

A guide to Personal and Public Involvement (PPI)

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PLSD001

Recognising and understanding the different levels and areas of Involvement.

This guide will help you to recognise and understand the different levels and areas of Involvement. Involvement can take many different forms. HSC organisations are required to involve service users, carers and the public in decisions that affect them. It is important to be clear about the level of involvement and what specific area of Involvement you are asking service users / carers to get involved in.

Step 1: Identify the level of Involvement you want your PPI / Co-Production activity to focus on:

What do we mean by “**Level of Involvement**”:

Inform and educate	Informing and educating describes the giving of information on a particular topic. This may involve sharing information with a group or the public about a particular topic with little to no input in the development or delivery of the information. This level of Involvement is usually a one-time event.
Engage and consult	Engaging and consulting is seen as involving people within parameters which are set by health professionals. At this level, services are often designed by professionals with the recipient’s best interests in mind, but people’s Involvement in the design and delivery of the services is constrained. People are only invited to be heard and not given the power to make sure that their ideas or opinions shape decision-making. Engaging also includes consultation, which is a process to gain the public’s input on matters affecting them. This usually includes a range of options already developed and the public are engaged to share their views.
Co-design	Co-design focuses on sharing decision-making power with Service Users/Carers and working in partnership to understand and improve patients’ experiences of services as well as the services themselves. It involves sharing decisions with people to design a new service or undertake a change to a service. This means that people’s

	voices must be heard, valued, debated, and then – most importantly – acted upon.
Co-production	Co-production has been defined ‘as a way of working that involves people who use health and care services, carers and communities in equal partnership and involved at the earliest stages of service design, development and evaluation. Done well, co-production helps to ground discussions in reality and to maintain a person-centred perspective’. Co-production shifts power towards people and can best be achieved with people, through equal and reciprocal relationships.

Step 2: Identify the area of involvement that your PPI / Co-Production activity will focus on:

What do we mean by “Area of Involvement”:

Information sharing and development	An information sharing /development Involvement area is providing Service Users/Carers with information through a wide range of methods that may include focus groups, online conversations and information dissemination. Information sharing and development can inform Service User/Carers about their rights and entitlements when accessing and using a particular HSC service or updating them on a new function within the current service they are using.
Service delivery/ development	Service delivery/development is involving a group of Service Users/Carers to help review and improve the quality, efficiency, effectiveness and safety of a service.
Service delivery change/ service withdrawal	Service delivery change/service withdrawal is involving Service Users/ Carers and when appropriate other key stakeholders in service delivery change or service withdrawal.
Strategic/Transformation	Strategic/Transformation is involving a group of Service Users/Carers in any shift, realignment or fundamental change in a HSC directorate or department or organisation. The aim is to make changes to processes, people, resources, systems or mechanisms to support movement in a particular direction that maybe set out by the organisation, Department of Health or policy directive.
Commissioning	Commissioning is involving Service Users/Carers in the commissioning and policy development for strategic activity of accessing, identifying needs, planning, purchasing and allocating resources in sourcing a provider who best meets a particular health need. This level of Involvement enables the HSC organisations to procure services that will deliver key priority outcomes set out in their strategic plans to get the best health outcomes for Service Users/Carers and the community.



Policy development	Policy development is involving Service Users/Carers in the design and review of organisational policies and service provision.
Evaluation	Evaluation is involving Service Users/Carers and when appropriate members of the public and other key stakeholders to complete a review of a service and find out whether or not the service being delivered is meeting the needs of the people that use it. You can complete an evaluation by a wide range of methods, these may include but not limited to questionnaires, interviews and surveys etc. This area of Involvement allows HSC organisations to learn how to change the service to make it more effective and Service User/Carer centred.

