Citation:
Coan, S and Fisher, P and Witty, K (2017) Co-production and Mental Health: Patient Champions 'Speak Back' to Power. In: IRiS/MSEI Global perspectives on research co-production conference, University of Birmingham.

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Co-production and Mental Health: Patient Champions 'Speak Back' to Power

Susan Coan, Leanne Winfield and Pamela Fisher

IRiS International Conference 2017: global perspectives on research co-production with communities

University of Birmingham

14 -15 September

NHS
Leeds and York Partnership
NHS Foundation Trust

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Community Campus Partnerships

For the University	For the community
Widening participation	Access to education and training
Enhancing student experience	Informing student learning
Access to community knowledge	Access to academic knowledge
Research opportunities	Research opportunities
Relationship with research participants	Informing research priorities
Research impact	Evidence led service development
Volunteering and placement opps	Access to staff/student resources
Meeting Corporate Social Responsibilities	Working towards shared goals – Greater sustainability

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Principles of Co-production

- Co-production as authentic power-sharing
- Co-production requires a fundamental democratising of relationships
- Co-production is connected to wider questions of citizenship
- https://coproductionblog.wordpress.com/

#Esrccopro

Pamela.I.Fisher@Leedsbeckett.ac.uk

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Towards a culture change?

NHS commissioners have had legal responsibilities to include service users in the design and delivery of services since 2012 (**Health and Social Care Act**, 2012)

In 2016: **The Five Year Forward View for Mental Health** called for a culture change in mental health services

Every person with a mental health problem should be able to say:

"I am confident that the services I may use have been designed in partnership with people who have relevant lived experience."

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Progress through Partnership

In a recent study by Rethink Mental Illness:

Out of 94% (196 of 209) of CCGs that responded to the FOI request:

- CCGs that had undertaken any co-production in mental health commissioning

  15%

- CCGs that said that they had an ambition to do more co-production

  8%

- CCGs whose ambition for the future was in line with the 5YFVMH's recommendation of adopting co-production as a standard

  1%

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Co-production and Recovery

Emergent body of evidence that shows that co-production – the active involvement of people with lived experience of mental illness in service design – supports recovery and improved clinical outcomes

(Slay and Stevens, 2013; McKeown, 2014; Nesta, 2012)

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What is Recovery?

- Following emotional trauma (relationship break-up, major illness or bereavement) there is no returning to how you used to be
- Coming to terms, learning and moving on
- This is the same for recovery from mental illness
- Recovery is about taking back control

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Patient Champion

- What is a patient champion?
- How Leanne became a patient champion
- Background to clinical risk training

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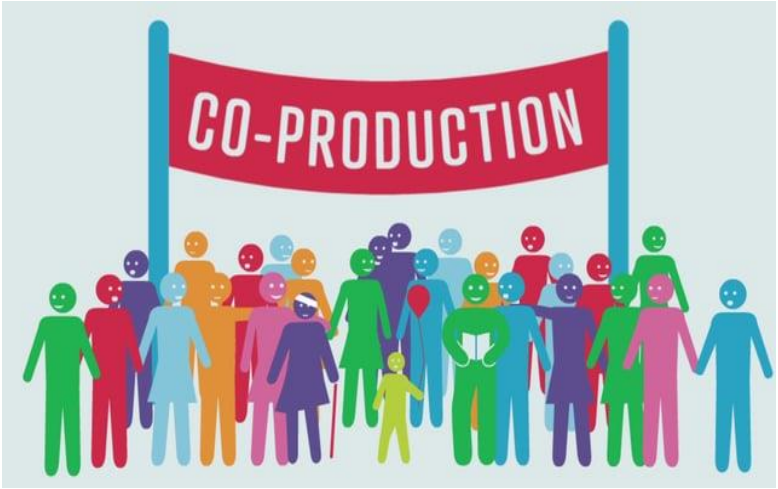
Co-production and Clinical Risk Training

- Patient champions called for co-production
- A more holistic view of risk
- Delivered to four cohorts of NHS, Adult Social Care and Voluntary Sector staff; one cohort of student mental health nurses
- Leanne's definition of co-production



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Conclusion

Co-production requires genuine power-sharing and therefore a fundamental democratising of relationships between professionals and service users in mental health. Understood this way, co-production is more radical than shared decision-making which can leave power imbalances intact (Fisher and Lees, 2016).

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