

Partners in Care and Health **Co-production, an in depth look** with a focus on people with a learning disability and autistic people

15th March 2024

The **Local Government Association** and **Association of Directors of Adult Social Services** are **Partners in Care and Health** (PCH) working with well-respected organisations.

PCH helps councils to improve the way they deliver adult social care and public health services and helps Government understand the challenges faced by the sector.

The programme is a trusted network for developing and sharing best practice, developing tools and techniques, providing support and building connections.

It is funded by Government and offered to councils without charge.

www.local.gov.uk/PCH



Welcome and introduction

Kirstie Haines PCH and expert co-chairs
Isaac Samuels and Jez Harris



Housekeeping

- Please sign up for the workshops if you haven't already done so. Marie has the sign up sheets
- There is a hearing loop in this room if you need to use it
- We have asked you if you want to be approached to network at lunch – if you said no your name badge has red dot on it, so colleagues be aware of this.
- We have a quiet room so please feel free to leave and use it at any time
- There won't be a fire alarm practice today so if the alarm sounds the evacuation information is on each table
- Toilets including disabled toilets are in the corridor outside.



Why does co-production matter and the current national context

Beverley Tarka

Director for Adults and Health Haringey Council and current
Association of Directors of Adult Social Services (ADASS)
President



Why Does Co-Production Matter?

Beverley Tarka

Director of Adults, Health and Communities, Haringey
Council.

ADASS President

Co-Production

- ‘...a way of working, whereby everybody works together on an equal basis to create a service or come to a decision which works for them all’ (TLAP).
- *“Co-production has enriched my life. It has given me a purpose and a voice”*
- We are on a journey and improving all the time.

Reimagine care and support with people who draw on it

Improve assessment and care planning to put people in the lead

Community capacity for wellbeing and prevention

More people live at home or in a place they call home

Better support for carers

Join up care and support for fulfilled lives

More accessible and affordable for everyone

Diverse and sustainable providers, focused on outcomes

Harness the potential of digital technology

Redesign and reward the workforce

From a service based on a council offer to rights and entitlements and decisions by and with people

- **S** Co-produce local strategy, change language and culture, reassert rights in current legislation
- **M** Public dialogue to redefine rights and responsibilities, national coproduction body, review legal framework, provide support to uphold rights
- **L** Renewed and mutually agreed social contract

ADASS – our starting position

- Recognition from ADASS Trustees that we needed to improve our approach to coproduction.
 - Events
 - Policy

What's Next?

- Implement structured approach to co-production.
- Influencing other organisations.
- Comms and influencing.
- Spring Survey.

WORKSHOP ROOMS AM:

Workshop 1 Peer Reviews

Westminster Room 8th floor

Workshop 2 Co-production Recipe

Smith Square 1 ground floor

Workshop 3 West Midlands

Victoria Room 8th floor

Workshop 4 Sheffield

Smith Square 4 ground floor



Expert involvement in PCH Peer Reviews

Jez Harris and Kirstie Haines



Building the Right Support Peer Review.



Building the Right Support Peer Review Purpose

“We want to find out how well local partners are doing to make sure that all people with a learning disability and autistic people lead a perfectly ordinary life. To live in an ordinary house on an ordinary street, have relationships, work, fun. To feel seen, heard and respected. To be a valued member of society. Exactly the same things you want for yourselves and your loved ones”

Trevor and Callum Lived Experience Peer Reviewers



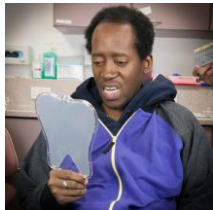
Peer Review explanation



Peer reviews look at what and how things can improve (get better) and what is working well already



A peer team is invited by the area as 'critical friends'. This means the team all bring their experience of doing this work.



We hold up a mirror and reflect back what is happening. We don't share who has said what. We ask people to be open and honest with us.



Building the Right Support Peer Challenge

- Building the Right Support Peer Reviews were first offered to local systems in 2018. Funded by NHSE.
- Uses established ‘peer challenge’ methodology but with a focus on the local system not just looking at councils.
- Differs from ‘traditional’ peer reviews because:
 - People with lived experience, NHSE colleagues and social care providers are part of the review team – **more than council officers.**
 - Currently the **only peer challenge that requires people with lived experience to be members of the review team.** We pay lived experience reviewers.
 - Final presentation includes a **section written by lived experience reviewers.**
 - Headline **findings and recommendations are written and agreed by all reviewers** – not just the lead reviewer and review manager.



Peer Review Team

People with lived experience.

Current or former directors of adult social care and children's services.

Assistant directors of adult social care or/and children's services.

NHSE national leads with responsibility for people with a learning disability and autistic people.

NHSE regional director/lead with responsibility for people with a learning disability, autistic people, mental health and/or SEND.

ICB, NHSE Specialist provider collaborative and or mental health provider lead commissioners.

Director/senior leader from a social care provider.

NHSE or council lead for quality, diversity or health improvement.

Peer Team Roles

Lead Reviewer

- Pitches level of challenge
- Final arbiter on matters of judgement

Peer Review Manager

- Facilitates the process
- Challenge assumptions
- Support (and look after) the group dynamics
- Manage the relationship with the client/partnership
- Ensure the team have examples & evidence for the final presentation.

Lived Experience Peers

- **Speak to people using services and their family or organisations that support them**
- **Observe boards and partnership meetings to see if the voices of autistic people, people with a learning disability and their families are heard and responded to.**
- **They will speak to staff in different agencies to get a sense of how well they understand what they should/ should not be doing.**
- **Bring their Specialist knowledge and experience**
- **Visit services.**
- **Produce additional insights and recommendations to include the final presentation**

All Reviewers

- Listen and observe
- Collate findings and share with the other peers.
- Be open to challenge.
- Share best practice
- Contribute to the final presentation

Findings and Recommendations



Review findings always need to be triangulated. This is important to ensure that they are credible and drive change.



The insight from all reviewers feed into the final presentation. Lots of different perspectives ensure that we always have something meaningful to say!



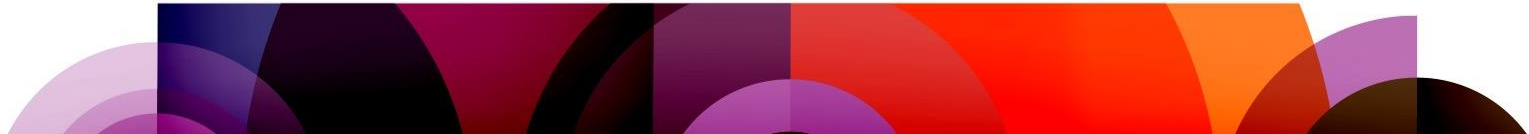
We also include additional slides produced by lived experience peers at the front of the presentation.



Places reviewed consistently feedback that this is the often the most challenging and helpful part of the feedback.



Some Examples of the findings provided by lived experience reviewers



“... what happens is that all the needs that are met for my son [currently] won't be met when he is an adult”

“We can see the crisis coming but sometimes they can't. Where is the life plan for when we aren't here”

Feedback to a Council and ICB about the transition to adult services

- Information is out of date or/and not accessible
- Parents told us the aspirations of their children were not matched by support
- People told us they were worried that they would be “in limbo” before transitions and “drop off the cliff edge” when become adults
- Support often does not happen until it reaches crisis

“Education is not as important as the social needs, as when they become an adult that is the part that stays”

“We don't feel like we've got fair access to information and services”

Feedback to a Council about how local people are being supported.

- *“The values and ethos of Building the Right Support are people living an ordinary life, in an ordinary house, on an ordinary street. What we saw and heard did not reflect this.*
- *For example, we visited an estate of 15 out of character bungalows for people with a range of disabilities, segregated from society. The houses were in poor condition, did not always support the needs of their residents e.g. a fanatical gardener in a powered wheelchair who could not access 2/3rds of their garden. The homes could not be personalised or decorated by the tenants.*
- *We heard that services used nightclubs that held special nights for people with disabilities. Other activities were organised for groups of disabled people. This further segregated instead of integrated the people they supported.*
- *The Learning Disability Partnership Board Experts reported progress regarding changing the language used when speaking to, or about people with disabilities*
- *Organisations and the people they support told us that there is a lack of Easy Read documentation and told us how staff were needing to go above and beyond to produce accessible documentation such as minutes of the Learning Disability Partnership Board meetings.”*

Hearing from people who have taken part in our peer reviews



Hearing from a lived experience peer reviewer:



Callum Elcock –
Building the Right
Support Peer
Reviewer

“I think having a person with lived experience is very important for a review, especially one that looks at services and system that would affect someone like me. We offer a very different perspective on the matter just from having grown up and lived differently to someone without my lived background. I find as an adult autistic that autistic people themselves are more likely to be open and frank with me because they can relate to me more.”

Hosting a Peer Review at Cornwall Council:



Kevin Beveridge is the Area Director for Adult Social Care and the learning disability and autism lead at Cornwall Council

“It takes a level of bravery to invite a peer review team into your work. As a peer host you have to engage with a wide range of partners to make the experience worthwhile. As a leader think about the areas that cause you challenge, identifying your range of key stakeholders and then support the peer team with your enthusiasm, your candour and your willingness to learn.”



Future Plans



Things We Are Working On...

Diversity of Reviewers

- Currently adapting review format for people who cannot/ do not want to spend three or four nights away from home.
- We have been working on increasing the diversity of review teams – average age is coming down – but need to do lots more.

Review methodology

- Piloting new ways of getting more local people involved in reviews – a more flexible approach – that does not rely on interviews on fixed days.
- More time outside of interviews to reflect with lived experience reviewers on their findings and how these fit with other review findings.

Direct Support to ICBs and Councils

- Lived experience peers could do more post-review work with councils that we have found are really struggling to 'get' co-production.



Your reflections and questions

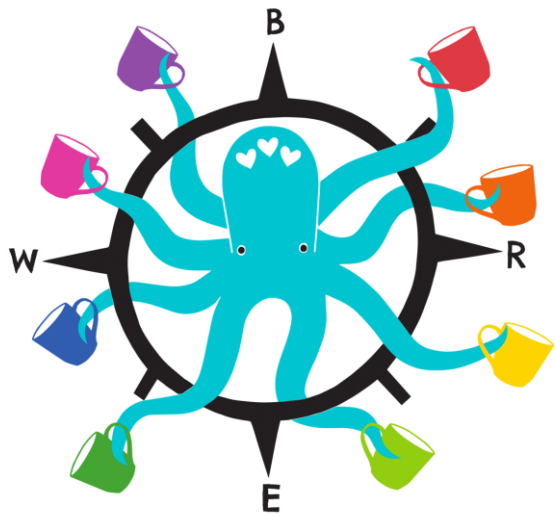


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Our co-production recipe

Isaac Samuels and Naomi Davies from Curators of Change
with Debora Mo SE London ICB/Royal Borough of Greenwich
and Lee Goddard Expert by Experience





CHANGING
THE WORLD
ONE BREW
AT A TIME!

CURATORS
OF CHANGE



OUR COPRODUCTION RECIPE

15 March 2024

Who we are



www.curatorsofchange.com

Naomi Davies



Isaac Samuels



- 1. Respect:** Treat others with kindness, consideration, and empathy.
- 2. Integrity:** Act honestly and ethically in all situations.
- 3. Responsibility:** Take ownership of your actions and obligations.



Joining us today

Lee G

Passionate ,dedicated
coproducer
living in Greenwich



Deborah Mo

Mental Health Commissioning Support and Engagement
Integrated Commissioning Unit Debora.Mo@selondonics.nhs.uk
NHS South East London Integrated Care Board South East London
Integrated Care System www.selondonics.org.uk



Our co production recipe -

*How we try to work differently
and be more human*



We take our time ,
building trust
as we work together



We believe in
learning alongside
others, not telling
people what to do



Our atmosphere is inclusive and
accessible to everyone
, with quiet spaces ,
fidget toys and
creative areas.



We focus on big ideas like
strategy , but based on
real stories and
experiences

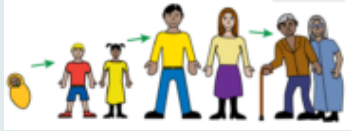




CURATORS OF CHANGE



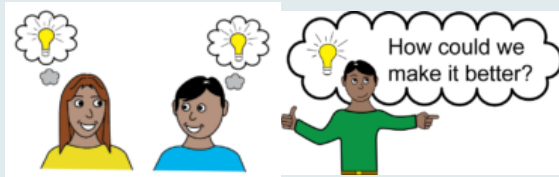
What is Community Reporting?



We support people to tell stories about their own lived experiences.



We record these stories and share them with others.



We talk about the stories so we can learn how to make services better.

Why we do it



So that people:

- Have a voice on the things that matter to them



- Question what other people think



- Help to change things

Community Reporting in 3 stages:

1. Record people's stories

Using smartphones
and tablets



2. Sort the stories

Watch the stories
together.

Decide what we have
learned.

Decide how to share the
stories with other people.



3. Helping other people to learn from our stories

Sharing our stories and talking about them.


Any questions so far?





Guide

Grab a brew



Once you have your brew,
ask someone to be the timer



Each person has time to think
about the questions for ONE
minute

Have your say



Each take it in turns to say
your response
(TWO mins each)



Use the rest of the time to
reflect on what's been said
(no fixing)

Still got some time?



Talk about:
What's not been said?
What are your lasting thoughts?



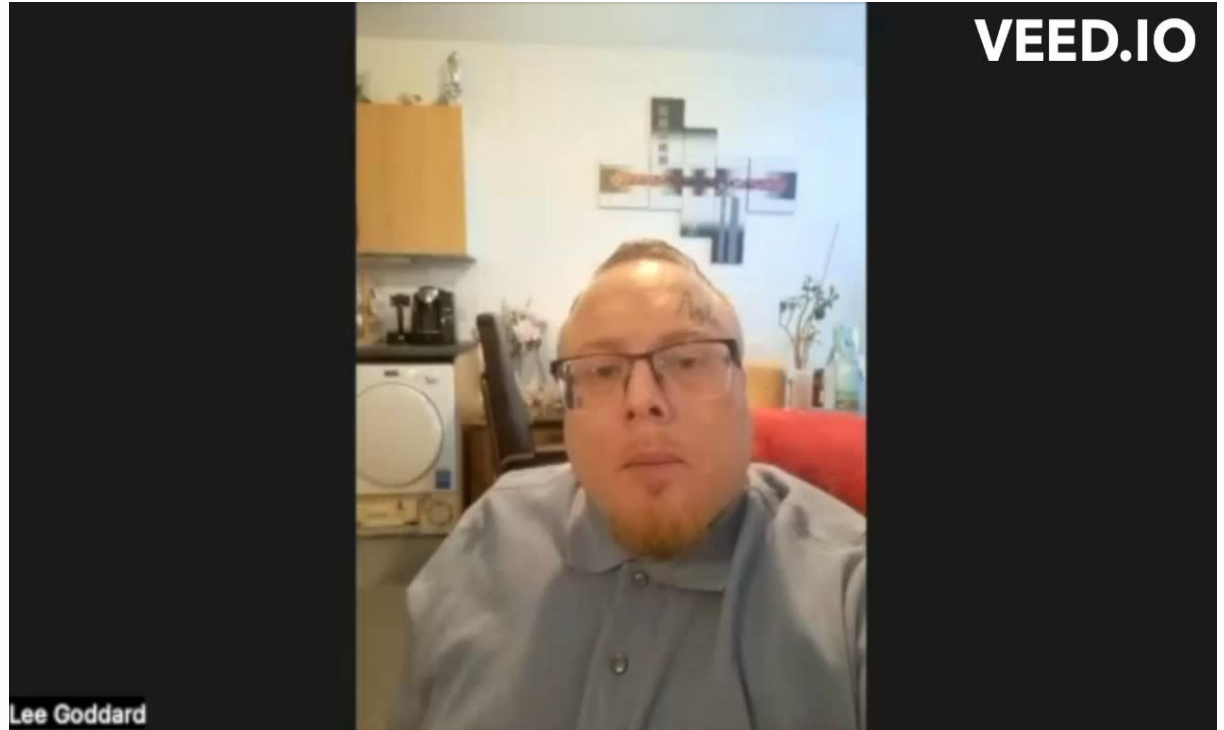
**What did people say
that was important?**



**How did the story make
you feel?**



**What can we learn
from the story?**





SAMARITANS

**CAMPAIGN
AGAINST
LIVING
MISERABLY**

If you're in Wales:



If you're under 25:

THE MIX

0300 123 3393

Open 9am-6pm weekdays

116 123

Always open

0800 58 58 58

Open 5pm - midnight

0800 132 737

Always open

0808 808 4994

Open 4pm - 11pm

Valuing Lived experience, co-production in the West Midlands

Keymn Whervin and Robyn Chappell National Voices
with Susan Eagle Sandwell Council



Valuing Lived Experience

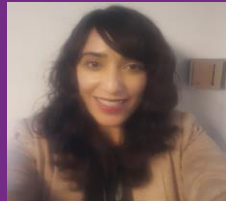
Keymn Whervin
Head of Experience



Robyn Chappell
Lived Experience Partner



Susan Eagle
Sandwell Local Authority



About National Voices

What we do

We advocate for equitable, person centered health and care services, developed through genuine partnerships with people, communities and voluntary sector organisations.

Understanding and advocating

Finding common cause

Connecting and convening

We help people get better care and support



Tell us what you think

1. Do you think the idea is a good one?

Yes

No

Not sure



Lived Experience and Co-production

What we mean

Lived Experience - “the experience of people(s) on whom a social or a combination of issues has had a direct, personal impact.”

(p.5 The Value of Lived Experience in Social Change – Baljeet Sandhu)



Co-production - A way of working together underpinned by principles of inclusion, equity, shared decisions and ownership at all levels especially strategically.



When to co-produce - Especially in complex situations where there is no obvious answer or agreed way to approach a situation

We help people get involved to make care and support better



Benefits of co-production

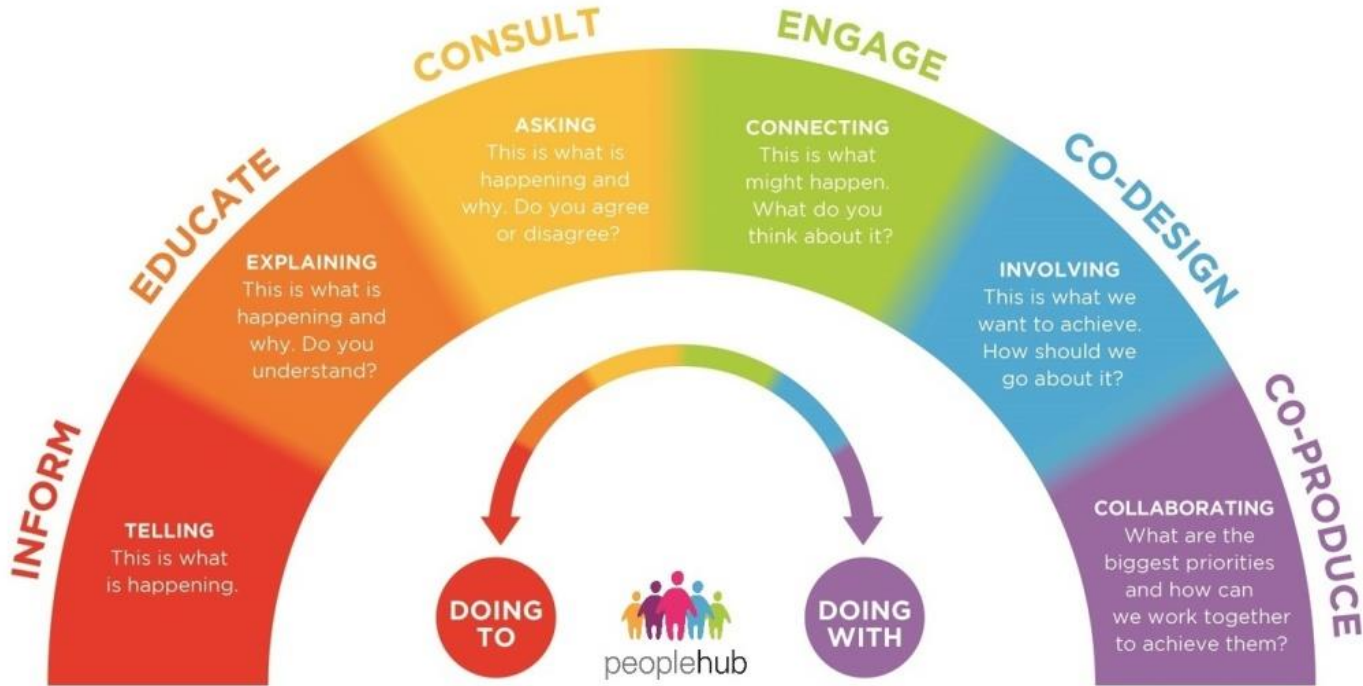
Addressing unequal care and health through shared-decision making, empowerment and inclusivity in the health and social care process.

Key Benefits:

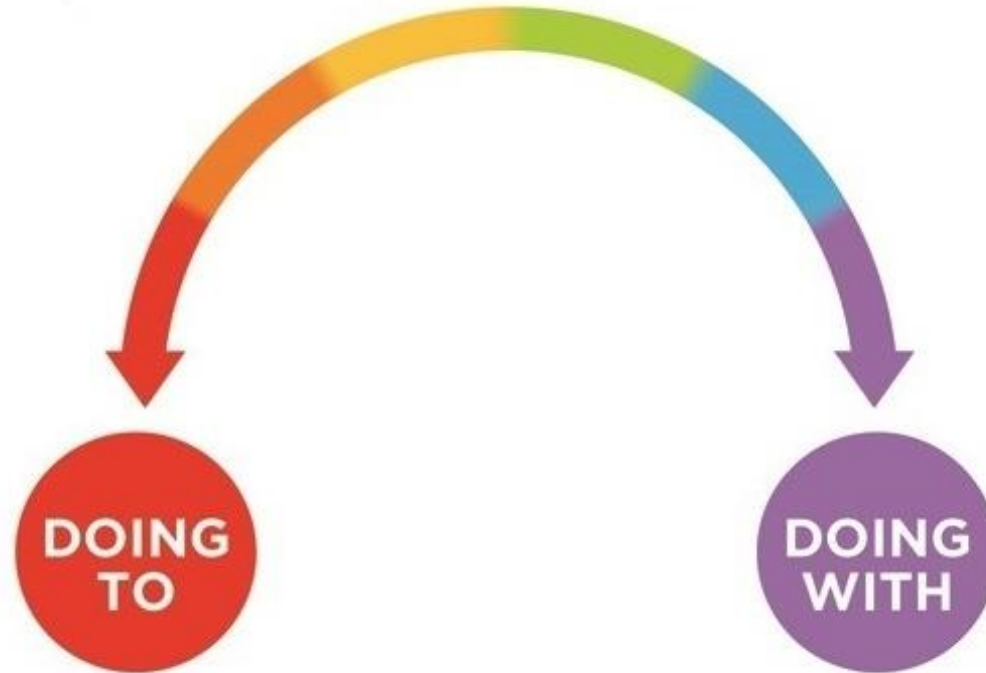
- **Community Empowerment involved**
- **Holistic Approach**
- **Improved Access**



Spectrum of Participation



“To” People – “With” People



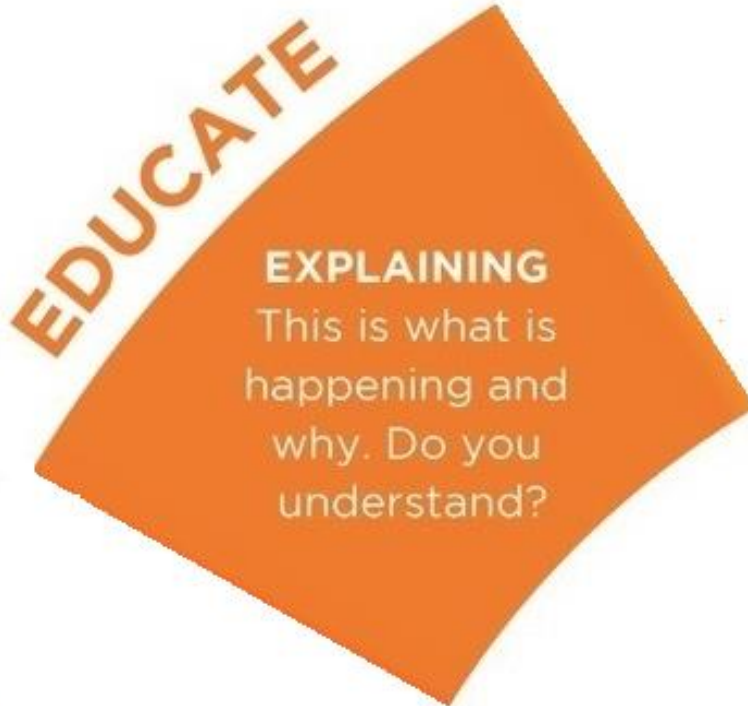
Information



- A statement not a question
- Decision is already made
- No opportunity for or expectation of response
- Can happen readily across large populations



Education



- Decision is already made
- Time is taken to interact with people
- Understand why decision has been reached and impact on them
- No opportunity to debate the decision



Consultation



- Broad population
- Yes or no answer
- Time is taken to explain pros and cons of each answer
- Likely to be opportunity to influence the outcome



Engagement



- Connect more deeply – smaller group of people
- Gather opinions and ideas on a decision
- Input will be influential
- Starts from a more open position



Co-design



- How best to achieve an objective which is already set
- Discussion is about process of implementation
- People will influence multiple decisions
- Fairly small group



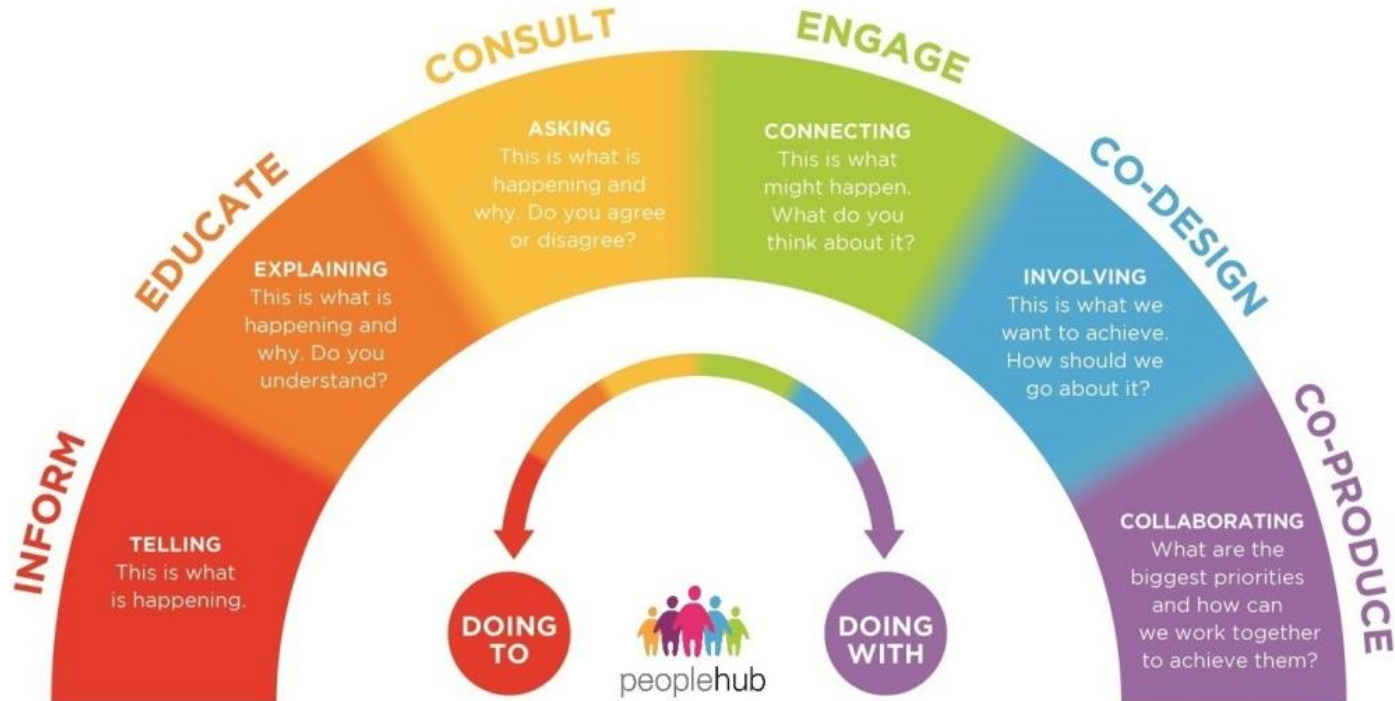
Co-Production



- Exploring and setting priorities together
- Strategic level
- Influencing use of resources
- Working in-depth and long-term
- Small group of consistent people




Spectrum of Participation



Which type of participation?

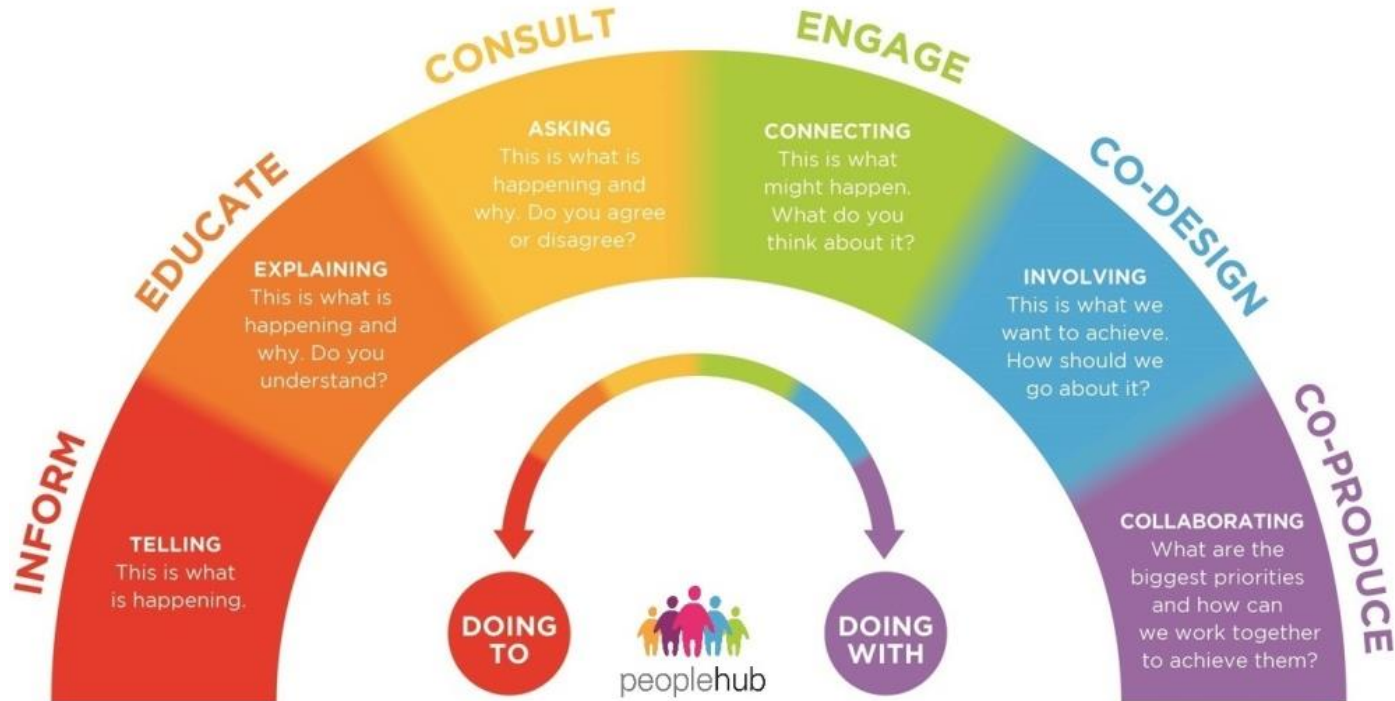
The **key factor** in determining which type of participation is most suitable is the **degree of openness** that an organisation can offer to people in terms of **influencing a decision**.





Build the
Spectrum of
Participation

Spectrum of Participation



What's changed at National Voices?

Voices for Improvement What's changed at National Voices? 2021/2022

We introduced co-leadership

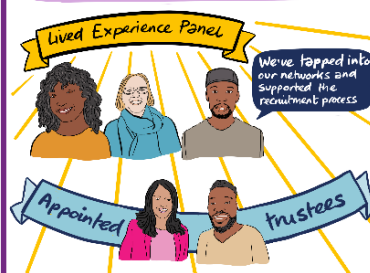


with lived & learned experience

Lived experience is more central to our work



We diversified our trustee board



We co-designed a coaching and mentoring skills programme



We all helped to shape this opportunity

We've learnt by doing



What else is different?

We have a bigger more diverse network



We are holding ourselves to account



Better:

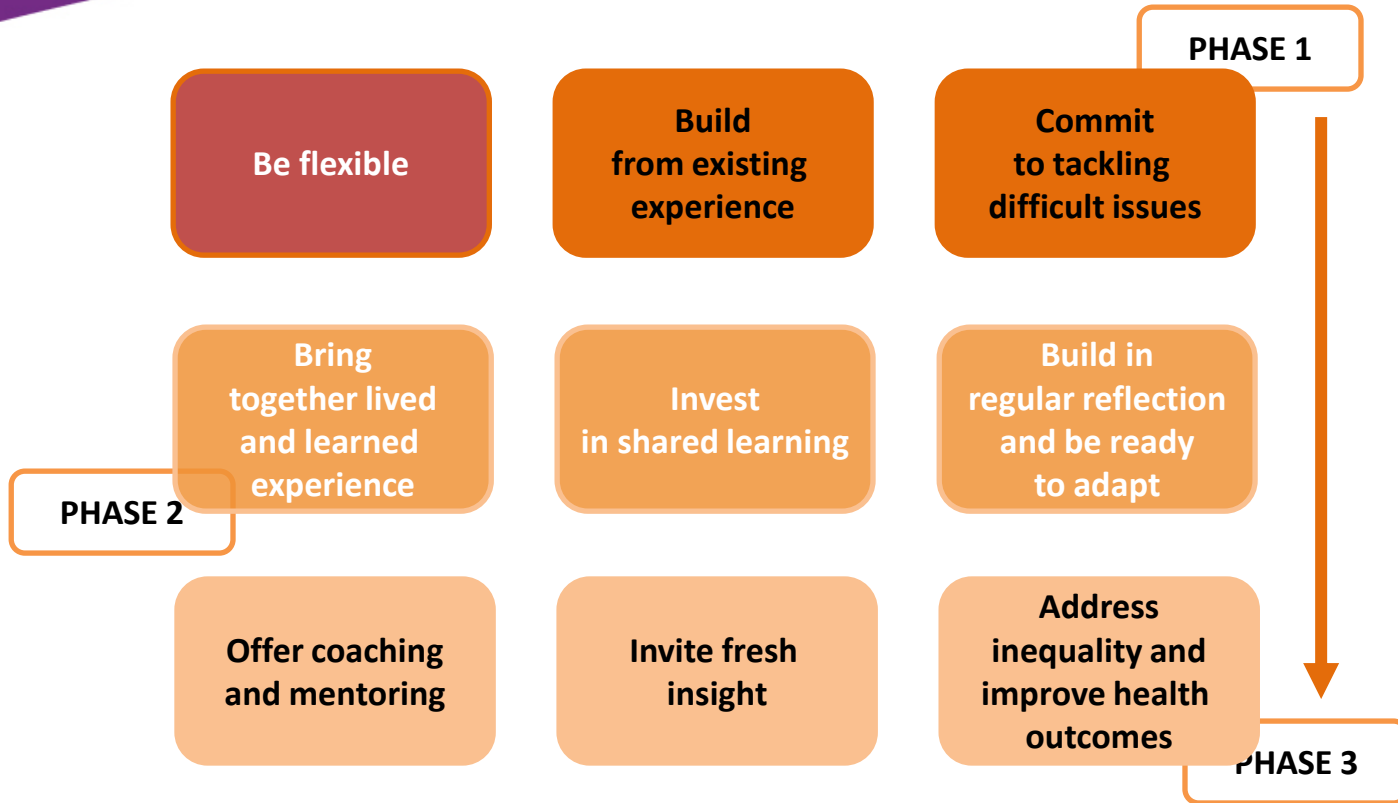
- insight & reach
- decision making
- accountability
- Fewer assumptions —

How does it work?

- Expression of interest
- Matching of a Lived Experience Partner with a system leader
- 30-minute 1-1 introductory session
- 3x full 1-hour 1-1 coaching session
- Group reflection session/evaluation form

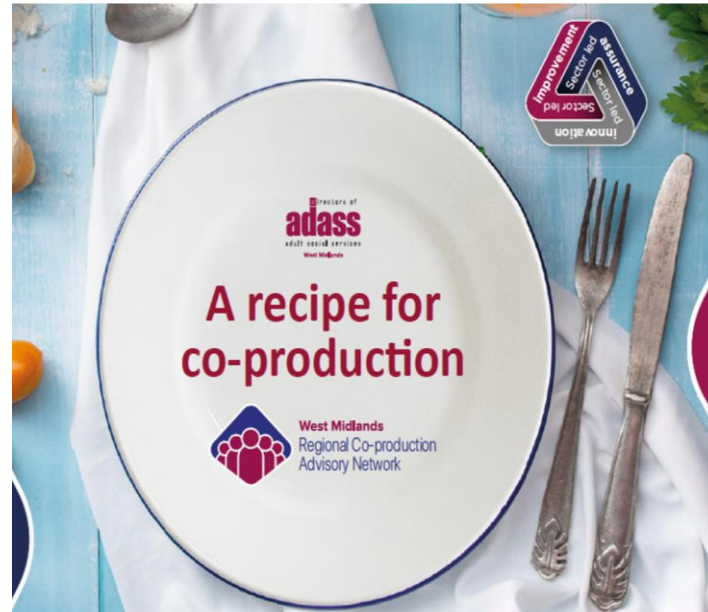


What we learned



West Midlands Association of Directors of Adult Social Care Services

- Invested and resourced WM-ADASS Regional co-production advisory network
- Co-produced 'A Recipe for co-production' guide
- Co-produced the process and audit tools for Social Work Practise Reviews
- 4 Directors of Adult social care have received 12 hours coaching from NV
- 4 Lived Experience Partners have trained as regional coaches.





Our Commitment to Co-production

Sandwell Council
Adult Social Care

September 2023



Our Commitment

*Building independence
and empowering
Sandwell residents'*



- Adult social care plan committed to improving how 'we' involve people in their care and support
- Recognises the different ways people can get involved – individual support, reviewing services or development of new services
- Bringing partners together – stop duplication, promotion, use different ways to involve people (survey, face to face, focus groups) One Council/place approach
- Start at the beginning – offered training to staff and partners

How we developed our plan-

WM ADASS Co-production



- Adult social care recognised we were doing some things well, but not all the time – we want to improve
- West Midlands Association Directors Adult Social Care Services Coproduction Advisory Group to the rescue!

The group offered:

- ✓ Best practice/ideas
- ✓ Opportunities to hear from people with lived experience
- ✓ Critical friends and always supportive
- ✓ Able to review the plan with immediate feedback
- ✓ Celebrate success and learning opportunities
- ✓ Feedback from WM ADASS strengthens support for the plan

Next Steps

- Health & Wellbeing Board approval received
- Plan informs commissioning, strength-based assessments and partnership work
- Direct Payments and new Carers Service
- Dedicated web page to promote opportunities
- Sandwell Co-pro Charter/guidance

Keeping in touch

Keymn Whervin

Head of Experience



Keymn.whervin@nationalvoices.org.uk



[@NVTweeting](https://twitter.com/NVTweeting)

[@keymn1](https://twitter.com/keymn1)

Creative Co-production

Christine Anderson Sheffield City Council
and Sheffield Voices experts joining virtually



Creative Co-Production

How Sheffield worked creatively with the learning disability community to improve people's lives





Where We Were



- We hadn't had a plan ('strategy') for people with learning disabilities since 2018
- We had a contract for support living but didn't have anything for day activities or short breaks
- We used to have a 'People's Parliament' but since it came to an end in 2015, nothing had taken its place
- LD Partnership Board didn't give people a voice any more



We Wanted to

- Make sure we could give people more choice of good support – in supported living, short breaks and day services
- Make sure that we got things right for people with sensory impairments, autism, younger people
- Improve support for employment/volunteering opportunities
- Improve things so that people didn't have to go to hospital
- Make sure we were meeting the needs of people from BAME communities



The Chance 2 Choose Project

- We wanted to hear from people with a learning disability/autism and their carers to find out what they wanted in the future
- We gave a small grant to Disability Sheffield (Sheffield Voices) and Healthwatch
- They employed creatives and had conversations with over 500 people all over Sheffield



What happened next?

- A Golden Threads report was produced
- This told us what we needed to get better in Sheffield
- We have more choice of how people are supported
- We wrote our Big Plan



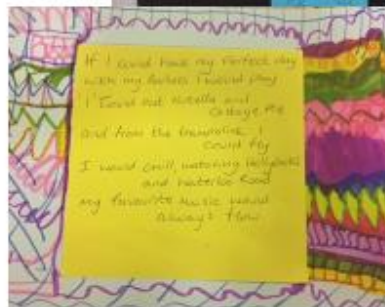
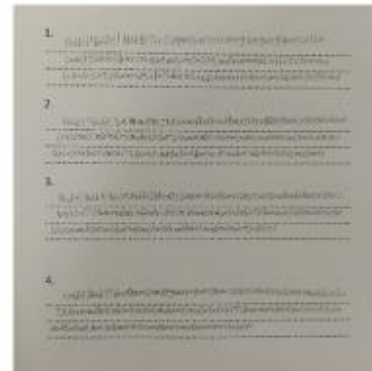
How we heard from people

The activities



What we heard

How we captured what people told us



Why co-production matters to CQC

Rebecca Bauers Director for people with a learning disability and autistic people, Regulatory Leadership, Care Quality Commission
and

Paula Eaton Deputy Director for people with a learning disability and autistic people, Care Quality Commission



Coproduction at CQC: Why is it important?

Rebecca Bauers, Director of people with a learning disability and autistic people

Paula Eaton, Deputy Director

Why is coproduction important to CQC?

Coproduction is the right thing to do to improve the way we put people and communities at the heart of our work.

Engaging with providers

Engaging with providers and organisations that represent them is a key part of our work.



It means that we can;

- Build strong and trusted relationships
- Talk to providers of care in a targeted way
- Develop our guidance and policy through coproduction
- Gather views to improve and inform our work

Engaging with people

- Codelivery
- Codesign
- Working in partnership
- Encouraging and enabling people to share their experiences of care
- Information and communication

There's power in the combined voice of experience that can help us drive better regulation of health and social care services

Expert advisory group - purpose

- We set up the expert advisory group to support CQC to increase the volume and range of the experiences we heard from people with a learning disability and autistic people.
- These experiences shape CQC's workplan..

Expert advisory group - members

- Members contribute expertise and insight
- This helps to focus and identify where we can add the most impact for people
- This brings positive change in the way we work and what we can achieve together

Expert advisory group - future

- Using findings to direct further projects and priorities
- Seeing themes emerge and making space to talk about them
- The cross sector position on reducing restrictive practices is a direct result of EAG

Expert advisory group - priorities

1. Reducing restrictive practice
2. Equity in GP access and quality health checks
3. Community services to reduce unnecessary admission to hospital



**We are committed to
engagement**

Again, there's power in the combined voice of experience that can help us drive better regulation of health and social care services.

Thank you.

WORKSHOP ROOMS PM:

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Westminster Room 8th floor

Workshop 2 Co-production Recipe

Smith Square 1 ground floor

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Workshop 4 Sheffield

Smith Square 4 ground floor



Question and answer session



**Close and thank-you!
Have a safe journey home**

