

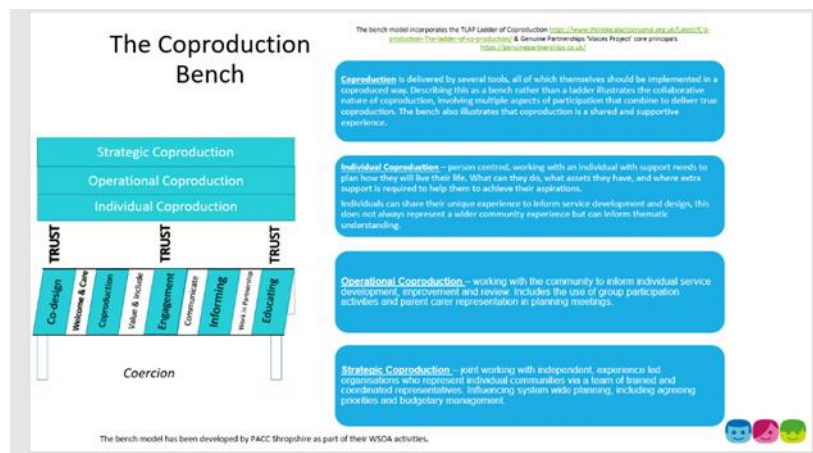
Coproduction in Shropshire

Introduction:

PACC has developed a new model called the Shropshire Co-production Bench. The 'Bench' is based on the established core principles of coproduction, while recognising that co-production is delivered by several types of activity, all of which themselves should be implemented in a co-produced way. Describing this as a bench rather than a ladder illustrates the collaborative nature of co-production, involving multiple aspects of participation, that combine to deliver true co-production. The bench also illustrates that co-production is a shared and supportive experience and recognises that co-production happens at a number of different levels;

- Individual
- Operational
- Strategic

This report outlines discussions with Shropshire parent carers about what their current experience of co-production is like, what they think co-production at each level looks like and how we can evidence co-production is happening?



Individual Engagement:

Summary

Individual families who are new to the EHCNA process report feeling their child's voice is heard, their views valued, and their child's needs translated well into the document and provision suitably identified for the most part. Contrary to this, those who are working with transferred EHCPs or on the PFA phase of their journey report their child's voice is not heard well and their needs are not identified and translated into plans clearly. Within PFA many families report their child is narrowed

into support for their educational needs only and the SEN team and those providing evidence are not clearly exploring the social care needs and other independent living needs young people should be developing in readiness for adult life. There are some examples of these reflections:

- Post 16 PFA planning Annual Reviews are often not looking at life skills – families are seeking EHCPs to include support for developing social skills and life skills (such as ability to cook, ability to manage a daily schedule, ability to remain fit and healthy) but families are being told they cannot include things that are not focused on academic outcomes.
- Parent Carers have shared their experience of CDC 0-5 assessment pathway as a positive one. Families feel they are supported well, they are clear about the purpose of conversation and interventions, and they are clear on the next steps. There is some concern raised about the 'drop off' if families are told their child can be supported with limited specialist health support but can manage in mainstream education (with or without an EHCP). Families have articulated the gap of support between three / four years of age and school start can feel like they are left to survive on their own until they are able to be supported by SENCo to inform and influence the support and care their child receives.

Parent carers report person centred approaches and the opportunity to inform and influence services received by their child to be increasing and improving. There are still some key services (such as Mental health, autism assessment pathways, autism support pathways) where there is very limited positive feedback and some clear concerns from families that a child's needs are not front and centre in driving the support made available to a child. There are some clear examples of this challenge:

- MPFT / BeeU services referring to a child's needs as 'because of their autism' rather than exploring them as mental health needs. They also state they can't 'treat' Autism and therefore will not provide support to an autistic child or young person for their mental health needs.
- Early Help and Social Care Services are often cited as very person centred in their service level delivery, but do not always have a correlating positive feedback about taking a needs led approach. Some individual practitioners are praised for their efforts in enabling the child's voice to be heard, again though this doesn't always translate into informing the child's care and support delivery or outcomes.
- EHCP QA has picked up an increase in the golden thread of the child's voice in documentation from All about me sections throughout the rest of the document

Families are provided with clear and multiple opportunities to inform services about the care they receive and their experiences. EHCP Feedback Survey, Health Service Satisfaction Questionnaires, compliments, and complaints processes etc all provide ample space for gathering personal feedback about direct care and support.

Strengths	Weaknesses
Person Centred Approaches are more well recognised and felt in the system	Childs voice informing outcomes is still a challenge for many parts of the system
CYP voice at a direct delivery level is improving in being captured	The thread of CYP aspirations is hard to discern from plans and support offers
Multiple points for families to contribute their experience on an individual level	Too many individual participation touch points (such as emails, surveys, and evaluations), that do not inform care delivered service developments, or feed into strategic systems, can be overwhelming for families
IASS / Healthwatch / PACC / PALS provide individual families opportunity to be heard and influence wider systems	Local Offer is not used well enough to channel participation opportunities

System leads have the right drive and ambition to make themselves available to families and support their teams to be visible and accessible also	Consistency and quality assurance of participation opportunities is not monitored
	Local Offer not equipped with enough information to support families to know what they are supposed to expect from a service to know if it's appropriate

Parent Carer Feedback:

In October 2021 PACC held an event exploring what coproduction means to families and how we measure it meaningfully. Below is the feedback they provided:

- Don't understand the service/ offer at the beginning- we are using different services all the time- how can it be measured?
- Need someone at the beginning of the process to 'navigate' the system for you and tell you information- "Navigators"
- Can't expect parents to evaluate monitoring at an individual level
- The process has to be time sensitive
- At point of needing services don't want pages and pages of information- need to know how to ring, name of contact and getting back quickly
- Direct payments- 'what do people think of services' rather than being asked how is son getting on
- IASS wait a week
- Need to know about things national/ regional/ out of county
- Services are not joined up- everybody is happy to get rid of you onto next service
- Parents under stress- mental health
- Parents can cope with children, but the 'straw that broke the camels back' is dealing with services or accessing services
- Need to know that people have listened and that all the years of 'feeding back' have made a difference
- First point of contact- examples of question to ask
- Evaluate at the end of the journey of using a service and where should feedback go? Should PACC have the feedback rather than the council- where it disappears?
- Not being asked at an individual level if this service has improved the life/quality/helped the child/ young person- all about the service
- Personal feelings conversations to feel truly open and 2-way with parents, inconvenience, bare minimum
- Disabled children's teams 'not open'
- Knowing the right thing to say
- More transparency over what services can do
- Driven by budgets
- Inaccurate written work
- Never stick to time scales
- More meetings on zoom
- Provide up to date info

Recommendations:

Development of a coproduction framework that establishes clear expectations for individual coproduction, parameters to measure these, and a mechanism (or several) to capture experience to demonstrate impact would be a significant step to support joint commissioning, service development, and person-centred care.

PACC are developing a draft Coproduction Framework, using the bench model as the method, describing the potential mechanisms, and developing measures for impact and outcomes evaluation. We would recommend this framework be developed collaboratively and adopted across the Shropshire Systems

Some examples of measurables:

- Do families have an understanding of what good a good outcome looks like for them from individual services
- Is there somebody to talk to and to direct questions to so that they can participate in individual decision making in an informed way?
- Do families feel listened to and have a sense of ownership about what happens to them
- Are families asked about their experience of working with services?
- Do families know how to raise concerns about their experience?

Operational Engagement:

Summary

Shropshire Council and the Integrated Care System have multiple methods of engagement with SEND community members. These are not coordinated, often isolated within their area or service, and sometimes complex. PACC has identified on several occasions the challenges this lack of strategic and operational coordination of these opportunities creates for families in our community. We have also often identified the role the SEND Local Offer should play in facilitating some of this coordination.

We are concerned that where there are repeated conversations (or too similar a theme of discussion) families are likely to disengage. We see apathy developing on some topics of conversation, or we find only those with the most complex and challenging experiences engage as they are motivated to resolve their situation or protect other families experiencing similar difficulties.

With a lack of coordinated engagement and participation opportunities, families can become overwhelmed by the amount of asks from the system for their feedback. Families are currently asked to participate in the following types of feedback:

- Statutory process feedback (such as EHCP, CIN, and others)
- Service feedback through health providers (acute and community)
- Voluntary Sector surveys and polls
- Community participation opportunities (such as the SEND strategy event, PACC events, IASS activities)
- Individual service experience and satisfaction surveys (both at a service level and individual interventions)
- School participation opportunities
- Representation on workstreams and development groups to channel community feedback

Also, with limited coordination comes the risk of participants not feeling valued as they may not see any feedback or resolution to their contributions, or they can sometimes describe their participation as tokenistic as impact and outcomes are often not shared or not felt in a timely manner.

The SEND Local Offer provides an invaluable vehicle for promoting opportunities and sharing feedback and resolutions from engagement opportunities. It has been an extremely powerful resource, when used well, to deliver messages and engage families meaningfully. PACC have utilised it by signposting to information to support coproduction opportunities, and we have seen some improvement of its use to directly engage individual coproduction within the community. However, it is not used well very often. We find the SEND Local Offer does not know about other participation and coproduction opportunities often and therefore cannot promote or link into them. This demonstrates again the limitations in wider community engagement due to a lack of coordination. The ICS Involvement strategy is also trying to articulate the best way to engage our community in participation and coproduction opportunities at multiple levels. They articulate the multiple ways people can engage with the system as an individual to inform and influence service design and delivery, as well as how they can use organisations and representative groups within this also. What is challenging to understand is where SEND and more importantly strategic coproduction fit within this picture.

We have seen some great examples of operational coproduction over the last two years, some are captured below:

- SALT services met with families to explore their needs and understand how the service can be more responsive to these. They also met with community representatives (PACC and PODs) to discuss some operational and strategic developments as a result of this engagement. This was successful as we have seen proactive changes to service delivery, information resources, and communications with families happen within a few months of engagement taking place. Some identified changes were being responded to within the week of engagement.
- 0-5 paediatric doctors met with families to discuss their experience of the ND pathway in early years. This started as a discussion about pre appointment attendance information leaflets and resulted in some key concerns about the wider information available needing to be overhauled. While we are yet to see the SEND Local Offer pages updated, we have seen the providers information locally updated and their pre appointment information has also been updated to reflect family's feedback.

Strengths	Weaknesses
Multiple points to participate and provide individual coproduction	Utilising the local offer to promote opportunities and provide context/link to relevant information
Increased opportunities for participation in the last two/three years	Coordination of coproduction and participation opportunities to reduce overlap, overload, and repetition.
IASS / Healthwatch / PACC / PALS provide families opportunity to be heard and influence wider systems through their operational and strategic relationships	Too many individual participation touch points (such as emails, surveys, and evaluations), that do not inform care delivered service developments, or feed into strategic systems, makes it hard to collate and keep on top of all feedback

PCF and key service leads meet for a number of key services (though this could be improved still) to discuss feedback and opportunities	Quality assurance of participation and coproduction opportunities not happening – still gaps in engagement with some services
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Parent Carer Feedback:

In October 2021 PACC held an event exploring what coproduction means to families and how we measure it meaningfully. Below is the feedback they provided on what operational coproduction involves :

- Practice changes
- Intro into the system
- 'something as simple as a directory of services'
- Opportunity to meet other p/c's
- Welcome people from the start
- How to complain and challenge
- Talk to parents
- Availability- speak to parent when they want to speak
- Flexibility
- Adaptability
- Take time to explain
- Workshops for service providers
- Meet the team
- Make information visible
- Understand wider systems and how things link together
- To be asked how we are/ how we are doing
- To feel understood
- System responds to need (30k limit on DSG)
- Good comms
- Bring people together
- Need a route for feedback
- Time to talk
- Make space in peoples' lives for co-production
- Be able to deliver what we actually need i.e., self-defense class
- Open mind

When co-production at this level happens;

- p/c feel better informed
- p/c feel in control
- being able to know who to ring we can organize things
- know when to get support
- feel empowered
- p/c feel capable
- valued and listened to
- we don't "feel very disconnected from the system"
- p/c won't feel alone

Recommendations:

Development of a coproduction framework that establishes clear expectations for operational coproduction, parameters to measure these, and a mechanism (or several) to capture experience to demonstrate impact would be a significant step to support joint commissioning, service development, and person-centred care.

PACC are developing a draft Coproduction Framework, using the bench model as the method, describing the potential mechanisms, and developing measures for impact and outcomes evaluation. We would recommend this framework be developed collaboratively and adopted across the Shropshire Systems

Some examples of measurables for operational coproduction:

- Do families know how to provide feedback about a service?
- Is it clear how a service respond to feedback from individual families? (commitment to timescale)
- How does a service share the feedback received, and its responses to that feedback with the wider SEND community? (Evidencing family led service development)
- Does a service annually review the outcomes it has delivered for the SEND Community? (using the framework of the SEND Strategy?)

Strategic Engagement:

Summary

Strategic engagement across Shropshire's SEND systems has improved significantly. PACC representation in key workstreams is strong, there have been some gaps, but these are being addressed at pace. The strategic frameworks that exist across the system, however, are currently at odds with each other, while each has their place and are strategically valuable, they can create a sense of separation across the system. Strategically the SEND system is facilitating outward communications and informing other strategic parts of Shropshire (such as through the LDA programme board and ICB) however we are struggling to see how these are feeding into the SEND system in a useful and meaningful way.

Commissioning is not always well informed by participation and coproduction, this is improving with the PACC representation at joint commissioning, LDA board, and some SEND workstreams. However, there are still pockets of activity that do not include coproduction strategically, or where SEND as an entire entity/system is not involved. PACC find we are taken by surprise with many services being commissioned or contracts being awarded without us being made aware through our strategic relationships or direct involvement. There are some good examples of coproduction in commissioning we should highlight:

- Initial SENDIASS contract
- LDA Champions
- Autism in Schools Project
- ND Pathway HLTA model
- Keyworker concept model
- SLCN early intervention support offers

The SEND strategy event should be highlighted has a great opportunity for families and young people to directly shape the SEND strategy. There were opportunities to engage before the

coproduction day as well as ongoing discussion points afterwards to sense check the strategy had translated into the document in a way families felt reflected their contributions. This was a tremendous success, if only the start of a wider piece of work on the subject.

Strategic inclusion of SEND is also challenging in areas where it is not explicitly clear that the SEND community could be impacted (for example mental health services in adults) but this may be due to the strategic disconnect in the system.

PACC can report feeling more welcome and empowered by system partners to participate and support coproduction opportunities in many areas across the system and being given enough information to allow us to communicate with families and establish feedback relevant to the conversation. While we can still identify some significant gaps, there has been a welcome improvement in this area.

Strengths	Weaknesses
Community representation at many key strategic boards and workstreams	Quality assurance of participation and coproduction opportunities not happening and some significant gaps in representation
Improving representation across the SEND sector workstreams	Not funding engagement and coproduction support mechanism well – such as having a dedicated resource to manage and coordinate the opportunities
Improving connectivity and relationship development with stakeholders	Under resourced Local Offer – this means it isn't managed well (whilst improving) and is struggling to be ambitious beyond compliant
For the most part the right conversations happen at strategic level within the local SEND system which includes PCF representatives	Local Offer is not seen as a vehicle to channel ALL communications to families in the SEND community and therefore key participation opportunities are missed. Still some gaps in coproducing strategic decisions in some areas
PCF and key strategic system leads meet regularly to share feedback and discuss opportunities	Very few commissioning opportunities are well informed
Adoption of the Bench Model for SEND Coproduction Methodology in Shropshire	Poor understanding of the experience of coproduction within the SEND sector and PACC's role as a strategic partner by the wider system

Parent Carer Feedback:

In October 2021 PACC held an event exploring what coproduction means to families and how we measure it meaningfully. Below is the feedback they provided on what strategic co-production should involve:

- long-term contracts
- committed resources
- consistency
- evidencing that a change of staff are being supported to learn
- training- induction
- CPD

- Non SEND agendas overlapping
- Strategies- all reflect SEND
- Governance process is clear and followed
- Maximizing potential benefits across systems
- Impact
- Impact risk assessments
 - Benefit realization
 - Impact efficiencies
- Sharing the collective voice
- PACC being in the right rooms
- Hearing the 'seldom heard'
- Services being informed and influenced by strategic vision and p/c experience
- Families aren't fighting
- Service deliveries improve
- Feeling heard
- Families being supported
- Not presenting a fait accomplis
- Ongoing dialogue to demonstrate co-production is actually happening
- Local offer
- Ladder/ bench stages
- Transparency early on
- Feeling trusted
- Having trust
- Strategic leaders saying 'you said, I did'
- Being informed
- Satisfaction: tribunal- mediation- service stats
- Surveys- you said we did
- Staff retention
- Staff knowledge
- Listening to parent- after strategic decisions, asking for feedback
- Reasonable adjustments
- Need to say the positives
- Sure start
- Community services
- Resourcing
 - Early intervention
 - Long-term
 - Incentives

visible in the community

- Strategic boards- representative
- Variety of measures
- Speaking to families 1:1- case studies
- Recognizing the challenge and being honest
- Having access to the right people
- Board people coming to the community
- MDA process- unfair as if missed there is nothing

- Services being transparent about change and impact

Recommendations:

Development of a coproduction framework that establishes clear expectations for strategic coproduction, parameters to measure these, and a mechanism (or several) to capture experience to demonstrate impact would be a significant step to support joint commissioning, service development, and person centred care. This will also describe, enable, and facilitate strategic coproduction across the system in a way that is accessible and feels real to families.

PACC are developing a draft Coproduction Framework, using the bench model as the method, describing the potential mechanisms, and developing measures for impact and outcomes evaluation. We would recommend this framework be developed collaboratively and adopted across the Shropshire Systems

Some examples of measurables for strategic co-production:

- Nothing is a surprise!
- SEND has a voice across the system – representation in key strategic mtgs – Education / Health / Social Care / Housing / Transport / training and staff CPD
- A commitment to meeting timings so that they take account of parent reps caring responsibilities
- ‘How does this work for the SEND Community?’ asked in all meetings – impact statements for SEND?
- Shropshire Local Area Annual SEND Impact report co-produced with PACC and other groups in the SEND Community
- Clear data about the SEND population and level of need is available to parent carer reps and wider SEND community to inform co-production
- Transparency about resources committed to SEND available to parent carer reps and wider SEND community

Next Steps:

PACC intend to use the feedback above to develop a Co-production Tool to support services and organisations to audit and evidence their co-production activity. By helping services and organisations to understand co-production and how to deliver it we hope that Co-production will become embedded throughout the system and at all levels in Shropshire.

We would like to thank all parent carers who have contributed to this work and look forward to continuing this work with them.