

C2: Experience based co-design



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



Adapting to a changing world: equity, sustainability
and wellbeing for all



 @QualityForum #Quality2023

 Institute for
Healthcare
Improvement

BMJ



Ask Us!

Participatory quality improvement
by clients, family members and
professionals together

*Roel van der Heijde MA,
Trainer Fear Reduction & Vulnerable Leadership
RoelRotterdam & Patient Experience Association NL*

Credits go to:

Heerings, Marjolijn, et al.

"Ask us! Adjusting experience-based codesign to be responsive to people with intellectual disabilities, serious mental illness or older persons receiving support with independent living." Health Expectations (2022).

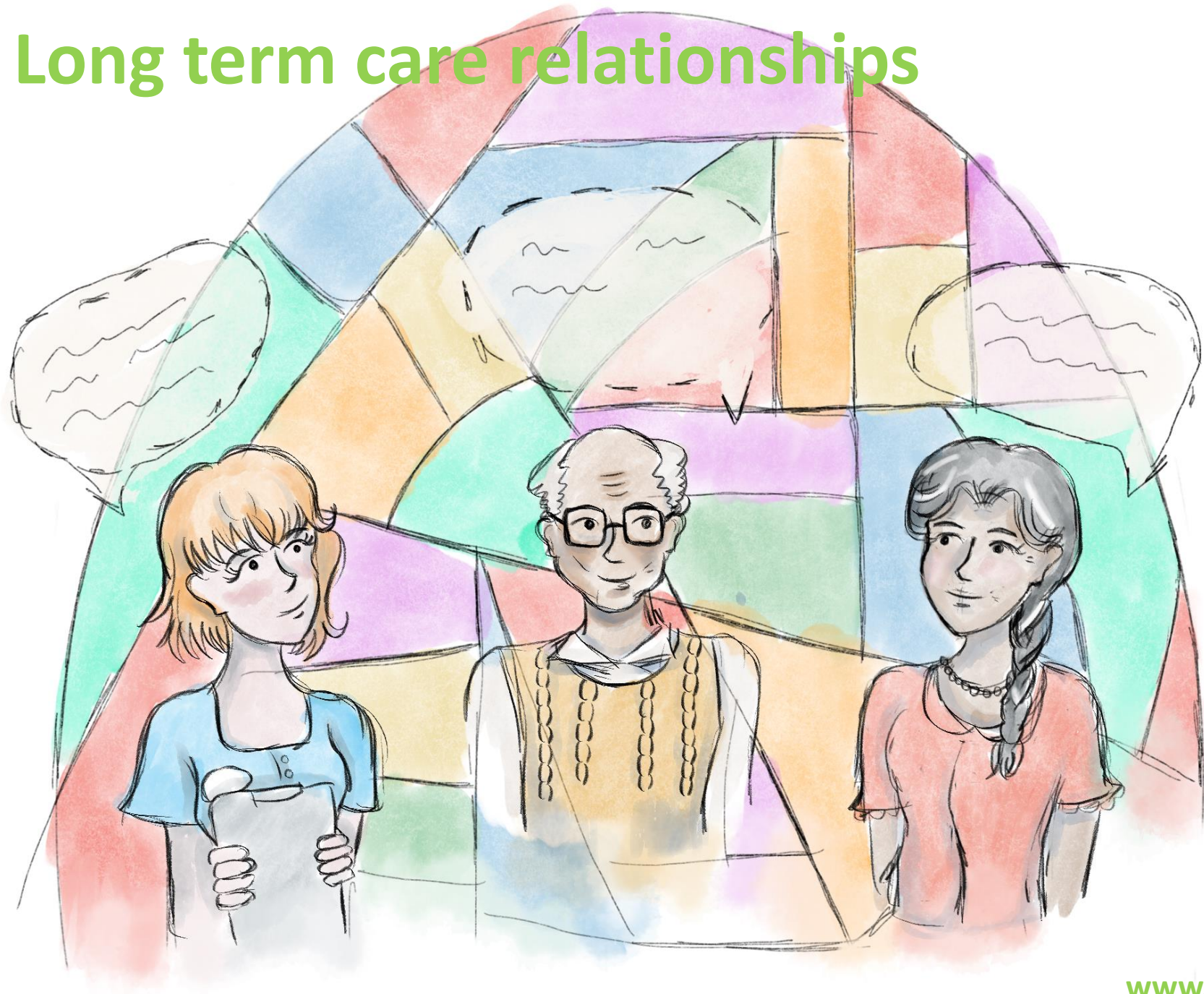


The experience experts

And.....

to all the participants who bravely shared their experiences.

Long term care relationships



'Ask us!' a Method for critical reflective co-design

- Adapting the *Experience based co-design* method for long term care
- Focus for now on people living with intellectual disabilities, serious mental illness or older persons receiving home care services or living in a nursing home.



Clients (15 films)



Healthcare Professionals (15 films)



Informal Caregivers / Family members (10 films)

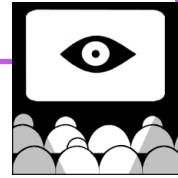
• Trigger films
**JE WORDT EEN ANDER
THEATER
BABEL
ROTTERDAM**



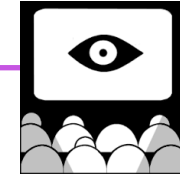
Ask us! Overview

1. Collecting experiences

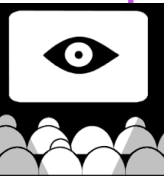
Group session
professionals



Group session
clients

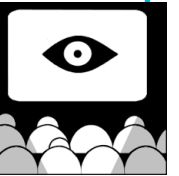


Group session
significant
others



2. Reflection on similarities and differences regarding improvement themes

Bringing clients, professionals and informal carers
together to share experiences



3. Developing care experiments

Co-design groups per theme of
professionals, clients & significant others

Celebration events



A human isn't made to be alone.

Group Sessions: Examples & What we learned

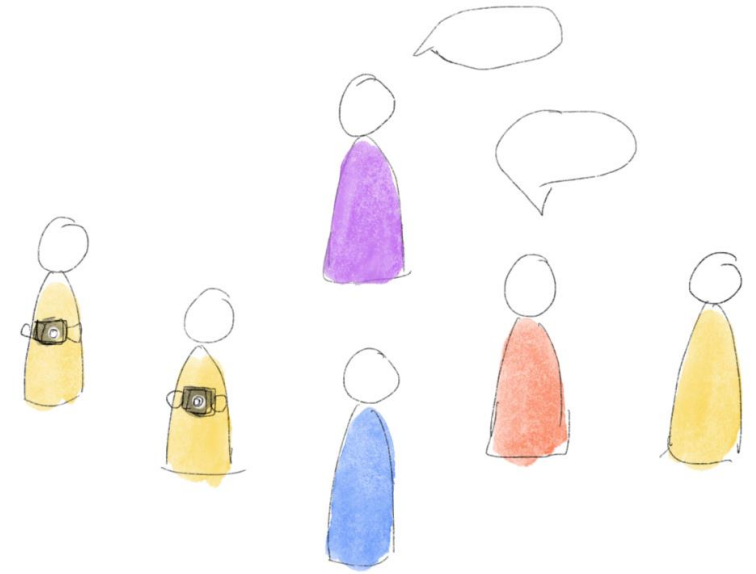
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Co –design Sessions:

Examples &

What we learned



Next steps:

- Implementation in 2 teams in 2 mental health organizations.
- Developing module for people living with Acquired Brain Injury.
- Further development of implementation and scaling strategy.
- And all your ideas and suggestions are much appreciated!





Ask Us!

Thank you so for your time and attention!
If you would like to receive an article with more info on this approach, please feel free to contact us on:

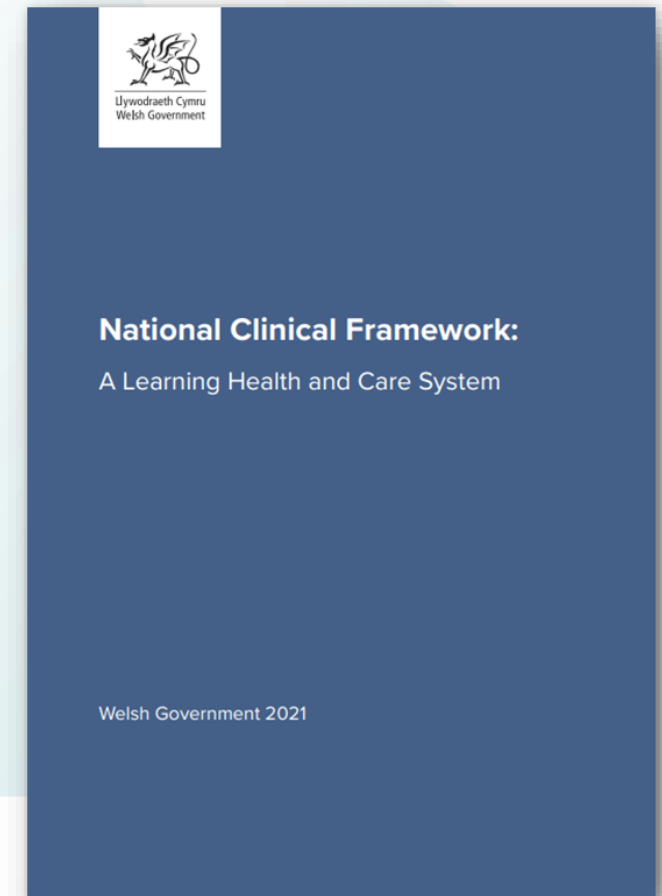
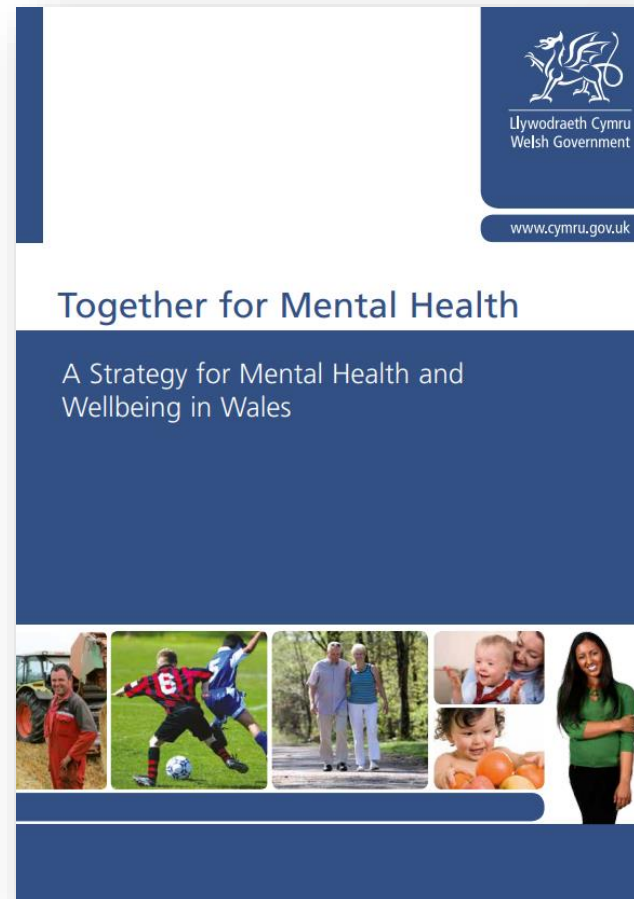
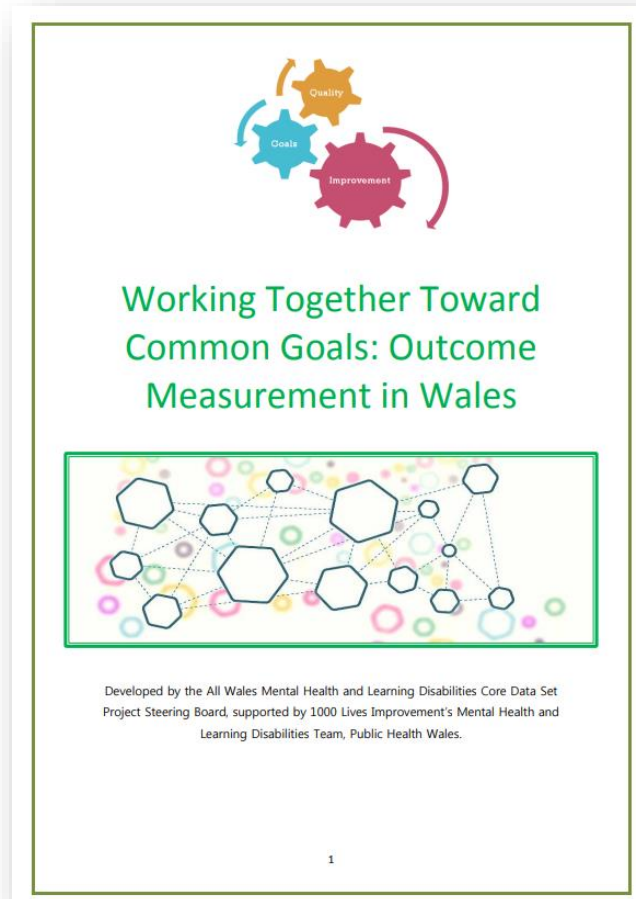
About the method:
Marjolijn Heerings
heerings@eshpm.eur.nl

About facilitating the sessions:
Roel van der Heijde
roel@roelrotterdam.nl

A Holistic Approach to Outcome Measures

The future of mental health services?

What's our project all about?



Our Ambition

All Mental Health Teams and Learning Disability teams in Wales to be using outcome measure tools routinely by March 2023

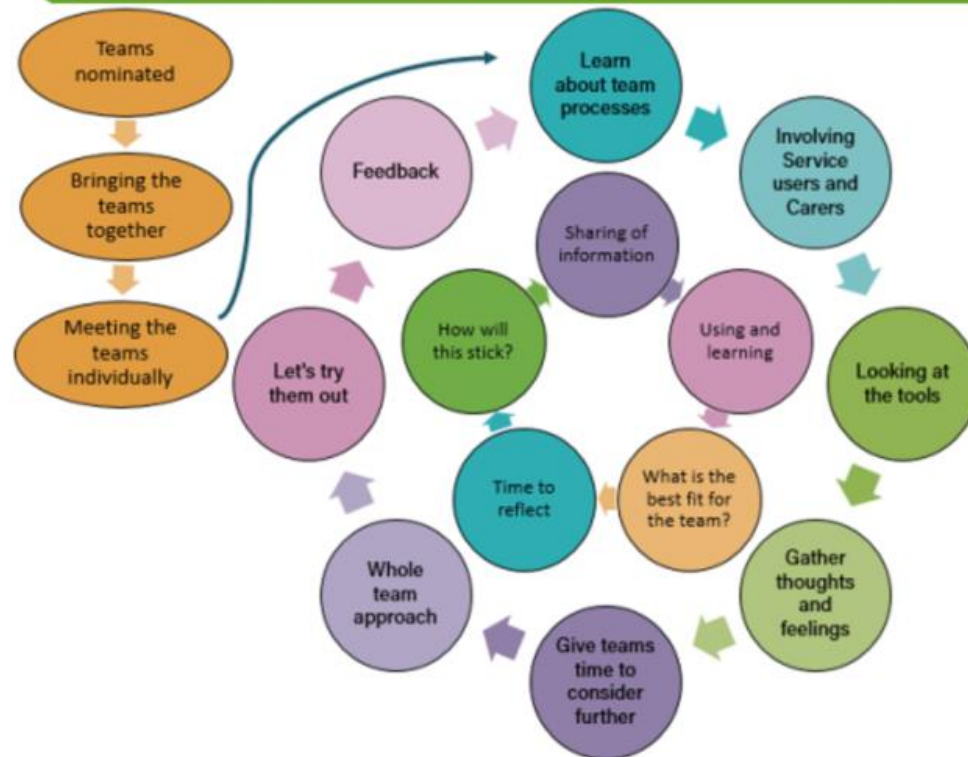
We had 3 years

- Year 1 – Working with Pilot sites
- Year 2 – Design the training
- Year 3 – Delivering the training and supporting implementation

EMBEDDING OUTCOME TOOLS IN DAY TO DAY PRACTICE

The Outcome Measurement in Wales project is part of the Welsh Government mental health core data set programme. It aims to embed outcome focused practice in all mental health and learning disability teams. It will facilitate service users, staff and teams to work effectively together to improve service user wellbeing, experience and attainment of goals.

A NEW APPROACH - 10 pilots sites / 7 health boards



KEY INGREDIENTS

Virtual network

Web resources

HB champions

Learning and training needs

DATA

Change questions

Faculty of experts

Readiness

Compassion

LESSONS LEARNED SO FAR

- ❖ Grab hearts and minds before anything else
- ❖ Make sure the whole team is involved, not just the managers
- ❖ Share learning

CONTACT INFORMATION

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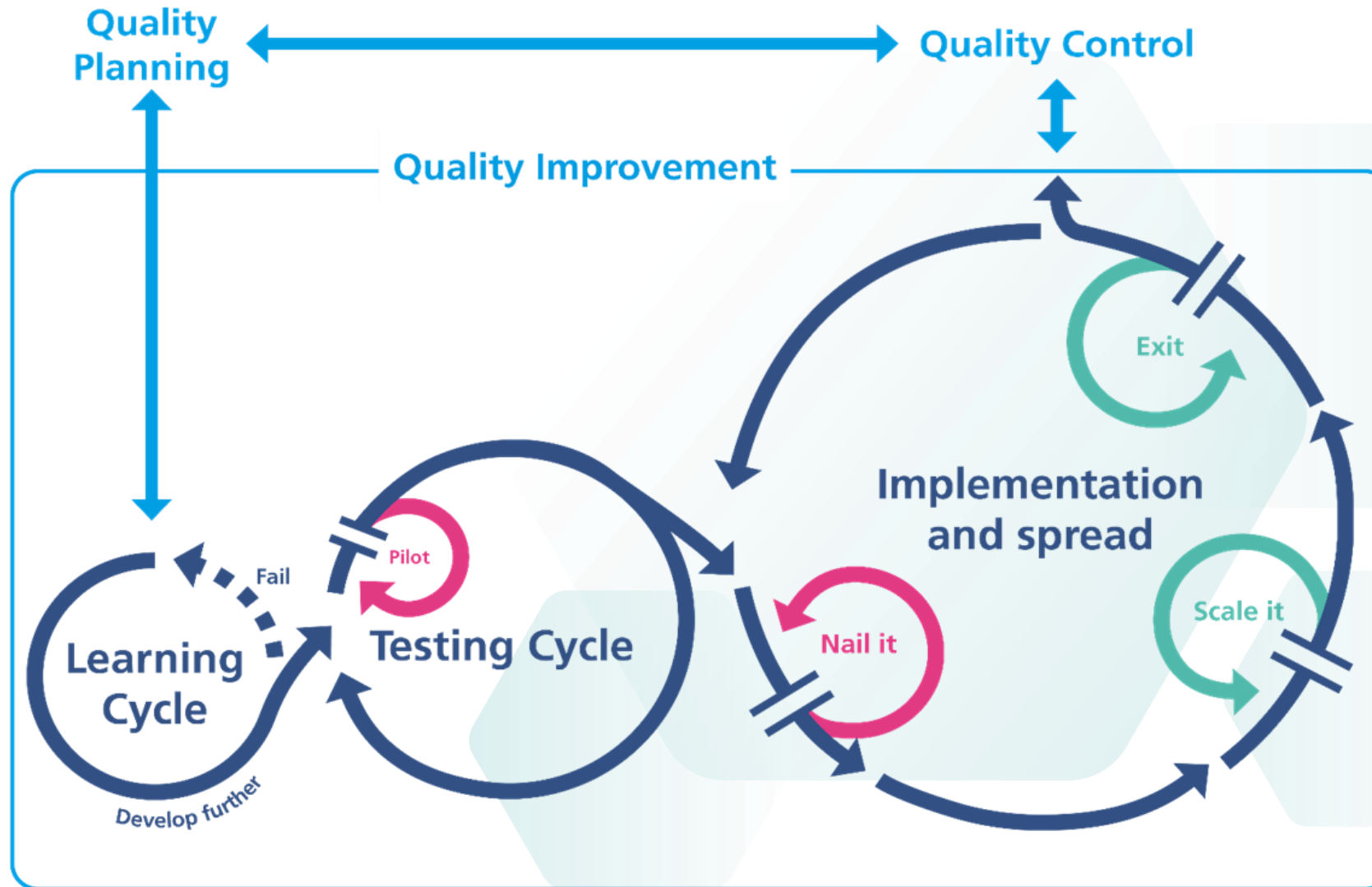
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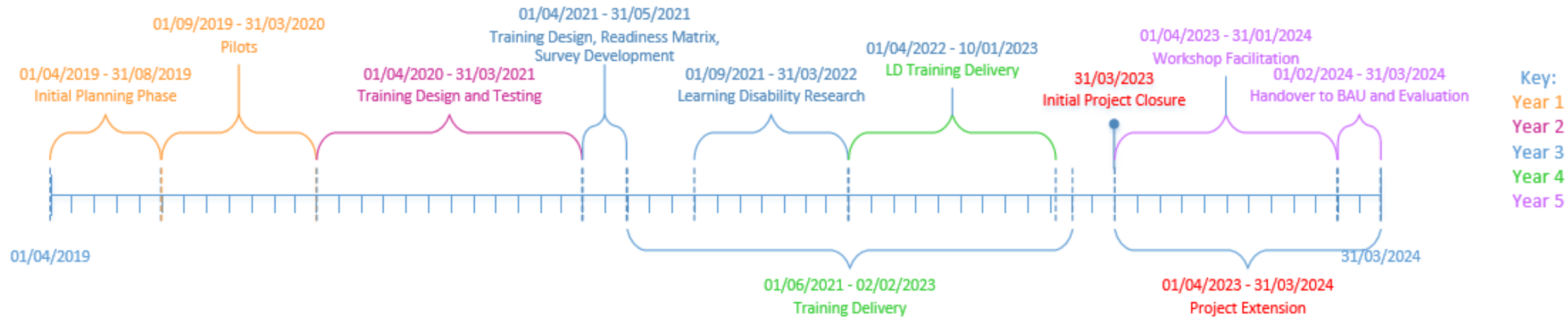
Andrea.Gray@wales.nhs.uk
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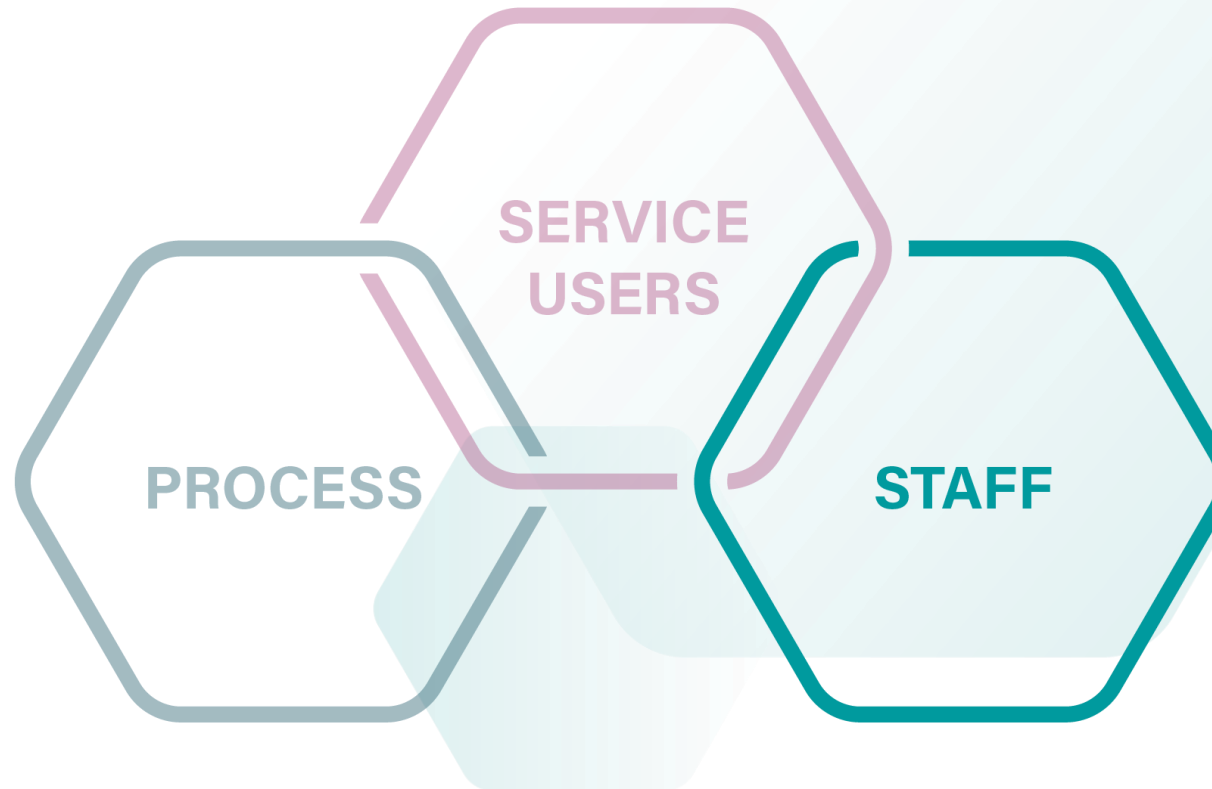
Version 01 | © 2023 Improvement Cymru



Timeline



Creating optimal conditions for change



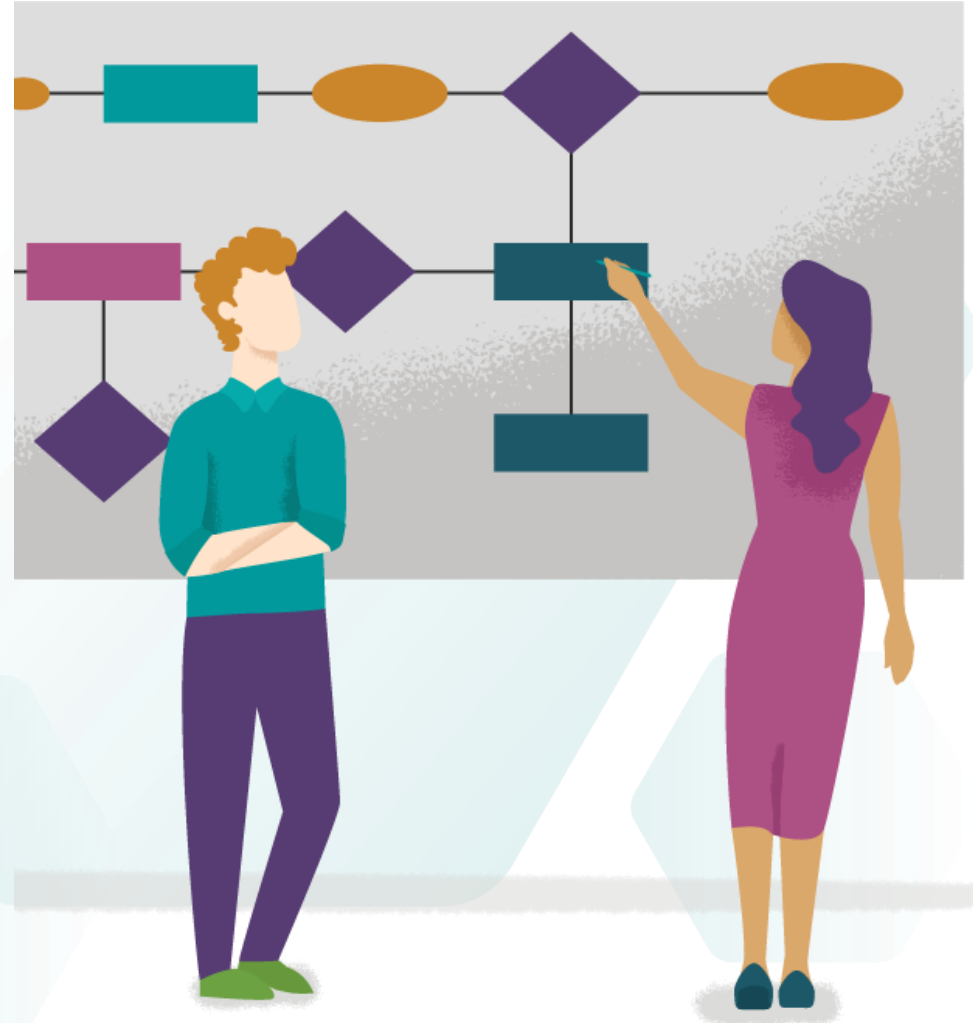
A common set of outcome tools for Wales



Data and Measurement for Improvement



What didn't go so well?



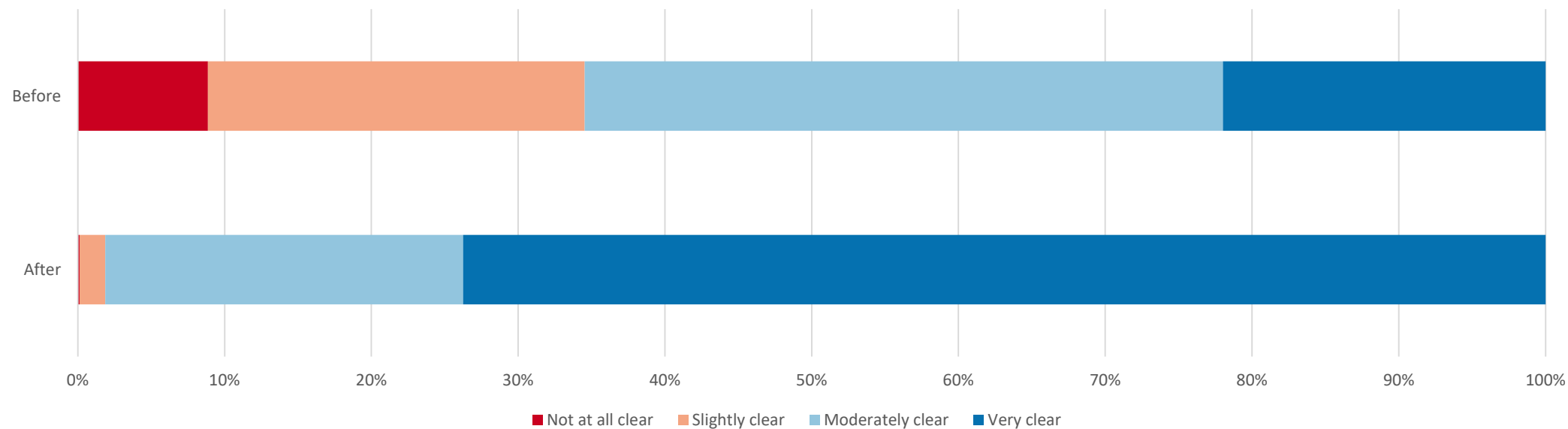


What could we do differently?



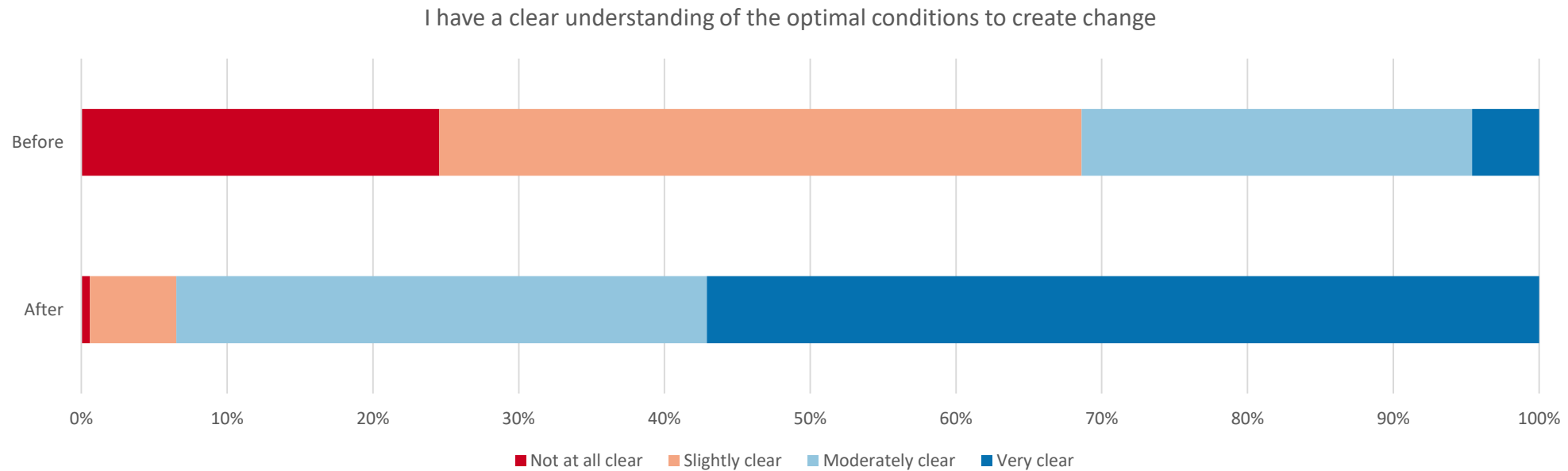
What did people say?

I have a clear understanding of the importance of using outcome measure tools within MH & LD teams



	Not at all clear	Slightly clear	Moderately clear	Very clear
Before	79	229	388	196
After	1	15	209	632

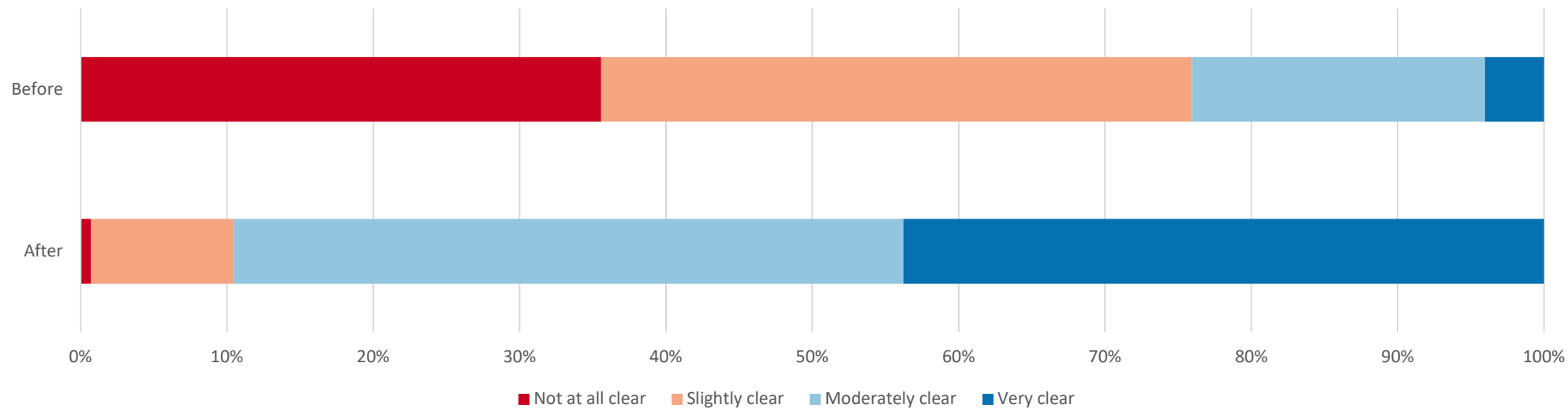
What did people say?



	Not at all clear	Slightly clear	Moderately clear	Very clear
Before	219	393	239	41
After	5	51	313	491

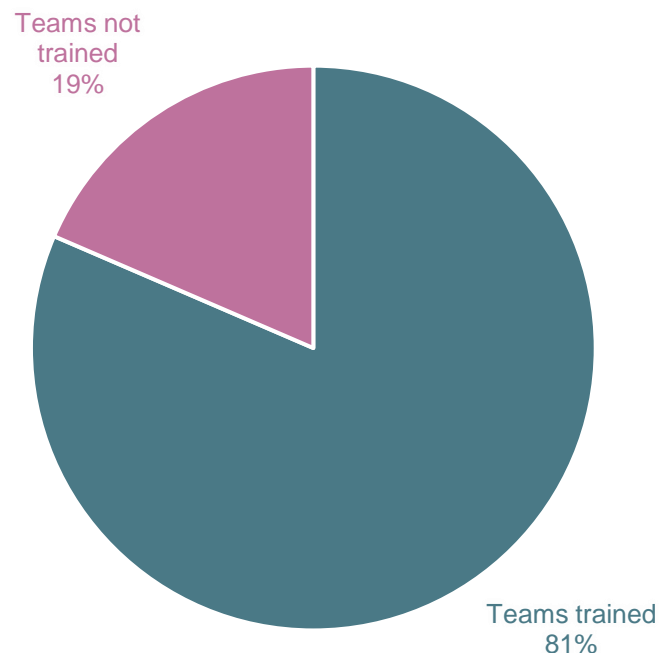
What did people say?

I have a clear understanding of how to introduce outcome measure tools to my team



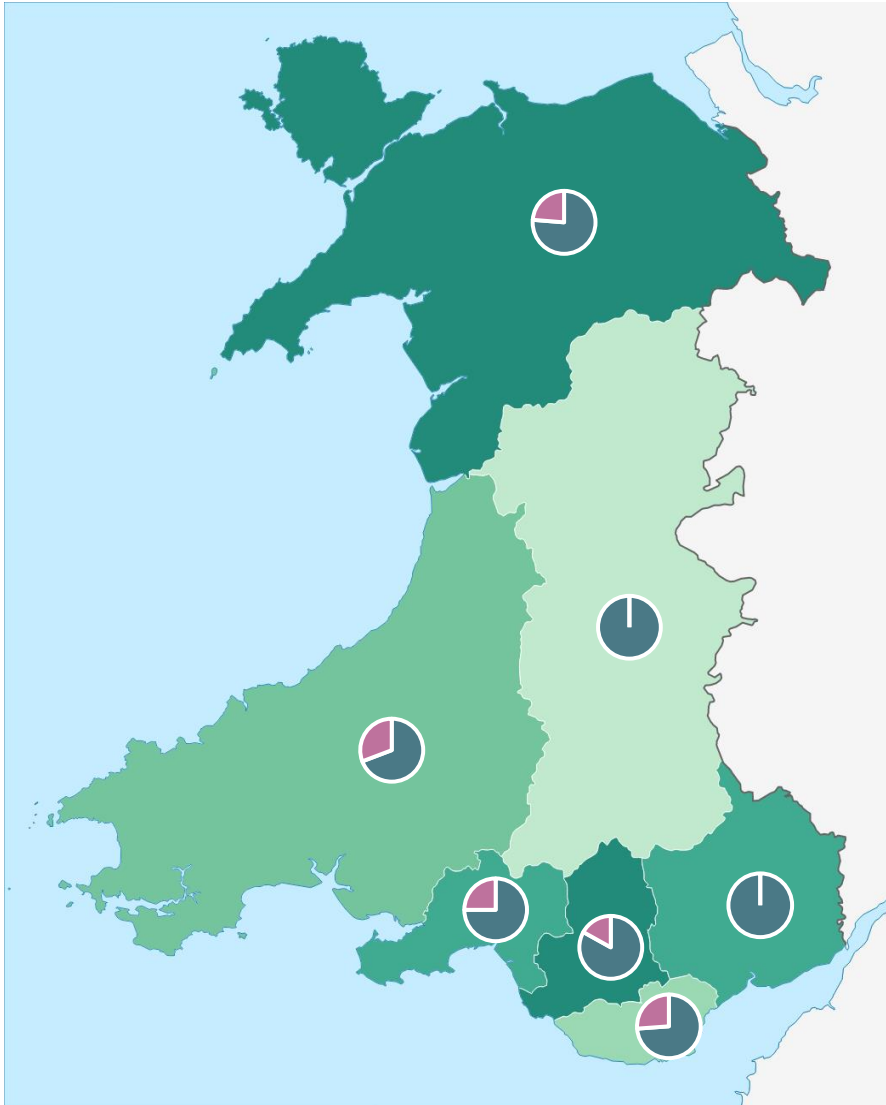
	Not at all clear	Slightly clear	Moderately clear	Very clear
Before	318	361	179	36
After	6	84	393	376

Wales



Created by Improvement Cymru

- Mental Health and Learning Disability (MHL) teams (both adult and children) were invited to participate
- There are 513 MHL teams within Wales
- Members from 418 (81%) of those teams had received the training



- NHS Wales is broken down into 7 health boards
- These 7 pie charts represent the total number of teams trained by each health board
- Proportion of teams trained are shown in teal on the pie charts
- 2 health boards had representatives trained from every team

Considerations

- Resources – small team, small budget
- Training – how would a small team deliver this
- Hard work and perseverance –competing priorities within Health Boards
- Resilience and persistence during a pandemic
- Project timescales – necessary extensions
- Novel approach - never done before,
- Challenge to create a definitive list of teams in Wales
- Regrouping and co-production in phase 5 implementation

Reflections - Intentions and Reality of Co-design and Co-production

Any Questions?