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2026 Research Design Webinar Series




MACH acknowledges the Traditional Owners of the land on which it works, the Wurundjeri People of the Kulin Nation, and we pay our respects to Elders past, present and emerging.
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for Clinical and Health research
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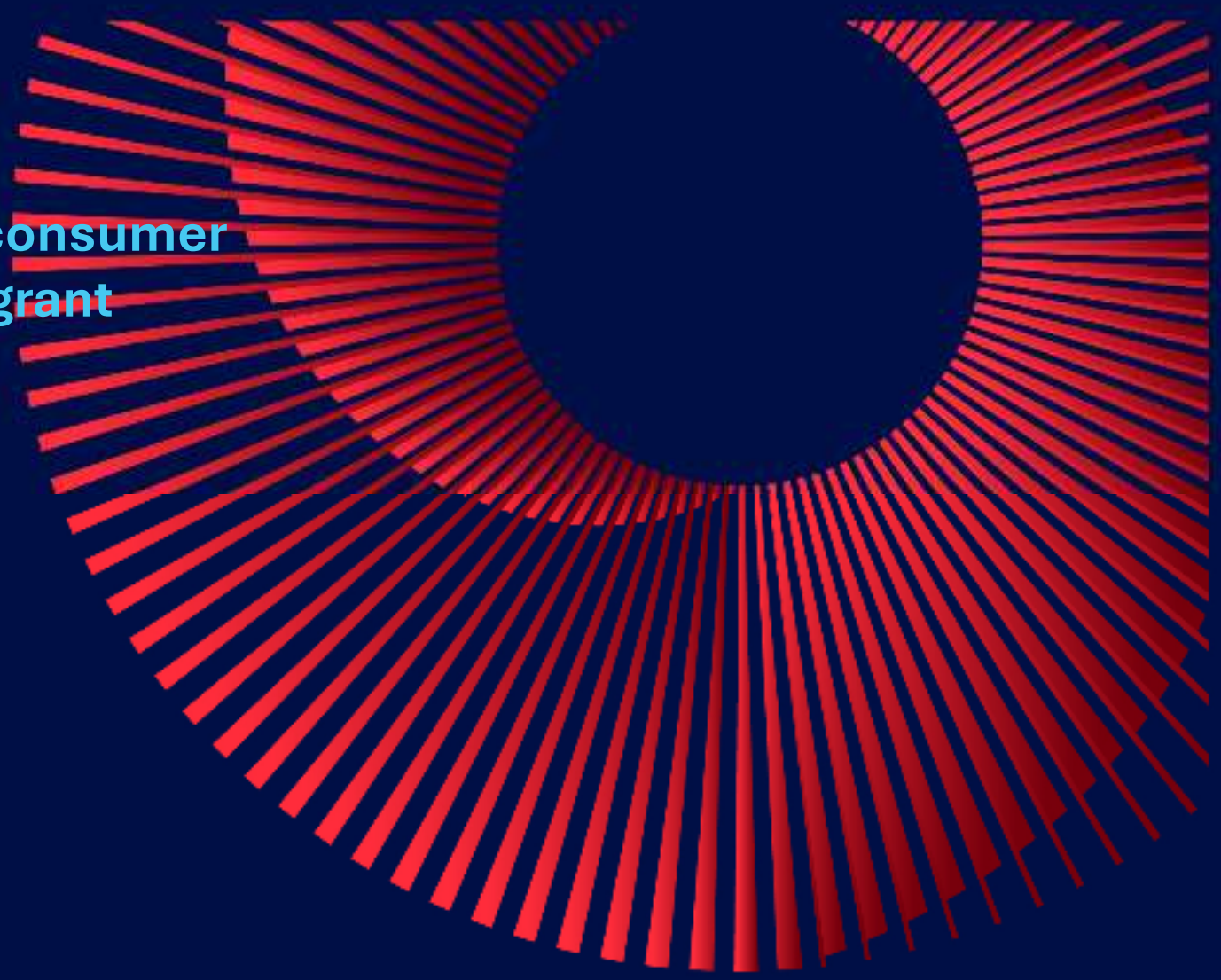
THE UNIVERSITY OF MELBOURNE

Writing co-design and consumer involvement (CCI) into grant proposals

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MISCH Hub

Methods and Implementation Support for Clinical and Health Research




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Writing co-design and consumer involvement (CCI) into grant proposals

1. Review of underlying principles of CCI - Part 1
2. Co-design approaches to consider – including resources and case studies
3. Review of underlying principles of CCI – Part 2

Principles of good consumer involvement in health and medical research – Part 1

- Prioritising relationships
- Engaging early
- Including a diversity of perspectives
- Sharing leadership
- Awareness of power dynamics
- Acknowledging positionality and beyond


LOWITJA INSTITUTE

Co-design Versus Faux-design of Aboriginal and Torres Strait Islander Health Policy: A Critical Review


• BMJ Glob Health. 2021 Nov 11;6(11):e006978. doi: 10.1136/bmjgh-2021-006978

'You want to deal with power while riding on power': global perspectives on power in participatory health research and co-production approaches

• Author information • Article notes • Copyright and License information

PMCID: PMC8587355 PMID: 34764147

What is co-design?

- Relationship and active participation oriented
- Patients, clinicians, researchers and others work together to understand the problem, identify priorities, design solutions, prototype them, and decide what changes to implement
- Iterative – can take weeks, months and/or years

Sanders, E. B. N., & Stappers, P. J. (2008). Co-creation and the new landscapes of design. *CoDesign*, *4*(1), 5–18. https://doi.org/10.1080/15710880701875068

Blomkamp, E. (2018), The Promise of Co-Design for Public Policy. Australian Journal of Public Administration, 77: 729-743. https://doi.org/10.1111/1467-8500.12310

What isn’t co-design?

- One-off consultation or focus groups
- Patient centred approach – we ask patients what they want and use feedback to re/design
- Human centred approach – we observe patient journey, interview them about their experience and re/design a service around their needs

Co-design approaches

- Double Diamond approach + case study
- Experience-Based Co-Design (EBCD) + resources
- Generative co-design for mHealth + case study

Double Diamond approach



Discover – identify and understand the problem

Define – channel the Discover phase insights to define key issues

Develop – iteratively develop and specify a prototype

Deliver – pilot and evaluate the prototype

Design Council (2015). *Design methods for developing services.* Design Council UK.

Double Diamond Case Study

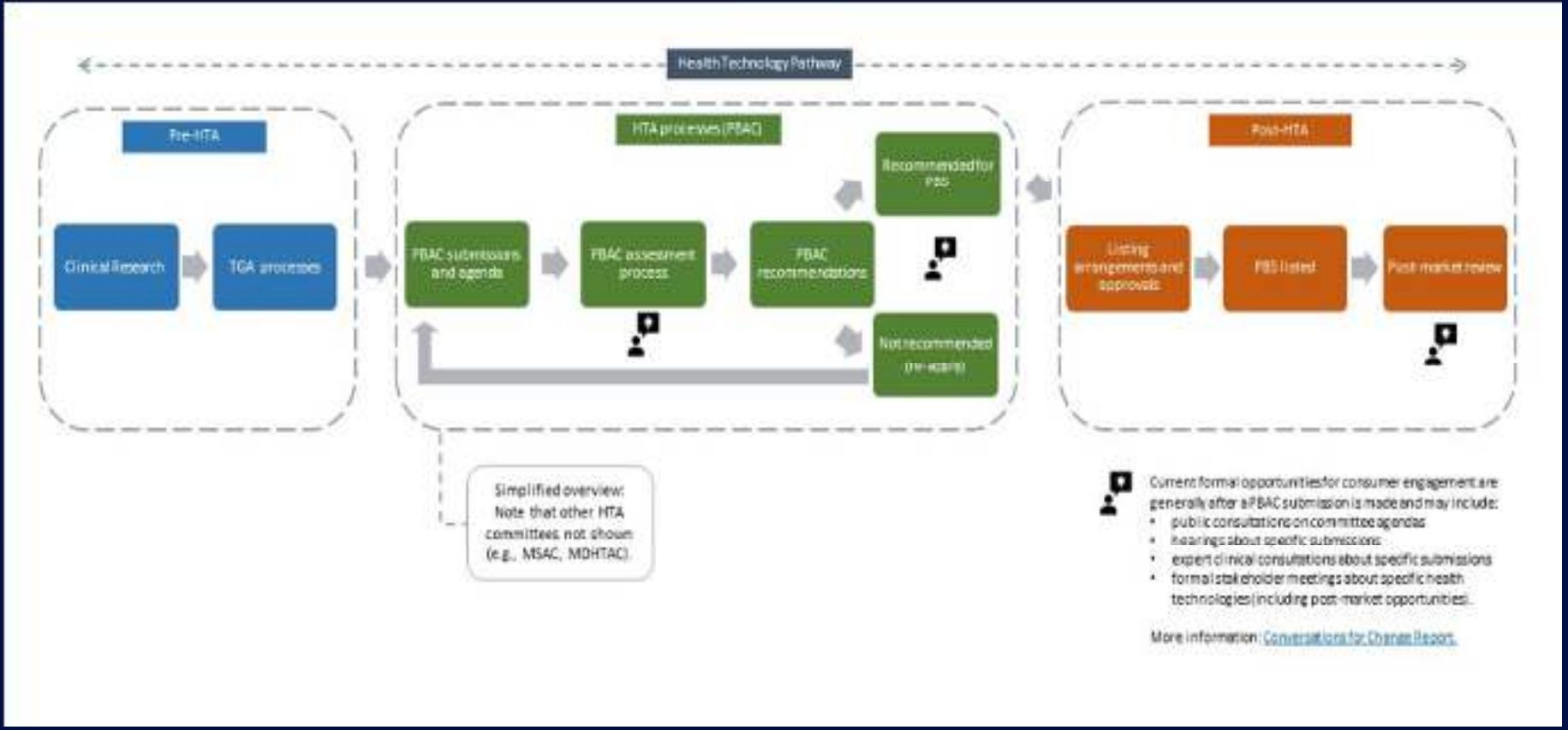
Enhanced consumer engagement in HTA process - co-design project for the Department of Health and Aged Care

Background: Consumers had been calling for greater integration of consumer input into the health technology assessment (HTA) process.

Project aim: Co-design recommendations for an enhanced consumer engagement process with a Co-design Working Group (CWG) made up of stakeholders in the HTA process.

MISCH role: To facilitate a series of co-design workshops and deliver a final report of recommendations to be presented to the Minister for Health and Aged Care.

Department of Health and Aged Care - Enhanced Consumer Engagement Project



Co-design Working Group (CWG)

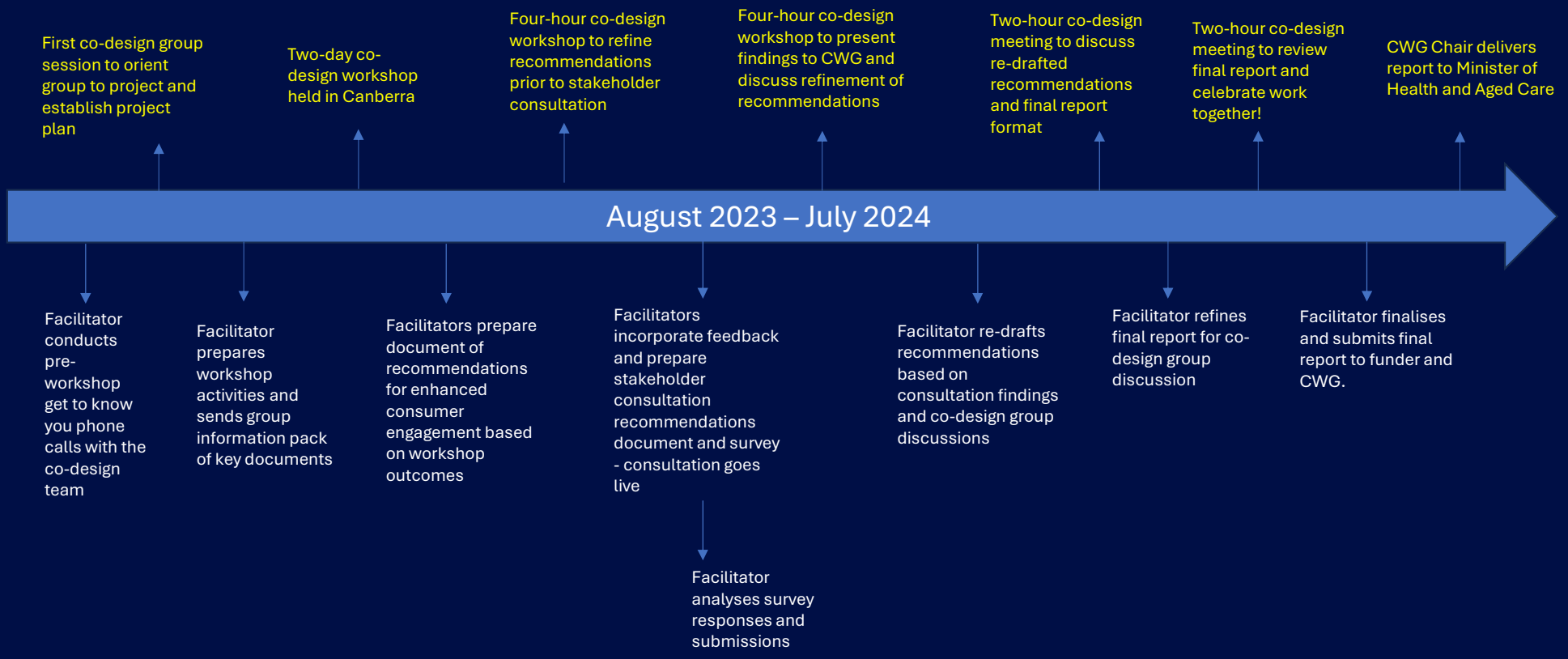
CWG made up of:

- five consumers (individual and consumer organisation representatives)
- two pharmaceutical industry representatives
- two government department representatives

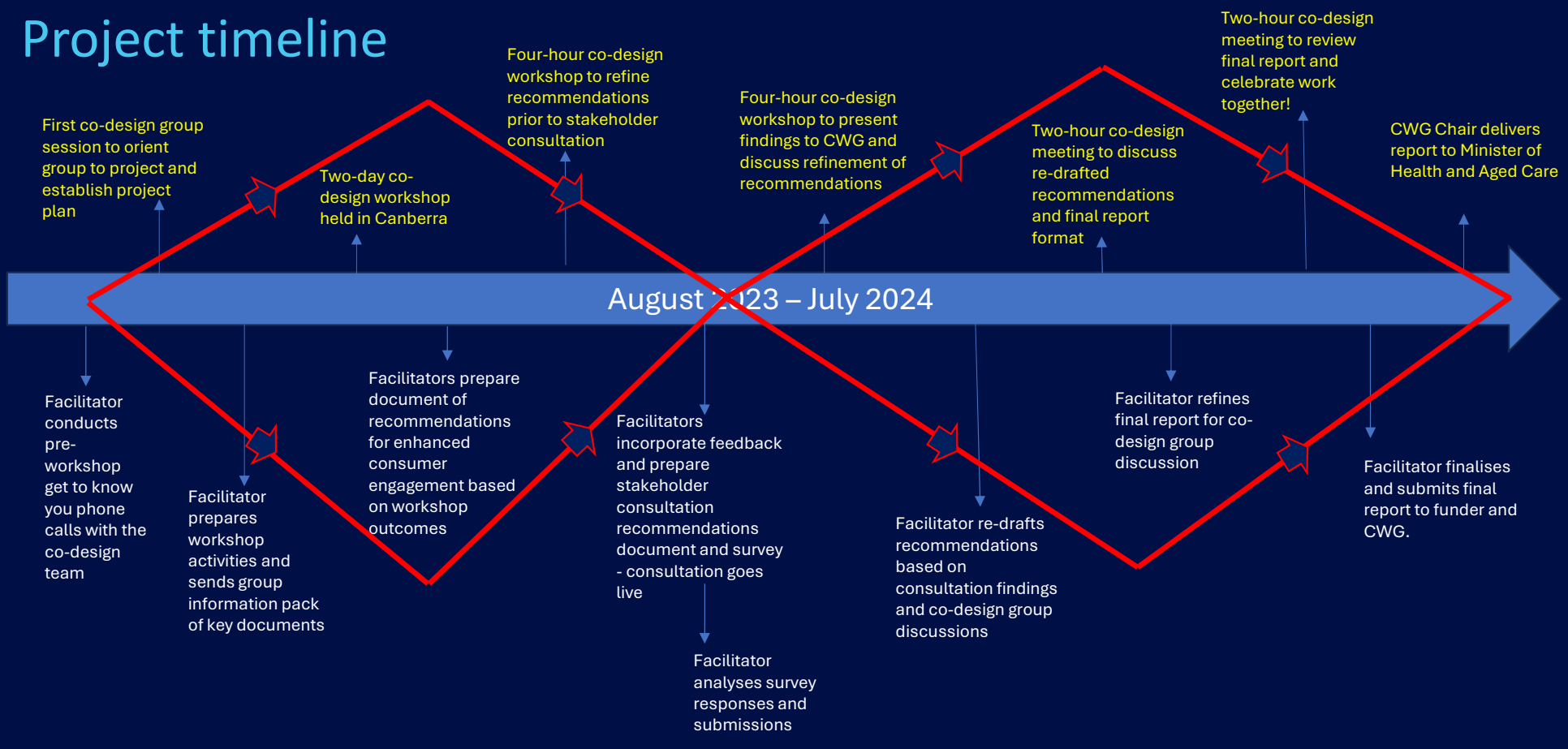
Co-design principles:

- Prioritising relationships
- Sharing power
- Using participatory approach

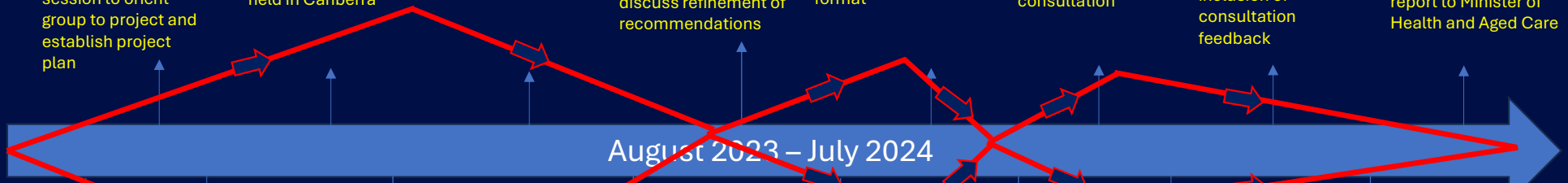
Project timeline



Project timeline



Project timeline



First co-design group session to orient group to project and establish project plan

Two-day co-design workshop held in Canberra

Four-hour co-design workshop to refine recommendations prior to stakeholder consultation

Four-hour co-design workshop to present findings to CWG and discuss refinement of recommendations

Two-hour co-design meeting to discuss re-drafted recommendations and final report format

Two-hour co-design meeting to discuss details of report and targeted stakeholder consultation

Two-hour co-design meeting to finalise inclusion of consultation feedback

CWG Chair delivers report to Minister of Health and Aged Care

Facilitator conducts pre-workshop get to know you phone calls with the co-design team

Facilitator prepares workshop activities and sends group information pack of key documents

Facilitators prepare document of recommendations for enhanced consumer engagement based on workshop outcomes

Facilitators incorporate feedback and prepare stakeholder consultation recommendations document and survey - consultation goes live

Facilitator analyses survey responses and submissions

Facilitator re-drafts recommendations based on consultation findings and co-design group discussions

Facilitator drafts final report for targeted stakeholder consultation

Facilitator refines final report for consultation based on co-design group discussion and consultation goes live

Facilitator and funder analyse targeted consultation feedback and facilitator writes up findings for CWG meeting

Facilitator drafts final report, liaising with funder and CWG throughout to ensure any changes are agreed by discussion and consensus while providing the group opportunity to provide input and feedback throughout. Submits final report to funder and CWG.

Experience Based Co-Design - EBCD

- Developed by Paul Bate & Glenn Robert
- Patient Centred Research → Experience based design → Experience based Co-Design



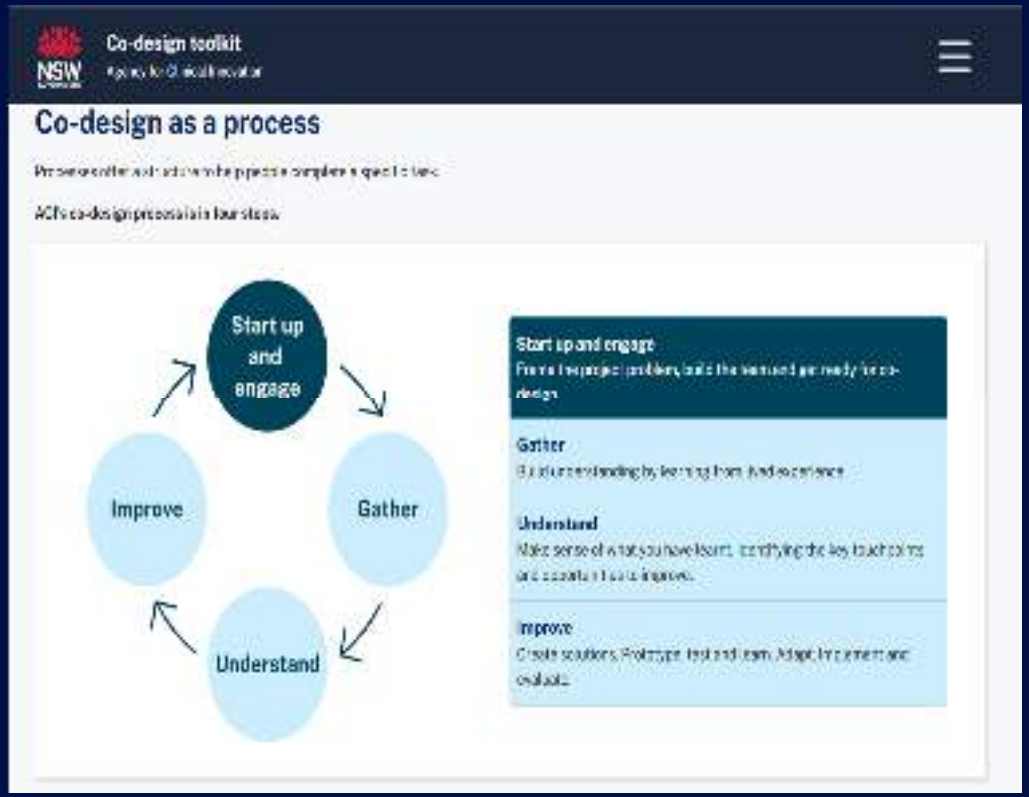
Experience Based Co-Design - EBCD

- Developed by Paul Bate & Glenn Robert
- Patient Centred Research → Experience based design → Experience based Co-Design



EBCD Resources





Australian Healthcare and Hospitals Association EBCD toolkit:
https://online.flipbuilder.com/siuh/xqnw/mobile/index.html#p=17

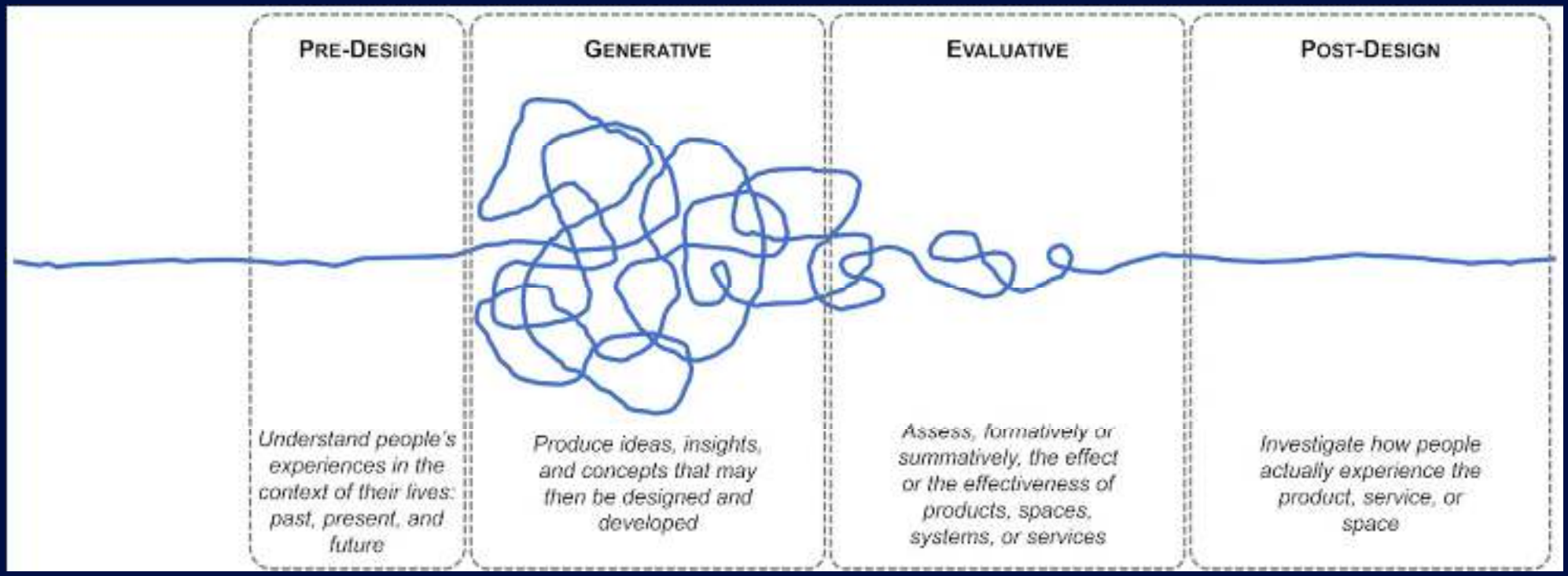
NSW Government: Agency for Clinical Innovation Co-design toolkit:
https://aci.health.nsw.gov.au/projects/co-design

EBCD Resources

Bate, P., & Robert, G. (2006). Experience-based design: From redesigning the system around the patient to co-designing services with the patient. *Quality & Safety in Health Care, 15*(5), 307–310. https://doi.org/10.1136/qshc.2005.016527

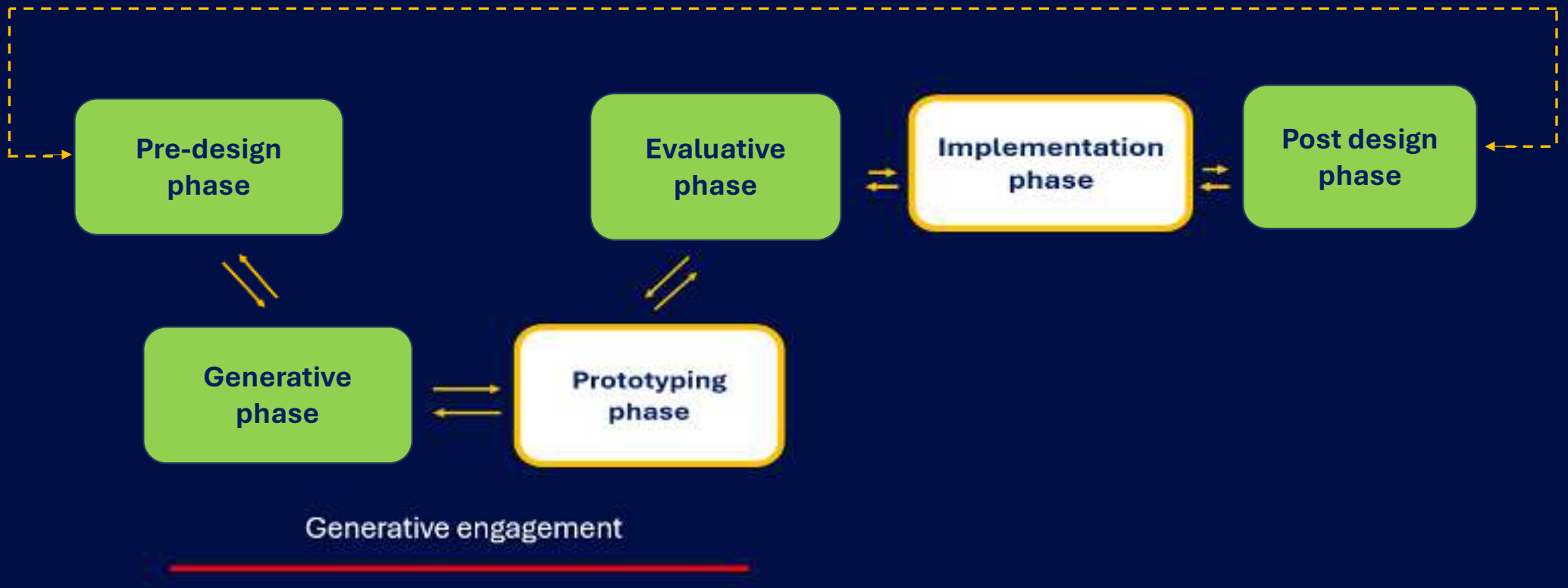
Bate, P., & Robert, G. (2007). *Bringing User Experience to Healthcare Improvement: The Concepts, Methods, and Practices of Experience-Based Design* (1st ed.). CRC Press.

Generative co-design



Sanders, E. B. N., & Stappers, P. J. (2014). Probes, toolkits and prototypes: three approaches to making in codesigning. *CoDesign*, *10*(1), 5–14. https://doi.org/10.1080/15710882.2014.88818

Generative co-design for mHealth



Noorbergen, T. J., Adam, M. T. P., Teubner, T., & Collins, C. E. (2021). Using co-design in mobile health system development: A qualitative study with experts in co-design and mobile health system development. *JMIR mHealth and uHealth, 9*(11), e27896. https://doi.org/10.2196/27896

Generative co-design for mHealth Case Study

Novel mobile exercise app for people with lower limb pain

Principle Investigator: Rana Hinman
Chief Investigator: Rachel Nelligan
Department: Centre for Health and Sports Medicine (CHESM)

Pre-design phase

- Prior research on exercises to manage lower limb pain and app development
- Already had a network of people to recruit co-designers from

Aim: co-design an evidence based mobile exercise app *with* people with lived experience of lower limb pain *for* people with lower limb pain to help self manage pain with exercise

Project phases

Generative phase

- Recruited 16 co-designers

Participant primary role	Number
People with lived experience of lower joint pain	7
Osteoarthritis researchers	4
Digital health researchers	2
GP	1
Software engineers	2
Total	16

- Ran 6 co-design workshops collaboratively exploring user experiences, needs and preferences
- We used low fidelity methods and digital tools to collect ideas for the mobile app features, content, design and information formats

Prototyping phase



Evaluative phase

Principles of good consumer involvement in health and medical research – Part 2

- Support participation
- Reciprocity
- Safety



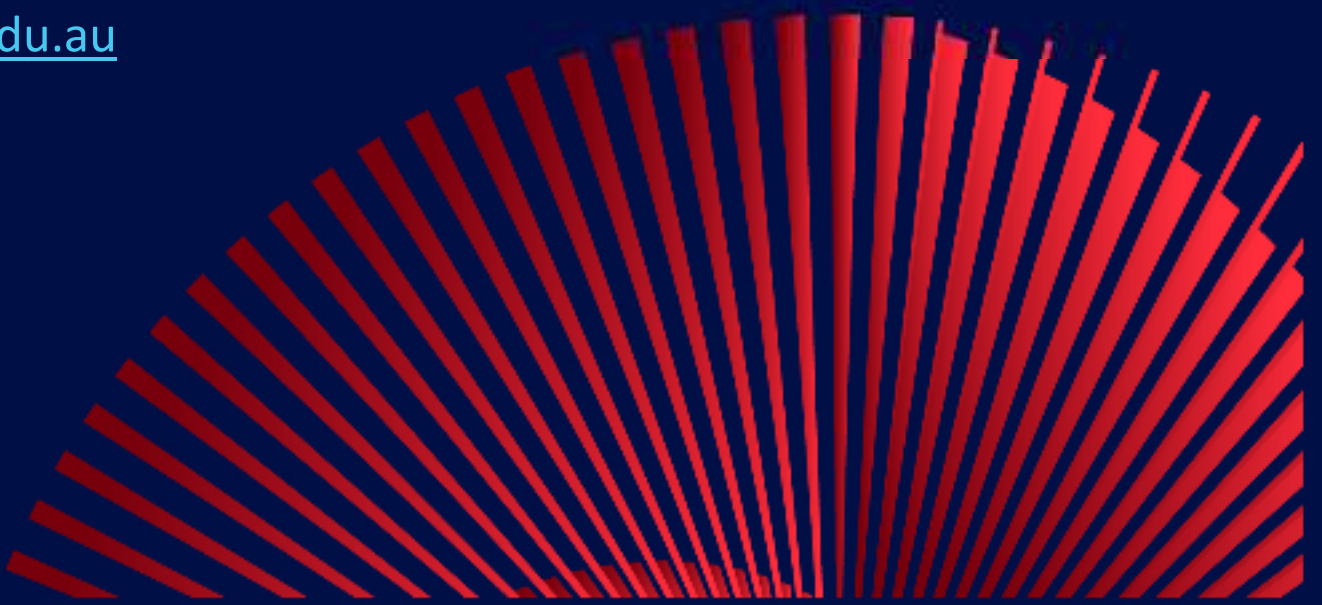
How we can support you

Grant development support – can provide methodological and ethics application support

Subscription model – provide advice on and design project plans with you. Can be multi-nodal across MISCH.

Thank you

- Website:-https://clinicalresearch.mdhs.unimelb.edu.au/
- Email:- misch-info@unimelb.edu.au
- X:- @MISCHHub



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Survey for feedback

