

Working Towards Best Practice Involvement Methods within Service Improvement for Neurological Conditions

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The Background

Greater Manchester Neurorehabilitation and Integrated Stroke Delivery Network (GMNISDN) supports development, delivery and improvement of its local services. The network aims to better involve patients and carers in its decisions and improvement work.

Best practice patient and public involvement (PPI) means sharing key decisions equally with people with lived experience (patients and carers) throughout.

The Problem

Previously, patients and carers were involved in some network decisions but rarely had equal power. Most involvement in projects was facilitated via a quarterly Patient and Carer Group.

Not all members felt their inputs were valuable and often the same people were repeatedly approached to be involved in projects.

The network understood the value of PPI but recognised there needed to be a step change in the way it embedded patient and carer voices in its facilitation of service improvement with stakeholders.

The Intervention

The network collaborated with the Stroke Association to create a new Involvement Coordinator, who sits within the network team but accesses the charity's involvement expertise. The coordinator has worked to:

Empower members of the Patient and Carer Group

Showed members of the Patient and Carer Group the value of their input and educated them about best practice PPI.

Members of the Patient and Carer Group supported to co-design the infrastructure for PPI within the network.

Equip the network to improve PPI processes

Developed useful a toolkit and library of resources to help overcome barriers to PPI.

Provided practical advice, training and influencing to the network and wider teams to enable meaningful PPI.

Create PPI recruitment pathways which promote diversity

Identified diversity priorities for recruitment.

Worked voluntary sector and clinical teams to set up long-term recruitment pathways, with a focus in the groups identified as being underrepresented.

Embedded PPI into the common practices of all team members, promoting sustainability.

Evaluation and Impact

The collaborative approach to the Involvement Coordinator role has improved understanding of partnership working, including the IT and managerial needs. The collaboration helped to make best use of expertise and resources.

The Patient and Carer Group members are more empowered to recognise the value of their input, share ownership of decisions, and hold the network to account in its PPI practice.

Patients and carers are involved in network projects earlier, more frequently and with more flexibility

Best practice PPI methods are considered by the team at the start and throughout service improvement work, with wider network stakeholders having greater access to PPI training and resources. A PPI toolkit is available to use nationwide:

gmnisdn.org.uk/patients-and-carers/involving-patients-and-carers-in-service-improvement/



There is increased diversity in the patients and carers who are involved. Recruitment pathways have been set up to help increase this further in the future.

“The thing that always stands out the most is when I hear one of the project leads say, “that’s a really good insight, we hadn’t thought of that”

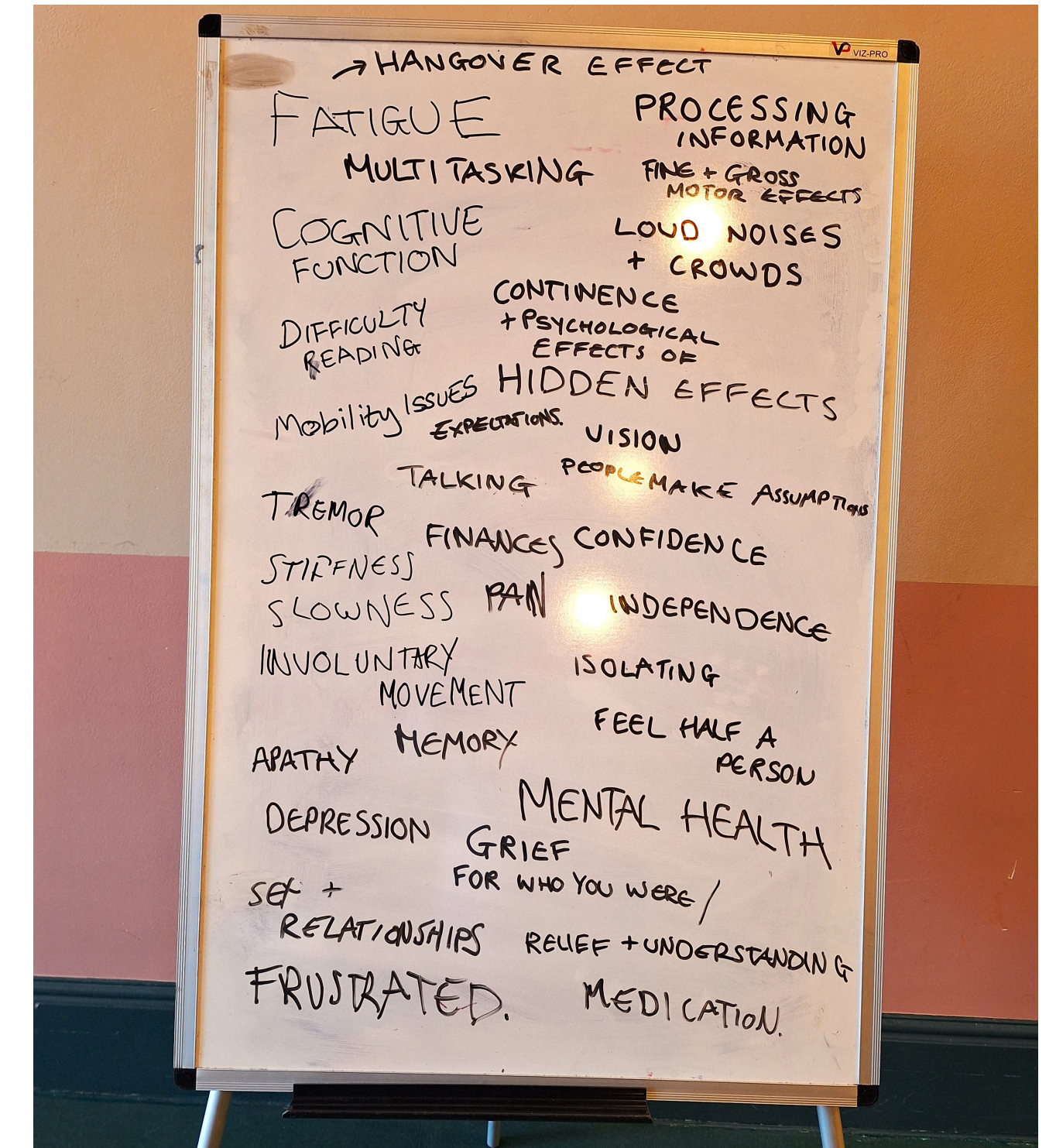
Member of the network’s Patient and Carer Group

“The group’s contribution really changed the direction of the work

Network staff member



Stroke and Neurorehabilitation Patient and Carer Group meeting



Patients and carers shared their experiences and ideas for service improvement projects

In Conclusion

The role of Patient & Public Involvement Coordinator within the network team has improved the network's PPI processes. The improvements are evident through increased consideration and use of best practice PPI methods compared to before the role existed. Work has also been done to ensure the step-change is sustainable without the presence of the Involvement Coordinator.

The collaboration with the Stroke Association helped the role to be successful by making best use of expertise and resources. It allowed both the network and Stroke Association to learn more about successful partnership working.

With improved PPI processes, the network can support better quality improvement for neurorehabilitation services.

