Involving Patients and Public in Event Planning and Delivery

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Getting started

NHS England is committed to ensuring that public and patient voices are at the centre of shaping our healthcare services. Every level of our commissioning system needs to be informed by insightful methods of listening to those who use and care about our services. Their views should inform our commissioning processes and service development.
In order to work in partnership with patients and the public, it is essential to hold events, workshops and meetings that include our service users as well as staff. Exploring issues and improvement opportunities should be undertaken jointly with our service users. Planning a meeting or event with patients and the public can ensure that everyone has an opportunity to contribute effectively, getting the best ideas and solutions to improve care for all.

Patients and the public can bring an invaluable and different perspective when planning events:

- For staff – bringing the patient and lay perspective into the focus/topic of the event
- For the public – ensuring that events are tailored to appeal and ‘speak’ to the audience

This bite-size guide is aimed at health professionals to explain the benefits and principles of involving patients and public in event planning, from early design stages through to taking part in the delivery and facilitation of events.
Core principles

Involving patients and public in the planning and delivery of events ensures the patient/public voice is built into the dialogue throughout the event.

Patient and public involvement at the event planning stages builds greater understanding of what is important from a patient perspective.

Co-designing events with patients or public ensures that the proposed structure and content of the event is shaped in a way that will meet the needs of the potential audiences.
Core principles

Involving patients and/or the public in the design of events brings in new perspectives of what will resonate with the wider audience who attend the event.

Patients and public may have different ideas about how to present the materials.

A small planning group that includes service users offers a safe environment to test ideas before going out to a much larger audience.
The experience of co-design with patients and public will build confidence in working with local people in the creation and delivery of future engagement events.

Service users who get involved with planning and supporting events and workshops might also need some support to do this, including practical support to get involved and some mentoring support if background information is relevant to the event planning.
Getting started

Why?

Core principles

Practical Steps

Want to learn more?

Other bite-size guides

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Practical Steps

1. Be clear about the purpose of the event

2. Be clear about the type of event and target audience. Is this a large event with an open invitation to stakeholders? Is it a smaller workshop focused on a particular health condition? Ensure that your planning group includes service users from the intended audience; this will bring important perspectives to the planning.

3. Assess the amount of time that will be needed between planning and holding the event – make sure there is enough time to plan effectively without missing opportunities for feedback from the event to be useful and usable.

4. Think about how you will identify who would be the most appropriate people to involve in the planning and delivery of the event. This might be done through an open invitation to patient groups or by working with existing networks of experts by experience or patient advocates.
Practical Steps

5. Consider sending out an invitation to the relevant patient groups and networks outlining the purpose of the event and asking for volunteers to contribute to its development.

6. Use as wide a spread of networks as possible to access a wide and diverse range of people.

7. When designing the invitation, think about what would make patients or the public interested in being involved. Try to describe how invaluable their input will be and how it will make a difference.

8. Outline what might be required and the potential level of commitment this will involve such as: the number of planning meetings; their contribution to co-designing the event (for example, patients telling their story; facilitating table conversations from a patient or lay perspective); the date of the proposed event.

9. Ask people how they might like to be involved, when they would be available for meetings/discussions, and what relevant/similar experience they may have.
Practical Steps

10. Consider all the expressions of interest and how to make best use of each of them so that all volunteers feel valued and are involved according to their expressed level of ability to commit to the task.

11. Consider how many people would make maximum impact on the planning group without it becoming unwieldy.

12. Hold planning meetings at times and places that are easily accessible to the volunteers and ensure relevant expenses are reimbursed. Expenses policy.

13. Agree with the volunteers how they would like to be involved in the event itself and how confident they are in doing this. Examples of involvement include:
   - co-presenting elements of the programme;
   - sharing their personal experiences as part of the programme;
   - facilitating table discussions.

14. Many patients will have the confidence to get involved without additional
Practical Steps

support. However, it can be useful to offer support and mentoring to build confidence and skills to enable people to actively contribute.

15. Acknowledge and thank everyone for their input at the event.

16. Finally, explore with people if, and how, they might like to continue to be involved in the programme of work.
Members of a CCG’s Patient and Carer Group focusing on self-care were invited to help plan an event to take place during Self Care week. Working with the lead commissioner and NHS engagement lead, the group suggested that a Patients’ Charter be created, outlining what should be expected of both the patient and the professional in a consultation meeting. The group drew-up some initial principles to be discussed at the event. They also helped design how the session would run and contributed to the presentation. At the event, the group took it in turns to explain their work and the charter to the audience – over 30 members of the public – and then facilitated a table each, so they could answer questions and capture the discussions. The group then drew-up the final charter for the CCG to build into future service specifications.
Want to Learn More?


Other bite-size guides
Other Bite-Size Guides

Click on the links below to download each of our ‘bite-size guides’ to participation. Additional guides are in development.

- Bite-size guide 1 – Principles for Participation in Commissioning
- Bite-size guide 2 – Governance for Participation
- Bite-size guide 3 – Planning for Participation
- Bite-size guide 4 – Budgeting for Participation

Guides 5 -15 are also available via the following link:
https://www.england.nhs.uk/participation/resources/
NHS England’s series of ‘Bite-size guides’ aims to help colleagues plan and deliver the best possible patient and public participation, in line with Transforming Participation in Health and Care.

For further information, please contact england.nhs.participation@nhs.net

Produced by the Public Participation team at NHS England.