Bradford, responsive		reflect the concept of patient safety
		to research needs		and translational research as
				understood by the public
	9.	Public Engagement Event	November	Develop and deliver at least 2 public
		TBC – (local/ regional festival)	2021	engagement events
		Exploring what safer care means to people		
		and an opportunity for sharing planned		
		work/projects within theme		
Capacity	10.	To deliver a bi-weekly PPIE advice surgery	Dec 2021	Number of visits from researchers
Building		for researchers to drop-in and access PPIE		Experience of drop in sessions
		support e.g. strategy, planning, costs,		
		activity development, if required.		
	11	To develop PPIE introduction materials for	Dec 2020	Develop welcome pack and relevant
		new public involvement members of the		materials including signposting for
		Yorkshire and Humber PSTRC		new members
	12.	Develop and deliver training sessions	Dec 2021	
		based on needs of the researchers and		
		public contributors		
		public contributors		

	13.	Co-produce content to contribute to the	Oct 2021	
		cross PSTRC seminar in 2021		
Continuous	14.	Formally record PPIE activities and	July 2019 -	-Record of PPIE activities within
Learning,		individual theme PPIE work. Identify and	Nov 2020	themes and training needs
Impact and		plan for any PPIE training needs		
Reporting				
	15.	PPIE Strategy Review - Face-to-face	December	Co-developed PPIE strategy for the
		meetings (discussion and consensus) with	2020	next year
		stakeholders, PPI Lay leads, researchers		
		and collaborating organisation		
	16.	Develop an evaluation framework for PPIE	December	Questionnaires for researchers,
		within the centre to monitor processes,	2020	patients, carers and member of the
		experiences, etc.		public to find baseline data on skills,
				knowledge and experience of PPIE.
				Evaluation plan
	17		April 2021	
	17.	Review annual report and develop a creative output to share findings with	April 2021	Lay version of the annual report
		community networks		
	18.	Engagement work using blogs, videos	December	Number of blogs, posts and twitter
		twitter	2021	comments delivered, consider
				outcomes and impact of different
				communication and engagement
				activities.

2.3 Resources

2.3.1 PPIE Lead and Administration Support

The Yorkshire and Humber PSTRC has a dedicated PPIE lead to support the research teams and members of the public involved in work within the centre, working two and a half days a week* (0.5 WTE). The purpose of this role is to support and develop PPIE activity with a focus on active involvement, participation and engagement with patients, carers and the public underpinning all the work within the centre. Administrative support for the centre is also provided.

PPIE Lead for Yorkshire and Humber PSTRC

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2.3.2 Training and support

Training needs for PPIE members will be continually assessed for the duration of the strategy in order to be responsive to on-going and new requirements.

Bespoke training may be developed to meet the needs of individuals within specific research projects.

Support will be provided by the PPIE research lead for the centre. It is the responsibility of the PPIE lead to record training provided, attended and developed.

2.3.3 Payment and recognition for public involvement

The payment structure for PPIE has been informed from current INVOLVE guidance and codeveloped with the PPIE strategy development team (INVOLVE, 2018). Recognising the contributions of members of the public who are actively involved in work within the Yorkshire and Humber PSTRC is a vital aspect of PPIE in research. Everyone that is involved should be offered payment for their time and consider additional expenses, such as, meeting travel or child care costs.

The following payment structure recognises the different skills, knowledge and experience that different individuals and groups may bring to research process.

PPIE Lay Leaders

- £20.00 per hour this includes work done outside formal meetings i.e. pre-reading for meetings, writing bids etc.
- Travel can be arranged for participants in addition to reimbursement for their time
- Reimbursement for any conferences, training or related PPIE events will be negotiated as required. Please contact PPIE Lead for support.

Safety In Numbers Group

- £20.00 per hour
- Travel costs will be met in addition to reimbursement for time

Q&S Patient Panel

- £25.00 per meeting (routine meetings every two months YQSR PPIE budget)
- £20.00 per hour for additional PPIE activities related to the PSTRC work

2.4 Partners and collaborators

The Yorkshire and Humber PSTRC is collaboration between Bradford Teaching Hospitals NHS Foundation Trust, the University of Leeds and the University of Bradford. The Yorkshire and Humber PSTRC will also collaborate with the other NIHR PSTRC's and local and regional public and community groups to help deliver the strategy.

2.5 Leadership and review

The leadership and lines of reporting for the PSTRC are illustrated in Figure 2. The PPIE lay leaders, members of the Safety In Numbers Group and the Quality and Safety patient panel are responsible to the PPIE research lead. The PPIE research lead is responsible to the Yorkshire and Humber PSTRC programme manager.



Figure 2: PPIE structure and lines of reporting for the Yorkshire and Humber PSTRC PPIE lay leaders and the PPIE research lead will report on patient and public involvement and

engagement activities at Executive Group meetings and at the six monthly Advisory Board meetings.

All PPIE groups and the PPIE research lead will be responsible for the annual report on PPIE involvement, engagement and participation work as required by the NIHR. The progress reported will be made against the agreed PPIE strategy and included changes or revisions to action plans.

The PPIE strategy will be reviewed on an annual basis with the PPIE Strategy and Monitoring group, who represent PPIE members, researchers and BTHFT within the PSTRC.

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2.6 Examples of impact

Examples of PPIE impact on research being conducted in the centre will be captured by the PPIE research lead via the PPIE activity tracker. This is in order to demonstrate impact for formal annual report requirements.

References

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Glossary of terms

BTHFT	Bradford Teaching Hospitals NHS Foundation Trust
NIHR	National Institute for Health Research
PPIE	Patient and Public Involvement and Engagement
PSTRC	Patient Safety Translational Research Centre
YQSR	Yorkshire Quality and Safety Research group