



Board Meeting

22 May 2014

Agenda item: Annual Co-production Progress Report

Summary

1. This is the second annual board report on Co-production. This report summarises SCIE's progress in Co-production.
 2. In October 2013 SCIE published a substantial new suite of resources about co-production including a NHS accredited guide, At a glance summary and 12 new pieces of film.
 3. SCIE has continued to develop our Co-production strategy, including growing the Co-production network, embedding co-production in our vision, policies, business objectives and performance measures and beginning to develop a commercial co-production offer.
 4. The report outlines the development of co-production in The NICE Collaborating Centre for Social Care (NCCSC)
 4. The report sets out several examples of projects managed by SCIE's Innovation and Development Directorate with good quality co-production which demonstrate the impact of the approach.
 5. The next phase of implementation which will consolidate co-production in SCIE's processes and programmes is outlined.
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This report is for information and discussion.

Stephen Goulder

Director of Corporate services

Pete Fleischmann

Head of Co-production

Michael Turner

Co-production Support Manager

May 2014

Foreword from the Co-production Steering Group

Matt Langsford and Laura Able, are members of the Co-production Steering Group. They both reviewed a draft of this report. These are their comments:

SCIE has been leading the Social Care and Health sector on Co-production and over the last 12 months real and positive things have happened are lined up for the future.

Co -production is now fully embedded throughout SCIE and it features strongly in SCIE's overall vision, values and mission statements.

There is room for improvement, as always, and it has been highlighted that the organisation needs to improve the service user/carer representation on recruitment panels for SCIE recruitment.

It is now mandatory for all staff to undertake training in Co-Production. The training is now in its final stages of being devised and will begin to roll out very soon.

SCIE's work in the coproduction field has a vibrant future with huge partnership and commercial opportunities available for projects.

Matt Langsford (Care Leavers' Stories Project)

SCIE has risen to meet the challenges that face organisations who want to meaningfully and equitably involve users to participate. Although; this may not be plain sailing.

SCIE is striving to make time and resource to facilitate co-production. SCIE holds and continues to develop a major source of academic and practical learning through its website this is accessible to all and these are made by and for stakeholders but crucially users.

Cutting through red tape, SCIE manages the remuneration of its service users too.... and last, but not least, it responds to evaluations taking on board ideas to work critically and innovatively often in unmarked territory.

Laura Able (Independent Mental Health Advocacy Project)

Purpose

1. This is the second annual report to the Board on progress in co-production. The purpose of this report is to outline progress to date and set out a programme of work for the next period.

Background

2. The term co-production dates from the 1970s and has more recently become a new way of describing working in partnership with people using services, carers, families and citizens.
3. The definition of co-production is still fairly fluid but it is the term that is gaining common currency as the default description of user, carer and citizen involvement in public services. The Co-production Critical Friends group, a cross sector network (which SCIE is a member of) has developed the following definition:

“Co-production is a relationship where professionals and citizens share power to plan and deliver support together, recognising that both sides have vital contributions to make in order to improve quality of life for people and communities.”

4. There is an interest in co-production across the full range of public services, not just social care and health. Public and private sector organisations and politicians from all three major parties have shown an interest in co-production. This interest is partly motivated by the pressure to cut costs but is also indicative of the widespread acknowledgement that the citizen has a vital role in achieving positive public service outcomes.
5. Organisations such as the New Economics Foundation (NEF) and National Endowment for Science, Technology and the Arts (NESTA), Think Local Act Personal (TLAP) have substantial programmes of work branded as co-production.

SCIE and Co-production

6. SCIE is increasingly regarded as a leading organisation in Co-production in social care.
7. Co-production forms a crucial part of SCIE's offer.
8. It is important that SCIE provides leadership to the sector around co-production by:
 - Developing relevant co-production products for the sector
 - Ensuring that our own internal co-production processes and activity are of the highest quality possible.
 - Embedding Co-production in everything we do.

New Co-production products

9. This year we published a major new suite of resources;
 - Co-production in social care: what it is and how to do it, an NICE Accredited guide The guide includes 10 pieces of embedded video
 - Two new Social Care TV films about co-production

- At a glance summary of the guide (Joint publication with Think Local, Act Personal.
- Easy read version of the summary.

See: <http://www.scie.org.uk/publications/guides/guide51/index.asp>

SCIE's Co-production Strategy

Overall progress on strategy

10. The co-production strategy is managed as a project with a set of 26 deliverables.
11. To ensure that the strategy is co-produced it is overseen by the Co-production Steering Group. This consists of SCIE staff, two trustees (Ann MacFarlane and Tina Coldham) and eight Co-production Network members. The group meets six times per year.

Embedding Co-production in SCIE's vision and business objectives

12. SCIE's staff and Board has developed a new vision and values. Co-production features strongly in this statement.

All our research, guides, learning materials, training and consultancy services are coproduced with people who use services and their carers.

The way we work is:

Co productive and collaborative: We co-produce our work with people who use services and their carers to identify what works and how that knowledge can be put into practice.

(See Appendix 2 for the full statement.)

13. Objective 4. Of SCIE's new business objectives 2014 -15 is about co-production:

Ensure that the co-productive voice of people who use services, their families and carers is included in all aspects of our work through the way we operate and the products & services we deliver.

(See Appendix 3 for the Key performance indicators and performance measures.)

Staff engagement/training

14. The Co-production Steering Group proposed the idea of a survey of SCIE staff's about co-production. The Co-production Team carried out the survey in September.
15. The survey showed a strong appreciation of the importance of co-production in SCIE's work, but revealed a need for further guidance. It also showed that many staff are not in regular contact with people who use services and carers.
16. Following discussion at the Co-production Network and with the Co-production Steering Group, it was decided to develop mandatory co-production training for all staff.
17. It was seen as essential for this training itself to be developed and delivered using a co-production model. A design group was convened that included Co-production Network members, external users and carers and SCIE staff.
18. The training will be delivered by teams of SCIE staff and people who use services and carers working in partnership.
19. All staff will have attended the training by autumn 2014.
20. If this the training proves to be effective we will look at whether this is something include in our commercial offer.

Policies and procedures review

21. We have continued to review SCIE's policies and procedures. We have reviewed SCIE's recruitment procedure and this now has a requirement for a person who uses services or carer to be included in all selection panels, except where there is a compelling reason not to do so.
22. A review of SCIE's procurement policy is also due to be completed in summer 2014.

Reporting and monitoring

23. Progress in co-production will continue to be reported to the Board annually.
24. Reporting and monitoring have been strengthened. For example records are being kept of the number of users and carers involved in SCIE work.
25. The new performance measures which are linked to Business objective 4 will support the development of co-production across SCIE. For example they require that:
 - Managers plan and budget for co-production at the beginning of projects.
 - Examples of innovation in co-production are developed within SCIE projects

- Partnerships with user-led organisations are developed and supported.

(See Appendix 3 for full set of performance measures)

The Co-production Network

26. The Co-production Network is a key part of SCIE's co-production strategy. Its role is to support user, carer and equality groups' involvement in SCIE's strategic decision making and provide a pool of stakeholders which SCIE can work with to co-produce projects and programmes.

27. Membership of the Network is made up of:

- National user-controlled organisations
- National carer-controlled organisations
- Equality group organisations¹
- Organisations representing and working with other seldom heard groups.
- There are also a small number of individuals and representatives from local organisations who bring perspectives not represented by other members of the Network
- Individual users and carers who have had substantial involvement in SCIE projects

28. There are now over 60 members of the Network representing 37 organisations. It is chaired by Tina Coldham, a SCIE board member who is a service user and was appointed to this role through an open recruitment process. As well as working with SCIE on specific programmes and projects there are two meetings a year open to all Network members.

29. Scheduling issues meant it was only possible to hold one meeting this year in October. It was very well attended and the feedback from members about the meeting was extremely positive. The next meeting will be held 3 June 2014.

30. The Co-production Steering Group reviewed the membership policy for the Network in early 2014. One significant change is to make it possible for users and carers working with the NICE Collaborating Centre for Social Care (NCCSC) to become members of the Co-production network.

Numbers of people involved

31. Thirty-seven organisations belong to the Co-production Network. Over 50 people have attended at least one of the full network meetings. Between April 2013 and March 2014, 27 members have been involved in 23 projects and activities.

32. NCCSC has involved 17 users and carers in the guideline development process.

¹ Defined as organisations representing groups which have protected characteristics under the 2010 Equalities Act, for example Gay lesbian, bisexual and transgender groups.

33. The first three NCCSC Guidance Development Groups (GDGs), Home Care, Older people with Long Term Conditions and Transitions between Hospital and Home have each had four users/carers members.
34. Two users have been involved in the selection panels for the chairs of GDGs and three people have served on guideline scoping groups.
35. There have been 15 people involved in a range of Adoption and Dissemination activity. Including presenting a film on the health and well-being of children in care and facilitating a session on the well-being of older people.

Examples of good practice

36. The examples below demonstrate the good practice happening in SCIE.

Dementia Gateway

37. Building on the progress reported last year, co-production is a key feature in the way the project has been completed and has had a significant impact on the content of the updated gateway.
38. Social Care TV film; Six people with dementia shared their thoughts and feelings about the emotional impact of being diagnosed and living with dementia in 'Getting to know the person with dementia'. With the support of Innovations in Dementia, they shaped how the film was developed and it is all based on their own words with no voiceover or 'expert' input at all.
39. This film won an Older People in the Media award.
40. New section called 'Getting to know the person with dementia' was co-produced by people who have dementia and Innovations in Dementia, and covers the areas that they felt to be most important for people providing care and support to know and understand. Wherever possible their own words were used, with minimal supporting text.
41. New quotes to support each section; a group of people with dementia reviewed all the quotes used to illustrate each section, and recommended changes where they felt the quote didn't accurately represent what is important to them.
42. People involved in the update of the gate will be doing a workshop at The Alzheimer's Show in May about co-production with people with dementia.

GP services for older people: a guide for care home managers

43. Three members of the Co-production Network were recruited to the Project Advisory Group for this piece of work. They had a major impact on the way the project addressed what could have been a very process focused issue, and meant it was addressed from with a view to its impact on care home residents.
44. Having three people to represent the views of people who use services and carers had a significant effect on the balance of the Group and meant that these members were able to support each other. The participants were given feedback about their impact on the project and they said it had been rewarding to know that they had made a difference to the project and its output.

Home care for older people with complex needs

45. The Project Advisory Group for this piece of work was chaired by a carer. Having a person with this experience in such a key role in the group helped the steer discussions that were lively, efficient and challenging. It also helped to establish trust with other carer members of the group and made sure they were comfortable to make their contributions to the meetings.

Independent Mental Health Advocacy Project

46. This project will produce a suite of resources to support commissioning and provision of Independent mental health advocacy (IMHA).
47. Over 50% of the project Steering Group are mental health service users.
48. The project has recruited a pool of writers to work on products 75% of this group are mental health service users. The film maker working on the project's SCTV films is a former mental health service user.
49. The project has ensured that in all activities including three pilot sites, service users are well represented and actively involved.
50. The project held a very successful National seminar about the commissioning of advocacy. It was chaired by Michael Bichard well attended by a range of stakeholders including service users and carers.

Care Leavers' Stories project

51. This innovative project funded by the Heritage Lottery Foundation was delivered in partnership with the British Library.
52. The project trained four young care leavers in oral history techniques and they interviewed 17 older carer leavers. The life story interviews are up to 3 hours long.

They are housed permanently in the British Library alongside the Beatles lyrics, the Magna Carta and the Gutenberg bible.

53. Three social care TV films were also produced which summarise the issues the archive covers.
54. The full length stories will shortly be available directly from the SCIE website.
55. The views and experiences of care leavers were integral to the development and implementation of this project. The four young care leaver interviewers were selected by a panel, which included two care leavers. Part of their training was delivered by an academic who is also a care leaver.
56. The project advisory group included 50% care experienced people and the film producer/director who recorded the interviews and made the SCTV films is care experienced.
57. The project products were launched at a joint event with Barnardos chaired by Michael Bichard and Edward Timpson MP was the keynote speaker.
58. Palgrave Macmillan are using extracts of 5 of the interviews in the latest addition of their social work student handbook.

NICE Collaborating Centre for Social Care

59. Co-production with people using services and carers features throughout the work of the NCCSC. From project set up, through Chair's recruitment, scoping, development and in shaping the implementation support tools and dissemination activities.
60. The NCCSC has to follow NICE's procedures for co-production, which it refers to as public involvement.
61. During the establishment of the NCCSC, SCIE made the case for further involvement of people who use services and carers in guideline development.
62. Following discussion with NICE two modifications to the guideline development process were agreed:
 - Representation on the Scoping Group which meets at the very beginning of the process
 - A user or carer sits on the panel that recruits the chair of each Guide Development Group.
63. We will be reviewing the effectiveness of both innovations with NICE. We hope that the review will establish the effectiveness of both measures and will make the case for NICE incorporate them in their generic processes.

64. We have successfully recruited people who use services and carers to these roles and to the GDGs.
65. NICE recommend a minimum of two lay people (who do not have to be users or carers) on each Guideline Development Group (GDG). However each NCCSC, GDG so far has had a membership of four users and carers.
66. The NCCSC has also been effective in supporting people who use services and carers in these roles and has received very positive feedback from participants.
67. The NCCSC has also been active in identifying areas where additional input is needed from people who use services and carers.
68. At the scoping stage of the guideline on transitions between children's and adult services two focus groups were held to get direct input from young people who had experience of this (one organised internally by the NCCSC and the Co-production Team and one commissioned from Great Involvement, Future Thinking (GIFT)).
69. We are looking at the need for similar ways of obtaining for input from older people into the guidelines on domiciliary care, older people with long-term conditions and transitions between health and social care services.

Quality Standard on Health and Well-being of looked after children and young people.

70. NICE are keen to ensure that young people understand what the quality standard means for them and how they can use it to get the quality of care and support they should expect.
71. One of our early products is a short film due to be launched at the NICE conference. The film producer worked with children and young people from one of the Care Councils in the North East of England in two workshop sessions before filming their reflections on the relevance of each of the statements to their lived experience.
72. To provide the narrative for the film we recruited a young care leaver who had been involved in one of our other SCIE projects. She presented the film and provided the voice over.

Quality Standard on Mental Well-being of Older People in Care Homes

73. This quality standard has six statements about what high quality care looks like.
74. To achieve the standard requires collaborative working between care home staff and families, carers and other practitioners across health and social, putting the needs and aspirations of people who use services firmly at the centre.

75. To model a collaborative approach, we organised a roundtable discussion which was co-facilitated by Ann Macfarlane (SCIE Trustee and CQC expert by experience), Sharon Blackburn (National Care Forum) and Dwayne Johnson (ADASS).

76. To ensure active participation by care home residents and staff we held the roundtable at the Royal Hospital Chelsea. We also used edited highlights from SCTV films as a backcloth to the event to stimulate debate. There was wide representation from practitioners with different perspectives including GP, nurse, OT, geriatrician and care providers. The film and report from the event include the voice of older participants.

Communications

77. Co-production is becoming an increasing prominence in SCIE's communications work.

78. Co-production network members have been active in several pieces of communications work:

- Raymond Johnson (People First) appeared on Guardian social care online.
- Camellia Borg (Care Leavers' project) wrote an article for Guardian social care online, spoke on BBC London and ran a workshop at Community Care Live.
- Laura Able wrote an article about co-production in staff recruitment which appeared in Guardian social care online

Co-production has also featured in:

- Blogs to support Co-production in social care: what it is and how to do it on the SCIE and Department of Health websites
- Article on the guide and co-production at SCIE for the Involve newsletter by Pamela Holmes and Michael Turner
- Article in National Care Forum newsletter about Co-production in social care: what it is and how to do it
- Understanding the co-production of care – Tony Hunter in the Local Government Chronicle.

Reviews of new products

79. Members of the Co-production Network have also been involved in reviewing these products:

- The Integration Tool Kit
- Delivering Personalisation e-learning
- The Safeguarding Guide for Social Housing
- Neglect e-learning course

Setting out the next phase of the strategy

80. This final section of the report outlines the elements of the next phase of the SCIE co-production development.

Commercial opportunities

81. Ensure that co-production is an important element of SCIE's generic commercial offer.

82. Develop a specific co-production commercial offer which may include training, consultancy, events and product development.

Building the capacity of co-production network member organisations

83. Developing the relationship between SCIE and the members of the Co-production Network to ensure that they get the maximum benefit from working with SCIE.

Embedding co-production

84. Once we have completed the co-production training it will be important to maintain the momentum that this establishes.

Communicating the strategy externally

85. Ensuring that all SCIE staff and network members maximise external opportunities for communicating SCIE's knowledge and achievement in co-production.

Co-production in monitoring and reporting in new structure

86. Ensuring that the good practice already developed is incorporated into the two new SCIE Directorates. Ensuring that reporting of co-production is continuously improved.

Procurement

87. Complete the development of procurement policies that address any barriers to co-production and encourage commissioning of user and carer groups when appropriate.

Developing Co-production Network

88. Continue to develop the membership model and ways of supporting members to play as big a role as possible in running meetings and setting agendas.

NICE Collaborating Centre for Social Care

89. Complete the review of the new co-production arrangements that the NCCSC has incorporated which are addition to the standard NICE co-production arrangements.
90. Continue to develop effective and innovative methods to ensure that people who use services and carers are involved in all stages of guideline development and dissemination.

Pete Fleischmann
Head of Co-production

Michael Turner
Co-production Support Manager

Appendices

Appendix 1: Co-production deliverables

Co-production deliverables October 2013 – 2014 October		
1	Hold 3 rd Co-production network meeting	22 October 2013
2	Design staff away day (<i>element of</i>) co-production	30 November 2013
5	Clarify roles, responsibilities and length of network membership.	31 December 2013
6	Hold internal meeting to review procurement policies with a view to addressing any barriers to co-production and encouraging commissioning of user and carer groups when appropriate.	31 January 2014
9	Review written advice available on SCIE.net for staff on co-production and ensure that it is comprehensive and up to date	28 February 2014
10	Discuss review of procurement policies with co-production Steering Group and Equality and Diversity Forum	28 February 2014
11	Review network membership model,	28 February 2014
13	Write any new advice for staff on co-production as required	31 March 2014
14	Promote advice and support available to staff	31 March 2014
15	Amend procurement policies as required	31 March 2014
16	Identify and fill gaps in the network membership,	31 March 2014
17	Write a policy on network membership	31 March 2014
18	Giving the Co-production Steering Group a greater role in the strategic development of the network and in reporting progress.	31 March 2014
19	Review network's relationship with SCIE's Equality and Diversity forum	31 March 2014
23	Develop new processes for the reporting of co-production in NCCSC	31 May 2014
24	Develop new processes for the reporting of co-production in IDD	31 May 2014
25	Monitor implementation of User and carer involvement in staff recruitment	31 May 2014
26	Update database of members contacts to enable better monitoring	31 May 2014
27	2 nd Annual progress report to the Board	31 May 2014

29	Hold 4 th Co-production network meeting	03 June 2014
30	Deliver specific training on co-production for project managers	March- October 2014
31	Network members to promote co-production via external talks, seminars etc.	Ongoing
32	SCIE staff to promote co-production via external talks, seminars etc.	Ongoing
33	SCIE Trustees promote co-production via external talks, seminars etc.	Ongoing
34	Opportunities for media coverage for co-production pursued	Ongoing
35	Explore greater roles for network members in running the meetings and defining the agenda.	Ongoing
36	Ensure any other business or partnership opportunities are rigorously pursued.	Ongoing

Appendix 2: Co-production Business Objectives

Objective 4. Ensure that the co-productive voice of people who use services, their families and carers is included in all aspects of our work through the way we operate and the products & services we deliver. Lead Amanda Edwards

Key Performance Indicator	Performance measure	Owner
An active and successful co-production network.	<ul style="list-style-type: none"> ✓ Two well attended meetings per year (one third of the network). ✓ Network reflects the range of SCIE activities. ✓ 40% of members have participated in SCIE's work 	PF
Effective involvement in SCIE work programmes.	<ul style="list-style-type: none"> ✓ Co-production planned and resourced at the start of all projects. ✓ 2-3 innovative examples of co-production with members by March 2015. 	PF/DC/CD
Support user and carer organisations to work in partnership with SCIE.	<ul style="list-style-type: none"> ✓ Delivery of staff training by members of the co-production network. ✓ 2-3 innovative examples of partnership with user and carer organisations in project delivery. 	PF
Development of a commercial co-production offer.	<ul style="list-style-type: none"> ✓ SCIE's expertise increasingly recognised. ✓ Additional income generated. 	PF

Appendix 3: SCIE Vision and Values

Sharing knowledge, improving lives

Vision

We improve the quality of care and support services for adults and children by:

- Identifying and sharing knowledge about what works and what's new.
- supporting people who plan, commission, deliver and use services to put that knowledge into practice
- Informing, influencing and inspiring the direction of future practice and policy.

All our research, guides, learning materials, training and consultancy services are coproduced with people who use services and their carers.

The way we work is:

- **Co productive and collaborative:** We co-produce our work with people who use services and their carers to identify what works and how that knowledge can be put into practice. We promote equality and value diversity and human rights. We collaborate with partners to influence future policy and practice to increase our reach and impact.
- **Innovative and customer-focused:** We meet the changing needs of our diverse audiences and customers with new and better services and products that support the delivery of high quality services.
- **Enterprising and expert:** We seek new opportunities to promote our knowledge and skills throughout the care and support and other sectors. Our work is based on a rigorous approach to identifying good and developing practice.