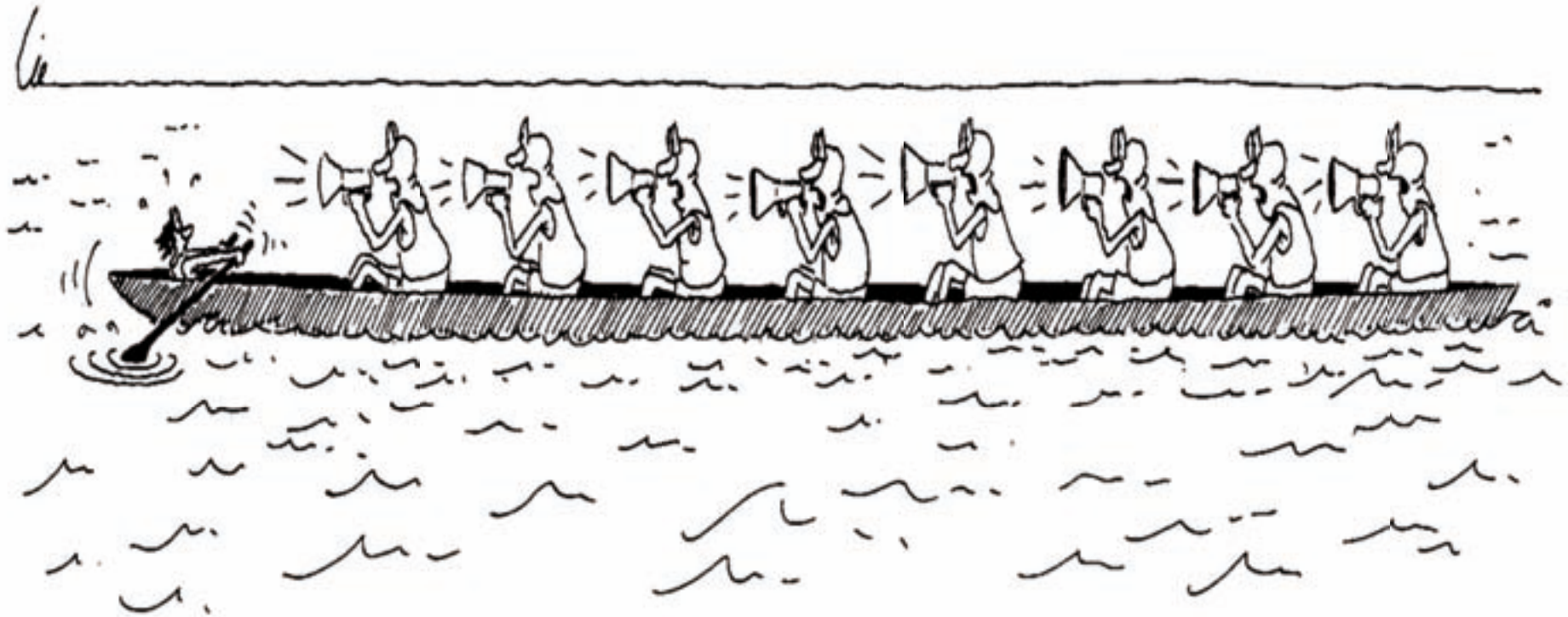


Co-production and knowledge transfer

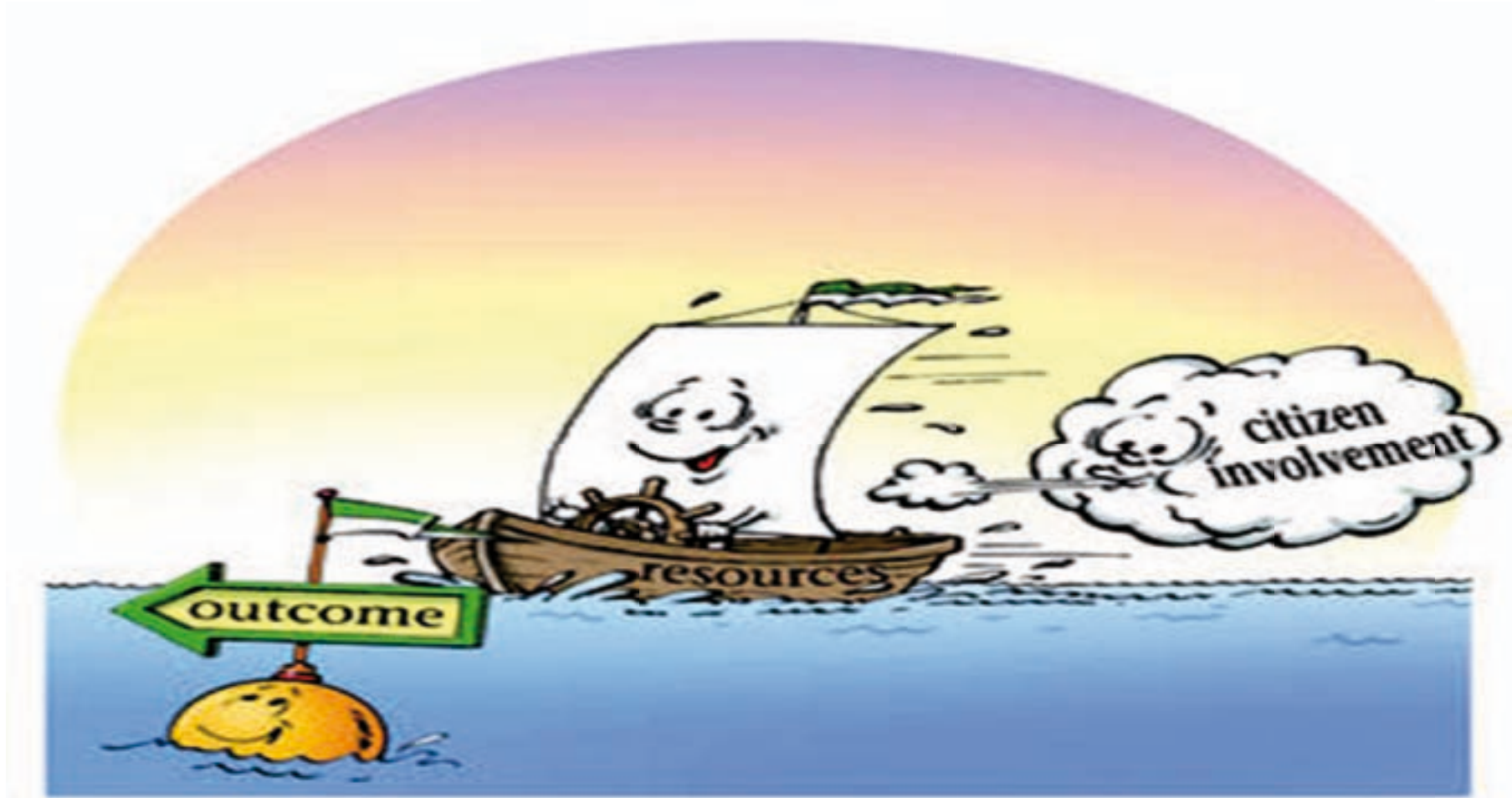
Professor Raghu Raghavan

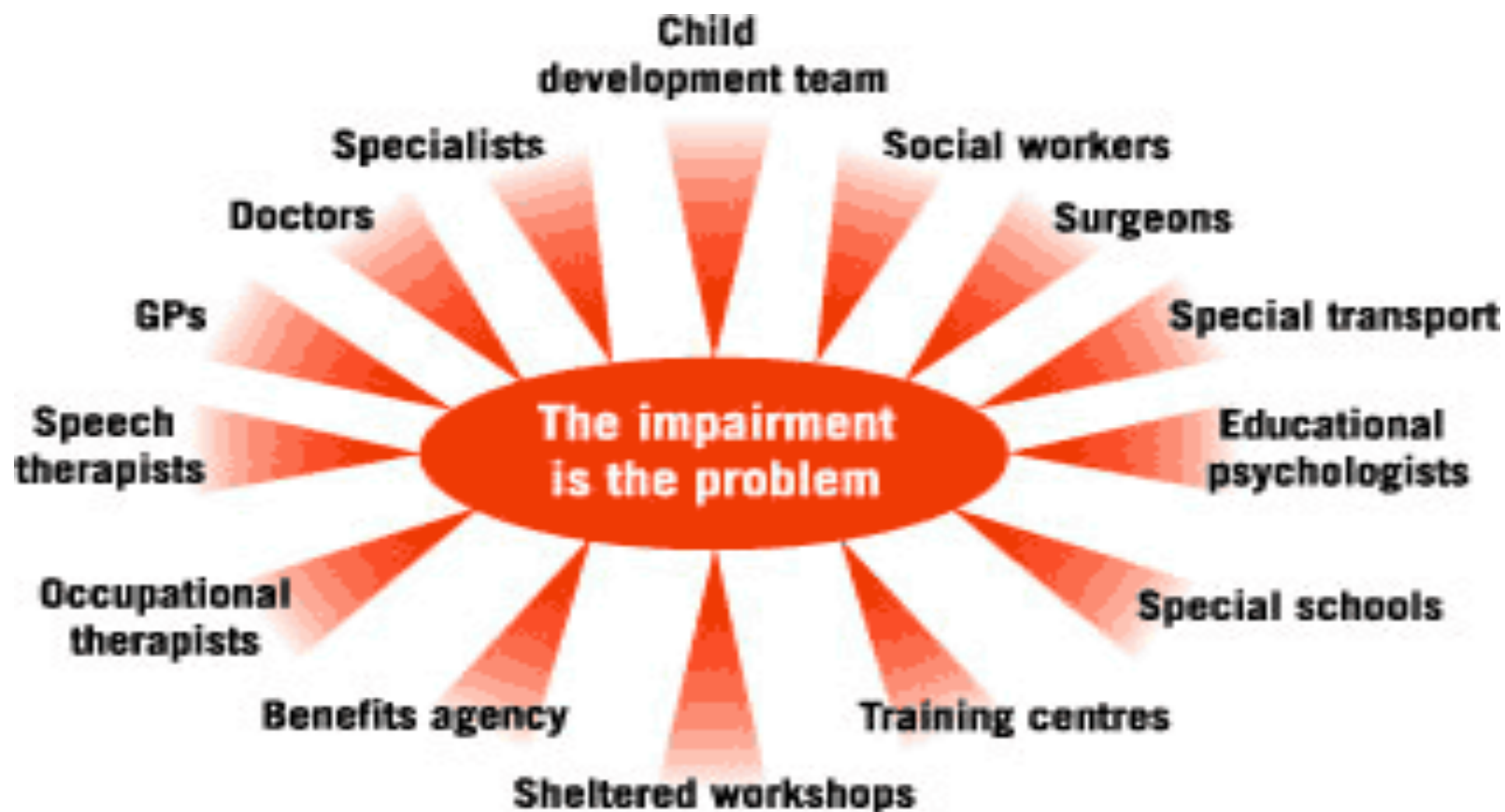


How to move from top down service delivery



To co-produced personal and social outcomes





Disabled people as passive receivers of services aimed at cure or management



**Disabled people as active fighters for equality
working in partnership with allies.**

What is co-production?

- Co-production is not just a word, it is not just a concept, **it is a meeting of minds coming together to find a shared solution.** In practice, it involves **people who use services being consulted, included and working together from the start to the end** of any project that affects them (Think Local Act Personal 2011)

What is co-production?

- A way of working whereby citizens and decision makers, or people who use services, family carers and service providers **work together** to create a decision or service which **works for them all**. The approach is value driven and build on the principle that **those who use service are best placed to help to design it.**

It's just
that he's never
seen anyone talking
out of their arse
before!

Social
Model

Lecture

How the
handicapped
can learn
cope and
to terms
there less
than norm
lives.

A.N.Expert

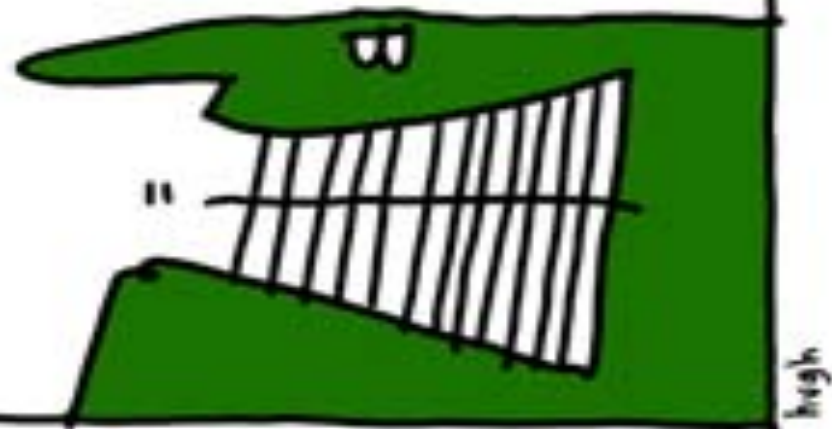
Crippen

© 11.11.09

Key features

- Define people who use services **as assets with skills**
- Break down the barriers between people who use services and professionals
- Build on people's existing **capabilities**
- Include **reciprocity** (people get something back) and **mutuality** (people working together to achieve their shared interests)
- Work with peer & personal support networks along side professional workers
- **Facilitate services** by helping organisations to become **agents for change** rather than just being service providers

IF YOU'RE NOT
CREATING TROUBLE,
YOU'RE NOT CREATING
MUCH.



Co-production and participation

- **Participation** – being consulted
- Co-production – **being equal partners and co-creators**
- Co-production involves:
 - **Co-design (planning of services)**
 - **Co-decision making in the allocation of resources**
 - **Co-delivery of services**
 - **Co-evaluation of services**

Types of Co-production

Compliance
(Descriptive)

Support
(intermediate)

Transformation

∨ <

∨

> ∨

Levels of co-production

- **Descriptive** – users and carers working together to achieve individual outcomes, but **activities cannot challenge the way services are delivered**
- **Intermediate** – recognition and mutual respect
- **Transformative** – people who use services are **recognised as experts** in their own right

Transformative Co-production

- Professionals & users work in **equal partnerships toward shared goals**
- Movement from involvement & participation to users and carers having **equal, meaningful and more powerful role in services**
- Users and carers involved **in all aspects of service planning, development and actual delivery of services**

- Power and resources are transferred from managers to **users and carers**
- The **assets** of users, carers and staff are **valued**
- **Recognising** the contribution of all
- **Frontline staff** are seen to have more autonomy and a greater **role in planning** process

Principles of Co-production

- **EQUALITY**
- **DIVERSITY**
- **ACCESSIBILITY**
- **RECIPROCITY**



EQUALITY – everyone has assets

- Them & US culture Vs Equal partners
- Shift in power
- Everyone involved will need to get to know each other
- Training and support
- Equality in the principles and practice of co-production



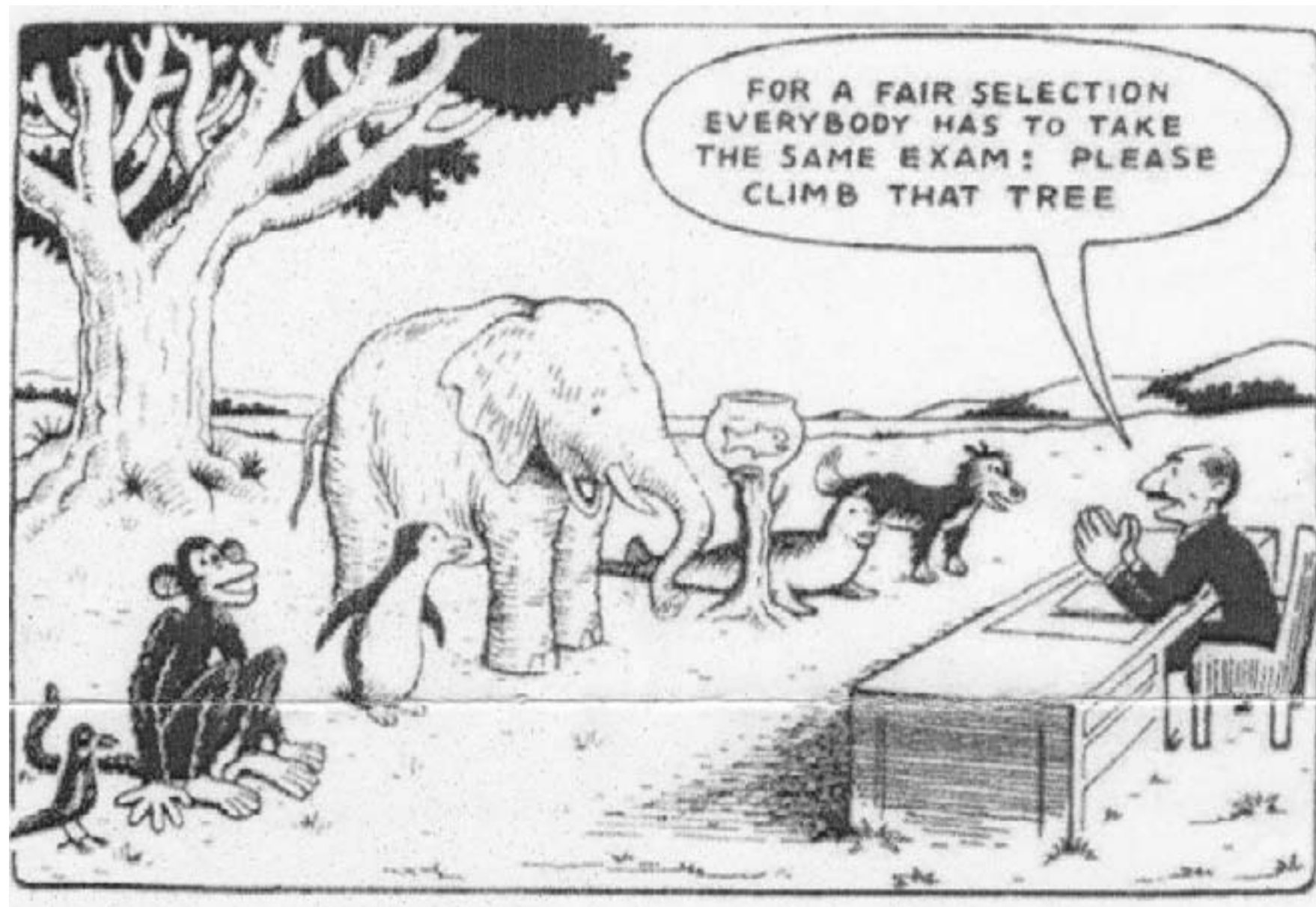
Diversity –proactive about diversity

- Involvement and participation from under-represented/ excluded groups
- People from Black and Minority Ethnic communities
- Lesbian, Gay, bisexual and transgendered communities
- People who communicate differently
- People with dementia
- Older people who need high level of support
- People not affiliated to organised group or community



Accessibility – fundamental principle

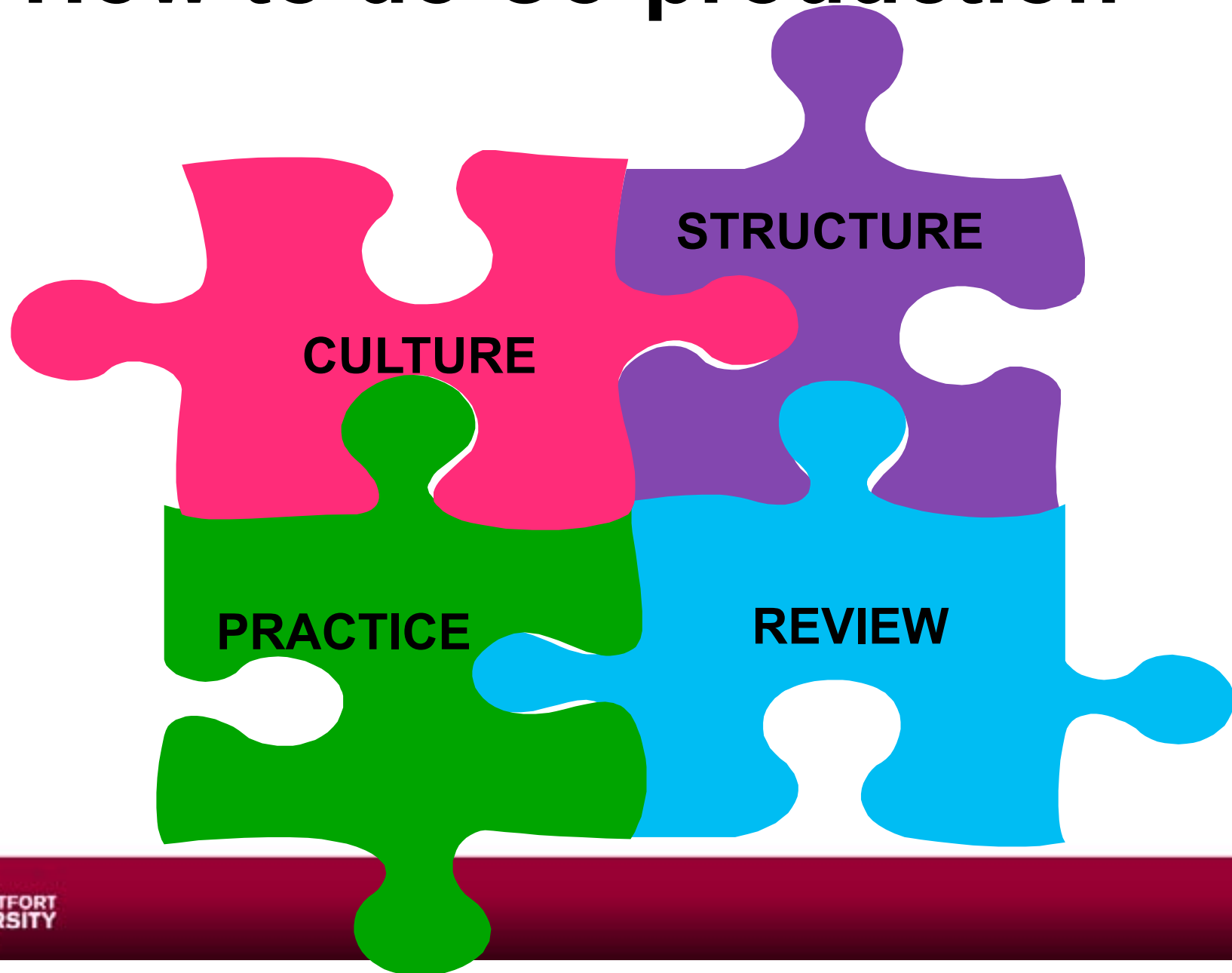
- Making sure that everyone has the same opportunity to take part in an activity in a way that suits them best
- Accessible information
- Easy read and understanding language
- Availability and sharing of information
- Confidentiality
- Time and Timing



Reciprocity – a key concept

- Mutuality and all parties involved having responsibilities
- Flexibility
- Clear communication and raising people's awareness

How to do Co-production



CULTURE

- Move from delivery to **facilitating and enabling services**
- Ensure that CP runs through the **culture of the organisation**
- Built on shared understanding, clear **set of principles** for putting this into action and the **benefits and outcomes** that will be achieved
- Being **risk aware** rather than risk averse

STRUCTURE

- **Involve everyone** who will be taking part in CP
- Value and reward people
- Ensure adequate **resources** to cover the cost of CP activities
- CP supported by a **strategy** that describes how things are going to be communicated
- **Build** on existing structures and resources

PRACTICE

- **Accessible to everyone** taking part and no one is excluded
- Everyone has **information for participation and decision making**
- Everyone involved has training on the **philosophy and principles of CP**
- **Frontline staff** to work with CP
- Community **involvement/ social capital**
- Promote the **commissioning** of services

REVIEW

- Regular reviews to ensure that CP is **making a real difference** and is following agreed principles
- Co-produce reviews and evaluations
- Use reviews for **continuous learning**
- Ensure **visibility of impact** of CP with users and carers

“ No pessimist ever discovered the secrets of the stars, or sailed to an unearthed land, or opened a new heaven to the human spirit”

(Helen Keller)

Examples

- My way project – McIntyre. CP and personalisation are part of the culture of the whole organisation. Senior management has put CP into action, which means that this is valued and avoids the assumption that CP will just happen

Examples: Birmingham City Council Adults and Communities Directorate

- Organises an annual opportunities fair for disabled people. After the first event, volunteers involved in all the way through the planning of the next event. This meant that they were part of the decision-making process and made choices about the venue, structure of the fair, marketing and deciding on people's roles
- The directorate makes sure that there is good communication with users and carers. This means finding out each persons' preference and using accessible formats

Northamptonshire Community Housing Network

- The staff involved in developing housing strategy had no experience of sharing power and responsibility. In the past plans were all about what services wanted to do. Introducing CP was challenging for staff and it was life-changing. The professionals involved have found it very rewarding to hand over some power and to support people who are fully involved.

Altogether Now

- This initiative involved moving from a 'deficit- based approach' which emphasised what people with dementia could not do – to an asset based approach. It used a model of shared living that built on the strengths and contributions of people living with dementia, their families and staff.
- The new approach – an exchange model – recognised that everyone is an expert and assessment involved negotiation between different people, including people with dementia. This contrasts with the procedural model of assessment that focus on professionals determining and asking questions, with lots of form filling



“Give a man a fish and you feed him for a day. Teach a man to fish and you feed him for a life time”

Confucius

Features of Co-production

- It can be used with different people who use social care services
- Service users are experts in determining their own requirements
- Enables Users to play an active role in meeting their own needs
- Mutual support between users, promoting new mechanisms of peer support
- The broader community (including the family) are active in the production of support, offering a collective model of CP

Co-production framework

LEGAL

- The Duty to Involve – local authorities must consult individuals, groups, businesses or organisations likely to be affected by their actions
- The NHS duty to Involve
- Health Watch
- Equality Legislation
- Right to Control (Welfare Reform Act 2009)

POLICY

- A Vision for Adult Social Care: Capable communities and Active Citizens (DH 2010)
- The NHS White Paper, Equality and Excellence: Liberating the NHS (DH 2010)
- Caring for our future: Reforming Care and Support (HM Government 2012)
- Think Local Act Personal Partnership



Strengths of Co-production

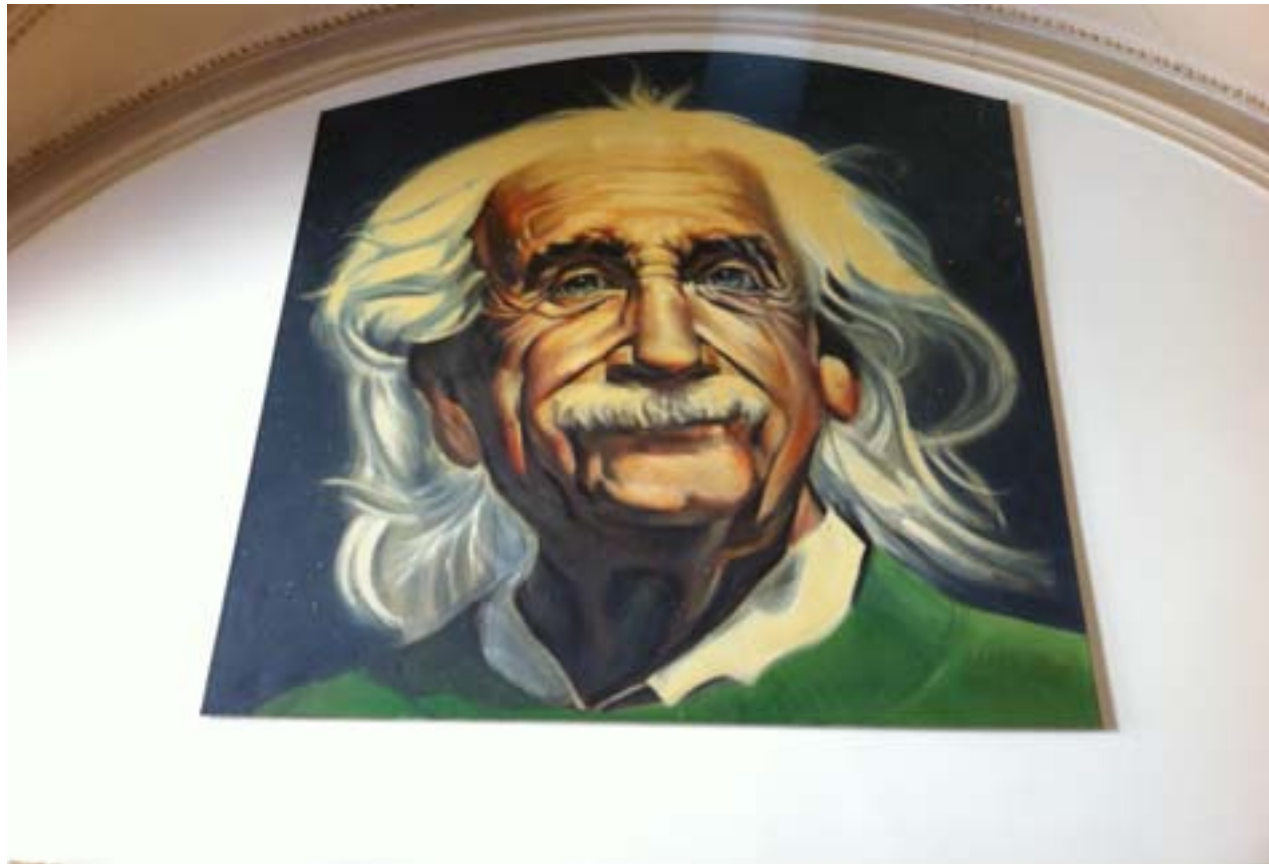
- Value for money
- Incorporation of expertise from users and carers
- Health benefits and prevention
- Practical skills
- Build social capital – positive benefits for Social capital through building supportive relationships and increasing personal self confidence and activity

Limitations

- Co-productive schemes need to build as well as reinforce social capital
- CP may challenge existing framework of service provision
- CP schemes require sustained, secure and organisational support, but also need to be independent
- CP requires support for staff

Conclusion

- Co-production is a complex concept with a range of implications for social care.
 - Challenges existing service models and delivery patterns
 - Questions assumptions of Users as the passive consumers rather than the active producers of care
 - Supports collective rather than primarily one-to one-service relationships
 - Demands renegotiation and restructuring of relationships between Users and professionals , which in turn requires the empowerment of both parties



“Imagination is more important than knowledge. Knowledge is limited. Imagination encircles the world”

(Albert Einstein)

**“There are only two days in the year that nothing can be done. One is called yesterday and the other is called tomorrow, so today is the right day to love, believe, do and mostly live”
(Dalai Lama)**

Further information please
contact

Raghu Raghavan

rraghavan@dmu.ac.uk