

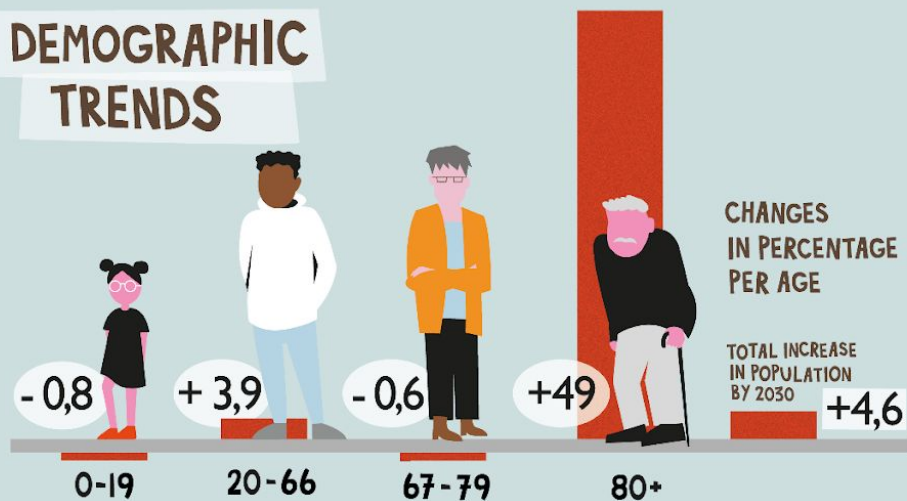


Going Back to the Future: Co-production and leading for population health across systems

Anette Nilsson Peter Lachman

C 5 Leading with the engagement of people receiving care

DEMOGRAPHIC TRENDS



WHY INTEGRATED & PERSON-CENTRED CARE?



DIGITALISATION DRIVES
BEHAVIORAL CHANGES



EQUAL CONDITIONS FOR HEALTH



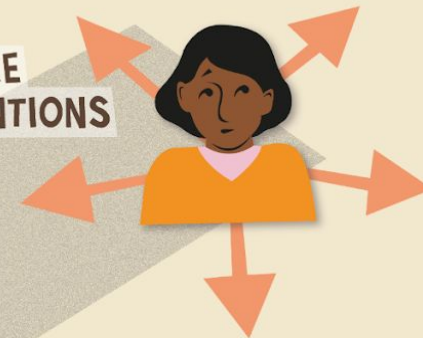
- TO FOCUS ON PERSON
AND RELATIONSHIP



FROM ISOLATED CARE
AND WELFARE INTERVENTIONS



- TO COORDINATION BASED ON
THE FOCUS OF PERSON



PERSON-CENTRED & INTEGRATED CARE

FROM REACTIVE



- TO PROACTIVE AND HEALTH ENHANCEMENT



FROM RESIDENTS
AND PATIENTS
AS PASSIVE RECIPIENTS



- TO ACTIVE CO-CREATORS



Patient contract – a documented agreement



Agreement

Common agreement between patient and health care from the start

What matters to you!

Cooperation

Planning, overview and support for coordinated care

Continuity

Person with a coordination responsibility



Access

Time for care, patients and caregivers agree on the time for an appointment



Value makes it happen





What matters to you?



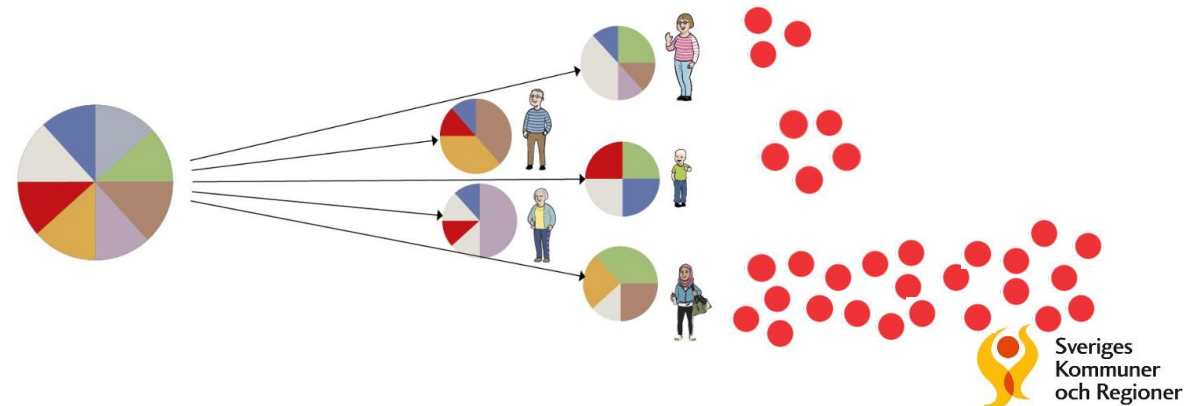
“I live in the world not in the health care system”

To manage her Parkinson's disease, Sara Riggare spends 1 hour each year with her neurologist and 8765 hours with self-care.

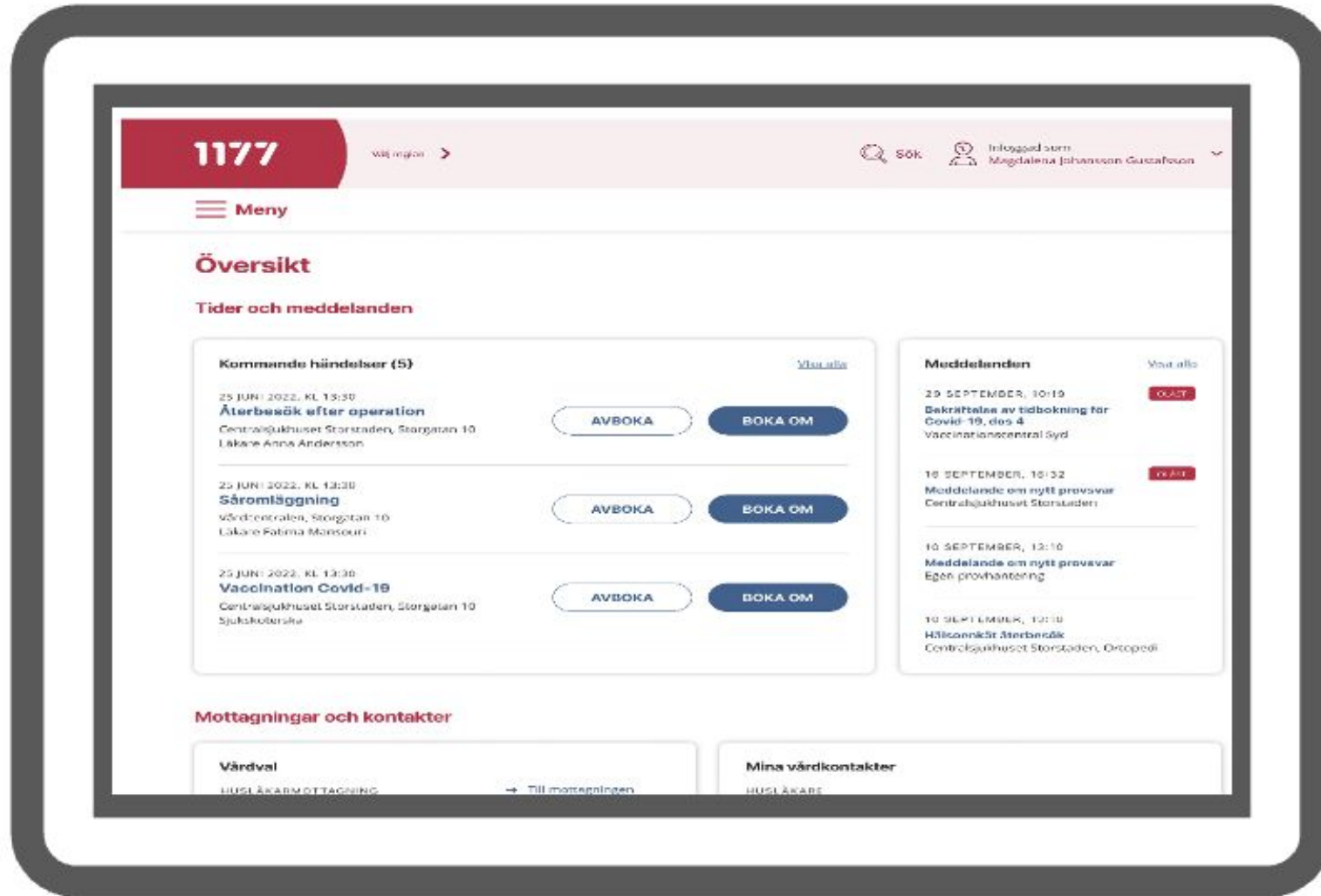
www.riggare.se

Sara Riggare, 2014

**Documented
agreement/ Patient
contract**



Next step - National Digital Infrastructure



What matters for Esther?



The words of those who use the contract



Camilla Johansson
RN

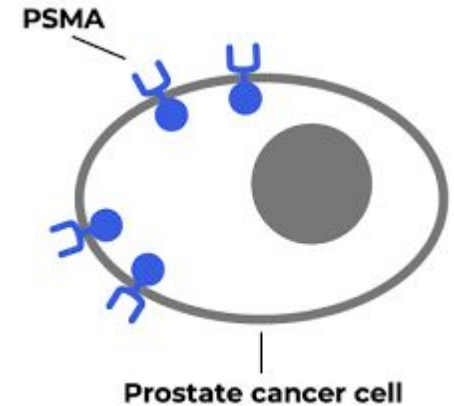
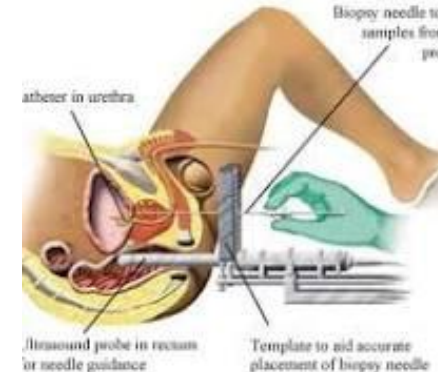
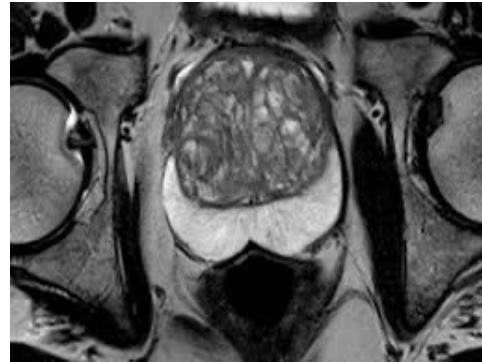
"I wish that everyone in the care chain uses agreement and that it becomes a habit to see each other, regardless of whether you work in a municipality, inpatient care or primarycare. It binds us together and provides a summary of the patient's current situation."

"For me as staff, the agreement facilitates the work by providing a summary of where we stand in the care relationship and serves as a reminder of what the idea is going forward"

In conversation with Peter Lachman

My lived experience

Diagnosis



Treatment



Thank you!



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Experts by Experience: Leading the Way

Lois Edmunds: Regional Expert by Experience
Gareth Taylor: Senior Governance Manager



About Us – Elysium Healthcare

Elysium Healthcare was Founded in 2016

- Providing holistic, person-centred care
- Specialist hospitals
- Residential settings
- Community-based homes
- 90+ locations across England and Wales
- Part of Ramsay Health Care

Divisions & Services:

- Mental Health, Learning Disabilities and Autism
- Neurological
- Children and Education

Experts by Experience:

Embedding Lived Experience into Mental Health Leadership and Governance



The Role of the Expert by Experience (EBE)

- Bridging voices of service users, carers, & professionals
- Influencing policy & governance from a lived experience lens
- Senior management presence, not just advisory



A New Standard in Co-Production

- Co-designed feedback tools
- Active influence on policy and clinical processes
- Formal inclusion of carers in governance



Making It Real – Case Studies

1. Transforming Feedback
2. Challenging Restrictive Practices
3. Empowering Carers
4. Peer Support Workers



Feedback



Restrictive Practice



Carer Voice



Peer Support Worker

Case Study 1 – Transforming Feedback

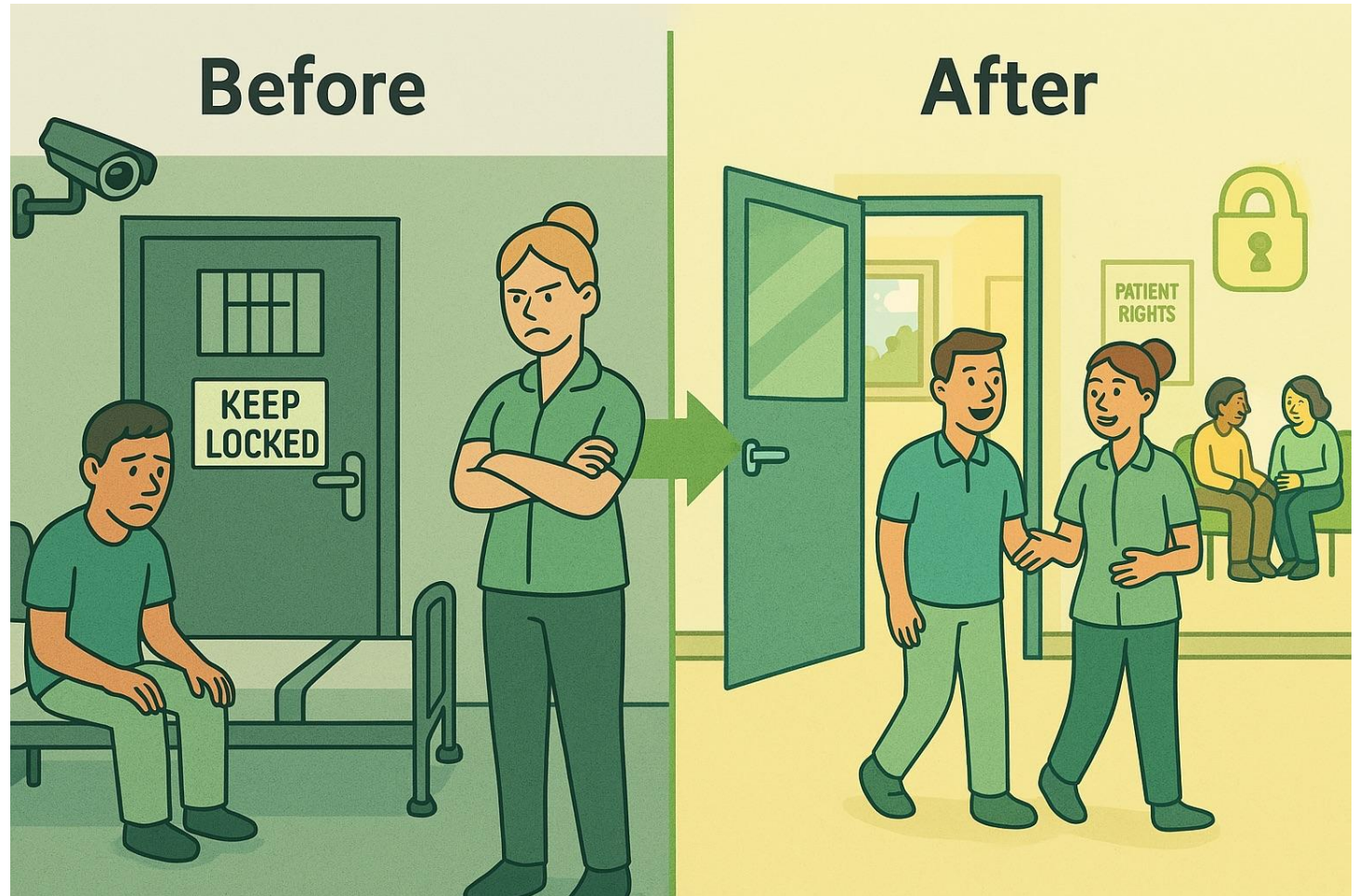
- Evidence-based patient feedback tools
- Embedded in clinical reviews
- Improved satisfaction & engagement

Feedback Timeline



Case Study 2 – Challenging Restrictive Practices

- 'Mystery shopper' visits
- Uncovered restrictive routines & access issues
- Led to policy & environmental changes



Case Study 3 – Carer Involvement

- Carer on monthly governance boards
- Newsletter & peer support
- Embedded carer voice
- Recognising experience and knowledge



Case Study 4 – Peer Support Workers

- Employed Peer Support workers at site level
- Working on the wards
- Supporting & engaging patients
- Improving quality
- Developing a Peer Support Framework



Evidence & Outcomes

1. Decision-making influence
2. Patient satisfaction improvements
3. Governance accountability
4. Expert By Experience (EBE) professional development



Scaling the Impact

- Pilots to permanent roles
- Professional training & support
- Inclusive recruitment
- Co-production as a standard



Interactive Moment

What ONE thing in your organisation would benefit from lived experience leadership?



What ONE thing in your organisation would benefit from lived experience leadership?

<https://www.menti.com/al2f38i4krmc>

The Vision Moving Forward

- More lived experience roles
- A future of compassionate, inclusive healthcare
- Co-production at every level



Thank You & Contact Info

Thank you!

Lois Edmunds – Regional Expert by Experience

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Gareth Taylor – Senior Governance Manager

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Nurses on the move!

Improving evidence-based essential care, patient participation and nurse engagement through Unit Practice Councils

Marjolein Heemels RN, MSc. MHA
Marth Jans RN, MSc.



Marjolein Heemels

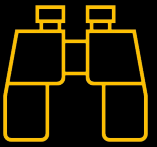
- Nurse Director Maastricht UMC+ (2020-present)
- Teacher nursing leadership Erasmus Centrum voor Zorgbestuur (2020-present)
- Oncology Nurse (2002-2020)



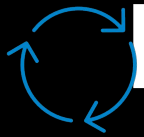
Nurses:



Care givers



Key observers



Drivers of change



Nursing strategy Maastricht UMC+

1

Future proof nursing

1. Task reallocation
2. Coordinating Nurse
3. Positioning nursing specialists
4. Easing care

2

Harmonizing nursing processes

1. Nursing standard in EPIC
2. Quality and safety themes (IGJ)
3. Nursing dashboard
4. Nursing protocols infrastructure

3

Academization

1. Teaching assignment Professor of Nursing Science in collaboration with CAPHRI/FHML
2. Research infrastructure
3. EBP guidance
4. Academic career paths

4

Leadership & Governance

1. Harmonizing the 3rd/4th echelon management structure
2. Professional authority and nursing council structure
3. Nursing Staff Convention
4. Leadership development

5

Care pathway development & dual management

1. Integrated care
2. Strengthening the nursing role in care pathways
3. Equal dual leadership
4. Interprofessional collaboration

6

Digital care & innovation

1. EPIC
2. Data-driven work information exchange
3. Digital (health) skills
4. Stimulating (digital) innovation

NURSING COUNCILS:

- Professional autonomy
- Decision making
- Innovation readiness



4

Leadership & Governance

5

Care pathway development & dual management

Nursing councils

Patients



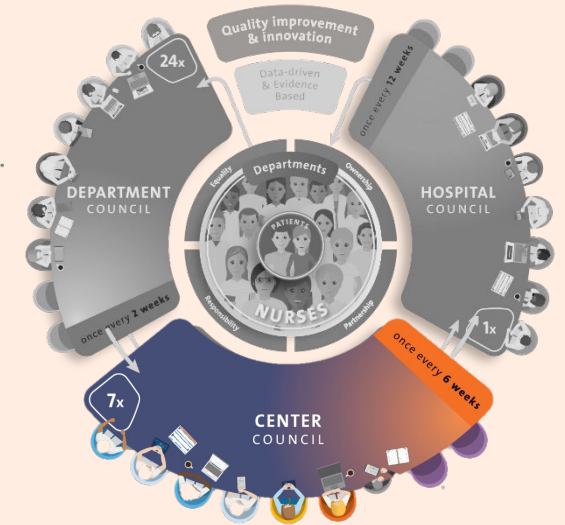
Center Council Patientpanel



Cardiovasculair center
council
Oncology center council

Cardiovasculair
patientpanel
Oncology patientpanel

Biannual meetings



Cardiovascular Center Council



Cardiovascular patientpanel

Case 1:

**Digital medication
education
through QR codes**



Oncology Center Council



Patient

Case 2:

**Stem cell transplantation
-
Video-based patient education**



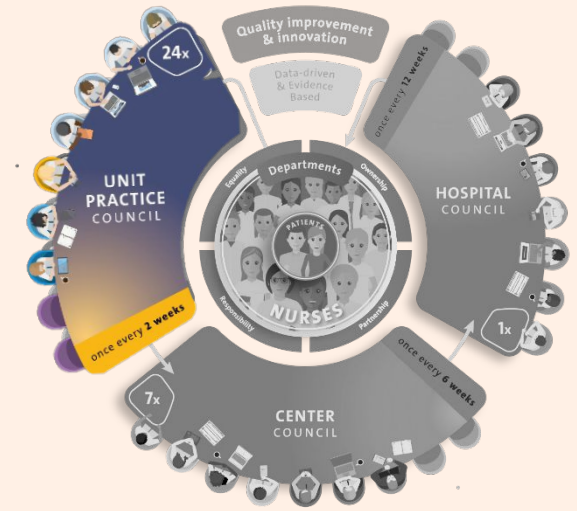
Unit Practice Council (UPC)



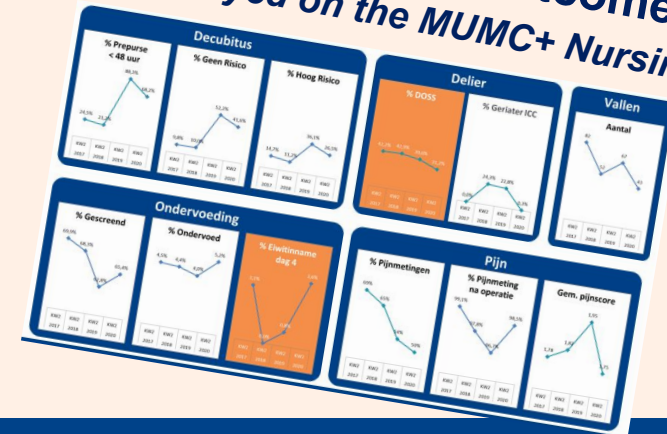
Patients



PatientExperienceMonitor
PEM



Nurse sensitive outcomes:
displayed on the MUMC+ Nursing Dashboard



Unit Practice Council



Patients

Patient
experiences



PatientExperienceMonitor
PEM



Rest hour at the oncology
Units



Unit Practice Council



Patients

Patient
experiences

PatientExperienceMonitor
PEM



Walking to the operating room – Rethinking routine
care

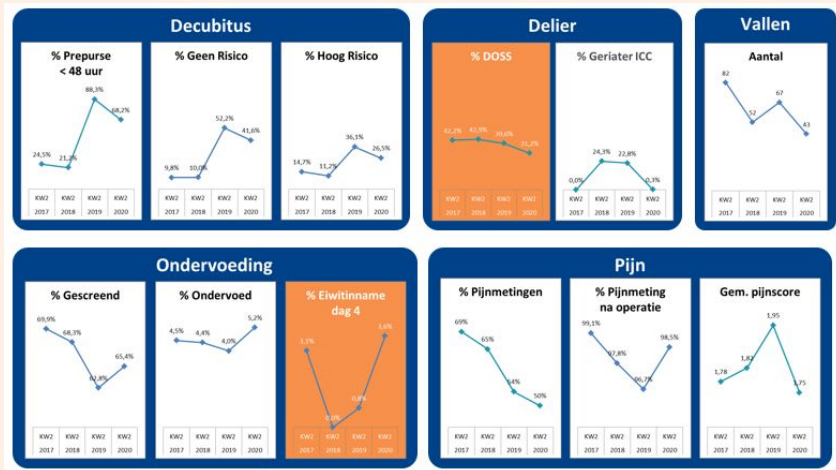
*Small steps, big
difference*

Unit Practice Council Patients

Nurse-sensitive outcomes



the MUMC+ Nursing Dashboard



➔ Fall events

Marth Jans

- Psychiatric Nurse Maastricht UMC,
(2020-present)
- Junior Researcher Maastricht UMC,
(2023 – present)



Study: Improving Evidence-Based Essential Care and Nurse Engagement through Unit Practice Councils (UPC)

“How can essential nursing care be improved by stimulating nurse engagement, patient participation and evidence-based practice in Unit Practice Councils?”



- Type: Mixed methods
- Study population: 4 nursing units (MCCC* – MUMC+)
- Duration: Dec 2023 – Dec 2025



*How can essential nursing care be improved by stimulating nurse engagement, **patient participation** and evidence-based practice in **Unit Practice Councils (UPC)**?*

1) Contextual factors influencing the UPC

regarding patient participation

Focus group meeting
- MCCC patientpanel

2) Limited efficacy-testing of the UPC

*regarding patient participation
and nurse-sensitive outcomes*

Pretest - posttest:

- MUMC+ Nursing Dashboard
- Patient Experience Monitor (PEM)
- The Patient Participation Questionnaire*

3) Integration and expansion of the UPC

Focus group meeting
- Delegation - MUMC+ patientpanel

Patient council structure



“Advisory Board – Key

Transparency on
nurse-sensitive
outcomes



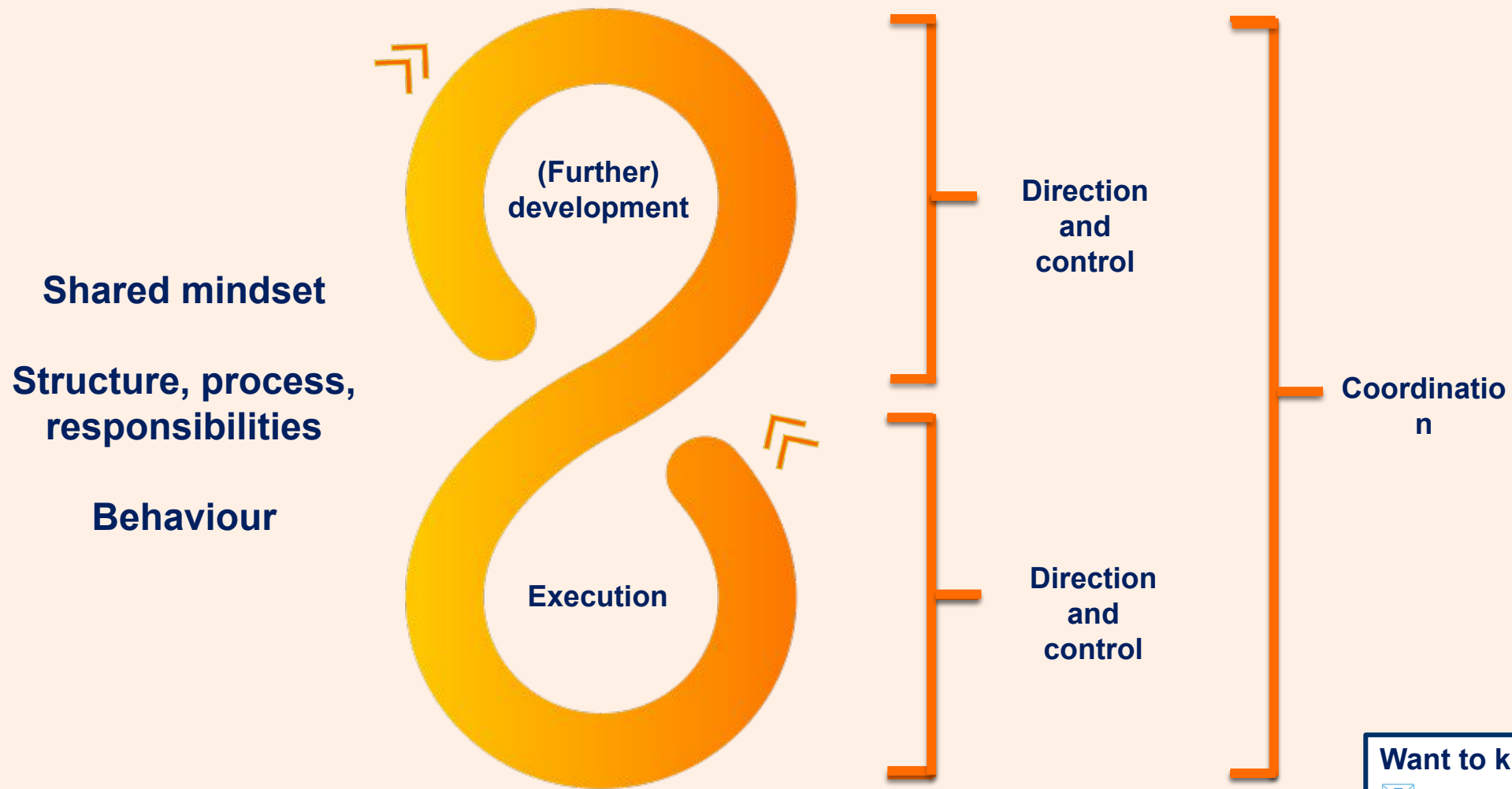
“Advice”
Strengthen the role of patients
within the nursing council



Empower
nurse–patient
partnerships (e.g.,
award system)



Enhance benchmarking in
PatientExperienceMonitor



Want to know more?

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[Vakgroep Verpleegkunde MUMC+](#)