

Co-production and empowering communities – Patients as a resource not a problem

Jim Phillips

Director

Quality Institute for Self Management
Education and Training



Patient Empowerment- a contradiction?

- Patient- Latin *patiens*, *to endure*- to suffer, diseased person, sick person, sufferer - a person suffering from an illness



“Empowerment is not giving people power, people already have plenty of power, in the wealth of their knowledge and motivation, to do their jobs magnificently. We define empowerment as letting this power out (Blanchard, K).”

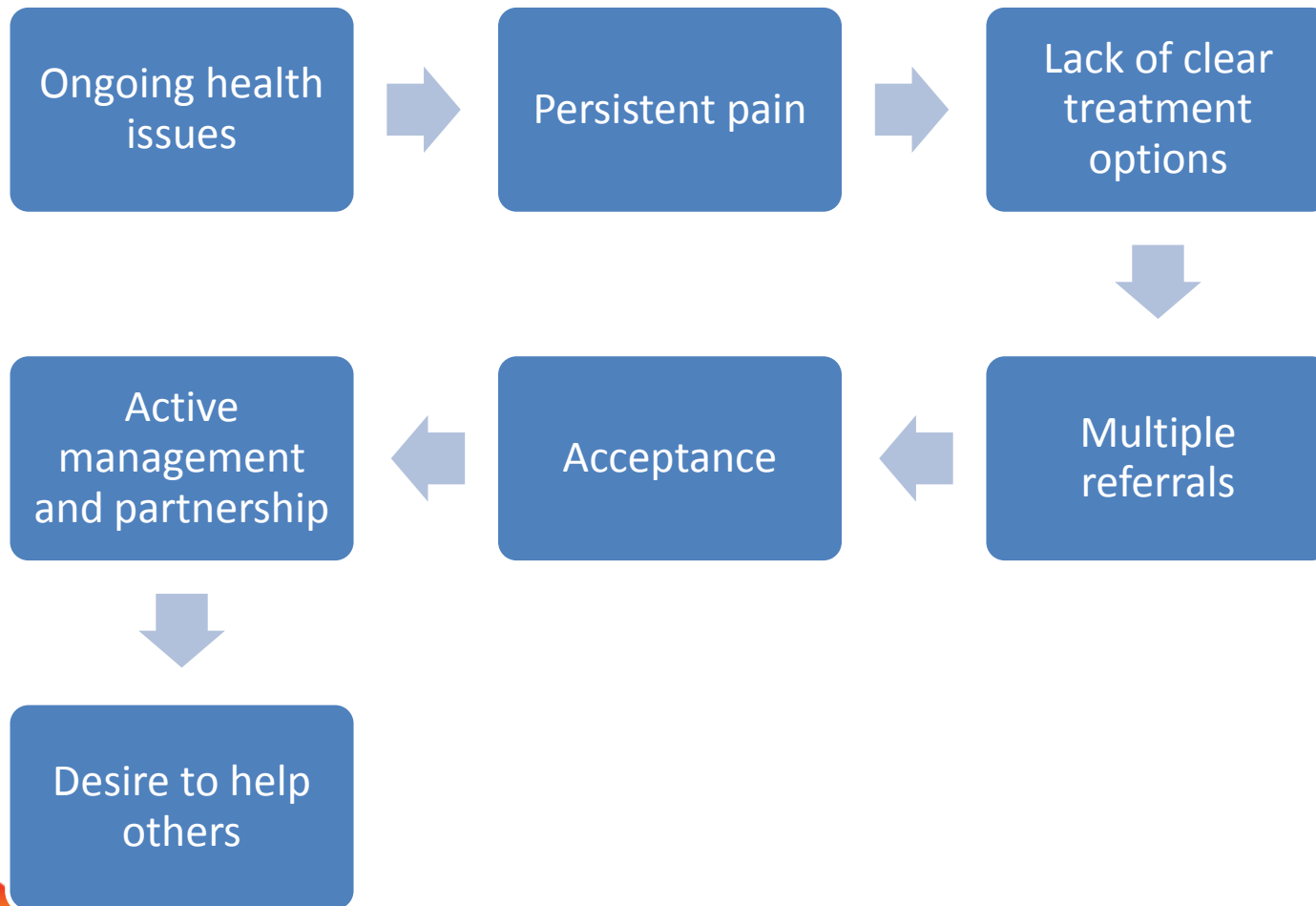


Empowerment is a journey



www.qismet.org.uk

From passive to activated



Information about Personal Health Situation

Self Care Support

Health Literacy

Decision Making

Communication Skills

Being Connected



Know Your Own Health

All our faith in our doctor

Passive behaviours

Helplessness

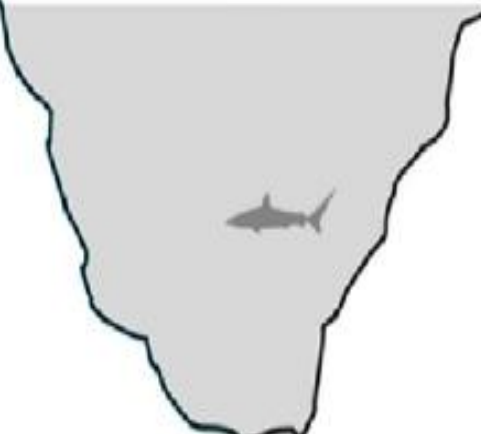
Isolation

Take action

Find information

Organise our questions

Map our options & choices



Anne McMurray (2007). *Community Health and Wellness: A Sociological Approach* (3rd ed.).

Where there are adequate levels of health literacy, that is where the population has sufficient knowledge and skills and where members of a community have the confidence to guide their own health, people are able to stay healthy, recover from illness and live with disease or disability.



Hibbard et al(2007)

Demonstrated that patients with high activation scores are significantly more likely to perform self-management behaviours, use self-management services, and report high medication adherence ,have significantly higher physical and mental function compared to those patients with the lowest levels of activation and



Characteristics

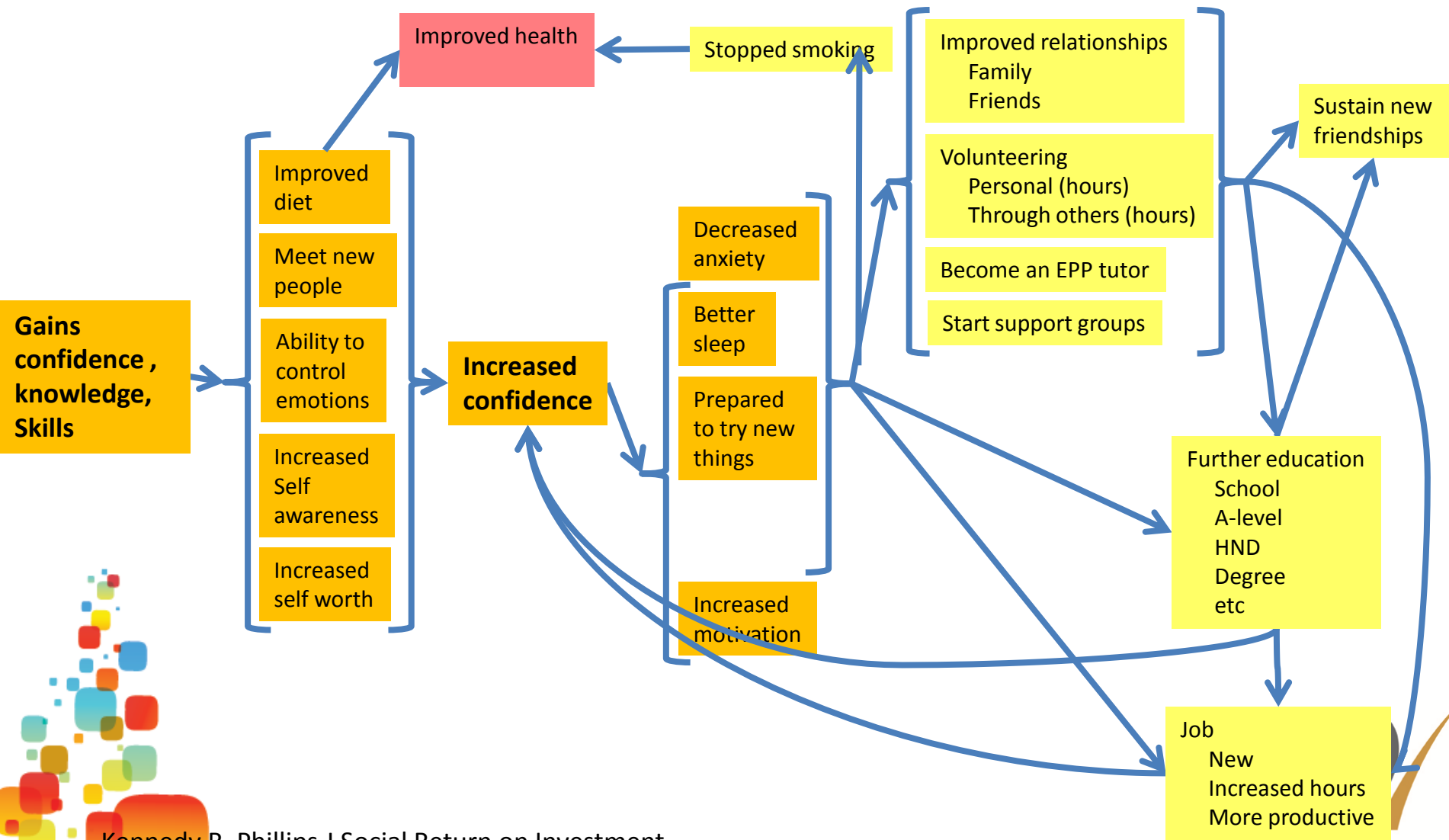
- The ability to make decisions about personal/collective circumstances
- The ability to access information and resources for decision-making
- Ability to consider a range of options from which to choose (not just yes/no, either/or.)
- Ability to exercise assertiveness in collective decision making
- Having positive-thinking about the ability to make change



Characteristics

- Ability to learn and access skills for improving personal/collective circumstance.
- Ability to inform others' perceptions through exchange, education and engagement.
- Involving in the growth process and changes that is never ending and self-initiated
- Increasing one's positive self-image and overcoming stigma
- Increasing one's ability in discreet thinking to sort out right and wrong





Kennedy R, Phillips J Social Return on Investment (SROI). *SelfCare* 2011;**2**(1):10-20

www.qismet.org.uk

QISMET

Quality Institute for
Self Management
Education & Training

The bogus contract: the patient's view

- Modern medicine can do remarkable things: it can solve many of my problems
- You, the doctor, can see inside me and know what's wrong
- You know everything it's necessary to know
- You can solve my problems, even my social problems
- So we give you high status and a good salary

Richard smith BMJ *Why are doctors
unhappy*

www.qismet.org.uk



**Doctor, I want
to choose how
I'm treated**

**Hmm. You're
not just ill -
you're deluded**



Creating the right conditions



www.qismet.org.uk

External Frameworks

- Governmental
- Societal
- Organisational



Internal/Personal

- Beliefs
- Attitudes
- Behaviours
- Conditioning



Co-production

That people's needs are better met when they are involved in an equal and reciprocal relationship with professionals - working together to get things done.



http://www.nesta.org.uk/areas_of_work/public_services_lab/people_powered_health

www.qismet.org.uk

Six characteristics

1. Recognising people as assets
2. Building on people's capabilities
3. Promoting mutuality and reciprocity
4. Developing peer support networks
5. Breaking down barriers between professionals and users
6. Facilitating rather than delivering



Case study

ALFs, Buddies and Navigators



www.qismet.org.uk

Active Learning Facilitators (ALFs)

- Mobilise the potential of local people with long term health conditions including expert patients/service users to become expert facilitators of informal adult learning.
- Explore the potential of GP surgeries to become the organisational context for developing new learning activities in support of active patient and community involvement.
- Design and implement a model of self - managed learning that drew its strength from self- management and self-care in the health sector.
- Offer help and support to patients and service users by encouraging them to become actively involved in learning of their choice and by doing so increase confidence and interest in learning and personal development.

www.qismet.org.uk



QISMET

Quality Institute for
Self Management
Education & Training

- 27 local people were trained and supported to become ALF's.
- ALF's engaged in learning conversations with 321 patients from amongst those sections in the community who experience on a daily basis, social exclusion, health inequalities, loneliness and isolation.
- The project has evolved to include open learning days held at Lambeth Walk Surgery which attracted 111 patients to taster sessions including a book group, computer training, gardening, exercise and other learning activity.

- Contributes to increasing confidence and capability amongst patients and service users participating in the project.
- Encourages patients to actively participate and help develop new activities based in GP practices, for example, patient reading groups, growing your own food clubs.
- Increased personal self-esteem and self-worth.
- Contributes to enhancing effective self-management/self-efficacy.
- Has the capacity to reduce social isolation, anxiety and depression.

**If we're not learning...we're not
awake and alive. Learning is not only
like health, it *IS* health**



www.qismet.org.uk

Buddies and Navigators

- Help of service users in clinics who would navigate and encourage patients to the use of local resources.
- Creation of a formal buddy system which allows ongoing support in the community
- Development of group consultations.



Process

- Identification of stakeholders
- Series of informal workshops
- Roles and responsibilities agreed
- ALL involved in developing initial training
- First cohort supported to become train the trainers
- Mapping of local resources



Expected outcomes

- Confidence and autonomy of patients will improve,
- More active lifestyles and a better quality of life,
- Development of healthier and more productive communities.

The project also aims to bring about cost savings through reducing referrals to pain services and other services, such as mental health, as well as reducing medication



Need for quality standards



www.qismet.org.uk



What is QISMET ?

Quality Institute for Self Management Education and Training

- ✓ Set up in 2008
- ✓ Involved over 30 organisations
- ✓ Took over QA from Expert Patient Programme
- ✓ Department of Health Funded
- ✓ Only involved in QA not provision



QISMET

- **Theme 1 – Leadership, management and organisation-** how the provider is set up, structured and managed, including its processes and procedures.
- **Theme 2 – The programme** -how it is designed, developed and delivered
- **Theme 3 – The facilitators/leaders-** the people that deliver the programmes. It includes how they are recruited, trained, assessed and supervised.
- **Theme 4 - Performance management-** key performance indicators that relate to the programme's aims and desired learning outcomes. Monitoring must be defined and undertaken, resulting in improvement

Its not about manuals!

A special transmission outside the scriptures;

No dependence upon words and letters;

Direct pointing to the soul of man:

Seeing into one's own nature and attainment



Bodhidharma

Its all about each other



Question?

What did I do today that helped someone?

What did I do today that hindered someone?

