**Healthwatch Solihull’s response to the Additional Needs Strategy Consultation**

Healthwatch Solihull welcomes the opportunity to respond to this consultation on Additional Needs Strategy. Our key role is to make sure that patients, the public, service users, and carers are at the heart of service improvement in health and social care. In line with our role, we have focused our comments on:

• Patient and Public Involvement.

• The extent to which the proposed plans address the needs of Solihull citizens, particularly or any child or young person, up to the age of 25 years’ old who lives in Solihull and has a special educational need (SEND) or additional need.

**Patient and Public Involvement**

Healthwatch Solihull are pleased to see that the consultation has been available to respond to for several weeks, giving the public a long time to consider the strategy and respond. We are however disappointed to note that the documents have only been available online, and that we are not aware of any other steps taken to engage the public in this consultation. We also note that the documents have not been offered in any other format, such as easy read, excluding those with language or sensory impairment needs from taking part. There is not a phone number or postal address to allow anyone without digital access to respond. This seems to be the case with the initial survey that was used to create this draft strategy.

We are interested in how many responses the council will have received to this consultation. The survey is not too lengthy, structured over nine questions. The respondent is asked to read this document (and referred to sections of it) and then comment on each area individually and potentially in some detail (if they answered partly/no/not sure to a question). This is why we are disappointed to note that the documents have only been available online or documents have not been offered in any other format.

The responses to this consultation need to be assessed to see if they are representative of citizens in this borough, as well as the demographic of children or young people, up to the age of 25 years’ old who lives in Solihull and has a special educational need (SEND) or additional need, and those not currently choosing to access services. If the responses are not representative, then further engagement work needs to be held on this strategy. This could include targeted engagement for certain populations, and would require materials to be produced that are much easier to read and understand.

A clearer understanding of the next steps for this strategy would help people to understand in more detail how this will actually affect them and the people they know. This could be more detail on the framework for action and the timescales for next stages. An impact assessment would also more clearly outline who will be most affected by any changes, and what needs to be in place to ensure this is done fairly and equitably.

Healthwatch Solihull would like to urge you to not only listen to people’s views but also demonstrate how these views have affected the final strategy. This will ensure that people feel part of the decision-making process not just rubber stamping decisions that may have already been made.

**Proposed Strategy**

Healthwatch Solihull are pleased to see the commitment from the council to improve the current services available. We welcome the council having an ambitious approach to tackling this subject.

However, Healthwatch Solihull would like to see an emphasis on using the insight, experience and involvement of people who use additional services, to drive service design and continuous improvement through the life of this strategy. As such it should be clearly noted who will be responsible for ensuring this feedback is collected and the process for considering the feedback, improving service design and feeding back to the public the changes their feedback has made.

There needs to be a continuous cycle of feedback and engagement with the public now as the strategy moves forward. As stated, this needs to clearly outline the changes made as a result of feedback and to inform how this ambitious strategy directly links to implementation plans. It needs to be made clear what improvements a service user can expect to see when accessing services, as a direct result of this strategy.

The strategy is not clear on the resources it requires to deliver the commitments outlined nor does it take into account the difficulties that might prevent effective implementation of the strategy.

After attending numerous parent groups including North Solihull Additional Needs Support Group, parents have told us that they repeatedly fill out and have meetings with the council but do not feel like these surveys and meetings result in actual changes (see appendix). Generally, Healthwatch Solihull agrees with the vision outlined in the strategy. However, the council needs to consider drawing up implementation plans that are measurable, are clear on who is responsible for carrying out particular actions, are realistic in regards to resources required and clearly state when they will be achieved. The public of Solihull need to be kept informed and engaged as this moves forwards.

Yours Sincerely,

 

Oluwakemi Adebanjo Natalie Travers

Project Officer Healthwatch Solihull Manager

**Appendix**

“Parents have commented on the North Solihull Additional Needs Support Group that sadly the SMBC draft Joint Additional Needs strategy doesn’t resemble a strategy in their views. There are no outcomes, SMART targets and nothing in there that gives families the assurance that ALL views will/have been heard and it been coproduced.
There seems to be a WE and THEM. No unity and no US!

The strategy should be solution focused, detailing how things will change to ensure ALL SEN YP in Solihull get there needs met, regardless of background. In addition. for any strategy to be fit for purpose it MUST be co-produced from onset with as many parent/carers and YP.
The statics show it was less the 1% who actually engaged, which shows the methods SMBC are using to communicate with families in Solihull does not work. We should all be equals on the contribution.

As a support group who has high level of engagement face to face and online, we were not consulted with from the onset or part of the process. Sharing a draft or survey is not coproduction. It is certainly not coproduction when only a minority of voices are heard and represented/involved.  According to SMBC 2019 figures, they have over 6000 SEN YP, from which 40 plus where consulted. Over an 8-week period, just over 100 carers contributed to the inaccessible survey.  We see over 100 carers in one week some week, why are they not contacting us from the onset and other support groups and end users.
If they want true coproduction involve us from onset, invite us to be around the table, not distribute a strategy that the majority have had no involvement in producing or can relate to sadly.
All policies procedures and strategies within SMBC MUST ensure they have carers involvement from onset for them to work.  We have had decades of Strategies and policies being produced which are not fit for purpose! Things must change to ensure equity for all”

From North Solihull Additional Needs Support Group admin