

What happens if we scrap the committees and co-design with patients instead?

What is co-design & why is it different?

Co-design goes beyond consultation by building and deepening equal collaboration between people affected by, or attempting to, resolve a particular challenge. Users are experts of their own experience, and become central to the design process.

Co-design combines lived experience with professional expertise to identify and create an outcome, service or product.

Healthcare co-design is founded in the idea that services are created **WITH** patients, instead of **FOR** patients.

THE 3 PHASES OF CO-DESIGN

1 & define	2 & prototype	3 & iterate
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250

participants:
physicians, nurses,
clerks, admin,
leaders,
consultants,
patients & families.

INCLUSIVE
RESPECTFUL
PARTICIPATIVE
ITERATIVE
OUTCOMES FOCUSED

3

co-design sessions

patient & family
advisors actively
co-designing with
AHS staff

40

1030

engaged
partners across the
province who continue
to learn and share
co-design principles

13
pitches focussed
on finding
innovative ways to
put patients and
families at the centre of
health care services

By building upon the engagement process, a network of changed mindsets and behaviours is organically spread through social democracy

SUCCESSFUL PITCHES

Leader Rounding

Leader Rounding is when administrative leaders get out to the front lines to ask patients and families what matters to them.



Tackled the challenge of provincial scale and spread of a proven practice.

Used a grass-roots approach and one-week campaign to challenge over 85 leaders across the province to participate, including Dr. Yiu.

YELP for Patients

A real-time anonymous feedback tool providing patients and families the opportunity to share care experiences at the point of care; like YELP for patients.

Simple interface allowing easy rating, dashboard access for front line teams, and priority data gathering.



What Matters to You?

Rooted in making sure that patient and family voices are not only heard but really listened to.

Instead of asking "what's the matter with you?" staff are encouraged to ask "what matters to you?"



Joined the international #WMTY campaign with 1000 participants from across 30 countries on June 30th, 2017.

Nearly 15000 Twitter impressions for @AlbertaPFCC tweets, with 2 in the international top 10 (#3 and #10 based on number of retweets).

What was it like to co-design solutions with staff, patients and families?



"It was obvious from the beginning of the day that there was a very strong buzz in the room - equally from patients & providers - that the status quo was not good enough. Collectively, we had to make things better."

Phil, Patient



"Asking patients #WMTY2017, I am surprised to see how shocked our patients are that we are asking this question."

Jennifer, Nurse

"It was great fun to work with a cross-section of staff and patients to define storyboards and pitches - and exciting to see the close alignment of priorities, ideas and key messages."

Lana, Family Member



"It brought patients and families to the fore front and it made us move forward on initiatives and hear what was important to them."

Lynette, Leader



"I learned that when we listen to patients we design solutions that will truly make a difference in their lives."

Aji, Consultant