



# Improvement Cymru Academy Toolkit Guide



## Co-Production

## Introduction

Co-production involves health and care professionals working in collaboration with people who use these services, as well as their families and carers, to design and develop services that meet patient care and support needs, thus improving their experience.

Co-production is an equal partnership between service users and providers, which recognises the unique and valuable perspectives and contributions of all these individuals in defining need and collaborating towards the development of sustainable health and social care services.

NHS England (2023) state that:

*“Co-production is a way of working that involves people who use health and care services, carers and communities in equal partnership; and which engages groups of people at the earliest stages of service design, development and evaluation.*

*Co-production acknowledges that people with ‘lived experience’ of a particular condition are often best placed to advise on what support and services will make a positive difference to their lives. Done well, co-production helps to ground discussions in reality, and to maintain a person-centred perspective. Co-production is part of a range of approaches that includes citizen involvement, participation, engagement & consultation.”*

## Rationale

Co-production involves working collaboratively with patients, their families, and communities to design and deliver healthcare services that meet their needs. By involving stakeholders in the process, co-production can help to improve patient satisfaction, increase the effectiveness of healthcare services, and ensure that healthcare services are delivered in a way that is patient-focused, inclusive and equitable for all.

Co-production is built on the concept that people who work in services and those who use services are the best people to suggest improved ways of working together. There is strong research to suggest that taking part in co-production has a wealth of benefits for health and social care organisations (Mockford et al, 2012).

- Increased engagement and social capital
- Genuine empowerment and ownership
- Improved health and wellbeing
- Stronger, more cohesive communities
- More relevant and effective services
- Sustainable and value for money

Co-production focuses on the best approach for person-centred care within the community and on the assets of individuals on how best to support a patient/person or organisation. It involves healthcare professionals understanding the needs of patients and engaging with them when designing and delivering services. It is a positive approach and focuses on patient strengths rather than limitations.

**VIDEO:** Please watch this [video clip](#) where Professor Berwick discusses the benefits of co-production for communities and healthcare organisations<sup>1</sup>.



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<sup>1</sup> Please note that subtitles are available, and playback speed is adjustable within the video settings icon, should these be required.

## Background

Nobel Prize winner Elinor Ostrom, first used the term co-production in the 1970s when describing the valuable contribution of service users in the creation and delivery of public services, collaborating as equals with service providers, to make improvements.

Co-production is not just an ideology it is embedded in legal guidance and is considered best practice. The Care Act (2014) was one of the first UK legislations to include the concept of co-production as part of statutory guidance, stating that *“local authorities should, where possible, actively promote participation in providing interventions that are co-produced with individuals, families, friends, carers, and the community”*.

In April 2016, the Social Services and Well-being (Wales) Act came into force in Wales which requires the involvement of individuals in decisions about their care and to be active partners in the development and delivery of services provided for them. Co-production, well-being and the individual’s needs are the main principles of the Act.

The Health and Social Care (Quality and Engagement) (Wales) Act (2020) also supports co-production and the need for honesty and transparency if people are harmed. This Act ensures that the contributions of people in Wales to health and care services are represented by Llais, a citizen body for health and social care.

## When to use

Co-production is used in health and social care decision-making to support better outcomes for all parties involved and should be considered to develop and deliver effective, quality care from the very start. Health and social care providers need to work in partnership with patients and service users in designing and delivering services as this is best practice.

Co-production can be used in various healthcare settings, such as in the:

- Development of healthcare policies and/or services
- Service redesign
- Provision of care

It may be used to:

1. **Improve** the design of healthcare services to ensure that they meet the needs of patients and their families.
2. **Encourage** patients and service users to become more involved in their care., recognising their knowledge and experience of their personal situation or condition.
3. **Develop** healthcare policies that reflect the views and experiences of patients and communities.
4. **Empower** communities and patient groups to develop their own healthcare services and initiatives.

### How to use

For co-production to become embedded in your working practises you will need to create a culture of positive behaviours and values to provide a foundation for co-production to flourish. A culture of ownership, shared understanding, openness, transparency, commitment, clear communication, and respect for both patients and staff need to be present.

A change in culture may be necessary to pursue co-production and the support of your management teams is vital. Once this culture has been established, you can start to work towards co-production in health and social care.



Here are some steps you should follow when using co-production in healthcare:

## Identify your goals

- Consider what do you hope to achieve by involving patients and communities in the design and delivery of healthcare services?
- This could be anything from improving patient satisfaction to increasing the effectiveness of healthcare services.

## Identify stakeholders

- Consider who will be involved in the co-production process. This could include patients, their families, healthcare providers and community leaders.

## Develop your plan

- Develop plan for carrying out the co-production process.
- This could involve setting up a steering group, focus groups or interviews with patients and community members, holding workshops or other collaborative events.

## Engage Stakeholders

- Engage your stakeholders in the co-production process.
- This could involve reaching out to patients, community groups, healthcare providers, and other interested parties to gather input and feedback on health and care services

## Co-design and co-deliver

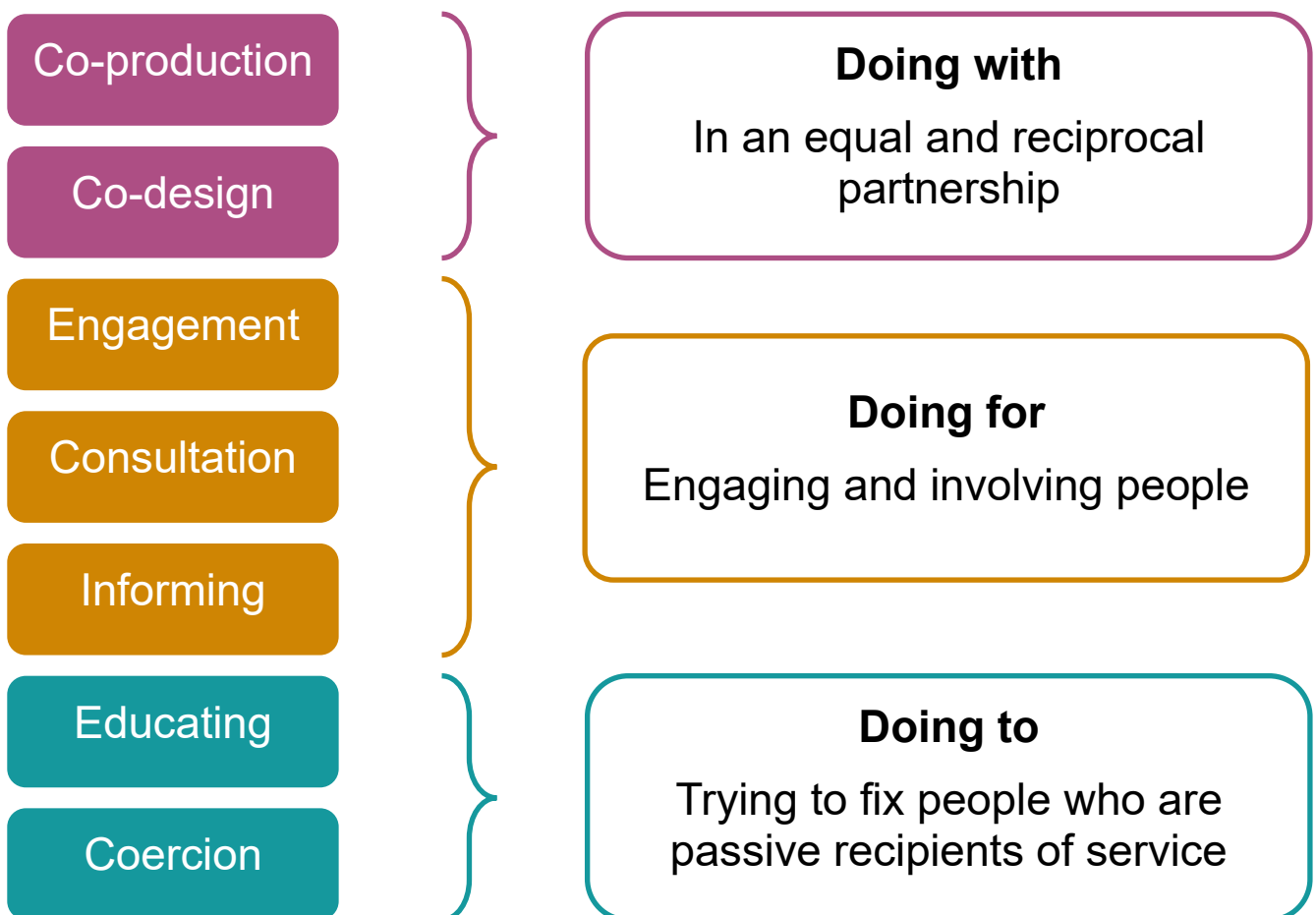
- Co-design and co-deliver healthcare services provided.
- Work collaboratively with stakeholders to develop and implement healthcare services that meet the needs of patients and their families and/or carers.

## Evaluate learning

- Evaluate the co-production process and learn from the experience.
- This could involve surveys or focus groups to gather feedback and using this feedback to improve the co-production process moving forward.

## What next?

One tool to highlight different levels of participation is this process is the co-production process is the ladder below, which demonstrates the various levels of involvement and partnership required to work with people. This should help you consider how decision making is shared in your organisation; you could ask yourself do all participants have with equal decision-making power, or are you merely informing and seeking opinions (doing for) or educating (doing to) people?



The co-production ladder

**VIDEO:** Please watch [this video from NHS England](#) for an animated overview of the role of co-production in quality improvement and in providing better care, including tools to help co-production flourish.

## Helpful tips

1. **Be transparent and inclusive:** It is essential to be transparent and inclusive when implementing co-production. This means involving patients, their families, and communities in all stages of the co-production process, from planning to delivery. It also means being open and honest about the goals of co-production and the roles that stakeholders will play in the process. A genuine respect, care and curiosity about each other's opinion is required.
2. **Emphasise shared decision-making:** Co-production is all about shared decision-making. It is important to create a culture of collaboration and inclusivity, where patients and their families are seen as equal partners in the design and delivery of healthcare services. This involves valuing their input and feedback and empowering them to make decisions that affect their own care.
3. **Measure impact and celebrate success:** Co-production can be a long and challenging process, but it is essential to measure the impact of the co-production process, involve everyone in the evaluation process and celebrate its successes. This can help to build momentum and support for future co-production initiatives. It is also important to acknowledge and learn from any challenges or failures encountered during the process, and to use this knowledge to improve future efforts.

## Additional resources

If you are interested in learning more about how improvement practices can benefit your workplace, we offer a range of training courses. Visit [Improvement Cymru Academy website](#) for more information or email us [improvementcymruacademy@wales.nhs.uk](mailto:improvementcymruacademy@wales.nhs.uk) to find about the improvement courses we offer.

## Further reading

Andrews N., Calder G., Blanluet N. and Baker R. (2023) Co-production: Research to support the Final Report of the Evaluation of the Social Services and Well-being (Wales) Act 2014. Cardiff. Welsh Government, GSR report number 38/2023.

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