A guide on how to work with seldom heard groups

A guide on how to co-produce with seldom heard groups
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Coproduction with seldom heard groups

What is co-production?

The Care Act 2014 statutory guidance offers the following definition: “Co-production is when groups of people get together to influence the way that services are designed, commissioned and delivered.”

Who are seldom heard groups?

The term ‘seldom-heard groups’ refers to under-represented people who use or might potentially use health or social services and who are less likely to be heard by these service professionals and decision-makers.

These groups used to be described as hard to reach - suggesting that there is something that prevents their engagement with services. Seldom heard emphasises the responsibility of agencies to reach out to excluded people, ensuring that they have access to social care services and that their voices can be heard, and is preferred for those reasons.

Examples of seldom heard groups could include:

- Particular ethnic minority groups
- Carers
- People with disabilities
- Lesbian, Gay, Bisexual, Transgender, and Queer people
- Refugees/asylum seekers
- People who are homeless
- Younger people
- People with language barriers

To summarise, it is anyone who is under-served. These people may have particular needs when it comes to participating.

Why work with with seldom heard groups?

Co-production allows seldom heard groups to explore issues on their terms - with you facilitating, rather than driving.

Here are just some of the reasons you might want to co-produce with seldom heard groups:

- Working together, you give the group the opportunity to decide what is important to them and what they want to explore - they set the agenda.
- You take on the role more of facilitator rather than researcher, guiding groups through the process and ensuring expectations are met, rather than managing the whole project on your usual terms.
- As a researcher, it is a more interesting experience, as you go into it without any preconceived ideas. It is your role to challenge the seldom heard group to come to decisions rather than making them all yourself.
- The seldom heard group learn skills which they can take on to other work, so you are enhancing the social value of the work you do.
• Your insight might have more weight with stakeholders as it has come directly from the seldom heard group and they have been actively involved in the process, rather than just passively responding to questions.

• Healthwatch values: We best represent the patient voice by involving them with the work, giving them true ownership.

### About this guide

This guide has been developed by Healthwatch Croydon and will take you through the steps you need to follow to co-produce a research project with a seldom heard group.

The guide uses a specific project as an example of how to co-produce research with seldom heard groups. You can use this approach with any group concerned with a health and social care issue.

### How to administer

• **Approach to equality and diversity** -
  
  In the project undertaken by Healthwatch Croydon, they worked with a local college who recommended relevant students. No interview process was held, which reduced barriers to involvement. They had a mixed-ability, diverse group which was representative of the borough. This also helped gain responses from a range of people during the survey.

• **Think about the space and facilities you need** -
  
  Think about the space where you will undertake the office part of the project. Will you need to hire extra rooms which will incur costs? You may also need extra tablets or laptops if the organisation you are working with does not have facilities - including good quality Wi-Fi. Healthwatch Croydon were able to use the college premises for the duration of the work.

• **Dedicated staff and volunteers** -
  
  Healthwatch Croydon recruited volunteers and a board member for the duration of the project to try and keep to one Healthwatch member of staff. This kept the rest of the team free to work on other projects.

• **Ensure your paperwork is in order** -
  
  Volunteer application forms, photo consent forms, public liability insurance, risk assessment and safeguarding for this particular (young) group.

• **Design a research form** -
  
  There is a research project form template in the appendix of this guide, which allows you to plan and mitigate risks.

• **Distribute tasks to set up systems such as a group email, and ways to manage tasks which can be shared by all participants. Healthwatch Croydon used Trello boards (which is like a virtual post-it note board) to track their progress.**

• **Time management** -
The project undertaken by Healthwatch Croydon used approximately 38 hours of board and volunteer time, as well as one member of staff for the same 38 hours.

Top tips:
- Make it scalable based on the number of staff or volunteers.
- You can invite board members to be involved.
- Agree terms of reference.
- You need to have clear role descriptions when it comes to what the volunteer or board member will be doing, and how that differs from staff roles.

How to scope
- Identify a group which has an issue in health and social care, that members would like to research. If you are working with community groups, they will probably have their own issue that they have identified or are experiencing.
- Review the literature, identify themes - what comes up nationally and locally?
- Identify and list stakeholders who will be interested in your project - you will contact them later.
- Gaining buy-in to the project: Healthwatch Croydon offered real involvement and upskilling the students, so they could negotiate from a position of strength.

How to design and pilot
- Review your project research form at each meeting.
- Designate tasks and put them on to-do lists on shared workspaces.
- Formulate some questions around themes you have identified that commonly came up from the literature review.
- Pilot the questions to see if they work and test them with each other and your wider network. Be prepared to revise your questions.
- When the group feels that the question set works, put them on an online survey platform - Healthwatch Croydon used Smart Survey.
- Print hard copies of the survey.

Top tip:
Practice by role playing as researchers and participants and give feedback. Practice scenarios, and challenge participants.
How to design the outreach

- List places to conduct your survey and approach them. Healthwatch Croydon used the library and the college.
- Get stakeholders on board to help publicise the survey/distribute your work. Use a persuasive email, or call in to their offices, explaining why they should back the project. There is an example persuasive email in the appendix of this guide.
- If discussing a sensitive topic, consider printing local resources to signpost people to relevant services while conducting outreach.
- Set up your pitch - Healthwatch Croydon used incentives like pens, posters and sweets to get interest in their pitch.
- If you have a main criterion, help save time by asking this first. Healthwatch Croydon started conversations by asking ‘Do you live in Croydon?’ - which saved them from not speaking to those who did not live in the borough.

How to undertake the outreach

- Once trained, encourage your volunteers to undertake the outreach.
- Some may lack confidence, so work in teams of two with one asking and the other taking down the comments. They can then switch round.
- Encourage volunteers to share and change roles so they can experience both, but balance this against the need to complete the work.

Top tip:
Be flexible - sometimes volunteers are natural specialists, be it in asking questions, taking down comments, or analysis. While encouraging a range of skills, go with the flow if they prefer one aspect.

How to collate, analyse and present the insight

Collating

- Collect your paper surveys together.
- Input paper responses on to your survey platform - some may already be online from the design and pilot phase.

Analysing

- Smart survey will analyse your responses.
- Start to write your report - see a template from Healthwatch Croydon in the appendix.
- Put your early findings onto PowerPoint.

Top tip:
Keep updating the research form and Trello - this will keep you on task, help with report writing, and consolidate your learning.

**Presenting**

- You can present your early findings to the stakeholders you identified in the project research form.

**Top tip:**
You can do this online via Microsoft Teams or similar, this will save money on room hire.

**How to publish your insight**

- Contact stakeholders and ask for their comment as well as fact check. Sharing data in advance ensures interest and buy-in to the final report.
- Include a section from stakeholders you presented initial findings to. Stakeholders are then given an opportunity to respond to the findings before publication, as opposed to being presented with the report and asked later.

**Top tip:**
Gaining feedback from stakeholders in advance enhances the report and strengthens recommendations.

**About Healthwatch Croydon and Croydon**

- Croydon’s population is 380,000. It is very diverse with London’s largest young population and third largest older population, as well as the capital’s largest number of care homes per borough.
- If Croydon was outside London it would be England’s eighth largest town and city. It has larger populations than Newcastle-upon-Tyne, Coventry and Nottingham.
- Healthwatch Croydon has two full time staff (Engagement Lead and Partnerships Lead), two part time staff on four days a week (Manager and Communication Lead).

**The difference the work has made**

- Healthwatch Croydon maintained Healthwatch values: A seldom heard group was accessed and involved to give their views and found others to give theirs.
- The principles of co-production were applied: The group chose what to research and were invested in it. It became authentic, relevant and integrous.
- Healthwatch Croydon received very positive feedback from stakeholders, who were interested in listening to independent reporting that rose out of the need of a local group. “Genuine and high quality.”
- Based on discussions from Healthwatch Croydon’s project, a proposal emerged for a Young People’s Mental Health Forum bringing together a range of 13-25-year olds from a
range of needs to continue to give their views on services, share ideas and test new services.

**Lessons learned**

- Be prepared to take a risk. While you might not know how your project will turn out, you can have an end goal in mind and plan for potential risks and how you might mitigate them.

- Think about drop-out. The larger the group, the lighter the load. It makes a big difference if the numbers drop by half as it did by the end of Healthwatch Croydon’s project.

- Resource intensive - for both staff time, and facilities. Working with younger people or vulnerable groups may have extra safeguarding requirements, meaning a DBS-checked adult needs to attend all times when young people are physically near you - one young person should not be left alone with one adult. Finding free venues to meet regularly can be a challenge. Negotiate this with the organisation you are working with, to ensure suitable space can be given or allow this in your budget.

**More information**

You can watch the videos, read the written updates and learn more about Healthwatch Croydon’s project [here](#). Find out what Beth, one of the students who worked on the report, said about her experience on the Healthwatch Croydon [YouTube channel](#).

If you have any further questions about the project, you can email:

**Robyn Bone at Healthwatch Croydon**

**Adapting this guidance for the post-pandemic landscape**

When the COVID-19 pandemic hit and lockdown effectively banned face-to-face engagement, Healthwatch Croydon faced particular challenges in connecting with seldom heard groups. Here in his own words, Healthwatch Croydon Manager Gordon Kay explains how he and his team mitigated against these issues with methods you may want to consider implementing yourself if undertaking similar work.

**Impact of COVID-19**

- Lockdown began just before our project was due to start, so we had to cancel our original plans but committed to completing the project via alternative means.

- We then decided to run the event totally online via Zoom, with 40-minute break out sessions to give participants adequate discussion time.

- We were aware of the need to build rapport with students we had never met face-to-face - early team-building exercises with board members helped, along with lots of work by the team to enable good working practices from different personalities.
• At times interruptions to internet connection created challenges for Zoom, but participants found Microsoft Teams even more difficult to use - so choose a platform that works best for everyone, not just which is convenient for you as the organiser.

• We received responses from participants between meetings via email and WhatsApp, but students sometimes could not get instant responses, which was learning for us.

• Regarding time expectations, it actually took more time to get everything done virtually including analysis. Students due to finish with the project on 1 July stayed on throughout August.

• Report needed to be completed by team: While it got to a good stage of analysis by the students - staff have had to complete the work.

Improvements for next year

• We would do it again but need to consider timings and ambitions for the project to ensure we can deliver it within realistic timeframes.

• We've taken various learnings on what platforms and processes to put in place. New ways of doing things are happening in all our work and changing all the time - we just delivered a two-hour Annual Meeting on Zoom, which was not even a consideration last year.
Appendix

Research project form template

This project form is to be filled in and signed off before work commences.

1. What the project about?

2. How does it link to the business plan?

3. Which residents are we listening to?
   - List of different types of people we are speaking to, i.e. patient, carers, workers etc.

4. Which providers and commissioners is this relevant to?
   - List of the specific people that need to see this report when published.

5. Who are we working with to get access to these residents?
   - List of the organisations groups, and contacts we are working with to gain access to these residents.

6. What are the issues we want to know more about?
   - Based on the scoping, list the key issues we wish to explore

7. What methods are we using to find out this information?
   - List the methods, i.e. survey, interview, group sessions etc.

8. What are the questions we are asking?
   - List the questions

9. Have they been tested and who with?
   - Show how they will be tested

10. What is the planned report structure and titles of each section?
    - List the details.
11. What is the planned schedule?
   - Scoping, question testing, research, write up, review, share with providers, publish

Complete the risk table below.

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Persuasive email example

Introduction
This survey invites young people between the ages of 14-25 to give their experiences of mental health and mental health services within the borough of Croydon. This survey has been put together by a group of six students who have been working closely alongside Healthwatch Croydon. We all came together to research deeper on the topic of mental health as well as sharing our thoughts and ideas, and after some discussion we decided to make this the focus of our research project. What is mental health? The dictionary defines mental health as “a person’s condition with regard to their psychological and emotional well-being.”

What is the purpose of this survey?
The purpose of this survey is to inform, educate and bring awareness about the prevalence of mental health and the stigmas which come alongside it. The people we are aiming to survey are young people aged 14-25 who live in Croydon including students at Croydon College, youth groups as well as on social media.

We will disseminate the resulting data to providers and commissioners such as South London and Maudsley NHS Trust, the Health and Wellbeing Board, Croydon Council as well as other Healthwatch. This survey aims to expose young people’s opinions on how their day-to-day life influences their mental health, and on both the availability and helpfulness of mental health services.

Why are we conducting this survey?
Mental health is stigmatised, therefore young people may feel they have to manage it alone. However, by reaching out to young people in Croydon and letting their voices be heard, we can better our community and help those who are struggling with mental health problems, making it a subject which can be talked about openly and freely. Our plan is to tackle the negative connotations behind mental health and create a positive outlook and conversation about mental health.

What are we going to do with these results?
The results once gathered will be analysed to spot the trends and to identify the gaps, what is and isn’t working well, and therefore find a way in which they can be improved. The results will also be passed to commissioners and Croydon Council.
Signed T-Level students, (names withheld)

Useful links Healthwatch Croydon used

- Trello
- Smart Survey
- First 1,000 days Croydon Public Health report
- Croydon Observatory
- NHS Young People Mental Health Survey