

An evaluation of mental health service user involvement in the re-commissioning of day and vocational services

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Executive summary

During 2007, a consortium of health and social care commissioners in England embarked on a process of modernising the day and vocational services that they commission for people with mental health problems. Their aim was to provide evidence-based services that promoted social inclusion, independence and recovery, reflected national good practice, and represented good value for money.

They established a Development Project with a key principle of service user involvement to inform the planning of new services. A Working Group was set up with eight service user members. They agreed to take an active part in the review process and were supported by an experienced service user consultant. Three members from this group volunteered to take a more active role and joined the Project Steering Group that also included representatives from the commissioners and the external consultants overseeing the review.

The service users' remit included:

- contributing to the design of the review;
- conducting research, visiting existing day/vocational services and carrying out one-to-one interviews with other service users about their views on services;
- contributing to decisions on service redesign in the light of review findings;
- having input into development of service specifications and tender documents for the new service configuration;
- participating in selecting future providers through the tendering process.

The Sainsbury Centre for Mental Health evaluated service user involvement and these were some of the key findings:-

WHAT WORKED WELL

Practical arrangements

- Accessibility of meetings and reimbursement of expenses;
- Meetings inclusive as the norm;
- Minimal use of jargon;
- A one page Working Agreement, signed by all Working Group members, setting out core principles e.g.:
 - the importance of working together;
 - the significance of service user involvement;
 - basic ground rules e.g.
 - mutual respect
 - good listening
 - prompt reimbursement
 - agreement to regular attendance
 - confidentiality
 - equal opportunities
 - complaints processes

Genuine partnership in decision-making

- Working Group members' experience demonstrated that:-
 - service user input was valued
 - their contribution made a difference to the outcomes.
- The Project Steering Group service users being integral to the group decision-making.

Promotion of service user wellbeing

- Most Working Group members felt their involvement had been worthwhile even though:-
 - Each had different initial motivations for taking part;
 - Each knew little about the re-commissioning process;
- They thought they had been listened to;
- They had learned a great deal;
- Some felt it had changed their lives for the better;
- Others were proactively starting a service user-led project.

Learning for the future

- There was evidence of some learning from the process e.g.:-
 - The service user consultant's contract was extended to cover the next phases of the review;
 - Ongoing supervision by a commissioner was introduced for Working Group members.

WHAT WORKED LESS WELL

Information provision

- Project Steering Group members thought they could have been better informed from the outset;
- The user consultant was poorly informed in the early stages;
- There were some resulting errors in how best to involve interested service users.

Commissioners' commitment

- Although the commissioners were perceived to be fundamentally committed to the process, there were some gaps and omissions i.e.:-
 - they did not attend all Steering Group meetings;
 - they neglected provision of potentially valuable external supervision and support to service user members on the Steering Group;
 - they offered insufficient support for the interviewing and tender selection process;
 - the Working Group never became a self-supporting group due to internal tensions and also geographical distances;
 - they offered inadequate information for day centre managers and the wider group of service users about possible changes to the service;
 - the resulting rumours about possible closures led to considerable tension and difficulties for the service user members.

Confidentiality

- There were problems about the need for the Steering Group members to maintain confidentiality about the decision-making process during the lengthy review period;
- Their privileged information set them apart from the wider Working Group;
- The chain of accountability from the Steering Group to the Working Group and from there to the day centre users was disrupted;
- The effect was to isolate some of the service users from their peers.

SUGGESTIONS FOR FUTURE SERVICE USER INVOLVEMENT

When embarking on a re-commissioning of day and vocational – or indeed any - services, a service user involvement strategy should always underpin the process. They are after all the intended beneficiaries of change. Service user groups must be consulted on the detail of such a strategy and review of its efficacy must be an integral aspect of any user involvement plans.

Many of the limitations surrounding the process were ironed out over the course of the project, but could have been avoided altogether if there had been more thorough planning at the front end. Particular aspects that would have made a difference included:-

Greater clarity of purpose, so that service users are well informed what their role will be, what skills they will need, what potential areas of conflict they may face, what support, supervision and training they can expect, and how they will be reimbursed and rewarded.

More attention to detail i.e. background contextual information, including government policy guidance, provided in easy-to-understand language, would help service users and staff in the process of service transformation.

More openness i.e. as far as possible, commissioners should be open with staff about the potential implications of change and their future roles.

Conflict management and resolution i.e. if conflict does arise (whether from staff, other service users or both), commissioners must pay greater attention to its impact on the service users involved in the process, to avoid them becoming a focus for hostility.

None of these criteria are novel or unexpected and research into lay and user involvement in service change, in mental health and other public services, has demonstrated unquestionably that better forward planning reaps rich rewards during and after the process of change.

Section One

INTRODUCTION

In the context of the move from institutionalised to community-based mental health services, day and vocational services play a vital role.

Historically, **day services** emerged to fill the gap left by the closure of the established long-stay asylums that had provided a variety of occupations and activities for their users. They provided a *safe haven* where people using mental health services could meet other people and enjoy social interaction; they offered a range of social and leisure activities, group therapies, sheltered work opportunities; and they were a source of help and advice with day-to-day problems, such as welfare benefits and housing.

In parallel, **vocational services** worked alongside people with disabling mental health problems to facilitate their entry into paid employment. However employment for people with long-term mental health problems was usually located in sheltered work schemes. Little or no support was available to retain, or regain, paid employment in the open market. Research has demonstrated that between 60%–90% of people with mental health problems want to work, yet just 24% are in paid employment. Among those with severe mental health problems, just eight per cent have paid work (SCMH 2008; SEU 2004).

Approximately £153 million was spent by the NHS on this kind of provision for adults of working age with mental health problems in 2006/07 (SCMH 2008).

POLICY CONTEXT

The policy context underpinning the reform of mental health day and vocational services is provided by some key documents. The *National Service Framework for Mental Health* (Department of Health 1999) set out seven standards for modernizing and improving community-based and inpatient treatment for people with mental health problems, and led to the creation of a range of new community-based teams focused on maintaining people in the community. However it did not explicitly address meaningful occupation and activity and work-related interventions within a socially inclusive framework.

The *Choosing Health* white paper (Department of Health 2004) underlined the importance of employment to maintaining health and reducing inequalities in health at population level within a public health framework.

The *Mental Health and Social Exclusion* (SEU 2004) report highlighted the extent to which people with mental health problems are excluded and segregated from mainstream opportunities, and the impact on mental health and wellbeing of such exclusion. It outlined the actions needed to address the barriers to social inclusion. Most notably, the report drew attention both to the costs to the individual with mental health problems and to society in terms of welfare benefits and other support for people unable to access mainstream community facilities and employment because of social prejudice, stigma, current models of service provision, and lack of appropriate specialist support.

In 2006 the Department of Health published guidance on commissioning **day services** for people with mental health problems (Department of Health 2006a). The guidance identified numerous weaknesses within traditional day services provision against the background of the NSF's stated goals for a modernised mental health service e.g. services were largely based around buildings, segregated service users from their broader communities and were not sensitive enough to the diverse needs of different groups. The guidance emphasised an imperative need for services to change so that they could better support service users to access opportunities right across their communities and not just within the mental health community.

Key functions of day services should include providing opportunities for social contact and support; maintaining existing roles, activities and relationships as well as accessing new ones; and having the option of running user-led services. However a range of options must be provided to acknowledge the needs of those who might not want to participate in mainstream community activities.

Guidance on commissioning **vocational services** published by the Department of Health in 2006 (Department of Health 2006b) set out the five key elements of a comprehensive range of services for people with severe mental health problems:-

- clinical employment leads within secondary services
- employment specialists integrated with clinical teams
- public services as exemplar employers
- supported work opportunities, and
- local partnership arrangements between specialist and mainstream providers with appropriate commissioner input.

An important caveat in the guidance noted that people who remain too unwell to obtain paid employment, or who do not want paid employment, should be supported to access mainstream education and voluntary work.

A small minority of mental health trusts have established vocational teams and services within their workforce, and some have provided employment opportunities for people with mental health problems within their own workforce, but the vast majority have not. There is under investment in vocational services in many localities and these investment decisions translate into limited opportunities to support people to find and keep employment. Even where there is investment, little of it is utilised to procure services that are based on proven research evidence. (SCMH 2008)

The 2006 guidance advocated Individual Placement and Support (IPS) as the one model for which there is good research evidence of effectiveness in both placing people in employment and maintaining them in work. The IPS approach involves conducting an assessment of a person's vocational skills and preferences as soon as their mental health permits, and then seeking to place them in appropriate mainstream employment settings where they can develop their skills while being provided with ongoing support. Support is also provided to the employer, via 'reasonable adjustments' under the Disability Discrimination Act 1995, to enable them to provide the necessary conditions and support to the individual to maintain them in the job.

The World Class Commissioning (WCC) programme that commenced in December 2007, aimed predominantly at Primary Care Trusts, has several core competencies that dovetail with this project i.e. engaging with patients and the public and working with community partners. (DH 2007a) A parallel

initiative also from DH, the Commissioning Framework for Health and Wellbeing (DH2007b) set out eight capabilities targeted at health and social care statutory agencies as joint commissioners. These characteristics map against those enshrined within WCC and common to both is the imperative to position the public and users of services at the core of discussions about their design and delivery.

Section Two

THE DAY AND VOCATIONAL SERVICES DEVELOPMENT PROJECT

During 2007 a consortium of health and social care commissioners embarked on a process of modernising the day and vocational services that they commission for people with mental health problems. Their aim was to provide evidence-based day and vocational services that promote social inclusion, independence and recovery, reflect national good practice, as outlined above, and represent good value for money.

A review of local day services had been undertaken in 2004, and updated in 2006. Using the Department of Health national guidance for commissioning vocational and day services (2006a; 2006b), the joint commissioners produced a commissioning model for day and vocational services in the locality, laying out the key functions and service elements that need to be commissioned, and the process by which this should be achieved.

The commissioners wanted to assess the extent to which current day and vocational service provision within the locality was in line with the commissioning model; and whether existing service provision mapped onto the model. They wanted to find ways to build on current strengths in service provision, find ways to improve existing services, and develop new services where necessary.

As a consequence, in 2007 the commissioners established a Day and Vocational Services Development Project whose aims were to:

- update recent reviews of service provision in the locality;
- identify links between services, and pathways in and out of services;
- collate epidemiological, demographic and service use data;
- assess resource allocation in relation to need;
- develop a process for service user and stakeholder participation;
- make recommendations for future service provision based on assessment of need, evidence-based practice and review work;
- develop service specifications for new service configuration;
- undertake an options appraisal process to assess whether existing services could/should be reconfigured to meet new service specifications;
- undertake a tendering process where appropriate to identify new providers of day and vocational services.

An independent research and consultancy company was appointed to facilitate the process.

Mid-way through the service development programme, in March 2008, a joint mental health commissioning strategy was approved. This strategic document clearly described a future vision for day and vocational services.

SERVICE USER INVOLVEMENT: THE COMMISSIONER'S APPROACH

A Working Group (WG) was set up, comprising eight service users, who agreed to take an active part in the review process in response to invitation leaflets and posters distributed to local day centres.

Service users' remit included:

- contributing to the design of the review;
- conducting research, visiting existing day/vocational services and carrying out one-to-one interviews with other service users about their views on services;
- contributing to decisions on service redesign in the light of review findings;
- having input to the development of service specifications and tender documents for the new service configuration;
- participating in selecting future providers through the tendering process.

The external consultant provided WG members a written one-page *Working Agreement* setting out the task, their responsibilities and support structure, and their own responsibilities, such as meeting the service user before visits to services, debriefing afterwards, and paying users' expenses on the day. Service users received this guidance prior to conducting the one to one interviews with fellow day service users, or supporting colleagues. All members signed off this written agreement.

From spring 2007 the WG met monthly and were facilitated by an experienced service user consultant with expertise in re-commissioning of services. She supported the WG members throughout the change programme.

Three members of the WG volunteered to take part in the Steering Group (SG), which also included three representatives from the Commissioners and also from the external consultants. The wider WG continued to act as a reference group for the three SG members at their regular monthly meetings, an approach that had been used elsewhere when services were undergoing re-commissioning (Sainsbury Centre, 2008, pp.90-91).

SERVICE USER INVOLVEMENT: RELEVANCE AND IMPORTANCE

Service user involvement has been a central plank of government policy for some time. The Health and Social Care Act (HMSO 2001) made public involvement and consultation in planning, provision and development of health services the duty of every health authority, PCT and NHS trust.

Research has demonstrated a range of benefits associated with service user involvement:-

For service users and staff

- service users experience greater dignity and self-worth
- improved morale among service users and staff

For the services per se

- better understanding and acceptance of service users' perspectives;
- service improvement resulting from the expert knowledge brought by service users to a partnership with providers and other stakeholders;

- better decision making and better health outcomes;
- increased acceptability of changes;
- more likelihood of new initiatives succeeding;
- better understanding of the context of people's lives in the community;
- helps make service providers more accountable to the communities they serve.

SERVICE USER INVOLVEMENT: LITERATURE REVIEW

There is a growing body of research literature on the topic of public involvement in service design, delivery and monitoring, not only in mental health but also right across public services. This interest reflects the high priority that government and other agencies has placed on citizen contributions to debates about how public funds should be targeted. For example the White Paper *Our health, our care, our say* (DH 2006c) was informed by large citizen stakeholder groups across the country. More recently Lord Darzi's review of the NHS that published *High Quality Care for All* (DH 2008) was developed through a similar process of public engagement.

A number of writers have addressed good practice in service user involvement and ways to evaluate practice. There is no doubt that in many situations, service user involvement has led to changes in service provision, but this is not universal. Some conclusions that can be drawn from the research on involvement are:-

Markers for effective involvement

- Clarity about the aims and limits of involvement as an essential prerequisite to success;
- Transparent support for principles that involvement can improve accountability, empower service users, improve public health, and raise public perceptions of the quality of care that is provided;
- More involvement of front-line staff in managing change successfully;
- A perception of service users as more than consumers focused only on the details of service provision, but as citizens with a broader range of human and democratic rights;
- A core belief in service users as active partners – even if the partnership is unequal;
- Techniques of genuine involvement should be embedded, continuous and varied;
- Service users should be represented directly, collectively or via peer advocates;
- Accept and manage the conflict inherent in the involvement of service users in change;
- Regard mechanisms for involving users and carers as health technologies, with a rigorous approach taken to identifying aims, choosing and implementing an approach to achieve these aims, and monitoring to see if the aims have been achieved.
- All sectors, practitioners and users should plan for models of user involvement which are not tokenistic, undermining or damaging to self-esteem or wellbeing.

Markers for inadequate involvement

- Lack of feedback can have a negative effect on service user motivation, trust and confidence;
- Power relations need continuous attention as they can often be a major cause of difficulties;
- Perceived risk that user involvement will be exploited to give appearance of democratising public services without allowing policy shifts in *undesirable* directions;

- Staff can feel threatened by user involvement – it ‘will work best when front-line staff and other stakeholders are also meaningfully engaged.

Limitations in current assessments of involvement

- More research required on effectiveness of service user involvement in creating change and improvement;
- No comparative studies of users’ involvement in planning mental health services;
- Most evaluation of involvement explores the process rather than the outcomes.

(Simpson and House, 2002;2003; Crawford et al., 2003; Rose et al., 2004; Carr, 2004; Harrison, 2002)

GUIDANCE ON USER INVOLVEMENT

The National Institute for Mental health in England/Care Services Improvement Programme (NIMHE/CSIP) programme *Making a Real Difference* (MARD) developed a set of tools to guide and improve user and carer involvement in NIMHE’s work (MARD 2007a; 2007b). These tools were intended as drivers to raise and evaluate standards of involvement more widely in other organisations.

Good Practice Principles for Involving Mental Health Service Users and Carers MARD (2007a)

Clarity	Inclusiveness
Equality of treatment	Positive attitudes
Good communication	Helpful information
Physical accessibility	Robust procedures + systems
Give support	Provide resources
Meaningful involvement	Consider practical issues

How to Create a Written Involvement Plan (MARD 2007b)

The involvement plan should contain:-

Name of service user/carers	Name of organisational mentor
All relevant contact details	Sign off by both parties
Project name	Dated completed document
Proposed and actual start date of involvement	Proposed and actual date of completion of involvement
Contact for complaint/compliment	Support needs of user/carers
Personal expectations of involvement	Organisational expectations

Methods of systematic monitoring and evaluation of service user involvement, in addition to creating involvement plans, includes auditing those plans, offering ‘end of involvement’ questionnaires and individual testimonial forms, and holding service user and carer network events to share what has been learned.

Service user reimbursement is a critical factor and the report *Reward and Recognition* (Department of Health/CSIP, 2006) sets out principles of good practice for payment and reimbursement for service. These

include a commitment to ensure service users should not be out of pocket for taking part, and that methods of payment and/or reimbursement of expenses should not create unnecessary barriers to involvement.

Section Three

SERVICE USER INVOLVEMENT EVALUATION

The Sainsbury Centre for Mental Health (SCMH) offered to evaluate service users' involvement in the re-commissioning process. The estimated timescale for completion of the re-commissioning process had originally been summer 2008. However due to slippage, the process took an additional year. One set of data collection, due to take place in mid-2008, was abandoned as there was insufficient progress to warrant additional interviews at that stage. The re-commissioned services commenced in July 2009.

METHODS AND DATA COLLECTION

Qualitative data collection was conducted by a service user researcher with particular expertise in evaluating service user involvement. The evaluation focused on following the progress of the eight service users who had volunteered to take an active part in the Working Group (WG). These service users were the main conduit between the re-commissioning process and the wider group of people using the services.

The methods used included:-

- Participant observation at one meeting of the Steering Group (October 2007);
- One-to-one in-depth tape recorded interviews with eight service user members of the WG and the SG (November – December 2007);
- One focus group with active service user members and the service user support consultant (November 2008).
- Ongoing discussions between researcher and service user consultant.

A *Research Bargain* that set out the aims, objectives and methods of the evaluation was given to all local service users who were participating in the research fieldwork. The document also described the timeframe, the confidentiality of all information shared with the researcher and the commitment to feed back and get input at the point of writing up the findings.

The interviews (November–December 2007)

Each of the eight service user members of the WG (including the three SG members) participated in a semi-structured interview in late 2007. A topic guide created a framework within which questions were asked about users' expectations and hopes for their involvement at the start of the process; their reflections to that point in time on various aspects of involvement; how far they felt able to make a full contribution; what had gone well and not well and what they would have liked to happen. An open-ended question at the end of the interview allowed for participants to share anything else about their perceptions of their involvement.

The focus group (November 2008)

Five members of the WG attended the focus group in November 2008, which was also attended by the external service user consultant. The focus group was tape recorded, and the group was asked whether they felt their involvement had made an impact so far, their views on the process, what they hoped to achieve at the next stage, whether they felt sufficiently prepared and supported for this, and if they would like to make any other comments.

The service user consultant

Contact was maintained throughout between the researcher and the service user consultant, who was invited to give a reflective view of the process in May 2009.

Section Four

EXISTING SERVICE PROVISION

The initial review identified a total of thirteen mental health day and vocational services within the locality.

The majority of the services were situated along the southern border of the locality and around the largest towns, with little provision in the north and extreme east of the locality. Service users had very limited choice; and help to participate in ordinary, mainstream social, leisure and education activities was only available in one area near a large town. Many people had to travel long distances to find opportunities for sheltered or supported employment.

The numbers of clients accessing these services totalled some 900, the overwhelming majority of whom were aged over 25 years, and in most services the majority of users were aged over 50. Roughly equal numbers of men and women used the services across the locality as a whole, but some services had a clear preponderance of male users, and others a preponderance of female users. Black and minority ethnic people were under-represented in most of the services; this reflected the low proportion of ethnic groups across the locality.

The service review found that the main function of the majority of the projects was to offer a *safe place*, with opportunities for social contact with other service users, structured activity, support from staff and peers, and basic skills development (daily living, coping, education). Ten services offered support to clients to get involved in mainstream voluntary work. Most said they supported clients to get involved in mainstream social, leisure, sports and cultural activities, but these largely took the form of organised group outings to places of interest and community facilities such as sports venues, cafes, theatre etc, and also the use of other venues for meeting up. Only two of the services actively supported clients individually to access social and leisure activities that any member of the community might use.

Nearly all services offered some form of education and training, but few had made the links with local colleges that might facilitate clients' attending courses on offer to any learner. Most claimed to support transition to employment for their clients, but only two provided specialist employment support services, and only one offered a job retention service. Four offered sheltered employment.

Of the 900 users, 280 had taken part in some kind of voluntary work, but it was not clear whether this was with external agencies or within the day services themselves. Many external placements were in charity shops and voluntary sector agencies; few were in the open labour market.

The preponderance of the available resource (88%) was being spent on day activity and support, social networking and skills development services. Just 10% was disbursed on dedicated specialist employment support, and two per cent on support for individual participation in mainstream activities. Investment was skewed towards one big town in the locality (almost two fifths of available resource) resulting in severe under-investment elsewhere.

Based on these findings, and in consultation with local stakeholders, the external consultants recommended a complete restructuring of day and vocational service provision, and a redeployment of

resources to achieve a more equitable distribution of outlay across the locality. They proposed a rebalance of investment from services providing a *safe place* to those promoting individual participation outside the mental health centre, in mainstream activities.

Three new service models were posited as the basis of future day and vocational services provision, with service points available across the locality:

- **Resource Hubs**, offering opportunities for social contact and support and structured activities and skills development in a safe environment;
- A **Community Links Service** offering help to individuals to participate in ordinary mainstream social, leisure, educational and cultural activities alongside other members of the community;
- A **Vocational Service**, based on the IPS model, offering help to individuals to find and keep jobs.

Based on population and levels of need, six Resource Hubs were proposed, sited across the locality to provide optimum access to the local populations, with the community links workers operating out of these hubs. A single IPS Vocational Service would cover the whole locality, comprising one vocational manager and ten employment specialists (slightly below the minimum recommended by the Department of Health guidance).

The concept of the resource hub was subsequently developed further during the tendering process to encompass clusters of services and attached outreach/access points, rather than single central buildings.

There were also recommendations that existing contracts with most of the day service providers should not be renewed and that five of the resource hubs should be put out to tender and that proposals should be invited from organisations to run a locality-wide vocational service.

Section Five

WHAT THE DATA SAY

The evaluation of the service user involvement took the evidence from the literature on involvement as a starting point against which to map the findings from the various fieldwork methods. Data gathered from the SG meeting, the individual interviews with WG members and the focus group are analysed here against the categories derived from the literature reviewed for this report (see **Section Two**).

FEATURES OF USER INVOLVEMENT IN CHANGE PROCESSES THAT UNDERPIN SUCCESS

ACCESSIBILITY – processes, venues, times, language	CHAMPION – someone in the organization with role of supporting involvement
CHANGE (personal) - Impact on persons involved, positive and otherwise	CHANGE (organizational) –What can be seen to have changed due to involvement?
CLARITY - Clear information	COMMITMENT to the process by organization
COMMUNICATION - Good communication – two way	CONFLICT - Setting of ground rules. Means of addressing conflict in place.
CONTACT - Named contact person for service users	CULTURE - Facilitative culture of organisation
EXPECTATIONS - What staff and service users expect of each other and the process	IMPACT – service user involvement should be meaningful and make a real difference
INDEPENDENCE - independence of service users/user groups involved	INTEGRATION - Involvement integral to process
LEARNING –evaluating and learning from involvement.	PARTNERSHIP – genuine equality and joint working as far as possible
PLANNING - Planned involvement, clear objectives and timeframes	POWER - Recognition of power differentials
REPRESENTATION - Representative structures for service users	RESOURCES - Sufficient resources to support involvement
REWARD - Payment and reimbursement addressed	SKILLS - Skills and expertise needed identified – users and staff
SUPPORT - Sufficient support for service users, awareness of likely stresses they may experience	TRAINING – suitable training available to staff and users

SERVICE USERS' INITIAL EXPECTATIONS OF THE PROCESS

Most of the WG members interviewed had been unsure what to expect from involvement at the outset, although several already had some experience of involvement with, for example, Patients Councils and their own day centre involvement groups. Their motives were quite general: e.g. *to have a say in change* and *to make things better*. One had a clearly radical agenda, hoping there would be opportunities for user-run services:

'I thought that, as well as being a step along the road of sort of really cementing the difference between purchasers and providers in social care, that there would be more scope for service users and experts by experience to run their own services...'

More typically, they had heard there would be changes and wanted to be involved to help steer the transformation and represent other service users' views:

'I wanted to be able to have a say in what changed or at least be involved in that process ... I preferred to be involved rather than just have to put up with the end result.'

'As a service user you might not have control over what happens but you can have your say, and you can try to improve things as much as you can... I see my role as being a representative, not just putting forward my own views.'

CLARITY AND COMMUNICATION

The degree to which there was clarity about the aims, objectives and processes of the service users' involvement varied. The information that service users received came from a variety of sources e.g. via the service user consultant, the external consultants and also the commissioners, who were also available to answer questions. These different informants could result in mixed or incomplete messages.

Service user members of the SG meetings said they were chaired well and they felt like full partners in its deliberations. However, there was a perception that insufficient information had been provided at the outset to enable them to make an informed choice about involvement:

'I think it's important from the beginning to have that information about what they're getting into... then they can make a more informed choice about whether they want to sort of carry on and be involved in it. I would have liked that information from the start.'

SG members also felt that their role and remit had not been explained to them clearly enough at the beginning of the process:

'At the beginning... I just felt very confused as to where I fitted, but I didn't feel in the meetings that I was in any less of an understanding than anybody else at the table, because I think everybody felt quite confused at times... I didn't have a full understanding [of the process] a good three or four months into it, but I started to pick up then and I asked if I could be on the Steering Group and I think from there I picked up information.'

'I know it was explained to us but it's worth doing it in very plain terms at the beginning ... so you feel comfortable with what you're doing because I felt at the beginning, oh, I wonder if I'm going to

cope with this and all the jargon things that you come across and acronyms and things. I was sort of floundering along to start with, but it got easier and easier to get accustomed to it.'

SG members also said there should have been more communication from commissioners about the process, particularly during the periods when not much seemed to be happening. They wanted 'more continuous feedback'. WG members also complained about this lack of response:

'There have been periods where ... our group would have lots of ideas and put them up and then there'd be a sort of silence and we didn't really know what was happening. It hasn't been very good communication.'

Lack of clarity and information also placed SG members in a difficult position. Their peer service users clearly expected them to know more than they sometimes did; because of confidentiality rules they were unable to communicate what they did know to their fellow service users:

'The bit that was difficult was once we'd done the Options Appraisal, right, and the three of us knew what the services, well as it turns out they're all going out for tender now, but we had that information, but we didn't have anyone we could talk to about that outside of that group, because I can't talk to my social worker, who's my care co-ordinator, about it because nobody can know about it, it's all confidential.'

'It's this breakdown in communication which leads to rumours... there's no such thing as a positive rumour in my opinion. There are never positive rumours, they're always negative rumours and they're not helpful.'

ACCESSIBILITY OF MEETINGS AND INFORMATION

SG meetings were seen as accessible in terms of timing and location, and mostly there was a lack of jargon and numerous opportunities to ask questions and raise issues:

'There wasn't jargon spoken because that was put a stop to, if anybody did.'

'I felt comfortable in the meetings. I've felt that if I've wanted to say something people have listened to me.'

However a WG member spoke of difficulty understanding information from the commissioners:

'They tend to talk in jargon ... what does come out from the commissioners is all very difficult to follow really.'

The extended time over which the re-commissioning happened had implications for the coherence of the process. There were long periods when not much happened and service users were not kept adequately informed. This hiatus reignited SG members' doubts about commissioners' commitment to the process.

However by the time of the focus group in November 2008, the process had suddenly been accelerated. The service users felt they were being pushed along, and had insufficient time to prepare for important meetings:

'Things have been plodding on all year and then all of a sudden it feels very rushed, we've been very rushed and the preparation for us to sort of really know what we're doing has been sort of been by the by really.'

Two of the group described their participation in a short-listing meeting for interviewing applicants for new posts:

“... it felt a bit rushed, that meeting, so you would find yourself agreeing, but without actually fully having an opportunity to grasp the concept of what we were agreeing to.”

Clearly these SG members did not feel they were able to make fully informed decisions about these very important issues.

Issues of power and control

Issues of power and control were acknowledged and the situation made explicit from the start. For example, the SG meeting was informed that senior management would have final approval for any decisions made. In the event they never used any power of veto to overrule service user views.

One SG member reported with great satisfaction that the decisions made in the SG were put into practice, and that senior management did not veto them:

‘What we agreed at the last [SG] meeting I went to was actually what has been agreed in principle now, full-stop.’

REPRESENTATION

In the interviews, the WG members, and especially those on the SG, expressed a strong sense of responsibility for consulting and informing fellow service users in the day services and work projects. They clearly understood what their role was as *representative*:

‘I’m there as a user not just to give my opinion but to give the opinions of those others not present, to try and drive home the importance of user involvement.’

Some were assiduously attending meetings to report back to fellow service users and get their views to feed back to the SG:

‘In the women’s group we’ve spent perhaps two hours discussing specifically what service improvements they’d like and I typed up the notes and that and sent them into the external consultants, so I’ve done that twice. And lots of ideas came out of it, very good ideas.’

MANAGING CONFIDENTIALITY

There was an evident tension for those service users on the SG, who were privy to confidential information about the future of particular services. They were not at liberty to share this intelligence with either their WG colleagues or their fellow day service users. Their ability to act as representatives for other service users became very difficult, and for some it became impossible. They felt unable to continue to use day services because of the behaviour of some staff and other service users:

‘Unfortunately, [my day centre] is one of the places where there is lots of suspicion and uncertainty... So I started to be more open... I realise that you’ve got to be proactive, so I’ve been putting the minutes of the Working Group meetings on the notice board so everyone knows where we stand and what’s being said.’

‘I don’t see many people from the day service now. I don’t go [since problems with staff]... A few times it’s been difficult because I have a couple of close friends from the day centre and it’s been

quite difficult because I know what's going to happen and they don't. Although I'm not asked, it just feels like I know something and it's not out in the open. I'll be glad when everything is out in the open.'

ORGANISATIONAL CULTURE AND ISSUES OF CONFLICT

The commissioners did not anticipate the potential for conflict with other service users and day services staff and this omission led to considerable difficulties and distress for WG and SG members. Several interviewees mentioned the tensions that arose while decisions were being made about the future configuration of the day services, and the jobs of the staff working in them. There was a perception that staff did not all behave professionally:

'One of the members of staff really whipped up such a level of anxiety among the service users prior to the survey being done... it seemed to be viewed that I was there with some hidden agenda to get the place shut and I was literally torn to pieces, you know, it was horrendous, absolutely horrendous...'

'At the moment tensions are high, especially with all the meetings going on, and they have arguments between the service users – things are getting talked about in small groups.'

In one case the service user stopped attending the day service:

'I felt very much like I was being frozen out. It just felt that I'd served my purpose and I was no longer wanted and it started to feel very uncomfortable because I think the staff were aware I knew more than what I was able to talk about... It's made it very, very uncomfortable, to the point that I no longer go.'

In another the service user had been discharged from the day service by the manager and believed this was because they were involved in the review process:

'I think I was actually discharged from the [day centre] when word got back there that I was actually involved in this... It could have been very, very bad for my recovery, especially after all the money that the council have spent on me in rehab in London and got me well.'

WG members described feeling like 'piggy-in-the-middle' having to deal with negative rumours going around among people at the day centre and trying to give a more positive view of what was happening:

'It appears to me that amongst the service user community the commissioning process is a very negative thing and it's very difficult for a lot of people to see the positive side and the possible positive outcomes.'

By the time of the focus group in November 2008, there was still a high level of anxiety and anger among service users generally towards the proposed changes. The commissioners were said to be experiencing hostility at meetings with local service users. One person suggested the commissioners could have taken a more active role in keeping staff and users informed:

'I felt the commissioners were a little bit shy about going to services initially... we'd already agreed that they would go round and do one round of visits, and then it was dropped [and I had to] kick up a fuss'

and then it was reintroduced again, and if they'd actually done that at three monthly intervals it may have helped.'

Others felt this reaction was inevitable, given what was being proposed:

'Some people would feel threatened and worried by it no matter what information they get, because this is sort of changing people's livelihoods and their lifestyle, so in one sense it doesn't matter how much communication you give, it's how that person sort of receives that information and how that's fed back and if it's received with anxiety, it's fed back with anxiety, and that's what you're creating.'

One person raised an important point about the overall organisational culture within the day services: staff should have been offered their own support service, so that they could have been helped to behave more professionally. As the person pointed out:

'One thing I feel quite strongly about is that that kind of anxiety could have been contained and it could have been lessened had it been managed in a more professional, sensitive, appropriate way, and that is all about personalities.'

The potential for conflicts of interest in the day service assessment process itself were, however, dealt with by the decision that SG service users would not score those they personally used, although they could give their views.

In the interviews, the WG members (who did review the services they themselves used) agreed that it had led to problems:

'I mean they did say at the beginning - about in other areas - that people didn't [review] their own places, but ... we all felt that there was no issue around doing it because it didn't feel that there should have been.'

SUPPORT AND TRAINING

Service users did not find the responsibility of being part of the day services review process easy. One SG member talked about finding it hard to sleep because of the stress.

Members were also unable to form an ongoing mutual support group outside meetings because they were scattered across the area and had no other opportunities to meet:

'I don't have a lot of contact with any other members of the group.'

However, as some of them travelled part of the way back from meetings together, there were opportunities to talk to each other, indicating how valuable these informal debriefing sessions were:

'... invariably on the train after coming back from meetings, certainly the three of us service users... we would always travel back part way together and we'd always have a natter about what was going on in the meeting and how we'd felt and that.'

The service user consultant was highly valued by WG and SG members, and seen as crucial in keeping the WG informed, supported and heard:

'I found that she has been really supportive all the way through and has made everything as easy as possible for all of us. She has been superb in helping to make sure that everyone in a meeting has an equal voice.'

'I think she's done a good job of facilitating our group and anything material that's come up I think she's dealt with, she hasn't bucked anything, she's kept everybody informed on what she's doing. I think she's done a good job with our group.'

Training was also mostly provided by the external service user consultant, including an awareness-raising session early on in the process. This training and support was valued and appreciated and service users felt they could take any issue or concern to her and she would do her best to resolve issues.

The WG also received training in Options Appraisal from the Sainsbury Centre, which was appreciated:

'We had training on the options appraisal, which was very good... yes, I did enjoy that, I found that very interesting, filling in some of the gaps, even just making sense of some of the letters that they use when they shorten things and give you a load of capital letters.'

However there were gaps in the training. Some felt there should have been training in contextual issues, and also in interviewing skills for those involved in reviewing the services:

'Maybe there should be some training to ... point out that the commissioning process is a sort of further refinement of the difference between the purchasing and the providing side and that by re-commissioning day services we expect there to be opportunities for service users to give legitimacy to some bodies that are applying to tender the services and that that will be a good thing and the service users can say what they want.'

'I think training at the outset around the whole business of interviewing would have been quite useful.'

'I think it would have been useful to have some kind of training before we did the questionnaires.'

Training in short listing and interviewing staff would also have been helpful, as they were involved in these subsequently.

The WG organised its own one-day event, to look at day service alternatives more widely – for example, service user-led services and social enterprises. It was clear that they found this useful and inspiring:

'We had a meeting which we put together ... we tried to just have something completely different, not on the sort of formula that you would expect from an event organised by a commissioner ... And it showed us that you can have social firms, social enterprises, community interest companies, you can have all these forms of service delivery, and people can just spontaneously start up their own group, as with Mental Fight Club, that can become a sustainable enterprise, and that's the way that we wanted to sort of feed into the commission process.'

Another conference organised by the commissioners was affected by staff sickness and, again, poor communication:

'That was a strange event because we were all looking forward to it but we weren't sure if it was going to happen, there was a sort of lack of communication between the commissioner and us there'

and who was doing what. When it actually happened it was better than we'd all expected, things had obviously gone on behind the scenes and hand outs to people and presentations.'

The SG members had a particular need for support, given their greater responsibilities and the confidential discussions in which they were involved. The focus group in November 2008 was asked to put forward ideas as to how various difficulties could have been avoided. Suggestions included individual supervision for the SG users, which by this point in time one of the commissioners had started providing. The service users judged this should have been happening from the start and would have added immense value to the process.

REWARD AND RECOGNITION

Although all the service users were paid expenses for attending meetings, no arrangements had been made at the outset to pay SG service users for their extra time and input. One member took up this issue and kept pushing until an agreement was reached, but clearly felt uncomfortable about being placed in this position:

'I did create a huge fuss early on... I felt that if they wanted full committed involvement on the Steering Group side where there was an awful lot more work plus the surveys to do, I was appalled absolutely no allowance had been made for reimbursement, proper reimbursement, proper payment for our time and I was like a dog with a bone... It took probably six months to get anywhere and ... that was the bit that I didn't like because I felt I was the one that was constantly bleating on about it and it made me feel as if I was being quite mercenary, when I wasn't.... The important bit to me was that they were saying they wanted proper user involvement, but we were just expected to ... have nothing better to do with our time.'

However, once this was sorted out, the service users expressed great satisfaction that they were being paid for their involvement. This represented for them an external validation of their input:

'I'd had comments from my family about, oh, people are taking advantage of you doing all this work and not getting any money, you know, you could be doing a job and getting paid for it, so it shut them up! It helps to make you feel valued as well if you put hours of thought into it and then you get paid, it's just, people are taking you seriously.'

'It's nice, because for 15 years I haven't been paid for anything and oh, it's so nice to go along and say, oh, I've earned [it] myself, you know, and that makes you feel valued. Oh! I can have a packet of fags!'

One person did not claim any payment. They felt it was not worth risking losing their benefits for such a short-term piece of work:

'[Payment] would be nice, if I knew it was going to be a long process, a long-lasting arrangement that could replace benefits or something, then I would be OK with that, but I don't think it is and it would just be a real complication with my benefits.'

The external service user consultant also reported some difficulties over payments for SG members participating in the tender selection process: they were only paid the basic minimum wage, and both she

and the WG had to lobby quite hard to get this issue addressed. So resourcing the service user involvement continued to be an issue throughout the process.

FEELING VALUED AND RESPECTED

It was notable that most of the WG did feel their input was valued and respected by the commissioners:

'I feel that we have been listened to, I do feel that we've been respected and our feelings have been respected.'

'It's nice to feel useful and I do feel that what we're doing is being listened to so that's quite satisfying to help in that way.'

And, as mentioned previously, being paid for their time and work added to this sense that their input was valued and respected.

One person in the focus group did feel that latterly his participation had become tokenistic, perhaps because of the speeding up of the process at the later stages:

'I felt a little bit surplus to requirements. It was like I was there as a matter of course and that any input wasn't really of any value.'

GENUINE PARTNERSHIP IN THE PROCESS

Despite some reservations, SG members did feel they were genuine partners in the process – and were determined not to be treated as token participants:

'I think for me [I feel] very involved and [it's] certainly not tokenism... I think even in the bigger group no one there was really prepared to be a token.'

A WG member commented:

'I've got a bit of a gob to be honest, you know. I stand up and say what I think. I was involved with getting questionnaire done, I was involved in the focus groups, and I think they actually did listen because when they came out with the primary objectives of what people would like, they came up with face to face, peer to peer support.'

One person raised doubts about whether the outcomes of the process were pre-ordained by the commissioners and that the service user involvement merely served to legitimise a model that had already been decided:

'I could be being unfair here, but ... it looks like it would be hard for any day service to score well, based on a model they have only just come up with. I just do wonder sometimes whether this was always going to be the outcome anyway. I just wonder whether they just had to go through that process anyway, you know, get service users involved.'

IMPACT OF INVOLVEMENT – PERSONAL

In the interviews, some WG members said they had derived enormous benefits from involvement in the review – that their self-confidence had increased, in spite of – or even because of – the problems and

conflicts. As a consequence they had felt able to take on new challenges, such as giving presentations, volunteer work, or developing new groups:

'From feeling at one point I wish I'd never touched it with a bargepole, having persevered, I'm really glad I did.'

'I no longer attend the [day centre] and me and [another WG member] have started up a service user group, so it's had quite an impact on me really... I was told I'd never go to work again by the day centre and the sad thing is, for a long time I believed that, but I no longer believe that, and that's part of doing this process, it's sort of rekindled that desire to work in me, which has been dampened down because I'd been at the day centre for so long. So I've been very fortunate to be involved in it and I feel very heartened by the fact that people care, you know, that mental health services are working to include people and are wanting to fulfil people, so it's been really, really good for me.'

'I was amazed I was actually able to give a presentation at this conference thing... always, my whole life been terrified of that sort of thing since a child.'

But WG and SG members also talked in the interviews and the focus group of their concerns that they should have been better prepared for the possible repercussions on their own lives – the possibility that they might end up excluded from their day service and lose valued friends.

'I feel very strongly that if people are being asked to put themselves sort of on the line like that, then there needs to be a lot of honesty about the pitfalls and what could happen.'

On the positive, I've kind of grown through that and done other things, so I can stand this side of the year and think that yes, it has been painful but it has been worthwhile for me on a personal level.'

For the three service users on the SG, these difficulties were particularly acute, and served to isolate them from peers, friends, and the day services they used:

'It was very difficult having the information that you couldn't share with anyone and that's sort of like part of the process, but it's those kind of things that I think are very important for people to understand... that this may happen, this is a pitfall and are you really prepared, because [the isolation] can be very, very damaging for people.'

One SG member felt that service users involved in these kinds of reviews should have someone to turn to for personal support from day one.

IMPACT OF INVOLVEMENT – SERVICES

SG and WG service users felt that their involvement had made a positive difference to future services for all users in the locality, because they had spoken up for particular changes:

'There's going to be a focus on one to one counselling as opposed to the vocational... and the idea of a central hub for the services where there'll be a safe place for people to go when they're very poorly, but also it will branch out and offer you groups to go to... so for people who are a bit more well then they don't have to sit there having cups of tea, they can ... access other services like the [work group] when they're ready... I don't know if it's come from us, but it all seems the same way of thinking.'

A WG member pointed out that peer support, peer support training and well-being recovery action planning (WRAP) would be part of the new service specification, because of their input:

'The commissioners didn't really know about it, so that has been something that I've been able to influence. I think we all have some kind of inputting influence throughout the process... I do feel that we have been listened to and we have been heard.'

THE EVALUATION PROCESS

One WG member was annoyed that the second set of evaluation interviews had not happened. She thought interviews with WG and SG members should have been carried out at more frequent intervals to give a better reflection of their experiences of the involvement process. This data collection was especially important if the learning was to be made available to other areas conducting similar day service reviews so they could avoid making similar mistakes:

'If the evaluation is going to be used to inform other counties it should convey a real sense of what it's been like for people who have been involved throughout the process. I feel that this kind of evaluation is extremely important because it is your life and your quality of life and your support system and your friends, and that is a very high cost to be involved in a project.'

CHANGE MANAGEMENT

A number of other relevant issues emerged from the interviews – in particular, with respect to the continued roll-out of the review recommendations, and the need for continued service user involvement in the change management process. The service users wanted there to be a clear requirement on prospective service providers to ensure user involvement:

'We're hoping that there will be at least a paragraph in the service specification contract that emanates from our group.'

They were also aware that the next stage, of implementation was possibly the most important part of the process, and argued that service users had to be involved in this aspect too:

'This is where our involvement I think, really comes on board... over the next nine months now really, because that what will determine what a services will actually look like on the ground, at the end of the day.'

'To try and basically say to people don't be scared, it's new and it's different but the thing is at the end of the day everything's got to move on otherwise we'd still be in asylums, bloomin' Bedlam in London.'

'... not just setting something up but monitoring its progress and perusing it as it goes. So I think we should stay together as a group to continue monitoring the service and improving the service as it develops.'

But more support would need to be provided:

'I think once we do start getting more involved, there's got to be someone that is [backing us] because the people who are comfortable [in day centres] see us as a threat...'

There remained some residual fears that good services might be lost and that the review was, in truth, really about cutting services and pushing service users towards employment:

'... they have some really good services, these places ... and it does make you think whether it's actually a way of cutting down on the services or something.'

There would always be a need for a *safe space*, if only for a limited period of time:

'I think there will be a need of a resource where yes, if you become ill, yes, you can go here, but I really think that it should be for a certain amount of time...'

'A lot of the clients ... would find it very, very difficult indeed to go back to any kind of outside employment and ...the [centre] gives them a feeling of being important, being valued, and being part of something, so it's a very important service.'

At the point of the focus group meeting in November 2008, there was concern that the service user involvement process had already petered out, because of lack of clarity and communication from the commissioners (subsequently resolved) about how much longer the external service user consultant was going to be available:

'There is a fixed contract, with hardly any hours left... so it could all just suddenly fizzle out as far as we know, which is bad, there's no planning, they've been extending deadlines when they're doing things, without extending our involvement.'

But there was also a strong sense of optimism about the future and the shape of the new day services. The focus group participants discussed their recent involvement in staff recruitment, development and training, and clearly welcomed the new role of the assessors, whose remit is to assess every client individually to find out what kind of support and treatment would help them best. Some of the group had been involved in the appointment process and were impressed with the applicants:

'That's really actually a failure in the present services, because they're quite blanket in their approach and they're not on a one to one basis, so you've got a service that can't deal with alcohol and drug abuse because they're not set up for it anyway, so this, the new kind of services, would be more responsive to individual needs.'

Here too, ideas were suggested for developing the role in line with the original aims of the review:

'It would be nice if they assessed clients who don't use services as well, one of the big things we were trying to achieve was to reach out to people who don't use services at the moment, so maybe that's another issue to be looked at. Vast efforts were made to try and reach those people. I think it was only partially successful.'

THE SERVICE USER CONSULTANT'S REFLECTIONS

The service user consultant felt that there was inadequate planning of service user involvement at the outset and that there was insufficient information in the early stages of the process by both the commissioners and the external consultants. This gap led to mistakes being made, including service users being asked to survey people at their own day service – in itself probably not a good idea – and also their being given too little preparation. As was apparent from the WG feedback, one person had a very bad experience of this process.

Subsequent to the evaluation, the service user consultant has had allocated days increased bit by bit, as there was recognition of the continuing need for an independent facilitator for the WG. But the fact that not enough days were originally allocated for independent facilitation caused uncertainty for the group. Additionally, the tensions in the process had caused rifts in the group.

'The position of some service users on the group has been very difficult in respect to other service users. Some have been seen as "siding with the professionals", and this has caused concern and upset to one or two people. It is critical that as much information is given to service users in the first place and communication is good... Service users undertaking this kind of role need to have in place lots of support if they feel that they need it.'

As a consequence there were difficulties in keeping people on the WG and some left the group. One left because she got a job, which was a positive reason. In the end, five or six people stayed with the process, which turned out to be much longer than expected.

Section Six

DISCUSSION

The process of re-commissioning day and vocational services was a lengthy and complex one that required commitment, visionary thinking, courage to change and persistence to see the job through to the end. The health and social care commissioners that initiated the change process were committed to the involvement of service users, from a theoretical and ethical perspective. And the service users who agreed to participate in reviewing and shaping transformed services were keen to be involved in order to effect positive change for themselves and their peers. But there was an immense learning curve for all concerned.

The nature of the exercise – involving service users in the decision-making processes of change to service configuration – might presuppose that it was only they who required a new set of skills and competencies to operate in the world of review meetings and service appraisals. However the commissioners also required new skills in how best to involve people for whom the service change was more than a management exercise. Both sides participated in a journey that has not yet finished, that made use of all their skills and competencies and that, in an iterative manner, changed with each further stage of development.

The particular approach to involvement used in this process was akin to a three-tier, parliamentary-type model: three service users were involved directly in decision-making on the Steering Group (SG); another five provided accountability and support monthly on the Working Group (WG); and those people using day services acted as the constituency. This wider group participated in discussions about service change by talking to a WG member - all of whom were still attending services - who in turn fed their views back to the WG.

The evaluation revealed that there was insufficient recognition by commissioners of the risk service users still utilising day services were taking by getting involved. Attitudes of staff and other service users to impending changes were sometimes challenging, making it uncomfortable – and in some cases impossible - for WG members to continue to use services.

The three users on the SG were in an even more compromised situation due to their access to privileged information about potential changes and the requirement that they keep that information confidential. Once the process was under way, confidentiality had to be maintained for a considerable length of time, especially due to slippage in the timeframe for completion of the review.

As a consequence, SG members were set apart from the rest of the WG. Not only their support system, but also the chain of accountability from SG to WG and beyond to the day centre users, was disrupted. Bad feeling, rumour and suspicion grew over the many months of the review and undermined relationships between all service users. Those directly involved in the re-commissioning process became isolated from some of their peers.

The service user consultant, another support mechanism for those on the SG, was also not in receipt of confidential information, with the result that appropriate levels of informed support and supervision were reduced.

Over the course of the re-commissioning process, various practical arrangements worked well after initial teething troubles. For example reimbursement of expenses was handled efficiently; but WG members were only offered payment for their time after a service user member of the group raised this as a possibility. Implementation of this arrangement meant that the service users felt valued and respected for their input, whether or not they were able to claim the payment. But its realisation had put the SG member who had raised the issue in a difficult position; they were concerned that they would be seen as 'mercenary'.

Communication was another aspect of involvement that was not always as good as it could have been, but improved over time. For instance SG members thought they could have been better informed from the outset. Lack of appropriate and relevant information impeded their fully understanding what was going on and what their roles were. The external service user consultant also noted the weak communication, in particular in the early stages of the process. Some of the perceived mistakes in service user involvement, such as service users interviewing people at their own day centres, were attributed to the gaps in communication and information sharing.

There was demonstrable proof of genuine partnership in decision-making and service user input was valued and seemed to make a difference to the outcomes. The SG members felt well integrated into the review group and its workings. For example even though the commissioners reserved the right to overrule any SG decisions, in practice this did not happen. The broader group of WG members were pleased to see their ideas having an influence and appearing in commissioning documents and presentations.

A key role of the WG members, including the three on the SG, was to represent their peers' views within the re-commissioning discussions and debates; in other words to act as a conduit between the statutory agencies and the people who would be affected by service change. However the very process of being involved at the decision-making level changed those service users, in particular those privy to confidential information. Their access to the complete picture resulted in their developing a different view of the process.

For instance, they were given assurances in meetings that nobody would be left without a service, and that the process was about increasing choice, responsiveness to individual needs, making services more accessible to a wider group of people, and reducing dependency. Even those who had joined the WG with the aim of saving their particular service tempered their view over time. This perception shift is a well-known phenomenon, when health consumers transform into *consumerists*, i.e. more knowledgeable and informed and thus no longer entirely a layperson (Nettleton 2006).

However, any confidence that SG members had for the future of services could not easily be conveyed to the whole constituency of service users, particularly when so much knowledge was confidential. More concerted and well thought through procedures by the commissioners, to manage this process, could have allayed unfounded fears. WG members could have been much more effective in reassuring their fellow day service users if they had been able to share more information with them.

Support at multiple levels was an issue throughout the process. The WG was well supported, trained and informed by the service user consultant; and training from the Sainsbury Centre on Options Appraisal added value. Two events, one mainly organised by the WG members themselves, gave the group opportunities to develop their presentation skills and accrue knowledge such as how new day and vocational services were being organised in other areas.

But additional support such as supervision and discrete training e.g. during the interviewing and the tender selection process, would have been extremely helpful. By the time of the focus group in November 2008, the WG members were receiving supervision from a commissioner. Although this input was much appreciated, earlier availability would have made the process much easier for some people.

Service users' hopes, expectations and ongoing wishes for involvement were a salient theme in the evaluation. Those who participated on the WG had varying initial motivations for involvement. For some it was to preserve existing services; others wanted to act as representatives for people in their service in a trade union-type role; a minority had an understanding that sweeping changes were about to happen and wanted to help steer this process to a positive outcome.

They perceived a key aspect of their role as helping to inform and reassure the larger body of day service users that they would not be left without a service, that services could change for the better and that the new services would allow more individual choice and flexibility. Some members were apprehensive about the impact of this process, including potential loss of popular services and buildings that were familiar to their users. Others thought that the existing configuration of day services had created an unhealthy dependency for their users, even though they described as very helpful and worthwhile some of the current work projects.

Even though most of the service users did not know a lot about the process they had entered into, in retrospect most felt it had been worthwhile. They felt they had been able to play a meaningful role in the re-commissioning of services and that they had been listened to and also learned a great deal. For example, the group had been involved in the process of selecting a new team of assessors – a new role developed to meet and assess each day service user's needs individually. WG members were positive about this process.

Some even felt it had changed their lives for the better and two were in the process of setting up a service user-led project to bid for funding under the new commissioning process. And members of the WG have undertaken their own evaluation of their involvement, facilitated by the external service user consultant.

Conclusion

Service user involvement in processes such as re-commissioning of vital support services is more than a cosmetic exercise. Its value lies in utilising and maximising the expertise of people who use services to impact on the nature of services themselves. A SCIE review set out the core ingredients necessary to ensure that service user involvement has the desired effect (Carr 2004).

Be clear about aims + scope of participation at outset of process	Identify and engage any existing local or regional user initiatives
Communicate to potential participants in appropriate, accessible ways	Ensure there is political will and organisational commitment to change
Allocate sufficient resources to actively address service user priorities	Be responsive to the perspectives, priorities, needs and aims of local service users
Dare to think beyond traditional service categories or managerial service priorities	Be aware of the power relations between service users and professionals
Consider ways to prevent or creatively manage any conflict together with the participants	Remain aware of the need to share information and decision-making power
Value the knowledge and expertise of people who use services	Ensure expertise can be communicated in ways that service users find comfortable
Create diverse, flexible, continuous participation strategies integrated with organisational decision-making structures	Strategies should be appropriate, planned with service users and inclusive of new ways of working and communicating
Be flexible and rethink historical methods of involvement	Monitor and evaluate the impact of participation as well as the process
Plan with participants how feedback will be communicated to them and how to respond further if required	Address any issues of representation with service users
Think creatively and consult on different ways to involve people who may otherwise be marginalised from the process	Ensure that all staff understand the principles and practice of service user participation and are empowered by organisational structures, processes and management strategies to make it a success.

This re-commissioning of day and vocational services mapped quite well against many, but not all, of these criteria. One of the key areas of omission was anticipating and managing conflict between service users and also between them and some staff. As one of the service users had themselves noted, much improved support systems for staff would have benefited the process.

Better ongoing communication throughout the extended review process would have gone some way to alleviate fears amongst the greater body of day service users. And better supervision of day service centre staff, along with a comprehensive staff communication strategy, could have enabled staff to be advocates for change. At the very least, staff guidance on how to continue to deliver services at a time of uncertainty and in ways that did not allow their own fears to influence the views of their users, would have been of immense benefit.

Postscript

Early in January 2009 contracts for a new service model were awarded to three third sector organisations to operate resource hubs and community links in the eastern, central and western ends of the locality; and to a fourth third sector agency to deliver vocational services across the entire locality.

There was a six month changeover period that allowed for incoming and existing service providers to manage the transition. Two review and support officers were recruited to meet with individual service users in the day centres and to ascertain what their hopes and expectations were from the new services.

A transition board was established that brought together providers, commissioners and service users; a transitional plan for each service was produced and monitored; and the new providers had a programme of meetings with service users in the run-up to the new services becoming operational.

The Steering Group has continued to meet and the service users, facilitated by the external consultant, have conducted their own evaluation of their involvement in the process of change. Trained Peer Support Specialists were engaged by the social care commissioners to work to support users of existing services during the change.

The service user consultant has also carried out an additional piece of work to link with service users who had been involved in the day service re-commissioning, and a wider group of service users, to produce some standards for user involvement in commissioning. These agreed standards will underpin user involvement in all future commissioning projects, rather than having to be re-invented every time that user involvement is required.

The re-commissioned day and vocational services became operational on 1 July 2009. The staff from the previous providers of services have been transferred across to new services under TUPE arrangements. The SG service user members sit on a transition board that meets monthly to oversee the first period of services delivered in a new way.

The first issue of a *Day & Vocational Services News Update*, which describes the new services and their providers, has been distributed. And there are plans for a Standing committee of service users as part of the ongoing review of how the new services are performing. Its first meeting in late July 2009 was facilitated by the external service user consultant and thereafter by a support worker from the commissioners. The intention is for the support group to evolve into being user-run.

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