

Maximising impact of Public and Patient Involvement in Public Health Research, an Evaluation

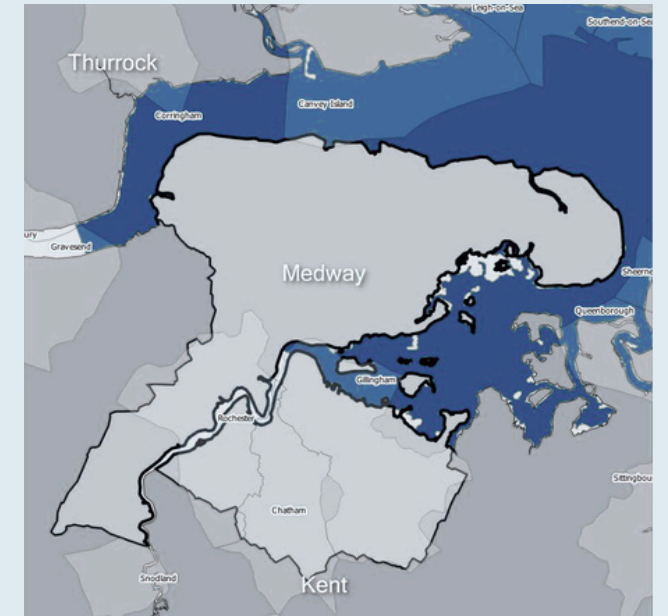
An impact evaluation of the Health Determinants Research Collaboration (HDRC) Medway Public Advisory Group (PAG)

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INTRODUCTION

A new public health initiative funded Health Determinant Research Collaborations (HDRC) across UK local authorities (LA) to address health inequalities, enable LA capacity of evidence-based decisions to improve public health outcomes. Patient and public involvement (PPI) is integral to ensure local needs and priorities are appropriately met. HDRC Medway's Patient Advisory Group (PAG) are Medway PPI representatives. This qualitative evaluation gathers insights from the first PAG cohort June 2023 – October 2024 to inform upcoming years and provide recommendations to effectively integrate PPI within public health initiatives.

OBJECTIVE

To evaluate the impact and involvement of HDRC Medway's Public Advisory Group (PAG) (Cohort 1).

METHODOLOGY

semi-structured focus groups with PAG members (N=6) on Microsoft Teams facilitated by a University of Kent researcher. Questions were co-developed with the HDRC Medway Patient and Public Involvement and Engagement Lead. Analysis followed thematic analysis procedures with 2 rese archers and the PPI lead to code transcripts, develop meaningful themes and subsequent recommendations.

RESULTS

5 main themes identified; positive psychosocial gain as PAG member, role expectations and understanding impacted perceived contributions, reiterating PAG's impact on wider HDRC Medway aims reinforced perceived value, group management and communication, personal investments and hopes post PAG.

FINDINGS

Insights provide transferable recommendations for PPI collaborators to understand how to support and enhance PPI efficacy and engagement in public health. Positive reflections highlight strengths on experiences and personal value of their contribution to addressing health inequalities.

Common challenges highlighted adapting administrative practices and for researchers to plan to mitigate PPI cliff edge and negative fallout.

Effective PPI collaboration requires meaningful direction, clear communication, inclusive facilitation fostering interpersonal cohesion, reinforcing c ontinued value and impact to maximise engagement and public health outputs.

"I DIDN'T FEEL THAT I WASN'T ABLE TO EXPRESS AN OPINION, EVEN IF IT WAS DIFFERENT TO SOMEONE ELSE'S... THAT'S REALLY IMPORTANT AND I HOPE THAT CARRIES ON" (P006)

"IT WAS LOVELY FOR ME TO MEET PEOPLE WHO I WOULD NEVER HAVE MET IN MY NORMAL LIFE OR MY WORKING LIFE OR MY PERSONAL LIFE... INCREDIBLE PEOPLE" (P002)

"YEAH, THAT KIND OF RESPECT BEING EQUAL AND NON-HIERARCHICAL. I REALLY LOVE THAT AND I THINK LIKE IT'S ONE OF THE REASONS THAT I'VE JUST ENJOYED [IT] I THINK IT'S JUST SO GOOD THAT'S VALUED AND MY MOST ENJOYABLE PART OF IT REALLY." (P005)

"THE FIRST MEETING, WHEN I WENT TO THE UNIVERSITY, THAT MET MY EXPECTATIONS, BUT AFTER THAT I WASN'T QUITE SURE WHAT MY ROLE WAS...I EXPECTED TO BE MAKING A BIGGER CONTRIBUTION... I NOW REALISE WE WERE LAYING THE FOUNDATION" (P002)

"GOING FORWARD, JUST KEEP THEM INVOLVED AS MUCH AS POSSIBLE. AND I THINK DON'T WORRY ABOUT OVERBURDENING THEM ... USE THEM AS AN ASSET WOULD BE KIND OF THE MAIN TAKE AWAY." (P004)

CONCLUSION

Community representation is necessary addressing local health inequality needs. Clear, consistent communication manages PPI expectations, supports informed engagement and adapting to project needs.

Prioritise non-hierarchal PPI collaboration that values input, facilitates community invested interest to foster authentic engagement and meaningful outputs to address local health determinant needs.



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