

ROTHERHAM BOROUGH COUNCIL – REPORT TO MEMBERS

1.	Meeting:	Health and Well Being Board
2.	Date:	12th November 2014
3.	Title:	Expectations and Aspirations : Co-production in Rotherham – consultation document
4.	Directorate:	Neighbourhoods and Adult Services

5. Summary

The Expectations and Aspirations work stream of the Health and Wellbeing strategy has a priority in its action plan around co-production of services, this was fully endorsed by the board's member organisations.

The attached consultation report provides information around definitions of co-production, examples of where this is already in place in Rotherham and the suggested approach to move this forward across all organisations.

6. Recommendations

- (i) That members of the Health and Wellbeing board receive the attached consultation report and associated case studies
- (ii) That members of the Health and Wellbeing Board actively consider the adoption of these principles and cascade the report and information within their organisations
- (iii) That members of the board consider the suggested two stage approach to move to co-production of services within their organisation
- (iv) That members agree to a workshop session being facilitated for members of the board to establish what co-production in Rotherham would look like

7. Proposals and Details

Expectations and Aspirations is one of the six strategic outcomes we aim to deliver through the Health and Wellbeing Strategy:

All Rotherham people will have high aspirations for their health and wellbeing and expect good quality services in their community, tailored to their personal circumstances.

A key action which underpins this work is :

- We will co-produce with Rotherham people the way services are delivered to communities facing challenging conditions.

Co-production is about delivering public services in different ways and developing relationships with service users that are equal between professionals delivering these services and those customers and carers in receipt of them.

Co-production is not just about consulting with citizens and “user voice” initiatives, it is much more than this.

There are already some good examples of where co-production is working in Rotherham such as Lifeline, Speak Up and the Rotherham Charter for Parent and Child Voice.

The proposal is that organisations decide which services would be suitable for co-production and begin to move to this as a concept of working, it is clear however that there are some services which would never be suitable to be co-produced examples of this would be around some health or protection and safeguarding services ie resuscitation services or child protection investigations / services.

We still need to ensure that families and carers can make comments about the services that they / their relatives have received to help improve or shape the services in the future as opposed to them being involved in the delivery of the service itself

The suggested model is across a Staged approach:

Stage 1 – agree that all organisations will begin move around the circle (of co-production) from where they are now towards full co-production (see Figure 1) where appropriate

Stage 2 – organisations then agree on a yearly basis which of their services are suitable for co-production or to move towards co-production and aim to make the required changes during the year

As previously mentioned not every service would lend itself to co-production hence the annual review of services in Stage 2.

We need to ensure that this is right for Rotherham and this consultation will form part of this approach, it is suggested that a workshop is held with Health and WellBeing Board members and organisations to work together to define what it would look like in Rotherham.

8. Finance

Issues around the costs of co-production are particularly complicated. While there is some evidence that it can reduce costs, the available evidence is inconclusive. This may be something that varies between different organisations and different projects.

Co-production may lead to some costs being reduced and others increased. It may only be possible to know whether co-production is cost-effective by looking at things over a period of time. If it is cost-effective it will have reduced the number of inefficient, ineffective and unwanted services.

9. Risks and Uncertainties

Co-production is a very different approach to how our organisations normally deliver their services and although the customer and broader public is involved at different levels there are few services that are currently co-produced in the true sense of the word.

Cultural changes would need to take place from both the service provider and customer angles to grasp the fundamentals of co-production and move this forward in a way that is not detrimental to either party.

It is recognised that there will be also challenges in relation to managing the expectation of the citizens of Rotherham in relation to how co-production will deliver services differently for them

10. Policy and Performance Agenda Implications

The Performance Management Framework underpins the work around the priorities of the strategy and the workstreams.

11. Background Papers and Consultation

Health and WellBeing Strategy
Co-production report – Appendix 1
Co-production audit template
Co- production Case Studies

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