

Patient Advisory Forum
Annual Review

Involving Patients and the Public in the decisions of Health Education England



Developing people
for health and
healthcare

www.hee.nhs.uk

Introduction – Co-Chairs Sir Keith Pearson and Mary Elford

We are delighted to introduce this first Annual Review of the work of the Patient Advisory Forum (PAF) which we hope will provide you with an insight into the crucial role which the patient and public voice plays in the work of Health Education England (HEE). PAF members make a valuable contribution to HEE's work, not only through the wealth of experience, talent and insight they bring to bear but also in the constructive challenges they make.

Following the Forum's quarterly meetings and reflection on reports from members involved in HEE programmes, the PAF agrees three key issues for the Chair to feed back to the Board. This is just one way that the PAF regularly sees its contribution to HEE thinking, policy development and decisions discussed or referred to at HEE Board meetings.

Professor Lisa Bayliss-Pratt, HEE's Chief Nurse, took on the role of Senior Responsible Officer for PAF in April 2017. Under her guidance, the Forum has made great progress in refining and clarifying its purpose and role and ensuring its work programme is clearly aligned with the organisation's strategic objectives.

Last summer, several people's term of office on the Forum came to an end and we embarked on a national recruitment drive to fill the resultant vacancies. In response, we received many extremely high-quality applications and were able to appoint six new people to complete the Forum membership of 20, which includes patient representatives on the Local Education and Training Boards (LETBs).

We would like to extend our warmest thanks to all PAF members and look forward to your support and working with you over the coming year; and in particular to PAF members of the Communications Subgroup who have been instrumental in developing this first report



A handwritten signature in black ink that reads "Mary Elford".

Mary Elford



A handwritten signature in black ink that reads "Keith Pearson".

Sir Keith Pearson

Reflection on the work of this year from PAF member Kiran Bali

This has been both a challenging and a rewarding year for the Patient Advisory Forum in which we have worked towards ensuring that the patient is at the heart of all deliberations and decisions across the organisation.

Members have actively contributed to a diverse range of projects in partnership with internal and external stakeholders and this report lists many of our achievements.

We would like to take this opportunity to express our appreciation to the HEE Board members and all our colleagues for their commitment and support to acting upon the patient voice, and extend a warm welcome to those who have joined us this year

As we move into very challenging times across the health and social care sector, we will work to ensure continuous and conscientious efforts to increase quality patient and public involvement across HEE.



Kiran Bali
Member since 2014

“ PAF involvement has been very helpful in providing wise counsel and constructive comment on Maternity programme areas; it’s helped to clarify the maternity workforce analysis produced this year and set the right direction for the programme. Having a voice for mothers and service users ensures that programme partners focus on how to achieve benefits for patients through what we do, and ensure we are working towards what they really want to improve future maternity care and receive continuity from a highly skilled, multidisciplinary workforce placing the needs of mothers and families at the centre of good practice.”

Terri Hobbs,
National programmes manager
for maternity



PROGRAMMES

Advanced Clinical Practice Workstream
 Urgent and Emergency Care Workforce Programme Board
 Independent Prescribing Tender programme
 Cancer Workforce Programme Oversight Group
 Pharmacy Assurance Board
 NHS 111



Accelerated Return to
 Sonography Workforce
 National Conference

WORKING GROUPS



MAPs Regulation and Quality Working Group
 NHS Constitution Review Group
 The Shape of Training Group
 Regional AHEAD groups
 HEE NHS Constitution Delivery Group
 Shape of Caring: Service User and Carer in
 Nurse Education
 Sepsis Subgroup

PATIENT AND MEMBERS' INPUT ACROSS

LWABs & LETBs



Cambridgeshire and Peterborough Local
 Workforce Action Board,(LWAB)
 South of England LETB Regional AHEAD Group
 London and the South East Patient Representative
 North Region LETB
 Midlands and East LETB Stakeholder Group

BOARDS, COMMITTEES STEERING GROUPS

Patient Safety Assurance Board
 NHSE/HEE Integrated Urgent Care
 Joint Executive Board
 Medical Associate Physician
 Board
 MAPS Communications Steering
 London Workforce Board
 Equality, Diversity and Inclusion
 Nursing & Midwifery Assurance

Health Education England

REFERENCES EVENTS

to Training Co-Design Event
orce Changes Event
e Trainee Nursing Associate



REFERENCE GROUPS

Community Pharmacist Reference Group
Pharmacist Technician Reference Groups;
Royal College of Surgeons (RCS)
Improving Surgical Training Reference Group
Curriculum Development for Paramedics
Paramedic Advisory Forum

ADVISORY FORUM INVOLVEMENT HEE



TASK & FINISH GROUPS

PAF Communications Strategy Task and Finish Group
Pharmacist Care Home and IUC training Task and Finish Groups

& GROUPS



Board
ent Care (IUC) Workforce
ns (MAPS) Oversight
eering Group
sion Committee
rance Group



OTHER

Lay/Patient Focus Groups
Allied Health Professions Professional Support Panel
Technology Enhanced Learning
Contract bidding panels
Clinical Healthcare Course inspections

Purpose of the Patient Advisory Forum

The Patient Advisory Forum is an advisory committee to HEE's Board. Its overall purpose is to ensure that the views of patients and the public are integral to the organisation's decision making.

In particular, the Patient Advisory Forum will assist, advise and challenge the HEE Board to provide assurance that:

- the patient and public voice is a key factor in the education, training and workforce planning process
- patient and public views are invited, gathered and acted on as part of decision-making processes
- decisions relating to patients and the public are taken in an open and transparent way; and
- due attention to equality, diversity and inclusion is embedded in decision making.



David Burbidge
Member since 2014

Role

The Patient Advisory Forum's role is to advise and inform the HEE Board so that:

- HEE implements its strategic framework (Framework 15), and continues to develop its priorities focussed on the [NHS Constitution](#) and the needs of patients and carers over time, HEE shifts the focus of workforce planning from a supply-driven model to a needs-based approach

- HEE addresses a systematic gap in the understanding of current and future patient need and the workforce implications
- there is a better connection between the decisions and investments HEE makes and the people whom these decisions will ultimately affect; and
- the patient and public voice informs HEE's business planning process and annual workforce investment plans.

Function

The functions of the Patient Advisory Forum are:

- to provide constructive challenge and scrutiny of decisions from a patient and public perspective
- to support the implementation and continued development of HEE's Framework 15
- to provide advice, oversight and guidance on service redesign issues
- to provide advice and insight on the skills, behaviours and attitudes needed in the workforce to meet the needs of patients and carers as partners in care
- to provide patient and public voice advice on national and regional programmes of work; and
- to provide advice, oversight and guidance on patient and public voice engagement across Health Education England.



Maggie Stubbs
Member since 2014

NHS commitment to involve

The [NHS Constitution](#) and the [Five Year Forward View](#) set out a clear message that the NHS should put patients and the public at the heart of everything it does.

The NHS must be more responsive to the needs and wishes of the public, all of whom will use its services at some point in their lives. We need to ensure that public, patient and carer voices are at the centre of our healthcare services, from planning to delivery to how involvement is reported and communicated.

Participation helps us to understand people's needs, and to prioritise those people who experience the poorest health outcomes – enabling us to improve access and reduce health inequalities.

Participation provides opportunities to see things differently and to be innovative, leading to a better use of our limited resources.

[A Guide to Annual Reporting on the Legal Duty to Involve Patients and the Public in Commissioning](#)

NHS England, 2016

“ At the Midlands and East LETB PPV has been heard in our various developmental workshops through the year: engaging with national Directors on the education of our future doctors; on the development path for Local Workforce Action Boards, highlighting the need for PPV to be build into the feedback and planning loop for workforce planning and education and training; in our AHEAD group considering how PPV builds into our future diversity and inclusion work; and finally through the continued contribution of PPV in the ARCP processes within the Deaneries.”

Gerry McSorley
Midlands and East LETB Chair

The crucial role of the patient and public voice in healthcare staff education

Health professionals must be trained to have a clear understanding of what patient safety means, to be able to provide patients with the best information and advice, and to recognise the important role patients, families and carers have in improving patient safety. If patients are to be involved in their own care, they need to be able to access information they can trust.

Healthcare staff and students need to be aware of the valuable role of patients in preventing and learning from patient safety incidents. They also need the skills to engage patients in a meaningful way. This is crucial to creating a patient-centred NHS.

Having the time to involve and engage patients is a challenge. However, the main barriers are attitudes and behaviours - seeing engagement as a tickbox approach rather than an important aspect of safety.

[Improving Safety Through Education and Training](#)

Report by the Commission on Education and Training for Patient Safety, March 2016



Gareth Davies
Member since 2014

Membership and Governance

Membership

The PAF has up to 20 members which includes patient representatives who sit on LETBs. The Forum is co-chaired by Sir Keith Pearson, HEE Chair and Mary Elford, HEE non-executive director.

Patient and Public Voice Partners (PPVP) appointed as members of the four regional LETBs also are members of the PAF and this is designed to enable two-way communication between PAF and the LETBs.

Members are usually appointed for three years, with an option to extend this three-year term to meet the needs of HEE and PAF. In October, six new members were appointed, thus making up the full complement of the Forum.



Karl Smith
Member since 2014

Governance

- The Patient Advisory Forum meets at least four times a year and provides a report from that meeting to HEE's Board.
- Members may be invited to represent the Patient Advisory Forum/patient and public voice on HEE's Advisory Groups and national programmes of work.
- Members represent the Patient Advisory Forum/patient and public voice on the LETBs.
- One of the independent chairs of the LETBs is a member of PAF to support open communication between the groups
- Outside of the meetings, the Patient Advisory Forum members also operate as a virtual

network and advice may be sought from members on specific issues and/or time limited small task and finish groups may also be set up as and when required.

- HEE will take all reasonable steps to ensure that members who may need additional support are enabled to participate— examples of additional support include wheelchair accessibility, providing large print versions of documents, providing a rest area if needed
- The Patient Advisory Forum is supported by a HEE secretariat to minute meetings and provide other administrative services.

Ways of working

The Patient Advisory Forum will:

- champion the [NHS Constitution](#)
- always place the patient, their carers and family at the centre of our work
- enable all members to have an equal voice
- act as an ambassador for HEE and lead by example
- commit to the highest standards of conduct, governed by the [Seven Principles of Public Life](#)
- adopt a 'can do' approach, actively listening to others and be open to challenge
- be mindful of the need for confidentiality.



Anna Gill
*Co-opted in 2016
and joined in 2017*

PAF Governance and Structure

The work programme

PAF meets formally four times a year as a whole group, but also operates throughout the year as a virtual network. Individual members are recruited to programmes of work, projects and other initiatives, such as short-life task and finish groups. HEE staff are also able to seek PAF advice on particular issues. Examples of specific workstreams in which PAF members have been involved this year are detailed below.

An initiative which PAF refined this year allows members to report back on their individual workstreams through a system called 'Closing the Loop'. This not only ensures a focus on outcomes, but also supports good two-way communications and helps to build an understanding across the Forum of HEE's key work.

In the past year, special workshops and seminars were also held, in addition to the quarterly meetings; one of these, held in June, was set up to share and discuss the HEE Mandate and how PAF's work can support its delivery. As a result, a draft PAF workplan for the coming year has been agreed, which is more closely aligned with the Mandate deliverables.



Manoj Mistry
Member since 2017

In February, a workshop was held to discuss the draft Workforce Strategy and to enable PAF members to develop an informed response into the public consultation. Fifteen members of the PAF attended the event and discussed the eight consultation questions initially as a group and then in further detail during table debates. HEE's Chief Executive Professor Ian

Cumming and Professor Lisa Bayliss-Pratt attended this workshop, and along with Co-Chair Mary Elford, set the scene and introduced the document.

Constructive suggestions were put forward in relation to the consultation questions with a focus on:

- patient safety being a priority
- self-care
- equality, diversity and inclusion
- retention of the current workforce;
- and the need for a focus on children and young people and workforce.

A thread running throughout the debate was the need for better patient education and clear information on emerging new roles.

Since patient safety was identified as a priority, it was agreed that the contribution which HEE could make to this includes ensuring the NHS provides information to help patients understand new roles and ensure that patient consent is truly informed.

Another important topic identified in the debate was self-care. This is a critical part of service delivery, requiring the workforce to support patients and service users, enabling them to manage their own long-term conditions and navigate the health and care systems.

More efforts to integrate health and social care and the inclusion of social care within the Workforce Plan are welcome, but this also needs better and clear information about how this might be achieved. Shared training, education and placements would build better understanding and breakdown barriers between the sectors; and social care professionals need a clear career pathway and career progression opportunities.

Debate on this theme also included consideration of barriers such as different funding mechanisms and terms and conditions for staff. However, the Nursing Associate role is seen as a good example of one enabled to work across sectors.

Patient and Public Involvement Toolkit

In May 2016, a project was set up in close partnership with PAF, to develop a resource to ensure that patients and public are recognised as a valuable resource in nurse education as well as actively involved in teaching, assessing and recruiting learners.



Graham Jagger
Member since 2014

The project explored good practice nationally and internationally and used the evidence base to develop a set of principles and good practice guidelines. Members were consulted at every stage and provided invaluable feedback and suggestions for improvement.

The draft online interactive toolkit was presented to the Patient Advisory Forum for ratification in April 2017 and is live on HEE's website. This 'How To' guide aims to illustrate the potential and is designed to spur people on to further development of these principles, rather than insisting on compliance.

The draft guidance was tested out with key stakeholders and the findings and recommendations will be incorporated into clinical education and quality assurance processes.

The project has considered all four fields of nursing practice – Child, Adult, Mental Health and Learning Disability – from pre-registration to some aspects of post-qualification continuous professional development.

The 'How To' Guide is designed to support a range of stakeholders, including

- university lecturers and training department staff in healthcare organisations
- clinical supervisors who are providing learning experiences for students and staff undertaking professional development
- involvement leads, who have the responsibility of ensuring that service users and carers are involved
- service users and carers who offer their personal experience of illness or disability to support nurse education
- students and staff who are engaged in learning
- inspection and quality assurance functions, who need to know what good practice looks like.

The toolkit is intended to be applicable to a wide range of organisations (NHS, charity and commercial providers of nursing services as well as further and higher education), and includes useful case studies from a variety of settings. It recognises that in some organisations, service user and carer involvement in nurse education will have its own dedicated infrastructure, while for others it will be part of the work of a wider faculty or health service.



Rosemary Whitehurst
Member since 2014

Ensuring the patient voice is at the centre of programme development

Theme 3 of the *Raising the Bar Nurse Education Programme* seeks to ensure meaningful Patient and Public Involvement. This programme has established a close working partnership with PAF to ensure that the patient's voice is at the centre of programme development from design to implementation. PAF member Maggie Stubbs sits on the Nursing & Midwifery Assurance Committee, which ensures good governance of the programme.

Providing a PPI perspective on new roles

In June 2017 PAF developed a discussion paper 'A Patient and Public Perspective on New Roles' and presented a challenge to the organisation about how they consider the new roles. The paper had six emergent questions that the Forum suggested should guide the development of any new roles in health and care. It was requested by the chair of the Forum that these should be applied to the development of the Nursing Associate role and a further discussion paper was considered in July 2017.



Fatima Khan-Shah
Member since 2017

This paper tested the questions identified by PAF as those important to the public to be answered when new roles are considered.

1. What is the evidence of the need for this role?
2. What is the risk management framework for the role?
3. What is the clinical governance strategy?
4. What is the communication plan for all new roles including this one?
5. How will the role be monitored and evaluated?
6. How will the patients and public be involved in development and evaluation?



Elizabeth Manero
Member since 2014

Strategic planning

Quarterly meetings include a focused debate on a specific area of HEE work, usually co-presented by the HEE programme lead and the PAF member working on the project. These presentations and discussions help PAF develop a strategic overview of the organisation's work. In the past year, topics have included a number of DEQ programmes, public health and widening access to NHS jobs. Following the quarterly meetings and reflection on reports from members involved in HEE programmes, the PAF agrees three key issues for the Chair to feed back to the Board.

A degree of stability in the support for the Forum and better internal communications have been achieved this year, with a permanent appointment of a national stakeholder officer.



Rosalind Maxwell-Harrison
Member since 2014

HEE work programmes with PAF input

Community Nursing Review

PAF is linked in to this work through members Janet Down who attended the first stakeholder engagement event, held in London and Joanne Bussey, who attended the event held in Birmingham. Janet and Joanne are also the PAF representatives on the Review's steering group.

This project, which launched in February 2018, aims to consider the future education needs of the community workforce, and what skills and knowledge they will require.

Pharmacy Programme Assurance Board

PAF member Graham Jagger attends this the Board which is overseeing the implementation of the Pharmacy Integration Fund and Pharmacy Reform work programmes. These are aimed at developing the clinical pharmacist and pharmacy technician workforce to enable them to make a greater contribution in urgent and primary care settings including care homes.

PAF is also providing patient/ lay representation on the research steering group formed to evaluate the pharmacy technician development programme being run by Coventry University.

NHS111/urgent care workforce

Graham Jagger and David Burbidge are involved in a work programme relating to improving the recruitment and retention of the NHS111/urgent care workforce. As members of the Steering Group, they have overseen the development of a series of products including

- a competency-based careers framework
- a workforce governance guide
- workforce modelling
- mental health and wellbeing of the workforce

which has now been published as a workforce blueprint for the NHS111 workforce. Both PAF members have been involved in carrying out Equality Impact Assessments of Workforce Blueprint component products to ensure their compliance with EDI and WRES requirements and HEE's widening participation objectives.

Graham also provides PAF representation on the Emergency Department Workforce Steering Group, which succeeded HEE's Urgent and Emergency Care Workforce Board in January 201.

A guidance document describing the new and extended roles delivering patient care in Emergency and Urgent Care settings has been produced and circulated to PAF members for comment.



Priscilla McGuire
Member since 2017

Access to GP services

Joanne Bussey is the PAF link into a workstream aiming to improve access to GP services; the approach includes workshops, information sharing and case studies to provide insights into good and innovative practice. The programme includes representatives from patient groups, CCG lay members, GP PPGs, third sector organisations and the health and wellbeing alliance.



Steve McNeice
Member since 2014

Simulation-based Education Project

A newly-set up task and finish group, part of the Simulation Based Education (SBE) Project, has begun work, with the PAF link being Rosalind Maxwell-Harrison. This is one of five subgroups of the Project and has met twice. It will consider, amongst other key issues, patient experiences of SBE, a literature review, and review of the HEE STAR to see if simulation-based programmes are included in the menu of solutions across different healthcare sectors.

Medical Associate Professions (MAPs) Oversight Board and MAPs Regulation and Quality Steering Group

Graham Jagger represents PAF on the MAPs Oversight Board and also on the MAPs Regulation, Career Framework and Communications working groups. A key piece of work this year has been overseeing the consultation on regulation of the MAPs profession.

“ The Patient Advisory Forum holds to account, challenges and supports programmes to ensure that patients and public are recognised as a valuable partner in the quality of training and development and new ways of working. The aim is to build a workforce fit for purpose and for future needs, taking into account the NHS Constitution and the Nolan Principles.”

Maggie Stubbs, PAF member

Maggie Stubbs provided a guest blog for Professor Lisa Bayliss-Pratt's LinkedIn profile on the patient's voice in HEE's work.

PAF member Rosalind Maxwell-Harrison has been involved in the MAPS Career Framework and Professional Identity sub group which has been exploring how MAPS will include the MAP skills required to teach and supervise junior doctors and others and their progression routes including an academic pathway.

Pharmacy Integration Fund: Community Pharmacist training tender bid evaluation and moderation

The Pharmacy Integration Fund is an HEE initiative to develop the community pharmacist and pharmacy technician workforce. This piece of work was the final component in the tendering for a national training programme to develop this workforce and PAF, through member Graham Jagger, has been represented at all stages in the work, contributing to the development of tender specifications and evaluating and moderating the bids.

Having been part of the reference group developing the Pharmacy Technician programme PAF has now been invited to join the Research Steering Group to provide patient representation in overseeing and evaluating the impact of the pilot programme.

Proactive Risk Advisory Group

PAF member Elizabeth Manero contributes to this group, the work of which follows on from the Patient Safety Commission in instigating an education programme for postgraduate trainee doctors on proactively managing risk within the system, rather than reacting to individual incidents. As part of her contribution to this work, Elizabeth has requested that an acute medical bias be avoided, bearing in mind that most patient contact is with primary care and that mental health and community services can have a significant patient safety risk.

HEE held the first national conference on the Nursing Associate role in November 2017 to showcase the successful first year of the pilot programme and share and celebrate good practice and partnership working. More than 400 delegates took part in a packed programme of speeches, workshops, exhibitions and networking. Kiran Bali attended the event on behalf of PAF, and contributed to the [official video of the event](#).



Phil Hough
Member since 2017



Janet Down
Member since 2017

Communications subgroup

Following discussions at PAF in July 2017 on how better to raise its profile and raise awareness of the value of its work, a communications subgroup was set up involving members Barbara Wood, Kiran Bali and Anna Gill, stakeholder relationship manager Loren Grant and with support from the PAF secretariat.

Between July and December 2017, the group developed a communications strategy and action plan, including identifying key audiences and metrics. Actions included refreshing the biographies of PAF members, developing new material for the PAF page on the HEE website, commissioning professional photographs and drafting an annual review of PAF's work to demonstrate its impact.



Joanne Bussey
Member since 2017

HEE's corporate website

During 2017, PAF members were involved in consultation on the redesign of the organisation's website and were able to provide constructive feedback and suggestions for improving the representation of PAF and the patient voice in general on the site. PAF is now working with the digital communications team to provide assurance on this issue.

Plans for next year

- PAF programme of work

Standing items for each meeting include closing the loop reports, a report for the HEE Board and an executive update. Presentations from programme leads and other senior staff on various topics are followed by question and answer sessions and debate.

Topics which the PAF plan to examine and debate with the HEE colleagues over the coming year include:

- Improving services through digital technology
- Value for money
- Widening participation
- Patient involvement in multi-professional education
- Workforce planning
- PPI in Genomics



Barbara Wood
Member since 2014

Case study

Impact on development of the Advanced Clinical Practitioner programme and framework

Barbara Wood, PAF member and Peter Harris, PPV representative in the East Midlands, were involved in the Advanced Clinical Practitioner work led by HEE, ensuring that the patient and public perspectives were included from the very beginning.

Through extensive background reading and attending conferences, they got to grips with the complex subject, which meant they could provide valuable and informed insights as 'critical friends' on the steering group.

Barbara presented to an ACP Conference in November 2016, where she said: "*Titles don't really communicate what's important. Patients do need to be told, in terms which they can understand, what the role of this practitioner will be in their care.*"

Professor John Clark, who is Senior Responsible Officer for the programme, has welcomed the contributions from John and Barbara. He says: 'The PPV has been integral to the development of the ACP framework from the outset. Whilst the conversations have at times been rightly challenging, this has stretched the professionals thinking, so that the ACP Framework is significantly better for the PPV contribution.'

"I am very grateful to Barbara Wood and Peter Harris for their time, commitment, patience, and considered wisdom."

Advanced clinical practice embodies the ability to manage complete clinical care in partnership with patients/carers. It includes the analysis and synthesis of complex problems across a range of settings, enabling innovative solutions to enhance patient experience and improve outcomes.

The national ACP framework launched in November 2017, along with an online toolkit to support the development of these roles.

