Co-producing with Carers in Health Settings: An Introduction

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Welcome!

The plan:
- Co-delivery with Unpaid Carers
- What is Co-production
- Spectrum of Interactions: Co-production in Practice
- Why should I do Co-production

1030-1130

Session Interaction:
- You can use the chat function to add comments or ask questions throughout the session
- Dedicated chat checkers will monitor the chat and respond to comments and questions throughout
- A written response to all questions will be circulated with the slides following the session
Activity: What is Co-production??

- Zoom Poll – How would you rate your current understanding of the term co-production? Choose one of the options on screen.

- In the chat write 3 words that you would use to describe your understanding and/or experience of co-production

- Chat checkers to feedback common or interesting words
In a nutshell...

- citizens
- community organising
- people + professionals
- co-production involvement
- organisations
- collaboration
Co-production: definition

Co-production (of public services) means that people who provide and deliver services, and people who access and receive services, share power and responsibility, and work together for mutual benefit in equal, reciprocal and caring relationships.

It enables:

• people to access relevant and meaningful support when they need it;
• services to be effective and make a positive difference in people’s lives;
• people, services and communities to become more effective agents of change.
Video: co-production is…

(English subtitles)
https://www.youtube.com/watch?v=0vAOeWBDoSA
(Isdeitlau Cymraeg)
https://www.youtube.com/watch?v=8OV0v9Y4c8s
Values of Co-production

- Value everyone and build on their STRENGTHS
- Develop NETWORKS of mutual support that expand across silos
- Focus on OUTCOMES and people’s lives, not systems: Outcomes rather than Outputs
- ENABLE people to be change makers
- Work on the basis of great RELATIONSHIPS built on trust, that share power and responsibility
- Value everyone and build on their STRENGTHS
A spectrum of interactions
Activity: Doing To, Doing For, Doing With

• You will hear two case studies of a project activity or piece of work

• Following each case study, through the use of a zoom poll, you will be asked to decide whether the activity being described in the case study falls within the Doing To, Doing For or Doing With category

• We would encourage you to also use the chat function to explain your thinking or reasoning for your choice
The Madeleine Project
Madeleine has dementia and Colin is her carer. They are working with the local health team and a university on the ‘Madeleine Project’ – an attempt to design health services around their lives. One idea this group came up with was to hold memory clinics in Madeleine and Colin’s local GP practice instead of a less familiar central service (which is also further away). Everyone was up for this, the first session went ahead and was very successful. The group then received a notification from the local health board, that this could not take place because ‘it would change the nature of the relationship between the health board and the GP practice’. The dementia consultant has challenged this but to date with no effect.
Service Specifications review
Three councils pooled their budgets for day care. Commissioners created the new service specification by combining the previous three local contracts. Information from each council’s Joint Strategic Needs Assessment and Market Position Statement was used to inform the new service. The new service specification contained clear details of the activities and outputs that should be delivered and the anticipated unit costs of these. The total budget for the new service was reduced by 15% as commissioners needed to make savings. Commissioners did not talk to people who use services or carers. They did not speak to provider organisations because they were worried about breaching procurement law.
Activity: Identifying the Values of Co-production

- You will hear about a live piece of work that our unpaid carer co-delivers are involved in.

- As you are listening to the piece of work being described, use the chat function to identify which (if any) of the 5 values of co-production are being demonstrated.

Value Strengths
Develop Networks
Outcomes vs. Outputs
Relationships
Enable Change
Why (and why now)

- “bad help”
  - disempowering services create dependency

- failure demand
  - additional pressure on services and citizens

- austerity + post Covid
  - socio-eco context: budget pressures & increasing demand

- customer expectation
  - digital access & responsiveness

- legislation
  - + growing body of public policy
    - Equality Act 2010 (UK)
      - Public Sector Equality Duty
      - Socio-economic Duty
    - Social Service and Wellbeing Act (Wales) 2014
    - Wellbeing of Future Generations Act (Wales) 2015
    - Health and Social Care (Quality and Engagement) (Wales) Act 2020
Why (and why now)

...Because it works!!!!!
What’s Next?

**Taster Session Take 2**
- Tuesday 16<sup>th</sup> November 2021 2:00-3:00

**Implementation Session**
- Wednesday 1<sup>st</sup> December 2021 10:30-3:30 (4 hours with a lunch break)

**Co-production Pilots:**
- Mentoring and consultancy will be available for 3 projects across Wales
- This support will be fully funded through the Carer Aware programme
- We will be inviting expressions of interest following the Implementation Session on the 1<sup>st</sup> December*
Top tips!

• Be the spark: the one who says “so what are we going to do about it?”
• Find the people on the same wavelength.
• Start small.
• It’s okay to get it wrong at first. Adjust. Repeat.
• It’s a journey not a tick box.

“You can’t learn this by being told it, you need to get stuck in and do it.”

• It all boils down to relationships.
• Push at the open doors: work with those ready to work with you.
• Keep showing up (even - especially - when it’s hard).
• Learn to handle challenging conversations well.
• Communicate!!!
• Keep asking: “Whose agenda is it?”

“If you trust me, I will trust you.”
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