

# Co-Production

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FACTSHEET

There are many different definitions of Co-Production, including some listed below, but at its very simplest co-production is about involving people in the delivery of public services, helping to change their relationship with services from dependency to genuinely taking control.

“Co-production means delivering public services in an equal and reciprocal relationship between professionals, people using services, their families and their neighbours. Where activities are co-produced in this way, both services and neighbourhoods become far more effective agents of change.” (Nesta 2009)

Or

Sir Harry Burns who is a former Chief Medical Officer in Scotland says...

“Co –production is the process of active dialogue and engagement between people who use services, and those who provide them!”

Put simply co-production is about how our statutory services can work with local communities to deliver good local services.” (TUC 2013)



## Why use Co-Production...

Our traditional approaches to meeting need are failing. Conventionally the underlying causes of ill health and inequality are not addressed.

People often feel disempowered because they feel their voice is not heard or understood. There is a disregard for their experience, expertise and knowledge in the face of large delivery systems whether this is councils, health service or education. There is an imbalance in power which needs to be understood and addressed if we are to transform the way public services are delivered.

Co-production combines the best of public services and our communities by recognising the assets of services users and better allocation of resources.

## Benefits of Co-Production...

For public services	More appropriate and accessible More responsive to need Better uptake Cost effective
For communities	Enhanced community empowerment Improved social and material conditions Increased social capital
For service providers	Improved coordination of services Better outcomes Better use of resources cost effective More meaningful partnerships with service users Enhance user control and sense of responsibility Drive professional cultural change

### Challenges for Co-Production...

Commissioning	Co-production activity objectives are not clearly defined or specific
Generating evidence of value	The effect is long term and complex making it hard to measure
Taking co-production to the mainstream	There are diverse interpretations of what co-production is
Developing professional skills	Shift from “doing to” to “doing with”

### Co-Production and Engagement

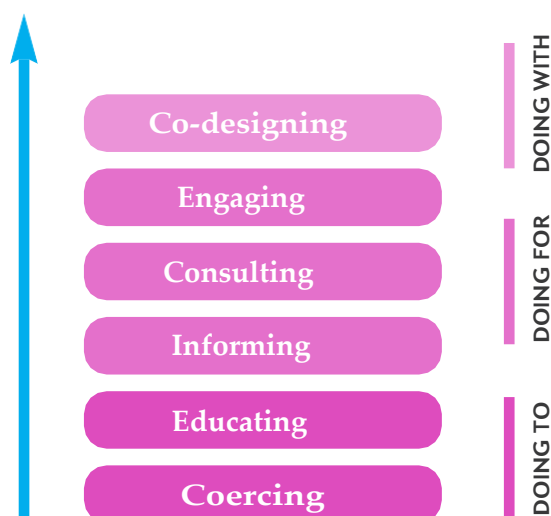
Co-production is more than engaging with communities. Undoubtedly engagement is part of the co-production process but the key to the success of co-production is moving from this stage which reflects a power imbalance and “doing for” people to “doing with” as shown in the New Economics Foundation diagram below.

### Co – Production and Health

Co-production is not an alternative to investing in service improvement or addressing the structural causes of health inequalities. It is about changing how we think about service delivery and the change in thinking is required by both services providers and citizens. Service providers have to pay more heed to the tacit knowledge within their communities and citizens will need to be supported as they become more confident in their ability to share this knowledge. As highlighted below in Fig 1 by Jennie Popay (2006) the benefit of co-production is an improvement and increase in the uptake of service, an increase in social capital and improved health status.

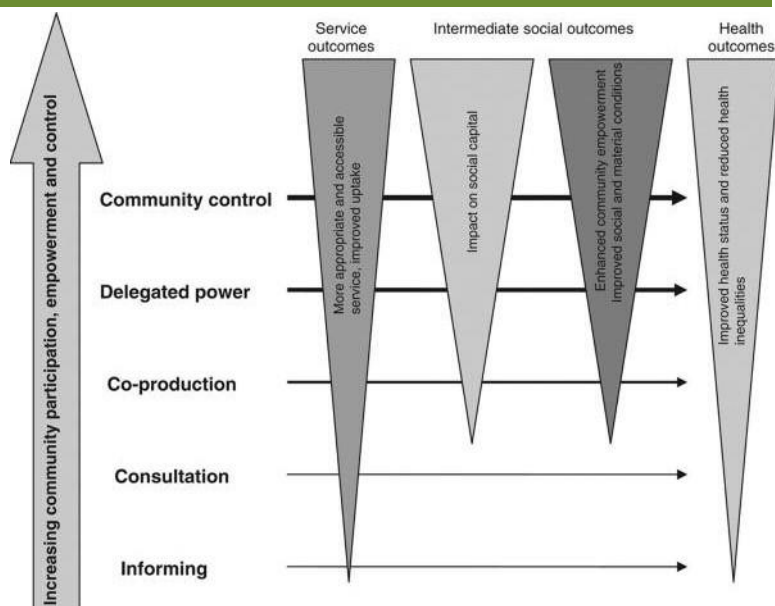
Co-Production is all about...

1. Building on people’s existing capabilities
2. Mutuality and reciprocity
3. Peer support networks
4. Blurring distinctions
5. Facilitating rather than delivering
6. Recognising people as assets



Source: New Economics Foundation

Fig 1 Pathways from community participation, empowerment and control to health improvement (Popay, 2006 in NICE guideline 9)



### Co-Production and Policy

Co-production should underpin community planning and is the foundation of current transformation within health and social care.

The aim of Community Planning is to improve the effectiveness of public services in meeting people’s needs, support the development of local communities and the improve the quality of life for all.

**Systems, Not Structures** describes the process of co-production as breaking down barriers between professionals and the people they serve, recognizing people who use services as assets with unique skills.

The Health Minister responded with **Delivering Together** a vision for how this process of change would deliver. Central to this is emphasis on social value and tapping into the innovative ideas and energies within communities in order to build capacity and prevent ill health from occurring.