[Available from: <https://www.invo.org.uk/wp-content/uploads/2016/05/HRA-INVOLVE-updated-statement-2016.pdf>.

- [2] Fitzcharles, M.-A., Brachanec, M., Cooper, L., Dubin, R., Flynn, T., Gerhold, K., Häuser, W., Cowan, K., Laupacis, A., Marleau, R., Milot, M., Sza-jcz-Keller, N., Sumpton, J., Walsh, Z. & El-Gabalawy, H. 2017. A paradigm change to inform fibromyalgia research priorities by engaging patients and health care professionals. *Canadian Journal of Pain*, 1, 137-147.

Acknowledgments: This work was supported by the National Institute for Health research [ICA-PCAF-2018-01-078 to SD]

Disclosure of Interests: Sandra Derham: None declared, Mel Brooke Grant/ research support from: Sponsorship from Lilly to BIRD for the Patient and Public Engagement Programme, Sponsorship from Sanofi to BIRD for the Healthcare Professionals Education Programme.

DOI: 10.1136/annrheumdis-2020-eular.2670

PARE0030

PEER SUPPORT OF PATIENT AND PUBLIC INVOLVEMENT AND ENGAGEMENT IN RESEARCH: THE 'RUG-BUDDY'

A. Higginbottom¹, K. Research User Group¹, C. Rhodes¹, L. Campbell¹, S. Blackburn¹. ¹Keele University, School of Primary, Community and Social Care, Keele, United Kingdom

Background: Since 2006, The School of Primary, Community and Social Care, Keele University has a long standing commitment to Patient and Public Involvement and Engagement (PPIE) in research. The School's Research User Group (RUG) has 133 members in January 2020, compared to 80 members in September 2016. Supporting the practical and emotional needs of a growing number of RUG members to support their long-term involvement is of prime importance.

Arising from Keele's role as a test bed site for the new UK Public Involvement Standards, a new peer support role (the 'RUG-Buddy') was co-produced to facilitate the support of RUG members.

Objectives: The RUG-Buddy is a peer support and mentoring scheme. More experienced RUG members attend research meetings with less experienced members to provide support and reassurance. The scheme aims to provide:

- A welcoming and friendly environment for RUG members
- Extra support for all RUG members before, during and after research meetings
- Help new RUG members ease into public involvement
- Support with discussions between researchers and RUG members, e.g. avoiding research jargon
- Reassurance to new members - learning from those with greater experience of public involvement
- Someone to talk to and confide in from people who have personal experience of PPIE
- Practical advice on completing payment forms, parking issues, etc.

Methods: Peer support is provided by a panel of existing RUG members who have substantial experience of PPIE in research. This is an additional method of supporting the RUG members alongside support provided by the School's PPIE team. RUG-Buddies will be supported in their role by the PPIE team and provided with an induction and training. RUG-Buddies are offered payment for their time and have their travel expenses reimbursed. The RUG-Buddies scheme will be piloted during an initial 6-month period, after which it will be reviewed, with feedback from RUG-Buddies and RUG members.

Results: A role description for the RUG-Buddy role has been coproduced by Keele's PPIE team and its RUG Steering Group (Table 1). A panel of 10 RUG members have been recruited for the RUG-Buddy role and have received an induction and training (e.g. Health and Safety, Information Governance). RUG-Buddies have provided support to and attended research meetings with other RUG members. The RUG-Buddy role will be reviewed in September 2020.

Table 1. Summary of the RUG-Buddy role description

Qualities of a RUG-Buddy	RUG-Buddy responsibilities	PPIE team responsibilities
Willing to share personal experience	To attend up to the first three PPIE meetings of a research project	To provide a training session for all RUG-Buddies
Friendly and approachable	To introduce new member to RUG members and research team	To meet RUG-Buddies every two months to provide review/ feedback of the role
Enthusiastic and knowledgeable about PPIE in research	To encourage contribution to the meeting	To have a named PPIE lead for any questions/queries that may arise

Table 1. Summary of the RUG-Buddy role description

Qualities of a RUG-Buddy	RUG-Buddy responsibilities	PPIE team responsibilities
Be reliable and punctual	To provide support and respond to RUG members' questions	To work alongside RUG-Buddy to meet and greet public members

Conclusion: The RUG-Buddy is an innovative peer support scheme to support the involvement of patients and the public in research. The support provided by RUG-Buddies offers a different perspective from people with real-life experience of involvement in research. It is anticipated that this additional support will enrich the experience of RUG members and facilitate a more welcoming and conducive environment for active and meaningful public involvement. Furthermore, it has also provided an opportunity for the RUG-Buddies to gain valuable new skills and also give something back to the PPIE team and researchers who have supported their own involvement for many years.

Acknowledgments: This project is funded by the National Institute for Health Research (NIHR) School for Primary Care Research (project reference 440). Thank you to the Keele Research User Group for all their great work

Disclosure of Interests: None declared

DOI: 10.1136/annrheumdis-2020-eular.3475

PARE0031

AN MHEALTH TOOL FOR SHARED DECISION MAKING FOR PATIENTS WITH RHEUMATISM AND ARTHRITIS

Y. Koumpourou¹, A. Pappa². ¹University of West Attica, Informatics and Computer Engineering, Aigaleo, Greece; ²Hellenic League Against Rheumatism - ELEANA, Athens, Greece

Background: Patient empowerment is a key element of patient-centred healthcare according to WHO. In the same direction, the Institute of Medicine in the United States supports actions to engage patients in their health care decision in a new patient-centered care model. Patient-centred care models have demonstrated better quality of care as well as potential long-term cost-efficiencies. However, nowadays, many patients are still struggling to become equal partners in care. Patients with chronic conditions, such as rheumatoid arthritis, are often referred to as the most under-used resource in the health system. Shared decision making is a collaborative process enabling a clinician and patient to participate jointly in making a health decision about the treatment having discussed the options, benefits and harms, while considering also the patient's values and experiences.

Objectives: The objective of the current research was to design a tool that will facilitate the shared decision making regarding the treatment approach, based on real life evidences from the patient. The focus of the application is on the pain assessment of patients suffering from rheumatism and arthritis. The proposed solution utilizes the latest technological innovations to support patients and clinicians on their decisions and assessment strategy on a more accurate base.

Methods: The design process followed a user-centered approach by involving a multidisciplinary team of experts (an mHealth expert, a behavioural scientist, and two physicians). An iterative design process focused on the different end-users (patients and clinicians) and their actual needs on the topic concerned. In each phase, the experts involved the end-users to create a highly usable tool. The aim was to capture and address the whole user experience. An evaluation phase took place for three months.

Results: The design team brought the users into every stage of the design process. Twenty patients and three physicians (one pathologist, one general surgeon and an expert in pharmacology and clinical pharmacology) participated and evaluated the modules implemented. The final solution consists of an application running on Android operating system in any smart phone. The final application supports the patient to enter all necessary information about: (i) the pain he/she is feeling, (ii) the medication he/she is receiving, and (iii) his/her life style.

Conclusion: After a three months period of continuous use of the application from the participants during the evaluation phase, they reported very encouraging results. In terms of usage, the patients found it user friendly, easy to learn, easy to use, and easily accessible. They also consider it really useful in order to keep track of their progress and assess the treatment and medications they receive relevant to the pain they feel. The physicians involved in the evaluation of the application found it very useful and with significant potential for daily use by clinical staff to evaluate the therapies given to their patients. All users concluded that the developed app can help towards a more accurate and acceptable treatment based on shared decision, exploiting the collected evidences.