



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 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:¹

- 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. The team usually has three or four staff members and two or three consumers.

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.

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.²

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.

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.

2. See www.hqsc.govt.nz/our-programmes/patient-deterioration.

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

All members of the co-design team will take part in:

- two full-day co-design training days, provided by the Health Quality & Safety Commission at no charge and delivered on-site at participating district health boards
- seven one-hour computer-based support sessions.

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

Health Quality & Safety Commission – co-design partners in care www.hqsc.govt.nz/our-programmes/partners-in-care/work-streams/co-design-partners-in-care

Waitemata District Health Board health service co-design www.healthcodesign.org.nz/index.html

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 King's Fund – experience-based co-design toolkit www.kingsfund.org.uk/projects/ebcd

The King's Fund – what is experience-based co-design? www.kingsfund.org.uk/projects/ebcd/experience-based-co-design-description

If you have any questions after reading this fact sheet, please contact:

Laura Ellis, Advisor, Consumer Engagement Patient Deterioration,
Health Quality & Safety Commission

DDI (04) 913 1743 Mobile 027 5651265

Email laura.ellis@hqsc.govt.nz
