



**STOCKPORT**  
METROPOLITAN BOROUGH COUNCIL

# **Working in Partnership**

## **Good Practice**

Summarising the findings of the discussions with adults, families and advocates on what ‘co-production’ means to Stockport residents who draw on Adult Social Care

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## 1. Brief background and context for this process

Stockport Adult Social Care (ASC) has high aspirations for co-production, in line with the good practice highlighted in the co-production framework<sup>i</sup> developed by Think Local Act Personal (TLAP) and the 'Making It Real' statements<sup>ii</sup>. Effective co-production should also reinforce person-centred practices and the spirit and expectations of the Care Act 2014.

Stockport Adult Social Care Leaders commissioned this piece of work in Winter/Spring 2024 to explore what 'co-production' means at a local level, by speaking with adults that draw on Adult Social Care and their carers, families and advocates. They asked a freelance consultant who knows Stockport, and who works across health and social care, to design and lead this process to enable adults and families to speak freely about their experiences and openly share their views on what would improve their relationship with Adult Social Care.

The agreed output was to develop a practical framework for co-production, involving and alongside people who draw on Adult Social Care support, which includes pragmatic and transparent principles for good co-production practice. The good practice could also potentially provide the basis for future practice guidelines i.e. how Stockport Adult Social Care professionals and practitioners should routinely relate to and work with adults and families.

This document summarises:

- the process
- important learning and messages from the conversations with adults and families, that took place predominantly during May and June 2024
- the good practice that adults, carers, families and advocates said was important to them to feel confident when they contact Adult Social Care and in their relationships with social care staff

From the beginning of the process, and based on earlier work by HealthWatch Stockport, there was a clear feeling that the word 'co-production' lacked meaning for a lot of adults and families. Some had heard the term but didn't know what it meant, whilst others were unfamiliar with the word. Only a few participants understood the term. To enable everyone to get involved in the discussion, co-production was described simply as:

- listening to and acting on the views and experiences of adults who draw on care and support, and their families and carers
- working towards a reciprocal and equal relationship between adults and carers/families/advocates with Adult Social Care

The preferred term that adults and carers identified to describe and replace the term 'co-production' (within Adult Social Care) was '**Working in Partnership**'.

## 2. The existing Stockport Co-production Charter

Stockport partners have already developed a co-production strategy, which sets out shared principles for co-production based around values and actions, which are captured in the co-production charter included below. As would be expected, there is an emphasis on empowerment, power-sharing and hearing diverse voices and views. The charter is being used by Children’s Services particularly when working with children with special educational needs and disabilities (SEND) and their families and wider services.

Whilst this specific exercise with Stockport citizens who have direct lived experience of Adult Social Care does not contradict the Charter, the findings do add depth and breadth to the values and actions in the Charter, offering more specific detail about the expectations of adults who draw on adult social care and their carers/advocates and explains what ‘working in partnership’ means to them.



### What we will do

Whether we are co-producing on an individual or strategic basis, whether we are looking at education, health or care services, we should all work to the following commitments to support our co-production values.

Value	What we will do
Be Open and Honest	We will agree together who are the right people to be involved We will provide relevant information in a timely way We will be transparent We will respond promptly and follow up on actions
Actively Listen	We will agree together who are the right people to be involved We will let people know how we have acted upon what is heard We will value contributions equally from all involved
Value the Lived Experience	We will value contributions equally from all involved We will agree together who are the right people to be involved We will be flexible to the needs of those involved We will hold meetings virtually where it is more convenient and is likely to increase opportunities to be involved
Do What Matters	We will agree together who are the right people to be involved We will agree desired outcomes together and work towards them together We will seek views from relevant parties We will value contributions equally from all involved We will focus on solutions with a 'can do' approach

Value	What we will do
Be Accountable and Responsive	We will take responsibility for what we agree to do We will do what we say we will or explain clearly why we cannot We will learn from each other and share our learning widely We will be transparent We will focus on solutions with a 'can do' approach We will be flexible to the needs of those involved
Work Together	We will agree desired outcomes together and work towards them together We will agree how it is best to work together We will communicate with each other and other services clearly We will listen to each other's views
Be Respectful	We will remember that we are all human beings We will communicate clearly and accurately in plain English We will provide relevant information when appropriate to do so We will do what we say we will do or explain clearly why we cannot We will listen to each other's views We will agree desired outcomes together and work towards them together We will be timely and allow sufficient time for what we need to do together



### **3. Summarising the conversations with adults who draw on Adult Social Care and their families, carers and advocates**

In order to understand what ‘co-production’ currently means to adults, families and advocates, a series of informal, semi-structured conversations were held across May and June 2024. Many Stockport voluntary sector services (some of whom are also commissioned by Adult Social Care) generously facilitated the process of identifying and creating opportunities to meet with individuals and groups of adults and carers/families. Some of these services also acted as advocates for adults who had complex or profound disabilities or adults who needed support with communication.

Multiple adult user-led groups and family and carer-led groups also got involved by creating time and space at their meetings for discussion. Their welcoming and open approach was also appreciated.

The findings represent and summarise what was discussed across face to face group and 1:1 conversations, as well as 1:1 phone conversations. Some of the 1:1 conversations involved in-depth discussions of adult’s and families’ lived experiences.

Contributions were as follows:

- Group conversations with adults – 4 involving around 25 adults
- Group conversations with families and carers – 4 involving about 43 family carers
- Individual / small group conversations with adults – 15 conversations (16 adults overall)
- Individual / small group conversations with families and carers – 7 conversations (8 carers overall)
- 4 separate conversations with providers / advocates who helped to share perspectives on behalf of adults they support

92 adults and carers participated overall. There was very good representation of adults of a working age, both younger adults and adults in mid-adulthood, and their families and carers. Older adults and family carers of older adults were less well-represented but there were some detailed contributions from professionals as advocates.

Adults with a learning disability and neurodiverse conditions including Autism and ADHD (Attention Deficit Hyperactivity Disorder) were directly involved in 1:1 conversations and some adults with more profound learning and physical disabilities were supported to take part by professionals as advocates.

There was a good gender balance across the participants and whilst the majority of adults and carers who contributed were from a White-British background, there were some

detailed contributions from adults and carers from BME (black and minority ethnic) heritages.

The lived experiences of Adult Social Care included residential settings, different models of supported independent living, and adults living in their own home or tenancy (with and without family).

However, future work and discussions about 'working in partnership' do need to consider routine mechanisms for involving and listening to older adults (65+) and also younger adults with physical and/or sensory disabilities.

The emphasis across many of the conversations was on:

- ▶ Consistency of the contact and relationship with Adult Social Care, including a strong preference to return to a named social worker approach, particularly for working age adults who have lifelong social care needs
- ▶ Effective communication, with a focus on using non-professional, simple language and understanding adults' preferences and support needs related to communication
- ▶ The importance of relationship-based practice – in particular empowerment, mutuality, empathy and creating time for conversations
- ▶ Personalisation and adapting processes and information to the needs and capabilities of the individual
- ▶ Transparency and openness, including providing clear answers and explanations about individual requests and/or decisions
- ▶ Managing expectations by publishing clear, accessible processes and standards - for example, how to raise an issue or make a complaint, expected response times by social workers, expected standards of commissioned care, expected timeframes to make a decision about an assessment / care plan, what the purpose of a review is etc
- ▶ Better and more consistent recognition of adults' and families' perspectives and voices, especially around individual aspirations or needs
- ▶ Transparent and accurate financial information around Adult Social Care eligibility, social care charging, expected financial contributions and the relationship between benefits received / personal budgets / social care charging - ensuring that assessed needs continue to be met during times of 'cliff-edge' financial stress
- ▶ More choice around the range, format and quality of social care provision, including supported living options
- ▶ A clear end-to-end process or plan for involving adults and families in strategic planning or decision-making - with a commitment to keeping to timescales

However, while the conversations tended to highlight areas where 'working in partnership' needed to improve in the eyes of adults and families, good practice was also recognised. For example, individual social work practice was well-regarded, in particular where social workers were committed to listening carefully and to understanding adults' and families' viewpoints. Advocates also recognised some very good examples of person-centred and personalised practices in assessments and reviews.

Another area of practice that was considered effective and well-managed was the use of move-on and future planning conversations. Several examples were given by adults and families where open conversations and good planning had led to adults being able to move to supported independent living arrangements and outcomes were generally reported as very positive.

Although more mixed experiences were reported around a request or need for very urgent social care support, in the main, help in crisis situations was largely seen as forth-coming and effective. However, some families observed that a more accurate assessment of needs and preventative support could avert crises. Others felt that a request for urgent help wasn't always recognised or responded to promptly enough.

#### **4. Good Practice for Working in Partnership specific to Adult Social Care**

The next four sections interpret and summarise the most commonly held views and observations that emerged from the lived experience conversations with Stockport adults who draw on Adult Social Care, family carers and advocates around the 4 areas below.

The good practice is directly based on and informed by the conversations with Stockport citizens who took part in the conversations. It was also tested out at a wider, open conversation in Summer 2024 as part of a jointly-hosted local 'Making it Real' Conference to sense-check that it felt familiar to the people who contributed and wider participants at the event. The good practice was developed further and adapted following this feedback.

However, it will need to be reviewed on a periodic basis to ensure that it remains relevant and meaningful to people and families who draw on care and support for adults. There may also be groups of marginalised adults and families and those with specific lived experiences that need to be heard and considered in future 'working in partnership' processes.

##### **a. Principles for a good conversation and talking about difficult issues**

- Look for ways to build a genuine rapport – introduce yourself by saying who you are and explain clearly why you want to talk, smile, make eye contact etc
- Try to hear all 'voices', especially if people communicate differently or non-verbally
- Use simple language which will help everyone to understand to the best of their abilities
- Think about how much information is it reasonable to talk about at once
- Go at a pace that feels comfortable and easy to follow for everyone
- Be patient and kind
- Listen but also *hear* what is being communicated – show that you understand by recapping what was said
- Be objective and fair
- Be open, honest and avoid ambiguity
- Be polite and respectful, especially in the language used to speak or write about adults who draw on Adult Social Care
- Be willing to explain, 'unpick' or solve difficult ideas or issues together
- If something has gone wrong, explain the process for putting it right
- Be sensitive and caring about difficult issues or giving bad news
- Explain why something can't happen with a valid reason – give the context
- Be prepared for other people's disappointment or distress – and acknowledge it



## **b. Communicating in one-to-one situations**

These situations are most likely to be with a Social Worker but they could also be with managers and other Adult Social Care employees.

They could include a routine discussion, an assessment conversation, a review conversation, writing a care or support plan, a letter or discussion about finances and charging etc

This good practice is written primarily for communication with an adult who draws on care and support, but it should also be applied to discussions with carers who are advocating on behalf of their family member.

- Give me one consistent contact in Adult Social Care
- Relate to me in a way that I can best understand – ask me if this isn't clear
- Discuss what type of communication I prefer e.g. meeting face to face, phone, e-mail, letter, easy read / pictures, using stories to explain situations etc
- Find out what I need to help me communicate as well as I can
- Consider my mental capacity and if I need help to understand or make decisions – and help me to find an advocate
- Consider privacy if we are discussing something personal
- Be clear what types of issues cannot remain confidential i.e. a safeguarding issue and discuss any disclosures directly with me
- Take time to get to know me and my family and what's important to me
- Value my points of view about what I need to help me be more independent and my hopes and aspirations about my life
- Don't make assumptions about me or my circumstances – please ask kindly if something isn't clear
- Consider with me all aspects of my life including things like communication support, building confidence to be independent, managing my emotions, intimate relationships, family relationships
- Take time to explain processes such as assessments and reviews – what they are for, where they start and end, how long they will take etc
- Go at my pace, especially if there is a lot of information to understand or process
- Follow up promptly with answers or information that I have asked for and decisions
- Write my assessment and care plan for me, in language that I can understand
- Check with me or my family/advocate that my assessment accurately states my needs and that my care plan matches my needs
- Make sure any financial information given to me is clear and consistent and explains simply how social care charging works
- Make sure that changes in financial information are right and fit with my care plan
- Explain how a Direct Payment works and how it could help me to achieve my goals
- Tell / remind me what to do if my situation gets worse or if I need help in an emergency

### **c. Communicating about quality and choice in care**

Situations where there is communication around quality and choice in care could be with adults or carers and advocates. They could be about quality and choice in an individual's care or broader conversations about care and choices that may affect or benefit groups of adults.

- Be clear about what care standards are expected in different settings and situations, so that adults and families have reasonable expectations and can make informed judgements about the quality of care
- Be transparent about the process for raising and resolving concerns or complaints about Adult Social Care e.g. on the website, but particularly when adults or families share immediate concerns about care
- Explain who in Adult Social Care is responsible for addressing concerns or complaints about care
- Ensure that concerns about commissioned care are listened to objectively and properly reviewed
- Challenge ignorance, stigma, lack of understanding and poor care standards
- Be transparent about the variety and availability of care to meet an individual's needs – if there is limited choice or flexibility, discuss this openly with adults and families
- Use the experiences of adults and families to help to shape future care options

### **d. Communicating about changes and making decisions**

As for c. above, situations about changes in care or making decisions could be with adults or carers and advocates and they could also be about making changes or decisions in an individual's care or on a bigger scale, where Adult Social Care is planning to make improvements or introduce/withdraw services.

- Publish transparent timeframes for responses from Adult Social Care e.g. to a routine enquiry, for the outcome of an assessment or review, for a complaint etc
- Be clearer about the purpose of a social care review, how often it should take place and when adults and families might need to ask for one
- If individual charging for social care needs to change, ensure there is a joined-up response between frontline social work and finance, so that care and support to the adult or family doesn't reach a 'cliff-edge'
- Involve adults and families/advocates in decision-making in ways that make it easy to participate – go to where they already meet
- Create opportunities for adults and families to take part from the beginning and stay involved till the end

- Adapt professional language for the audience when explaining changes or decisions
- Make efforts to help everyone get to a similar level of understanding in discussions – keep it simple
- Be transparent about the reasons for a change or decision and present possible options for discussion
- Be consistent and stick to an agreed plan / process for making a change or a decision – explain why if this is no longer possible

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<sup>i</sup> <https://www.thinklocalactpersonal.org.uk/Latest/Co-production-The-ladder-of-co-production/>

<sup>ii</sup> <https://makingitreal.org.uk/>