



Public Involvement in Education & Research Partnership



Annual Report

September 2017 – August 2018

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Introduction

Welcome to the annual report of the BU PIER Partnership. The report seeks to provide an overview of the scope and range of BU PIER Partnership activity in 2017/18. This year we focused on developing models of user led research and on building on our national reputation for meaningful involvement and collaborations in health and social work education. This included publication of a book chapter on 'Use of simulation as a tool for assessment and for preparing students for the realities and complexities of the workplace' (Hughes and Warren 2018) and engaging members of the BU PIER partnership in writing a book on 'Social Work statutory interventions: the lived experience' which has been submitted and is due for publication by Palgrave Macmillan in March 2019. We have continued our work to develop an evidence base for different models of involvement in research to inform the work we undertake and the support we provide to academics across BU. We conducted a concept analysis of public involvement in research which was published in the open access journal Health Expectations (Hughes and Duffy 2018). This year also saw the alignment of the BU PIER partnership with the newly formed BU Research Centre for Seldom Heard Voices which will enable us to collaborate closely with academic and practice colleagues in user led and co-produced research. Evidence of our growing reputation was in being invited to visit and work with colleagues at the University of Western Norway to support them in their development of a public involvement in education and research group.

A summary of all 2017/18 activity is provided in this report. Should you wish to discuss any aspect, please feel free to contact us.

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Service user and carer partnership members

In the 12 months this report covers, the BU PIER Partnership membership grew from 87 to 100 members with 1 member sadly passing away and one moving on into work, making the total in August 2018 of 100. We have gained 13 new members this year. The group is made up of 57 Service Users and 34 Carers as well as 9 who identify

themselves as Service Users and Carers, 67 are women and 33 men covering a wide variety of illnesses and experiences and geographical areas in Dorset.

We have used 78% of our members this year compared to 56% the previous year.

New members have been identified through a variety of means including:

- Our own membership network
- Academics
- Students on placement
- Networking events
- Our website
- Word of mouth

BU Service user and carer 5 year strategy

Available at www.bournemouth.ac.uk/pier/resources

In May 2015, the HSS Executive approved the Service User and Carers' five year strategy and we continue to work toward these aims which are:

- To collaborate with service users and carers in ways which respect and value them as experts by experience
- To create and support opportunities for service users and carers to lead, contribute and collaborate in research activity
- To develop innovative, meaningful and less resource intensive models of involvement in education which are shown to enhance professional practice
- To develop a national profile for innovative involvement in health and social care research and education
- To increase the number of high impact research studies and publications from across the Faculty of Health and Social Sciences which focus on involvement in health and social care education, research and practice.

The main goal within the strategy for 2017-18 was to demonstrate a contribution to research activity across the Faculty and in REF submissions.

We have made significant progress in achieving this goal through a range of research activities, collaborations and publications. This includes the submission of a bid to the Wellcome Trust Public Engagement Fund for £243,193 in collaboration with BU PIER partnership members, the Patients Association and The Arts Development Company to develop innovative outreach arts based models for engaging seldom heard voices in health research. The outcome of which will be reported in September 2018.

Progress against the five year strategy including involvement in education and research are summarised in the remainder of this annual report.

Involvement in HCPC regulated programmes

Social Work

	Comparison of Social Work Academic Activity Sept 16 – Aug 17 and Sep 17 – Aug 18												
	Year 1				Year 2				Year 3		Step up	Total	
	2017/18		2016/17		2017/18		2016/17		2017/18	2016/17	2017/18	2017/18	2016/17
	MA	BA	MA	BA	MA	BA	MA	BA	BA	BA			
Sessions	5	4	5	7	3	9	1	4	3	6	2(1)	26	24
Hours	47	35.25	32	28.75	5.25	18.25	3	12	8.75	19	11.25(9)	125.75	103.75
Group members	15	14	15	18	5	10	1	4	3	8	6 (4)	53	50
Student feedback	46	79	51	159	0	41	0	0	0	19	11 (17)	177	246

The main areas of involvement in the Social Work BA programme this year are:

- BA Year 1 – 4.12.17 Role play Breaking bad news x6 Fiona Cusack
- BA Year 1 - 8.12.17 Role play feedback x5 Fiona Cusack
- BA Year 1 – 6.3.18 Older Male Carers x2 Sally Lee *
- BA Year 1 – 13.3.18 Cerebral Palsy x1 Sally Lee *
- BA Year 2 – 16.11.17 Portfolio reading x4 Fiona Cusack
- BA Year 2 – 12.12.17 Presentations x1 Mel Hughes
- BA Year 2 – 15.12.17 Presentations x1 Mel Hughes
- BA Year 2 – 17.1.18 Presentations x1 Ros Dray
- BA Year 2 – 6.2.18 Portfolio reading x1 Fiona Cusack
- BA Year 2 – 16.2.18 Portfolio panel x1 Mel Hughes
- BA Year 2 – 21.3.18 Values, Ethics, Ideology x1 Richard Murphy *
- BA Year 2 - 18.4.18 Values, Ethics, Ideology x1 Richard Murphy *
- BA Year 3 - 5.6.18 Presentations x1 Mel Hughes
- BA Year 3 - 6.6.18 Presentations x1 Mel Hughes
- BA Year 3 - 7.6.18 Presentations x1 Mel Hughes

* denotes a new activity for this year

Some examples of BA student feedback for the year:

SW BA Year 1

- That breaking bad news to an S/U is hard when it is not what they wanted to hear but it's key to have empathy and listen to their worries. 4.12.17 Breaking bad news
- Thank you so much for sharing your experiences, it has helped me to know that my role is important and how I conduct myself is so important. Thank you for sharing your values and advice, more insight into this service user group 6.3.18 Older Male Carers
- I learned a lot about cerebral palsy and living with a physical disability and that a SW supports rather than helps. Very interesting morning 13.3.18 Cerebral Palsy

SW BA Year 2

- Just a reminder really, that everyone wants/needs are different so we cannot judge what is important to someone 21.3.18 Values, Ethics, Ideology S/U voice
- How vulnerable special needs children are and how many fights there are to get what the child needs 18.4.18 Values, Ethics, Ideology Carers voice

In the BA Year 1 we had a good mix of contact with BU PIER members and introduced x2 new sessions on Older Carers and Cerebral Palsy.

In the BA Year 2 we again had a good mix of BU PIER members and introduced x2 new sessions in Values, Ethics, and Ideology for Carer and S/U voices.

In BA Year 3 we had half the sessions as the previous year and no student written feedback on the 3 sessions we did do as these were presentations. Will look at discussing this with the SW team with the idea of introducing at least 1 face to face contact session with BU PIER members.

The main areas of involvement in the Social Work MA programme are:

- MA Year 1 – 13.11.17 Role play breaking bad news x5 Fiona Cusack
- MA Year 1 – 23.11.17 Role play feedback x5 Fiona Cusack
- MA Year 1 – 23.4.18 Mental Health/Sub use x3 Ros Dray *
- MA Year 1 – 29.5.18 Presentations x1 Ros Dray
- MA Year 1 – 31.5.18 Presentations x1 Ros Dray
- MA Year 2 - 9.1.18 Presentations x1 Mel Hughes
- MA Year 2 – 6.2.18 Portfolio reading x1 Fiona Cusack
- MA Year 2 – 16.2.18 Portfolio panel x1 Mel Hughes

*denotes a new activity for this year

Some examples of MA student feedback for this year:

SW MA Year1

- How I feel quite nervous when in a conflict situation but manage to hide this 13.11.17 Role play breaking bad news
- A better understanding of what a S/U needs from us. They nearly all said the same and what might seem small to us is big for them 23.11.17 Role play feedback
- Enjoyed the session, very informative linking between theory and practice 23.4.18 Mental Health/Substance Use

In MA Year 1 we have had the same number of sessions as the previous year and 1 new session was introduced Mental Health/Sub use

In MA Year 2 we have had a slight increase in sessions but could do with more face to face sessions with the students to widen the variety of BU PIER members meeting them and get written feedback on this contact from the students.

The main areas of involvement in the Social Work Step Up programme are:

- SW Step Up – 23.1.18 Role play Breaking bad news x3 Fiona Cusack
- SW Step Up – 2.2.18 Role play feedback x3 Fiona Cusack *

* denotes new activity

Some examples of SW Step Up student feedback for the year:

- To listen to the S/U and understand their concerns and frustrations – giving them opportunity and space to air their feelings 23.1.18 Role play Breaking bad news
- Thinking on my feet in a real-life situation. Being fully aware of communication skills that are needed and the pressure of applying these in real time 23.1.18 Role play Breaking bad news
- I learnt how important it is to end a session by reassuring the S/U that you are going to do something specific to help them- by explaining next action you are going to take to give them something to hope/promise to take away from session 23.1.18 Role play breaking bad news

In SW Step Up we have introduced this year in addition to the role play session a follow on role play feedback session as this was being done in the BA and MA and feedback from the BU PIER members indicated it would be good to carry this over into the SW Step Up and it has been very well received by the students.

We engaged with total of 5 members of the SW team during this 12 month period. This activity was funded by the social work education support grant for service user involvement.

Listed below are the number of sessions, hours, group members and applicants we have been involved with in both BA and MA Social Work interviews as well as the SW International interviews this year. The Social Work interviews are divided into 4 parts and were redesigned this year working with the SW team to run the main interviews on Saturday for x6 sessions between Jan – May once a month being based at the EBC. This has worked really well and has run a lot more smoothly for both the applicants and the staff and BU PIER members

1. Introduction and meet current students
2. The Group activity which involves both Academics and BU PIER members (45 mins)
3. The written test which involves the BU PIER members in facilitating (30mins)
4. The individual interview which the Academics and BU PIER members are involved in (30-45mins)

Comparison of Social Work Interviews							
Sep16 - Aug17 and Sep17 - Aug 18			Small Int	Small Int	Intl Int	Intl Int	Total
	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18	
Sessions	22	6	n/a	10	5	6	22 (27)
MA	34	24	n/a	6	6	6	36 (40)
BA	92	69	n/a	8		1	78 (92)
Hours	145	123.25	n/a	13.75	8	7.25	144.25(153)
Group members	38	32	n/a	10	5	6	48 (43)

*Blue in brackets denotes 2016/17

Some examples of feedback from the applicants which were handed in on their feedback forms on the day of their interviews (collated and feedback to the admissions team):

- 27.1.18 - The whole day was incredible, felt very comfortable and welcomed. Fiona and Sue (who conducted interview) were extremely welcoming and made me feel at ease
- 24.2.18 - I think the overall day worked well, especially the fact it was taken into consideration how far people were travelling
- 17.3.18 - Meeting current students to discuss the course and gave people opportunity to ask questions. The whole day was good as it gave everyone equal opportunity to express themselves in different ways.
- 21.4.18 - I had the best interview day this year
- 12.5.18 - The interviews were set in a relaxed pace, very informative to

Some examples of the feedback on the interviews from the BU PIER members:

- 27.1.18 – Felt it went well. I thought the candidates had been well selected for interview. The only thing I found required some effort was fitting the questions into a discussion/conversation. Not impossible but perhaps now I have done it, it will be easier another time. We also had fairly straight forward interviewees. I wonder how it would work when it is not so straight forward and where we could face challenge from candidates who felt hard done by ? Time will tell.
- 17.3.18 – Interviews went well, I finished at half past one, it started snowing so we finished early
- 21.4.18 – I thought the day went well and was productive. It was a privilege to meet such able candidates who will be assets to the profession.
- 12.5.18 – I finished today at 130. Once again this process worked well and the feedback seemed positive.

We managed also to achieve a 91% return rate of the applicant's feedback for the 6 sessions which is a big improvement to the electronic version of feedback and the feedback has enabled us to make small changes during the process to improve the experiences on the day.

The SW International interviews are divided into 2 parts:

1. A written test completed after seeing a short video
2. The individual SKYPE interview

All programs must meet the regulators' approval. The regulators are the Health and Care Professions Council (HCPC) and the Quality Assurance Agency for Higher Education (QAA)

Occupational Therapy

Number of sessions, hours, group members and student feedback forms completed for this 12 month academic year for each year group:

Comparison of Occupational Therapy Academic Activity Sept 16 – Aug 17 and Sept 17 – Aug 18								
	Year 1	Year 1	Year 2	Year 2	Year 3	Year 3	Total	Total
	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18
Sessions	5	5	4	2	0	0	9	7
Hours	38	65.75	8.5	4	0	0	46.5	69.75
Group members	14	20	9	4	0	0	23	24
Student feedback	96	107	95	40	0	0	191	147

The main areas of involvement in the Occupational Therapy programme this year are:

5.10.17 – OT1 & Physio1 Skills for Therapy Practice Communication x4 Sophie Smith

4.12.17 – OT1 OT Portfolio 1 x2 Saffron Scott

16.1.18 – OT1 & Physio1 Skills for Therapy Practice x7 Sophie Smith

1.2.18 – OT1 OT in Action1 Carers x2 Beth Cooke

19.4.18 – OT1 OT in Action1 MS X5 Beth Cooke

9.11.17 – OT2 OT in Action2 Cancer x1 Wessex Cancer Trust Beth Cooke *

16.11.17 – OT2 OT in Action2 Disability x3 Beth Cooke

* denotes new activity

Some examples of student feedback for this year:

OT Year 1

Simple things make a huge difference – introducing self, asking what patient wants, goals, developing a relationship and explaining what is going to happen, to be informed of visits 5.10.17 Skills for Therapy Practice Communication

Thank you for being open and honest it has allowed me to understand and connect with your stories, as person to person not university student to S/U 4.12.17 Portfolio 1

That individual approach is so important to the role. Carers are a vital role to patients and also how challenging their role can be, physically and mentally 1.2.18 OT in Action1 Carers

OT Year 2

Amazingly good talk by the S/U, was so brave. Having had a parent who had cancer, I fully understand what they have been through. Inspirational. 9.11.17 OT in Action2 Cancer

Really enjoyed this session very open and honest account from the mum. Also enjoyed talking to the son and his experiences 16.11.18 OT in Action2 Disability

In OT Year1 we have done the same amount of sessions as we did last year and have expanded the number of BU PIER members the students have been in contact with from 14 to 20 which was a point picked up from student feedback the previous year. There was a really positive development with the OT in Action 1 MS where the 4 ILO's required for this session were:

- To improve awareness of managing MS as a long term condition.
- Talk about fatigue management, pacing, use of diaries to manage fatigue.
- Improve awareness of positive risk taking
- Consider impact of specialist equipment on independence

The PIER members would each be put with 6 - 7 students on 5 tables spread out in BG11 to talk with the students for about 45 minutes about their MS condition generally and would tell their story. The following questions were a starting point for the discussion, but they did not have to use these :

- How do you or does your husband manage the condition?
- Can you explain the type of MS you have and how this was diagnosed?

- What support have you found of most use?
- What advice would you give us as newly qualified health care professional going into practice?
- Where do you find your information?
- Practicalities of day to day management

They would then have a short break and go back to their original tables to design a poster based on interpretation and reflection of the key points they felt should be shared with the rest of the group. A summary of the story/narrative, considerations for future or take home messages.

The aim was to use the posters by way of reflection to ensure students had processed the relevant points and that the SU/Carer could input and clarify anything if needed. It was a good way to enable the SU/Carer to see what points they had communicated and to establish a deeper level of learning.

The main theory we identified was Rolfe G, Freashwater D and Jasper M 2001. Critical reflection in nursing and the helping professions; a user's guide. Basingstoke: Pelgrave Macmillan

What? So What? Now What?

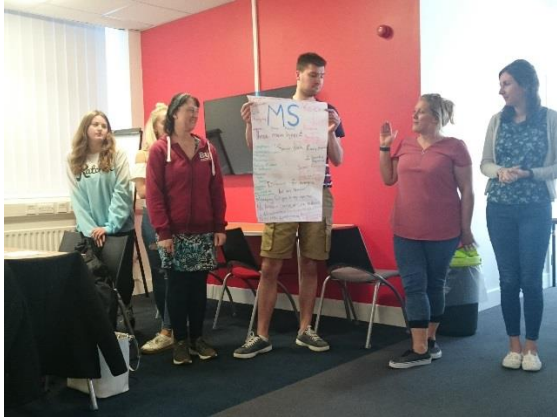
What – This was discussed in detail in the first part of the session with the S/U and Carer

So what – This was expanded on in the second part of the session with the creation of the posters after discussion with the whole group as to the key relevant points to take forward as well as presenting their posters to their fellow students and BU PIER members.

Now what – Take forward their reflected learning in their future work



OT Students in discussion with the BU PIER members about their poster designs



OT Students presenting their posters to their fellow students and BU PIER members

Living with MS
 A long-term neurological condition

3 types: ① Re-lapsing - Remitting ^{DMP's available}
 ② Secondary Progressive ^{NO MEDS, rehab therapy}
 ③ Primary Progressive ^{gradual relapse, no recovery}

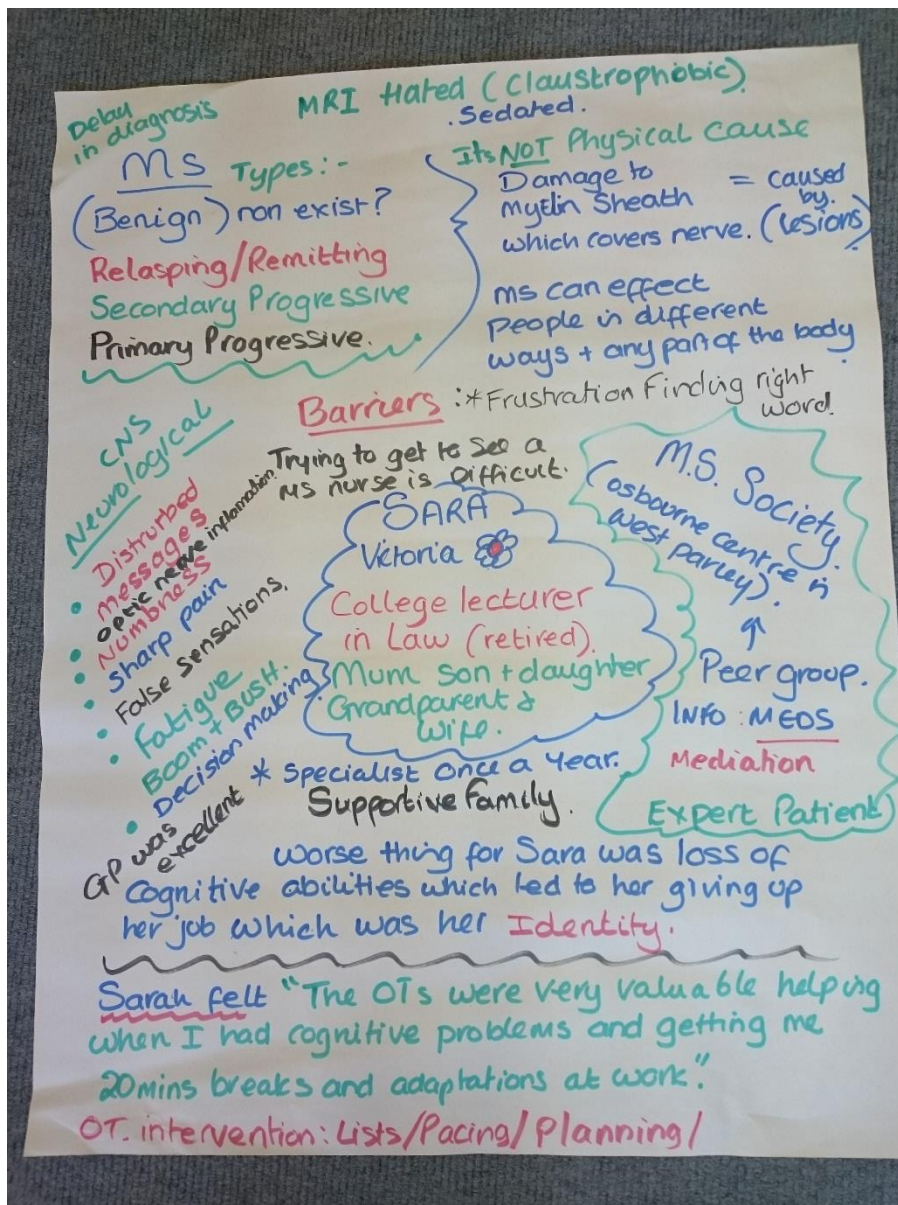
Diagnosis? - Through MRI scan, lumbar puncture, via eyesight checkup

Symptoms

- incontinence
- pain
- vision
- fatigue
- mobility
- dexterity
- cognitive (memory)

Mental Health impact: Perception, stages of acceptance
 - loss of independence, finance (finding available help)
 - impact on relationships. - social-isolation, influences of anxiety and depression.

Things to consider:
 Each person's experience of MS is relative.
DON'T ASSUME, get to know the person 😊.
 "I've got one life, and I'll live it!" (Tim Wornet, 2018)



Two examples of the 5 posters produced in the session.

In OT Year 2 there has been a drop in activity from 4 to 2 sessions which I hope to increase back up again next year after discussion with the team. The session on OT in Action 2 on Cancer featured not only a BU PIER member but a manager from the Wessex Cancer Trust which was very well received by the students.

I am mindful some key members of this team will be leaving in the coming year so I will need to establish new relationships with their replacements.

Need to discuss with the OT team about engaging in at least 1 academic session with the Year 3 group of students.

We engaged with 3 members of the Academic team in the 12 month period.

Physiotherapy

Number of sessions, hours, group members and student feedback forms completed for this 12 month Academic period for each year group:

Comparison of Physiotherapy Academic Activity Sept 15 – Aug 16 and Sept 16 – Aug 17								
	Year 1 2016/17	Year 1 2017/18	Year 2 2016/17	Year 2 2017/18	Year 3 2016/17	Year 3 2017/18	Total 2016/17	Total 2017/18
Sessions	6	3	4	3	3	0	13	6
Hours	29	52.25	8	7	4.5	0	41.5	59.25
Group members	10	12	4	3	4	0	18	15
Student feedback	103	65	71	51	76	0	250	116

The main areas of involvement in the physiotherapy programme are:

5.10.17 – Physio1 & OT1 Skills for Therapy Practice Communication x4 Sophie Smith/?

16.1.18 – Physio1 & OT1 Skills for Therapy Practice Communication x7 Sophie Smith/?

26.2.18 - Physio1 Long Term Condition x1 Kathryn Collins *

28.9.17 – Physio2 Brain Injury x1 Louise Fazackerly

5.10.17 – Physio2 Neurological condition x1 Louise Fazackerly

1.11.17 – Physio2 Parkinson’s x1 Louise Fazackerly

* denotes new activity

Some examples of student feedback this year:

Physio Year 1

- It was super beneficial and thank you so much for sharing your experiences. I hope we can use your experiences to improve the service 5.10.17 Skills for Therapy Practice Communication
- Fantastic speaking, honest, well explained and willing to answer all questions, such a beneficial session 26.2.18 Long Term Condition

Physio Year 2

- Great talk, I feel I have gained a good insight into your life and rehab journey. Thank you for sharing your experiences and story 28.9.17 Brain Injury
- How independent a life those living with CP can lead. Also how much fatigue plays a role. 5.10.17 Neurological condition
- Amazing insight into living with PD and how useful a deep brain stimulator can be. 1.11.17 Parkinson’s

In Physio Year 1 we have done half the sessions we did last year but have increased the variety of the BU PIER members we have used. We did run a new session on Stomas this year for Long Term conditions that was well received by the students.

Really value doing the joint session with Physio1 & OT1 on Skills for Therapy Practice Communication.

In Physio2 we have done one less session than last year, looking to identify an organisation to come in and talk about the support they provide for Brain Injury S/U.

In Physio Year 3 we have done no activities this year and am looking at discussing this with the team to see if we can develop something in the coming year for this year group.

We have engaged with 3 members of the Academic team in this 12 month period.

Operating Department Practice (ODP)

Comparison of ODP Academic Activity Sep16 - Aug17 & Sep17 - Aug18						
	Year 1	Year 1	Year 2	Year 2	Total	Total
	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18
Sessions	0	0	1	2	1	2
Hours	0	0	5.5	4	5.5	4
Members	0	0	8	3	8	3
Student feedback	0	0	36	39	36	39

The main areas of involvement in the ODP programme are:

25.4.18 – ODP2 Care in surgery Brain Injury x1 Debora Almeida *

25.4.18 – ODP2 Care in surgery Cancer x2 (Wessex Cancer Trust) Debora Almeida*

**Denotes new activity*

Some examples of student feedback this year:

- Brilliant attitude, clearly determined to live a full life, albeit different to the one planned. Is a massive kick up the bum for all of us. 25.4.18 Care in surgery Brain Injury

- It is really great idea to educate more and more students in university. Therefore more sessions twice a year maybe to remind students the importance of support given to cancer people 25.4.18 Care in surgery Cancer

It has been a good year of development with the ODP with the expansion of the new sessions of Care in surgery in both Brain Injury and Cancer which has been well received by the students.

We have engaged with 1 member of the Academic team in the 12 month period.

ODP Interviews

ODP Interviews 2017/18		
	2017/18	
Sessions	5	
Hours	14	
Applicants	22	
Members	9	

This was the first year of us being involved in the ODP Interview process and involves x2 of the BU PIER members observing the applicants doing a group discussion and then marking them on this activity. The video we use last for about 10 mins with discussion times varying with the number of applicants to 8 – 10 mins.

We then hand the marking sheets to the Academic lead on the day who takes them into the individual interview which is done with an Academic and placement person and the scores are combined to decide if an offer is made.

Our process has worked well but there have been a number of cancelled interviews which has caused problems.

We will be talking to the team about the process for next year.

Paramedic Science

Comparison of Paramedic Science Academic Activity Sep 16 – Aug 17 and Sep17 – Aug18								
	Year 1	Year 1	Year 2	Year 2	Year 3	Year3	Total	Total
	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18
Sessions	8	7	0	0	0	0	8	7
Hours	33	51.75	0	0	0	0	33	51.75
Group members	17	13	0	0	0	0	17	13
Student feedback	89	128	0	0	0	0	89	128

The main areas of involvement in the Paramedic Science programme are

27.11.17 – PS Year1 Communication Cerebral Palsy x2 Alison Trinder *

27.11.17 – PS Year1 Communication Stroke x1 Alison Trinder *

30.11.17 – PS Year1 Communication Drug & Sub Use x2 (Bournemouth DAT) Alison Trinder *

30.11.17 – PS Year1 Communication Homelessness x2 (Big Issue) Alison Trinder *

15.1.18 - PS Year1 OSCE X4 Alison Trinder, Peter Philips, Adam

20.8.18 - PS Year 1 OSCE resit x1 Christoph *

20.8.18 - PS Year 1 OSCE resit x1 Christoph *

* denotes new activity

Examples of student feedback:

PS Year 1

- This session was a massive eye opener to CP and how they live their life. It also shows what facilities they need in their home and public transport. How their life was affected by lack of care and compassion as well as their well-being
27.11.17 Communication CP
- Communication is vital. Talk to the patient, calmly and explain things to them. Insightful into a personal perspective and how someone felt during the stroke. And how it affected them and their family. Surprised at lack of rehab post hospital
27.11.17 Communication Stroke

- Very thought provoking and inspiring 30.11.17 Communication Drug and Substance use
- Thank you for coming in and giving us essential knowledge that will benefit in treating homeless people and interaction 30.11.17 Communication Homelessness

PS Year 1 has had some good engagement this year with three new sessions introduced in Communication.

PS Year 2 & 3 had no engagement this year and I need to discuss ways we could develop this next year with the team.

We have engaged with 4 members of the Academic team in this 12 month period.

Paramedic Science interviews 2016/17 & 2017/18		
	2016/17	2017/18
Sessions	11	8
Hours	57.25	78.5
Applicants	74	99
Members	19	17

This has been our second year of involvement in the Paramedic Science interview process and it has been very well received by both the BU PIER members who have taken part in it as well as the Paramedic Science team.

We have done 3 less sessions than last year due to a few sessions being cancelled due to lack of applicants on the days booked.

Sociology & Social Policy

Number of sessions, hours, group members and student feedback forms completed for this 12 month Academic period for each year group:

Comparison of Sociology & Social Policy Academic Activity Sep 15 – Aug 16 and Sep 16 – Aug 17						
	Year 1	Year 1	Year 2	Year 2	Total	Total
	2016/17	2017/18	2016/17	2017/18	2016/17	2017/18
Sessions	0	0	1	1	1	1
Hours	0	0	2	4	2	4
Group members	0	0	2	2	2	2
Student feedback	0	0	18	13	18	13

The main area of involvement in the Sociology & Social Policy this year is:

24.10.17 – S&SP Y2 In Sickness, Disability & Health an amazing personal insight into CP; much better than a lecturer just telling us about it. X2 Sid Carter

Involvement in NMC regulated programmes

	Sessions		Hours		No. of SU/C bookings		No. of different people	Feedback	
Adult Nursing									
Interviews	4	8	69.5	119	20	49	16		
AN year 1	10	10	85	37.5	43	23	25	369	550
AN year 2	6	7	408.5	331.5	103	99	52	704	552
Mental Health Nursing									
Interviews	15	18	108.75	123.8	27	36	5		
MHN year 1	1	1	10	15	2	3	2	27	24
MHN year 2	3	7	15.75	41	3	13	3	0	0
Children/Young peoples' nursing									
CYP Interviews	11	8	129.5	51.75	28	21	9		
CYP 1	3	2	8	12	4	3	4	49	50
CYP 2	2	2	2.5	2	2	2	2	38	47
Mid 1	1	1	3	1.5	2	2	2	23	28
Mid 2	2	2	4	4	2	2	1		48

N.B. Figures in the shaded boxes indicate 2016-2017 activity for comparison. However, it is important to note that significant differences require further explanation. These will be covered in the following individual program reviews. Also, these figures do not include time spent in training and preparation for sessions with students.

Adult Nursing

The main areas of involvement in the Adult Nursing programme are:

- Year 1 *Service users as Partners in Care* within the 'Exploring Adult Nursing' Unit
- Year 1 Learning Disability Theme day
- Year 2 Humanisation Workshops within *Humanising Nursing Care*
- Year 2 Nursing Simulation within the Unit; *Therapeutic Communication in Adult Nursing*

Year on year these activities are evaluated and changes made to improve the student experience and impact on their learning. The major change this year has been with the Year 1 *Service user as Partners in Care* session. I had long been reflecting on how this session was run. For the last few years, this has been led by 2 service users; each with experience of complex long term conditions and has been delivered in a mass lecture. My observations were that some students were not engaged throughout; it was evident that a significant percentage had not completed the two (mandatory) pre-class tasks and their written feedback suggested that the lengthy PowerPoint style of delivery was not conducive to active learning and there was little opportunity for discussion or application of any learning.

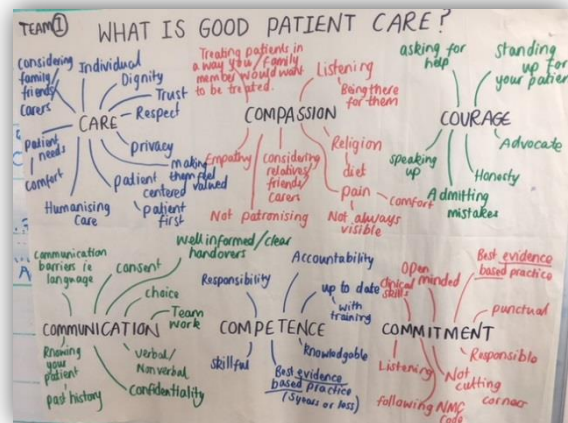
After attending a lunchtime seminar led by Dr Jonny Branney on **Team Based Learning** (TBL), I began to consider if I could use this approach to run the '*Service users as partners in care*' session. TBL has been described as '*an effective way to enhance and deepen student learning and engagement, developing their analytical skills and ability to integrate and apply the range of knowledge appropriately*' (Middleton-Green & Ashford 2013). I knew it would be huge challenge for me personally but my motivation was to provide a learning experience which would:

- engage the students as active learners
- impress on them the importance of team work, right at the start of their course
- introduce them to 'real people' who live with different health conditions in order to prepare them for their future practice placements.
- increase the potential of achieving the learning outcomes

In the last year there have been 4 TBL sessions with Year 1 Adult nursing students (3 in Bournemouth and 1 in Yeovil). The large cohorts always present a challenge and delivering a TBL session in a lecture theatre with 80-90 students required careful planning.



Compared to the mass lecture format of previous sessions, there was tangible evidence of students' learning through the posters they produced.



I believe TBL to be a powerful learning tool that encourages students to take ownership of their learning and see the relevance of it through the application activities. Feedback from students was given via *mentimeter*; giving some indication that the objectives for the session had been achieved.



The BU PIER members were asked for feedback on their experience of working as part of a team of students. The general themes of their feedback have included:

- The importance of the learning environment: working in teams around tables was favourable to the lecture theatre setting.

- The structure and content of the session meant that (most) students fully engaged with the session
- The use of the iRAT and tRAT indicated the vast majority of students had completed the pre-work.
- The sharing of personal experiences (service users and students) contributed to the content of the posters and discussions about the students' future practice.

Some comments from service users included:

'I am sure that far more was discussed than was written down on the poster, so, in that sense, it was a really good activity to generate 'thoughtful consideration of good patient care'.

'One student said that having a service user as part of the group was so useful. The other 3 agreed and one then said that she would really appreciate it if before she went out on placement, if there could be a session with Pier members, to give her some ideas about what to expect from our point of view.

The Learning Disability Theme day

This was run twice this year; one session being at the Lees lecture theatre to accommodate large student numbers. This lively, interactive day, led by people who have a learning disability, is always well evaluated by students. Although the session is delivered in a lecture theatre, there is a mix of speaking to



PowerPoint slides, audio and visual presentations as well as the opportunity to engage with the service users and the informative *Timeline*.



The **Humanisation workshops** are all facilitated by service users and carers so that students can appreciate the lived experiences of vulnerability and the impact of dehumanising care. The workshop facilitators include:

- People with an on-going mental health issue
- Individuals who are Gay, Lesbian, Bisexual or Transgender
- Individuals living with a physical disability
- Individuals living with a long term condition e.g. MS
- Individuals with drug or alcohol issues
- People from BME communities
- Individuals who are homeless
- People who are HIV+

Increasingly we are inviting people who work for organisations e.g. The Big Issue, Add Action, and Body Positive, to deliver the workshop alongside the service user so that the students gain some knowledge of the services that are available.

These workshops are always evaluated well by students.

Examples of student feedback include:

I knew very little about transgender; it gave me a fantastic insight to your experience and struggles. There's so much to do in healthcare to improve the service!

I will now keep in mind that I need to be more open and think how someone from a multi-faith background may be feeling and how I can help them to feel more comfortable.

I have learnt how important my approach should be to any individual; no matter what their past or present circumstances may be – everyone deserves to be treated the same..

As the Adult Nursing curriculum is delivered on two campuses we are now running *Team Based Learning* sessions and the Simulation activity in Yeovil as well as Bournemouth. There are now a small number of service users who regularly contribute to these sessions in Yeovil.

Adult Nursing Simulation

This assessed activity involves adult nursing students undertaking an admission to hospital/assessment of a patient (PIER member) and then conducting a handover with staff from practice. Patients are given a reason for admission but come with their 'real life' medical history as well. Though not ideal, students work in groups of 2 or 3 due to the large numbers per cohort. The planning and logistics of this activity are extremely

demanding but over the last three years, changes have been made to enhance its smooth running.

Larger student groups and the inclusion of PGDip students meant that the activity was run on 2 consecutive days in Bournemouth and a day later in Yeovil. 355 students undertook the assessment and handover, with 33 different service users. Whilst the majority of service users took part in 4 assessments over 2 days; 5 people underwent 8 assessments, which was very draining and demanding; not only having to be questioned by 8 different groups of students but also being required to fill in a hand written assessment each time. Placing the simulation days so close together is not ideal if there are a limited number of service users, willing and physically/mentally able to manage 2 consecutive very full days.



Feedback was gathered from students and service users. Service users were asked a number of questions including:

‘What did you most enjoy about being part of the simulation?’

Being able to help students hone their skills and put into practice what they have learnt

Supporting the students in their learning

It’s good to feel I am contributing to the nurses of the future and helping them experience *patient* situations while still training

‘What do you think the students learnt from working with you?’

How to approach and speak to the patient as a person and not the condition they presented with; and be aware that patients need constant reassurance, especially about worries at home.

Better awareness of someone who has a condition that is invisible

Communication skills; the importance of treating each patient as an individual, rather than a ‘case’

Students were asked the following question as part of their 'end of unit' evaluation:

Please briefly explain how the patient assessment activity with service users and/or better feedback has contributed to your learning experience and/or future professional development

- It has given me areas as to where I can improve in the future with assessment and handovers
- It was helpful to have patient feedback because I can see what the patient was thinking/feeling through the experience and how I can change how I do things to make communication more effective.
- Highlighted the importance of being prepared for the unexpected answers/situations and to be able to react to them appropriately
- This enabled me to improve my assessment skills and build rapport with patients. Making eye contact.

Adult Nursing interviews

This last academic year has seen the reduction of actual interview days to 5 (compared to 8 in 2016-17). Interviewing on some Saturdays has meant that larger numbers can be interviewed due to the wider availability of rooms. 5 PIER members sat on interviews panels for 4 of the five interview days; continuing with the model of moderating the process, instead of being involved in all interviews.

Children and Young People's Nursing

Currently, the main input from PIER members into this programme continues to be representation on interview panels. 2017-18 saw an increase in actual interview days from 8 (in 2016-17) to 11 and a 250% increase in the number of hours.

Although we are aware that this programme invites a number of external speakers, we would like to see further input from PIER in the new curriculum.

This year PIER members have run the following sessions:

1. Acute illness in childhood – Living with Cystic Fibrosis (experience of coming into hospital)
2. Application of communication skills (parent of a child with Autism)
3. Family Centred Care (parent perspectives)
4. Young carers
5. Learning Disability Theme day (lead by *Bournemouth People First*; facilitated by PIER).

Mental Health Nursing

As with CYP, the main input from PIER members in this programme centres on the admissions process. With 3 fewer actual interviews days this academic year; the number of hours of PIER input remains proportionally the same.

In teaching and learning activities, this academic year has seen year 1 students attend the *Learning Disability Theme Day* with CYP students. As mentioned in the Adult Nursing section, this lively, interactive day, led by people who have a learning disability, is always well evaluated by students. Feedback from CYP Nursing students included:

It's helpful to her about real life experiences; to see where healthcare isn't always right and to learn how to work better together.

It's nice to hear about personal experiences and how the care plans/pathways work.

For the second year, year 2 students have benefitted from a 3 hour session on Gender Identity Dysphoria. This has been delivered by 2 service users and an NHS professional, who works in the area of sexual health. Once again the students have provided very positive feedback:

I learnt about what people go through when they transition and the difficulties they face and how surgery works. I feel more confident in knowing how to support people better.

It was the best lecture I've ever had at University. This needs to be mandatory across all students in all courses, plus training with professionals.

Along with participation in teaching and learning activities; PIER partnership welcomes opportunities to contribute to student assessment. This has been a requirement in the former NMC Standards for Education and remains in the new standards:

5 Curricula and assessment

5.14 a range of people including service users contribute to student assessment

This year, there has been service user representation on the assessment of presentations at the end of the *Value base of Mental Health Nursing* unit. One service user's comment on being involved was:

It was good to see the students grappling with some tricky issues. I was free to ask questions, which I did, and I felt that I was regarded as an equal partner on the panel.

Feedback from the service user to the students was as follows:

It was clear that you have put a significant amount of work into this task. I learnt a lot! I was impressed that you are attempting to put the Service User and Carer at the centre of your practice despite other pressures. I would like to see even more focus on the experience of the Service User and Carer since they are the experts of the lived condition.

In the next academic year, plans are afoot for PIER members to work with Dr Steve Trenoweth, providing input in the 'Supporting Recovery' Unit.

Midwifery

Once again the students have benefitted (on both campuses) from a very powerful and informative session, lead by a Father sharing his experience of still birth, as part of the *Grief and Loss day*. This year we asked for students to tell us what they learnt from the session that they would take into their future practice. Some of their responses included the following:

The importance of good communication and multidisciplinary care – humanising care – how this can affect the people going through the experience and the long-lasting impact the care has.

The importance of supporting families to make memories.

It's okay to show you are human and emotional, use the time to listen to the parents, don't exclude the father.

In this academic year, Jane Fry made contact with a group of women from the 'Better Births' group who delivered the session: 'The existence and importance of user groups and how they inform maternity services delivery' within the *Caseloading Practice Unit*.

As 'service users' for midwifery are a transient group, there is a need to engage with local groups in both the east and the west in order to better represent the voice of women in the curriculum. Steps will be taken to address this in the new academic year.

In NMC programmes this year (compared to 2016-2017) there has been a 4% increase in the numbers of hours of service user/carers input in the admissions process and a 12.4% increase in Teaching and Learning activity. The reasons for the significant increase in teaching and learning activity is the addition of Team Based learning in Year 1 Adult Nursing and the larger student numbers and inclusion of the PG Dip students in the Simulation activity.

Summary of involvement in HCPC and NMC regulated programmes

The table below demonstrates involvement in education across NMC and HCPC regulated programmes for the academic year 2017-2018. PIER members were involved in 544.5 hours of interview activity (an 18% increase from the previous year) and 851.25 hours Academic activity, which represents a 20% increase overall. Workload percentage breakdown for Academic activity and Interviews 2017/18:

HCPC

Academic activity – 57% (57%)

Interviews - 43% (43%)

NMC

Academic activity – 64% (62%)

Interviews - 36% (38%)

*Blue denotes 2016/17 figures

BU PIER Partnership Interviews 2016/17			2017/18	
	Sessions	Hours	Sessions	Hours
Nursing	34	294.5	30	307.75
HCPC	38	174	35	236.75
Total	72	468.5	65	544.50
BU PIER Partnership Academic Activities 2016/17			2017/18	
	Sessions	Hours	Sessions	Hours
Nursing & Midwifery	31	477.5	26	536.75
HCPC	55	230.25	49	314.5
Total	86	707.75	75	851.25

The figures refer to the hours that BU PIER partnership members have been involved in actual interviews and teaching and learning activities; and does not reflect the work required by the service user and carer coordinators to prepare, support and evaluate this involvement. We have been working with programmes to review the balance of involvement across year groups and types of activity e.g. admissions, simulation, lectures and assessment; with priority being given to activities evaluated as having the

biggest impact on student learning and practice; and education activities over involvement in interview days. This work will inform future planning and the curriculum re-write and re-validation in 2018.

Involvement in research activity

The BU PIER Partnership continues to be guided by its 5 year strategy (2015-20). In relation to involvement and collaborations in research, the following goals were identified in 2015.

- To create and support opportunities for service users and carers and CSUP (*now PIER partnership*) to lead, contribute and collaborate in research activity
- Establish links and potential collaborations with research units, centres and organisations such as Bournemouth University Clinical Research Unit (BUCRU), Involve, The National Institute for Health Research (NIHR) Research Design Service, Social Care Institute for Excellence (SCIE) and local organisations such as the Dorset Clinical Commissioning group
- Liaison with user groups involved in research such as The National Childbirth Trust (NCT)
- Facilitate contacts and collaborations between researchers and a broad range of specialist groups
- Develop and share materials and resources for researchers to enhance good practice in involvement
- Develop and support the dissemination of research findings which can be used in education and professional practice
- Engage in research activity to evidence the links between involvement, outcomes and impact

Progress in the last year:

Research Activity

- *Promoting Positive Wellbeing in Older People (PPWOP)*; a project aiming to explore what contributes to successful ageing and to compare this with a similar population in Sardinia. We have given advice to the researcher on how to facilitate PPI in this project.
- *How people with arthritis and joint pain use YouTube to gain information and advice about the condition and its management.* We have facilitated the involvement of people from this patient group to engage in focus groups.
- *Understanding the barriers and facilitators in delivering care to the older person living with frailty and to use this information to develop new practices that will empower District Nurses*

to enhance their leadership role. Our involvement with this has been to provide a letter of support for the bid for this project and provide information on good practice for PPI.

- *Treatment of hypertension using a mobile device APP: A feasibility and pilot study using BU's Brythm App* Angela volunteered to be a participant in this study in order to experience being involved in PPI, first hand, and use this experience to inform models of good practice of PPI in research.
- *Physiotherapy and Stroke Study.* We supported Katey Collins (Physio Academic) with project funded from Acorn Fund with individuals who have had strokes. We involved two members of BU PIER Partnership and Dorset Stroke Association.
- *Developing Digital Gaming to increase awareness about scams amongst older people – especially those who use day services and develop a training tool for trading standards and health and social care staff.* Facilitated the involvement of four members of BU PIER Partnership
- *Nutrition-related challenges facing people living with dementia at their homes.* Youssef Karaki (Masters student Public Health). Facilitated the involvement of two members of BU PIER Partnership.
- Developed and submitted an application to the Wellcome Trust Public Engagement Fund for £243,193. Work involved ensuring that this bid was in collaboration between BU and the wider community. We developed links with the Patients Association, Dorset Health watch and The Arts Development Company who became co-applicants on the bid. If successful (we hear in September 2018), the funding will enable BU to work collaboratively with these organisations over three years to engage marginalised groups in health research. The aim is for the project to lead to a larger national bid in three years' time.

Network development

At the start of the year we were in contact with 87 organisations and we are now in contact with 92 (59 local and 33 National). The database of organisations can be shared amongst BU academics looking to collaborate in education, professional practice and research. The aim for the next 12 months will be to develop these opportunities for joint working.

Angela and Pete have attended 8 events throughout the year, 1 national and 7 local.

07.11.17 – Daily Echo Awards (Older Male Carers) Hamworthy Sports Club (Local)

28.11.17 – Involve at 21 Westminster (National)

01.12.17 – BU PIER meeting (Local)

19.1.18 – BU PIER Away Day EBC (Local)

05.2.18 – Dorset CCG Patient Participation Group meeting Dorchester (Local)

15.3.18 – BU PIER meeting (Local)

20.6.18 – Festival of Learning Seldom Heard Voices Talbot (Local)

12.07.18 – Healthwatch Dorset Impact AGM Dorchester (Local)



Daily Echo Awards

Proud to Care - Winners

(Older Male Carers)

Hamworthy Sports Club (Local)

November 2017

Involve at 21

(National Conference)

Westminster November 2017



Healthwatch Dorset Impact

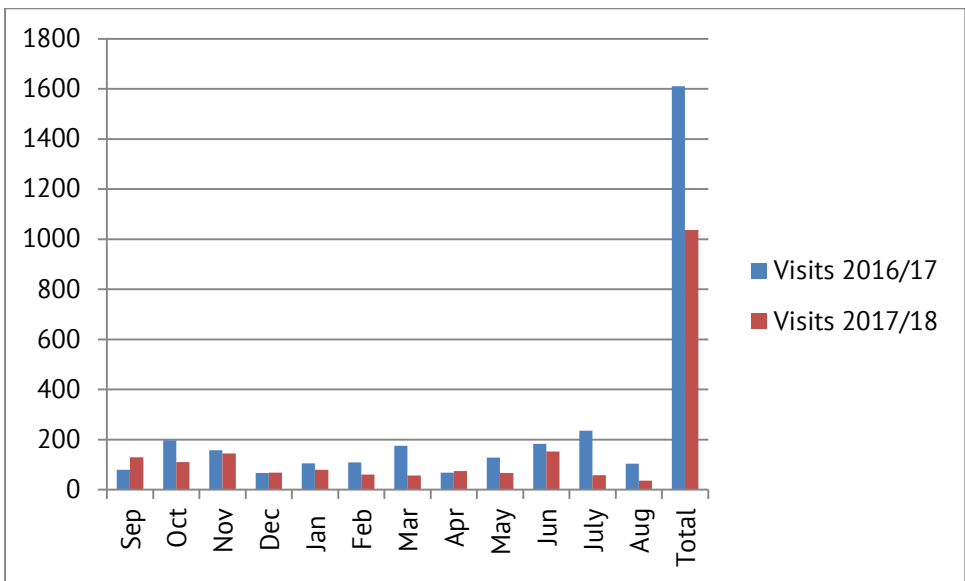
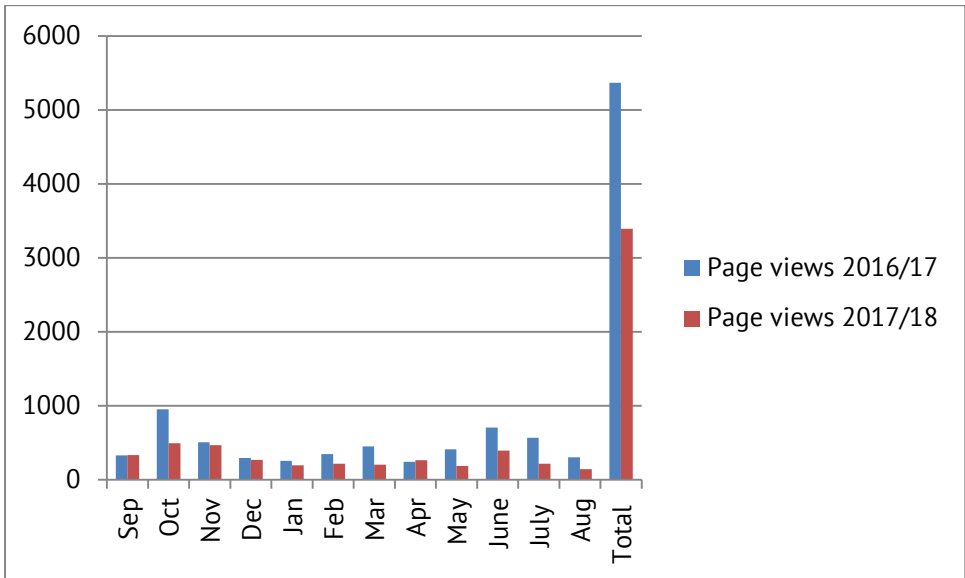
AGM 12.7.18 at Dorchester

Website

As you can see below from the Web stats for September 2016 – August 2017 and September 2017 – August 2018 we have had a decrease in page views from 5,365 to 3,392 and the average visit time for the year has increased from 3.05 to 4.08 minutes. There has been a decrease in the number of visits from 1,611 to 1,037 this year. We have also added the BU PIER Twitter page to the website as well as the BU PIER News section.

	Sept-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Total
Visits	80	197	158	67	105	109	176	68	128	183	236	104	1,611
Page views	330	952	508	294	256	345	449	242	413	707	567	302	5,365
Average visits (mins)	2.55	4.83	2.35	4.39	1.06	2.16	2.22	2.31	5.35	5.36	1.54	2.54	3.05

	Sept-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Total
Visits	129	110	145	68	80	60	57	75	67	152	58	36	1,037
Page views	336	496	468	271	196	217	204	264	188	393	217	142	3,392
Average visits (mins)	3.26	6.16	5.49	5.21	2.53	3.45	3.19	2.5	3.23	7.54	2.33	4,11	4.08



Conclusion and look forward

This again, has been a busy year for BU PIER partnership as we have developed a range of new activities across HSS programmes. We have significantly increased our involvement in research activity, particularly in developing models of user led and co-produced research with seldom heard voices. A key priority for 2018/19 will be on evaluating the impact of the research and education activity we have engaged in and in sharing these with our national and international partners.

It remains a priority for us to develop national and international links to enable us to create opportunities for shared learning and collaborations between the BU PIER partnership, academics and students.