













Principles of Patient and Public Involvement and Engagement in Innovation

VOCAL Bringing people & research together



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Our Principles of PPIE in Innovation

1. Introduction

The NHS belongs to the people¹. At Manchester University NHS Foundation Trust (MFT), the Innovation Team embodies this commitment. That's why we are proud to introduce the Principles of Patient and Public Involvement and Engagement (PPIE) in Innovation.

This is a set of guiding Principles designed to help us, and our partners, deliver purpose-driven and robust PPIE so that we can create better health and care services.

Background

The Health Foundation funded four Innovation Hubs across the UK as part of its "Adopting Innovation" programme to help healthcare providers and local systems adopt innovations more effectively. MFT was awarded funding to establish the MFT Innovation Hub, part of the Innovation Team. The Hub focused on improving health outcomes through digital innovations, addressing key areas like people, processes, culture, technology and collaboration.

Recognising the importance of involving those it serves, the Hub made PPIE a core priority and committed to develop a set of Principles to implement across the work of the Innovation Team. In 2024, the Hub and the wider Innovation Team worked with Vocal, patient, public and community partners to co-develop these Principles.

These Principles aim to ensure inclusion, equity, and transparency throughout health innovation.



I was anxious at the start of the project regarding how I can involve effectively as a part of minority group. Happily my views have changed since we have been together. Everyone's opinion matters & can bring constructive change as a community. I learned versatile skills in research work. Ultimately I am pleased with this important work.

Irum, Public Partner

¹ Department of Health and Social Care, The NHS Constitution for England, last updated January 2021, <https://www.gov.uk/government/publications/the-nhs-constitution-for-england/the-nhs-constitution-for-england>.

What is Public Involvement and Engagement?

The team works with definitions set out by the National Institute for Health and Care Research, which you [can find here](#). Together, we believe that by nurturing partnerships between people and organisations, innovation can create relevant and inclusive improvements in health and care.

About the Innovation Team

Innovation in the NHS involves the creation, testing, evaluation and launch of new ideas, products, methods, and services which have the potential to positively impact patients, operational delivery and staff experience.

The MFT Innovation Team provides expertise to support the different stages involved in the innovation pathway – from assessing an initial idea or basic research, through evidence generation, piloting and real-world evaluation, to implementation into the NHS.

About Vocal

[Vocal](#) creates opportunities for people to find out about, and have a say in, health research in Greater Manchester. It is hosted by Manchester University NHS Foundation Trust in partnership with the University of Manchester.

A brief note on the use of we, our and us in this document

Throughout the document we use the term we, our and us to refer to the project team which included members of the public, innovation professionals, commercial partners and public involvement and engagement professionals. We invite you, as you read along to see yourself in the work too. It belongs to all of us.

If you have any thoughts on how we might improve our offering, please contact vocal@mft.nhs.uk

“

NHS Innovation is driven by the need to deliver benefit for patients, however, unlike research, it has traditionally not considered public and patient engagement and involvement as a core underpinning component. I want to change this and make it clear that we have a responsibility to ensure that our work is guided by patients, the public and the communities we serve.

These Principles give us – and, I hope, other innovation teams across the country – the framework to always seek the patient and public voice as the default and not a “nice to have”. We are indebted to the public partners who have steered our thinking.

Dr Katherine Boylan, Director of Innovation

As a patient being involved from the conception of this programme was so exciting. I felt valued from the outset and I was heard. Being in the centre... I was able to see a lot of sides to what was being done from the clinical to the patient and carer - it was so cool seeing all the parts of the jigsaw rather than just my bit. I think patient involvement is paramount - we can always say what we think a patient may want but having the benefit of a lived experience from the outset can certainly inform and shape future health innovation. It's no longer clinical but becomes practical.

Rita Quinn, Public Co-Chair

Who is this for?

The Principles are designed to help the Innovation Team, members of the public ('public partners') and commercial partners understand the value of meaningfully involving people and how to do it practically.

For Commercial Partners:

Discover ways of working, different PPIE practices, and expectations for patient and public involvement.

For Public Partners:

Our commitments to developing processes that include your voices wherever possible.

For Innovation Team Staff:

A reminder of the excellent PPIE that innovation teams across the country have delivered together and the values that will keep us focused on safe, effective, and meaningful PPIE.

The Innovation Team should involve people in shaping their work because we are the service users and it improves take up delivery.

Tony, Public Partner

How we worked together

A Patient Advisory Group (PAG) of six experienced public partners—including two Public Co-Leads—played a central role in developing these Principles. Facilitated by Vocal, the group guided every stage of the process, from creating core values of public contribution to shaping the Principles themselves.

Throughout the development process, the PAG worked closely with approximately 20 participants, including innovation professionals, researchers, patients, and industry representatives. Through collaborative workshops, the PAG co-developed and co-delivered staff training, shaped the consultation process for the principles and consulted with the designer on the final design.

A set of PAG core values, which you can see in the table on the right, were established before the first workshop to guide the process. They are designed to promote relational working and were presented at the first workshop by the Public Co-Leads.

Thank you to our Public Co-Leads Rita Quinn and Zara Akhtar and the Public Advisory Group:

Brian Turner
Irum Sajjad
Leila Hamrang
Stephen Tony Wright

Public Advisory Team Core Values

Value diverse representation

Connect with, listen to and pay grassroots organisations and leaders.

Make sure your work is accessible and don't forget it supports needs into your budgets!

Use equalities impact assessments to plan your work.

Be open to change, transparent and honest

Don't overpromise.

Be open about your goals and how we can influence the process.

Honesty creates a safe place to deliver great innovation together!

Be Patient and Public Driven

Be person-centred in your approach.

Really understand the people that are impacted by the disease area.

Take time to build relationships and learn about our experiences.

Make feedback collaborative

Share what doesn't work and the lessons you have learned.

Keep communication regular and consistent.

Respect our time and only message when there is something to say.

1

Staff and PAG Knowledge Exchange

We started by building and establishing the team of innovation professionals, public contributors and PPIE specialists. We began with knowledge exchange and training that we co-developed through a training needs assessment, and designed to fill gaps in our different experiences, expertise and backgrounds. The key goal was to acknowledge that we all bring complementary skills and expertise to innovation.

2

Mapping PPIE in Innovation

We gathered examples of practice from MFT and other Health Foundation-funded hubs through online interviews with public partners and professionals. This collection of case studies provided insights to guide the PPIE approach and made sure that our work was grounded in real-world examples. We also had a wonderful time meeting and learning about all the amazing, innovative work happening across England.

3

PPIE Design Workshops

We designed and hosted three interactive workshops to integrate PPIE into the Innovation Team's work. Stakeholders, including patients and public partners and industry partners collaborated to develop a shared approach to embedding PPIE in practical ways.

4

Creative Practitioner Consultation

A final creative workshop, co-led by designer Ty Abiodun and Vocal, engaged participants in exploring themes of Manchester, Innovation, and having a say in research. We came together in discussion and collage-making, where we also shared our connections to Manchester and each other. The session was key in shaping the final design of this document.

Our Principles of PPIE in innovation

Our core Principles are:

1 Involve people early and for the long term

2 Inclusive communications

3 Ethical and equitable partnerships

4 Create opportunities for all

5 People centred processes



This experience has been wonderful. Having a voice as a patient from the conception of the project and be able to shape ideas around patient involvement has been a game changer for me. I haven't come across this anywhere before.

Rita, Public Co-chair

1. Involve people early and for the long-term

PPIE begins in the earliest stages of innovation and continues through every phase of the process from concept to implementation, evaluation, and sustainability.

The team works collaboratively with those affected by innovation, ensuring everyone has the opportunity to shape activities. Our goal is to build long-term, meaningful relationships with the communities we serve.

“We want some skin in the game”

Public Partner

In practice this means:

- Engaging patients and the public in priority-setting activities to ensure people’s needs and perspectives shape the work.
- Involving communities, patients, and public partners at the earliest stages to guide our direction.
- Embedding patient and public insights into decision-making processes to shape outcomes.
- Engaging relevant communities in Manchester and beyond to build long-term, trusted relationships. Through participatory events, we share our work and learn from each other.



Case Study: Integrated Diagnostics for Early Detection of Liver Disease (ID LIVER), working together in Liver Disease

Innovating the diagnosis and treatment of liver conditions is crucial as many people do not exhibit symptoms of liver disease until advanced stages. Although the North West has one of the highest rates of liver disease in the UK, there is limited public awareness about the condition. Stigma is also associated with the condition, due to the misconception that it's usually caused by harmful levels of alcohol consumption.

By working with people affected by liver disease through the Vocal Liver Network, researchers ensure that their work addresses the relevant needs and experiences of those disproportionately affected by liver disease, including people of South Asian heritage, and people experiencing homelessness.

Public Governance Advisers are recruited, trained and supported to attend meetings and have a remit to consider which groups and communities should have a say in the research. Together, Governance Advisers and members of the Vocal Liver Network (over 100 members of the public) provide insights and influence decisions, thus ensuring that the research process is transparent and inclusive.

As member Gertrude Wafula notes, "It's empowering to be a part of this... The people's stories are more powerful than the numbers."

Additionally, the Network has co-produced Liver Talks, an animation and discussion guide sharing how people at risk of liver disease want to be told about their risk of developing the condition.

Liver Talks was co-launched with the British Liver Trust and has been incorporated into training resources for healthcare professionals to help them reflect on their own practice and to encourage better conversations about liver health. This collaboration demonstrates how public partnerships in research and innovation can lead to improved health outcomes, empower underserved communities and offer immediate opportunities to improve our primary and secondary care services.

[Learn more about ID Liver](#) 



2. Create opportunities for all

PPIE includes the voices of patients who are impacted by the products and services developed at MFT. The work involves a small group of patients joining the team which means we can't guarantee that our activities are representative- but we can ensure that it is accessible and inclusive.

Our PPIE is built around the priorities and needs of those with the highest risk of disease burden and those communities who have been previously excluded from having a say in health research. This includes those from marginalised and racialised communities.

We are proud to work in the heart of Greater Manchester and even more proud that the work we do has national and international impact. Opportunities for all means reaching beyond our city limits to include national and international voices when we should.

In practice this means:

- Identifying who is being left out of the work through equalities impact assessments and gap analysis.
- Building on existing knowledge and guidelines to work intentionally with communities (of geography, identity and/or practice).
- Recognizing that public partners dedicate their time and offering flexible participation options that fit their lives.

“Have public partners from different walks of life with different experiences”

Public partner



Case Study:

Working together towards race equity in research and innovation

Black Asian and Minority Ethnic Research Advisory Group (BRAG) work to ensure that communities historically excluded from health research are represented by inputting into the strategic direction of health research carried out across Manchester University NHS Foundation Trust. Formed in 2019 by Vocal and the Greater Manchester BME Network, BRAG includes community leaders who actively work to embed racial equity in research practices.

BRAG advises researchers at the National Institute for Health and Care Research (NIHR) Manchester Biomedical Research Centre. The group prioritises working with communities who experience the greatest health disparities, ensuring their voices are heard at every stage of the research process.

In 2023, BRAG won the Community Initiative of the Year award at the National BAME Health & Care Awards, recognising its critical role in promoting inclusivity.

This model of equitable and inclusive involvement demonstrates how targeted efforts can lead to better research outcomes and improved healthcare for diverse communities.

If you would like to find out how to work with BRAG, get in touch with Vocal.

3. Inclusive communications

We commit to designing communication strategies that are tailored to meet the diverse needs of our teams and audiences.

This includes keeping public partners informed throughout the entire project lifecycle, sharing our learning and celebrating the achievements of the collaborative work we do. Our approach to communication centres on inclusivity, accessibility, and transparency.

“Value us by showing how we make a difference for others.”

Patient Partner

In practice this means:

- Maintaining consistent two-way communication throughout projects, inviting and responding to public input.
- Using plain English, multiple formats (text, audio, video) and translation where possible to ensure accessibility for as many people as possible.
- Collaborating with patient and public partners to create communication plans, environments and initiatives that reflect their preferences.
- Humanising data by incorporating personal stories to place patient experience at the heart of our work and illustrate the impact and expertise of the public members of our teams.





Case Study:

Creative, accessible and inclusive community conversations about cancer and research

The public engagement campaign Cancer & Us: Community Conversations was co-created in partnership with the National Institute for Health and Care Research (NIHR) Manchester Biomedical Research Centre and NIHR Manchester Clinical Research Facility, Vocal, Healthy Me Healthy Communities, the LGBT Foundation and people affected by cancer. This campaign delivered:

- “Cook & Chat”, a programme of workshops and events focusing on having conversations about cancer and research whilst upskilling in cooking.
- Tour of different research laboratories and facilitated discussions with researchers, patients and carers.
- A programme of creative workshops exploring cancer health inequalities and data with the LGBTQIA+ community.
- 11 co-produced videos and a zine, exploring people’s perspectives and experiences of cancer and research.
- A social media campaign raising awareness of cancer research and promoting public involvement in cancer research.

As a result:

- 40% of participants are participating in other research-related activities.
- 92% of evaluation respondents are more confident having conversations about cancer and research with others.
- The campaign received 94k social media impressions with 4854 video views.
- Equitable relationships were established with stakeholder organisations, resulting in further collaborations and investment.

The project illustrates how inclusive communications—by listening and creating accessible spaces—builds trust and empowers communities to learn about, have a say in, and participate in health research.

[Read more about the award-winning project](#)



4. Ethical and equitable partnerships

We will build PPIE partnerships based on equity, fairness, and mutual respect with community organisations, industry, and healthcare providers.

Our aim is to share power and prevent extractive practices by ensuring that every partnership meets the needs of all stakeholders through shared decision-making and co-developed working agreements.

“We [should] acknowledge and address the dynamic between industry and community need”
Innovation Team Member

In practice this means:

- Building equitable PPIE networks with all stakeholders, ensuring fair participation.
- Collaborating with communities and industry partners to ensure mutual benefit and respect.
- Providing training sessions for team members, commercial partners, and public partners to build trust and understanding, including the social and historical contexts of community distrust.
- Staying informed on national best practices to avoid duplicating efforts and wasting patient time.



Core Principles

Case Study:


The Ideas Fund in Oldham

Creating inclusive pathways for health research requires engaging communities before the innovation process begins. [The Ideas Fund](#), a grants programme by the British Science Association and funded by Wellcome, aims to support mental wellbeing initiatives by connecting research professionals with local communities across four areas of the UK (Hull, Oldham, Derry and Strabane, the Highlands and Islands of Scotland). The Fund builds relationships that allow community members to lead projects that matter to them, building skills, understanding and generating real-world impact.

In Oldham, funded projects included A Distinctly Dads Exploration of the Value of Play, led by Men Behaving Dadly, who collaborated with a researcher to explore the role of play in the mental wellbeing of fathers through peer-led research and creative methods.

Families Growing Together, led by OAK Community Development engaged isolated families from diverse communities in outdoor activities like food growing and park visits. The Sisters of Yam and Growing to Grow project, led by Support and Action for Women's Network aimed to amplify the voices of Black women in Oldham working with a researcher. It used gardening and a choir to create connection and facilitate conversations about mental wellbeing.

Other projects included Keeping Our Girls Safe, which pairs adult mentors with young women vulnerable to exploitation, and Making Stories Through Cloth, where South Asian women explored identity through craft. Each project prioritised community-led approaches and developed long-term and sustainable relationships with researchers resulting in the development of ethical and equitable partnerships.



I think my experiences with the medical profession, both good and not so good, have helped to make me the person I am. I hope that my involvement with PPIE has allowed me to make some valid contribution to the research effort.

Brian, Public Partner

5. People-centred processes

PPIE must be active and meaningful, not just a tick-box exercise. We want everyone to leave the work feeling glad they took part.

To do this we create warm, informal environments where public partners and researchers alike feel comfortable critically engaging with emotive topics. We ensure a flexible process, involving patients and the public where their input adds the most value, and, where appropriate, we embrace co-design to create solutions that are relevant, acceptable, and effective.

“You can’t have a focus group if you don’t have anything to focus on”

Public Partner

In practice this means:

- Collaborating with public partners to set strategic priorities and embed their voices into decision-making.
- Developing networks of public partners who are regularly involved in our work.
- Capturing, evaluating and feeding back the experiences of members of the public, and the impact made on innovation by PPIE to ensure accountability and meaningful engagement.
- Paying people for their time now and always in line with the [NIHR payment guidance](#).
- Continuous professional development, including training on how to create warm, friendly, welcoming environments.



Case Study:

Involving people in shaping healthcare research and innovation

The Citizen Involvement Group (CIG) plays a critical role in ensuring that people and patients have a voice in shaping research and innovation at the Cambridge and Peterborough NHS Trust. Their work ensures that research aligns with the real needs of those it serves. The group consists of 5 core members and, when needed, the team recruits disease-specific working groups to provide focused insights, which are then integrated into the CIG’s broader activities.

To support a people-centred process, the CIG has implemented inclusive and flexible recruitment methods designed to build relationships based on shared values and mutual respect. A shared online document with the team’s project pipeline keeps members informed of upcoming opportunities to engage with research and innovation efforts. This allows members to see where and how they can contribute, creating a clear and continuous path for involvement and helping to establish a long-term, sustainable process for public engagement in decision-making.

The CIG’s approach demonstrates the importance of structured yet flexible processes that empowers citizens, ensuring they feel valued and respected within the healthcare system.

Applying the Principles

These Principles are intended as a foundational guide for the work of the Innovation Team. They are an integral part of innovation and aim to ensure that our approach to PPIE is aligned with the values of the people that the NHS serves.

In this section, you will find:

1. The different activities that can be used to involve and/or engage members of the public.

2. A PPIE planning sheet that will help you design activities that aligns with the Principles of this document.

Everyone is special, everyone is equal. As NHS staff, we need to make sure the voices of our patients and the public are always at the heart of our work. It's our responsibility to make sure we deliver accessible healthcare innovations and are committed to tackling inequalities.

Yutong, Innovation Team Member



PPIE activities we can offer

Here is a list of activities that can help you deliver meaningful public involvement and engagement. Contact us to find out more about how the Innovation Hub can support you.

Focus Groups

A small, diverse group of people gathered to discuss and provide feedback on a specific topic, product, or service. Led by a moderator, they explore experiences, opinions, and reflection to support research and innovation project design.

Patient Advisory Groups

A team of people who advise on research, innovation and service development alongside healthcare professionals.

Community Conversations

A means to facilitate engaged conversation, mutual learning, reflection (individually and as a group) and collective thinking.

PPIE Review and planning

Audit projects and activities to understand what PPIE needs to happen or could be offered to incoming Innovation projects.

Public Co-applicants

Members of the public embedded into teams to provide regular involvement and engagement activities.

Co-produced campaigns

Collaborate on public campaigns to raise awareness or create conversations about health & social care issues.

Co-production

A robust set of activities where people work alongside researchers and professionals to design, deliver, and/or improve research & services.

Interviews

People discuss their views on health & social care issues in more depth, often 1-1. This can also be done using peer-to-peer processes.

Surveys

People share their opinions and experiences through questionnaires.

Peer-to-peer evaluation

Review and improve health & social care services from a patient/public perspective.

Priority Setting Activities

People help decide which health & social care issues, products or activities are most important to address.

Citizens Juries

A group of 12-24 people discussing important issues to find common ground. They reflect the wider population in demographics and attitudes, works well for effectively addressing controversial questions with ethical and social implications.



Embedding the Principles in your work

Use the prompting questions to think about how you might use the Principles to help shape your work.

Principle	Questions
Involve people early and for the long term	At what stage of planning will you reach out to public partners and why? What will happen to the group when the project is complete? What activities could you use to engage people?
Create opportunities for all	Who is affected by the project you are carrying out? Which communities carry the highest disease burden?
Inclusive communications	How do you intend to keep in contact with your group? How will you share your work with others?
Ethical and equitable partnerships	What might you or your team need to learn about to build ethical, inclusive spaces? How are you engaging with your local community? How might you bring your innovation work to local communities? Have you engaged with the Research Engagement Network ?
People centred processes	How do you include public partners in your project and your team's decision making? How will you involve public partners in the design and learning from your evaluation?

Contact us

To find out more about embedding public voice into the design and delivery of research and innovation contact: vocal@mft.nhs.uk

To learn more, contact: innovation@mft.nhs.uk

Thank you to our Innovation and commercial partners who joined us for conversations at workshops and online:

Roche Diagnostics

QIAGEN

Johnson & Johnson

Bradford and Craven Innovation Hub

Cambridgeshire and Peterborough Innovation Hub

Dorset Innovation Hub

Public Partners

Funded by The Health Foundation



Vocal

Nowgen Centre
29 Grafton Street
Manchester
M13 9WU
info@wearevocal.org

 Facebook

 X (formerly Twitter)

wearevocal.org

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