Notes of the Co-production Network Meeting, 7th February 2013

Introduction

This was the second meeting of the Co-production Network and it focused on SCIE's strategic planning. Network, members, some people from SCIE's Board and SCIE's executive management group attended the meeting.

The day was divided into two parts:

1. Feedback on the progress of SCIE's co-production strategy

2. Discussion of members' experiences of social care and how this could influence SCIE's work and strategic direction.

The day also included a performance by disabled comedian Laurence Clark.

Morning plenary session:
SCIE's Co-production Strategy: The story so far
Pete Fleischmann, Head of Co-production

SCIE's co-production strategy has been progressing well since the first meeting of the network in June 2012 with key developments including the completion of the Co-production Charter and its approval by SCIE's board of management, changes to human resources policies to take account of co-production and the beginning of a review of how policies around procurement/buying in services from organisations and people will reflect co-production.

SCIE is also working on a new guide to co-production which will be launched later this year as part of a new section on co-production on SCIE's website.

Members of the network have been involved in a range of SCIE's work.

This includes:
- 6 members have joined the Equality and Diversity Forum
- 3 members are on the co-production strategy project team
- 4 members are advising the co-production website project
- 3 members are advising the co-production guide project

Members have also helped to co-produce:
- a review of Social Care TV films
- an update of guidance about fair access to care.
- a SCIE guide about safeguarding and plans for a Social Care TV film on the subject
- a Care leavers stories project,
- seminars to SCIE staff

Two members of the network have also been contracted by SCIE to do specific pieces of work.

While this shows a very successful start to the network, SCIE is keen for more members to take part in co-producing our work and to hear about anything that we can do to make it easier.

SCIE does not want to be a drain on members' time and resources, which is why we pay fees and expenses and to make arrangements for people to attend meetings.

Pete also announced that in order to make sure the network is a benefit to members SCIE is working on a scheme to offer the skills and experience of its staff to assist member organisations with issues like marketing and preparing a research bid.

He then handed over to three representatives of members of the network who spoke about their experiences of being part of the co-production of SCIE's work.

June Sadd of SWEP described how she had been involved with SCIE over many years in a range of projects, particularly those around social work education. She said her experience of working with SCIE had been one of meaningful user involvement.

Matt Langsford is working on SCIE's care leavers' stories project. He said he thought it was 'awesome working with SCIE' as he felt he was kept up to date and liked SCIE's strategy and ethos of working with service users and thought people's ideas were appreciated. Matt also liked the fact that SCIE organise travel and always provides a good lunch!

Jennifer Taylor from People First Lambeth has worked with lots of groups and projects at SCIE. She likes working with SCIE as the people are always nice.

Question and answers

Angela Smith from the Race Equality Foundation asked how SCIE would respond to the Francis Report on neglect of patients by the Mid Staffordshire NHS Trust Hospital.

SCIE's chief executive, Andrea Sutcliffe, replied that we know there have been similar problems in social care. She had written an article in The Guardian about how these issues relate to social care and this stressed the need for services to treat people with dignity and respect at all times .

SCIE is working to bring together and highlight the resources it has already produced that address these issues. We are also working with the Department of Health to influence the key people who will work on these issues.

Ann McFarlane, a member of SCIE's board, described her experiences of attending many conferences and meetings and often being the only service user present. She would like SCIE to try to support service users and carers from the network to attend such events.

Afternoon Session:
Round table discussions: Your stories of social care

Five discussion groups looked at members' current experiences of social care, and those of people in their organisations and networks. Through these stories we want to get a picture of the current state of social care.

Feedback from the five groups

Group 1

- Lack of integration of health and social care – there is an arbitrary division between health and social care. It is important that SCIE and the National Institute for Health and Care Excellence work closely together.

- Quality control – there needs to be an overview of quality as many services are carried out in isolation, particularly domiciliary care.

- The model of the Children in Care Councils, which all local authorities have and has the power to scrutinise and hold the local authority to account, may be useful.

- Sharing examples of good practice is really important.

The group noted that all of the above points depend on money.

Group 2

- Moving from one area to another can be very difficult and people often have to have a new assessment. This can take a long time to sort out.

- How much scope is there for SCIE to do work which has not been contracted? Will SCIE be able to do work which is inspired by users and carers? Why does anybody have to listen to SCIE?

- Some people are afraid that closer integration with health may have negative impacts on social care. SCIE needs to define and protect social care values, for example the social model, the principles of self directed support and independent living.

Group 3

- Health assessments and budgets are implemented very bureaucratically.

- SCIE needs to support service user groups in the light of the Francis report SCIE should help with delivery of improvements that would tackle similar problems in social care.

- SCIE should promote its expertise in co-production and help other organisations to involve users and carers in their work

- Why SCIE is not a campaigning organisation for social care – there is a need for this.

Group 4

- the importance of celebrating achievements of the disability movement.

- Talked about specific stories with examples of how good support enables people to fulfil their potential and play full roles in society.

- The importance of identity. For example a man who had to conceal photographs in his home that might have indicated he was gay because he was afraid of the reaction of his care providers.

- The Welsh government has just unveiled a social service and wellbeing bill which may have some useful lessons for others.

Group 5

- Different aspects of co-production such as service users being involved in staff training – this can transform training and could help avoid situations like that at Mid Staffordshire Hospital Trust covered by the Francis report.

- Concern that co-production could be hijacked – such as paid workers being replaced with volunteers.

- SCIE can use its current models like the Dementia Gateway for other work.

- Noted that people from lesbian, gay, bisexual and transgender communities maybe over represented in social care because of the long term issues such as difficult relationships with their families.

- Concern that the Liverpool Care Pathway for people with terminal illnesses actually means neglecting people's needs, causes suffering and is a form of euthanasia.

Looking to the future
Andrea Sutcliffe, Chief Executive, SCIE

Andrea responded to comments that came from the discussion groups and linked them to SCIE's future strategy.

She identified the main themes from the feedback from the groups as:

1. Integration and the importance of health and social care and housing working together

2. Often the experience of using services is not good – there are differences / contradictions.

3. Encouragement that SCIE does its job well and will work well with NICE in the National Collaborating Centre for Social Care

4. The importance of identity

5. The network has done good work so far but there is more to do

Other key points Andrea identified from the feedback were:

The need for SCIE to articulate the voice of social care and champion what we have achieved in social care over the last 20 years.

Responding to the question whether anyone has to listen to SCIE she suggested that the question should be 'who wouldn't listen to us?' People don't have to listen and there is a real responsibility on all of us to promote the work that SCIE does. We need a robust message that it would be foolish to not to pick up on the work we are doing.

Difficulties about re-assessment, information sharing – SCIE can help here and are applying to the Department of Health to do work on the implementation of the white paper and draft Care And Support Bill on issues like portable assessments around the country and reducing the bureaucracy around personal budgets.

Andrea concluded that it came out from the meeting that SCIE is generally doing well on co-production but there is always more to do and learn. It is important for us to continue to work hard on constantly improving our co-production work but we do have examples of good practice which we need to promote and share.

She also saw the need for SCIE and the network to join together ideas around stories and identities. Andrea found this resonated for her as she had recently chaired a conference around health and social care integration recently and the most powerful presentations were the ones that involved individual stories of those being directly affected.

She believes that is why co-production is so important – it brings the individual and their stories to the forefront, highlighting why the human rights approach to social care is so important and why social care is so important to human rights.

Questions and answers

Comments from members at the end of the meeting included comments about part of the meeting being inaccessible to people with visual impairments. SCIE has reviewed this issue since the meeting and introduced new procedures to ensure that such problems do not occur again.

There was concern at Andrea Sutcliffe's suggestion that members had asked the wrong question about why people should listen to SCIE. Andrea clarified that she wanted to turn the question round and had not meant that it was wrong in anyway. The key for her was to make sure SCIE's work is compelling, useful and responsive so that people hear what it has to say.

Another person suggested there is a need to have the Deaf community represented in the network. Pete Fleischmann replied for SCIE and agreed

that it is important to make contact with this community and fill any other gaps in the membership.

A member with dementia described some of the barriers to working with service users with this impairment, particularly as people's capacities can change rapidly. They suggested that regularly bringing in new members would be a good way to address this and that a 'buddying' system with existing members giving support to new members could help this process.

There was a suggestion that SCIE should be go out to meet with user and carer organisations to discuss approaches to co-production which would make it easier for their members to take part. Pete Fleischmann responded that this something that SCIE would really like to do. It might be possible to incorporate this into projects for which SCIE is seeking funding in the future.