



Kathleen Briers

Kathleen is one of the newest members of the Patient and Carer Panel, joining the group in 2019. Until her retirement she worked as a teacher for 30 years, including as a NATO international teacher before specialising in teaching the deaf & hearing impaired of all ages.

Following a fall while walking, she was diagnosed with osteoporosis and began contributing in local healthcare initiatives such as her local Healthwatch group working to improve dialogue between CCG's, patients and care providers in the local area. In her aim of raising the profile of osteoporosis, she joined the Royal Osteoporosis Society and acts as treasurer of her local osteoporosis support group. Through both her roles she has championed the awareness of the local fracture liaison service. She also contributed as a lay member involved with developing the NICE guideline relating to 'Osteoporosis-assessing the risk of fragility fracture'. Joining the FFFAP team as a patient representative has proved to be a further way of her commitment to raising the profile of osteoporosis and bone health.



David Brookfield

After graduating with degrees in Applied Physics and Engineering David joined the academic staff of a major red brick university lecturing and running a research group in Mechanical Engineering. He thoroughly enjoyed this role and found it particularly interesting working with small groups of students on research projects. Subsequently he moved into a management role running a large team of staff responsible for all aspects of student facing administration in a large university.

Around the time that David took early retirement he had a minor fall on ice which resulted in an ankle fracture. As he was over the age of 55 and his fall had been from standing height, osteoporosis was considered, and he was diagnosed with this approximately ten years ago. Around the same time his mother experienced a hip fracture, presumably osteoporosis related, and his maternal aunt several spinal compression fractures.

Because of David's own and family's experience of osteoporosis, he joined the Royal Osteoporosis Society and has been an active volunteer with them for the past ten years. This has included sitting on their Members and Volunteers Committee, sitting on their Research Grants Committee, being secretary of a local osteoporosis support group, representing ROS as a lay contributor to the NICE Bisphosphonates Multiple Technology Appraisal, and campaigning work in Wales. David is also a member of the Wales Osteoporosis Advisory Group. Outside ROS he has chaired a charity that manufactures aids for people with disabilities and been trustee of another disability charity.

David has really enjoyed all his work with ROS and was particularly pleased through them to become a patient representative on the Falls and Fragility Fractures Audit Panel. Through his osteoporosis having been diagnosed and treated David avoided subsequent fractures. David is passionate to work tirelessly to achieve the same for everyone.



Sue Doyle

Until retirement Sue worked as a Chartered Physiotherapist latterly managing several community Physiotherapy Services and the Falls Prevention Service in Ashton Leigh and Wigan. With a strategic interest in preventing fragility fractures she was involved in the successful bid for a local Fracture Liaison Service.

Sue is a member of the Royal Osteoporosis Society and Chair of the Ashton Leigh and Wigan Osteoporosis Support Group. She helps to care for her Mother in Law who has severe osteoporosis and has had bilateral hip fractures and multiple spinal fractures which limit her mobility and independence.

Sue wanted to be involved in the patient panel as it was a good opportunity to help to develop and improve services from a patient and carer perspective at a national level. Sue values her involvement as very worthwhile and interesting experience working with other panel members and the professionals on the panel.



Julia Ellis

Julia has many years' experience working in the statutory and voluntary sector to improve services for patients and carers in hospitals, primary care and the community. Formerly an advertising copywriter, her passion for improving healthcare began when her mother was admitted to hospital following a hip fracture, an event that marked the beginning of a long and distressing journey leading to her mother's death from MRSA some three months later.

Having witnessed the poor standard of care her mother – and other patients – received, and feeling determined to make a difference, Julia took up a post at the Commission for Patient and Public Involvement in Health where she helped patient and public involvement forums work collectively on improving healthcare. She then moved to the Princess Royal Trust for Carers in Salford where she developed a network of support for carers across general practice and secondary care. She was then recruited to the policy team at Carers Trust in London where she led the Supporting Carers in Primary Care programme in partnership with the Royal College of GPs and Carers UK.

Julia also worked with national pharmacy organisations to co-design and pilot 'carer-friendly pharmacies', a concept which has since been adopted and developed in Australia as well as in the UK. With additional support from NHS Employers' Flu-fighter team, she also helped to increase uptake of flu vaccinations amongst unpaid carers who, despite being eligible for a flu jab, are often overlooked during the seasonal flu vaccination campaign.

Since leaving Carers Trust in 2015, Julia has continued to champion the needs of patients and carers, both as a freelance consultant and as a volunteer. Her membership of the Royal College of Physicians' Patient and Carer Network gives her the opportunity to bring the patient and carer perspective to a diverse range of quality improvement projects, including the College's ground-breaking Falls and Fragility Fractures Audit Programme. Through her role on the Programme's Patient Panel, Julia is focussing on a programme that's particularly close to her heart: improving outcomes for the many frail, older people who break their hip each year.



Maggie Fielding

Maggie discovered she has Osteoporosis in 2014 following fracture sustained whilst on a walking holiday. This diagnosis came as a shock as she had always seen herself as a healthy and active woman regarding osteoporosis as a condition that only affected the very frail or very old. Since receiving her diagnosis, she has become committed to raising the importance of good bone health irrespective of age. She is active within her local Royal Osteoporosis Society support group and sees her role as a patient panel member of FFFAP as a means of contributing to ensure that hip fracture patients as well as those with osteoporosis receive appropriate care and treatment

Maggie's background is in training, career coaching and the design and implementation of in-house counselling services. She has worked with individuals from a wide range of backgrounds and an equally wide range of organisations. In her spare time, she enjoys socialising, travel, gardening and swimming.



Iona Price

For 35 years Iona worked in theatre and feature film production. She loved her work and was lucky enough to tour the world with plays and spend months on location filming abroad. But in 2012 her Mother suffered a hip fracture eight months before she died, and Iona's life changed direction.

Unfortunately, due to post-operative delirium her Mother's rehabilitation journey was far from smooth. Iona saw the impact, both physically and mentally that this had on her Mother during her last months and she wanted to do something to improve care for other patients.

Iona became a member of the Royal College of Physicians Patient and Carer Network in 2014.

Within a couple of months, she joined the advisory groups of the National Hip Fracture database and the Fracture Liaison Service database. It has been very Rewarding experience for Iona to work with such a dedicated team of professionals who not only recognised there are some problems, they are actively trying to resolve them and improve patient care.

In 2018 Iona helped set up the Falls and Fragility Fractures Audit Programme Patient Panel. The panel members have embraced their role with enthusiasm and dedication and are already making a significant contribution to the work of Programme in a very short space of time.



Lynne Quinney

Lynne joined the Patient Panel having been a member of the RCP's Patient & Carer Network for four years. With a professional background as a Learning & Development specialist in the NHS, Lynne has always been driven by the need to keep patients at the centre of her work and has a commitment to quality and service improvement.

When Lynne's elderly mother fell and fractured her hip in 2016 she experienced first-hand the challenges that this often presents not only to the patient but also to their carers. In particular, the difficulties associated with the lack of *really* integrated services proved to be an issue for several weeks. For Lynne, it seemed at times that the patient might be at the centre for each of the individual services involved but that the system as a whole did not enable truly patient centred care.

With this personal experience in mind and drawing on her involvement in the RCP's Future Hospital Programme where, as a PCN member, she supported local patients to play a full part in improving services for frail elderly people, Lynne welcomed the opportunity to join the Patient Panel. She strongly believes that, through meaningful involvement of patients and carers, the lay person can have a voice in shaping safer and ever more patient centric services in the future.



Alison Smith

Alison, like many, had minimal knowledge of what osteoporosis was before she herself broke bones – not only tripping on a pavement and cracking some ribs but a couple of months later, slipping on a wet floor resulting in admission to hospital with a suspected punctured lung and further broken ribs.

It was through these personal experiences that Alison discovered the lasting repercussions for osteoporosis sufferers and the value of fracture liaison services (FLS) in terms of a patient's wellbeing, recovery and quality of life.

As a member of the Patient Panel, Alison is fulfilling her mission to ensure that all patients who have suffered fragility fractures have access to, and benefit from, an effective fracture liaison service provided by CCGs. She believes passionately that this should not be as a result of good fortune alone and values her role as a member of the Patient Panel in contributing the patient's perspective to the work of FFFAP towards achieving an effective service for all patients with fragility fractures.



Phyll Taylor

Phyll Taylor's extensive knowledge of the healthcare sector is invaluable to the work of the Patient Panel. Phyll not only has an MSc in healthcare but has worked in the NHS for 40 years, one of her various roles involving the establishment and leadership of a specialist service for people with bladder and bowel problems.

She was a member of the Royal Osteoporosis Society (ROS) Volunteer and Members committee for 6 years and is currently still volunteering for the ROS whilst fulfilling her duty as Chairperson of a newly formed local support group for people with osteoporosis.

Phyll suffered a broken hip when slipping in a cafe 3 years ago and is as such able to contribute her experience from both the nursing and patient perspective towards the development of FFFAP work. She welcomes the opportunity of being part of a group working to drive improvements for patient services.