Co-production: What it is and how to do it
About SCIE

The Social Care Institute for Excellence improves the lives of people of all ages by co-producing, sharing, and supporting the use of the best available knowledge and evidence about what works in practice. We are a leading improvement support agency and an independent charity working with organisations that support adults, families and children across the UK. We also work closely with related services such as health care and housing.

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.
# Contents

Introduction............................................................................................................................................ 4  
Recommendations .................................................................................................................................... 4  
What is co-production? ............................................................................................................................... 5  
Introduction................................................................................................................................................ 5  
Defining co-production................................................................................................................................. 5  
Transformative co-production ...................................................................................................................... 7  
**Principles of co-production** .................................................................................................................. 7  
Equality – everyone has assets..................................................................................................................... 7  
Diversity ....................................................................................................................................................... 8  
Accessibility ................................................................................................................................................ 9  
Reciprocity – getting something back for putting something in................................................................. 9  
**Co-production and the Care Act 2014** ..................................................................................................... 9  
The link with personalisation .................................................................................................................... 10  
**Economics of co-production** ................................................................................................................ 11  
The costs of co-production........................................................................................................................ 11  
Potential savings ......................................................................................................................................... 11  
**The benefits of co-production** ............................................................................................................... 12  
Why does co-production lead to improved outcomes? ............................................................................. 12  
**How to do co-production** ..................................................................................................................... 13  
Culture......................................................................................................................................................... 13  
Structure..................................................................................................................................................... 14  
Practice....................................................................................................................................................... 16  
Review......................................................................................................................................................... 18  
**Practice examples** .................................................................................................................................. 20  
**Support from SCIE** ................................................................................................................................. 20  
**About this guide** ..................................................................................................................................... 1  
Who the guide is for: ................................................................................................................................. 1  
How the guide is organised ........................................................................................................................ 1  
Evidence used for the guide ...................................................................................................................... 1
Co-production is a key concept in the development of public services and it has the potential to make an important contribution to all the big challenges that face social care provision.

This is a guide to what co-production is and how to develop co-productive approaches to working with people who draw on care and support and carers. It is aimed at managers and commissioners, frontline practitioners, and people who draw on care and support and carers.

The Care Act 2014 specifically includes the concept of co-production in its statutory guidance. The guidance defines co-production and suggests that it should be a key part of implementing the Care Act. In particular, co-production should be used to develop preventative, strength-based services, support assessment, shape the local care market, and plan information and advice services.

Definitions of exactly what co-production means vary, but the term is used to describe partnership working between people who draw on care and support, carers and citizens to improve public services.

There is an interest in co-production across the full range of public services, not just social care and health. Public, voluntary and private sector organisations and politicians have shown an interest in co-production. This interest reflects the widespread acknowledgement that the citizen has a vital role in achieving positive outcomes from public services.

Implementing co-production can be challenging and complex. It involves looking at every aspect of how an organisation works. This resource draws on the learning from a wide range of sources to help managers, practitioners, people who draw on care and support and carers to both understand and implement co-production in social care and beyond.

Recommendations

Culture
- Ensure that co-production runs through the culture of an organisation.
- Ensure that this culture is built on a shared understanding of what co-production is, a set of principles for putting the approach into action and the benefits and outcomes that will be achieved with the approach.
- Ensure that organisations develop a culture of being risk-aware rather than risk-averse.

Structure
- Involve everyone who will be taking part in co-production from the start.
- Value and reward people who take part in the co-production process.
- Ensure that there are resources to cover the cost of co-production activities.
- Ensure that co-production is supported by a strategy that describes how things are going to be communicated.
- Build on existing structures and resources.
Co-production: what it is and how to do it

Practice

- Ensure that everything in the co-production process is accessible to everyone taking part and nobody is excluded.
- Ensure that everyone involved has enough information to take part in co-production and decision making.
- Ensure that everyone involved is trained in the principles and values of co-production and is supported in developing any new skills they will need for the work they do.
- Ensure that frontline staff are given the opportunity to work using co-production approaches, with time, resources and flexibility.
- Provide any support that is necessary to make sure that the community involved has the capacity to be part of the co-production process.
- Ensure that policies and procedures promote the commissioning of services that use co-production approaches.
- Ensure that there are policies for co-production in the actual process of commissioning.

Review

- Conduct regular reviews to ensure that co-production is making a real difference and that the process is following the agreed principles.
- Co-produce reviews and evaluations.
- Use the review findings to improve ways of applying the principles of co-production, so that continuous learning is taking place.
- During reviews and evaluations, work with people who draw on care and support and carers, to think about ways of showing the impact that co-production has, as well as the processes that are involved.

What is co-production?

Introduction

If co-production is not clearly defined, there is a danger that its meaning will be diluted and its potential to transform services will be reduced. At the same time, a definition that is too narrow can stifle creativity and innovation. An important part of the process of co-production is for organisations and projects to come to an agreement on what they understand co-production to be and the principles that will guide its implementation.

This section of the guide looks at how co-production can be defined and then outlines a set of co-production principles that can help to give direction to co-production projects.

Defining co-production

There is no single formula for co-production, but there are some key features that are present in successful co-production initiatives. They:

- define those who access care and support as people with skills
- break down the barriers between people who draw on care and support and professionals
- build on people’s existing capabilities
- include reciprocity (where people get something back for putting something in) and mutuality (people working together to achieve shared objectives)
- work with peer and personal support networks alongside professional networks
- facilitate services by helping organisations to become agents for change rather than just being service providers.

Definitions of co-production include:

“Co-production is not just a word, it’s not just a concept, it is a meeting of minds coming together to find a shared solution. In practice, it involves people who use services being consulted, included and working together from the start to the end of any project that affects them.”

“A way of working whereby citizens and decision makers, or people who use services, family carers and service providers work together to create a decision or service which works for them all.

The approach is value-driven and built on the principle that those who use a service are best placed to help design it.”

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

Definitions and language are important. But the move toward co-production needs to be more than just a change in words, because there is a danger of assuming that the right words will be followed by the right actions. Real change is accompanied by a movement of resources to people who draw on care and support and to frontline staff.

There is a difference between co-production and involvement: involvement means being consulted, while co-production means being equal partners and co-creators.

Co-production has been broken down into the following activities:

- **co-design**, including planning of services
- **co-decision making** in the allocation of resources
- **co-delivery of services**, including the role of volunteers in providing the service
- **co-evaluation** of the service.

It can also be useful to think about there being various levels of co-production. For example:

- **descriptive** – where co-production takes place in the delivery of services as people who draw on care and support and carers work together to achieve individual outcomes, but activities cannot challenge the way services are delivered, and co-production is not really recognised
- **intermediate** – where there is more recognition and mutual respect, for example where people who draw on care and support participate in the recruitment and training of professionals
Co-production: what it is and how to do it

- **transformativ**e – where new relationships between staff and people who draw on care and support are created and people who draw on care and support are recognised as experts in their own right. There is respect for the assets that everyone brings to the process and an emphasis on all the outcomes that people value, rather than just those – such as clinical outcomes – that the organisation values.

**Transformative co-production**

There are a number of things we can say with certainty that transformative co-production is about:

- professionals and people who draw on care and support work in equal partnerships towards shared goals
- there is a movement from involvement and participation towards people who draw on care and support and carers having an equal, more meaningful and more powerful role in services
- people who draw on care and support and carers participate in all aspects of a service – the planning, development and actual delivery of the service
- power and resources are transferred from managers to people who draw on care and support and carers
- the assets of people who draw on care and support, carers and staff are valued
- it is recognised that if someone contributes, they should get something back in exchange.

**Principles of co-production**

The principles of equality, diversity, accessibility and reciprocity (or getting something back for putting something in) are critical values for putting co-production into practice. Acting in accordance with these principles helps to make co-production as inclusive as possible, and demonstrating a commitment to inclusivity shows that co-production is genuine, or authentic.

**Equality – everyone has assets**

Co-production starts from the idea that no one group or person is more important than any other group or person. So, everyone is equal and everyone has assets to bring to the process. Assets refer to skills, abilities, time and other qualities that people have. This is different from approaches that focus on people’s difficulties and what they cannot do.

Much of the writing on co-production focuses on the need to recognise the assets of people who draw on care and support and others in the community. However, the assets that workers, practitioners, managers and other professionals bring to the process also need to be recognised.

Equality can only be achieved with a shift in power towards people who draw on care and support and carers.
Co-production: what it is and how to do it

For a culture of equality to be fostered, everyone involved in co-production will need to get to know each other. Sometimes, a commitment to equality can be put to one side because of the urgency to get things done. This danger can be guarded against by good planning.

There can also be complexities around this issue because of the unequal power relationships between professionals and people who draw on care and support, and between people who draw on care and support themselves.

It can take time and patience to address these issues. Training and support will be a key part of achieving this. If people who draw on care and support are brought into the process without this support, they will be at a disadvantage in their relationships with professionals.

Experienced and well-trained people who draw on care and support bring a lot of value to co-production, particularly in terms of more equal and potentially more challenging relationships with professionals. This can sometimes lead to them being dismissed as ‘the usual suspects.’ However, they do have the capacity to make a particular contribution to the leadership of co-production initiatives.

The principle of equality and recognising that everyone brings assets to co-production that should be used and valued, provides the basis for a balanced approach to this issue. If everyone is treated as equal in the process of co-production, greater experience or expertise should not mean greater power. So, no one group (professionals, experienced or less experienced people who draw on care and support and carers) should have a greater role to play.

Diversity

It follows from the principle of equality that diversity and inclusion are important values in co-production. Co-production should be as inclusive as possible. This can be challenging but it is important that co-production projects are pro-active about diversity.

It has been found in work on the involvement and participation of people who draw on care and support that some groups are under-represented or excluded from such work, and this is likely to apply equally to co-production.

People who draw on care and support can be excluded because of equalities issues or because of the nature of their difficulties. The main groups likely to experience exclusion are:

- people from Black, Asian and minority ethnic (BAME) communities
- people from LGBT+ communities
- people who communicate differently
- people with dementia
- older people who need a high level of support
- people who are not affiliated to any organised group or ‘community.’

Where a person lives can also be a barrier to participation: people living in residential homes, homeless people, Gypsy and Traveller communities and people in prison experience exclusion on this basis.

When thinking about diversity, it is important to remember that people are not ‘just one thing’.
Accessibility

Access needs to be recognised as a fundamental principle of co-production as the process needs to be accessible if everyone is going to take part on an equal basis. Accessibility is about ensuring that everyone has the same opportunity to take part in an activity fully, in the way that suits them best.

As well as physical access, making sure that information is accessible and that it is provided in appropriate formats is a key part of making sure that everyone can take part in co-production.

Some language can be problematic because it involves jargon that is inaccessible. And it is particularly important that everyone involved understands the term co-production itself in the same way. Getting the language right so that everyone understands each other is essential.

There is also a broader issue about all information being available and shared. All parties need to have enough information to take part in co-production and decision making. There may be issues around confidentiality and information sharing, which will need to be resolved for co-production to be successful.

Another important aspect of accessibility is time and timing, which can be overlooked. The impact of time on co-production and the need to allow time for co-production to develop are important issues.

Reciprocity – getting something back for putting something in

‘Reciprocity’ is a key concept in co-production. It has been defined as ensuring that people receive something back for putting something in, and builds on people’s desire to feel needed and valued. The idea has been linked to ‘mutuality’ and all parties involved having responsibilities and expectations. Putting reciprocity into practice can help to create a sense of togetherness.

The word ‘reciprocity’ may be considered as jargon when discussing co-production. It may not seem particularly accessible, but there is not another word that fully captures what it means.

Co-production and the Care Act 2014

The Care Act 2014 is one of the first pieces of UK legislation to include the concept of co-production in its statutory guidance.

The Care Act's statutory guidance says:

“Local authorities should, where possible, actively promote participation in providing interventions that are co-produced with individuals, families, friends, carers and the community.”
“Co-production” is when an individual influences the support and services received, or when groups of people get together to influence the way that services are designed, commissioned and delivered.”

This definition is not as helpful as other definitions, as it only talks about people who draw on care and support influencing – rather than collaborating with – professionals in equal partnerships.

However, it is positive that it emphasises the range of activities that can include co-production. It makes clear that it is primarily people who draw on care and support, carers and the community that should be involved in co-production.

Co-production is also referred to at a number of points in the statutory guidance, in relation to information and advice; prevention; assessment; market shaping; strengths-based approaches; and developing local strategies and plans.

Co-production is an important way of achieving the overarching aims of the Care Act including prevention, wellbeing and the focus on outcomes. It should be a consideration in all aspects of implementing the Act. For example, co-production can help to ensure that advocacy services meet the requirements of the Act.

The link with personalisation

Co-production has developed over a similar time period as ideas around services that are person-centred or tailored to the needs of the individual. And some have said that co-production is essential to making services more personalised.

Approaches developed by disabled people and the independent living movement have become central to social care services, with person-centred planning developing into personalisation. The development of personalised services has seen governments commit themselves to involving people more directly in service provision as well as taking responsibility for costs and risks. Various initiatives in England and Wales have emphasised the need for people to be able to choose and manage how their needs for support are met.

People who draw on care and support and carers being part of the co-production of the service they receive on an individual basis is a prominent feature of personalisation. Examples of this include direct payments and individual budgets. They draw a distinction between individual co-production and collective co-production where people work together on community issues.
Economics of co-production

Organisations, programmes and projects that use co-production have a complex and dynamic nature, which makes it difficult to assess their costs and benefits.

Evaluations of co-production tend to focus on how people have participated, and on their experiences, rather than on economic costs and benefits.

The costs of co-production

Issues around the costs of co-production can be complicated. While there is some evidence that it can reduce costs, the available evidence is inconclusive. This may be something that varies between different organisations and different projects.

Co-production may lead to short-term increases in the use of services and other costs as it increases people’s knowledge of and access to services.

Potential savings

One of the key arguments about the economic benefits of co-production is the potential returns from a perspective that focuses on prevention, and on early intervention when people's needs arise rather than letting them get worse. So, if there is investment in community services, this means that people are less likely to need more expensive services (such as crisis and emergency services) later on. This will reduce the cost of acute services.

Other points to note about co-production and costs are:

- Co-production may lead to some costs being reduced and others increased.
- It may only be possible to know whether co-production is cost-effective by looking at things over a period of time. If it is cost-effective, it will have reduced the number of inefficient, ineffective and unwanted services.
- There will be costs associated with engaging with services and projects.
- It might be found during the co-production process that more spending is needed in some areas.

Economic evaluations of direct payments, individual budgets and personal health budgets have shown that they are cost-effective. Giving people who draw on care and support and carers more control over those services can improve their health and wellbeing. But it is important to provide more support in the form of information, advice and advocacy.
The benefits of co-production

Co-production approaches can bring a range of benefits and improvements for all concerned. Ensuring that everyone involved has a shared understanding of what benefits are expected from co-production is important to the success of the initiative.

Potential benefits from co-production can be divided into two types – instrumental and intrinsic benefits:

- instrumental benefits – the use of people’s experience and expertise, which can contribute to a more efficient use of resources
- intrinsic benefits – an increased sense of social responsibility and citizenship and benefits to the wider community, particularly to improved health and wellbeing.

Professionals collaborating with communities and people who draw on care and support are likely to have a stronger focus on the outcomes of the support provided when they are co-producing, and potentially a greater focus on prevention. So, there are improved outcomes for people who draw on care and support as a result.

The contribution that co-production makes to developing social networks and communities is another benefit. It has been argued that this only happens where there is collective co-production with groups and communities and not where co-production is confined to individuals being involved in the services they receive.

Why does co-production lead to improved outcomes?

Evidence shows that incorporating co-production principles into programmes for people with long-term conditions can help them to gain knowledge, learn skills and adopt behaviours that are thought to be important in achieving better health and wellbeing.
How to do co-production

This section does not offer a step-by-step guide to doing co-production, as effective approaches will vary according to circumstances, but it gives guidance on key issues that need to be addressed to put co-production in organisations and projects into action. It uses a jigsaw model for the management of change.

The four pieces of the jigsaw are:

1. **Culture** – the beliefs and values that define an organisation and the way that it works
2. **Structure** – the way the organisation is arranged and the systems it has set up to conduct its work
3. **Practice** – how the organisation and the people who work for it conduct their work
4. **Review** – monitoring how the work is conducted and the outcomes or impacts that result from the work.

This is a ‘whole systems approach’ that SCIE originally adopted for participation because:

- organisations must change at every level – from senior management to frontline staff – if they want to achieve meaningful participation
- participation should become part of daily practice – and not be a one-off activity
- participation operates at different levels as there are many ways to involve people who draw on care and support in different types of decisions.

SCIE sees the jigsaw model as a useful way to approach co-production and has used it for its own co-production strategy.

**Culture**

Organisational culture is the collection of values, expectations, and practices that guide and inform the actions of everyone involved in an organisation, and it is key to determining whether co-production can take root. Co-production thrives in a culture that is transparent, open to change and comfortable with well-managed risk.
A change in culture may be necessary if there is to be progress with co-production. There needs to be a move from delivering services to facilitating services and from facilitating to enabling, rather than a one-way process of providing care.

A range of cultural issues need to be thought about so that professionals can successfully co-produce both with people who draw on care and support and carers. The issues range from ownership of the project throughout the whole organisation to valuing the skills and assets of everyone involved. The culture of the organisation also needs to embrace the key principles of co-production.

**Embedding co-production throughout the organisation**

A commitment to co-production throughout an organisation is critical to success. The support of senior management is particularly important.

**A culture of risk awareness**

A culture of risk awareness in terms of co-production means:

- being aware of risk
- taking managed and planned approaches to risks
- being prepared for anything that may go wrong by thinking things through in advance

**Recommendations – culture in co-production**

- Ensure that co-production runs through the culture of an organisation.
- Ensure that this culture is built on a shared understanding of what co-production is, a set of principles for putting the approach into action and the benefits and outcomes that will be achieved with the approach.
- Ensure that organisations develop a culture of being risk aware rather than risk averse.

**Structure**

Thinking about structure involves considering how an organisation or initiative is arranged. This includes looking at:

- decision-making structures
- leadership
- the way the organisation plans and develops projects
- resources.

It is particularly important to change the systems and structures of an organisation so that it can support co-production. Examples of the types of structural changes that might be required are:

- new goals
- revisions to staff roles
Co-production: what it is and how to do it

- developing support networks
- new management structures
- revised procedures for commissioning.

This may be particularly challenging for large organisations as co-production puts an emphasis on personal relationships. Organisations will need to move away from centralised and hierarchical structures (where power remains in the hands of very few people) so that they can support co-production.

Leadership: identifying and involving the right people from the start

It is important to identify all the people who need to be involved in any co-production project or initiative at the beginning of the process.

Building on existing structures and resources

Developing a co-productive approach does not necessarily mean starting from nothing. There may be an opportunity to build on existing cultures, structures and practices. The most successful co-production may come from building on the resources already in the community. Outreach work is a way of identifying and building community links.

Resources for co-production

The costs of doing co-production and getting people on board are an important issue to think about. As a new and evolving process, co-production can be time-consuming and will need resources for building the project and for support. If there is a reluctance to commit resources, this may affect how the project progresses and what it is able to achieve.

Structures for valuing and rewarding people

It has been recognised for a long time that payments to people who draw on care and support and carers for taking part in activities such as co-production can be problematic. This is mainly because of the impact of rules and regulations around welfare benefits. SCIE has produced a guide to paying people in receipt of benefits.

Rewarding people for getting involved in co-production activities is clearly important. But there is also a need to recognise the other benefits that people who draw on care and support and carers can gain from the experience of co-production. For example, being part of an organisation that is led by people who draw on care and support is a positive experience. It contributes to a sense of shared identity and purpose. And it also improves the outcomes of a project.

If people who draw on care and support and carers understand the benefits of co-production this is likely to encourage them to take part. This may be especially helpful in projects where it is not possible to offer direct financial rewards.

Professionals also gain from the experience of being involved in co-production. Professionals often say that working in a co-productive way is more satisfying and rewarding.
Structures for communication
Accessible communication needs to be supported by strategies that are flexible and use a range of different approaches to communication. This will ensure that people have as much opportunity to take part as possible.

The importance of relationships in co-production suggests that personal contacts and ‘word of mouth’ (people telling other people about something) may have a particularly important role in the co-production process.

Social media have potential for supporting co-production. For example, it can help to overcome the barriers that people face in accessing information and services. It can also provide new ways of influencing public awareness and policy. But there needs to be a focus on the media that most people are likely to use. When organisations and projects think about how they are going to communicate with people, they need to make sure they take a balanced approach.

Recommendations – structure in co-production
- Involve everyone who will be taking part in the co-production process from the start.
- Value and reward people who take part in the co-production process.
- Ensure that there are resources to cover the cost of co-production activities.
- Ensure that co-production is supported by a strategy that describes how discussions and decisions are going to be communicated.
- Build on existing structures and resources.

Practice
Making co-production happen in practice is about all those who participate in the process – who may have different points of view – working together to achieve agreed aims. This means building relationships.

But there can be difficulties in the relationships between the people who draw on care and support and professionals working in services.

It is important to make sure that people who draw on care and support attend all co-production meetings. This will help new working relationships to develop. It will also help with the shift in power that is involved in co-production. It is also helpful if people who draw on care and support are given opportunities to meet on their own to talk about and agree their priorities.

The relationships involved in co-production need to be based on trust and confidence. The success of co-production is likely to be based on the people involved and their relationships. Success needs to be defined in terms of achieving the long-term goals of co-production as a means of creating better services, which are more responsive to the needs of people who draw on care and support, with understanding that there may be some mistakes along the way.
Access
Access is a key issue in supporting equality. Co-production cannot happen if processes and practices are not accessible.

It is important that information is accessible. It is also important that meeting places are accessible. But this accessibility needs to flow through the entire process of the meeting. People need to be able to easily prepare for, get to and be heard at meetings and events. They then need to be able to follow progress through minutes and reports.

SCIE has produced a thorough guide to holding accessible meetings and events.

Building community capacity
Taking action to develop or use the capacity of the people living in a particular area is crucial to the success of co-production.

The need to build the capacity for co-production links to issues of funding and making sure that user-controlled and community organisations have enough resources to actively support co-production. Working with organisations run by people who draw on care and support is essential to co-production and the empowerment of people who draw on care and support.

It may be useful to map the assets and resources in a community rather than just looking at problems and needs. Where a community does not have the capacity to develop co-production, it would be necessary to identify exactly what capacities are needed and how they can be developed.

Co-production and staff
Engaging with frontline staff and practitioners is an important part of the co-production process. Frontline staff are often overlooked. The change in the way organisations work with co-production needs to be accompanied by changes in the way staff and professionals work.

Training and support
There is a clear need for training and support for professionals and practitioners to help them to adopt a co-production approach, and to use Plain English from the start. It is also important to make sure that everyone else involved in co-production – including people who draw on care and support and carers – is given appropriate training and support, including training on the principles of co-production, and how to put them into practice.

Commissioning
Commissioning (the process of buying services from other organisations or people not directly employed by the commissioner) is recognised as a key part of the co-production approach.

For co-production to be successful, organisations need to change their systems for commissioning. This involves developing approaches that recognise the social, economic and environmental impact of commissions. It also involves moving to commissioning based
on outcomes rather than outputs (outcomes describe the changes a service delivers to the lives of people, while outputs say how many people are helped). This can present problems for commissioners because outcomes can be difficult to measure.

Commissioners should be encouraged to embrace the approach of including co-production in the commissioning process and including it in the services they commission. Co-producing the commissioning process means people who draw on care and support, and wider communities, being part of decision making. Commissioning co-productive services is achieved by awarding contracts for services to suppliers that use co-productive approaches.

Guidance has also been produced on how local authorities can develop stronger links with the communities they serve through strategic commissioning. This includes:

- using more flexible contracts
- developing ‘localist’ agendas that recognise the value of supporting local providers
- using value tests to assess whether contracts are delivering on the criteria established when they were awarded and then renegotiating the contracts where appropriate.

As noted above, organisations run by people who draw on care and support (often referred to as user-led or user-controlled organisations) and carers have a key role in co-production.

**Recommendations – co-production in practice**

- Ensure that everything in the co-production process is accessible to everyone taking part and nobody is excluded.
- Ensure that everyone involved has enough information to take part in co-production and decision making.
- Ensure that everyone involved is trained in the principles and values of co-production and any skills they will need for the work they do.
- Ensure that frontline staff are given the opportunity to work using co-production approaches, with time, resources and flexibility.
- Provide any support that is necessary to make sure that the community involved has the capacity to be part of the co-production process.
- Ensure that policies and procedures promote the commissioning of services which use co-production approaches.
- Ensure that there are policies for co-production in the actual process of commissioning.

**Review**

Co-production should not be seen as a one-off activity. Successful co-production will introduce changes to systems that will lead to the ongoing review, development and delivery of new forms of support. Co-production therefore benefits from a culture of continuous learning about what has worked and what has not worked.

Review is a key part of the management of any organisational change. It is important for:

- monitoring progress
- marking the achievements and/or milestones that have been reached
identifying areas where improvements can be made to the process or outcomes enhanced.

Review and evaluation are an essential part of any co-production initiative and should be conducted with people who draw on care and support. Review and evaluation may focus, for example, on a particular service or project, on a developing programme of co-production, or on annual performance of an organisation in relation to its ongoing commitment to co-production.

It is important to ‘measure what matters.’ Better outcomes for people who draw on care and support, and carers, are a key aim of co-productive approaches, so these should be evaluated. The contribution a project or initiative makes to developing innovative approaches should also be considered.

Evaluation should also focus on the actual difference that co-production makes to people’s lives.

Regular reviews
It is helpful to regularly review the aims of co-production and the principles being used to achieve those aims.

Regular co-production audits could be introduced that look at:

- how to do co-production
- the co-production process itself and how well everyone works together
- social, wellbeing and environmental outcomes
- the full costs and benefits, including added value such as the benefits of reciprocity.

Co-production of reviews and evaluations
Co-producing a project review with people who draw on care and support has a powerful effect on all aspects of the project. And it helps the project to focus on the experiences and expectations of everyone involved, adding authenticity to the reporting of the findings of the project.

Evaluations of co-production projects should themselves be co-produced.

Recommendations – reviewing co-production
- Conduct regular reviews to ensure that co-production is making a real difference and that the process is following the agreed principles.
- Co-produce reviews and evaluations.
- Use the review findings to improve ways of applying the principles of co-production, so that continuous learning is taking place.
- During reviews and evaluations, work with people who draw on care and support and carers, to think about ways of showing the impact that co-production has, as well as the processes that are involved.
Practice examples

View practice examples from a range of organisations and projects working with different people in different contexts, including organisations that provide social care and support, and organisations and projects that have taken co-productive approaches to benefitting citizens in other areas.

View: Co-production practice examples

Support from SCIE

Improve co-production with people who use services and carers to develop and deliver better social care and health provision. Find out more about SCIE's co-production work and our consultancy and improvement support service. If you would like to talk to our team about how we can help, please complete our enquiry form.
About this guide

The term 'co-production' describes working in partnership by sharing power between people who draw on care and support, carers, families and citizens.

This guide is about how to do co-production. It was co-produced with people who draw on care and support, carers, support providers and staff from the Social Care Institute for Excellence (SCIE).

Who the guide is for:

- managers and commissioners
- frontline practitioners
- people who draw on care and support.

How the guide is organised

The guide is organised in two sections:

- **What is co-production?** This section looks at what co-production is and the principles behind co-productive approaches to support and care.
- **How to do co-production.** This section does not offer a step-by-step guide to doing co-production, as effective approaches will vary according to circumstances, but it gives guidance on key issues that need to be addressed to put co-production in organisations and projects into action.

Evidence used for the guide

The guide is based on co-produced guidance that was originally produced by SCIE in October 2013 and updated in October 2015.

This revised version has also taken account of:

- evidence from studies of co-production that were published after October 2015
- other literature identified by SCIE staff and other people involved in this revision
- a session with SCIE Co-production Network members on the principles of co-production
- comments on the text from SCIE Co-production Network members
- practice examples that show current practice on co-production in projects/organisations.