

Coproducing for better mental health
outcomes for the people of Norfolk and
Waveney

**5 Year
Coproduction
Strategy**

DRAFT

coproduced in 2023

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Introduction

Better mental health outcomes for the people of Norfolk and Waveney of all ages, including children, will happen when services meet needs in the most effective ways possible. And if lived experience of care and support is valued equally to other expertise in the Integrated Care System.

Coproduction is when the feedback, views and ideas of people and communities flow into how care and support is offered and action is taken as a result. This includes carers and families. Collective lived experience priorities are effectively represented by people with lived experience in deciding what to do for better outcomes. Changes made as a result of coproduction are shared with the people often. There is an ongoing conversation so people and communities can respond about how experiences and outcomes are affected by changes. This way of working values power sharing between people and communities, and services and the system.

Coproducing mental health care and support in Norfolk and Waveney will help us reach our goals as an Integrated Care System. These goals are:

- To ensure people can live as healthy a life as possible.
- To ensure people only have to tell their story once.
- To make Norfolk and Waveney the best place to work in health & care.

All Integrated Care Systems in England are being asked to join up public engagement, participation, involvement and coproduction activities so people and communities are at the heart of the systems. Last year statutory guidance was published with the new Health and Care Act to guide systems in their approach.

There are already some good examples of coproduction around mental ill health in Norfolk and Waveney, including 'I Statements' for adult outcomes and the children and young people charter for coproduction.

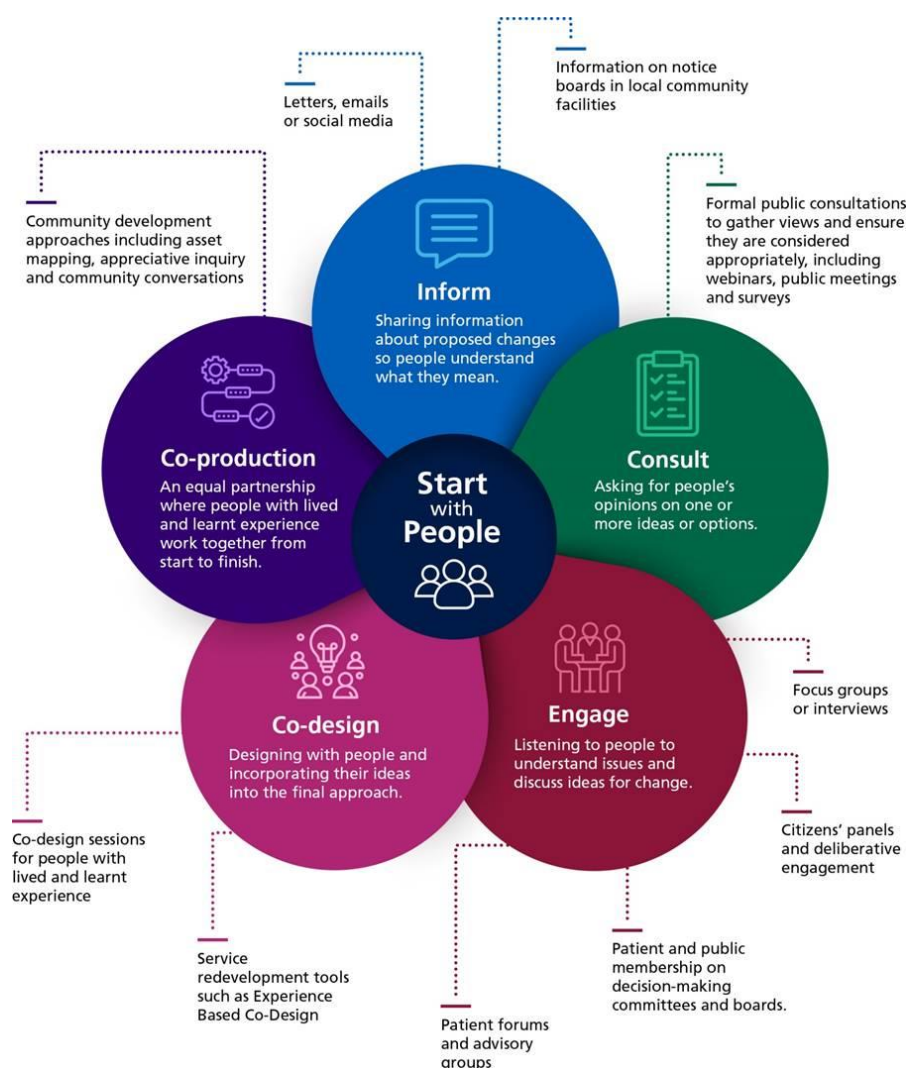
Rethink Mental Illness' coproduction team have been supporting the Adult Mental Health Transformation and have facilitated the coproduction of this draft strategy. Rethink are a national charity facilitating coproduction in a number of Integrated Care Systems across England.

Vision and approach to coproduction

Our vision for coproduction in five years' time is that the voices of people and communities are at the centre of decision-making and governance about mental health services, at every level of the Integrated Care System.

We believe this strategy will lead to a power shift from the system and services to the people and communities, so it is more balanced. We also believe it will lead to a culture shift towards the de-stigmatisation of mental illness through greater awareness and understanding.

Our approach is to follow the ten principles in the statutory guidance for coproduction which you can read more about here: [Working in Partnership with People and Communities](#). It includes the ambition that partners in the integrated care system should work together to listen consistently to, and collectively act on, the experience and aspirations of local people and communities. This guidance is summarised as:



Norfolk and Waveney ICS People and Communities Hub

A people and communities hub was developed by NHS NWICB for the Improving Lives Together ICS website to act as a focal point for an on-going piece of work to deliver the national People and Communities guidance and to develop our approach over time. The first working draft of our approach aims to build on learning during the COVID-19 pandemic, and to develop our vision to improve our collective ability to listen to what people are saying across Norfolk and Waveney about what matters to them. We can do this by going out to the communities we serve, and by building on existing community engagement assets among our ICS partners including the VCSE sector.

Feedback and insight can be joined up across ICS partners and channelled into decision making structures, so that insight shared in one part of the ICS is gathered and heard by other partners across the system.

All the partners in our ICS are talking and listening to people & communities every day. Our vision is that people would tell their story of lived experience once and it's heard by everyone in the ICS. We want to build on the existing engagement and insight that happens across all our system partners and find ways of working together to share and learn from this insight. Working together will also mean we can pool our resources and work more efficiently across the ICS.

As of July this year the people and communities hub also now includes a specific section which aims to offer a systemwide focal point for the promotion of co-production. This is when people with lived experience work with those who design services and projects in an equal partnership. Whilst there is some co-production activity within the system there is still plenty of room for further development and improvement.

Children and Young People

Our approach to coproducing with children and young people will use creative engagement strategies so both younger and older children can make substantial contributions towards the improvement and development of complex care systems. It will also be in line with the Flourish work being led by Norfolk County Council to co-ordinate and promote engagement with children and young people across the system.

Why create a coproduction strategy?

A strategy is helpful to plan what to focus on to achieve a vision or goal over time.

Our vision for five years' time is ambitious and to achieve it we need everyone who is working closely with people with lived experience, including carers and families, to know what the plan is and what they can do to help achieve the vision.

We are creating this coproduction strategy so we have a better chance of achieving our vision and the benefits that come with this. This reason for following the statutory guidance together is so that mental health services will meet people's needs in the most effective ways possible. The benefits of coproducing can be described as:



How is this strategy being developed?

In early 2023 the Mental Health Programme Oversight Board recognised the need for a whole Integrated Care System mental health coproduction strategy. It tasked a working group made up of people with experience of coproducing from different organisations and people with lived experience to start thinking together about the strategy.



This strategy will build on a bring together the lived experience involvement activity that is already strong across Norfolk and Waveney for better mental health outcomes.

The next step will be to share this draft strategy with a wide range of people who support others to have a voice to inform mental health and wellbeing services. They are linked to a wide range of in organisations, including smaller charities and community groups, schools, colleges and universities. They will be able to test the Coproduction Toolkit and be part of developing it. They will be key to reaching the vision in five years' time.

The journey so far:



Equality, diversity and inclusion

By building connections with people who work closely with people in communities, this strategy aims to improve the way mental health care and support is offered to more people who could benefit. So they feel it could be something for them, and they know how to give it a try.

We will work closely with Community Voices which is a Norfolk and Waveney information sharing, community listening, capacity building and action project. We will also aim to work with other community engagement and listening projects in the Integrated Care System, including those focusing on physical health. We will share information about what is already there to help, and what is planned, in a way that is meaningful to communities of identity, including race, age, gender, neurodivergence and Autism and other disabilities.

People who support people already in communities will be part of the conversation themselves. They know what matters, and will be invited to information and insight sessions to be part of flowing lived experience into the Integrated Care System to make a difference. They can show the system the value of community help and action, and be part of the solution together with the people they are close to.

Equality Impact Assessments will be part of the Toolkit and an essential for system and service development.

This strategy includes coproducing with children and young people for better mental health outcomes, and the strong activity that is already happening.

What do we need to focus on to achieve the Vision?

Maintain space on the Integrated Care System website where people can find out ways of being involved and use the Coproduction Toolkit

Training and support for people involved, including people in lived experience roles, and staff

Offer regular exchange and sense making sessions about what matters to people and how the Integrated Care System is changing

Focus on understanding what the Integrated Care System needs to know so mental health care and support offers are inclusive and culturally sensitive

Get people together who are already coproducing to make sure collective lived experience insights turn into collective action

Learn together by sharing coproduction activities and outcomes, and examples of good practice, making the most of lived experience to make a difference

Share examples of good coproduction practice and updated/new resources on the Integrated Care System website as inspiration for action

What are the next steps?

This strategy has been asked for by the Norfolk and Waveney Integrated Care System Mental Health Oversight Board. This initial version will be shared with the Board in July for feedback.

The next step will be to share the draft strategy with people who are already involving people in organisations and communities – for their feedback.

This will also give an opportunity to share how care and support offers are developing, to gather lived experience insights that are already known, and understanding about current involvement projects, for example, the Children and Young People’s Charter.

These insights will be applied to ongoing development of care and support around mental health challenges.

The Integrated Care System will support people to have conversations about what is helpful and ideas for improvement and innovation through the toolkit and several sharing sessions in each Place each year.

We will learn and develop together, towards our five year vision for coproduction of mental health care and support in Norfolk and Waveney.



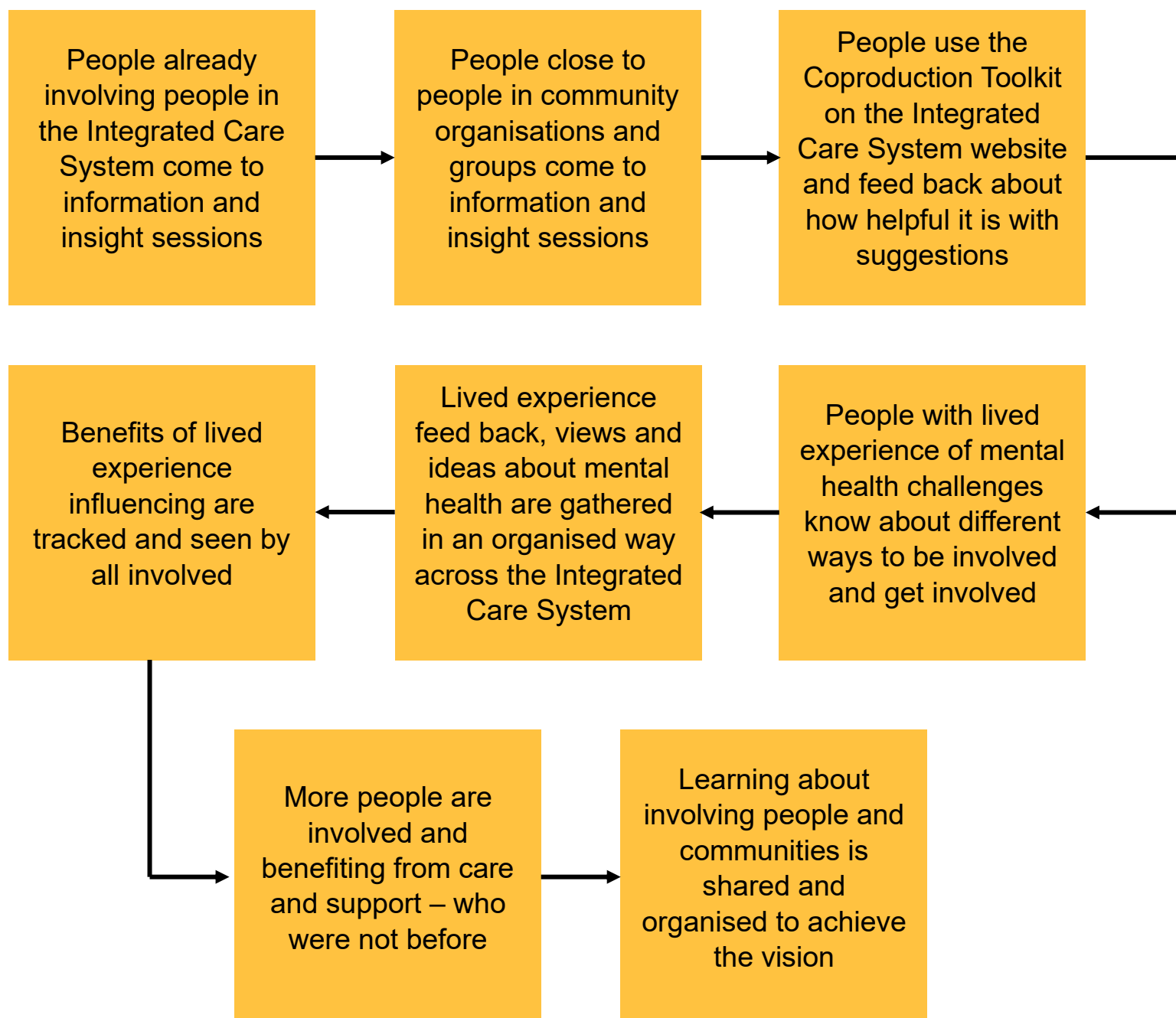
How will we know if this strategy is working?

We will use Principle 10 from the People and Communities Statutory Guidance to reflect and learn together each year by organising in person and online spaces to do this.

Learn from what works and build on the assets of all Integrated Care System partners – networks, relationships, activity in local places.

We will also provide a way for people to feed back using the website.

The Mental Health Programme Oversight Board will monitor and offer challenge where necessary.



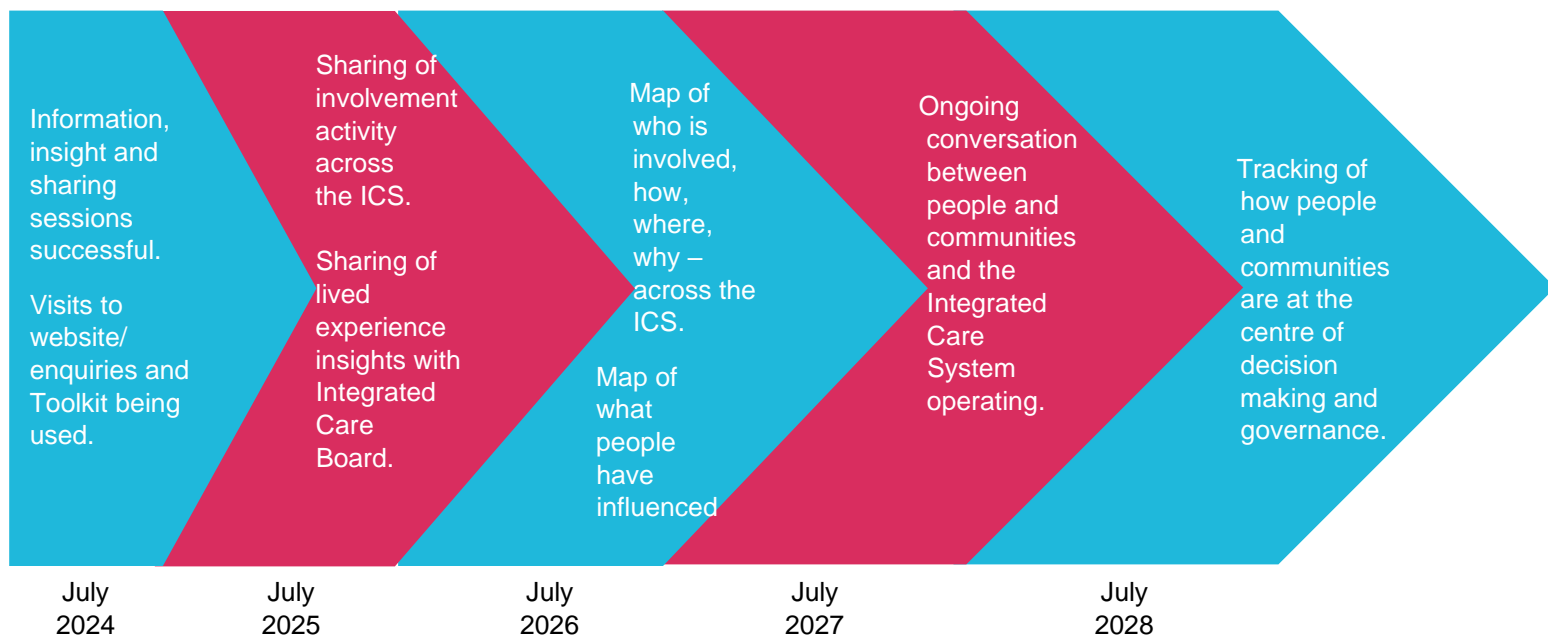
What are the key check-in points?

We expect to see progress towards our vision for coproduction in five years' time as the following key check-in questions. This progress will be reviewed by the People and Communities Committee.

How much different organisations and groups are joining up to involve and coproduce across the Integrated Care System will be a key focus.

We hope people will find the sharing sessions and Toolkit helpful, share what they are doing to involve and coproduce with people and communities, share insights with the Integrated Care Board, and champion the ongoing conversation with the Integrated Care System.

As a reminder, our coproduction vision for the next five years is that the voices of people and communities are at the centre of decision-making and governance about mental health services, at every level of the Integrated Care System.



What could the Toolkit include?

Here is a first idea of what we think could be helpful to have on the Integrated Care System website to guide a wide range of people who want to involve people with lived experience for better mental health outcomes in Norfolk and Waveney. There would be tools and resources to click through to.

Stage 1: Understanding your need for action

- Does your project need to understand what matters to people?
- Will your project be more successful if you bring in lived experience?
- Have you asked if the Integrated Care System already has lived experience information and insight about what matters relating to the focus of your project?
- Have you identified the focus for what you think you need to understand more about from people with a particular type of lived experience?
- Who can help you to identify the focus for lived experience involvement?
- Do you need/have lived experience partners working with you from start to finish?

Stage 2: Your knowledge and capacity to engage, involve and co-produce

- Have you looked at the ICS website to see what training and examples of good practice are available?
- Are you comfortable about hosting safe spaces for conversations about mental ill health topics and ways of sharing information, asking and listening to feedback, views and ideas?
- Are you able to support people in involvement activity and roles?
- Have you thought about equalities, inclusion and diversity factors in relation to your project? Have you connected with the Health Inclusion Group? Have you done an Equality Impact Assessment?
- Do you know about current lived experience priorities and I Statements?

Stage 3: Doing your project

- Do you already have people trained, supported and appreciated in roles for your activity? Do they know what's in it for them – do they feel valued and supported?
- Are you involving people with lived experience from the beginning in the planning of your project? Are you agreeing with them what success looks like and the best ways of achieving this?
- Are you and people with lived experience involved asking the ICS what lived experience information (data) already exists that is relevant to your project?
- Do you have a plan to do further community engagement and listening?
- Are you tracking lived experience information into insight into influence into action?

Stage 4: Reflecting on your project and sharing

- Have you banked your lived experience insights with the ICS?
- Have you reflected on how much lived experience was involved in your project and the difference it made?
- Have you reflected on what went well, what could have gone better, and what to do differently next time?
- Have you shared your example and learning with colleagues and also the ICS?
- Will you look for further training, coaching or support with coproduction?

Thank you for reading this co production strategy.

We'd love to hear from you if you'd like to find out more.

Please contact*

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*Rethink Mental Illness are a national charity facilitating coproduction in a number of Integrated Care Systems across England. They are commissioned to support coproduction on the Norfolk & Waveney Integrated Care System Adult Mental Health Programme.

Or visit the Norfolk and Waveney ICS coproduction area online, [linked here](#)