

CHRE's Plan for working with patients and the public

2009

1. We propose using a four-stage approach to increase the quality and volume of work that we do with patients and the public. Our main aims are:

Aim 1: to develop a diverse network of patient and public representatives

- In 2008 we will put in place technical systems to support increased work with wider groups of patients and the public in the four countries. We will also make information available in hard copy formats, which will be available on request
- In the latter part of 2008 and in Q1 2009 we will start to invite patients and the public to voluntarily provide personal details for our database in order that we can contact them about forthcoming consultations and events. This recruitment drive will be ongoing.
- We will develop publicity materials about our role in professional regulation and the work that we do. These materials will be for distribution to patients and the public in Q1 2009
- All teams will use a check-list tool in their projects to consider patients and the public when planning projects in 2009. Where there is a patient and public consideration to be taken into account, this will be written into the project proposals made to Council
- We will deliver internal training programmes for staff and Council members to support good quality guidelines for patient and public involvement in Q1 2009. We will follow this up throughout the year with updates, developing and transferring skills as we acquire increasing expertise in this field of work
- All teams will examine proposed documentation before distribution to patient and public audiences, checking that the language is in plain English and avoids jargon. Teams will aim to produce clear and simple summaries of complex documents and request written feedback. Our style guide will deliver guidance to staff when writing for patient and public audiences.

Aim 2: to increase participation in our patient and public work

- For all members of our patient and public network we will provide training which may be in the form of information leaflets, interactive website training or face-to-face meetings (depending on the level of complexity of projects they are likely to participate in)
- If we require some members of the patients and the public to meet face-to-face on a regular basis, we will outline our policy on expenses and allowances, which will be in line with the practice of similar organisations and will be published on our website
- We intend to conduct consultancy or research to increase our understanding of the motivations behind those who belong to patient and public groups and those who do not. This will be to identify how we can aim to attract and retain more people on our patient and public network

Aim 3: onward management of our plan to work with patients and the public

- We may also use some or all of the following methods to develop and progress our plan, always seeking to pursue the goal of excellence in this area of work:
 - Consultancy
 - Research
 - Collaborative work with regulators and their patient and public schemes
 - Collaborative work with established patient and public representative organisations across the four countries

- We hold events and other programmes aimed at involving patients and the public in our work in all the four countries of England, Northern Ireland, Scotland and Wales
- Our remote conferencing facilities have the potential to encourage increased participation by some patients and the public in meetings that may need to take place at our London office
- We will liaise with the leads of patient and public schemes within and outside the professional regulatory sector to ensure that our patient and public plan is continuously updated and that our work is complementary to their initiatives. Similarly we will aim to keep abreast of the work of other similar schemes to ensure that our work remains up-to-date
- We will work with regulators and their reference groups where appropriate to share good practice on working with patients and the public
- We will set up a patient and public focus group, working with key stakeholders in health (including the professional regulators) and other public sectors and the devolved administrations, who have already developed some expertise in this area.

Aim 4: to monitor our PPI plan

- Our plan to work with patients and the public will be reviewed annually by our Council to ensure that it is updated and there is flexibility to consider and implement regular improvement. We may also invite some patients and the public who have registered on our network to participate in a review of our plan once a year
- We aim to share ideas for good practice with our partners as well as learn from their experiences
- We share common themes from regional patient and public meetings (for example the autumn series) with attendees of all our regional events, thereby ensuring that patients and the public in the four countries have the ability to review issues that are common to everyone.

2. Working with patients and the public in 2009

Focus	Actions	Timeline
<ul style="list-style-type: none"> Implementing structures to support more efficient networking with patient and public contacts 	<ul style="list-style-type: none"> Data entry will be commissioned to refine the quality of personal records currently held in CHRE. We will comply with the requirements of the Data Protection Act 1998 for these records 	<ul style="list-style-type: none"> Q4 2008
<ul style="list-style-type: none"> Implementing and building a patient and public network 	<ul style="list-style-type: none"> We will invite patients and the public to register their details on our network 	<ul style="list-style-type: none"> Q1 2009 onwards
<ul style="list-style-type: none"> Making our work more accessible 	<ul style="list-style-type: none"> We will make information available in hard-copy formats which will be available on request and make information available on our website 	<ul style="list-style-type: none"> Q1 2009 onwards
<ul style="list-style-type: none"> Aim 1 	<ul style="list-style-type: none"> Implementation 	<ul style="list-style-type: none"> Q1/Q2 2009
<ul style="list-style-type: none"> Aim 2 	<ul style="list-style-type: none"> Implementation 	<ul style="list-style-type: none"> Q1/Q2 2009
<ul style="list-style-type: none"> Aim 3 	<ul style="list-style-type: none"> Implementation 	<ul style="list-style-type: none"> Q3/Q4 2009
<ul style="list-style-type: none"> Aim 4 	<ul style="list-style-type: none"> Implementation 	<ul style="list-style-type: none"> Q3/4 2009 – Q1 2010

3. Monitoring and evaluation

Our plan for working with patients and the public will be reviewed to determine whether the deliverables identified in the action plan are of quality standard and have been delivered against the timeframes identified. We will also:

- Use feedback forms at patient and public events
- Encourage feedback through our e-newsletter, the website and in writing (via emails or letters).