

## What does the BMJ mean by patient involvement and co-production?

### Education

As part of the BMJ's [Patient Partnership Strategy](#), we ask authors to work with patients as active partners in the creation of articles.

#### *Who should be involved?*

This means seeking input and advice from people who have relevant expertise in living with the conditions or situations authors are writing about. For simplicity, we use the term “patient” here, but this may include people who do not describe themselves this way, such as pregnant women, parents and other carers, people who use a particular service, or people who do not have a specific diagnosis but could be affected by a paper's recommendations. For example, if writing about medical screening for the over-60s, consider seeking insights from lay people over 60 on how best to do this.

#### *When and how should patients be involved?*

We advise seeking patient input on the scope of their article early on, ideally at the planning stage. Patient involvement could range from co-authoring with someone who has personal experience of the condition you are writing about, through to a “patient perspective” box with reflections on your article. Involving patients also means ensuring they approve the way their contribution has been used in the piece. Please note that ICMJE criteria apply to all authors, including patients.

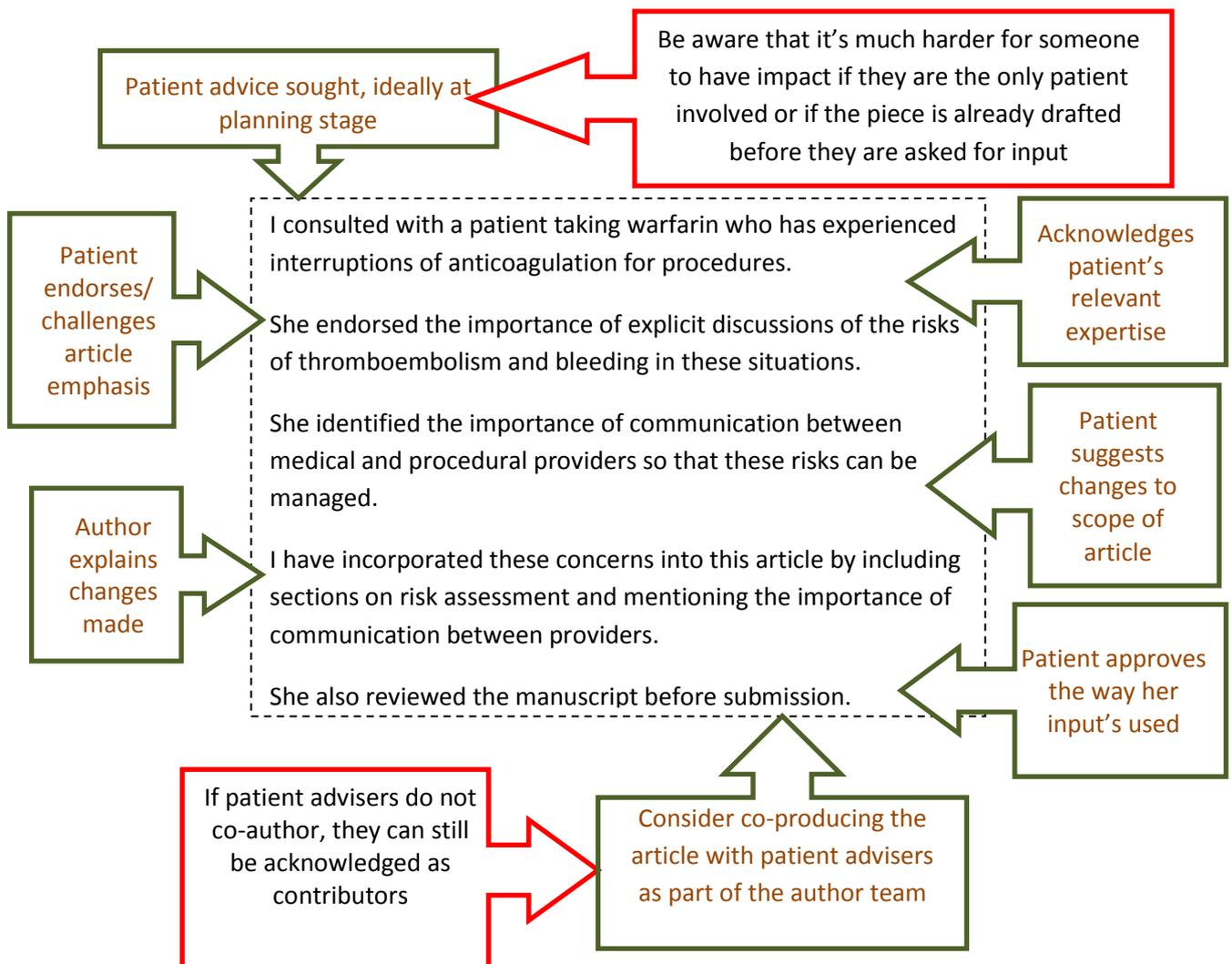
#### *Tips on involving patients*

- Before you start, identify what kind of expertise you need and what you would like help with. If you are writing about management of a condition, ask people who have experience of living with that condition what to include, possible areas for further research, and whether your recommendations are realistic.  
For example, in [this clinical review](#), patients widened the scope of the article beyond immediate clinical management to include information on how to deliver that management, and the importance of safe handover to patients.
- Find people or groups who can offer that expertise. It may not be appropriate to ask your own patients if they are still receiving treatment from you, but your hospital, clinic or practice may already have a Patient and Public Involvement Group or lay advisory panel. Some medical schools employ patient tutors who could help, and there may be a relevant charity who can put you in touch with others in a less formal role. Alternatively, they may have already identified patient priorities, which you can incorporate. Online patient communities are sometimes willing to put your questions to members; for example, some hold regular tweet chats where you could ask “What are the most important things to include in an article teaching doctors about X?”
- There are many different ways of writing an article with patients' advice, and we welcome different approaches and suggestions.
- Always let advisers or contributors know how you have incorporated their suggestions and acknowledge them by name if this is possible and they provide consent for this.

- It must be two-way communication. Simply telling patients and the public what you do, or trying to get them interested in their health or in health research, is informing patients rather than asking them for advice . It is not the kind of patient involvement we are looking for
- It is not doing research on patients (recruiting people to give you data for analysis, getting people to fill in questionnaires or doing a qualitative study on a sample of people). If patients are subjects or participants rather than advisers, that is research on them rather than working with them
- Be careful not to assume you know what patients think based on your experience, or your colleagues' experience, of treating patients with a particular condition. Creating an article with patients means explicitly asking them for their expertise and help with that topic. If your work has implications for service delivery, it is particularly important that you seek insight from people who do not work within the health system.

We also ask authors to include a statement on how they have involved patients. See example below.

**Example statement** (from a [State of the Art Review](#)):



Patient endorses/challenges article emphasis

Author explains changes made

Be aware that it's much harder for someone to have impact if they are the only patient involved or if the piece is already drafted before they are asked for input

Acknowledges patient's relevant expertise

Patient suggests changes to scope of article

Patient approves the way her input's used

If patient advisers do not co-author, they can still be acknowledged as contributors

Consider co-producing the article with patient advisers as part of the author team

Other examples:

<http://www.bmj.com/content/350/bmj.h3029>

<http://www.bmj.com/content/351/bmj.h4443>

<http://www.bmj.com/content/351/bmj.h2730>

<http://www.bmj.com/content/351/bmj.h4669>

<http://www.bmj.com/content/351/bmj.h5660>

If you did not involve patients at all, we ask you to state this too: “no patients were asked for input in the creation of this article.”

This initiative is developing all the time and we welcome comments and suggestions on how we can do more. If you have questions about involving patients in the creation of your education article, please contact [Tessa Richards](#), Patient Partnership Editor. For Clinical Reviews cc [Sophie Cook](#), and for Practice articles cc [Helen MacDonald](#).