

NIHR Patient Safety Research Collaborations Network: SafetyNet Public Involvement Strategy

Purpose of the strategy

This document sets out the vision, aims and objectives for public involvement in 'SafetyNet' for 2023-2028. SafetyNet is a network bringing together the National Institute of Health and Care Research (NIHR) Patient Safety Research Collaborations (PSRCs). This document includes a detailed implementation plan for 2023-2025. It is a live document and will be reviewed by the PSRCs' public involvement leads and lay leaders annually.

Background

There are six Patient Safety Research Collaborations across the UK. PSRCs are a partnership between universities and NHS trusts that support patient safety research, funded by the NIHR. PSRCs carry out research to improve patient safety, looking at topics including service delivery, patient safety behaviours, clinical decision making, and transitions between care settings. Each of the Patient Safety Research Collaborations has a public involvement strategy that sets out how public members are involved at that individual PSRC. The strategies can be found on each of the [PSRC websites](#).

The PSRCs' public involvement leads and lay leaders have set up a SafetyNet Public Involvement Network. The SafetyNet Public Involvement Network has a shared online area and meets throughout the year to discuss challenges and share learning. The Public Involvement Network will deliver this strategy. See **Appendix 1** for more background, abbreviations and definitions (e.g. lay leaders).

Safety Net visions and goals¹

As the NIHR PSRC Network, SafetyNet's vision is to exploit the potential for sharing knowledge, expertise and resources across the six PSRCs. This will maximise the PSRCs' ability to deliver highly relevant research that responds to the needs of patients and the health and care system, and enhances the impact of patient safety research in England.

We will work closely with our stakeholders and wider networks to:

- Enhance the PSRCs' ability to work across areas with the greatest need for improvement in patient safety, including reducing inequalities.
- Enable greater responsiveness to the needs of the health and care system by acting as a focal point for collaboration across the PSRCs.
- Create capacity for, and capability in, patient safety research by bringing researchers and PhD students together to learn from one another and generate ideas for new research and funding.
- Facilitate links and drive collaboration across a wide range of stakeholders.
- Generate best practice for patient and public involvement/engagement and equity, diversity and inclusion in patient safety research.
- Actively communicate findings to a wide range of audiences.

¹ <https://psrc-network.nihr.ac.uk/about/>

Our Vision for SafetyNet Public Involvement

We strive to involve patients, carers and members of the public meaningfully, inclusively and appropriately in SafetyNet governance structures and collaborative work. We will build on best practice and look to generate new knowledge around inclusive public involvement in patient safety work and we will disseminate our learning widely.

Our Aims for SafetyNet Public Involvement

The Public Involvement Network have developed six strategic aims. The aims align to the [UK standards of public involvement in research](#) (given in brackets below). Below sets out the implementation plan for 2023-2025, outlining our objectives and what will be done to achieve these and how success will be measured.

AIM 1 (Working Together): Build the Public Involvement Network and share learning and best practice of public involvement in patient safety research

Bringing together PSRC public involvement leads and lay leaders and meaningfully involving public partners throughout SafetyNet's work, will help to ensure that the "sum is greater than the individual parts." The Public Involvement Network will share knowledge and experiences to help ensure that PSRCs are aware of the growing evidence around public involvement, and, specifically, best practice in public involvement in patient safety research. We will learn from different approaches and public involvement models across the PSRCs (such as involving public members in reviewing public involvement plans). If we generate new knowledge around public involvement in patient safety research, we will share it widely.

AIM 2 (Learning and Support): Build capacity of patient safety researchers and public partners to carry out meaningful and inclusive public involvement

In some cases, we will be involving patients or family members who may have experienced harm. Therefore public involvement approaches in this field may need to be trauma-informed. To reduce duplication of efforts, individual PSRCs will share public involvement training, guidance and resources across SafetyNet, to build on existing best practice. Where there are gaps, we will work with public partners to develop novel solutions to shared challenges, such as a concise, practical and accessible resource for researchers to learn how to do inclusive public involvement in patient safety. We will also co-produce "effective lay leader training" across all the PSRC lay leaders.

AIM 3 (Inclusive Opportunities): Build knowledge and share learning in involving diverse communities in our local populations

It is important that SafetyNet collaborative work involves public partners from diverse backgrounds, who bring a range of perspectives and insights based on different lived experiences. We will ensure SafetyNet recruitment processes for public partners are transparent and inclusive (see objectives below). Each PSRC has a unique local population, potentially with different needs. We will build on existing best practice around community engagement to grow the evidence on involving specific groups, with a focus on under-represented and under-served communities (e.g. women experiencing homelessness). We will share our learning in a way that is inclusive and accessible (see objectives below),

targeting the populations that would benefit from this knowledge. This aim will be closely linked with SafetyNet’s Equity, Diversity and Inclusion (EDI) strategy.

AIM 4 (Governance): Meaningfully involve public partners in SafetyNet governance structures

Lay leaders linked to PSRCs will be active members of SafetyNet governance structures, such as the SafetyNet Executive Board, alongside the PSRC Directors and SafetyNet Public Involvement Lead. The SafetyNet Executive Board is a decision-making board that sets the strategic direction of SafetyNet. Lay leaders will also be involved in the Public Involvement Network. The same lay leaders will be members for two years, before other lay leaders from different PSRCs replace them. As advised by our lay leaders, having the same lay leaders involved for a number of years (rather than rotating lay leaders per meeting) will mean they will have appropriate experience and background knowledge to feel supported to meaningfully contribute at Board level, as the meetings are infrequent. Public members from diverse backgrounds will also be involved throughout all SafetyNet collaborative projects and will be appropriately supported.

AIM 5 (Impact): Capture the impact of public involvement in SafetyNet collaborative work

It is important to capture the impact of the public involvement in SafetyNet and its collaborative work, to demonstrate the value of public involvement and share what could be done differently. We will involve public partners in evaluating impact and capture whether public partners and researchers are also benefiting from the interaction. This will support on-going learning and improvement, which we will then disseminate.

AIM 6 (Communication): Communicate about public involvement in Safety Net collaborative work in an accessible way

We will communicate about SafetyNet collaborative work and public involvement opportunities in engaging and innovative ways to ensure that it is reaching a wide audience and we are growing our visibility and network. We will work closely with public members and EDI leads across the PSRCs to ensure the communications are accessible and inclusive. This aim will be closely linked with SafetyNet’s communications strategy and EDI strategy.

SafetyNet public involvement implementation plan (2023-2025)

Below is an outline of how we plan to achieve each of the six aims including in which quarter and year the task will be completed (Q1 meaning January-March, Q2 April-June, etc.). This implementation plan will be revised for 2026-2028 towards the end of 2025. See **Appendix 1** for abbreviations of each PSRC.

Aim 1 (Working Together): Build the Public Involvement Network and share learning and best practice of public involvement in patient safety research

Objectives	How will we do it?	How will we measure progress?
Share how we do public involvement at individual PSRCs across SafetyNet,	Establish a Public Involvement Network of all the PSRC PPIE Leads and some lay leaders to meet quarterly online and face-to-face once a year. (<i>Ongoing – NWL</i>)	Record and review: - Review number of PSRC public involvement leads

to build on learning.	<p>Create an active shared space to share documents and information easily between PSRCs. <i>(Q4 2024 – NWL)</i></p> <p>Share individual PSRC public involvement strategies online and across SafetyNet. With each PSRC having the opportunity to present on areas of their strategy at the Public Involvement Network meetings. <i>(Q4 2024 – All PSRCs)</i></p> <p>Host a workshop to identify areas of common best practice, leadership, learning and collaboration. <i>(Q4 2025 – Public Involvement Network)</i></p>	<p>and lay leaders attendance at meetings annually <i>(Q2 2025 – NWL)</i></p> <ul style="list-style-type: none"> - Record number of documents on shared space <i>(Q2 2025 – NWL)</i>
Involve public partners in all collaborative projects.	<p>Work on at least one collaborative project with at least two PSRCs involving public partners each year. <i>(Ongoing – All PSRCs)</i>. For example, the Public Involvement Front Door.</p>	<p>Record and review:</p> <ul style="list-style-type: none"> - Number of collaborative projects and outputs <i>(Q2 2025 – All PSRCs)</i> - Number of public members involved in collaborative projects and impact <i>(Q2 2025 – All PSRCs)</i>
Share and learn from other NIHR funded organisations .	<p>Inviting the public involvement leads from the PSRCs and some of the NIHR Applied Research Collaborations at an event every two years to share best practice around public involvement in these centres and discuss challenges. <i>(Q4 2025 – NWL)</i></p>	<p>Record and review:</p> <ul style="list-style-type: none"> - Number of attendees at meeting <i>(Q4 2025 – NWL)</i>
Link up with the Patient Safety Partners (PSPs) of our individual PSRC local Trust and the National PSPs.	<p>Add the National PSP lead to the SafetyNet newsletter. <i>(Q3 2024 – Comms Lead)</i></p> <p>PSRC public involvement leads to look at connecting with their local PSPs.</p> <ul style="list-style-type: none"> - Involve at least one PSP in a collaborative project each year. <i>(Ongoing – All PSRCs)</i> 	<p>Record and review:</p> <ul style="list-style-type: none"> - Record how many PSPs are involved in SafetyNet's collaborative work <i>(Q2 2025 – All PSRCs)</i>

AIM 2 (Learning and Support): Build capacity of patient safety researchers and public partners to carry out meaningful and inclusive public involvement

Objectives	How will we do it?	How will we measure progress?
Share training and best practice resources in public involvement in patient safety research.	Public Involvement Leads to add training opportunities and resources to the shared area and to highlight them at Public Involvement Network meetings (<i>Ongoing – All PSRCs</i>)	Record and review: - Record number of documents and downloads in the shared space (<i>Q2 2025 – NWL</i>)
Support collaborative projects and PSRC researchers to have meaningful public involvement in patient safety research.	Develop a concise public involvement resource (Public Involvement Front Door) in collaboration with researchers, user-centred designers and public partners with a focus on patient safety research (<i>Q4 2024 – NWL</i>). We will: - Work with a PSRC lay leader and a Patient Safety Partner - Develop information in different formats (e.g. videos) and practical, downloadable documents - Focus on inclusivity, capturing impact and public involvement in patient safety research	Record and review: - Record use of website and feedback (<i>Q2 2025 - NWL</i>)
Support and train public partners involved in SafetyNet collaborative projects and governance structures appropriately.	Scope out training that exists for public members across the PSRCs and nationally (<i>Q3 2025 – NWL</i>) Develop a training skills assessment for all lay leaders and an effective lay leader training for all PSRC lay leaders, building on existing evidence and training programmes (<i>Q4 2025 – Y&H</i>)	Record and review: - Record attendance to training and feedback (<i>Q4 2025 - NWL</i>)

AIM 3 (Inclusive Opportunities): Build knowledge and share learning in involving diverse communities in our local populations

Objectives	How will we do it?	How will we measure progress?
Ensure SafetyNet public involvement work is aligned with the SafetyNet	Work closely with the SafetyNet Director, EDI Lead (who is also the SafetyNet Public Involvement Lead) and EDI Network to ensure public involvement strategy is aligned with the	Record and review: - Review strategies at joint Public Involvement/EDI

EDI strategy and the Safety Equity Research Collaboration.	SafetyNet EDI strategy and the research work of the Safety Equity Research Collaboration. Several of the public involvement leads are also EDI leads and will attend both Public Involvement Network meetings and EDI meetings. <i>(Ongoing – SafetyNet EDI Lead)</i>	Network meeting annually <i>(Q4 2025 – SafetyNet Public Involvement/EDI Lead)</i>
Ensure all SafetyNet public involvement opportunities for collaborative projects are accessible and inclusive.	Recruitment materials will be based on templates and shortlisting processes on the Public Involvement Front Door, which has been developed with EDI experts and public members. All public members will be offered honoraria following the NIHR guidance on payments for public contributors and appropriately supported with individual access needs (e.g. support with WiFi or a interpreters).	Record and review: <ul style="list-style-type: none"> - Record necessary demographics on public members involved <i>(Q2 2025 – All PSRCs)</i>
Share knowledge about working with specific under-represented or underserved communities.	All communities are unique. Communities want to get out something from our relationships with them, rather than us only gaining from their advice (e.g. we will form reciprocal relationships). Responding to the recommendation in the “ Toolkit Mountain ”, which called for guidance on working with specific under-represented groups and building on existing evidence of working with the voluntary, community and social enterprise organisations, individual PSRCs will develop guidance for working with specific communities. The guidance documents created will be included on the Public Involvement Front Door (e.g. community engagement toolkit for “x” community). For example, the guidance would state what the specific community told us about their communication preferences and what they would want from a reciprocal relationship with us, to ensure that they are having their needs. These documents will add to the evidence base and will guide others how to appropriately interact with specific communities to lead to better experience for community members and to help build sustained trust with research. For example, guidance for working with the Deaf community . <i>(Ongoing – All PSRCs)</i>	Record and review: <ul style="list-style-type: none"> - Number of new guidance for specific groups on the Public Involvement Front Door <i>(Q2 2025 – NWL)</i>

	<p>When a national opportunity arises at a PSRC where there is a need for involvement of a specific group, PSRCs will support each other with recruitment, through their trusted relationships with local community organisations. <i>(Ongoing – All PSRCs)</i></p> <p>Appropriate terms and language are always changing. The Public Involvement Network will share new evidence and discuss challenges such as how to collect information on level of deprivation. <i>(Ongoing – All PSRCs)</i></p>	
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AIM 4 (Governance): Meaningfully involve public partners in SafetyNet governance structures

Objectives	How will we do it?	How will we measure progress?
Ensure public members on SafetyNet governance structures and public involvement is discussed at every board meeting.	<p>External high level patient representatives have already been invited to the SafetyNet Strategic Advisory Committee (mainly of non-SafetyNet external members). Two lay leaders from across the PSRC to be recruited through a transparent application process, scored independently by two public involvement leads to join the SafetyNet Executive Board for two years. They will rotate off and different lay leaders will be recruited in 2026. <i>(Q4 2024 - NWL)</i></p> <p>The SafetyNet Public Involvement Lead or lay leaders will update on public involvement at every Executive meeting. Public involvement will be a standing agenda item on the external SafetyNet Advisory Committee also <i>(Ongoing - SafetyNet Public Involvement Lead)</i></p>	<p>Record and review:</p> <ul style="list-style-type: none"> - Attendance of lay leaders at Executive meetings <i>(Q2 2025 - Y&H)</i> - Public involvement on the agenda of every Exec and Advisory Committee meeting <i>(Ongoing – Y&H)</i>
Ensure lay leaders are involved in setting the strategic direction of SafetyNet public involvement work.	<p>Three lay leaders from PSRCs have joined the Public Involvement Network, to be the public voice at meetings where we discuss the public involvement strategy, progress and challenges. <i>(Ongoing – All PSRCs)</i></p>	<p>Record and review:</p> <ul style="list-style-type: none"> - Attendance of lay leaders at Public Involvement Network meetings <i>(Q2 2025 – NWL)</i>

AIM 5 (Impact): Capture the impact of public involvement in SafetyNet collaborative work

Objectives	How will we do it?	How will we measure progress?
Showcase the impact of SafetyNet public involvement in collaborative projects.	<p>Researchers, public members and other staff involved in SafetyNet collaborative projects will use the Public Involvement Front Door planning and impact section to ensure capturing impact of public involvement is thought about from the start of a project. There are downloadable forms for researchers and public members capture the impact of the public involvement. If the lead researcher of a collaborative project needs further support, on top of the Public Involvement Front Door, they can seek support from the public involvement lead at their PSRC. The collaborative teams will evaluate the impact of the public involvement together.</p> <p>For all collaborative projects, researchers will be asked to share “You said, We did” at the start of every meeting, to show the public partners how their ideas have influenced the research. <i>(Ongoing – Researchers, public partners and public involvement leads at all PSRCs)</i></p> <p>Each year, researchers will be asked to submit public involvement impact case studies of SafetyNet collaborative projects where patients have been meaningfully involved.</p> <ul style="list-style-type: none"> - Part of every Public Involvement Network meeting (including lay leaders) will be dedicated to talking about impact. The members will select at least one impact case study to be showcased on the Public Involvement Front Door website each year. <i>(Q2 2025 – Public Involvement Network)</i> <p>Every two years, showcase impact case studies at a face-to-face event (e.g. SafetyNet Symposium or conference). <i>(Q2 2025 – Public Involvement Network)</i></p>	<p>Record and review:</p> <ul style="list-style-type: none"> - Number of impact case studies and google analytics <i>(Q2 2025 – Public Involvement Network)</i> - Successful showcasing of impact case studies at an event <i>(Q2 2025 – Public Involvement Network)</i>

Create a culture of feedback and continuous learning.	<p>The Public Involvement Network will have an online anonymous feedback wall, where everyone will be asked to share any feedback for the SafetyNet or the Network to take on board. <i>(Ongoing – Public Involvement Network)</i></p> <p>Public partners will be asked to share feedback in meetings or anonymously after meetings, in order for the feedback to be acted on. <i>(Ongoing – All PSRCs and public partners)</i></p>	<p>Record and review:</p> <ul style="list-style-type: none"> - Use of anonymous feedback wall and improvements made <i>(Q2 2025 - Public Involvement Network)</i> - Public involvement impact described in outputs (e.g. papers/blogs) <i>(Ongoing – All PSRCs and public partners)</i>
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AIM 6 (Communication): Communicate about our collaborative work in an accessible way

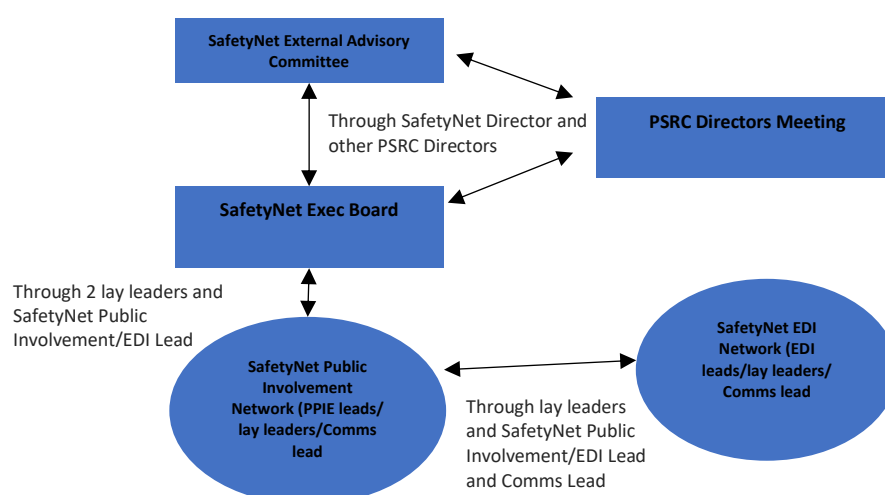
Objectives	How will we do it?	How will we measure progress?
Raise the profile of SafetyNet with the public and disseminate about collaborative projects with public members involved.	<p>Work closely with the SafetyNet Communications Lead to ensure we are linked with the communications strategy. Public involvement and communications will be standing agenda items at the SafetyNet Executive Board. <i>(Ongoing – Comms Lead)</i></p> <p>SafetyNet Public Involvement Network to review the Involvement and Inclusion section of the SafetyNet website annually <i>(Q2 2025 – Public Involvement Network)</i></p>	<p>Record and review:</p> <ul style="list-style-type: none"> - Agenda of Executive Board meetings <i>(Ongoing – Y&H)</i> - SafetyNet website update to date <i>(Ongoing – Comms Lead)</i>
Ensure SafetyNet communication outputs are created with public members and are engaging and accessible.	<p>Co-author at least one blog with a public member about a collaborative project with public involvement on the SafetyNet blog a year <i>(Ongoing – All PSRCs/public partners)</i></p> <p>Use accessibility tools to ensure outputs are accessible. <i>(Ongoing – Comms Lead)</i></p> <p>Use different and innovative formats for communication outputs such as videos <i>(Ongoing – GM)</i></p>	<p>Record and review:</p> <ul style="list-style-type: none"> - Number of co-authored comms outputs and google analytics <i>(Ongoing – All PSRCs/public partners)</i>

Leadership and lines of reporting

Each PSRC has a public involvement lead who leads the delivery of the public involvement strategy at their centre and contributes to the SafetyNet Public Involvement Network. Several public involvement leads are also their centres' EDI lead and sit on the SafetyNet EDI Network. This helps to ensure the SafetyNet public involvement strategy and EDI strategy are aligned. The secretariat for the SafetyNet Public Involvement Network and EDI Network is the SafetyNet public involvement/EDI lead, who is the public involvement/EDI lead at NIHR North West London PSRC.

This strategy has been approved by the SafetyNet Director. This strategy is aligned with the SafetyNet communications strategy and **Safety Equity Research Collaboration**, through the SafetyNet Director (Prof Rebecca Lawton), SafetyNet Public Involvement Lead (Anna Lawrence-Jones) and the SafetyNet Communications Lead (Melissa Lima Silva). The Safety Equity Research Collaboration is about sharing and developing research that focuses on safety equity.

Figure 1: SafetyNet organogram of lines of reporting



Guidance, resources and training

The SafetyNet Public Involvement Network will be gathering training and guidance for public involvement in patient safety research, as well as the development of the Public Involvement Front Door (a resource for researchers to carry out inclusive involvement).

Existing public networks

Each PSRC has an existing public network, which the public involvement leads can send national opportunities to, as well as posting on the NIHR's People in Research or (if partnered with NIHR North West London PSRC) on the [VOICE platform](#).

Funding to support involvement

The SafetyNet public involvement budget to cover core collaborative projects laid out in this strategy is managed by NWL. GM manage the communications budget for any

communication activities in this strategy. We follow the [NIHR Payment Guidance for Researchers and Professionals \(August 2022\)](#).

Partnerships and collaborators

We will continue to be connected to other NIHR funded organisations, such as the Applied Research Collaborations and the Biomedical Research Collaborations and their Public Involvement Networks, to share learning about public involvement in country wide networks.

Appendix 1: Background and definitions

UK standards of public involvement in research

	Inclusive Opportunities: Offering public involvement opportunities that are accessible and that reach people and groups according to research needs.
	Working Together: Working together in a way that values all contributions, and that builds and sustains mutually respectful and productive relationships.
	Support and Learning: Offering and promoting support and learning opportunities that build confidence and skills for public involvement in research.
	Governance: Involving the public in research management, regulation, leadership and decision making.
	Communications: Using plain language for well-timed and relevant communications, as part of involvement plans and activities.
	Impact: Seeking improvement by identifying and sharing the difference that public involvement makes to research.

NIHR Patient Safety Research Collaborations abbreviations and websites

- [NIHR Central London PSRC](#) (CL)
- [NIHR Greater Manchester PSRC](#) (GM)
- [NIHR Midlands PSRC](#) (Mids)
- [NIHR Newcastle PSRC](#) (Newc)
- [NIHR North West London PSRC](#) (NWL)
- [NIHR Yorkshire & Humber PSRC](#) (Y&H)

Patient and Public Involvement

NIHR defines patient and public involvement in research as research being carried out ‘**with**’ or ‘**by**’ patients/carers/members of the public, rather than ‘**to**’, ‘**about**’ or ‘**for**’ them. This includes offering advice from a public perspective and working in partnership with researchers to, for example: come up with research ideas, review research documents, carry out research (e.g. doing interviews or analysing data), and communicate about research to others.

Public partner

Is a term used to describe patients, carers and members of the public with a specific role in designing or implementing a research study, working in partnership with researchers and healthcare professionals.

Lay leader

Is a term we use in this document to describe public partners who are involved with one or more of the NIHR PSRCs in a significant role and therefore bring experience in working with PSRCs in the context of patient safety research.

Under-served group

The definition is highly context-specific with no single definition; it will depend on the population, the condition(s) or situation being studied and the question being asked by research teams. Some key characteristics common to several under-served groups are:

- Lower inclusion in research than one would expect from population estimates
- High healthcare burden that is not matched by the volume of research designed for the group
- Important differences in how a group responds to or engages with healthcare interventions compared to other groups, with research neglecting to address these factors ([NIHR INCLUDE Project](#)).