

NHS England

## Thames Valley Patient Experience Operational Group Monday, 23<sup>rd</sup> January 2017, 11:00 – 13:00

Meeting Room 3, AHSN offices, Oxford Science Park, OX4 4GA

## **Action Notes**

Douglas Findlay (DF)	Co-chair
Sian Rees (SR)	Co-chair Oxford AHSN
John Trevains (JT)	NHS England South Central
Daisy Camiwet (DC)	NHS England South
Mildred Foster (MF)	Oxford AHSN
Nick Fahy (NF)	NIHR Oxford Biomedical Research Centre (BRC)
Wendy McClure (WMcL)	Thames Valley Clinical Senate
Sandra Regan (SR)	NIHR Oxford Biomedical Research Centre
Lynne Maddocks (LM)	Department of Primary Care Health Sciences Oxford University and CLAHRC
Apologies:	
Alison Monk (AM)	NIHR – Clinical Research Network
Kathryn Cooper (KC)	NHS England South – South Central
Rebecca Day (RD)	Lay partner AHSN

Item No.	Item	Action
1.	Welcome and Apologies	
	DF welcomed participants to the meeting. Apologies as noted above.	
2.	Introduction	
	Participants introduced themselves as there were new members to the	
	group.	
3.	Minutes from January meeting – outstanding actions and approval	
4.	Declarations of Interest, Confidentiality Agreement, Group Values	
	Actions:	
	<ul> <li>Meeting agreed that a bullet point about the confidentiality</li> </ul>	All
	agreement be added to the Terms of Reference. Action for DF & SR	
	Any further comments on the Group's Principles of Behaviour to	
	send to MF	
	SR suggested the acronyms be put on the website. Action for <b>MF</b>	
5.	Leading Together Programme Update	SR
	• The team is working on funding new sources of funding for the	
	Programme. Possibility to have mixed funding (NHS and Industry)	
	• Team will follow up expressions of interest and funding possibilities	
	for rolling Programme out.	
6.	Level 2 training programme update	
	Basic Training – One day workshop in March facilitated by SR and	
	DF	
	Topic: "How do I make my voice heard more effectively"	SR
	Lunch will be provided by AHSN. Travel expenses for lay	
	participants will be covered by each organisation. No participation fee.	
	LM coordinating Level 2 training programmes.	
	• One day training for lay partners and professionals. Pilot workshop	
	facilitated by Sally Crowe to see if it works.	



	Topic: "PPI approaches and techniques workshop"	
	- Action: SR to circulate the outline of the training programme	
7.	Strategy Development - Needs to be refreshed	
	- All organisations represented in this group have infrastructures for	
	PPI and Patent Experience within their own organisations and the	
	strategy now needs to look how to take this forward.	
	<ul> <li>Suggestion for a one day away day - likely to be in May</li> </ul>	
	- Each organisation represented in this group will need to think about	
	who will attend the workshop. The representative needs to be	
	someone who has the authority to sign off the refreshed strategy.	
	SR to send an email to people to ask for who should attend represent their	
	organisation in this workshop.	
		SR
3.	Brief Updates from:	
	Clinical Senate	
	NHS England – Patient Experience group	
	Service user engagement in SARC services – project commissioned	
	by John Trevains re how best to engage with service users of Sexual	
	Assault Referral Centres. Report soon to be published	
	<ul> <li>EBCD work with Learning Disabilities service in Berkshire has been</li> </ul>	
	underway for several months, delayed due to service changes but	
	promises to be a good piece of work	
	Patient Experience report gathered for Quality Surveillance Group	
	(x2 reports, one for BGSW and one for TV) sparked some good	
	discussion and a good way to share individual Trust approaches to	
	PPIE	
	• STP support to delivery, NHS England South Central has a	
	programme approach to supporting delivery. PPI is part of this	
	<ul> <li>Direct commissioning – submission of 13Q (duty to engage patients</li> </ul>	
	and public) forms scrutinised by South Patient Experience leads and	
	learning notes	
	BGSW network continues	
	resources. Consultation on Policy and expenses policy now closed,	
	outcome not yet published	
	Clinical Research Networks (CRN)	
	AM informed the group that Oliver Evans was appointed as	
	Communications & Engagement Lead Manager. He will start 23 Feb.	
	CLAHRC Oxford	
	Involvement	
	Theme 5 (Patient self-management of chronic disease) needs to     rescruit DPL Contributors to governance group. Helping theme 6	
	recruit PPI Contributors to governance group. Helping theme 6	
	(Behaviour change: diet & obesity) to develop their PPI input as a	
	new theme.	
	<ul> <li>All CLAHRC projects have own PPI and coordinator assists them</li> </ul>	

## Oxford Academic Health Science Network



11.	AOB	all
10.	NHS England Patient & Public Voice – review and new policy	Info sent by KC
9.	<ul> <li>People are urged to send articles to LM so this can be included in the newsletter. E.g. Events, Training, Activities, Consultations happening locally.</li> </ul>	Info cont
٥	- PPI e-newsletter – Involvement Matters	
	• AHSN Living Well Oxford is preparing a pop-up shop at Temple Cowley shopping centre in May to coincide with Dementia awareness week. The theme will be "Ageing: From birth and beyond". The programme has been developed in consultation with community focus groups (6 <sup>th</sup> form students, "Memory Lane" and "Clockhouse" 50+ community groups). Researchers from universities in Thames Valley were invited to participate in their specialists topics.	
	<ul> <li>James Lind Alliance Priority Setting Partnerships (currently 5); offering surgeries and 1:1 conversations to support researchers factor PPI into their grant applications and their work programmes; working jointly with Lynne and Paul Hewitson of the Research Design Service to pilot 3 PPI Q&amp;A Sessions for researchers in Jericho, and at the Churchill and John Radcliffe sites in January, February and March; supporting the set up and running of PPI groups where possible; maintaining and updating resources available to researchers; and working on the Diversity &amp; Inclusion sub-group of the INVOLVE national Learning and Development Project Group.</li> <li>NF to send Trish Greenhalgh's slides</li> </ul>	
	<ul> <li>BRC</li> <li>NF reported that there was no change to the position regarding BRC3 since the last meeting.</li> <li>SR reported that business proceeds as usual for BRC2: supporting</li> </ul>	
	<ul> <li>with planning and recruitment.</li> <li>Working with lay CLAHRC Board members to develop PPI strategy</li> <li>Engagement – Added diversity monitoring to their sign up form to learn more about volunteers</li> <li>Raising awareness: Two seminars were organised: "How to involve PPI contributors before you have funding" and "Running meetings that include PPI contributors"</li> <li>Training established as pilot (Jan-Mar) in partnership with RDS and BRC. All three PPI officers will run joint Q&amp;A sessions at their locations every month open to all medical research staff.</li> </ul>	