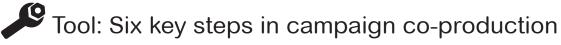


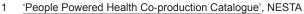
New Conversations 2.0 LGA guide to engagement



Co-production practice has developed over recent years encouraged by bodies like NESTA and the New Economics Foundation. It was originally seen in terms of service delivery, but it is equally applicable for something such as a public health campaign.¹

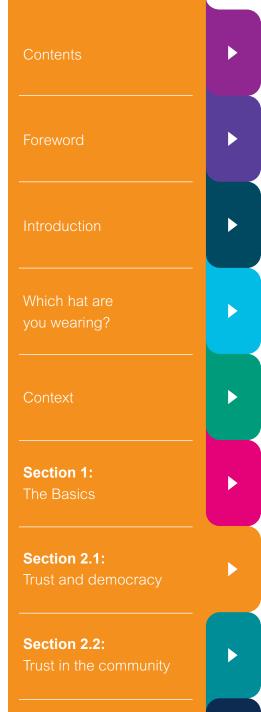
There are six elements which are the foundation stones of co-production². These definitions overlap with each other so co-production in practice will involve all of these features, and they are all underpinned by similar values.

- 1. Building on people's existing capabilities: The key thing is to provide opportunities to recognise and grow people's capabilities and actively support them to put them to use at an individual and community level. This benefits from auditing human resources early in the activity.
- 2. Reciprocity and mutuality: Offering people a range of incentives to engage which enable them to work in reciprocal relationships with professionals and with each other, where there are mutual responsibilities and expectations. This does not have to be financial and could be access to people they need to engage with through to information that makes them feel they are on the 'inside track'
- 3. Peer support networks: Engaging peer and personal networks alongside professionals as the best way of transferring knowledge. Too often there is a them and us relationship between officers and the community and this needs to be broken down through working as a team together
- 4. Blurring distinctions: Removing the distinction between professionals and recipients, and between producers and consumers of services, by reconfiguring the way campaigns and interventions are developed and delivered. For example, instead of it operating from the town hall, perhaps a pop-up office is created at a local community centre for a time-limited period?
- 5. Facilitating rather than delivering: Enabling public service agencies to become catalysts and facilitators rather than central providers themselves.



² See Patient co-production and design, Healthy London Partnership





Section 2.3: Trust in the system



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6. Assets: Transforming the perception of people from passive recipients of services and burdens on the system into one where they are equal partners in designing and delivering services. This again requires an audit in the first instance, but it also requires reframing people's perceptions so they realise they are an 'asset' through a combination of all the preceding points.



Section 2.3: Trust in the system

