

Patient & Public Involvement Strategy



Faculty of Health Sciences
UNIVERSITY OF
Southampton

Health
Sciences

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Foreword

It is with enthusiasm that I write to endorse the Patient and Public Involvement Strategy for the Faculty of Health Sciences. It is an imperative that we move beyond tokenistic approaches to involving those who can inform our work most: people who have had direct experiences of illness and health and care services and individuals who work with voluntary and community groups and organizations to represent the wide range of views and interests derived from this experience. Through working in this way I have learnt first-hand the transformational effect of hearing views derived from experience and the processes of working as equal partners in projects, initiatives and even management of an organization. It is in the 'inside' view from which we can learn most and it is in sharing power in institutions such as a University where meaningful change that can have far reaching effects can be initiated.

This strategy is a framework and a starting point and one whereby we must begin to set ourselves ambitious targets for involvement, to audit progress and evaluate its impact. I pay tribute to the members of the Expert by Experience Group who generously give their time to the Faculty of Health Sciences to improve our work and to extend its impact particularly on the next generation of health care professionals who will graduate from the University of Southampton.

Professor Dame Jessica Corner,
Dean,
Faculty of Health Sciences.
University of Southampton.

Introduction by Rachel Harrison & Anya De Longh, EbE group patient members

As people who use healthcare services ourselves, we feel that being involved in healthcare professionals' education is both a privilege and a responsibility.

Our involvement has stemmed from personal experience and knowing that the small things can make such a big difference. Likewise, we know that our involvement makes a difference too, from reviewing a new curriculum, student education and faculty strategy. Shaping future generations of professionals is a good use of our life experiences.

Patient and Public Involvement (PPI) is not just a fad, but genuinely the way forward. At Southampton University Faculty of Health Sciences, as a group we chose to be called Experts by Experience (EbE). Each member of the group brings their own practical knowledge, but as a group, we are more than the sum of our parts and can look at the bigger picture of the culture, values and strategy of the faculty.

For us, this is the right opportunity to influence healthcare professionals from the start of their careers, to develop true person-centred practice that we (or someone we cared for) would be happy to receive.

PPI works best within a supportive and open environment, created by both patient leaders and faculty staff together. Through this, the EbE group can enrich the work of the faculty by supporting co-production, constructively challenging values whilst bringing diverse and fresh perspectives to students and staff. In their practice, these students will need to not only involve, but work in partnership with their patients as self-management becomes more important. So we feel it's essential that they are introduced to this way of working and seeing the full capacity that patients have, both in their own care, and collectively.

The writing and development of this strategy has been an opportunity to put these principles into practice, as we have been involved from the outset as equal partners.

Anya De Longh and Rachel Harrison.

Important statement regarding the use of labels within this document

People who have health conditions, or use health services and the people who support them can have a very wide range of labels placed on them. There is often much discussion about the semantics of this, among these people themselves and professionals. The preferred label is actually someone's name - just as it would be in any other setting. Within this more general context, we want to acknowledge the other terms that people might use: service user, client, woman (in the case of maternity services), consumer, carer and expert by experience. All of these are equally valid, but for simplicity and to match the national language around 'patient and public involvement', we are using the term patient through this document.

Anya De Longh, EbE group member.

Professional Policy Drivers for Patient Public Involvement in Higher Health Education.

Nursing & Midwifery Council Standards for pre-registration education (2010).

- AEs should ensure that, where possible and appropriate, the selection process also includes nurses in current practice, **service users, carers**, nursing students and **people with disabilities**.
- Programme providers must make it clear how **service users and carers** contribute to the assessment process.

Health & Care Professions Council Standards of Education & Training Guidance (2014).

- Service users and carers must be involved in the programme.
- Resources may include service users being directly involved in supporting student learning.
- Evidence that service users and carers are involved within the pre-registration programme. This could be in all or some of the following:
 - Selection
 - Developing teaching approaches and materials
 - Programme planning and development
 - Teaching and learning activities
 - Feedback and assessment
 - Quality assurance, monitoring and evaluation

Pathways to Embed Patient & Public Involvement in Healthcare Scientist Training Programmes (Council of Healthcare Science in Higher Education (2015)

- The HEI programme team should have mechanisms in place to ensure that there is meaningful PPI in the design, delivery, development & Quality assurance of each programme.

Shape of Caring: A Review of the Future Education & Training of Registered Nurses & Care Assistants (2015).

Recommendations

1. HEE should commission research to identify the forms of patient and public involvement that best support learning, and to ensure that patients and the public are utilised as a valuable resource.

Ladder of Patient & Public Involvement, abridged version

(Tew et al., 2004, p.74)



The Ladder of PPI will be utilised to audit progress developing PPI within The Faculty of Health Sciences. Results will be published at regular intervals in future versions of this publication.

TEW, J., GELL, C. & FOSTER, S. 2004. *Learning From Experience: Involving service users and carers in mental health education and training*. Mental Health in Higher Education; National Institute for Mental Health in England (West Midlands); Trent Workforce Development Confederation.

The Experts by Experience Patient Reference Group: Purpose and Terms of Reference

Main Aim: To increase patient/carer involvement at all levels within the Faculty of Health Sciences including teaching, programme and module development as well as recruitment.

Terms of Reference

1. To raise the profile of patient/carer involvement within all levels of the Faculty
2. To identify areas of good practice and areas where improvements can be made
3. To work closely with the Faculty lead for user and carer involvement
4. To scrutinise and where appropriate approve training of academic staff as well as patients/carers with regard to involvement activities and protocols to support these
5. To make recommendations to curriculum planning at a strategic level
6. Develop and potentially carry out audits regarding levels of patient/carer involvement
7. To scrutinise and make recommendations regarding the recompense policy of the Faculty to patients and carers participating in differing activities

Frequency and Timing.

These meetings take place four times per year, spaced approximately equally

The Four Strategic PPI Goals

'The EbE group wants to offer a different approach to health by bringing in the direct personal experiences of patients and carers. We do not aim to replicate the work of staff or students but to use our experiences and views to support them in improving teaching and health outcomes.'

Sam Goold, EbE group member.

Note: Each agreed action will be allocated a short (up to 6 months) medium (6-12 months) and long term (12-18 months) time frame.

Goal One: Raising the profile of PPI with FOHS

Objective: Enhance PPI in educational activities, increase staff knowledge/understanding of the influence and contribution of the EbE group with examples of PPI.

ACTION	WHO'S RESPONSIBLE	TIMEFRAME	REVIEWED SEPT 2016	ACHIEVED
Strategy document for EbE group to be completed	EbE staff members & EbE group	Short	✓	✓
Survey staff knowledge about EbE group & PPI and feedback to EbE group to guide direction of strategy	EbE staff members	Short	✓	✓
Invite relevant staff members to attend the EbE group quarterly meeting	EbE staff members and nominate quarterly	Medium	✓	Ongoing
PPI EbE Presence on faculty website	EbE group & staff members	Short	✓	Ongoing

Notes:

Goal Two: Contributing to Curriculum Development and Course Approval & Evaluation

Objective: To enhance the visibility, influence and contribution of PPI in curriculum activities.

ACTION	WHO'S RESPONSIBLE	SHORT, MEDIUM OR LONG TERM	REVIEWED	ACHIEVED
Contribute to the new 2018 Nursing curriculum. scrutiny events/panels	EbE group members & staff members	Medium	✓	
Contribute to scrutiny events/panels	EbE group members	Short	✓	ongoing
Design and co-produce a student assessment for the new 2018 nursing undergraduate curriculum	EbE staff members & EbE group	Medium	✓	
Member of EbE group to attend and review attendance of Educational Validation Approval (EVA) committee	EbE group member	Short	✓	✓
Added 2016: New EbE member of Faculty Programme committee	EbE group member	Medium	✓	✓

Notes:

EbE group was involved in the planning of the 2016 nursing curriculum, focusing on assessment. This curriculum was deferred to 2018.

Goal Three: Evaluate Patient Involvement in Module Educational Activities

Objective: To evaluate modular presence and staff knowledge of PPI

ACTION	WHO'S RESPONSIBLE	TIMEFRAME	REVIEWED	ACHIEVED
Meet with nominated module leaders to assist enhancement of PPI in 2018 curriculum	EbE staff members	Medium	✓	
Evaluate the profile of PPI in the identified modules upon module validation/revalidation	EbE group & staff members	Medium	✓	
Investigate how to introduce PPI into electronic module evaluations	EbE staff members	Long	✓	

Notes:

EbE group contributed to an assessment for the initial planning of the new nursing curriculum before it was delayed due to NMC processes. Hopefull this will re-commence in the coming months and EbE involvement can continue. (12/10/16).

Goal Four: A guide for Patient Involvement in Faculty Activities (including payment)

Objective: Develop induction process for new patient involvement and audit the satisfaction of patients involved in educational activities

ACTION	WHO'S RESPONSIBLE	TIMELINE/DATE TO ACHIEVE	REVIEW	ACHIEVED
EbE group to write a welcome guide for service users about being involved in educational activities (including a guide to EbE group)	EbE members & staff members	Short	✓	Ongoing
Design audit tool for patient involvement/satisfaction in educational activities	EbE members & staff members	Long	✓	Ongoing
Audit patient satisfaction in educational activities (including recruitment & operational activity), feedback and respond to findings	EbE staff members	Long	✓	Ongoing
Provide training mechanism for patients wishing to be involved in educational activity	EbE members & staff members	Long	✓	Ongoing
Clarify payment policy for patients involved and staff facilitating this	EbE members & staff members	Long	✓	✓

Notes:

Added welcome guide for patients attending scrutiny panels and meetings

Concluding Statement

The Experts by Experience (EbE) group was formed in June 2014 as a way of taking a more strategic view of patient and public involvement within FOHS. It is clear that all professional bodies are increasingly expecting educational institutions to provide hard evidence of how patients are being involved *at all levels* of the institution, within the planning, delivery and assessment of students, particularly at undergraduate level. This document is designed to plan a path for this strategic involvement to evolve in a coherent way. It has been produced with the collaboration and contribution of all members of the EbE group.

The EbE group is a resource for the whole Faculty to use. If any of you network with any patient or carer and you think they may like to join the group, please contact us below.

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