



Developing Co-production Across One Halton

Project summary report, December 2023

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Executive Summary

Think Local Act Personal (TLAP) was approached to support Halton’s place-based partnership, One Halton, to refresh, develop and continue to embed approaches to co-production with people with lived experience of health and social care services – with Halton Borough Council and Cheshire and Merseyside Integrated Care Board being key partners in shaping local services.

This work was commissioned to reinvigorate One Halton’s approach to co-production and to build on existing foundations of collaborative working across the borough. Halton has a strong history of working closely with experts by experience and the Council, in particular, has used TLAPs ‘Making It Real’ framework to give people a voice in transformational change.

The 2020 pandemic changed many priorities, both for services and the people who use them, and some of the previously strong connections across Halton were lost. Following on from this turbulent period and its aftermath, One Halton wanted to reinforce their commitment to co-production and demonstrate their proactive and positive pledge to working together, which we witnessed across the three workshops held. While this work took place in partnership with people with learning disabilities and autism, the aim was to learn from the experience to embed a refreshed approach across the borough. The methodology and approach to co-production developed through this project, together with the Charter created by staff and local people, can be applied to working with diverse groups of citizens and people with lived experience.

One Halton is keen to see co-production embedded in service design and delivery and for approaches to be implemented in a meaningful way- not simply a tokenistic approach. It has recognised the need to re-set and further develop a culture of coproduction with local people that can create lasting change. The approach was one of openness, a willingness to try new ways of working and keenness to tap into new and existing networks to enthuse and engage people to take part. This was further evidenced by representation from front-line workers and senior leaders across health and social care attending and feeding in valuable examples and insights to the project work. Many fed back the benefit of coming together and hearing directly from people with lived experience of local care and support.

This work, and the recommendations that stemmed from it, reflect the need to re-establish an approach that's fit for the current context right now. It forms the basis of how work will be carried out going forward and represents the strategic direction of coproduction for partners across One Halton. A set of preliminary priorities have been identified by local people around what's important to them to create meaningful structures and groups for them to feed-in views and affect change. From here, the real value will be in how this ethos is further developed as part of day-to-day working practices.

Across three workshops we identified and brought together key partners including local people with lived experience of autism and learning disabilities, the people that support them including advocacy organisations, frontline health and social care practitioners and senior strategic leaders. This was a lively, fun and eye-opening experience with people sharing what matters to them, how services are working so far, what a good life looked like and how co-production could be made tangible.

This report summarises the findings from the three workshops, highlights key recommendations for future work and priorities. It contains a list of practical tools and resources, including the beginnings of an outcomes framework, to capture the difference that co-production is making and adopting the 'learn as we go together' approach the group advocated for. The workshops looked at four areas:

1. **How services are currently working:** how involved do people feel in deciding their care and support, how could this be done better?
2. **Defining co-production:** what does co-production or working together mean for people and what does this look like? What are key behaviours and values or ingredients needed to make co-production happen?
3. **Reciprocity:** how could people be rewarded for their time and expertise?
4. **Next steps for co-production:** what are staff and local people's ambitions for co-production? What structures or potential groups could be set up to build momentum from the three workshops?

We found that there's real scope to develop existing networks to engage with a wider range of people with lived experience. There were good examples of co-production at the personal level with key services offering some form of tailored choice and support for people with learning disabilities and autism.



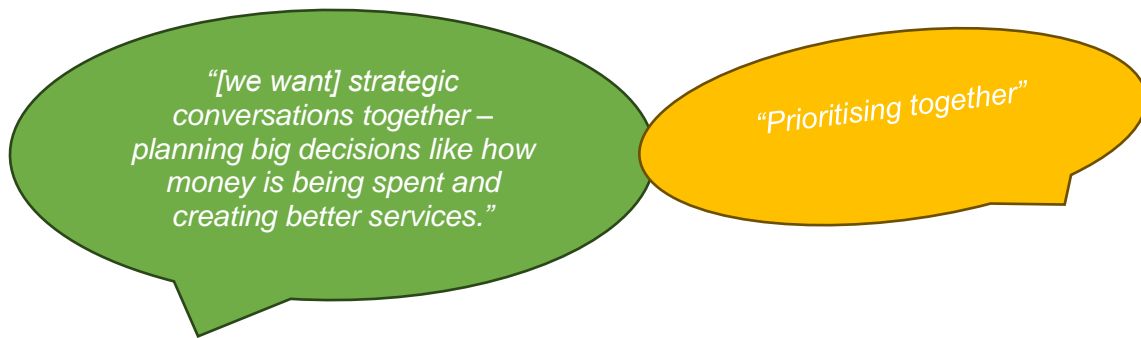
"Going to Inspire gives me the opportunity to be me and be who I am."*

**local service*

In defining co-production, people spoke about building trusting, honest relationships, creating accessible, non-traditional meetings that were free of jargon, the need to commit to supporting people with additional needs to participate by 'understanding what it's like' for them and working together to fully appreciate and remove barriers. People were keen to have open dialogue leading to realistic goals and seeing change in their communities.

Local people and staff welcomed the opportunity to come together to explore issues and challenges within the system and put forward positive solutions. They wanted to be part of a

sustained and planned programme of future activity including having a role in 'deciding how the pie was split' in terms of money and service provision.



Participants welcomed the opportunity to create more formal ways to discuss and decide priorities together. A series of initial priorities for this target audience were forthcoming through working together in discussion based activities and included options for future work around care standards becoming person-centred, safety in the community and choice and control of personal budgets. They felt that a continuous cycle of feedback and improvement was important – staff showing how views were taken forward, charting change and collectively evaluating how and if things were getting better and sharing this more widely. A structure of a potential co-production board and groups feeding into this was proposed (see Appendix 1). This could be supported by the creation of a Co-production Champion in each partner organisation advocating for, spearheading and raising awareness about co-production.

This is all summarised in the co-designed Co-production Charter which the group felt would create accountability and help identify gaps in services (see Appendix 1). This is organised to represent a shared definition for co-production across One Halton, how access and diversity will be thought about and addressed, what meetings could look like, the values and behaviours that people can expect to drive good co-production, rewarding people for their time and a checklist for evaluating co-production; it is intended to be the cornerstone of how co-production is rolled out further and developed into the mindset of One Halton partner organisations.

There was a real buzz of positivity during many of the discussions and as a result, we believe with One Halton's support, we've assembled a pro-active group of people who want to work with One Halton to co-produce. This provides a springboard to start taking forward some of the following recommendations.

Alongside the list of resources, this forms a working model or approach for co-production with older people, people with dementia or any other group of citizens.

List of recommendations

We would advocate moving quickly in the following areas to maintain momentum:

1. Those that engaged with the workshops were enthusiastic and pro-active. There's now a prime opportunity to see these relationships develop to full maturity. Outreach could be extended to the existing networks of those who attended e.g. by asking people to 'bring a friend' and thinking about who wasn't in the room – which voices were not perhaps being represented. Further outreach to faith groups and voluntary

sector organisations would make the group more representative of different communities.

2. One Halton could think about how to build on the lived experience of the advocacy group Halton Speak Out and use the rooted experience, willingness and momentum created from this work to strengthen and develop this working relationship.
3. Further developing the role of a Co-production Champion: run an exercise looking at what is the purpose of the role? What is its scope? When and how often do they meet? How can they share information?
4. Use the Co-production Charter to build on the solid foundations re-established as a result of this work. Share and communicate the document and outcomes of this work – use this as the beginnings of a plan to widen co-production.
5. Better working together with health and social care partners: identifying small to medium term co-production projects involving health and social care partners. These could be smaller pieces of work with a view to working towards larger pieces of work such as co-production related strategies or policies.
6. Co-produce, resource and sign-off the proposed co-production structure suggested by the group (see Appendix 1).
7. Using Appendix 5, develop a Coproduction Recognition Policy to reward people for their time, expertise and insights. This can help to equalise the power imbalance with staff who are paid for their time. It could include a menu of ways to reward people e.g. through vouchers, cash, training or development opportunities or networking/celebrations events.
8. Co-produce an evaluation tool with local people using Appendix 5: the Co-production Learning and Evaluation Tool as a template to kick-start conversations about reviewing co-production; deciding together which outcomes should be measured and how. The Questions to review/ Checklist for Co-production (Appendix 4) could also inform these discussions.

Methodology

We ran three workshops with pre-agreed themes all of which were lively, fun and elicited warm discussion. Feedback was captured using a 'sticky wall' where participants wrote down or drew their responses and these were displayed for others to see. These responses were then shared in note form after each session. All sessions were planned and delivered with three members of the National Co-production Advisory Group (NCAG) – a group of people with lived experience who guide TLAP's work. Two of the facilitators for this work were people with learning disabilities. The added-value of coproducing the coproduction events with our NCAG members was that the style and pace of the events was appropriate to those involved.

We aimed to have 3 workshops but didn't plan the content of all three in advance, rather we identified loose themes but left space at each session to hear from local people about what was important to them, what they wanted the outcomes of each session, and the overall work, to be. This meant we grew the method organically - workshop two was planned after workshop one, based on the feedback gained and the ideas and insights from those who

attended, and workshop three being influence by both one and two. The group expressed that this way of working was important to them as they were directly involved in setting the agenda going forward, rather than having a pre-conceived set of outcomes imposed from the start.

We also captured learning as we went along, tailoring our approach what was working/ not working for attendees. We didn't get it right first time in terms of accessible venue, catering, so made changes based on this for the next event. In listening to people's views they came back for more rather than being put off by simple practical matters that could easily be remedied.

Facilitation was kept informal and flexible with people being able to voice their thoughts and ideas at any point in a session. We also wanted to inject some energy into the work so introduced a short Zumba energiser at the start of sessions two and three run by one of the NCAG facilitators (who has a learning disability). As part of an activity in session one, a participant who accesses Halton Speak Out mentioned she had written a song covering themes of person-centred care, the importance of having choice and control and being treated an individual. This was played at a subsequent workshop and helped put people at ease and made them feel included, heard and welcomed. It also demonstrated that there are flexible ways for people to share their experiences of services.

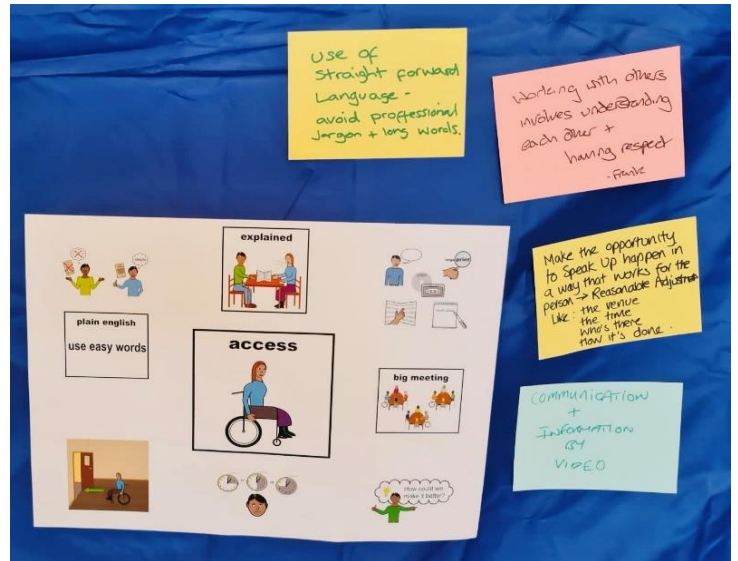
What we learnt from local people about coproducing from the methodology used:

- Giving people a voice isn't just about hearing them speak – find different opportunities for people to express themselves.
- Give people time and space to feed-in at their pace.
- Check your understanding of their views.
- Absolutely stay away from jargon and acronyms.
- Be flexible and adaptable to change.
- Let it flow in other directions, the insights can be invaluable.
- Don't set a rigid agenda – aim to set some goals together.
- Don't expect too much of people e.g. we must get an answer to this, this and this!
- If it doesn't work first time change it.
- Find out what's best for everyone involved.
- Feedback to people on what's been achieved.
- Make it fun!!

Below are images capturing the feedback wall and attendees having small group discussions as part of the sessions.



Participants in group discussion, Session 2

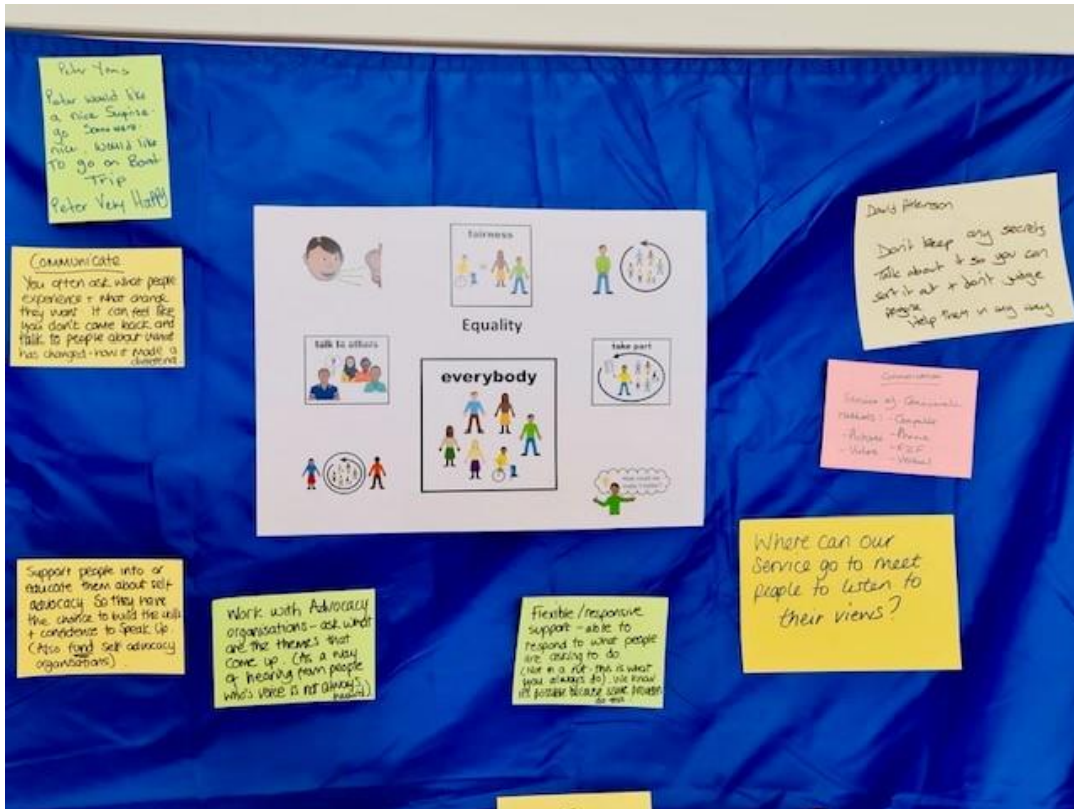


Feedback wall: How can we make meetings accessible for everyone?



Zumba energy!





Feedback wall: Equality: How can we make sure everyone is included?

Below is a summary of questions asked in each workshop with key findings.

Workshop 1 (July 23)

Defining co-production - What does co-production mean to me? Using [Making It Real](#), we held conversations with people to gauge and map current co-production practice exploring how things are working now and what needs to be in place for people to get the treatment, care and support they need.

Workshop 2 (September 23)

How are we going to have conversations? Practical meetings/ how they'll be run. Who needs to be involved? How can we engage people who aren't here? How are we going to say thank you to people – rewarding people for their time and involvement. How do people need to behave – what are the values or ingredients that guide good co-production?

Workshop 3 (October 23)

Putting everything we've heard into a Co-production Charter to inform a plan for co-production. Moving forward: our ambitions for co-production. What's needed to co-produce well? Thinking strategically about co-production. Explore the idea of Co-production Champions.

See Appendix 2 for individual workshop outlines and notes from each.

All workshops were co-designed with members of the National Co-production Advisory Group (NCAG), a group of people with lived experience involved in delivering TLAP's work programme. For this piece of work two people with learning disabilities and the Co-chair of NCAG planned and co-facilitated the three workshops alongside TLAP staff Martin Walker and Kate Pieroudis. Their feedback has also shaped this report.

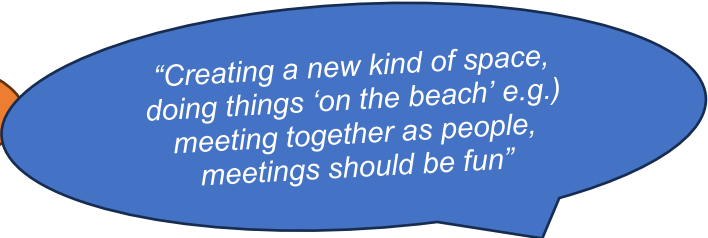
Key findings

Workshop 1 – What does working together or co-production mean to me?

People spoke about being actively supported and bringing together shared and individual voices and good relationships between staff and people. They wanted to try new approaches to working together and move away from only traditional meetings to more flexible approaches. While people wanted to create structures around coproduction they wanted meetings to be fun and informal.

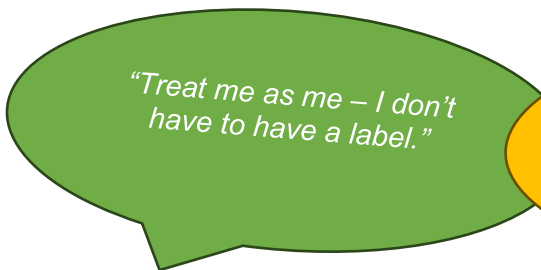


“Create a safe space that’s not too formal.”

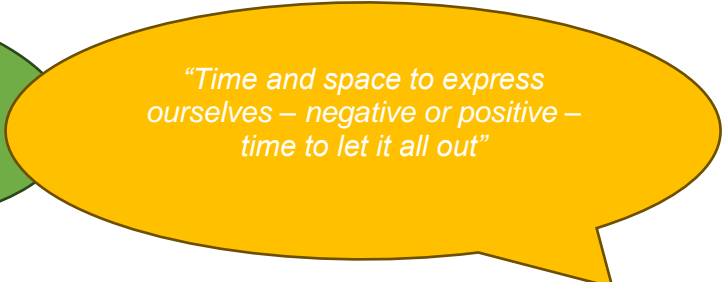


“Creating a new kind of space, doing things ‘on the beach’ e.g.) meeting together as people, meetings should be fun”

Being respected as an individual and being listened to was important:



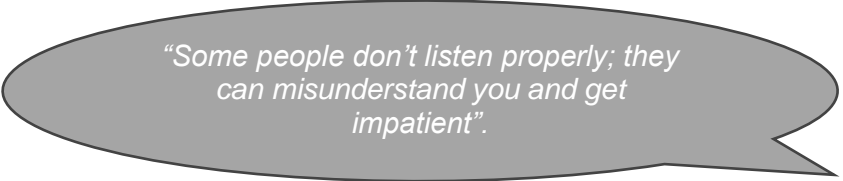
“Treat me as me – I don’t have to have a label.”



“Time and space to express ourselves – negative or positive – time to let it all out”

How are things working?

When asked how things were currently working people felt staff didn’t always listen:




“Some people don’t listen properly; they can misunderstand you and get impatient”.

Choice was sometimes limited, and people weren’t always kept informed about their care:




“My choice is limited because of hours/money.”

Despite this, others highlighted good examples of person-centred planning, including meetings to discuss activities and routines in day centres:

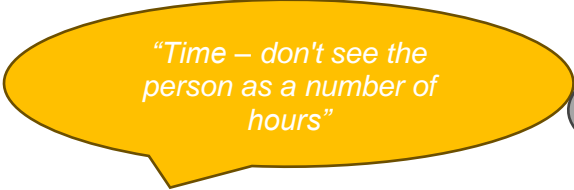


"We have a day meeting to talk about the day, routines and issues."



"We have a meeting every two weeks where big issues like times and ward environment get decided."

When asked what gets in the way of working together well, people said staffing and capacity issues, inconsistency and high staff turnover impacted on developing good relationships:



"Time – don't see the person as a number of hours"



"New faces (agency staff) get me down."

Language the Council uses could be reviewed to make it more accessible by **"ditching jargon"**.

When asked what people's priorities were for staying mentally and physically well, they pointed to regular health checks, exercise, and education by **"being supported to make good choices"**. The focus was on personalised care balanced between prescribing and encouraging behaviour alongside a range of fun activities/sessions to do with keeping minds healthy e.g. getting out into fresh air, gardening, drama. What worked well was community nurses **"providing accessible information, explaining things that make it easy to understand"**.

Workshop 2: How are we going to have conversations? What values and behaviours underpin good co-production?

People spoke about the importance of thinking about access needs and making conversations open to everyone by meeting people where they feel comfortable, using a range of approaches to engage including in-person and online meetings, surveys, events and gatherings and using clear language, free of jargon, and different ways to communicate e.g. sign language if needed.

Values

People said respecting everyone, being kind, considerate and not judging, discriminating, or treating people differently or in a negative way was important. People wanted honesty and transparency and valued being flexible in how we work, remembering people work at different paces and services need to be person-centred.

"Adjusting services to the individual and to meet people's needs" (reasonable adjustments)

"We'll remember it's not facts and figures, it's about people."

"Respectful – Be kind, accept my views, listen, understand relationships and boundaries."

Behaviours

People wanted to feel listened to and said being keen to find solutions, open to new ideas and prepared to be open and creative to do things differently was important, alongside the need to have healthy boundaries. It was important to be clear and honest about what can and can't be changed and why. People didn't want false promises, rather follow-through on the things they commit to doing.

What could working together could look like?

The group advocated for processes to feed back on actions, reviewing and evaluating how things are going together with staff would create a culture of learning and capturing change together.

"Give feedback about what has been implemented."

"Identify barriers... create structure, actions, deadlines, have actions been followed up? if not, why not?"

Some support would be needed to explain new systems and inform people about decision making processes and their role in them as well as some awareness of different conditions e.g. autism.

"Make sure everyone is clear what is expected of them."

"Educate people/population to understand people with autism/learning disabilities including literal thinking so they are better prepared to understand us."

How people want to be rewarded

People said they wanted to be rewarded for their time, ideas and expertise. This could be through payment in cash or vouchers, but the group welcomed other ways they could be rewarded included bringing people together, such as holding celebrations. People felt strongly that staff showing 'a commitment to changing things' and creating better services and keeping people informed about how things were changing also demonstrated their contribution was being valued. Further work, ideally in co-production with this group or another group is needed to create a Coproduction Recognition Policy laying out any payment rates, how people can receive reward in the best way for them, including the processes that need to be in place to support this. See attached TLAP's Payment Policy which could act as a template to kick-start discussions around creating a One Halton Coproduction Recognition Policy.

Workshop 3: What are staff and local people's ambitions for co-production? what structures/potential groups could be set up to build momentum from the workshops?

People were keen to create structures that allowed them to meet regularly, discuss and agree priorities together and **"decide how the pie is split"** in terms of how money is spent and how services are created. The group put forward some suggested priorities and a potential structure of co-production groups could be configured and how they meet and speak to each other. More co-produced work is needed to agree and formalise how this groups will work, alongside resources allocated to administer and support them. As a preliminary approach the existing group we created for this work could act as a conduit to help shape the next iteration of wider co-production groups (see 'Next steps' section of report).

"Could we have a Co-production Champion in every organisation/area of work? this needs money and other resources and a commitment to make it happen properly resourced."

"How can we connect all the different groups?"

"To feedback to organisations meetings so community NHS are aware we are involved in the group."

"Create a 'community of practice' - Think about who's going to do what when we get together: we all have skills, talents, abilities."

"Deciding topics to co-produce together."

Tools and resources

- **Co-production Charter** – See Appendix 1, this document was created by people with lived experience and staff who work with them. It highlights a One Halton definition of co-production, values and behaviour that underpin good co-production, how people will be rewarded for their time and how co-production could be evaluated.
- **Notes from Workshops 1-3: Appendix 2**
- [NCAG's Top Tips for Co-production](#) – 'How to' kick-start guide –Considerations and approaches to take when starting a co-production activity or project. See Appendix 3.
- **Questions to review/Co-production Checklist document** – How did co-production (working together) go? Questions to be answered by everyone at a session/meeting to evaluate how meaningful and accessible it was and what to action for next time. This encourages a reflective practice methodology in-line with the 'learn together as we go' ethos. See Appendix 4.
- **Outcome Tools Document** – Themes to inform a co-production outcomes framework to measure progress and outcomes of working using a co-production approach – using elements of 'Making It Real'. See Appendix 5.

Next steps and ambitions

Below are some ways in which we can build on the work we have done by developing practice and addressing priorities and ambitions for co-production across the One Halton partnership.

1. Alongside the recommendations, use the Co-production Charter to reinforce the group of people involved in this work so far with a view to use it as a basis to develop a One Halton wide co-production plans. There is clearly a desire to work together strategically.

“Can we decide how the pie is split up.”

“Can we set priorities together?”

There is a need to think through resourcing and supporting people to work strategically throughout One Halton and potentially establish the proposed structure (See Appendix 1) for co-production groups which emerged from Workshop 3.

2. The group suggested the following priorities could be discussed and ranked:
 - Making care standards more person-centred.
 - Safety in the community for people with learning disabilities and people with autism – how can we do it?

- Choice and control of personal budgets – ***“The Care act says you can spend your budget on anything as long as it's not illegal or puts you in debt”*** – how we can make this happen more effectively?
 - Don't stop services and activities that are working well, see how we can keep (or reconfigure) services that work.
 - Adjusting services to meet people's needs – ***“not just facts and figures it's people's lives”***.
 - Exercise classes and living a healthy life.
3. Another tangible and logical next step could be to develop, in co-production with this initial group, the role of Co-production Champions to lead on co-production projects and activities within the different partners agencies for One Halton. Key areas could be role purpose, values and behaviours, description of activities. The role could be time-bound to begin with and evolve as co-production evolves using the evaluation checklist and outcomes framework.
 4. Co-create a One Halton Coproduction Recognition Policy to reward people for their time. We have included TLAP/NCAG's Payment Policy (currently being updated) to use as a potential template.
 5. Use the themes, suggested measures, and 'Making It Real' Statements in the Co-production Evaluation and Learning tool/ framework (Appendix 5) to conduct a co-designed piece of work to further develop and tailor the tool to assess and monitor co-production e.g. asking people what they think a good life looks like, which 'Making It Real' statements could be used, and which measures could or should be adapted and how 'evidence' or other experiences of local people could be incorporated.

Community reporting – How this will build on our work

People's Voice Media (PVM) will work with NCAG members to utilise Community Reporting methodology to conduct dialogue interviews with 12 people with learning disabilities and Autistic people to capture their lived experiences of services. These stories will be used to explore how the newly created Co-production Charter can be practically implemented across a range of services and processes at a local level. The stories will support services connected to One Halton to work with people with learning disabilities and Autistic people to improve local services and enact co-production. The work will support leaders with One Halton to change local policies and practices, based on the lived experiences of people with learning disabilities and Autistic people, to support the embedding of co-production locally. As well as gathering the dialogue interview, 'sense making' workshops will be delivered, a short video showcasing the learning will be produced and a learning event held.

The use of Community Reporting represents a more in-depth enquiry to support the work undertaken to date with this particular target audience. As well as gathering insights into people's lives this additional work will further consider how approaches to coproduction can be enhanced and embedded. The learning from this can then be cascaded to incorporate wider groups.

Our reflections

We valued One Halton being open to testing new approaches and congratulate their willingness to try new things. Reflections from NCAG members and TLAP staff Kate

Pieroudis and Martin Walker was that of being hopeful as we were able to get people in the room who wouldn't normally engage or that many organisations would find hard to attract to these kinds of conversations (such as people receiving care on secure wards). It felt as if many wanted to attend all three sessions and were keen to speak up and shows with the right approach to facilitation (asking questions in a structured way, using easy read, allowing time, space and room for fun), people were responsive and did so in a positive, constructive way despite disagreements.

Feedback from participants suggested the group enjoyed the opportunity to meet in person with staff and partners across health and social care to have open discussions about how things were working and to plan the future of co-production together.

They are a group with varying needs and good, rooted experiences of care that can be further built on e.g. using staff and networks of people with lived experience who access Halton Speak Out. We believe we have created foundations for a proactive co-production group. Spirits and hopes were high for this to be sustained.

NCAG member Vicky said:

“I felt inspired by everyone wanting to work in co-production. To some it was a new idea, but they were embracing with open arms and that really inspired me”.

Appendices

Appendix 1 – Co-production Charter

Co-production Charter: How we'll work together in Halton



Local people with learning disabilities and autism came together with health and social care staff who support them over three workshops. This Charter lays out our discussions: what we mean by co-production or working together, what ingredients and behaviours are needed to make this work well and what meetings should look like to make sure everyone is heard, included and rewarded for their time.

We want to create a group of people with different voices that identifies gaps in services, thinks about what we need to do, makes decisions together, learns about co-production and creates better services across One Halton.

? Why have a Charter?

It acts a reminder of what we are trying to achieve, what our roles are, what we said we would do and can help to check how things are going, this is sometimes called accountability.

👥 What we mean by co-production

We prefer words like or **working together** or **collaboration**. It means being listened to and everyone's opinion being valued equally. It involves making the opportunity to speak up happen in a way that works for the person: making adjustments like accessible venues, thinking about who's there and using plain English all make meetings open to everyone. We don't always need traditional meetings, creating new ways and opportunities to have a say and trying to have fun is important. Everyone should understand what their role is and what the purpose of meetings is. People want to be involved in deciding priorities and how money is spent

together. Being kept updated on agreed actions with feedback on progress supports good co-production.

📅 Making meetings accessible

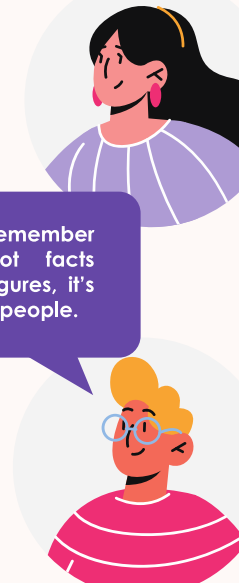
We will have meetings in person, in places that are good for people as well as online. We will be clear about people's roles and ask what support they need to take part. We'll offer information in different ways recognising people have different preferences. We will use simple language and explain difficult ideas.

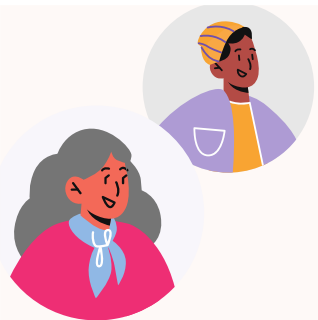
★ Values

We will be respectful, kind and work in an accessible way. We will be honest but gentle. We will be flexible in how we work and considerate, remembering people work at different paces.

We like the term 'working together', this means creating time and space to express ourselves – negative or positive. It's important to work together to get better.

We'll remember it's not facts and figures, it's about people.





👍 Behaviours

We'll listen and be keen to find solutions. We'll be open to new ideas and prepared to be creative and do things differently. We will have healthy boundaries and be clear and honest about what we can and can't do - we won't create false promises but we will do the things we commit to.

🌟 Diversity and who needs to be involved

We would like as many different voices as possible to be involved: people living alone, in supported housing, on secure wards and people working in commissioning, housing, education, service managers and staff in health and social care settings like nurses or Occupational Therapists, faith groups and the voluntary sector including carers and self-advocacy groups like Halton Speak Out.

⚖️ Equality

No discrimination or treating people differently, in a negative way because of things like disability, their race or gender. We'll recognise everyone brings different experiences and points of view because of their experiences. It's ok to disagree but we'll respect each other and won't judge anyone.

💬 How we will have conversations and keeping in touch

We'll keep notes and let people know what was said with actions and timelines. We'll give feedback about actions we have taken and where they have not been followed up, we will explain why. People can have a say in what gets discussed at meetings.

🕒 How we will continue meeting and making plans together

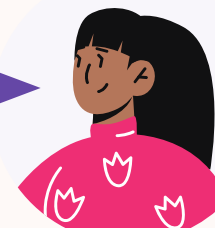
We will think about how to build on our workshops by developing the suggested structure for future co-production groups and how they'll work together and decide the priorities for future meetings. We'll find ways to resource co-production. We'll think about how to develop the role of **Co-production Champion** in each partner organisation. The role could include: leading co-production projects, supporting others who want to co-produce, meeting with other Champions to share learning about what's working/ not working and discussing how barriers can be overcome.

💡 Learning as we go

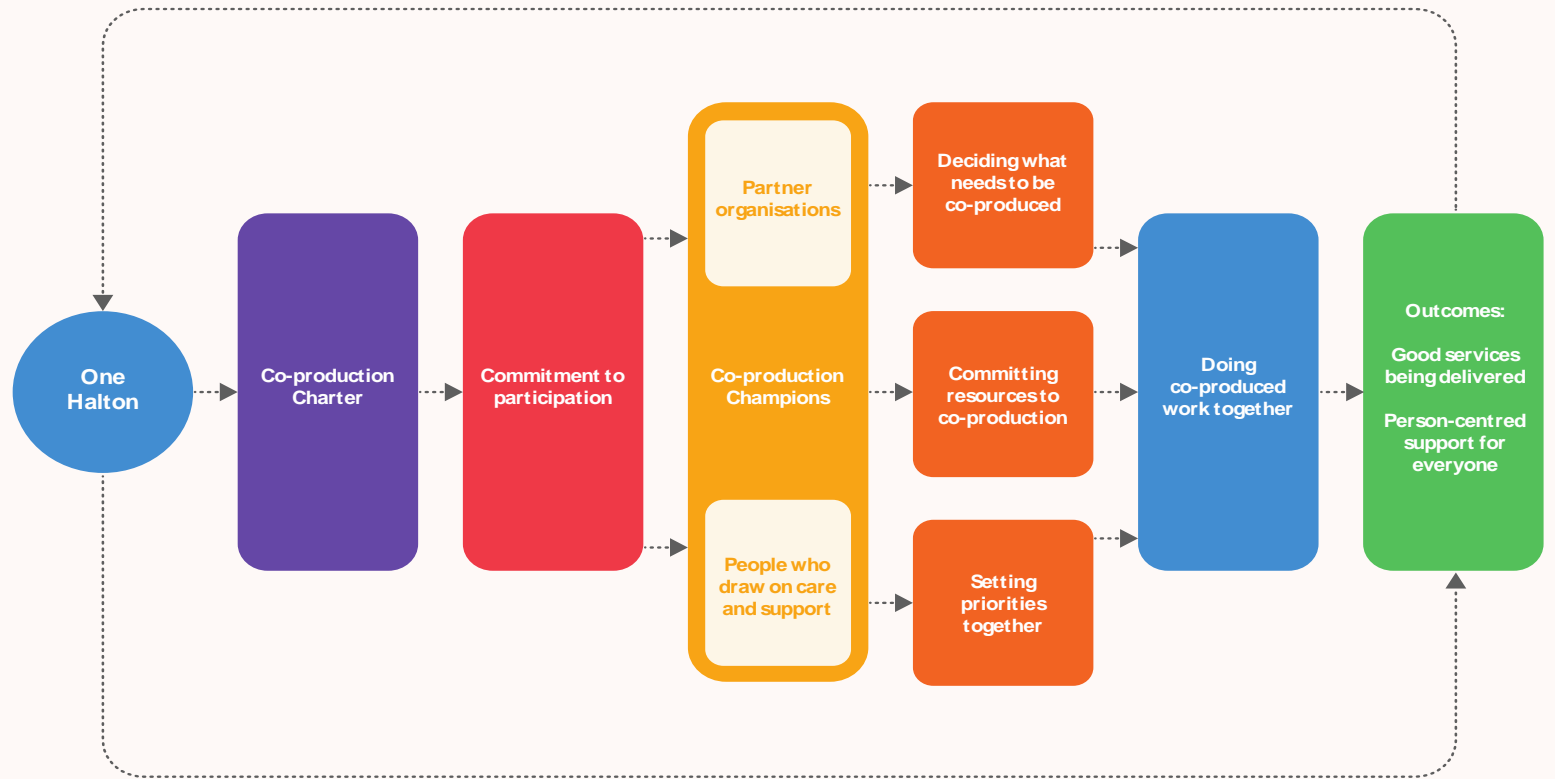
To help evaluate co-production we'll use a Co-production Checklist after each meeting or activity:

1. What did we achieve or get done? / The meeting had purpose and the actions from it will make a difference – Yes/No
2. What are the outcomes from the meeting or session? Was the meeting worthwhile for everyone? What joint decisions were made?
3. How did it feel to be part of the meeting or session? Was everyone welcomed, included, and valued?
4. Were we inclusive, did we respect everyone and the importance of their part in the work?
5. Was the meeting/session accessible for everyone?
6. Was everyone clear about/offered payment or thanks in some other way?
7. What do we need to change for next time?

We want strategic conversations together – planning big decisions like how money is being spent and creating better services.



Suggested One Halton co-production structure



Appendix 2 – Individual workshop outlines and notes

Workshop 1 – What does working together or co-production mean to me?

1. What does working together (sometimes called co-production) mean to me?

- Active support
- How services can work better for me – what services are we talking about?
- Engagement opportunities
- Shared/individual voice
- Celebratory – food and refreshments
- Innovative and new
- Fun – sporty and events, music and entertainment, themes like gardens
- Having a circle of support helps and they listen to you like from both families per se
- Having direct support can help with different groups around your local area
- Understanding and listening “I want people and society to understand what it’s like to be autistic and understand things”
- Someone can say a posh word and people with autism don’t understand
- Asperger’s: I get frustrated about a lot of things - if people can explain things in a way I understand
- It makes me feel good by being listened to by my social worker
- Having a circle of support helped us both when we had our wedding path and our journey to marriage
- More access to staff when you need something – recognition that some people aren’t going to shout as loud as others
- Treat me as me – I don’t have to have a label
- Time and space to express ourselves – negative or positive – time to let it all out
- It is important to work together to get better and to be safe
- Trust and reliable
- Staff who knows me, happy me
- Working in a safe environment having trust and reliable people
- Getting to know staff
- Having staff that listen

2. How do we feel about how things are working now?

- Some people don’t listen properly, they can misunderstand you and get impatient because they don’t
- Some staff doesn’t understand what we’re saying
- Annual reviews – I need to know what’s available, finding out what I’m good at and what I’m capable of doing
- I want to be listened to
- Find out the best way to communicate with someone
- Things sometimes change – tell me as soon as possible
- Don’t think about me in hours
- My choice is limited because of hours/money
- If I come up with a plan people do help but it’s not written down would be a good idea to – to remind me whats in it to see if things are happening
- Not repeating ourselves
- Consistency of staff [is an issue] ‘same social worker/support staff’
- Having my own place-Want to be kept updated, better communication about what’s happening with this, who gives this communication-I need more support

- Sometimes don't feel listened to
- No internet and I feel like I should have it back
- Different doctors: some are better than others, a good doctor listens, misunderstanding the person happens
- Medication: Made them take it in front of someone before I could take it alone in room –removes control , sometimes assumptions about me mean it can have other effects, e.g. can affect parole date
- My circle of support and family members and my partner, review with my support worker about my life now and what I want to do in the future

3. How are people involved in making decisions that affect them?

- We have a day meeting to talk about the day, routines and issues
- We have a meeting every two weeks where big issues like times and ward environment get decided
- [Got] my car – 'I luv it' (smiley face), it enables me to plan and do things that are important to me, want to visit mum and dad's grave, the car helps me to do this
- Car enables me to have a job(volunteering) doing gardening and deliveries, self employed from home, garden produce
- I can go to the pictures, bowling
- Make sure there is always someone available to take me on holiday
- Knit and natter, choice of dolls and choice of activity- I don't have to do things I don't enjoy
- People who run the group are helpful

4. What gets in the way of good working together?

- Staffing levels – capacity – inconsistency
- Reliance on agency staff – no core team (skills)
- Communication - staff [not] listening and understanding
- Time – don't see the person as a number of hours
- Resources not being used efficiently – use audio and recordings so less repetition required
- Familiarisation
- Some words e.g. 'mong' used less for learning disabled people - that's a good thing
- We are people too! Leah's song
- Don't wrap me in cotton wool
- Don't protect me too much
- Let me make mistakes
- Using the term 'service user' they said they would stop using this term-it hasn't happened, 'people we support' would be better
- Language changes – council needs to think about the language they use – complicated words 'let's go through and ditch the hard ones'
- Changing the way we communicate – e.g. social workers using smiley faces, using expertise of speech and language therapists to change language
- Annoying when not listened to by the staff in the daily morning meeting to plan the day
- Covid
- No car until recently
- New faces (agency staff) gets me down
- No physical money
- [Lack of] contact with family
- Thinking about who needs to be in meetings like this – 'I think social workers hearing some of these comments directly would be really helpful'

5. How we work together with people with learning disabilities and autistic people to make sure you're as healthy as you can be?

- **To stay physically well**
- **To stay mentally well**
- Health checks
- Exercise and education
- Weekly physical checks
- Relaxation and structured
- More access to staff – require more
- Personalised care
- Activities
- Reasonable adjustments- only for those who want it -choice
- Annual well man, dentist, orthodontist, parttime wheelchair user, eye test, like sauna and jacuzzi and massage, fresh air and gardening, drama, bowling
- Encouraged to keep healthy, eating needs more balance, 'I don't like to be told what to eat' but needs more balance
- Connection and seeing old friends from the day centre
- Samba music (band) - kept in touch socially
- Positive relationship with the nurse
- Getting given the choice to be weighed or not
- Eating a healthy diet
- Having the odd unhealthy meal/snack/treat is ok
- Community nurses always reassure you while getting our bloods done
- When I go to the GP they help you and listen to you and give good advice as well as health tests
- X and Y helped us with hard and good times by getting us to open up more often as well as working as a team
- Community nurses provide accessible information, supported us both as a couple
- GP's do their best to explain by making it easy for me to understand what they are saying
- Help with weight, exercise, activities, health checks, right information to make choices
- We do mission fit walks where we walk a long distance
- We do sessions and activities to do with keeping minds healthy
- We're given the opportunity to go to the pub – doing things in moderation
- Activities to keep mind healthy, listen to music, TV, play games like FIFA

6. What's stopping you/what gets in the way of staying physically and mentally well?

- Doctor imposes his views and doesn't always listen
- Would like the same social worker
- Doctors mentioning my weight all the time – annoying-medications putting weight on me is not my fault
- Medicines – changing size, shape, colour, impacts negatively on people may feel taking the wrong thing
- The GP needs to help other people just like us with health problems of their own
- Being given the right information to make choices e.g. smoking, drinking
- Cleaner makes a noise and disturbs my sleep

Today's workshop was...

Good – 12 votes

All right – 0 votes
Bad – 0 votes

It would have been better if...

- Representation from other stakeholders
- Fun and engaging(practical stuff)
- Presentation by attendees about what they've done
- Room very noisy –I wear hearing aids and struggled to hear speakers – fabulous session though
- More practitioners involved
- Need Zumba to start the day bring some energy!
- Really good to hear everyone's views. Maybe shorter session next time and smaller room so all can hear
- Organised food would be better
- More nurses from support team
- Venue very decent place, enjoyed the day, mostly understandable some bits a bit confusing, nice and informal good to have time to chat
- Would have been better if we had a butty, drinks provided in breaks

Workshop 2: How are we going to have conversations? what values and behaviours underpin good co-production?

1. How are we going to have conversations?

- Open to various communication styles (for all types of settings) e.g. IT, easy read, non-verbal
- Reasonable adjustments (and availability of what these are for all providers for each individual)
- Use of communication types – face to face, 1:1, group, email, events
- Consideration of environments (e.g. home, safe environment)
- Consideration of communication and engagement – how to publicise opportunities to engage
- Make available/accessible for everyone – via focus groups, surveys, questionnaires
- Give feedback about what has been implemented
- Work with self-advocacy groups
- Meet people where they are comfortable and feel safe
- Respect the support that the group can provide to create a structure for people to stay involved and keep working together (fund self-advocacy)
- Consistency with professionals/support
- Face to face, minutes of meetings so people can refer back
- If you go to your doctor and struggle with your emotions write it down for them to try to help you
- Not by Zoom – IT only works for some
- Use sign language
- If you use a mobile but struggle with spelling use voice message to communicate
- The environment needs to meet needs
- Use a range of approaches – what works best for you?
- Involve friends, family, carers, advocates who can support
- Relationships
- Translate for different languages

- Make sure everyone is clear what is expected of them
- The environment needs to meet needs
- Structure, actions, deadlines, have actions been followed up, if not, why not
- Identify barriers
- Text, email, video clips, letter, sign
- Make conversations exciting

2. How do we want people to behave?

- Talk in plain English and don't use jargon
- Genuine transparency
- No discrimination
- Don't put up barriers
- To actually deliver – not just empty promises
- Respectful, listening, person centred, inclusion, who is the decision maker?
- Equality
- Educate people/population to understand people with autism/learning disabilities including literal thinking so they are better prepared to understand us
- Please explain what you are saying in a way that I will understand as I am very literal
- Acknowledge me for who I am
- Solution focused
- Make people laugh with a good sense of humour and respect
- Respect me
- People should be polite with people with disabilities
- Going to Inspire gives me the opportunity to be me and be who I am
- Decency
- People to learn to communicate/effectively sign
- Don't guess what I'm going to say
- Be nice, polite and happy to each other
- Don't talk over me or finish my sentences
- Don't judge anyone
- Little things matter – details like having what I like on the TV or radio
- Be open to new ideas and prepared to do things differently
- Be flexible
- Considerate
- Kind
- Trustworthy
- Thoughtful
- Boundaries
- Treat people how you would want to be treated
- Engage! Show interest in what is important to me
- Honesty – be honest but gentle, reality can be hard
- Show an interest in me and what I like or know
- Discuss/warn about change
- Respectful – Be kind, accept my views, listen, understand relationships and boundaries

3. Who needs to be involved?

- Self-advocacy groups – self advocates
- Gateway recovery Centre – we got rules changed for people with autism at government

- Everybody needs to be involved
- Church groups
- Schools
- GP's
- Gill, collette, linda, amanda
- Friends
- Family
- Housing providers
- Charities
- Providers and commissioners
- Voluntary sector
- Carers Centre
- PA's/support workers to ensure everybody can receive the right support to be involved
- Emergency services
- Community groups
- Social worker, mum, senior staff, family, staff and day services (names provided)
- Safe In Town
- Community venues – leisure, shopping, services
- Transport – public transport, educators (travel training), Motability
- Start with the person – expert by experience and their family/carers, the people who support them, provider management, NHS and Local Authority staff up to commissioners
- Service managers for health, Local Authority and education
- [Image of chain] H is in a chain – everyone willing to listen and wanting to make it work

4. How are we going to thank people?

- Local celebration for changes that have happened
- Recognition [Image – rosette]
- Vouchers
- Lunch
- Say 'thank you'
- Tell people how you feel how they are important to your life
- [Image – letter] Letter
- Send personal message email, text, card
- Mutual appreciation
- Carer of the month
- Idea of the year
- Bus for days out with co-production group
- Make cards/pictures
- Job satisfaction
- Event – e.g. cream tea, disco, garden party, evening event
- To make sure things are changed well and can stand the test of time
- Respecting people so they feel valued
- A bouquet of flowers
- Cup of tea and a cake
- Knowing that joint working will be ongoing and not a token effort
- Money
- Asda vouchers
- Uber Eats vouchers

- Free lunch
- Vouchers – sports events, cinema, music events, gym/health club
- Communication transparency – informing people what has been done to support their requests
- High five
- Make sure the service stays and doesn't go because of funding
- Follow through with what we say, keep people on [the] board so they are heard

Reviewing what people said last time – people wanted to add:

- Communication and information by video
- Make the opportunity to speak up happen in a way that works for the person – reasonable adjustments like the venue, the time, who's there, how it's done
- Use of straightforward language, avoid professional jargon and long words
- Working with others involves understanding each other and having respect
- Access – varied methods of engagement
- Access – Service user tailored access (specific to care plan)
- Work with advocacy organisations – ask what themes are the themes that come up as a way of hearing from people whose voice is not always heard
- Support people into or educate them about self-advocacy so they have the chance to build the skills and confidence to speak up – also fund self-advocacy organisations
- Flexible/responsive support –able to respond to what people are asking to do – we know it's possible because some providers do this
- Communicate – you often ask what people experience and what change they want. It can feel like you don't come back and talk to people about what has changed –how it made a difference
- Database for adults with a learning disability – dynamic support register for 0-25 and 18+, high criteria – lower level
- Medication calls – difficulty with different agency workers particularly understanding those who don't have english as first language (name supplied)
- Get creative in how you involve people – pictures, video -try things out, what works for people-not one size fits all
- Recognise everyone's time is valuable
- Make it worthwhile by listening – making a change and then letting people know how it's helped to make things better
- Feels GP doesn't listen to me, get lots of choices-go visiting friends, would like to work in a hair salon and do nails.
- Ask what people want to do but close places down
- Would like to do Zumba at local leisure centre but now not on
- Don't keep any secrets, talk about it so you can sort it out and don't judge anyone, help them in any way
- Communication – variance of communication methods – computer, pictures, phone, video, face to face, verbal
- Where can our service go to meet people to listen to their views?

Today's workshop was...

Good – 13
All right – 0
Bad – 0

Comments

- Brilliant – I look forward to the next one and will hopefully be able to bring some young people with me
- Fabulous
- No changes
- Great event
- Helpful learning/talking about how people like to communicate
- Bringing people together!

It would be better if...

- Let the experts take the lead
- Let the advocates run the group we are important
- Turn the sun down
- Microphone – a bit hard to hear sometimes
- More services
- More carers to attend
- More services within Halton

Workshop 3: What are staff and local people's ambitions for co-production? what structures/potential groups could be set up to build momentum from the workshops?

Facilitators: Jenny, Vicky, Kate S, Martin, Kate P

1. What should go in the charter?

Feedback from Sessions 2 and 3: values of co-production, behaviours we expect, how we reward people, how we will make things accessible and inclusive.

Why have one? 'Reminds you that you have something to do' - this means everyone is accountable. 'Will also help so people don't forget what we agreed'

- Being accountable
- the charter will help us identify gaps and what we need to do
- need two levels of the charter and who's going to do what ownership and more than learning disability and autism we also need older people recruitment at
- Music therapy- format of meeting, during breaks, at the start, end and other opportunities, making people relax during the sessions for example music and food to put people at ease
- Creating a new kind of space for doing things for example 'on the beach, meeting together as people' it should be fun
- If you help someone who you can see needs help when you've helped them then say to them pay it forward which means help someone else who you can see also needs help
- Support to access meetings not attending on your own as this can be very daunting to the person
- Creating new opportunities for people to get involved in you and different things

- informing everyone- online newsletters
- Prioritising together
- We all agreed on the cake idea. Different pieces for different groups. That nobody gets more than their fair share or less than
- We like the word collaboration- it's a good word to use for working together.
- No false promises. Key is to do what we commit to bleep be clear about what's been agreed an act on it. No false expectations
- strategic conversations together- planning big decisions like how money is being spent and creating better services
- Create a safe space that's not too formal
- Adjusting values and services to the individual- reasonable adjustments, it's not facts and figures, it's people

2. Ambitions of co-production/ how to continue having these discussions (how to create 'infrastructure' for co-production)

- Could we have a Co production champion in every organisation/ area of work?
- this needs money and other resources and a commitment to make it happen properly resourced
- How can we connect all the different groups?
- How does how does advocacy and self advocacy fit in?
- To feedback to organisations meetings so community NHS are aware we are involved in the group
- We need to ensure we're capturing people's stories- positive and negative
- Deciding topics to Co produce together- examples could be 1. feeling safe in our community 2.the community is sometimes dangerous you don't know who is nice and who is nasty 3. how people are supported
- Living on benefits is hard with the cost of living crisis because prices keep going up all the time and I only get so much in benefits
- People listened, people understood the frustrations that people have with the service
- Create a 'community of practice'
- Think about who's going to do what when we get together: we all have skills, talents, abilities
- Working as an amazing team helps everyone feel better in themselves
- Treating everyone with equal respect no matter what it doesn't matter who they are, they all need treating the same way
- Equity versus choice and control- it should be person centred
- Worries and anxieties about moving forward and the correct support family issues
- Suggested ideas for future meetings:
 - Care standards person centred
 - Safety in the community- how can we do it
 - Being respected

- Don't stop things that are working well see how we can keep it
- Choice and control of personal budgets
- Care act says you can spend your budget on anything as long as it's not illegal or puts you in debt
- Adjusting services to meet people's needs not just facts and figures it's peoples lives
- Exercise classes

3. A checklist for Co-production

- Clear roles what's expected of people, citizens also what's expected of staff
- Complete evaluations as they go
- evaluating as we go- learning and setting the agenda as we go, together
- What's important to me right now?
- What have I got to give? E.g. resources, skills- everyone contributing something
- This must make a difference to how people are supported, we don't want to pay people to let us down.

Feedback – how the three sessions have gone

- We got a chance to share and talk about our views.
- The meeting made us feel welcome and our voices were definitely heard.
- I find the advocacy charter has given me food for thought and has given me inspiration

Appendix 3 – NCAG’s Top Tips for Co-production

What is co-production?

The term co-production refers to a way of working, whereby everybody works together on an equal basis to create a service or come to a decision which works for them all.

It is built on the principle that those who use a service are best placed to help design it.

What is important for co-production?

10 Top tips

1. Co-production must start as an idea that blossoms with everybody involved having an equal voice.
2. Come to the table with a blank agenda and build it with people who use your service, their carers and families.
3. Involve people who use services, carers and their families in all aspects of a service – the planning, development and delivery.
4. In order to achieve meaningful, positive outcomes, everybody involved must have the same vision, from front line staff to management/board members.
5. Start small and build up to bigger projects, letting people lead, not professionals.
6. Acknowledge that a range of skills are needed for co-production.
7. Recruit the right people that support co-production.
8. People who use services, carers and families should be clear about what their expectations are and be fully engaged in the process.
9. People who use services and their carers know what works, so you can't get it right without them.
10. Don't take responsibility for solving every problem—allow the group to find collective solutions.



What is great about co-production?

- * Everybody is equal.
- * The outcomes are meaningful and positive.
- * People who use your services, carers and families are seen and recognised as assets.
- * Your service will improve.
- * It is a fun and productive way of working together.
- * You have the opportunity to see different perspectives that may differ from your own.

How can you support co-production?

- * Ensure appropriate and adequate resources are available to support co-production (participation fees, expenses, easy read documents and access needs).
- * Ensure frontline staff have everything they need to for co-production, including time and flexibility.
- * Ensure no one group or person is more important than anyone else. Everyone can contribute given the right support.
- * It is important to have good facilitation and listening skills, and to reflect and act upon what is heard.
- * Acknowledge and respect what people who use services, their carers and families say.
- * Ensure everything in the co-production process is accessible to everyone taking part.
- * Before you start the work, decide together how you are going to work and what will make it successful, then stick to it.
- * Accept that sharing power means taking risks. Take a chance!
- * Learn to share power. Doing things differently means we can work across a whole range of issues that confront us.
- * Work with the group to support a clear set of identified values with a collective sense of direction.
- * Don't use jargon or acronyms, plain English is better for everybody.
- * Create the expectation that people who use services, carers and families will be involved in every aspect of service planning, design/development and delivery at every level.

Appendix 4 – Questions to review/Co-production Checklist document

Reviewing Co-production – Learning as we go

How did co-production (working together) go today?

Questions to be answered by **everyone** at the session/meeting, together.

What did we achieve/get done?

- The meeting/session had purpose and the actions from it will make a difference. Yes/ No- if no, why not?
- What are the outcomes from the meeting/session? In light of this, was the meeting worthwhile for everyone?
- What joint decisions were made?
- How did it feel to be part of the meeting/session? Welcome/included/valued?
- How did co-production make this session better than officers working on their own?

Were we inclusive and did we respect everyone and the importance of their part in the work?

- Did **everyone** get a chance to ask questions?
- Did **everyone** understand what was being said?
- Did **everyone** get a chance to speak?
- Who was missing from the meeting – particular people, roles, backgrounds and experiences?

The practicalities/accessibility

- Was the meeting/session held in a good location?
- Was the meeting/session held at the best time for people?
- Was the meeting/session accessible for everyone?
- Were there enough breaks?
- Did the way the meeting/session was run work for everyone?
- Would a different format work better next time?

Reciprocity

- Was everyone clear about/offered payment or thanks in some other way, in line with the payments policy?

Summary of actions to enable co-production - what do we need to change for next time?

- 1.
- 2.
- 3.
- 4.