

## **Co-producing with participants**

Dave Thomson is an Assistant Director

of an NHS 5 Boroughs Partnership

and his role is crucial

in the large scale co-production

of health services in the area.

Dave, what's the difference

between consultation and co-production?

Yeah, consultation is more about you and I

both as managers of the service,

sitting down and working

with staff on the ground and redesigning services,

and then going out and telling

the public about our work.

Telling our patients, our service users

our carers that this is what we are doing.

And maybe, taking some feedback from there,

but in most cases that I've been involved in

that's happened to work in the past

it's been very much a case

we've already decided what we were doing,

but we were going to tell you about it.

Whereas co-production and active

engagement and involvement

is more about starting from a blank canvas.

One example that I can give you of that

is that we've decided that our services

that we provide in one of our areas,  
it's not to the standard at which we would want  
so, we've decided to actually build  
a brand, new 25 million pound investment,  
into a new patient facility.

And now we've set up  
separate engagement streams  
for members, we call them members;  
service users, carers, patients,  
and then, there is a staff engagement group, as well.

And the whole idea there  
is actually sort of to work with them,  
to find out what does work,  
what doesn't work, what would you like to see  
in the standards going forward.

It's about working together.  
I mean, certainly the reason  
why we have two separate engagement streams  
is because sometimes our service users, our carers,  
don't necessarily need to speak about  
the sluice room or the facilities that are in,  
let's say for instance, the medical areas.

But equally, is giving them  
an opportunity to come together as well,  
from time to time, to look at the facilities.  
Because sometimes they might want  
to talk about things individually

but then they want to put them together.

And what we have done,

we've come with a meeting

where once a month, myself,

my colleagues from the

members engagement side,

and we've got another assistant director

who looks at community engagement,

this is from stakeholders, from partners,

it could be Citizen Advice Bureau,

Job Centre Plus, the local authority,

whole range of third sector organisations.

And then the three of us get together

and we share what's been talked about

and what's been suggested and requested

and we put that together into

a brief that then informs the design.

And we share that between

each of the members groups,

so that they all of them understand

what's been said by the other groups.

Is there ever conflict?

Yes, there is.

Because I mean, certainly,

service users might ask

for a certain type of bed,

if it's an in-patient ward we're looking at here

they might ask for a certain type of bed,  
which might actually be good for them,  
but actually is not good for staff.  
  
Usually, once the other side  
have actually heard why are you asking for that,  
then there's an agreements and sometimes  
this middle ground has been found.  
  
And who takes the final decision?  
  
On the ground, people have staff  
working with patients, service users,  
third sector organisations.  
  
Together they're influencing the design brief.  
  
Once that design brief is signed off by everybody  
it then goes to our Trust Board.  
  
So the plans have  
to be signed off by all the members?  
  
The service users and the staff?  
  
Oh, yes. Yeah. Yep.