

Co-production and Public Engagement across Health and Social Care in Cornwall:

Exploring the positive effects and challenges of the Covid-19 pandemic with a view to making sustainable changes

Headlines Report, September 2020

Introduction

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This research

This research set out to independently review any changes to local working practices in Cornwall's Health and Social Care system during the initial Covid-19 period with specific regard to public engagement and co-production, and to make recommendations for how positive aspects of this can be sustained locally in the longer term and elsewhere.

The research has been funded by NHS England and NHS Improvement through Royal Cornwall "We don't talk about the fantastic opportunities or upsides of the pandemic...to build a sense of shared purpose and common identity to make it less likely that people will return to their familiar habits and ways of working"

Simon Gill, The Safeguarding Community, <u>'COVID-19: Safety-II in action (Zoom outcomes)</u>'

Introduction

Hospitals NHS Trust. It was conducted by <u>Co:Create</u> and <u>Healthwatch Cornwall</u> between June and August 2020.

This report

This report sets out the **key findings** from the research, alongside the **recommendations** that stem from these findings. It also includes a set of proposed and **co-produced principles** for how everyone can work together in the future so that the recommendations can be most effectively embedded.

A set of case studies has also been produced as a separate output to complement this report.

"We...hope that people recognise the speed with which it is possible to make changes."

Sally Turner, Citizens Advisory Panel for Cornwall and the Isles of Scilly Integrated Care Partnership

1. Use principles for ways of working

Adopt and promote a principles-based approach to working across all sectors and with the public as part of Health and Social Care in Cornwall (see principles in next section). The principles should be promoted at all levels and incorporated into training and induction processes.

2. Set up a dedicated steering group

Raise the profile of co-production and other types of public engagement through a truly cross-sector steering group with:

- A dedicated, bounded and endorsed remit to guide co-production, public engagement and associated approaches across Health and Social Care in Cornwall;
- Equal representation from <u>existing</u> groups across health, public and voluntary sectors, as well as the general public;
- Joint facilitation to allow conversations to stem from a range of different viewpoints rather than solely seeking feedback on practitioner-led initiatives.

3. Settle on a shared understanding

Explore, refine and communicate a shared definition for what is meant by 'co-production', 'public engagement' and other similar terminology for Health and Social Care across Cornwall. And do this collaboratively.

This should be done in the first instance to allow consistent conversations to take place across the county, with a long-term view of moving away from using the terms at all and adopting the principles for ways of working detailed in the next section.

4. Develop a participation strategy

Covid-19 has created a shared aim and fostered a can-do, supportive culture, including the proliferation of volunteers. To use this effectively for the purposes of co-production and public engagement a clear strategy is needed to:

- Identify meaningful opportunities for people to be involved;
- Co-produce a 'platform' through which to communicate these opportunities.

5. Conduct regular stakeholder mapping

Embed broad and regular stakeholder mapping across the county and different services to:

- Understand the best ways to build on existing expertise, experience and assets;
- Broker new relationships and develop existing ones;
- Guide conversations and with whom to speak around specific services within Health and Social Care.

6. Recognise and invest in skills

To do co-production and public engagement in a meaningful way, people need appropriate skills and resources. Furthermore, there are already people across Cornwall that have these skills and are ready to share them. As such, it is recommended that commissioners should invest in the existing infrastructure, people and organisations across Cornwall to foster the culture of safe challenge from which better, more efficient services are developed.

7. Co-produce a go-to place for resources and support

A number of ideas for community resources have been suggested during this research to help people feel more confident, including:

- Myth-busting about what 'can't be done';
- Examples of best practice alongside less successful case studies that clearly communicate why it didn't work;
- A bank of ideas and projects that people have worked on together so they're not lost if it takes a while to put them into action.

About the findings

The findings from this research fall into four main categories:

- Positive changes to working practices arising through Covid-19;
- Negative impact of Covid-19 on working practices;
- 3) Wider opportunities to consider;
- 4) Other challenges to consider.

Within each category, findings have been prioritised by attendees of research workshops.

We have presented findings in their prioritised order.

We recognise (and embrace the fact) that some of these findings are conflicting. Many of the positive changes we have heard about through this research have related challenges associated with them.

It is also worth noting that there is an implicit assumption throughout this report that people think co-production and public engagement are good things within a health and social care setting.

Positive changes to working practices arising through Covid-19

The following prioritised findings relate to things that have directly been attributed to the Covid-19 pandemic and have been broadly perceived as positive. As such, they pose two practical questions for sustainable approaches:

- How we can keep doing them?
- What made them possible?

1. Shared purpose

Covid-19 has galvanised a sense of everyone being an equal part of the same community with a shared aim. And this meant that people, including the general public, just got on with it and knew to what they were contributing.

2. Using technology

Covid-19 has shown how technology can be used to support and enhance services, co-production and public engagement.

3. Barriers removed

Covid-19 has meant that rules and regulations have been relaxed, enabling changes and ideas to be implemented more freely. This, in theory, makes it easier to engage with people.

4. Joining up

Covid-19 has brought different services and sectors together as an aligned Health and Social Care ecosystem. This includes the co-location of services and other organisations which has supported a more coherent, efficient service user experience.

5. Funding

Covid-19 has made funding more available for people and easier to access so that people can do good work.

6. Speed of change

Covid-19 has shown that positive change can happen quickly if needed. This includes the implementation of ideas that have been

discussed for long periods of time without prior progress.

Negative impact of Covid-19 on working practices

The following prioritised findings relate to things that have directly been attributed to the Covid-19 pandemic and have been broadly perceived as having a negative impact. As such, they pose two practical questions for sustainable approaches:

- How do we overcome these challenges?
- In overcoming the challenges how do we ensure the positives are maintained?

1. Marginalised groups

Some groups of people have found Covid-19 particularly difficult and may not be benefitting from any positive changes to services equally. This includes those who are disabled or experiencing mental health concerns.

2. Being heard and responding

The willingness of decision makers to listen and give other staff a sense of agency to support changes 'in the system' is key to ensuring effective co-production and public engagement but Covid-19 affected this as other 'operational priorities' took over.

3. Digital exclusion

Not everyone has access to the technology that has been adopted during Covid-19 and this risks leaving some people behind.

4. Changed priorities

The urgency and stress of Covid-19 can mean that co-production and public engagement are not prioritised, which can lead to an incoherent offer.

5. New funding timescales

The short timescales of new funding related to Covid-19 make it difficult to factor in public involvement to shape the thing being funded.

Wider opportunities to consider

The following prioritised findings relate to things that have been raised during the research independently from Covid-19, but have been identified as opportunities on which to build, particularly given the impetus provided by the pandemic. As such, they pose two practical questions for sustainable approaches:

- How do we embrace these opportunities?
- How do we build on this wider context in the conversations to follow about Covid-19?

1. Building trust and confidence

Public confidence and trust in services comes from co-production and public engagement and it is those things make those services more efficient.

2. Vehicles for change

The structures are in place in Cornwall for long term change in relation to co-production and public engagement, and working relationships are developing, but they all need to be representative, inclusive and fully

informed.

3. Further evaluation

Many positive changes have happened but, before committing to make these things permanent, better evaluation and feedback from people are required.

Other challenges to consider

The following prioritised findings relate to things that have been raised during the research independently from Covid-19, but have been identified as broader challenges locally. As such, they pose two practical questions for sustainable approaches:

- How do we address these issues?
- How do we take the opportunity of learning from Covid-19 to overcome these longer-standing challenges?

1. Shared understanding

Co-production and public engagement can be perceived as different things, but there's not yet a shared, agreed understanding of this

across Cornwall's Health, Social Care and Voluntary sectors. This makes it harder for the approaches to be embedded, and for people to feel confident in adopting them.

2. Inconsistent adoption

Different parts of Cornwall and its services are progressing at different rates with regards to co-production and public engagement, and this can be affected by structural things like funding and the size of administrative areas.

3. Us and them

Health professionals and 'lay people' often get put in different boxes, which creates a divide and a lack of confidence in speaking with one another.

About these principles

Throughout this research, people spoke of the need for wholescale culture change if co-production and public engagement are to be embedded. The following 15 guiding principles are an attempt to start that process. And they apply equally to members of the public, voluntary sector and public sector as they do to healthcare professionals, organisations and institutions.

They are not meant to be a goal standard to which everyone must always adhere. Instead, they are intended as a supporting reference point against which things can be reflected and shaped. The principles have been arrived at collaboratively through the workshops delivered as part of this research. They represent a starting point from which to refine and develop over time.

As a Third Sector leader in Cornwall told us during the research:

"We should first be concentrating our thinking on creating conditions which will encourage a more positive and longer term commitment to civic engagement from existing volunteers and a much wider group of people."

The principles...

1. Listen. To everyone. Equally.

Listen to what people are telling you, hear it and proactively promote opportunities to have a conversation with practitioners, the public, the voluntary sector and everyone in between. Recognise that some voices will be louder than others and try to hear the quieter ones too. Everyone brings an equally important perspective and their own expertise to health and social care. This will lead to better, more efficient services, and increased trust and confidence.

2. Be open and receptive

Start out with an open mind. While listening to others, be open to the constructive criticism you may hear and acknowledge it, even if it sounds like upset. Try to avoid feeling defensive and promote a culture of safe challenge.

3. Trust people

Other individuals or organisations may already have trusted relationships with the public and the skills with which to engage them. Find them, trust them and work with them.

4. Start small and try things out step by step

It's OK to take small steps to start with. Things don't have to be system or county-wide all at once; try things locally first and see how it goes.

5. Just do it! And do it now.

Don't overthink things or wait for permission. If there's an opportunity to try something or have a conversation, take it, and trust people's expertise and that they'll be appreciative of this approach.

6. Be honest, realistic and tell it like it is

Challenges are opportunities. Things aren't always positive and it's important to recognise publicly when they are challenging, even if it feels like you're opening yourself up to criticism. This allows everyone to contribute to finding a different way to doing things and overcome the challenges.

7. Show your working and provide feedback regularly

Ongoing feedback is crucial as part of listening to

people. Tell people what you are planning to do (and why) at every stage, what you have done (even if it feels insignificant or unpolished) and why it may not be possible to do certain things. Do this more often than just once at the end. This builds trust and confidence on all sides.

8. Be joined up and work in partnership as default

Assume that someone might have done something similar before and learn from it first, even if it's for a different service or sector. Take opportunities to link with other people and remove siloes.

9. Use plain language and check your understanding

Avoid acronyms and jargon. Provide regular opportunities for people to ask clarifying questions. Don't assume that everyone has a shared understanding of what you are talking about. Spend time to define concepts or ideas collaboratively so that everyone has the same starting point.

<u>10. Make things accessible and respect</u> <u>preferences</u>

Recognise that different ways of communicating or sharing may exclude certain people. Try to provide alternative ways of engaging with a conversation that make it a safe space for people. And seek advice if unsure.

11. Be inquisitive

Ask people what they want to talk about and allow others to set the agenda. Meaningful engagement is not just about asking people's opinions on what you have set out to do.

12. Go to where the people are

Don't assume that everyone will engage with health and social care if invited. Sometimes you have to seek some people out proactively and this should always be the aspiration, however hard it feels.

13. Recognise that it's hard for everyone

It's OK to feel scared when operating outside your 'norm'. Co-production and public

engagement are hard things to do 'perfectly' and everyone feels like this. It's OK to be unsure of the best way to do something or scared about where to start and it's alright to communicate that with others. Don't let this get in the way of trying things out. Always recognise that all people are trying their best, whatever their role or background.

<u>14. Cast the net wider and always be aware of</u> <u>who's not in the room</u>

Assume as default that there will always be more people that could be included in the

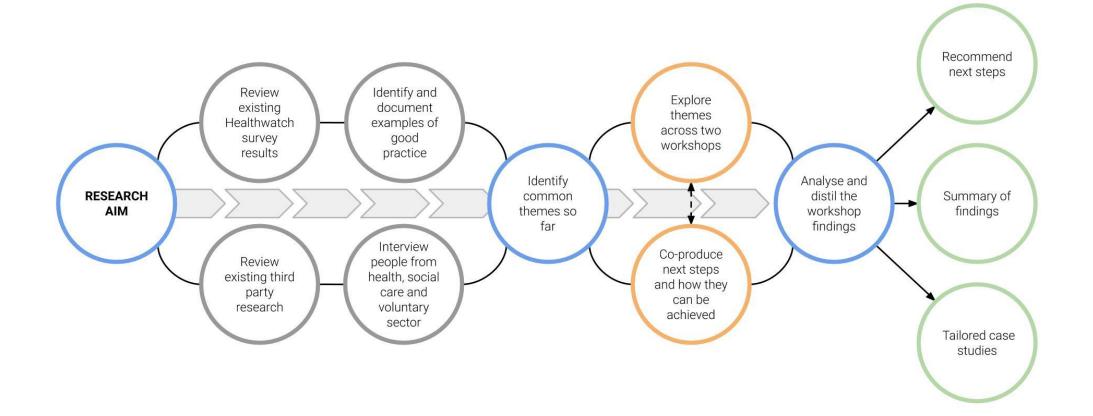
conversations. Try to seek out ways to engage with more people than the same old faces. When you recognise that some people may be missing, be open about this and seek ways to include them for future activities.

<u>15. Allow time, space and resources for people to</u> <u>explore</u>

Co-production and public engagement generate a lot of food for thought. This requires time and energy to assimilate, process and understand properly. It is important to allow people the space in which to do this.

The research process

An overview of the research process



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We welcome and are open to feedback...



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