



Healthier Communities Select Committee

Report title: Adult Social Care (ASC) and Social Care Institute for Excellence (SCIE) Co Production Update

Date: 10 January 2024

Key decision: No.

Class: Part 1

Ward(s) affected: All

Contributors: Operations Director for Adult Social Care

Outline and recommendations

Members are asked to note the contents of the report.

This report provides Members of the Healthier Communities Select Committee with an update on Adult Social Care (ASC)'s work to date with Social Care Institute for Excellence (SCIE) to develop an infrastructure and approach to coproduction across the ASC service.

It recommends that Members provide clear strategic commitment and support to embed coproduction across all ways of working with a particular focus on enabling engagement with people who use ASC services and their carers.

Timeline of engagement and decision-making

- September 2023 SCIE Co Production Baseline report received.
- July 2023 SCIE and ASC Staff away day.
- March 2023 Social Care Institute for Excellence (SCIE) commissioned.
- January 2023 CQC Self- Assessment completed.
- December 2022 ASC Co Production Strategy drafted.
- December 2022 Coproduction Support London Borough of Lewisham Proposal received.
- October 2022 CQC assurance framework received.

1. Summary

- 1.1. This report provides Members of the Healthier Communities Select Committee with an update on Adult Social Care (ASC)'s work to date with Social Care Institute for Excellence (SCIE) to develop an infrastructure and approach to coproduction across the ASC service and embed it across all ways of working.

- 1.2. The report summaries key findings to date, future areas for development and current challenges / risks.

2. Recommendations

- 2.1. Members to provide clear strategic commitment and support to embedding co production across all ways of working with a particular focus on enabling engagement with people who use Adult Social Care (ASC) services and their carers.

3. Policy Context

- 3.1. The contents of this report are consistent with the Council's policy framework. It supports the achievements of the Corporate Strategy objectives:
 - Work more closely with community groups and others with reach and influence in the local area; using learning from the response to the COVID-19 pandemic and the Council's wide-ranging Resident Experience programme to change the way we do things and improve outcomes for all those who use services in the borough.
 - Recognise that there are communities whose voices are seldom heard and others who may feel as if they are not heard at all.
 - Develop an approach to engage our community that is fairer, accessible and even more inclusive, acting as a listening organisation and working in tandem with our residents to improve the services we deliver for them.
 - Actively seek out the insights of those who are experts by experience such as disabled residents, older people, young people and those able to offer a unique first-person perspective on how to improve the services we provide.
 - Create a culture of working collaboratively with our residents.

4. Background

- 4.1. Adult Social Care (ASC) is due to be assessed by the Care Quality Commission (CQC) within the next 2 years. It is anticipated that coproduction will form a large part of the assessment.
- 4.2. ASC is ambitious in its transformation activities with twelve programme workstreams currently being implemented, and with a desire to embed coproduction across everything the service does.
- 4.3. There is a recognition that while there are some areas of coproduction good practice across ASC, more needs to be done to embed a systemic practice around coproduction at all levels throughout the organisation and to increase the skills and confidence of the workforce when engaging in coproduction activity with people who draw on care and support services and with unpaid carers.
- 4.4. In March 2023, ASC commissioned the Social Care Institute for Excellence (SCIE) to develop an infrastructure and approach to coproduction across the ASC service and embed it across all ways of working. This work looks to improve the customer journey and experience of those people using social care services as well as unpaid carers, ensuring practitioners do not get tied up in process and keep the person at the centre of all they do.
- 4.5. SCIE's delivery model builds towards this with a cumulative bronze, silver and gold phased set of activities, to develop the needed culture change, coproduction skills and knowledge, and arrangements to meet this ambition.
 - 2023-24 Bronze Phase: Establishing the right foundations for coproduction
 - 2023-24 Silver Phase: Developing consistency and confidence in coproduction

- 2024-25 Gold Phase: Embedding coproduction and evidencing impact

5. Co-Production Update

- 5.1 A task and finish group has been set up with representatives from across Adult Social Care (ASC), Communications, Equalities, Corporate policy and Social Care Institute for Excellence (SCIE).
- 5.2 SCIE spoke to a broad number of stakeholders across the Council and system and reviewed key local strategies and documents in order to understand the current baseline position for co-production across ASC, covering 5 lines of enquiry:
- How co-production is understood across ASC?
 - How co-production is approached across each level of ASC?
 - What are the current challenges and opportunities to grow co-production across ASC?
 - What would good co-production look like in the future? And what is needed to support this vision of good co-production?
 - What examples of co-production exist across Lewisham?
- 5.3 In July 2023, SCIE attended ASC's Staff away day, to present the project ambition and plans, as well as using it as an opportunity to begin to explore what co-production means to staff and what good co-production would look like.

6 The key findings

- 6.1 How co-production is understood across Adult Social Care (ASC):
- Most understood co-production as a concept. However, how coproduction works 'on the ground' was less clear.
 - It was felt that sometimes consultation exercises are confused with coproduction.
 - Coproduction was mentioned as a current "buzzword", and its contribution to better client outcomes needs to be clearer.
 - There is often a conflation between co-production with communities and professional working with other practitioners and sectors to achieve positive outcomes.
- 6.2 How co-production is approached across each level of ASC:
- **Co-production at an individual level:**
 - Stakeholders noted that in some teams, a co-productive way of working has been embedded with practitioners– resident relationships and in their approach to support plans. The use of 'I' statements has been encouraged to support working with residents and to focus on maximising independence.
 - As a positive example of co-production, The Integrated Community Connections Service is integrated into the work of Neighbourhood Teams who work co-productively with residents.
 - Coproduction is not generally part of training and development; some co-produced training examples were provided, co-delivered by people with lived experience (Autism and Manual Handling). But in the main this is not routine.
 - People with lived experience are not generally involved in recruitment of the ASC workforce (However, this was factored into the recruitment of the Principal Social Worker earlier this year and there are plans to continue this approach with HOS roles).
 - **Co-production at a service / operational design level**
 - There are some examples of good co-production work across ASC for example the carers commissioning contract, day centre strategy and

transitions strategy. However, in the main SCIE identified a lack of confidence or experience in good co-production.

- Lewisham Council have carried out consultation exercises previously (for example with efficiency saving proposals) but they are not co-production.
- Where consultation is carried out more needs to be done to communicate how this leads to follow on actions or changes within ASC.
- There is some anxiety to be worked through as some staff are concerned that some conversations could be challenging.
- It was noted that ASC does not have an operational method/guide for staff
- **Co-production at a strategic level:**
 - All stakeholders raised that there is no current strategy for co-production, nor is it incorporated into other substantive strategies. However, it is clear that at a strategic level coproduction is now a priority and it now has a strategic spotlight.
 - There is a perception that ASC have a 'professional only' mindset.
 - There is a Carers Partnership Board, which involves organisations and agencies, but staff felt that people with lived experience are 'left out'. There are no current resident boards or panels known to be in place.
 - All stakeholders were now looking for more action and felt that the coproduction group are moving in the right direction,
 - However, ASC need to have an aligned strategic view and plan for co-production to support the needed cultural and action-based change required,

6.3 There are a number of opportunities to growing co-production in Lewisham:

- Working with VCS Partners.
- Involving ASC 'Front Door' staff.
- Working with carers.
- Broader representation.
- Working with residents.
- Improving residents experience of ASC.
- Building on passionate staff.
- Learning from elsewhere.

6.4 What would good / integral to ASC co-production look like?

- A strategic approach:
 - Define coproduction in Strategy/Plans.
 - Give teams a good understanding of co-production (training and practice support on the ground)
 - Give teams more autonomy to be creative and develop coproduction in their own work.
- A trusted coproduction network:
 - Engage residents authentically, treating them as equals, and demonstrating the benefits to them.
 - Engage a broader range of residents and liaise closer with our communities.
 - Value their involvement, look at remunerating residents involved in this work.
- Operational Staff:
 - Needs to be their 'normal' way of working and 'threaded through everything'.

6.5 What would support staff to co-produce?

- Clear strategic commitment support to coproduction. Staff fully involved and coproduction 'brought to life' at a practice and service design level.
- Short briefing sessions focusing on practice applications and benefits to clients.
- Fully embedded in practice. Co-production present in role descriptions, paperwork, guidance, recording, agendas. Residents involved in interview panels and training courses for themselves and staff. Staff support to develop relationships with residents, enabling the richer conversations needed to understand residents' strengths and aspirations, and being able to give support

and reassurance.

- 6.6 The current challenges to growing co-production
- To date, significant challenges with resident engagement.
 - ASC cultural change is needed.
 - Overcoming staff anxieties over resident engagement.
 - Further clarity is needed on the value of coproduction.
 - Adequate resource investment.
 - The complexities of co-production.
 - Clearer strategic intent and robust commitment.
 - Lack of suitable Council venues for engagement.
 - Limited relationships with communities and local groups.
 - Previous attempts at engagement impacting future relationship building.

7 Immediate priorities / next steps

- 7.1 We have identified and liaised with a wide range of stakeholder groups and are now phoning individual clients and attending groups to raise awareness of our resident co-production group. However, Social Care Institute for Excellence (SCIE) and the Adult Social Care (ASC) project team have encountered significant challenges with resident engagement.
- 7.2 The next co-production session for residents is scheduled for February 2024 to:
- Develop and agree a shared vision and values for local co-production
 - Develop how coproduction would work 'on the ground'
 - Develop an evaluation framework to learn and understand if we are making a difference.
 - Choose a small number of projects to embed coproduction and then review using our evaluation framework.

8 Financial implications

- 8.1 We have committed £95k to Social Care Institute for Excellence (SCIE) for this work over an 18 month period, starting April 2023. But we also recognise the financial benefits that accrue from a co productive approach to commissioning services.

9 Legal implications

- 9.1 There are no specific legal implications arising from this report.

10 Equalities implications

- 10.1 The actions and proposals in this report would not unlawfully discriminate against any protected characteristics but would positively promote equality of voice for people who use Adult Social Care (ASC) services.
- 10.2 The Social Care Institute for Excellence (SCIE) co-production approaches can bring a range of benefits and improvements for all concerned. Ensuring that everyone involved has a shared understanding of what benefits are expected from co-production is important to the success of the initiative:
- The use of people's experience and expertise, which can contribute to a more efficient use of resources.
 - Professionals collaborating with communities and people who draw on care and support are likely to have a stronger focus on the outcomes of the support provided when they are co-producing, and potentially a greater focus on prevention. So, there are improved outcomes for people who draw on care and

support as a result.

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

11 **Climate change and environmental implications**

11.1 There are no specific environmental implications arising from this report.

12 **Crime and disorder implications**

12.1 There are no specific crime and disorder implications arising from this report.

13 **Health and wellbeing implications**

13.1 The Social Care Institute for Excellence (SCIE) is a leading values-driven improvement agency. They are independent and people-focused, operating at policy and practice levels with a huge database of 'what works' good practice, eLearning tools and resources. Working beyond and across social care and health and children's and adults' sectors, they contribute to the development and implementation of better care, support and safeguarding at national and local level. They support commissioners and providers in developing and embedding practices which are innovative, have impact, and enable effective scrutiny and accountability.

14 **Report author and contact**

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