

# Training lay assessors

We are developing a learning and support programme for lay assessors in partnership with members of the public and research organisations

Adele Horobin<sup>1</sup>, George Brown<sup>2</sup>, Fred Higton<sup>2</sup> and members of the working group

<sup>1</sup> Nottingham Hearing Biomedical Research Unit; <sup>2</sup> Lay assessor for Nottingham Hearing Biomedical Research Unit.

## Introduction

Lay assessors bring their personal experience and a patient/public view to research projects. They will read and comment upon a project and can improve grant applications, study plans and patient information.

In the East Midlands we have developed a learning and support (training) programme for lay assessors. We are a multi-disciplinary working group of members of the public and professionals from across research organisations. We delivered a "pilot" of the programme this year.

## Role of members of the public

**Build a shared understanding of lay assessing**  
Group discussions were held at large (25-30 attendees) meetings between public and research staff.

**Develop the learning and support programme**  
Assembly of a working group (10-15 people, with majority representation from the public) to develop the programme content.

### Defining:

- Lay assessing.
- Why people want to become lay assessors.
- The key skills required for lay assessing.
- Learning and development needs of lay assessors.

### Foundation for:

- Creating the opportunity to assemble a working group to develop the learning and support programme.
- Guiding our development of the programme content.

### Role summary for lay assessors:

- This was created with members of the group, based on themes that arose from group discussions.

### Pilot programme developed and delivered:

**Module 1:** Research methods and ethics.

**Module 2:** Assessing before funding awarded.

**Module 3:** Assessing after funding awarded.

- Delivered by two members of the working group.
- Emphasis was placed on group discussions and 'learning by doing'.



## Role of research organisations

Our approach in involving many research organisations in a partnership to develop the programme was vital to launching it. This approach will also play a part in keeping the programme sustained.

### Key advantages of partnering with local research organisations:

- Gaining funding for the project from the regional 'umbrella' organisation (Academic Health Science Network).
- Tapping into PPI (Patient and Public Involvement) resources of each organisation (PPI facilitators and involved public).
- Locating other PPI training opportunities offered locally.
- Providing a source of trainees.
- Encouraging multi-organisations to use trained assessors and vice versa.
- Adopting consistent approach to PPI and training across organisations.

## What's happening next?

- Evaluation of the pilot learning and support programme is ongoing.
- We will be meeting with the full working group and past attendees of the course to discuss how the course should be developed further. We will also discuss how we can continue to support past attendees.
- We will be aiming to develop the course to embrace all of the principles for learning and development as proposed by the NIHR-wide (National Institute for Health Research) working group for learning and development for public involvement.

Dr Adele Horobin [adele.horobin@nottingham.ac.uk](mailto:adele.horobin@nottingham.ac.uk)

Participants in the working group include: Di Broomhead, George Brown, Vikki Develin, Eric Emmerson, Pat Fairbrother, Fred Higton, Adele Horobin, Delia Horobin, Anthony Locke, Glen Swanwick, Stevie Vanhegan, Dave Waldram, Dawn-Marie Walker, Claire Ward, Andy Wragg, Paula Wray.

Our thanks go to the East Midlands Academic Health Science Network for funding this programme.

