



St Magnus Community Co-Production strategy 2025-2027

At St Magnus Community, we believe that the best care happens when everyone works together. This means service users, carers, staff, and others are all equal partners in planning, delivering, and reviewing our services. Co-production helps us make sure our care is focused on the real needs and experiences of the people we support.

When care is co-produced, it leads to better results for service users. It improves the quality of care, helps people recover, and builds trust between service users and staff. By listening to service users and carers, we meet their needs better and help them take control of their own care, leading to better mental health and well-being.

Our co-production plan for 2025-2027 focuses on how we will make co-production a regular part of everything we do. We want it to become part of our culture, so it is included in every part of our practice.

The areas we are focusing on were chosen by our co-production group. This group includes board members, experts by experience, carers, service users, and staff. Together, we identified key areas where co-production can make the biggest difference. Over the next two years, we will work on these areas to improve how we shape and deliver care, making it more compassionate, effective, and cantered on service users' needs.



Co-Production from Admission to Discharge

1. Pre-Admission Information Sharing

What we want to do:

Make sure service users and their families have all the information they need before admission, to make things easier.

How we will do this:

- Send out the 'St Magnus Booklet' or 'St Martha's booklet' to service users and their families before admission.
- Update the 'St Magnus Booklet' and 'St Martha's booklet' regularly with help from service users and families to keep the information current.
- Send an invitation to visit the site or meet the team (either in-person or online) before admission.
- Offer pre-admission meetings where service users and families can ask questions and get personalized information.
- Create a website portal where service users and families can find up-to-date information about the service.

2. First Care Review Meeting

What we want to do:

Work together with service users and their families early on to make a good care plan.

How we will do this:

- Within six weeks of admission, have a meeting with the service user, their family, and the care team.



- At this meeting, talk about the care plan, any concerns, and important information like family history.
- Offer to complete forms like "This is Me" by talking instead of writing, to make things easier for families.
- Write down and regularly check goals to make sure they match what the service user and family want.

3. More Involvement in Care Planning

What we want to do:

Make sure families are involved in planning the care of their loved ones throughout their stay.

How we will do this:

- Invite families to attend care planning meetings with the nursing team regularly. The timing will be decided by the People's Council.
- Make sure meetings are scheduled at times that suit both service users and families.
- Provide easy-to-understand notes from these meetings so everyone knows what was discussed and decided.
- Hold regular meetings to review the care plan and make any necessary changes based on the service user's needs.
- Offer flexibility in how and when meetings happen, such as in-person or online.
- Use these meetings to address any concerns and adjust goals as needed.



Co-Production Strategy: From Floor to Board

1. Ward Meetings and Escalation to Clinical Management Team (CMT)

What we want to do:

Create a regular way for ward teams to share concerns and ideas with the Clinical Management Team, so that problems can be fixed.

How we will do this:

- Hold ward meetings every two weeks with staff, service users, and carers to discuss issues and improvements.
- Set up a process to write down and share feedback from these meetings with the Clinical Management Team (CMT).
- Give regular updates on what actions have been taken in response to ward feedback.
- Make sure that decisions made by the CMT are shared clearly with ward teams.

2. Service-Wide Community Meetings and Escalation to Clinical Governance

What we want to do:

Bring together staff, service users, and carers from across the service every three months to talk about how to improve services.

How we will do this:

- Organize quarterly community meetings where everyone can discuss service quality and ideas for improvement.
- Share important points from these meetings with the Clinical Governance Team to make sure they are acted on.



- Put up "We Said, We Did" posters to show what changes were made based on feedback.
- Regularly check how these meetings are helping improve services and make changes as needed.

3. Monthly Patient Council and Escalation to Executive Management Team (EMT)

What we want to do:

Make sure patients have a say in important decisions by setting up a monthly Patient Council.

How we will do this:

- Hold monthly Patient Council meetings where service users can share their experiences and suggest improvements.
- Create a process to share Patient Council feedback with the Executive Management Team (EMT) so that patient voices are heard.
- Provide regular updates from the EMT on how patient feedback has influenced decisions.
- Make sure the Patient Council is open to a diverse range of service users.

4. Lived Experience in Recruitment and Interview Panels

What we want to do:

Include people with lived experience in hiring new staff to ensure a patient-centred workforce.

How we will do this:



- Involve Experts by Experience in creating interview questions, especially when hiring new staff.
- Invite Experts by Experience to take part in interview panels for senior roles.
- Provide training and support to Experts by Experience to help them feel confident in their role.
- Regularly review how involving lived experience in recruitment is making a difference and adjust the process as needed.
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5. People's Council and Feedback to EMT

What we want to do:

Set up a People's Council to bring together service users, carers, and staff to improve services.

How we will do this:

- Organize People's Council meetings every three months to discuss service delivery and quality improvements.
- Set up a process to share feedback from the People's Council with the Executive Management Team (EMT).
- Provide clear updates on actions taken by the EMT in response to People's Council input.
- Encourage more people to join the People's Council by promoting it through posters, emails, and staff communications.

6. Communication Preference Forms for Relatives

What we want to do:

Improve communication with relatives by asking how they prefer to receive information and making sure they stay informed.



How we will do this:

- Use Communication Preference Forms so that relatives can choose how they want to receive updates (email, phone, post).
- Send updates based on relatives' preferences to keep them informed.
- Encourage relatives to join group emails for important news and events.
- Regularly review how well the communication preferences are working to keep relatives engaged.

7. Continuing Recruitment of Experts by Experience for Staff Education

What we want to do:

Use Experts by Experience and carers to help train staff, so they can better understand patient perspectives.

How we will do this:

- Recruit Experts by Experience and carers to take part in staff training sessions and share their experiences.
- Provide ongoing support to help Experts by Experience improve their teaching skills.
- Regularly check how well this training is working and make changes to improve it.



Co-Production Strategy: Empowering the People's Council

1. Create Terms of Reference and Invite Service Users, Staff, and Carers

What we want to do:

Clearly define the roles and responsibilities of the People's Council and invite a diverse group of people to join.

How we will do this:

- Write a clear guide (Terms of Reference) that explains what the People's Council does, who can join, how often it meets, and what decisions it can make.
- Explain the council's role in reviewing policies, giving feedback, and sharing new ideas.
- Share the guide with everyone involved so they understand how the council works.
- Send invitations to service users, relatives, and staff to encourage them to join the council.
- Use emails, posters, newsletters, and in-person outreach to tell people about the council and how they can get involved.

2. Quarterly People's Council Meetings

What we want to do:

Hold regular People's Council meetings to ensure ongoing collaboration and feedback.

How we will do this:

- Hold People's Council meetings every three months.



- Schedule meetings at times that work for everyone, with options for both in-person and online participation.
- Prepare for meetings with clear agendas and send them out in advance so participants know what will be discussed.

3. Reviewing Organizational Changes and Generating New Ideas

What we want to do:

Get the People's Council involved in reviewing changes and coming up with new ideas to improve services.

How we will do this:

- Ask the People's Council to review and provide feedback on changes to policies, procedures, and services.
- Encourage the council to suggest new ideas to improve service delivery, patient experiences, and how the organization operates.
- Give the council access to important information so they can make informed decisions.
- Ensure that feedback from the People's Council is taken seriously by management and track the actions taken based on their recommendations.

4. Monthly Patient Council for Local Issues

What we want to do:

Set up a separate Monthly Patient Council to focus on everyday issues and ideas for improvement.

How we will do this:



- Create a Monthly Patient Council to discuss local issues and come up with ideas for improving day-to-day services.
- Encourage service users and carers to actively participate in these meetings to ensure that concerns are addressed quickly.
- Use the Monthly Patient Council to collect ideas that can be shared with the People's Council or Executive Management Team (EMT) for wider consideration.

5. Feedback Escalation to the Executive Management Team (EMT)

What we want to do:

Make sure the feedback and ideas from the People's Council reach senior management.

How we will do this:

- Set up a process to share recommendations from the People's Council and Monthly Patient Council with the EMT.
- Have a representative from the EMT attend People's Council meetings sometimes to give feedback on the decisions made by management.
- Keep track of all feedback sent to the EMT and report back to the People's Council on what actions were taken, ensuring ongoing communication.



Co-Production in Physical Environment

1. Review of Physical Environment Changes by the People's Council

What we want to do:

Make sure the People's Council helps review and shape changes to the building and environment.

Actions:

- Share all changes to the environment with the People's Council, from the first design ideas to the finished project.
- Give updates at important stages (like design drawings) and ask for feedback.
- Pass the People's Council's ideas and suggestions to the Executive Management Team (EMT).
- Keep track of the Council's recommendations to make sure decisions are transparent and clear.

2. Physical Environment Discussions in Local Ward Management Meetings

What we want to do:

Have regular meetings where the physical environment (like furniture and soft furnishings) can be discussed.

Actions:

- Talk about the environment, including furniture and layout, in local ward management meetings every two weeks.
- Encourage service users and carers to share any concerns or suggestions for improvements.



- Use these meetings to gather feedback that can be passed on to the People's Council for larger projects.

3. Offering Informed Choices on Furniture and Soft Furnishings

What we want to do:

Help service users and carers make informed decisions about furniture and soft furnishings.

Actions:

- Offer a range of furniture and soft furnishing options, explaining why each option is suitable (e.g., comfort, durability).
- Use pictures or demonstrations to help service users who may find it hard to choose.
- Get carers and staff involved in helping service users make the best decisions for their needs.
- Provide flexible options to meet different preferences, helping service users feel more at home.



How will we monitor this?

To make sure our co-production strategy is successful and sustainable, we will put in place strong monitoring and evaluation processes. These will help us track progress, measure impact, and make adjustments as needed.

1. Regular Feedback

- **People's Council Meetings:** We will review outcomes every quarter to see how effective the council is, tracking recommendations passed to the EMT and changes made.
- **Ward-Level Feedback:** We will monitor feedback from fortnightly ward meetings and monthly Patient Council meetings, keeping a record of issues raised and actions taken.
- **Community Engagement:** "We Said, We Did" posters will show how we addressed feedback, promoting transparency.

2. Service Reviews and Audits

- **Annual Strategy Review:** Each year, we will review the strategy's progress, participation rates, and user satisfaction.
- **Clinical Governance:** Quarterly reviews will ensure that co-production efforts align with care standards and quality improvement.

3. Lived Experience Monitoring

- **Recruitment:** We will assess how lived experience affects recruitment and use feedback to improve future hiring processes.
- **Staff Education:** Post-training evaluations will measure how lived experience has impacted staff learning and patient care.



4. **Service User and Carer Surveys** We will regularly survey service users and carers about their experiences with co-production, their involvement in decision-making, and the impact on their care.

5. **Service Delivery Impact**

- We will track how co-production affects service quality, patient recovery, and satisfaction.
- We will monitor how often care plans are reviewed and updated with service user input, and how many physical environment changes were influenced by users.

By doing all of this, we aim to make co-production a key part of St Magnus Community's culture and practice.