SIMPLE PRACTICES TO SUPPORT EFFECTIVE CO-PRODUCTION - LESSONS LEARNED FROM DEVELOPING

THE PATCHATT INITIATIVE

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We are a development group of patients, carers, clinicians, researchers and volunteers who co-produced the PATCHATT (Patients Changing Things Together) initiative. PATCHATT aims to enable adults with a life-limiting illness to support one another to plan and lead a small-scale change which matters to them.

A recent BMJ blog [1] highlighted the challenges of putting the theory of researcher and non-researcher co-production into action. This poster illustrates how the National Institute for Health and Care Research (NIHR) co-production principles [2] were used to develop some simple practices to address such challenges.

Shared here as a **Co-production practice framework**, these practices can be adapted for use in diverse co-production projects.

OUR AIMS

We aimed to develop a way of working which would address challenges in authentic co-production, support power-sharing and allow researchers and community members to work collaboratively to design, plan and deliver a palliative care intervention.

WHAT WE DID TO FULFIL THEM

Critical communicative methodology was used to facilitate and evaluate collaborative working. A non-hierarchical dialogue between researchers and those involved in the realities being studied brought new insights and the potential for socially transformative understandings [3].

Guided by NIHR co-production principles [1], we developed new ways to address the tensions and complexity implicit in co-production. Feedback from individuals on their experience of our joint working was gained through online discussions and email dialogue.

WHAT WE DISCOVERED

Thematic data analysis allowed us to develop a **Co-production practice framework**. Here, strategies for enhancing co-production practice are mapped against NIHR principles. Descriptions of how such strategies were used in the PATCHATT Development Group act as a stimulus for thinking.

A CO-PRODUCTION PRACTICE FRAMEWORK

NIHR PRINCIPLE 1 SHARING OF POWER

PATCHATT practice: Agreeing ways of working together

We discussed how to ensure each person had time to speak and was respected and listened to [4]. Decisions were recorded in a 'Working Together' document, which set the boundaries we had developed to allow us to work confidently and comfortably together.

PATCHATT practice: Clarifying scope of influence

Issues raised by any group member were discussed openly. We tried to reach decisions through finding an agreement everyone could subscribe to. Following Gilbert's advice [5], we had grown up conversations about why decisions were taken, eased by our pre-established protocols.

NIHR PRINCIPLE 2 INCLUDING ALL PERSPECTIVES AND SKILLS

PATCHATT practice: valuing difference

Learning takes place most effectively where difference is valued. We discussed the need to see critique not as an attack, but as a building block. We interpreted a lack of understanding not as a deficit but as evidence of a different kind of knowing. This approach allowed incremental development and shifts of focus which considerably strengthened PATCHATT.
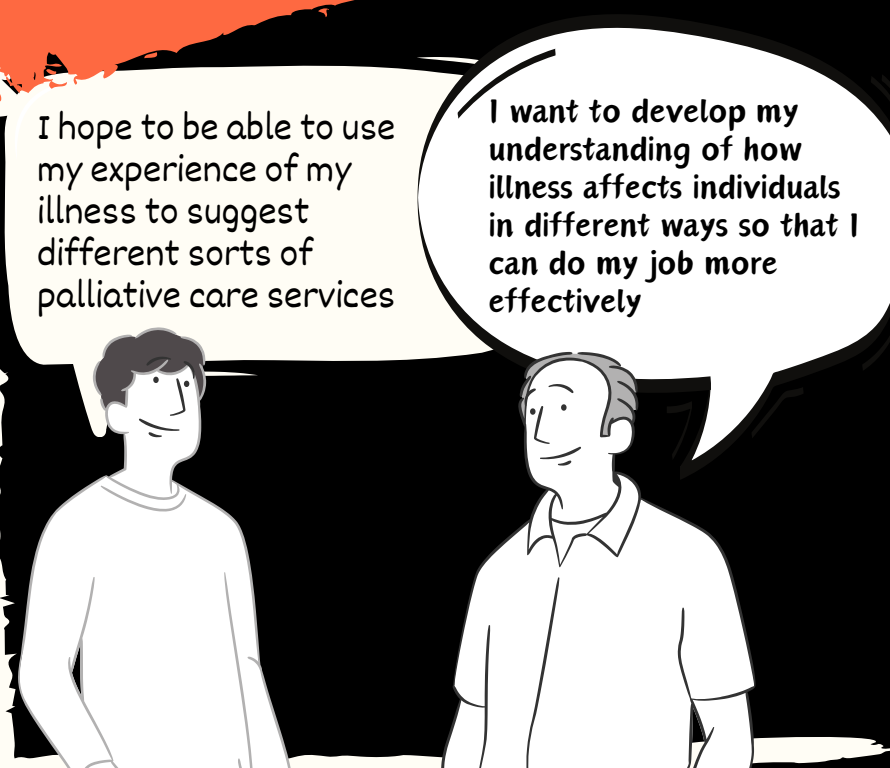
NIHR PRINCIPLE 3 RESPECTING AND VALUING EVERYONE'S KNOWLEDGE

co-production? NIHR? palliative care? reciprocity?

PATCHATT practice: Learning through sharing

We wished to lessen research inequalities through a commitment to learning through sharing. We took meeting notes, rather than minutes, so that everyone's contributions could be acknowledged and the route to decisions was clear. We encouraged individuals to avoid acronyms and explain words not in common usage. The chair ensured that everyone had the chance to speak if they wished. The resultant horizontal hierarchy means the PATCHATT initiative is now imbued with diverse thoughts and perspectives.

NIHR PRINCIPLE 4 RECIPROCITY

PATCHATT practice: acknowledging each individual's agenda

We opened our first development group meeting with the question "what do you hope to gain from your involvement in this group?". Responses gave us the opportunity to learn more about each other as individuals whilst also surfacing and validating the multiple agendas of the group. Discussion cemented our individual membership of the development group and allowed us to feed off the commitment of others, strengthening our own.

NIHR PRINCIPLE 5 BUILDING AND MAINTAINING RELATIONSHIPS

PATCHATT practice: Being authentic

Authenticity in this context refers to more than being true to oneself. Here we use it to mean a process of becoming aware of the uniqueness of our lives and our capacity to both act and take responsibility for those actions [6].

The statement 'nothing you say is stupid' was used as a proxy for the acceptance of authentic selves needed in co-development. For some, this phrase helped dispel the imposter syndrome. For others, it allowed a questioning and revision of thinking. For all, the focus on authenticity allowed the sharing of alternative ways of seeing which strengthened our co-production work.

References

1 Sinath Reddy K, Ghosh-Jerath S, Sadanandan R. Health policy and systems research: ethical challenges in co-production of knowledge. *The BMJ Opinion*. February 16 2021. Available from Health policy and systems research: ethical challenges in co-production of knowledge - The BMJ

2 National Institute for Health Research (NIHR) Guidance on co-producing a research project. 2021. Available from https://www.learningforinvolvement.org.uk/?opportunity=nihr-guidance-on-co-producing-a-research-project

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4 New Economics Foundation (2014) Commissioning for outcomes and co-production. A practical guide for local authorities. London: NEF.

5 Gilbert D. (2020) *The patient revolution. How we can health the healthcare system*. London: Jessica Kingsley Publishers.

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