

EVERYONE DESERVES A CRITICAL FRIEND

So do you



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QUALITY OF MENTAL HEALTHCARE

- Background
- What is quality?
- The holy grail
- 3 dimensions of quality in healthcare
 - Versatile
 - Layered
 - Relational

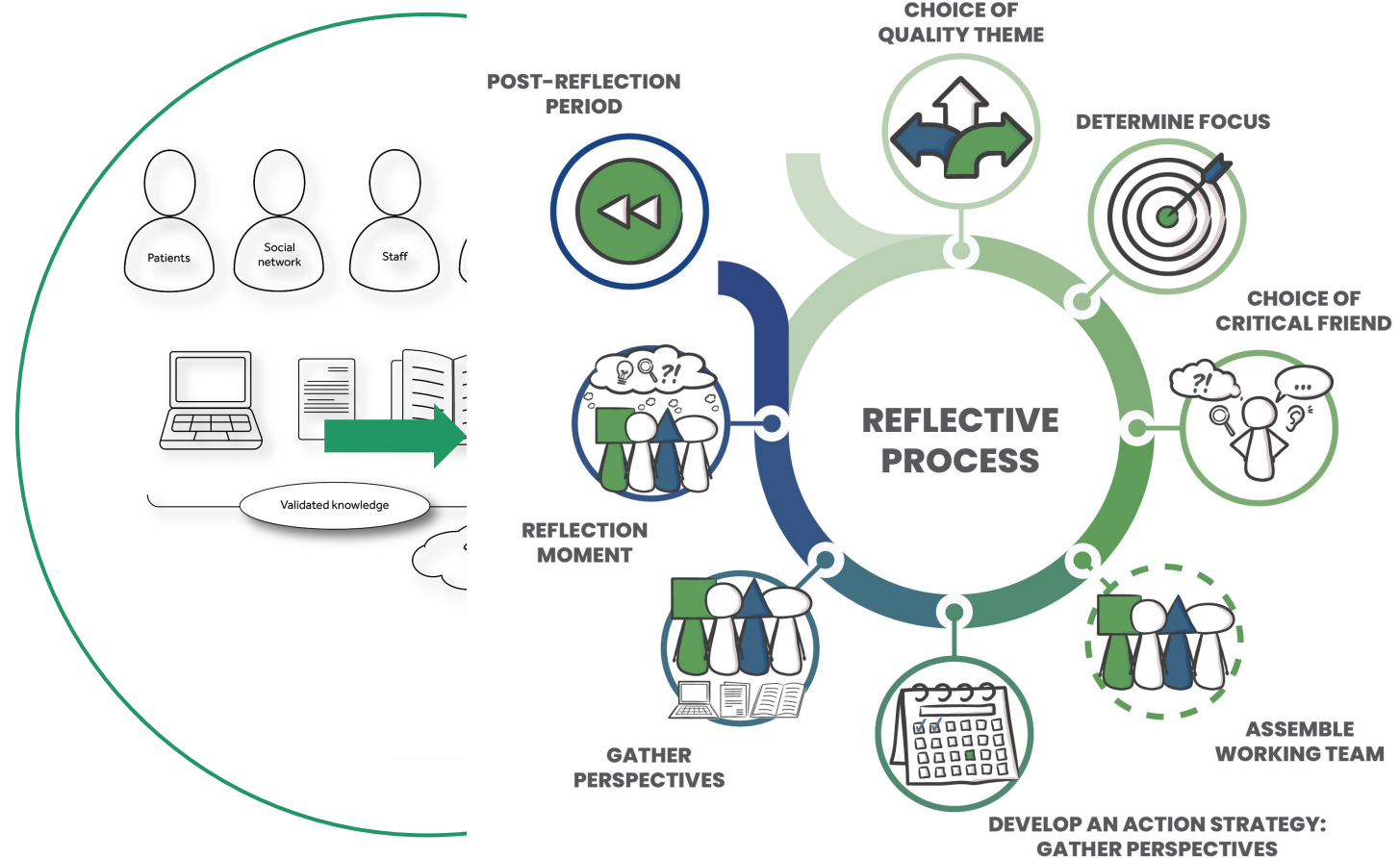
QUALITY OF MENTAL HEALTHCARE

- A careful and reflexive approach to a complex concept
- A reflective process based on experience and standards within context:
 - Are we doing things right?
 - Are we doing the right things?
 - How do we show quality to others?
- The critical friend

Up next: Selection of 2 examples, characteristics and evaluation of the critical friend.

CRITICAL FRIEND ON A MESO-LEVEL

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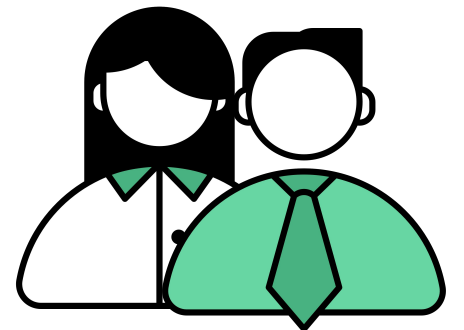


CRITICAL FRIENDS

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What does a critical friend do?

- Asks constructively critical questions and point out blind spots
- Questions may relate to the process flow, subject matter, team dynamics, department's culture...
- Level of involvement defined by the exchange between critical friend and department
 - Expectations
 - Feasibility
- Is involved at the beginning of the process ↔ joins during the reflection moment

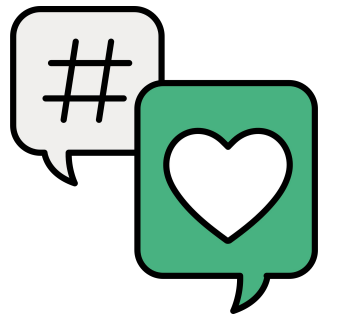


CRITICAL FRIENDS

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Profile of a critical friend

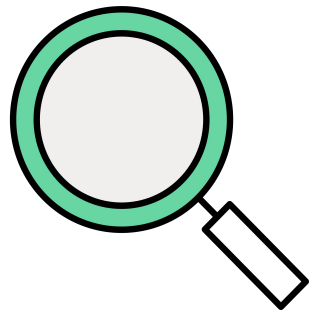
- Can not be part of the department!
- Friend
 - Trusted by the primary actors of the department
 - Close enough to be involved and to understand
- Critical
 - Enough distance
 - Knows how to give feedback: appreciative inquiry
- Can be one or many
- As in any proper friendship: you give and you receive



CRITICAL FRIENDS

Peer review

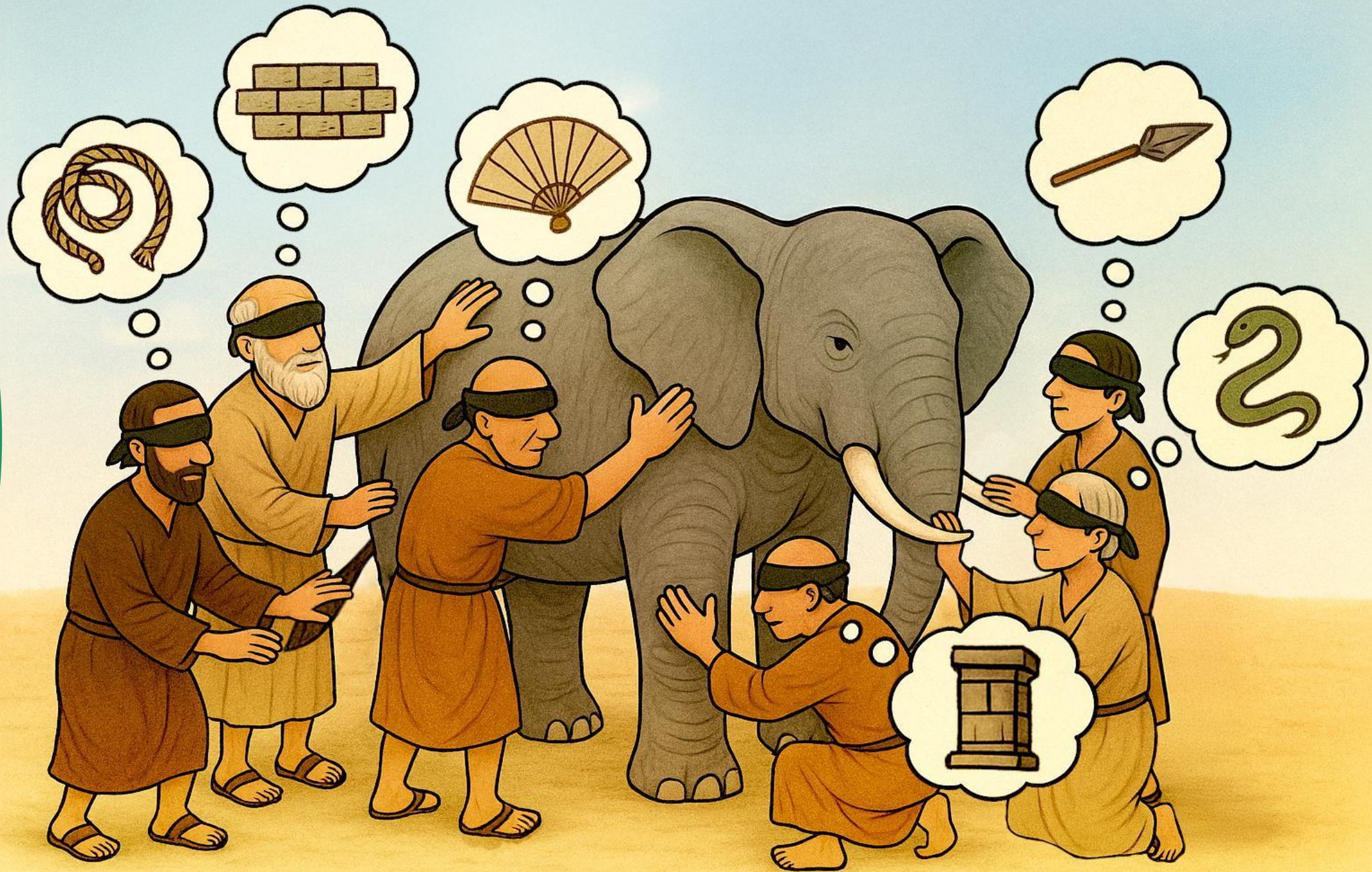
- Central question: how mature is our organisation?
 - Focus on quality: structure, culture, process
 - Full transparency
 - A selection of professionals with an invitation to get involved and a mandate to be critically constructive
- Programme
 - Reading assignment: Who does the organization want to be? Why? How?
 - Several conversations with a variety of people: what's the real story?
 - Reflection: what we read and heard. What we did not hear. Where do we see potential for further development?



Working with critical friends is

valuable because...	challenging because...
it challenges the department to reflect	information about the organization's quality policy and expectations need to be clear
it provides insight into the operations or a theme from a different perspective	the levels of involvement are not always aligned
its value is amplified when duos are formed	it raises questions about their profile
it strengthens collaboration in the department	space and mandate need to be given by the department
it strengthens collaboration with other departments or organizations	it requires mechanisms to implement changes
it fosters professional development	

Elephant in the room



Two questions for reflection

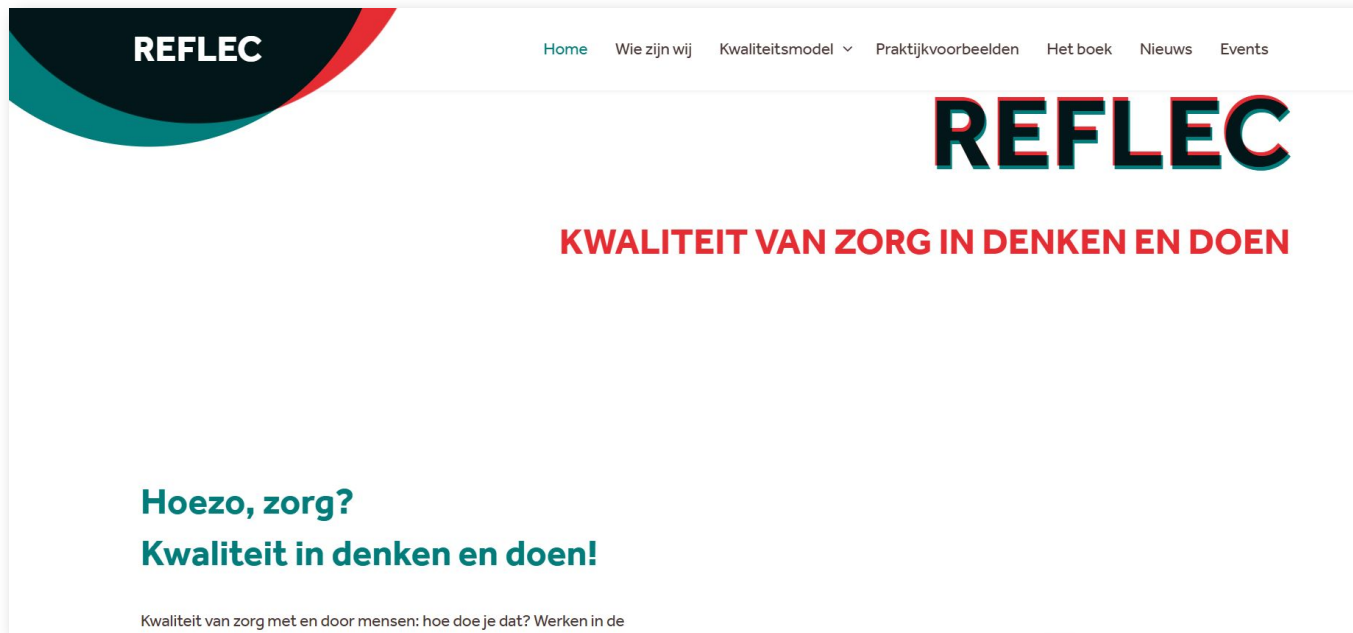
1. **It takes time:** to organize, to create trust, to build a reflexive process
2. **You deserve** a critical friend

1. Who would you invite as a critical friend for your own work?
2. Who's critical friend can you be?

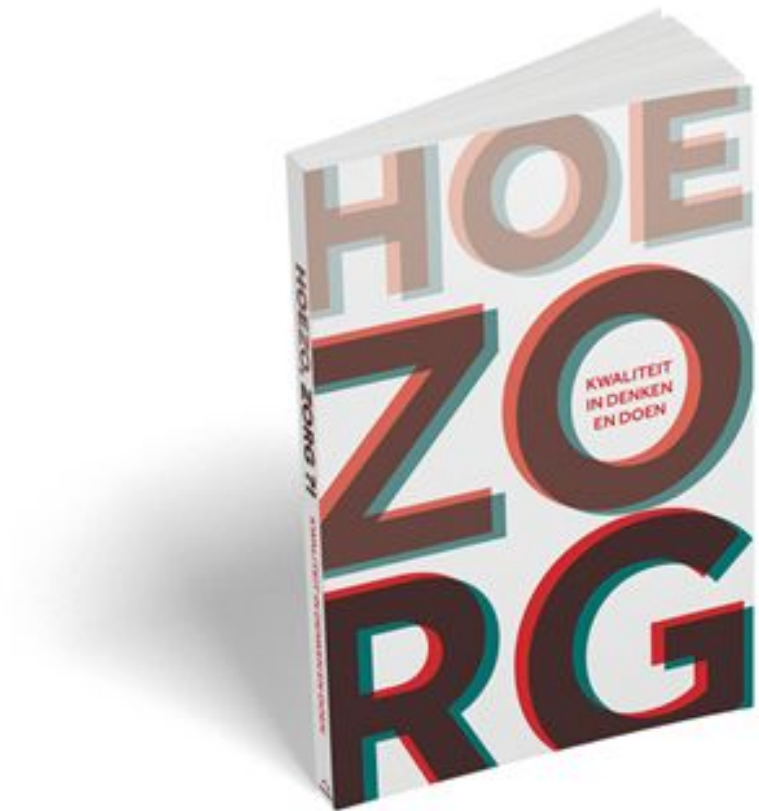


Takehome messages

Reflec



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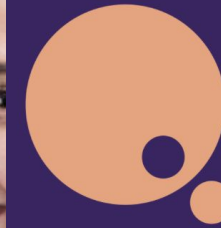


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International Forum on
QUALITY & SAFETY
in **HEALTHCARE**
UTRECHT

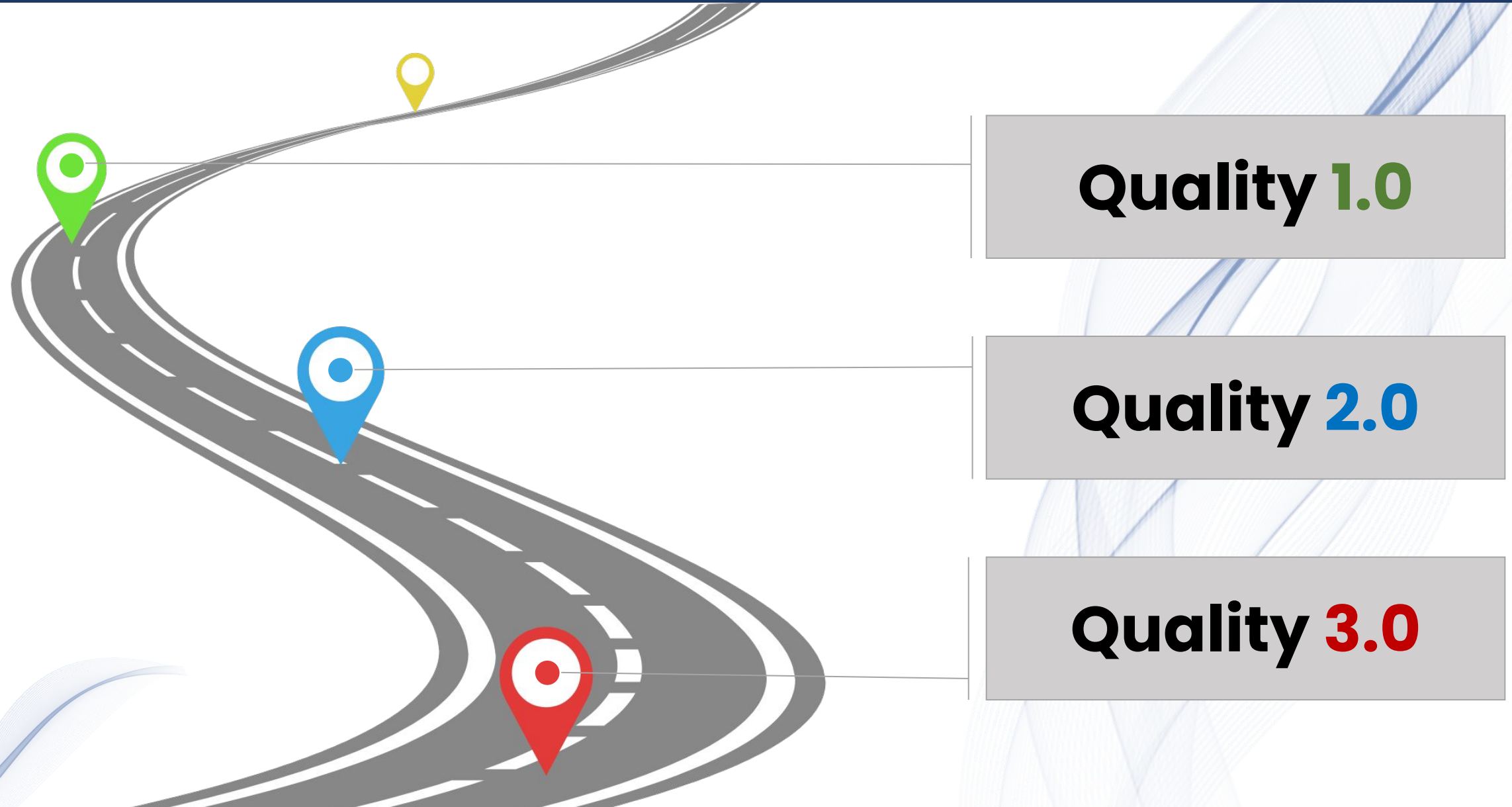
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Towards co-produced healthcare: Connecting the multidimensional model with practical insights

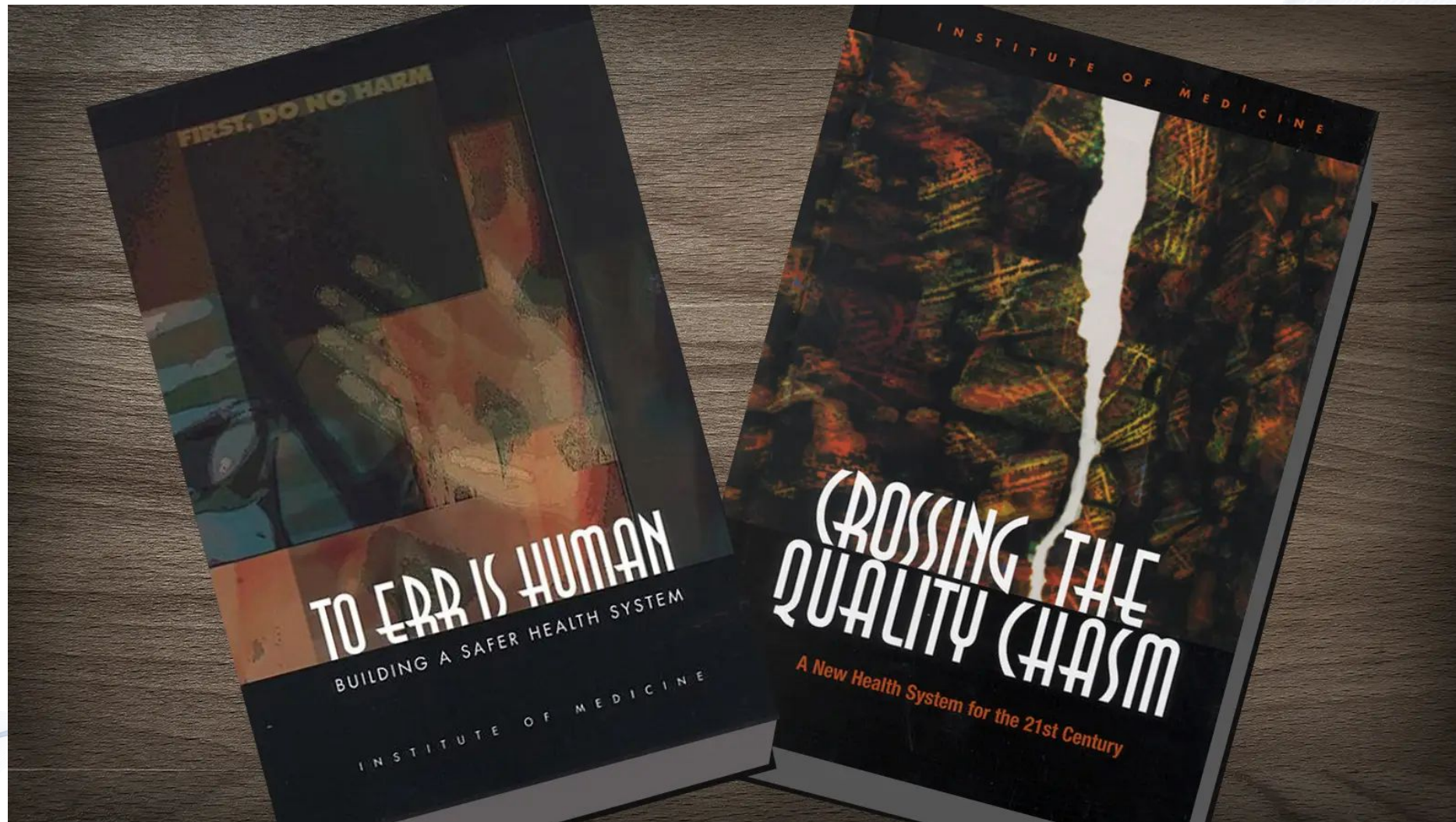
Peter Lachman Anette Nilsson

D 5 Lived experience as the foundation for change

The quality journey



The start of the modern era in quality



IOM Domains of Quality

Person Centred

Safe

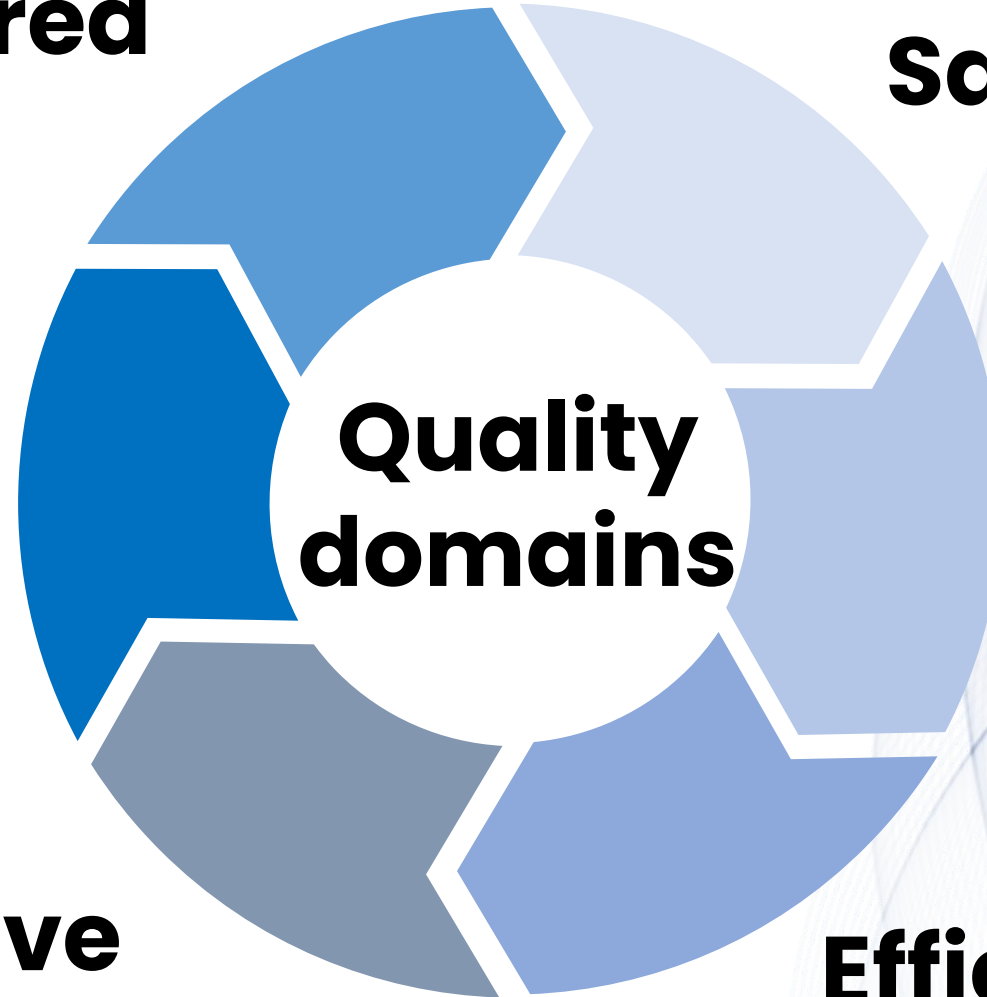
Equitable

**Quality
domains**

Timely

Effective

Efficient



Establish thresholds

- Standards
- Evaluation
- Certification
- Guidelines



External Evaluation
Organisations



Improving processes of healthcare

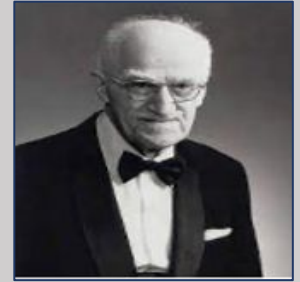
- **System theory**
- **Reliability**
- **Process control**
- **Manage variation**
- **Performance management**



Shewhart



Deming



Juran



Ishikawa



Taguchi



Shingo



Crosby

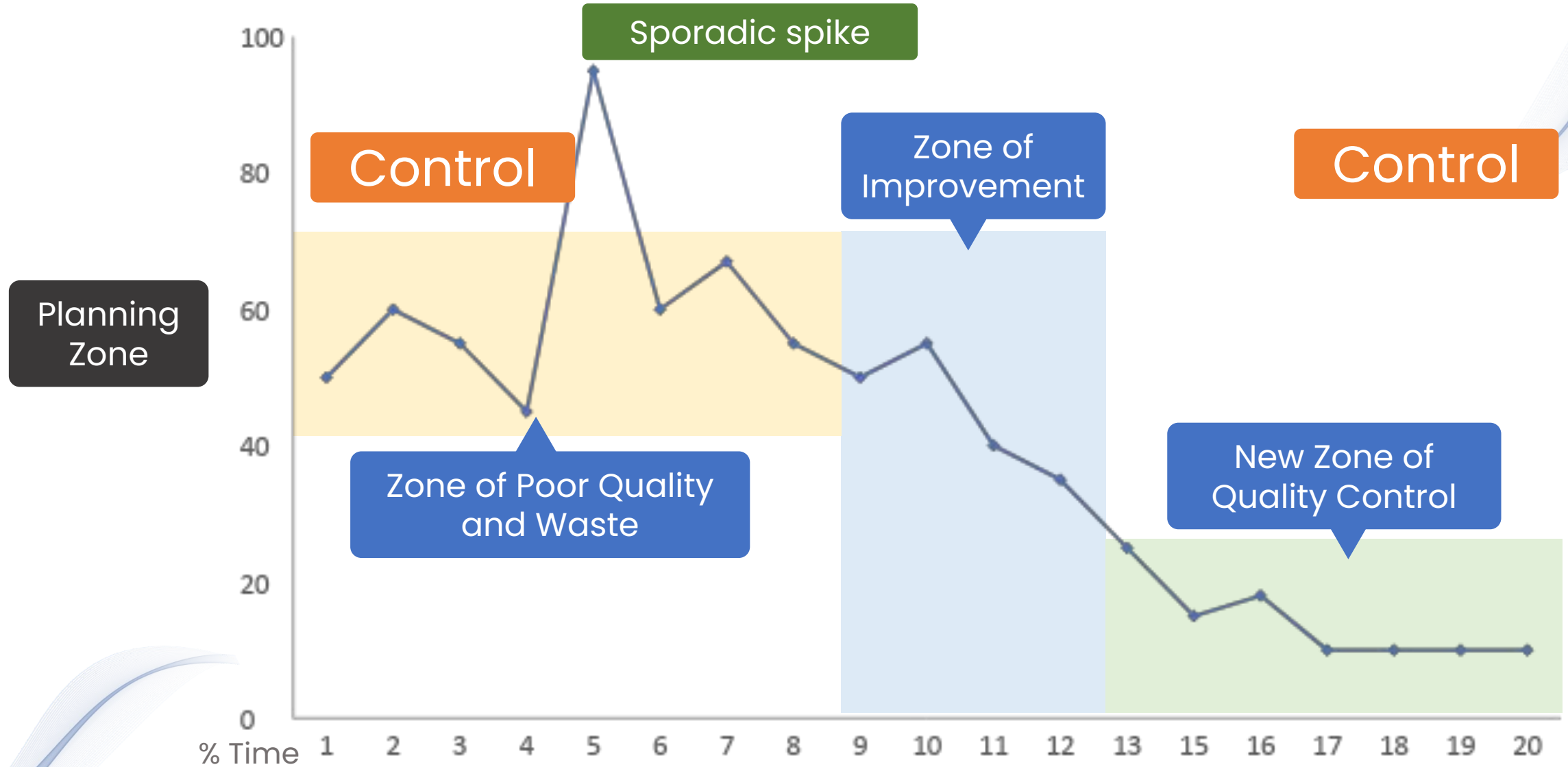


Feigenbaum



Schonberger

Juran Trilogy



Systems thinking – Deming

Systems

Understand the system within which you work and how it interacts with other systems.

Systems

Variation

Variation

Study the variation in the processes that make up the system – how work is done.

Profound Knowledge

Knowledge

Have a theory and method of change to improve the outcome of the system.

Knowledge

Psychology

Psychology

Evaluate the beliefs and attitudes of the people in the system as they cause the variation.

Coproduction of health

- Ownership of health
- Kinship
- Integration
- Value creating architecture



Batalden



Andersson Gäre



Nelson



Foster

Coproduction

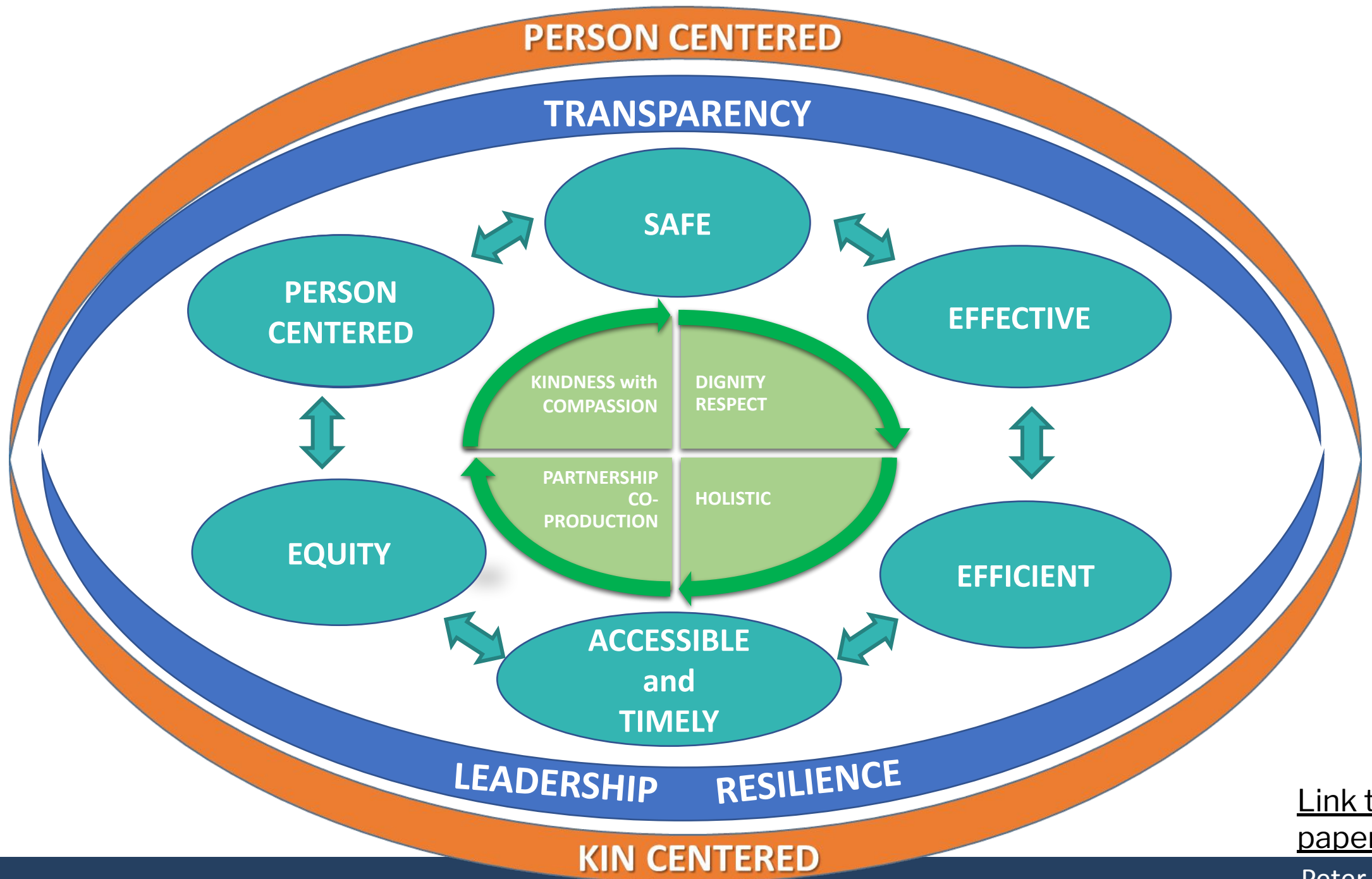
Coproduction is the interdependent work of users and professionals to design, create, develop, deliver, assess and improve the relationships and actions that contribute to the health of individuals and populations

Batalden et al

To achieve Quality 3.0 a redefinition of the domains of quality is required



The multidimensional model



[Link to paper](#)

Peter Lachman

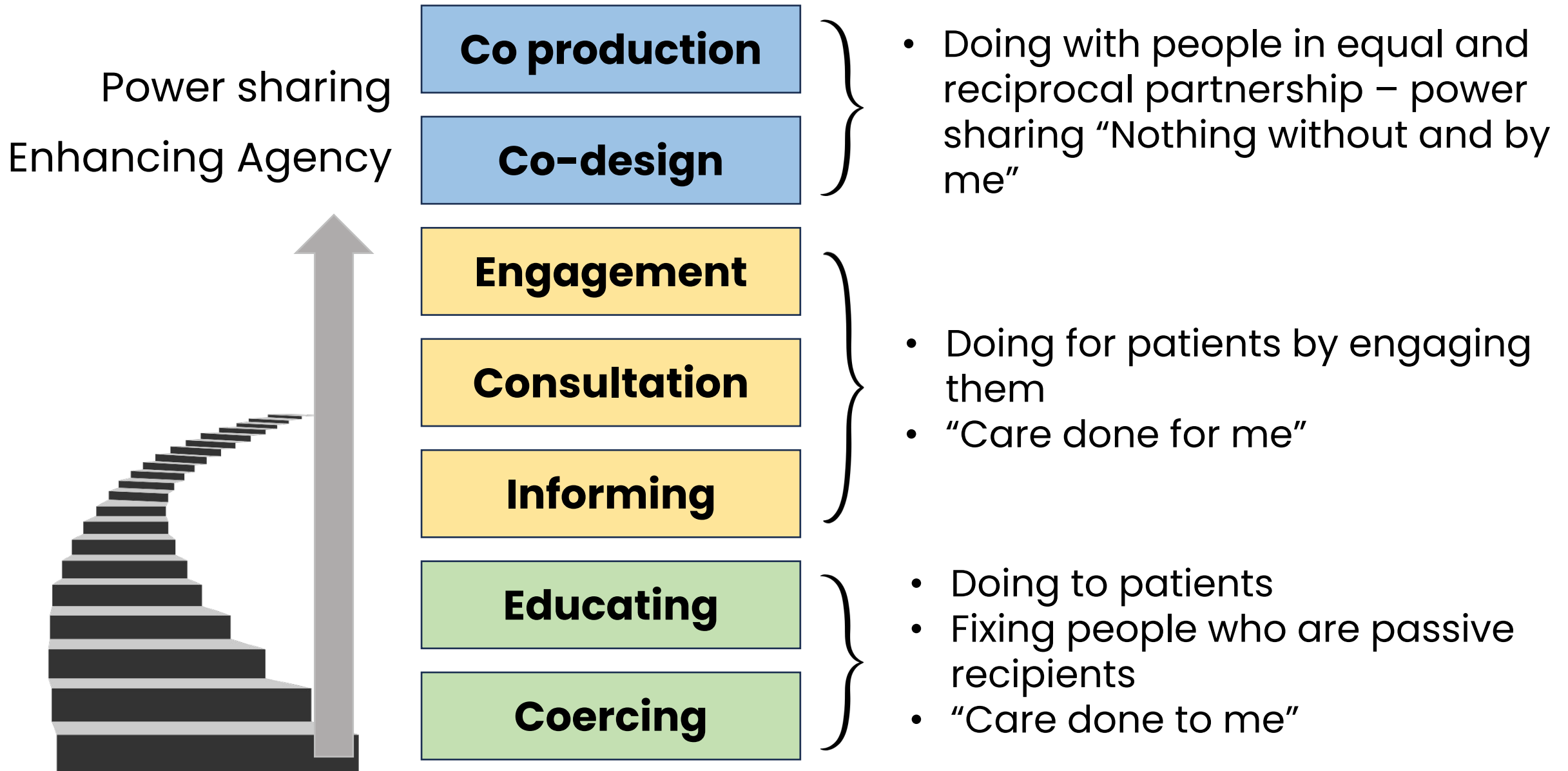
We still need standards and certification to the standards

We still need improvement methodology

We need to focus on new areas

We need to coproduce solutions

The Coproduction ladder to lived experience

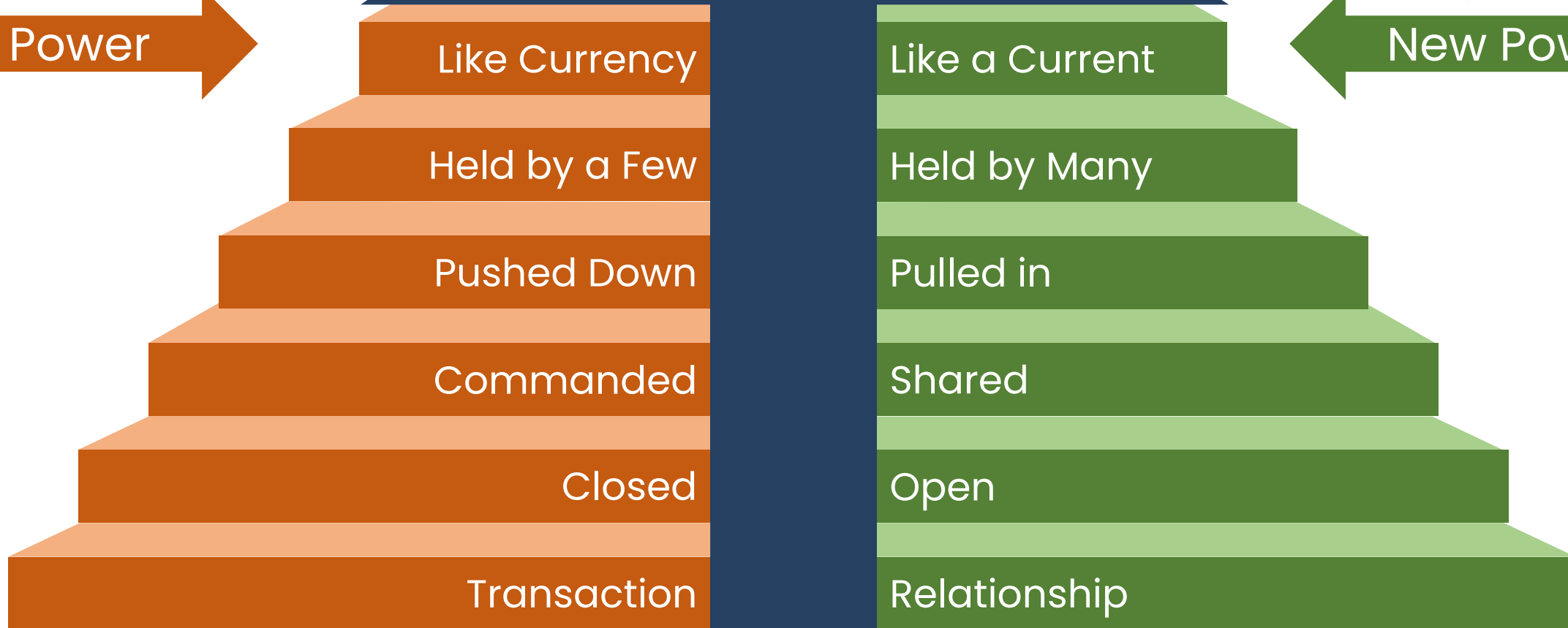




Old Power



New Power



School for change agents

Shared decision making for safety

Example for maternal care

Co-Assess together

A person to person assessment of the process to be followed taking into account of the mother's preferences as an equal partner

Co-deliver together

Ensuring that there is an equal partnership in the delivery of care taking into account the cultural context and issues of equity and power



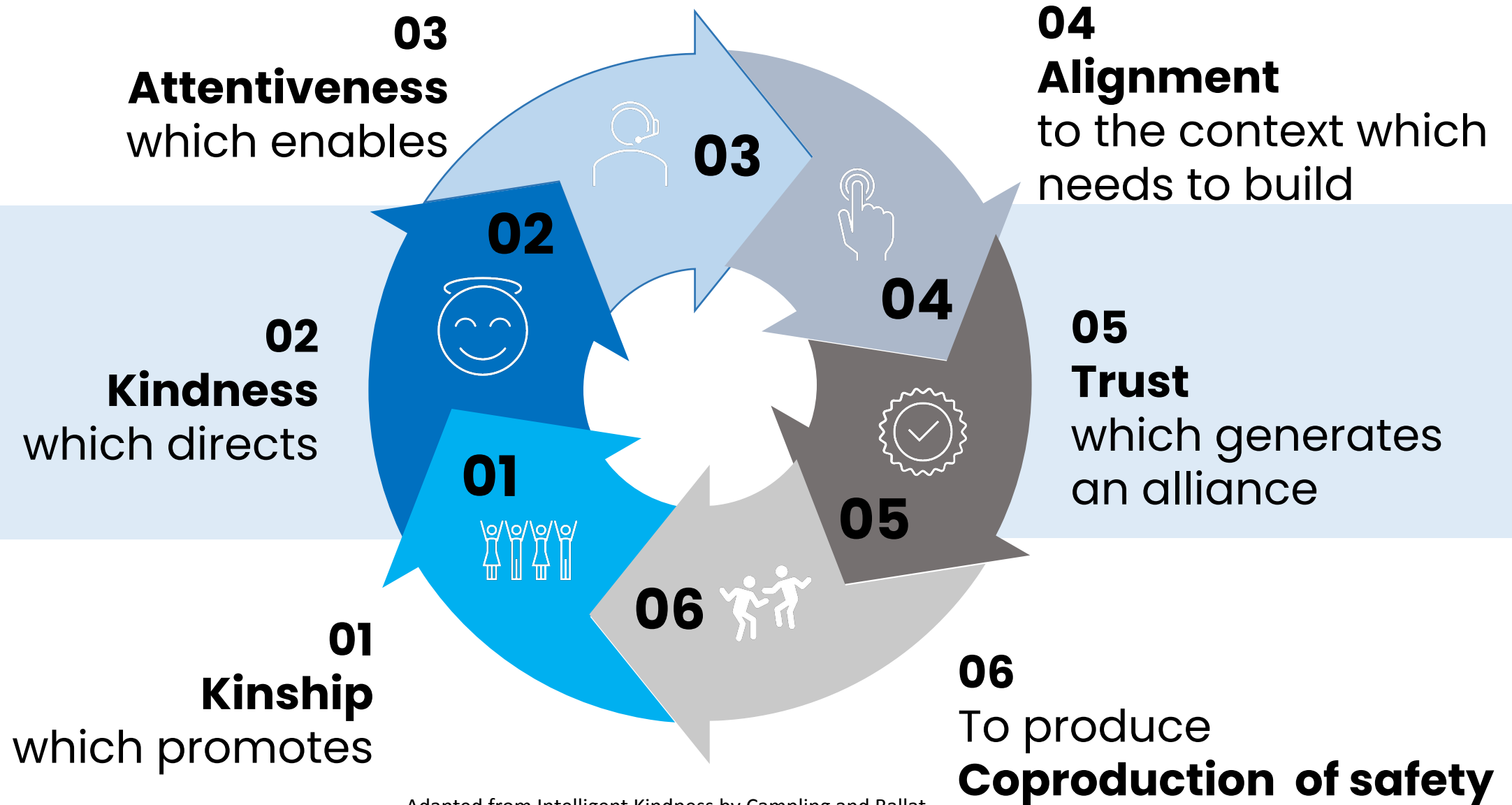
Co-decide together

Co- decide on options available and based on the preferences make a plan for the pregnancy, ante natal care, delivery and post natal care

Co-design together

Co-design the future interactions from start to end of the partnership for a mother focused experience

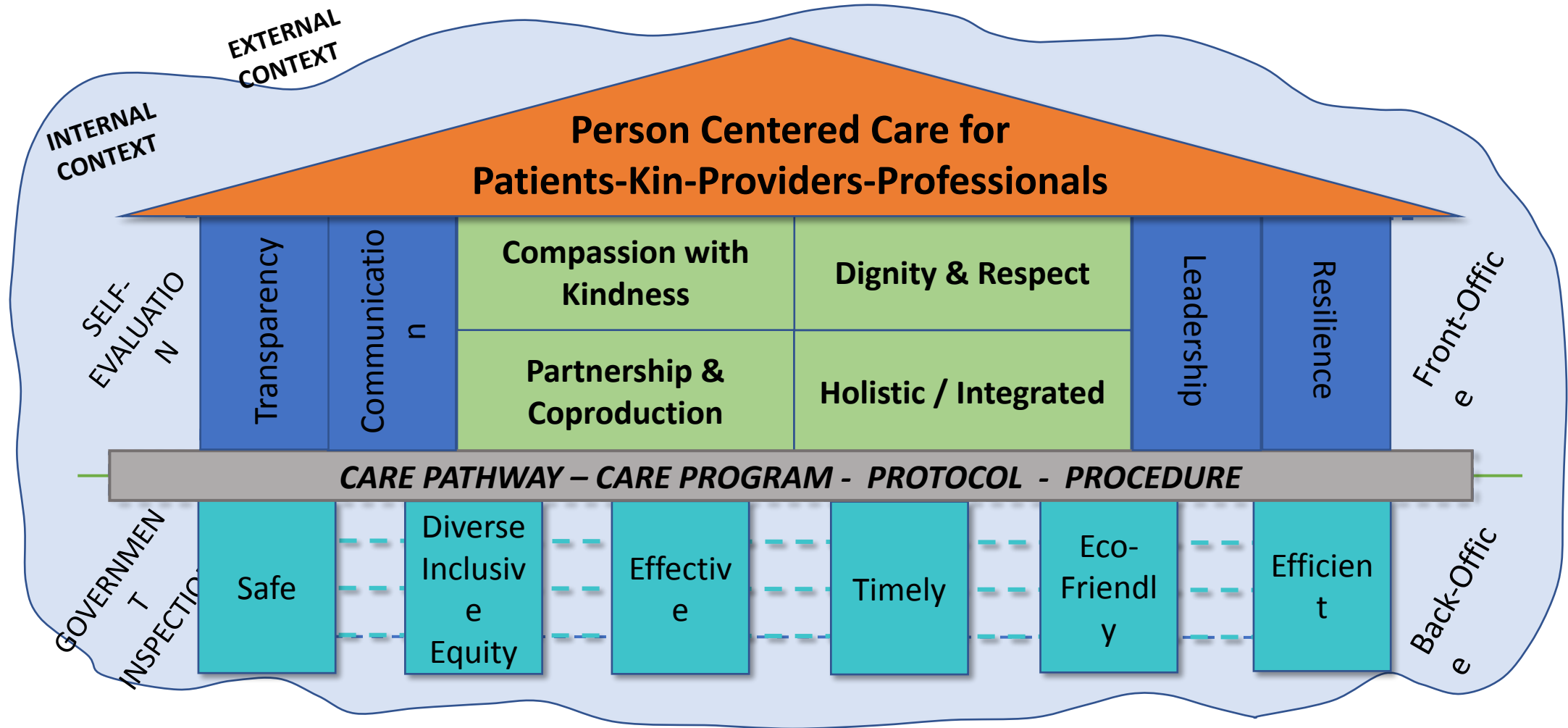
A Virtuous Circle for Intelligent Kindness



Bringing this all together



House of Trust for lived experience of quality



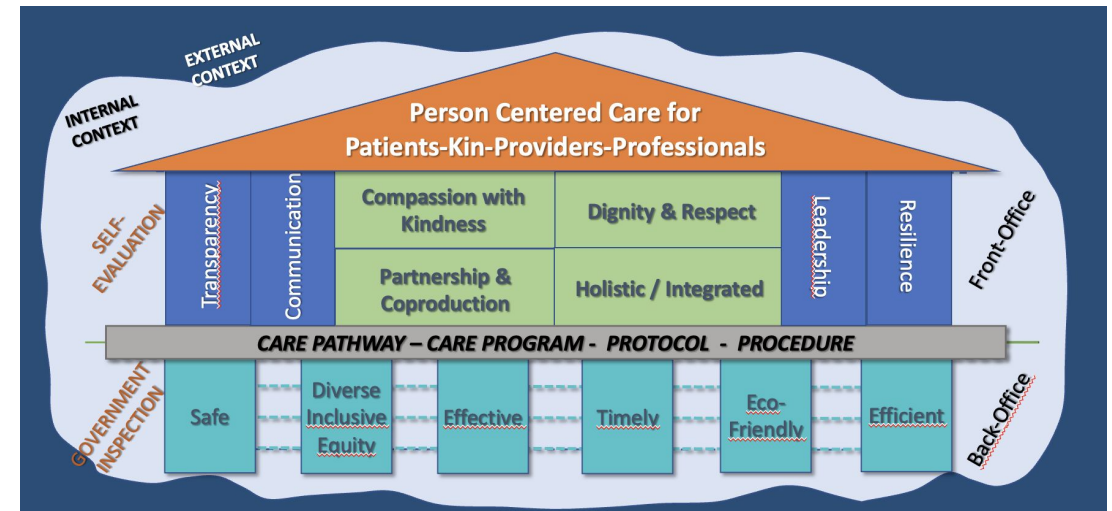
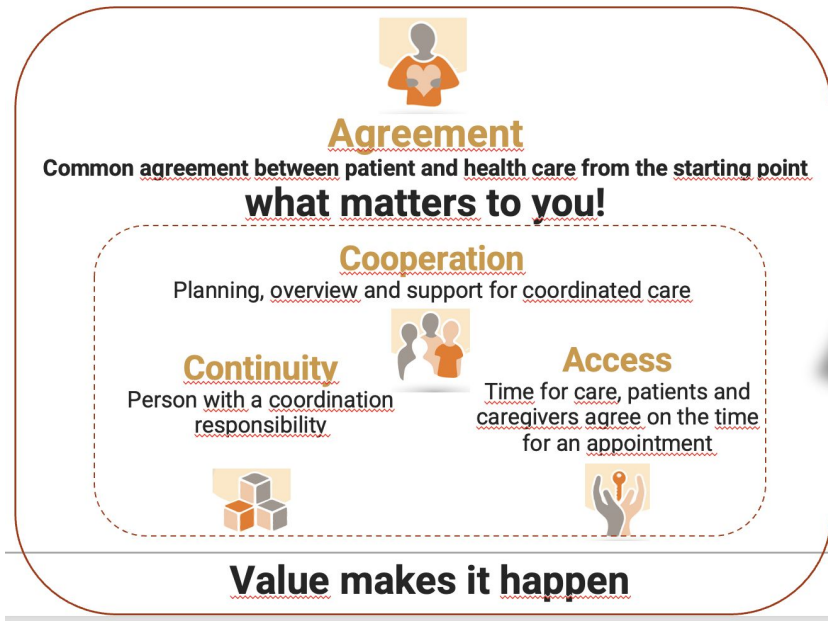
Vanhaecht, K., Lachman, P., Van der Auwera, C., Seys, D., Claessens, F., Panella, M., De Ridder, D. & FlaQuM Research Group.
The "House of Trust". A framework for quality healthcare and leadership. F1000 Research 2024, 13:503

[Link to paper](#)

A conversation with Anette



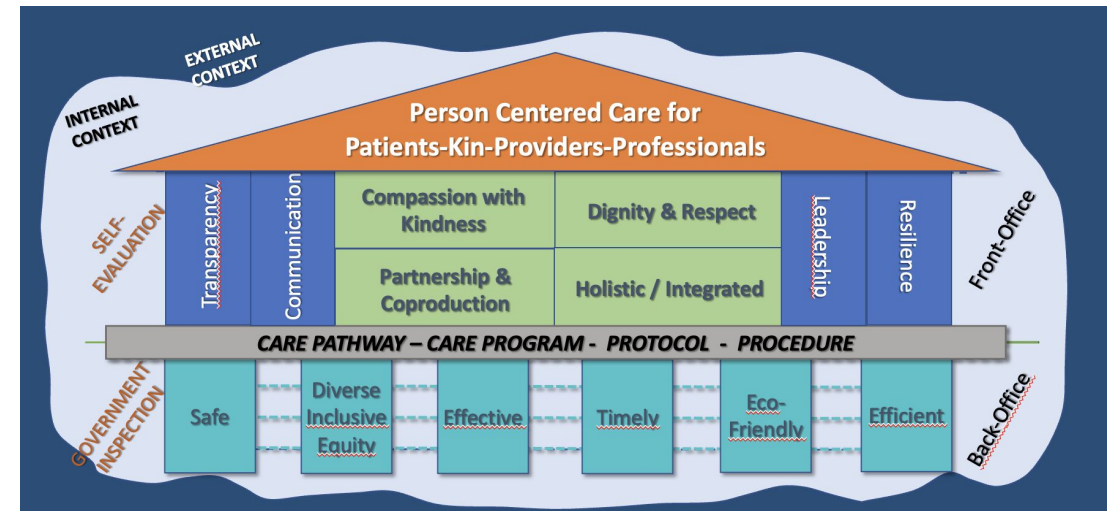
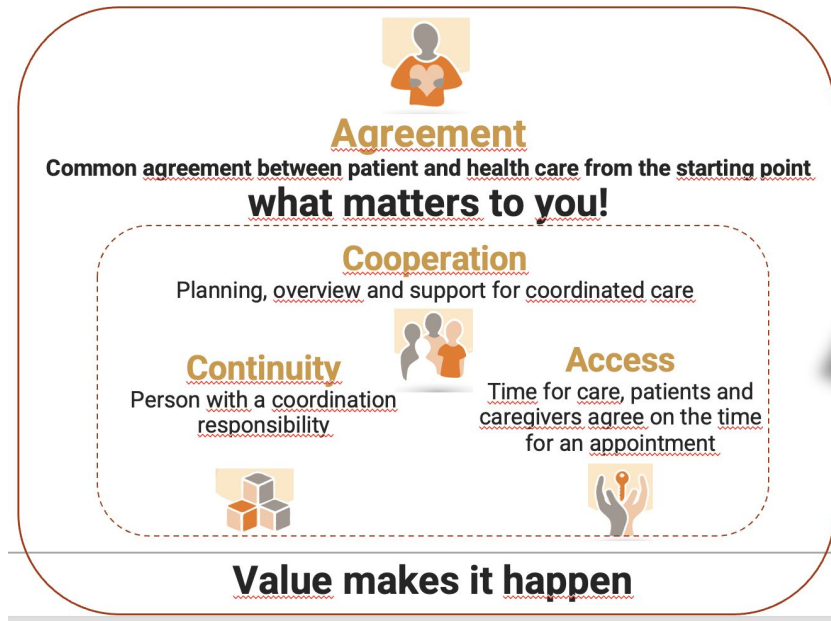
How does the multidimensional model fit in with the Patient Contract and how it has affected the lived experience of people?



A conversation with Anette

Stop the
music

How does the multidimensional model fit in with the Patient Contract and how it has affected the lived experience of people?



A conversation with Anette



How does the multidimensional model fit in with the Patient Contract and how it has affected the lived experience of people?



Agreement

Common agreement between patient and health care from the starting point
what matters to you!

Cooperation

Planning, overview and support for coordinated care



Continuity

Person with a coordination responsibility

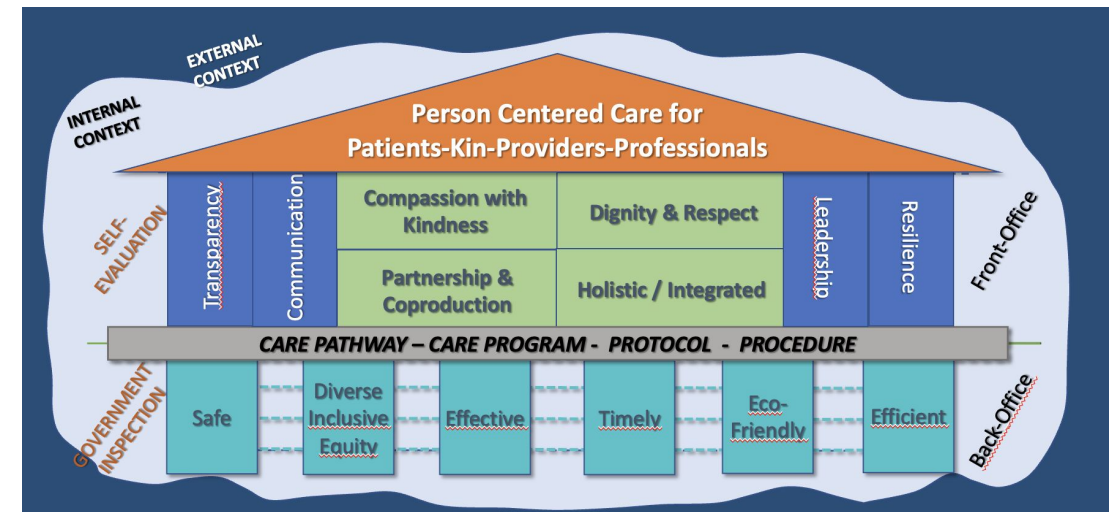


Access

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



Value makes it happen



A conversation with Anette



Can you give us some practical examples of how the model can be used with examples of lived experience?



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Value makes it happen



Thank You



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Kommuner
och Regioner

Peter Lachman and Anette Nilsson

Discussion



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