



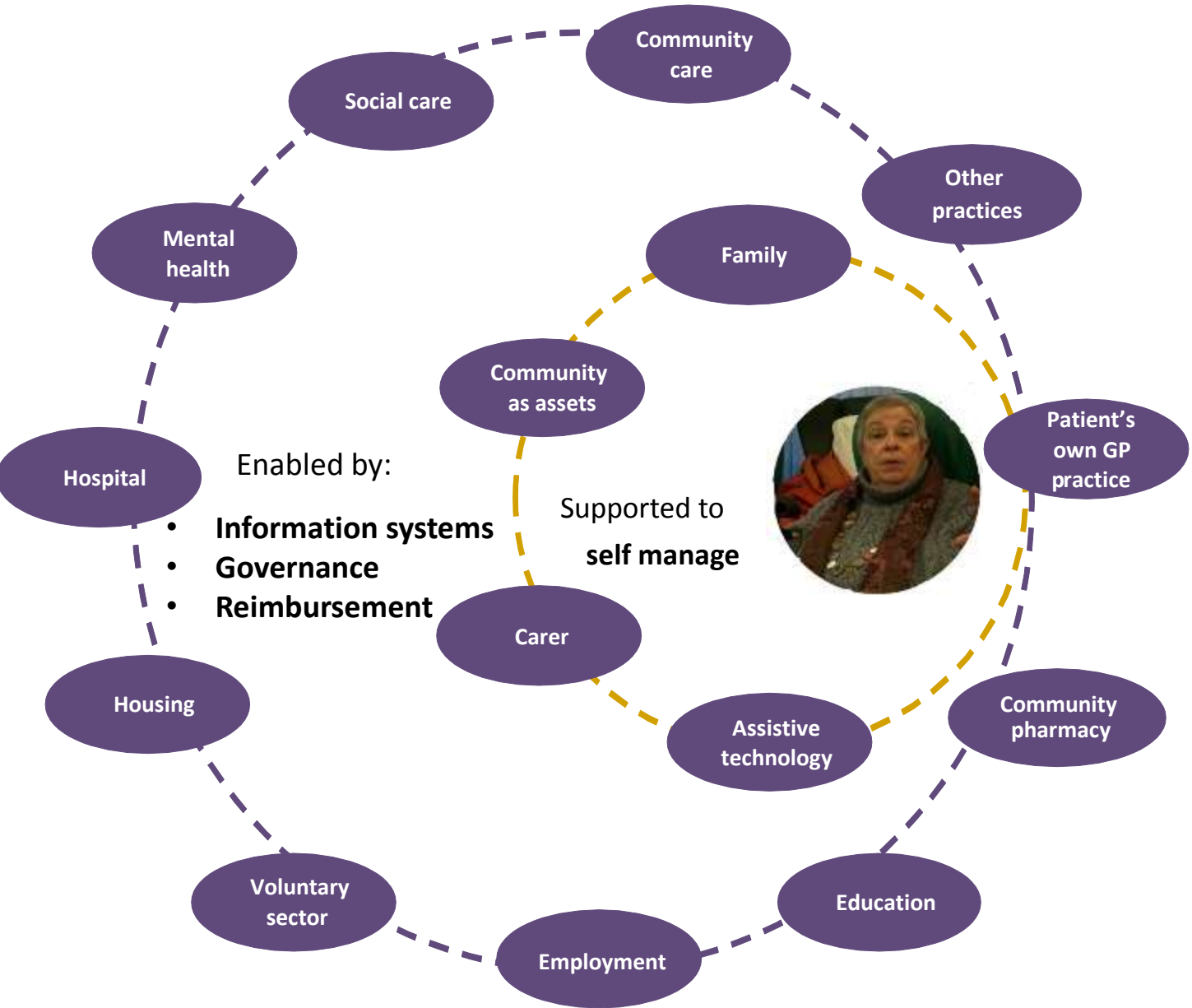
# Engaging Patients in Co-Design

Prof Lis Paice OBE  
NW London Integration Pioneer  
MiP Conference 2014

# What experience have you had of co-designing policy?

- In pairs share your experience and identify some barriers, enablers and benefits.

# Integrated Care in NW London



# Whole Systems Integrated Care in NW London

## Our vision

Improved quality of care, empowering and supporting people to maintain independence and to lead full lives as active participants in their community

## Principles of change

1. People will be **empowered** to direct their care and support and to receive the care they need in their homes or local community.
2. GPs will be at the centre of **organising and coordinating** people's care.
3. Our systems will **enable** and not hinder the provision of integrated care.

# Co-production of own care

- Why does it matter?
- What strategies can we use to make it happen?

# Points of Co-Production

- Patient and carer working with professional to co-produce an individual care plan
- Front-line staff working with service users to co-produce improvements in local services
- Policy-makers working with representatives of patients, carers, users to co-produce policies

# Co-production at Policy and Strategy Level

- How do you find people?
- Who are you looking for?
- What can we learn from people who have done it?

# Lay Partner: recruitment and support

- Contacted existing groups for nominations
- Provided 'role profiles'
- Training day for all those interested
- Expenses, briefings, admin support



**“After today’s workshop I am going to resume pushing for change on issues about which I feel strongly””**

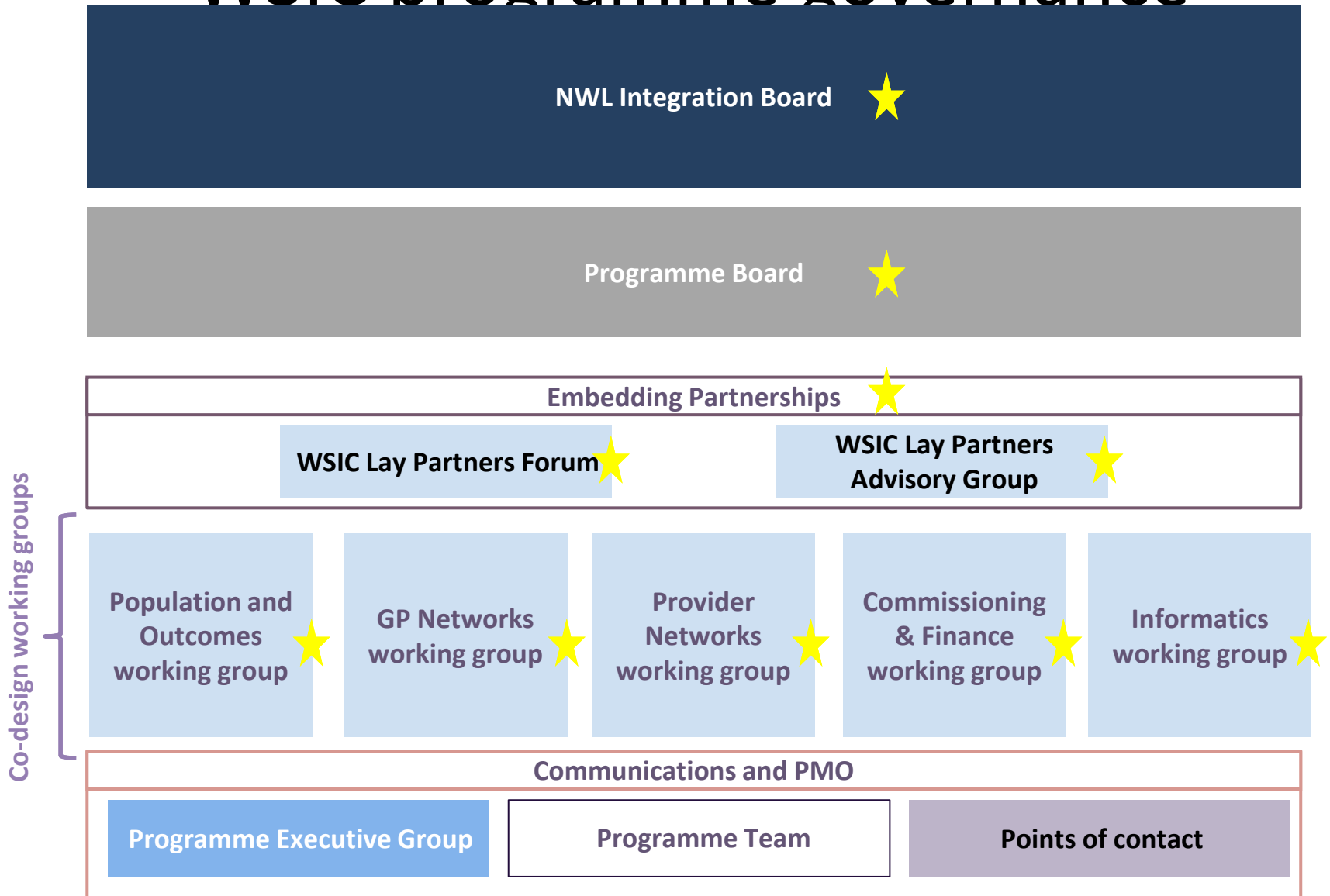
*“The Effective Lay Partner”  
training workshop  
21<sup>st</sup> October 2013*

## **Early learning**

- Lay Partners are more effective in pairs
- Important for Lay Partners to meet regularly as a group
- A time commitment of over ½ day each week was too much for some Lay Partners
- Need numbers to provide capacity
- It can be challenging to get the balance of power right in the co-design groups
- Training for professionals is equally important
- Lay partners must be equal partners



# WSIC programme governance



★ = Lay Partner representation

# Approach to co-design

- 1** Co-production for the Whole Systems programme starts with co-design, through which we can then embed co-delivery. This is the core of our programme and is embedded throughout the whole process.
- 2** We are dealing with new relationships for which we need a new language of inclusion: we will avoid “consultation”, “engagement”, “representation” and “involvement” and aim at all times for a genuine partnership.
- 3** We are people driven: we will actively reach out to those whose voice is rarely heard.
- 4** We are all responsible for driving progress and educating each other along the way.
- 5** We recognise the political and social context in which the programme sits.



# North West London Whole Systems Integrated Care Toolkit

The screenshot shows the homepage of the North West London Whole Systems Integrated Care website. At the top, there is a navigation menu with links for HOME, ABOUT US, OUR WORK TOGETHER, TOOLKIT CHAPTERS, RESOURCES, and DISCUSSION. Below the navigation is a large banner image featuring a collage of hexagonal photos showing various people in care settings. The main heading reads "Whole systems integrated care in North West London". Below this, there is a quote from a partner organization: "Welcome to the North West London Whole Systems Integrated Care website. On behalf of partners from across the 8 boroughs in North West London, we believe that if the vision of integrated care is to be achieved, it must be a social movement, led by people who use services, their families, carers and the public, supported by staff at every level in every care setting, whether that be NHS, local authority, private or voluntary. People are fed up with fragmented, inefficient care. We do not want to have to repeat our story to every health or social care professional we meet. We do not want a system that makes it hard for professionals to work together. We do want to understand how to manage our own health and wellbeing. We want to be able to talk with other people who have an impact on our health and social care and be listened to. We want those people to talk to each other. We want to have access

1

Learn about our **vision, journey**, and the work across **North West London**

2

Find the **latest news** and useful **resources** like the Toolkit

3

Share ideas about integration through the **discussion boards**

Visit our website at  
<http://integration.healthiernorthwestlondon.nhs.uk/>

# Impact of Lay Partners

- Courage and encouragement
- Whole life assets
- ‘Blue sky’ thinking
- Hold projects to account
- Bring patients to the centre of policy
- Insights and expertise from different backgrounds
- Influence language and behaviour



“The essence of Whole Systems is about being inclusive – we need to reach out to a broad spectrum of provider partners.”

**Peter Cleary, Lay Partner Lead for GP Networks**



“It did feel to me like a culture changing moment, to seek to represent our work in an accessible and people focused way... but it is a challenging and time consuming and will take real commitment!”

**Trish Longdon, Lay Partner Lead for Population & Outcomes**

**Lay Partners have “been the conscience and driven the vision.”**



# Next steps

- In pairs, consider one action you are prepared to commit to taking after today's discussion.