

Co-Production and System Change: Recommendation

Report for YMCA Together

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Homeless Link

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Introduction

[System P](#) is a Cheshire & Merseyside ICS funded programme which commenced in September 2021. The programme uses Bridges to Health segmentation methodology, which has been endorsed by NHS England. Segmentation aims to categorise the population according to health status, health care needs, and priorities. This methodology identifies groups of people who share characteristics that influence the way they interact with health and care services. One of these segments is the complex lives segment.

To support this work funding has been made available to support a short programme of events to address specific areas within the complex needs segment which include:

- Homelessness health inequalities.
- Dual diagnosis.
- Co-production and system change.
- Embedding new ways of working for people living a complex life.

This short briefing paper will outline recommendations developed from the second session focusing on co-production and system change.

To support wider discussion and to provide context to system change and co-production, guest speakers were invited to provide an overview of the challenges and successes of system change. This included:

- Greater Manchester Combined Authority (GMCA).
- The Big Life Group.
- First Person Project.

For this briefing, the system definition used was:

“A system is a configuration of interaction, independent parts that are connected through a web of relationships, forming a whole that is greater than the sum of its parts”.

(Holland, 1998)

Recommendations

Create Cultural Change

1. Engage with each element of the system to ensure the clear and full understanding of what causes people to experience a complex life and the wider effects on society.
2. Preventing stigma through education and awareness by holding regular training and awareness sessions for all professionals as a non-negotiable element of professional development – ensuring that lived experience and true-life stories are at the heart of this by supporting, enabling, and allowing people to voice their own experiences in an unedited and open way.
3. Consider our language. Often, we do not recognise that the way we speak can cause people to disengage with services and prevent people accessing them especially within health systems.
4. Recognise the power balance between or imbalance that exists in the service. Often people find themselves prescribed to within the health system and experience things being done to, at, or for them – by doing things with people this may help to create a pathway that a person feels they can follow instead of having to manage a prescribed journey that does not consider the challenges and crossroads that a person may have to navigate to achieve their desired goals.
5. Establish asset-based approaches to empower people by recognising their own skills, insights, and aspirations. When we focus on deficits, we risk removing a person's independence and could hinder the expression of views and/or opinions.

Understanding Our System to Create Change

1. To develop a better understanding of the challenges in the system, investment must be made to map and demonstrate how pathways for people with complex lives are navigated. By understanding and identifying the gaps that are created by a system, we will identify what changes can be made to ensure that people experiencing a complex life have better access and are supported affectively.
2. Power and leadership are key components to creating system change. Clear and transparent governance demonstrating the accountability and responsibility of decision makers should be made available to staff at all levels with clear methods of escalation and commitment to responding to, and addressing concerns or challenges faced by frontline professionals.
3. To enable transformative system change, we need to involve the people who deliver the service and receive it. Within many systems, strategy is developed within senior management spaces and delivered by those with the real on the ground experience and this disconnect needs to be removed to ensure that frontline practitioners are not just doing what is expected of them in term of deliverables

and value for money perspective but are able to influence how this is done to meet the needs of individuals and wider communities. We need to recognise the practitioner as the advocate for those who may not have access to the power to change the system.

4. Flexibility within commissioning of services will prevent rigid processes and allow for changes to be made in response to local need. By allowing flexibility towards commissioning and providing a better understanding of the tender process, smaller organisations with much greater insight at a local level may have the opportunities to submit tenders who may otherwise not have considered this.
5. Developing a system change partnership board will support the development and implementation of a service which meet the needs of people experiencing a complex life. This should include end user, frontline professionals to senior management executives, and should allow strategy development and system change influencing.

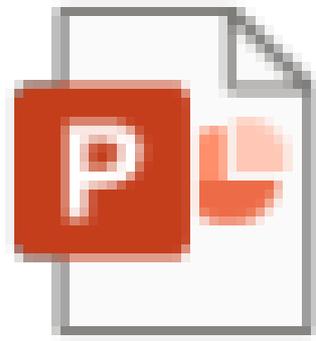
Co-Production and Involving People with Lived Experience

1. Engage with co-production with an open mind. Often the challenges that come with co-production are from within the organisation, and often professionals are not ready to share power and do not see the value of someone who has experience of using a service may have on its design, implementation, and development. There should be a commitment to providing co-production awareness, training, and knowledge throughout the system.
2. Value people's time, experience, and knowledge by reimbursing them appropriately. Often, we ask people to share the life experiences on a voluntary basis and we need to recognise that their time and commitment is as valuable as anyone else's working in the sector. Develop an offer that not only demonstrates this but provides not just financial recompense but offers other opportunities that may support the personal development of people with lived experience throughout training, education, and employment.
3. Co-production should be consistent and not be used for specific or singular products at point of assumed need. A process of continuous engagement should be in place to prevent this from becoming tokenistic and seen as a mechanism for media promotion and marketing. By creating a consistent approach to co-production this will be embedded within the service and create a learning environment.
4. Supporting people through the co-production process is essential. Often when involving people with lived experience we are asking them to relive past experiences and memories that may be traumatic, and we need to support people through this process. Ensure that there is access to support whether this be

counselling, debriefing opportunities, or simple ways of reflecting on how to manage this process.

5. Ensure there is opportunities for people with lived experience to have a voice at all levels. To fully embrace co-production, people should have full representation across the board. Where possible, lived experience roles should be embedded and recommendations given equal value to those of professional and decision makers.

Appendix 1: Co-Production and System Change Presentation



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pptx

Appendix 2: Resources and Further Information

CFE Research, The University of Sheffield and the Systems Change Action Network (2021) Involving people with lived experience in the workforce: Workforce development and multiple disadvantage. Available at:

<https://www.tnlcommunityfund.org.uk/media/insights/documents/Involving-people-with-lived-experience-in-the-workforce-2020.pdf>

Holland, J. (1998) Emergence: From Chaos to Order. 1st ed. Oxford University Press: Oxford.

Homeless Link (2023) Knowledge Hub – Lived Experience. Available at:

<https://homeless.org.uk/knowledge-hub/?query=lived+experience>

Homeless Link (2023) Knowledge Hub – System Change. Available at:

<https://homeless.org.uk/knowledge-hub/?query=system+change>

National Institute for Health and Care Excellence (2019) Evidence for strengths and asset-based outcomes: A quick guide for social workers. Available at:

<https://www.nice.org.uk/about/nice-communities/social-care/quick-guides/evidence-for-strengths-and-asset-based-outcomes>

The Strategy Unit (2023) System P. Available at:

<https://www.strategyunitwm.nhs.uk/system-p>

Think NPC (2015) Systems change: A guide to what it is and how to do it. Available at:

<https://www.thinknpc.org/resource-hub/systems-change-a-guide-to-what-it-is-and-how-to-do-it/>

About Homeless Link

Homeless Link is the national membership charity for organisations working with people experiencing or at risk of homelessness in England. We aim to develop, inspire, support, and sustain a movement of organisations working together to achieve positive futures for people who are homeless or vulnerably housed.

Representing over 900 organisations across England, we are in a unique position to see both the scale and nature of the tragedy of homelessness. We see the data gaps; the national policy barriers; the constraints of both funding and expertise; the system blocks and attitudinal obstacles. But crucially, we also see – and are instrumental in developing – the positive practice and ‘what works’ solutions.

As an organisation we believe that things can and should be better: not because we are naïve or cut off from reality, but because we have seen and experienced radical positive change in the way systems and services are delivered – and that gives us hope for a different future.

We support our members through research, guidance, and learning, and to promote policy change that will ensure everyone has a place to call home and the support they need to keep it.

What We Do

Homeless Link is the national membership charity for frontline homelessness services. We work to improve services through research, guidance and learning, and campaign for policy change that will ensure everyone has a place to call home and the support they need to keep it.

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Let's End Homelessness Together

