Commentary

Unexpected benefits: reflections on virtual relationship building within public involvement during the Covid-19 pandemic

Carmel McGrath[1,2,*] iD, Katherine Baker[3] iD, John McGavin[4], Michael Bahrami-Hessari[2] iD, William Barney Jones[5] iD, Lindsay Welch[6] iD and Caroline Barker[2,3,5] iD

[1]School of Human Development and Health, Faculty of Medicine, University of Southampton, UK
[2]NIHR Southampton Biomedical Research Centre & NIHR Southampton Clinical Research Facility, University of Southampton and University Hospitals Southampton NHS Foundation Trust, UK
[3]NIHR Applied Research Collaboration, Wessex, University of Southampton and University Hospitals Southampton NHS Foundation Trust, UK
[4]Public Contributor
[5]Wessex Public Involvement Network, University Hospital Southampton NHS Foundation Trust, UK
[6]Long-Term Conditions Research Group, School of Health Sciences, Faculty of Life and Environmental Sciences, University of Southampton, UK
*Correspondence: carmel.mcgrath@uwe.ac.uk

How to cite

McGrath, C., Baker, K., McGavin, J., Bahrami-Hessari, M., Jones, W.B., Welch, L. and Barker, C. (2023) 'Unexpected benefits: reflections on virtual relationship building within public involvement during the Covid-19 pandemic'. *Research for All*, 7 (1), 16. DOI: https://doi.org/10.14324/RFA.07.1.16.

Peer review

This article has been peer reviewed through the journal's standard double-anonymous peer-review process, where both the reviewers and authors are anonymised during review.

Copyright

Open access

Research for All is a peer-reviewed open-access journal.

Abstract

The Covid-19 pandemic reduced research collaborations with public contributors and prevented face-to-face interaction. The formation of Researcher Coffee Mornings within the Wessex region aimed to continue relationships between the research community and public through the pandemic. Researcher Coffee Mornings were regular Zoom meetings run by public involvement staff at University Hospital Southampton NHS Foundation Trust, UK. They were created to provide pastoral support and 'check-ins'

between staff and public contributors during the Covid-19 pandemic. Reorganisation, implemented by public involvement staff but led by public contributors, meant that the events evolved over time. The Researcher Coffee Mornings were a means to share updates about research with the public. They were a safe space for involvement staff, researchers and the public to exchange knowledge and share experiences. This article highlights the intended and unexpected benefits of investing in relationships. We reflect on these benefits through the perspectives of the public involvement staff, public contributors and researchers. Investing in relationships has brought value to everyone involved. By demonstrating the benefits of providing regular, inclusive spaces for relationship building between the research community and public contributors, we hope to encourage others to invest in relationship building in their settings, to improve public involvement practices.

Keywords patient and public involvement; PPI; public engagement; Researcher Coffee Mornings; impacts; shared learning; relationships

Key messages

- Researcher Coffee Mornings can provide a valuable way to create spaces for knowledge exchange and relationship building.

- Investing in relationship building has the potential to result in unexpected benefits and valuable outcomes for all involved.

- Trusted relationships play an important role in public involvement, and it is necessary to acknowledge and recognise the time, expertise and resources required to foster these relationships effectively within individual practices and specific contexts.

Background

Public involvement in research is defined as research carried out '*with*' or '*by*' patients and those who have experience of a condition, rather than '*for*', '*to*' or '*about*' them (NIHR INVOLVE, 2019: n.p.). Traditionally, public involvement practice has used face-to-face approaches. Relationships are acknowledged as an important part of public involvement (Brett et al., 2014b; Hickey et al., 2018; Knowles et al., 2021; Mathie et al., 2018; Shippee et al., 2015; Wilson et al., 2015) and face-to-face interactions, which include informal conversations and socialising, facilitate this, through building trust.

In March 2020, the UK entered lockdown due to the Covid-19 pandemic, and people were ordered to 'stay at home' except for specific purposes. Non-urgent clinical trials were suspended to prioritise Covid-19 studies, and to redeploy staff to frontline care (Thornton, 2020). Public involvement was significantly reduced (NHS Health Research Authority, 2021).

Face-to-face public involvement was suspended. To continue to connect with public contributors, the public involvement team at University Hospital Southampton NHS (National Health Service) Foundation Trust, in collaboration with the Wessex Public Involvement Network, created the Researcher Coffee Mornings. These were regular virtual meetings for involvement staff, public contributors and researchers to share and discuss research.

Setting

In April 2020, public involvement staff invited three hundred public contributors to virtual 'coffee mornings' (via a mailing list). Each session had a unique focus, with relevant researchers presenting. Some sessions were dedicated to socialising.

Coffee morning feedback forms with open-ended questions, completed over four hundred times, captured public contributors' interest and enjoyment of sessions, and supported public involvement staff

to refine and enhance future sessions. Public contributors also suggested topics and speakers, which were facilitated where possible.

There were over one hundred individual Researcher Coffee Mornings, with over sixty researchers presenting their projects. The sessions were open invitation. Ten public contributors attended each event on average. Some attended a single session that matched their interests, while over 30 attended more regularly.

This commentary discusses Researcher Coffee Mornings through the perspectives of the three audiences involved: public involvement staff who ran the events, a regular public contributor attendee, and a researcher who attended two events. From our differing perspectives, we aim to provide rich insights into how investing in relationships can lead to diverse and unexpected benefits.

Benefits for public involvement staff and their practices

The following reflections are from the staff running Researcher Coffee Mornings (William Barney Jones, Caroline Barker, Carmel McGrath, Katherine Baker, Michael Bahrami-Hessari).

As the UK adjusted to lockdown restrictions, we realised we could not continue our usual ways of face-to-face work. From our existing experiences, we knew that building and maintaining relationships with public contributors is important (Cowan, 2021). In addition, the fluidity of the global situation, and the barrage of news about the pandemic, caused anxiety both for us and for those we worked with.

We decided to check in with public contributors online. Our first few sessions were unstructured, and people would turn up to talk about how they were dealing with the lockdown. Surprisingly, attendees at these first sessions were a mixture of 'regulars' and people we had not met. One of our motivations for starting these events was pastoral support for our public contributors, but it had the unintended benefit of providing the same support to those of us who felt isolated because of homeworking.

Over time, researchers began to join sessions to discuss their work. We also became more creative with our social sessions (for example, book club sessions and sharing Christmas traditions). Attendance increased as news of the sessions spread to other NHS trusts and universities across our region (Wessex).

Before the pandemic, we had organised face-to-face public involvement activities. At these events, there would naturally be time for more informal conversation, such as during refreshment breaks, although we did not organise specific activities for socialising. We discovered that the regularity of the Researcher Coffee Mornings, and the social elements, enabled us all to step outside our official roles. We learned more about contributors' lived experiences and their community networks, extending across Wessex and further afield. Now, when supporting research projects and programmes, we can readily identify public contributors with relevant lived experience, and we are able to link contributors to research teams. We can ask for support from public contributors to reach underserved communities.

We observed that the sessions were serving as a safe, trusted space for public contributors to share their views and experiences with confidence. This developed over time. We believe this is a direct consequence of the time that we, and all the public contributors who attended, invested in one another. Some members of the public silently observed their first few meetings, not switching on their cameras. No one ever pressured them to interact, and we saw their confidence growing as they began to speak up and appear on camera. Some of these individuals have gone a step further, volunteering and taking on regular and intensive involvement opportunities.

We gained new skills. We learnt how to use virtual meeting platforms, and how to talk public contributors through the technology over the phone or via email. We facilitated and managed virtual meetings for the first time, and with greater numbers of people than face-to-face meetings. We learned how to create a safe and inclusive space online where people openly shared their experiences and views. The inclusivity of this space was reciprocal. We had a safe environment to make mistakes and adjust to the new technology and ways of working. We could pose thought-provoking questions, present new ideas, and share challenges faced. The Researcher Coffee Mornings provided us with the human element of interactions that can be lost when working virtually. The informal elements of the meetings provided a space where we were comfortable discussing personal interests and support needs. For some of us struggling through the changes, the sessions became a lifeline and an important, motivational highlight of our week.

Benefits for public contributors

John McGavin, a public contributor, shares his reflections. These are informed by the open-text responses from feedback forms (Table 1).

Researcher Coffee Mornings have been a hugely educative and empowering aspect of our lives during and since lockdown. They provided public contributors with intellectual stimulation, social interaction, and the opportunity to learn from a range of front-line medical researchers. Although the sessions were virtual, they gave us an immediate experience, and a strong sense that our views were welcomed and could be influential, leading to lasting change. When the discussion stopped for a minute while the researcher took notes, and when a member's specialist knowledge got links put into the Chat function, we felt particularly valued *as a group* (regardless of whose suggestion was being picked up). The general friendliness and courtesy which characterised the conversations created an atmosphere of mutual worth. We all 'bought into' this, and we still feel it. At the same time, the febrile period of lockdown was one of conflicting announcements and contradictory opinions. The Researcher Coffee Mornings gave us all a detailed introduction to real issues which, even if they were not focused on Covid-19 (many were), reassured us that people of knowledge were at the cutting edge. They 'prevented harm' by opening up currently contentious topics, on which we ourselves could request coverage, to discussion with people whose experience we could trust. An early session involved a discussion about different community attitudes to vaccination trialling, which led to diversity, and hence inclusivity, becoming a recurring topic of our discussion, even when it was not in the foreground of the advertised subject. I doubt that I am the only participant who became more attentive to such issues as a result, and who has subsequently put advocacy for underserved communities at the heart of public contribution. I believe this shift in mindset formed during the developing relationships of the coffee morning discussions will spread into practice more widely.

The frequency and regularity of sessions created a group out of very diverse people. Normal life might not have brought us together – but in the necessarily ordered and well-managed space, we felt a need to respect each other, and, as the sessions developed, we became a kind of 'professional' group. This has continued beyond the period of lockdown: we learn from each other and feel a responsibility to do it because of the importance of the researchers' work, which we are privileged to hear. That sense of the benefits which come from a broader patient and public involvement (PPI) community has already led to the adoption of a wider patient and public forum for scrutinising research elsewhere.

Table 1. Themes and illustrative quotations from public contributors' reporting impacts of the Researcher Coffee Mornings

Themes	Illustrative quotations
Benefits for the researchers	'I think that they have developed into a really useful way for researchers to present their work and then receive feedback.' 'It is always a pleasure when you see that the researchers come away having gained positive feedback, extending the scope of their work.'
Impacts on the individual	'The coffee mornings as a whole had a great impact on me, not least because when I was about to join them, I was a bit suspicious about how useful they would be. I was wholly mistaken.' 'This has, also, helped me personally to remain focused and able to cope with the changes that the pandemic has had on everyday life.' 'The Covid-19 updates, I feel, have been helpful in promoting a positive outlook during lockdown. It made me realise how much hard work has gone in overcoming this virus.'
Creating further opportunities for public involvement	'Previously I was unable to attend most of the meetings of groups that I had been a member of due to time and travel constraints. I feel the team works very hard to make the coffee mornings enjoyable for the group members and presenters. They are very inclusive and helpful.' 'I've had opportunities of PPI role to contribute to studies and groups which are ongoing.'

The sessions also provided a consistent, regular structure and much needed routine for the week at a time when normal patterns of life were prevented. Public contributors have discussed how the Researcher Coffee Mornings acted as a therapeutic intervention during lockdown, enabling a vital sense of life and work continuing. But they have also given opportunities for members of the group to deepen their professional commitment to public involvement: some have led or co-led coffee morning sessions, and some have also felt empowered to take further formal public involvement roles, including leading seminars elsewhere, or applying for core public contributor jobs in other institutions.

Benefits for researchers

Researcher Lindsay Welch provides her perspectives on how the Researcher Coffee Mornings expanded research networks and forged new relationships. She explains how they influenced the direction of her research project proposal – A Qualitative Exploration of Experiences of Nurses with Respiratory Skills Working During the Pandemic – and subsequent research.

Our study was designed to qualitatively analyse solicited diaries from respiratory nurses working during the Covid-19 pandemic. At the stage of attending a Researcher Coffee Morning, we had drafted a funding proposal, and we were seeking public input to hone the funding bid. Although the focus was on nurses' experience, we wanted to ensure that our study would benefit people with long-term respiratory conditions. Our research team was made up of respiratory nurses across the nation. We had an insider's view of the situation, so we sought objectivity, discussion and review from the public to understand the broader issues of the pandemic. Many people with long-term conditions were self-isolating to protect themselves, making it challenging for researchers to gather public insights, and extremely challenging to obtain a rapid review of a research application.

I learnt about the public involvement staff's rapid adaptations to link with public contributors. The Researcher Coffee Mornings provided me with an opportunity to present to a well-organised

and established *virtual* public contributor group. The public contributors and involvement staff were welcoming, interested and, from on outsider perspective, had developed trusting relationships with each other. The discussion was open and candid, and the group were supportive of each other and felt able to challenge aspects of the research, allowing areas of weakness to be fully explored by the public and myself, together. The open conversation highlighted public insights that had not been previously considered in the research design, and I adapted our proposal. These insights were particularly helpful to address areas of design that were important to the public to shape the work to maximise clinical impact.

Our first funding application was unsuccessful, but the importance that the public contributors placed on recording nurses' experiences during the pandemic, and the confidence that they had in our research approach, encouraged us to continue. We developed a suite of studies gathering information on the challenges and needs of nurses during the pandemic (Roberts et al., 2021a; 2021b).

The Researcher Coffee Mornings allowed me to develop my own meaningful and trusted relationships with public contributors, supporting future public involvement. The enthusiasm of contributors at that initial session encouraged me to return and provide an update on the findings of the study. I also presented another research project, and introduced my research programme. Several people volunteered to work with me on my research programme, and this continues outside of the coffee mornings. One public contributor reviews all project ideas, design, and analysis of qualitative data, and has recently contributed to a publication (Welch et al., 2021). More than 20 researchers have had further public interactions and/or public involvement activities as a direct result of their coffee morning session.

My ideas are critiqued honestly, and these open discussions have enhanced the quality of my study design, analysis and publications. Clear questioning from trusted contributors has been valuable in reshaping proposals and developing novel respiratory technologies, through the collaborative strategic health perspectives that the contributors bring. This is enhanced by the ability of the contributors to articulate a range of personally lived experiences and perspectives on healthcare use, which can serve to critically challenge researchers.

Conclusion

This article highlights the importance and value of relationship building in public involvement. The Researcher Coffee Mornings were initiated at a time when relationships with public contributors were breaking down (due to the circumstances of the Covid-19 pandemic). Public involvement opportunities were limited, and many research projects suspended or ended their relationships with public contributors (NHS Health Research Authority, 2021). The facilitation of the Researcher Coffee Mornings was the approach we took in Wessex to maintain relationships during this period of change.

The sessions brought benefits beyond the initial purpose of maintaining contact between public involvement staff, public contributors and researchers. As time went on, these meetings became an avenue to share updates about research projects being conducted in the region. The existing relationships fostered, and new relationships formed, created new opportunities. The safe space created supported everyone involved to learn from one another, and to gain new knowledge, confidence and skills. These experiences resonate with others in the field, who discuss the importance of safe spaces and relationships to support meaningful involvement (Hickey et al., 2018; Knowles et al., 2021; Wilson et al., 2015).

Investing in relationships and creating safe spaces requires a set of professional skills and resources that is often overlooked (Brett et al., 2014a; Maccarthy et al., 2019; Oliver et al., 2019). Our public involvement staff dedicated additional time and resources to prepare, organise and run the coffee mornings, and to develop supporting materials. While our team were fortunate to be able to use funded time to deliver

the Researcher Coffee Mornings, we know that this is not always the case. Where funding for relationship building in public involvement exists, it is often tied to specific project funding, creating challenges when projects end (Tembo et al., 2021). Trusted relationships are of central importance to public involvement, and better recognition of the time, expertise and resources required is necessary across the practice.

We remain committed to being adaptable and flexible in our approach, so that we can continue to provide regular and inclusive spaces for relationship building between the research community and public contributors. This work requires continuous open discussion to gain a deeper understanding of the various layers and logistical aspects of working together collaboratively. Through the experiences of running and attending these events, we have learnt that it is all right to expose our vulnerabilities. We are less afraid to make mistakes. This contributes to relationship building, and results in new ways of working. We encourage others to explore avenues to invest in relationship-building activities in their own context and settings. This will lead to valuable outcomes for all involved.

Acknowledgements

Funding

Authors' contributions

KB, MB-H and WBJ initiated and ran the Researcher Coffee Mornings. CB provided oversight. CM was involved in developing the feedback forms and documenting impacts collected. LW presented as a researcher at the Researcher Coffee Mornings, and wrote the benefits for researchers section. JM attended the Researcher Coffee Mornings as a public contributor, and wrote the benefits for public contributors section. CM and KB produced the first draft of the manuscript. CB provided input to all sections of the article. All authors contributed to editing the article, and approved the final manuscript.

Declarations and conflicts of interest

Research ethics statement

The ethical implications associated with hosting coffee mornings and gathering feedback from the people attending were carefully considered throughout. Any data captured from attendees was stored in line with University of Southampton NHS Foundation Trust data privacy policy.

Consent for publication statement

The anonymous illustrative quotations provided in Table 1 have been obtained from the coffee morning feedback forms. The authors declare that research participants' informed consent to publication of

findings – including photos, videos and any personal or identifiable information – was secured prior to publication.

Conflicts of interest statement

The authors declare no conflicts of interest with this work. All efforts to sufficiently anonymise the authors during peer review of this article have been made. The authors declare no further conflicts with this article.

References

Brett, J., Staniszewska, S., Mockford, C., Herron-Marx, S., Hughes, J., Tysall, C. and Suleman, R. (2014a) 'Mapping the impact of patient and public involvement on health and social care research: A systematic review'. *Health Expectations*, 17 (5), 637–50. https://doi.org/10.1111/j.1369-7625.2012.00795.x.

Brett, J., Staniszewska, S., Mockford, C., Herron-Marx, S., Hughes, J., Tysall, C. and Suleman, R. (2014b) 'A systematic review of the impact of patient and public involvement on service users, researchers and communities'. *The Patient – Patient-centered outcomes research*, 7 (4), 387–95. https://doi.org/10.1007/s40271-014-0065-0.

Cowan, K. (2021) *NIHR Reaching Out: A practical guide to being inclusive in public involvement in health research 2020*. Accessed 12 July 2023. https://arc-nenc.nihr.ac.uk/resources/nihr-reaching-out-a-practical-guide-to-being-inclusive-in-public-involvement-in-health-research/.

Hickey, G.S.B., Coldham, T., Denegri, S., Green, G., Staniszewska, S., Tembo, D., Torok, K. and Turner, K. (2018) *Guidance on Co-producing a Research Project*. Southampton: INVOLVE. Accessed 4 July 2023. https://research.hscni.net/sites/default/files/Copro_Guidance_Mar18.pdf.

Knowles, S.E., Allen, D., Donnelly, A., Flynn, J., Gallacher, K., Lewis, A., McCorkle, G., Mistry, M., Walkington, P. and Drinkwater, J. (2021) 'More than a method: Trusting relationships, productive tensions, and two-way learning as mechanisms of authentic co-production'. *Research Involvement and Engagement*, 7 (1), 34. https://doi.org/10.1186/s40900-021-00262-5.

Maccarthy, J., Guerin, S., Wilson, A.G. and Dorris, E.R. (2019) 'Facilitating public and patient involvement in basic and preclinical health research'. *PLoS One*, 14 (5), e0216600-e. https://doi.org/10.1371/journal.pone.0216600.

Mathie, E., Wythe, H., Munday, D., Millac, P., Rhodes, G., Roberts, N., Smeeton, N., Poland, F. and Jones, J. (2018) 'Reciprocal relationships and the importance of feedback in patient and public involvement: A mixed methods study'. *Health Expectations*, 21 (5), 899–908. https://doi.org/10.1111/hex.12684.

NHS Health Research Authority (2021) 'Public involvement in a pandemic: Lessons from the UK COVID-19 public involvement matching service'. Accessed 4 July 2023. https://www.hra.nhs.uk/planning-and-improving-research/best-practice/public-involvement/public-involvement-pandemic-lessons-uk-covid-19-public-involvement-matching-service/.

NIHR INVOLVE (2019) 'What is public involvement in research?'. Accessed 4 July 2023. https://www.invo.org.uk/find-out-more/what-is-public-involvement-in-research-2/.

Oliver, K., Kothari, A. and Mays, N. (2019) 'The dark side of coproduction: Do the costs outweigh the benefits for health research?'. *Health Research Policy and Systems*, 17 (1), 33. https://doi.org/10.1186/s12961-019-0432-3.

Roberts, N.J., Kelly, C., Lippiett, K., Ray, E. and Welch, L. (2021a) 'Experiences of nurses caring for respiratory patients during the first wave of the COVID-19 pandemic: An online survey study'. *Open Respiratory Research*, 8 (1), e000987. https://doi.org/10.1136/bmjresp-2021-000987.

Roberts, N.J., McAloney-Kocaman, K., Lippiett, K., Ray, E., Welch, L. and Kelly, C. (2021b) 'Levels of resilience, anxiety and depression in nurses working in respiratory clinical areas during the COVID pandemic', *Respiratory Medicine*, 176, 106219. https://doi.org/10.1016/j.rmed.2020.106219.

Shippee, N.D., Domecq Garces, J.P., Prutsky Lopez, G.J., Wang, Z., Elraiyah, T.A., Nabhan, M., Brito, J.P., Boehmer, K., Hasan, R., Firwana, B., Erwin, P.J., Montori, V.M. and Murad, M.H. (2015) 'Patient and service user engagement in research: A systematic review and synthesized framework'. *Health Expectations*, 18 (5), 1151–66. https://doi.org/10.1111/hex.12090.

Tembo, D., Hickey, G., Montenegro, C., Chandler, D., Nelson, E., Porter, K., Dikomitis, L., Chambers, M., Chimbari, M., Mumba, N., Beresford, P., Ekiikina, P.O., Musesengwa, R., Staniszewska, S., Coldham, T. and Rennard, U. (2021) 'Effective engagement and involvement with community stakeholders in the co-production of global health research'. *BMJ*, 372, n178. https://doi.org/10.1136/bmj.n178.

Thornton, J. (2020) 'Clinical trials suspended in UK to prioritise covid-19 studies and free up staff'. *BMJ*, 368, m1172. https://doi.org/10.1136/bmj.m1172.

Welch, L., Sadler, E., Austin, A. and Rogers, A. (2021) 'Social network participation towards enactment of self-care in people with chronic obstructive pulmonary disease: A qualitative meta-ethnography'. *Health Expectations*, 24 (6), 1995–2012. https://doi.org/10.1111/hex.13340.

Wilson, P., Mathie, E., Keenan, J., McNeilly, E., Goodman, C., Howe, A., Poland, F., Staniszewska, S., Kendall, S., Munday, D., Cowe, M. and Peckham, S. (2015) 'ReseArch with Patient and Public invOlvement: a RealisT evaluation – the RAPPORT study'. *Health Services and Delivery Research*, 3 (38). https://doi.org/10.3310/hsdr03380.