

GRIPP2-SF Item	Description
1.Aims: Report the aim of PPI in the study	<p><i>i) Ensure there is a patient voice included at all stages of the EURIPIDES study.</i></p> <p><i>ii) WP4: To discuss the 'rules' for the consensus conference that were developed from the WP3 data</i></p> <p><i>iii) WP4: To participate in the consensus conference</i></p>
2.Methods: Provide a clear description of the methods used for PPI in the study	<p><i>The PPIT met to review the 'rules' generated from WP3 data ahead of the consensus conference and to discuss how these should be presented. They agreed on flashcards. All PPIT members and the SRs were invited to the consensus conference, and at least one member from the PPIT contributed in each sub-group. Alongside invited experts and NHS staff, the PPIT members and SRs built a consensus around our emerging themes from WP3. Members also contributed in the Consensus building and asked questions after each presentation.</i></p>
3.Study results Outcomes: Report the results of PPI in the study, including both positive and negative outcomes	<p><i>The PPIT and SRs provided a strong user and carer perspective. They critiqued the content of our analysis alongside others in group settings. They provided content and face validity of the themes and sub-themes identified. They provided real life examples of the themes from their own experiences.</i></p>
4.Discussion and conclusions Outcomes: Comment on the extent to which PPI influenced the study overall. Describe positive and negative effects	<p><i>The PPI was vital in grounding the emerging themes and recommendations in what would work for service users and carers. They were instrumental in ensuring the patient voice wasn't lost. Along with other conference attendees they came to a consensus on a number of themes.</i></p>
5.Reflections/critical perspective: Comment critically on the study, reflecting on the things that went well and those that did not, so others can learn from this experience	<p><i>The PPIT and SRs could have presented material at the consensus conference with support and training, and this may be something we look at in future. However, they participated meaningfully as equals and generated discussion which was extremely helpful in refining the rules in light of current NHS contextual conditions as an output of WP4.</i></p>