

Competence center for lived experience and service development - KBT

Better services through equal dialogue between service users and professionals - We bring forward user voices.

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Vision/Mission

Competence center for lived experience and service development (KBT) is a competency center working to promote the service user and patient perspective in service development, education and research. We are situated in Trondheim, Norway and employ 11 people. KBT's Managing Director is Dagfinn Bjørgen.

KBT aims to be the leading partner and collaborator in projects where patient's and service users' experiences are the knowledge base. Our main objectives are as follows:

- To ensure that service users' experiences are documented and taken into account in the development of health services and institutions.
- Be a center of competence for service users and organizations representing this group.
- Furthering the users' experiences and competence in research, evaluation and education.
- Providing courses and training to strengthen users in collaborating and gaining influence.

We work to reach these objectives through:

- User-led service evaluations.
- Being a competence base for the "User Interviews User"-method.
- User-led innovation projects in collaboration with municipalities and health trusts.
- User-led and collaborative research with universities and research institutions.

- Documentation and dissemination of service user and patient knowledge.

Ongoing projects

Evaluation of the implementation of drug-free mental health care services in Norway.

Project Manager: Dagfinn Bjørgen.

Commissioner: Central Norway Regional Health Authority (Norwegian: Helse Midt-Norge RHF)

In 2016 KBT was commissioned by the Norwegian Directorate of Health via the Central Norway Regional Health Authority to create an overview and descriptions of the implementation of drug-free mental health care services in Norwegian hospitals. The four Regional Health Authorities (RHF) formed a letter of assignment for KBT. KBT was to both create an overview, and conduct a User Interviews User evaluation.

My Voice Matters

Project Manager: Juni Raak Høiseth.

Commissioner: Self-driven project funded by Extrastiftelsen.

My Voice Matters is a three-year development project aiming to develop a method for real user involvement for children and youth as service users. The goal is to enable children and youth to bring forward their experiences with the services with their own voice.

Canada-Norway Research Collaboration on Operationalizing Experience-Drive Innovation through Integration of Peer Support in Health Systems.

Project Managers: Dr. Gillian Mulvale and Karl Johan Johansen.

Commissioner: McMaster University, Hamilton, Canada.

This is an exploratory policy case study where the case is defined as the integration of formalized/intentional peer support services within clinical services located in hospital, primary care and community settings. Formalized/intentional peer support refers to peer support services (either group or one-to-one) focusing on issues such as education, employment, mental health systems navigation, systemic/individual advocacy, supported housing, food security, internet, transportation, recovery education, and antidiscrimination work. We will examine two sub-cases: peer support in Norway and in Ontario, Canada.

Collaboration on user-driven innovation and service development in the municipality of Trondheim

Project Manager: Dagfinn Bjørgen

Commissioner: Helsedirektoratet

This project is a collaboration between the municipality of Trondheim and KBT. The project involves three of the municipality's units; the unit for mental health and substance abuse, the unit for substance abuse services and the unit for meeting places and housing for people mental health problems. The goal of the project is to develop and describe new ways for services to collaborate on improving their work methods, to gain a greater focus on recovery and what feels helpful and supportive from a service user perspective. The

mapping phase of the project was conducted in 2016-2017, with a User Interviews User evaluation in the municipality.

Innovation and service development projects

KBT is engaged in a number of service development projects in the field of mental health and substance abuse. There is a clear need for social innovation in the relationship between services and their recipients. This calls for dialogue and a new understanding of each other's roles, responsibilities, authority and expectations. Therefore, social innovation is a crucial process for KBT.

The term "social innovation" applies to processes, methods and techniques with a social intent. This includes strategies, concepts, ideas and organizations that work towards social needs, and develop and strengthen communities.

In recent years, co-creation has been pointed to as an important factor in developing services (Pralhad and Ramaswamy 2004 a and b, Vargo and Lusch 2008). In co-creation, the user/patient is an active participant working with the service to create value. As such, the patient's role is far more active, and the relationship between services and their recipients becomes crucial in creating value (Pralhad and Ramaswamy 2004 a and b).

KBT seeks to strengthen users, help them disseminate their knowledge in innovation processes, and influence the services towards listening to its users' experiences.

International publications

Sagsveen, E., Rise, M. B., Grønning, K., Westerlund, H. & Bratås, O (2018). Respect, trust and continuity: A qualitative study exploring service users' experience of involvement at a Healthy Life Centre in Norway. *Health Expectations* 2018;00(1-9).
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