

Public and Patient Involvement (PPI) in knowledge production

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Context

Since the early 1990s, there have come repeated calls to engage and involve patients and the public and to place them at the centre of healthcare. Developing stronger patient and public involvement (PPI) in the organisation and delivery of healthcare is now central to health reform across Western economies. This recognition reflects evidence that patients and the wider public can be involved and make a difference at most stages of healthcare and in service planning and delivery.

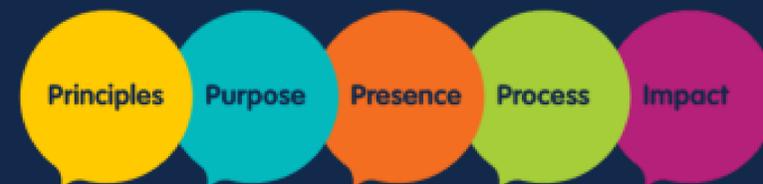
Thinking Points

1. What does Patient and Public Involvement (PPI) **mean to you**?
2. What have you found **challenging** about undertaking PPI activities in the past?
3. What has been the most **rewarding** aspects of undertaking PPI activities in previous work?



National Survivor User Network's Framework 4Pi

4pi National Involvement Standards



What works, what doesn't, and how it fits together

Principles

- listening to service users and carers with respect and openness;
- creating an environment that is safe / accessible / inclusive for everyone;
- Sensitivity about language and actions.

Purpose

- collaboratively developing ways of working together;
- everyone being clear about the purpose of the involvement;
- openness to change focus with the input of different viewpoints.

Presence

- a diversity of services users and carers being involved;
- thinking about whose voices are not represented in the room and why this may be? And taking steps to address this.
- actively making links with local community / patient advocacy groups, charities, local healthwatches, carers hubs etc.

Process

- making involvement opportunities available in different formats, languages (as appropriate) and locations;
- being aware of any bias / assumptions, and reflexive in your work.

Impact

- Better uptake of new evidence into practice;
- Improved outcomes for all;
- Valuing and sharing of different kinds of knowledge.