



**Nottingham and
Nottinghamshire**

**Nottingham &
Nottinghamshire ICB
Coproduction Strategy
2022-2024**



Nottingham and Nottinghamshire Integrated Care Board (ICB) Coproduction Strategy

This strategy sets out how the Integrated Care Board (ICB) will work over the next two years to make coproduction one of the key ways it improves the health and social care services it commissions in Nottingham and Nottinghamshire and how coproduction will be reflected in our processes and ways of working going forward.

This strategy outlines how we will change the way we work so that coproduction work and listening to people with lived experience is one of the first things we do when developing new services or changing services we already commission, and how we will work as a system when doing so. It will set out how we will work to bring a culture of coproduction to the ICB and the wider Integrated Care System (ICS). This strategy has been coproduced with our Coproduction Working Group which has a membership of people with lived experience and professionals from across the Integrated Care System.

This strategy is deliberately focused on the ICB in the first instance; however, it is hoped that wider ICS partners and organisations will utilise and adopt the principles and values outlined below where appropriate. The ICB would like to thank wider ICS colleagues for sharing their experiences and learning on coproduction to date through the Coproduction Working Group, which collectively has shaped this strategy. This is the start of the journey of coproduction, and we acknowledge that parts of the ICB and wider System are at different stages of coproduction, we will continue to work to drive forward coproduction and in doing so support others where we can in the system on their coproduction journey.

What is Coproduction?

Co-production happens when people who access services and their Carers are valued as equal partners, can share power, and have real influence over the decisions that are made. It happens when people and carers are included from the start to the end of any project that affects them – definition from the ICB Coproduction Working Group 2022.

Our ICB coproduction Principles and Values

These principles have been coproduced with our Coproduction Working Group. These will be used when developing our coproduction processes.

1. We will put people with lived experience, including carers, at the heart of all we do by valuing their skills, knowledge and interests and giving them an equal voice alongside those of paid employees to improve services.
2. To work as equal partners, we need to be honest and open with each other to promote mutual trust.
3. We will ensure a co-production plan is developed at the start of any new project or service and will be co-produced to its end.
4. We will plan for and work to realistic timeframes for coproduction- recognising that coproduction will take time to do well.

5. We will actively recruit or involve diverse voices in a meaningful way, to ensure everyone has a chance to shape our system and the services within it and ensure that anyone who wants to be involved is able to do so.
6. We will use language, written information and other kinds of communication that works for all.
7. To show that we value people's voices, we will pay out of pocket expenses and offer involvement payments and reimbursement options for the time they give.
8. We will support everyone to access training and support to enable them to develop their skills and knowledge.
9. We will always tell people what has been achieved because of their contribution.
10. We will work across the system, sharing knowledge and insight from different coproduction projects, to prevent duplication of work, and to show that co-production works.

Statement of commitment from our ICB board

The Integrated Care Board is committed to coproduction, we recognise the valuable insight that people with lived experience bring to service transformation and commissioning; and the important part this insight plays in contributing to our aim to improve the overall health and wellbeing of the people living in Nottingham and Nottinghamshire. As a Board we pledge to champion coproduction, to support the wider cultural change required of the organisation to achieve the aims in this strategy; and commit to reflect ourselves on how we can work in a way to support the cultural change needed to embed coproduction at a senior strategic level in the wider Integrated Care System.

What is Commissioning?

It is the word used to describe the planning and buying of health and social care services.

Why do we want to work in a different way?

Coproducing services with people with lived experience is beneficial to the NHS as a whole and patients and their families. A coproduction approach using insight and information from those living with a health condition means that services we commission, accurately reflect the needs of those using them which this leads to better health outcomes, it is also a cost-effective way of making sure we spend vital NHS money in the right way first time.

We want to work in partnership with people who have lived experience of using health and care services, including people with personal experience of a particular health condition or need, their carers or family and the wider community, so that they can share information about living their lives with us. We can then use that information to create new services or improve existing services so that they can better meet the needs of people using them, doing this from the start of services being developed.

We want to have a Strategic and Project Level approach to coproduction in the ICB. Meaning that Coproduction is embedded in all levels of our organisation and wider system.

What does this mean for the ICB and the Public?

- A change to the way we all work in the ICB, reviewing our current work processes around commissioning, service improvement and transformation so we can work using a coproduction approach.
- Having a strategic approach to coproduction and a project level approach to coproduction.
- Staff in the ICB and the Public, learning how to evaluate working methods, learn new ways of doing things and gain new skills in coproduction
- Coproduction leads to improved health and social care services
- Health and social care organisations working together as a system sharing knowledge and information and working in a coproduced way.

How will we make the change to a coproduction way of working

- Establish a dedicated Coproduction Team who will provide guidance and support to staff on how to carry out coproduction in their work areas, and also provide guidance and support for the public taking part in coproduction.
- Establish a Strategic Coproduction Group and wider Coproduction Network with direct links to the ICB Board.
- We will produce information on coproduction and guidance on how to carry out coproduction for all – staff, partners, and the public.
- Take a strategic approach to coproduction in the ICB, working with the wider system.
- We will ensure that the methods used to coproduce are accessible for people with different needs.
- We will actively recruit or involve diverse voices in a meaningful way, that represent the communities we serve.
- Encourage staff to learn new ways of working through different learning methods.
- All ICB teams will have a coproduction champion who will implement coproduction in their work.
- We will create new coproduction focused ways of working.
- We will acknowledge that coproducing takes longer and plan for that.
- We will review our processes against those new ways of working and make changes.
- Set and meet realistic goals for coproduction during the first two years of the establishment of the ICB.
- Not be afraid to try new things, review how they went and learn from them
- Recognise and understand the needs of the public to be able to share information with us for our coproduction activity and make sure that they receive the suitable reimbursement for doing so

How will we know we have been successful?

1. **Measure staff knowledge and staff coproduction activity levels.** We will carry out a baseline assessment measuring what staff think coproduction is? and how many staff have coproduction as part of their work at the beginning of our coproduction work and then we will measure this again in July 2023 and July 2024. The number of staff having coproduction as part of their work should increase significantly.
2. **Have established a ICB Coproduction Team and Strategic Coproduction Group and Coproduction Network.**
3. **Have a robust and routine method and process for coproduction.**
4. **The number of coproduced services.** This should increase significantly over the next two years.
5. **Improved System working.** This will be shown through increased contacts and communication between different teams in different organisations, more joint working on service improvements.
6. **Have a Coproduction Support Resources (Toolkit).** This will be available in different formats and in different ways for staff and the public.
7. **Have access to a range of data about coproduction** projects and outcomes including qualitative and quantitative data, which can be shared across the system.

Coproduction working with engagement and the Working with People and Communities Strategy

The ICS is committed to working with people and communities. Our vision for working with people and communities contains two key elements – that of Citizen Intelligence and for Co-Production. The principles that will guide the work of the system from July 2022 are based on the guidance (ICS implementation guidance on working with people and communities) but adjusted to reflect the Nottingham and Nottinghamshire context.

<https://www.england.nhs.uk/wp-content/uploads/2021/06/B0661-ics-working-with-people-and-communities.pdf>

Coproduction and Engagement use different but complimentary approaches to improve services. Coproduction conversations will help inform the targeted engagement activity that takes place during transformation and service improvement.

Citizen Intelligence

A process of actively listening to citizens to understand their experiences of health and care services to enable a focus on areas that need improvement or changes. An on-going cycle of activities that generate genuine citizen insights to guide the work of transformation and commissioning.

Co-Production

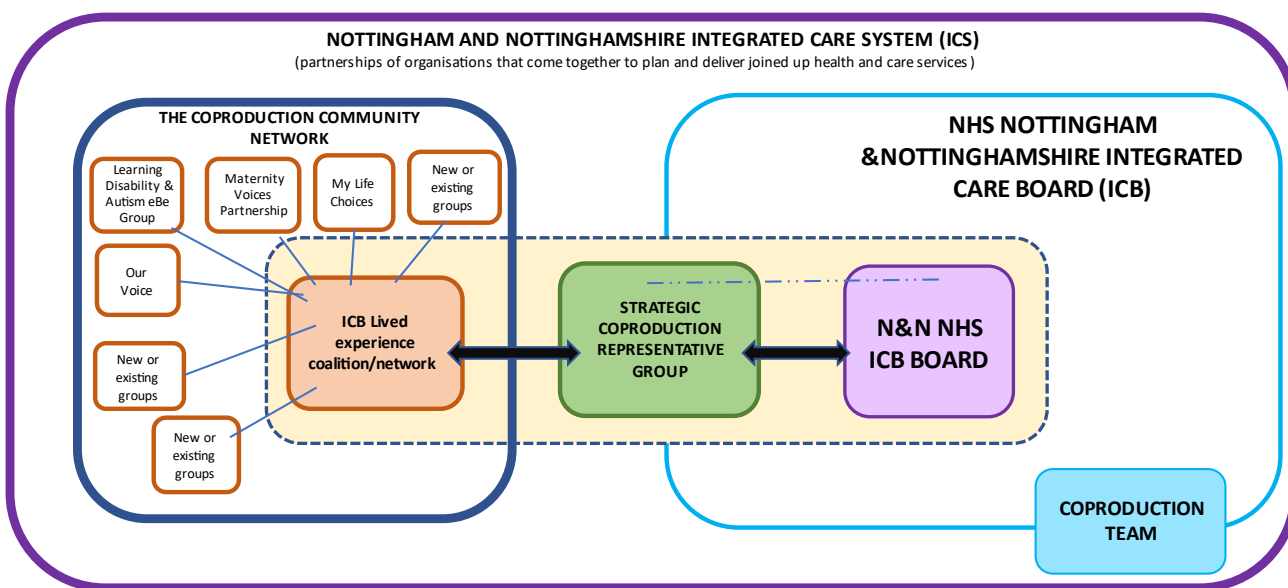
A way of working that includes people who use health and care services, carers and communities in equal partnership; and which does this at the earliest (and all) stages of service design, development and evaluation.

The two system-wide strategies for engagement (focused on citizen intelligence) and coproduction (involving people as equal partners to shape services and approach) will form the collective system approach to working with people and communities. It is implicit in all of this that co-production should be taking place at all levels of the system at all times.

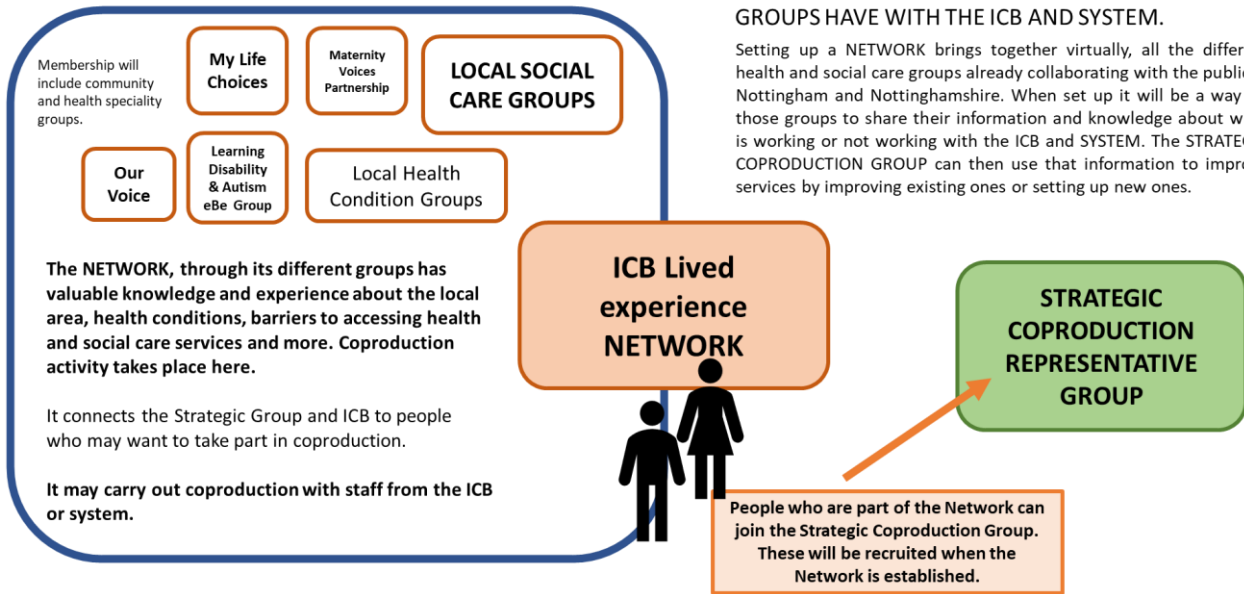
The coproduction infrastructure model

This coproduction infrastructure model below has been coproduced with people with lived experience and System Partners, it is made up of the ICB Lived Experience Coproduction Network and Strategic Coproduction Representative Group.

The visuals below demonstrate the relationship between the ICB Network and the Strategic Coproduction Group.



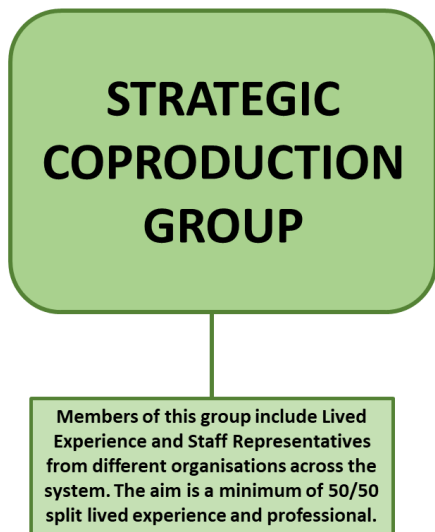
How does the NETWORK connect to the STRATEGIC COPRODUCTION GROUP ?



NETWORK = BRINGS TOGETHER THE GROUPS VIRTUALLY. WAY OF SHARING INFORMATION THE GROUPS HAVE WITH THE ICB AND SYSTEM.

Setting up a NETWORK brings together virtually, all the different health and social care groups already collaborating with the public in Nottingham and Nottinghamshire. When set up it will be a way for those groups to share their information and knowledge about what is working or not working with the ICB and SYSTEM. The STRATEGIC COPRODUCTION GROUP can then use that information to improve services by improving existing ones or setting up new ones.

The Strategic Coproduction Group



The ICB STRATEGIC COPRODUCTION GROUP brings together in partnership those with lived experience and professionals from across the health and care sectors to enable the ICB to implement its Coproduction agenda by:

- Using group member’s insight and knowledge of coproduction to make recommendations on ICB and System coproduction work for service improvement and transformation.
- Linking up coproduction work to the appropriate community groups that are in the network, so that those doing the coproduction work can reach the people they need to.
- Provide insight and operate as a “guiding coalition” on the implementation of the ICB Coproduction approach over the next two years.
- Collect insight from the Coproduction Network, discuss this insight and then make recommendations to the ICB Board about potential future ICB coproduction and service improvement approaches.
- Has a ‘check and challenge’ role.