



AGENCY FOR HEALTHCARE RESEARCH AND QUALITY



Overview of Experience-Based Co-Design (EBCD)

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What is Experience-Based Co-Design?



“Where user and providers work together to optimize the delivery of services. At its most ... participative this is called **codesign**.

Service development is driven by the equally respected voices of users and professionals.”

Source: Demos.co.uk

Its origins are in design theory

Performance

Is it
functional?

Engineering

Is it safe
and
reliable?

The aesthetics
of experience

What does
it feel like?

Berkun, 2004 adapted by Bate. Source: Bate P, Robert G (2006). 'Experience-based design: from redesigning the system around the patient to co-designing services with the patient.' *Quality and Safety in Health Care* vol 15 (5), pp 307–10

Three big ideas lie behind co-design



David Boyle

**Economist, historian, politician,
journalist...**

1. Professionals need help from their clients, their clients' families and their communities
2. Service users are a wasted asset
3. We all depend on the 'core economy'

Boyle, D (2011) Speech to the Scottish Parliament. Available from:
<https://david-boyle.co.uk/why-systems-work/what-co-production-is-and-what-it-isnt>

The Experience-Based Co-design process



Robert G, Cornwell J, Locock L, Purushotham A, Sturme y G and Gager M. (2015) 'Patients and staff as co-designers of health care services', *British Medical Journal*, 350:g7714

Why co-design?

- It is the right thing to do
- It generates better information
- It builds common cause and ownership of solutions
- Based on real world experiences – less chance of failure
- Diverse perspectives bring more innovative solutions
- Builds relationships

The phases of co-design

- Involving everyone that matters
- **Discovery phase** – qualitative interviews first with staff and then with service users (usually a composite patient film is created)
- **Analysis phase** – making sense of what you have heard
- **Co-design phase** – holding co-design meetings to agree priorities and move to small action-oriented co-design teams

What did we do in the Listen2Baby study?

- Aim of the study was to improve the way that midwives monitor the fetal heart during labour (using intermittent auscultation or IA) by understanding IA practice
- The output is a toolkit for maternity units to support the use of IA in eligible women
- The project was co-designed throughout – with Mo and Sumayya as co-investigators and integral members of the team throughout

Co-design activities included...

- Ethnographic interviews with staff and women and partners
- Observations of labour
- Creation of short film of women's experiences to promote discussion about practice
- Staff events and women's events to discuss the emergent themes
- A co-design event bringing staff and women together
- The creation of small co-design groups to propose design solutions

MacLellan, J, Ade, M, Fitzsimons, B, Kenyon, S, Mulla, S, Pope, C, Sanders, J & Rowe, R 2024, 'Women's experiences of intermittent auscultation fetal monitoring in labour: A qualitative study', *Women and birth : journal of the Australian College of Midwives*, vol. 37, no. 6, 101805. <https://doi.org/10.1016/j.wombi.2024.101805>

**Over to Mo and Sumayya for their perspectives on
the co-design process and being co-designers**