**PPL Activity in some EMAHSN Workstreams – achievements and specific goals at June 2014.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Workstream** | **A1** | **A2** | **A3** | **B1** | **B2** | **B3** | **C1** | **C2** | **C3** | **D1** | **D2** | **D3** | **Total** |
| 1 | ● | ● | ● | ● |  | ● | ● | ○ | ● | ● |  |  | 8.5 |
| 2 | ● | ● | ● | ● | ● | ● |  |  | ● |  |  |  | 7 |
| 3 |  |  | ● |  |  |  |  |  |  |  |  |  | 1 |
| 4 | ● | ● | ● |  |  |  | ● |  |  |  |  |  | 4 |
| 5 |  |  | ● |  |  |  |  |  |  |  |  |  | 1 |
| Etc | The remaining workstreams are not reported in this summary table, as this is for illustrative purposes only | | | | | | | | | | | |  |
| Total | 3 | 3 | 5 | 2 | 1 | 2 | 2 | 0.5 | 2 | 1 | 0 | 0 | 21.5/60 |

A ● means that Patient and Public representatives have already been involved in this area, or that definite arrangements are already in the diary for it to happen shortly. A ○ means that the intention has been expressed to progress this area, but no specifics are yet in place. In the totals, ● scores 1 and ○ scores 0.5. Information about each Workstream was gleaned during interviews in May and June with the lead and is recorded in more detail in an individual report. The PPL Workstream continues to develop resources to support each of the 12 PPL activity areas A1-D3.

**Key**: Patient and Public Leadership is shown through…

1. Designing, establishing and steering the programme / project

A1. Take issues to an existing PPL group

A2. Reaching relevant communities, perhaps to ask about priorities via a questionnaire

A3. Identified advisors on interview panels and in steering group meetings

1. Input on materials and outputs

B1. Comment on draft docs

B2. Author or co-author

B3. Capture authentic PPL voice in text, DVDs etc.

1. Communication with all stakeholders

C1. PPL give lectures and talks

C2. Present to NHS staff

C3. Target community audiences

1. Adopting best practice

D1. Empower and train patients to self manage

D2. Involve people in organisational change so they buy in

D3. Monitor compliance via patient feedback, enter + view etc.

**Emerging Themes**

* All workstream leads reported benefit in clarifying their objectives and several intend to use this framework within the individual projects that make up their workstream.
* Workstreams that have easy access to established systems do better than those breaking new ground in isolation – this is why workstream 1 is scoring well.
* Workstreams where it is hard to see how the PPL agenda will work fare poorly – which is why workstream 3 scores are low. Some radical and creative thought is needed here.
* The 12 PPL steps shown in the column headers roughly correspond to the development timeline for the workstreams. It is therefore no surprise that group scores fall from A (11) through B (5) and C (4.5) to D (1). We can anticipate that scores will rise as the workstreams complete staff recruitment processes and programmes of work are established.
* The EMAHSN has a focus on implementation, which is section D, so we will need to pay careful attention to working out how we will do this if we are to fulfil our mission.
* The PPI Workstream will review its activities in the light of column totals, as well as offering specific support in response to row totals.