



# Co-designing a patient, family and whānau escalation of care process

## FACTSHEET FOR PATIENTS, FAMILY AND WHĀNAU (CONSUMERS)

### What is 'co-design'?

Co-design is an important process that engages consumers, whānau, staff and other stakeholders. It helps us gain insights into the experiences of delivering and receiving care, through learning about the emotional side of people's journey. Co-design is listening to people and designing the solutions with them rather than consulting on something that has already been designed without their input.

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Co-design is an approach that allows staff and consumers (or other people who use hospital and other care services) to share the designing of health services. It is sometimes called 'experience-based co-design'.

The essential parts of co-design are:<sup>1</sup>

- a focus on really understanding the experiences of those delivering and receiving care and then designing experiences – not just improving performance or increasing safety
- putting patient experiences at the heart of the quality improvement effort – but not forgetting staff
- staff and patients doing the designing together (co-design rather than re-design)
- improving day-to-day experiences of giving and receiving care.

In co-design, staff and consumers come together to form a co-design team. It is important for consumers to be involved in co-design because they have unique experiences and insights to share alongside those of staff. They provide a more complete understanding of how to improve services to give better experiences to staff delivering care and consumers receiving care. The team usually has three or four staff members and two or three consumers.

There are different ways for consumers to be involved in co-design projects. One way is to work alongside the project team as they plan and undertake the project. In this role consumers help with planning, developing questions to ask of consumers and staff, looking at feedback and pulling together themes and ideas so improvements can be tested.

1. Robert G, Cornwell J, Locock L, et al. 2015. Patients and staff as co-designers of health care services. *British Medical Journal* 350: g7714.



A second way is for consumers to share their experience of part or all of their health care journey, sharing what they thought was good and worked for them, what was not so good and did not work so well and also sharing ideas that could make those experiences better.

## Co-design and Kōrero mai/Talk to me

Co-design is at the heart of the Health Quality & Safety Commission's patient, family and whānau escalation of care workstream (Kōrero mai/Talk to me), part of its patient deterioration programme.<sup>2</sup>

The aim of the Kōrero mai co-design team is to co-design a process where patients, family and whānau members can alert staff if they feel worried about any deterioration in a patient's condition. The escalation of care process will help to keep patients safer and its development will take approximately eight months.

## What will consumer members of the Kōrero mai co-design team do?

Consumers in the co-design project teams will be involved in planning, developing questions, looking at feedback and pulling together themes and ideas so improvements can be tested.

All members of the co-design team will take part in two full-day co-design workshops delivered by the Health Quality & Safety Commission at no charge and delivered onsite at participating district health boards.

The consumer team members will also spend around two hours a week, on average, answering co-design-related emails and phone calls or attending meetings with other team members.

Support for consumer team members varies between district health boards but can include free parking to attend meetings and/or payment for attending meetings.

## More information about co-design

Health Quality & Safety Commission – patient, family and whānau escalation [www.hqsc.govt.nz/our-programmes/patient-deterioration/patient-family-and-whanau-escalation](http://www.hqsc.govt.nz/our-programmes/patient-deterioration/patient-family-and-whanau-escalation)

Health Quality & Safety Commission – co-design partners in care [www.hqsc.govt.nz/our-programmes/partners-in-care/work-programmes/co-design](http://www.hqsc.govt.nz/our-programmes/partners-in-care/work-programmes/co-design)

Waitematā District Health Board health service co-design [www.healthcodesign.org.nz](http://www.healthcodesign.org.nz)

Increasing patient engagement in health care service design: a qualitative evaluation of a co-design programme in New Zealand <http://pxjournal.org/journal/vol4/iss1/4/>

The Point of Care Foundation – experience-based co-design toolkit [www.pointofcarefoundation.org.uk/resource/experience-based-co-design-ebcd-toolkit/](http://www.pointofcarefoundation.org.uk/resource/experience-based-co-design-ebcd-toolkit/)

The Point of Care Foundation – what is experience-based co-design? [www.pointofcarefoundation.org.uk/resource/experience-based-co-design-ebcd-toolkit/step-by-step-guide/1-experience-based-co-design](http://www.pointofcarefoundation.org.uk/resource/experience-based-co-design-ebcd-toolkit/step-by-step-guide/1-experience-based-co-design)

2. See [www.hqsc.govt.nz/our-programmes/patient-deterioration](http://www.hqsc.govt.nz/our-programmes/patient-deterioration).