

insights

NDTi Insights give you the most important bits of learning from a piece of work by the National Development team for Inclusion (NDTi). We aim to make them quick to read; they point to more detailed materials for those who want more information.

Co-production with people with long-term conditions

Who should read this?

Anyone who is planning to use co-production to address a service issue or make change.

Background

In 2014 the NHS East of England Strategic Clinical Network (SCN) commissioned NDTi to run a programme to pilot ways of embedding and evaluating co-production to support people with long-term conditions.

NDTi supported six sites in the East of England, each addressing a different service issue, through a combination of Action Learning Sets and more in-depth support. The programme ran from early 2015 to early 2016.

Purpose

The programme was evaluated by NDTi through interviews and surveys with people who were involved in the co-production projects. The purpose of this Insights report is to share what was learnt through the evaluation about working in coproduction.

Plain English summary

In 2014 NHS East of England asked the National Development Team for Inclusion (NDTi) to run a programme to help them to use co-production to support people with long-term conditions.

This Insights is a summary of the key things that have been learnt about co-production through the programme. We hope this will be useful for other groups and projects who want to use co-production to address a service issue or make change.

Main findings

From the evaluation of this programme, we have identified 8 key learning points for the future development of co-production. These can be used to inform future initiatives.

1. You cannot co-produce a solution if you have not co-produced the identification of the problem/challenge

Co-production is not a tool that services or professionals can use to develop a (coowned) solution to a problem that they have defined on their own without the involvement of people who use services. This, in turn, has a knock-on impact on the point below about time and expectations. Co-production means involving people from the start – and it may be necessary to go back to the start and revisit things that services and professionals believed they already had answers to.

2. Co-production means everyone's active involvement

The clue is in the name! Co-production is not about handing over responsibility to someone else, it is about all partners retaining an active involvement in order to bring their particular knowledge and expertise to the work, along with their authority networks and connections. The disengagement of any one partner weakens the enterprise. It is particularly important that diverse groups of people, such as those who use services, are represented by those who are well connected with and understand the issues of concern to the wider community.

3. Co-production does not work if people have pre-defined answers

Linked to the first point co-production means all participants being willing to explore different ways forward to those they might have started out with, and putting pre-determined solutions to one side. If there are genuine non-negotiables around an issue, these have to be declared at the outset and everyone be aware of them and accept them prior to engaging in co-production. Beyond that, people's favoured ways forward have to be up for negotiation – otherwise tensions will arise and co-production is unlikely to work.



Further NDTi reports

A guide on co-production with older people:

www.ndti.org.uk/who-wereconcerned-with/ageing-andolder-people/co-productionguide/

This report

A copy of the full report is available via our website:

<u>Co-production support for</u> <u>people with long-term health</u> <u>conditions</u>

For more information on our work on co-production, please visit the NDTi website

www.ndti.org.uk

For more information on our co-production work, please contact Bill Love on 01225 789135 or email <u>Bill.Love@ndti.org.uk</u>

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4. Leadership styles needs to be facilitative and appropriate

Leaders will be found in different places in co-production, not just in a manager or similar who is responsible to the statutory sector for delivering change. Those leaders need to be identified and appointed on the basis of their abilities to bring together a facilitative and creative approach, networking skills and a focus on delivering outcomes.

5. Do not expect short-term service change when starting out with coproduction - set realistic expectations for outcomes

It takes time to undertake effective co-production. Firstly, people need to understand the nature of co-production and how to take it forward. Secondly there needs to be trust and understanding between the different parties. The most rapid progress was made where key players understood the concepts and knew each other before this work started. Where those (and other things) are not in place, additional time is needed. Whilst there will be short-term learning and change achieved, this is more likely to be around behaviour and process (see below) than actual service change.

6. The starting point for change is cultural and behavioural

The first thing that will be seen and observed when using co-production will be different behaviours and actions by all the partners to a co-produced change. Listening to and acting upon information that was not previously heard, operating in different ways to include people, considering different types of solutions – these are all inevitable consequences of co-production. They will therefore be the things that can be seen and evidenced before service change takes place.

7. It is essential to evidence the outcomes of co-production

Given that co-production is time and resource intensive, and often requires people who use services to give their time up to participate, it is essential that the benefits of co-production can be evidenced. This means placing the collection of data and information about the outcomes of a co-produced initiative as an early agenda item and involving people in the work who have the skills, time and access to information.

8. It is different everywhere

Given all the above points, and the huge variety of issues and organisational constructs within which co-production can be used, there is no template for how to do it. There are a series of questions that can be put, and issues to be considered (the points in this section being amongst them) but there is no set way to go about co-producing a service change – beyond adherence to the <u>core</u> <u>principles</u> of what it is and what it is not.



East of England Clinical Networks